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2020 Emergency Medicine Track
Total AAPA Category 1 CME Credits: 33.75
Total AAPA Category 1 Self-Assessment CME Credits: 1.5

2020 Clinical Update in Heart Failure

AAPA Category 1 CME: 1.25

Description: Heart failure is a common and complex clinical syndrome with a rising prevalence affecting more than 5 million Americans with >650,000 people diagnosed with new-onset heart failure annually. The cost of heart failure care in the United States is more than \$30 billion a year, and there are more than 1 million patients hospitalized annually for heart failure in the United States. Data from clinical trials and other evidence-based literature around heart failure care expand at a rate so rapidly that many cardiology professional societies are forced to revise and provide a focused update to published clinical practice guidelines on the management of patients with heart failure. This session provides an evidence-based update on important studies published recently that either confirm or change the practices of clinicians in order to provide optimal management for patients with heart failure. This session is case-based with challenging questions/answers utilizing audience response.

Learning Objectives:

At the end of this session, the participant should be able to:

- Incorporate into clinical practice recently published literature evidence on new heart failure therapies and guidelines to provide optimal management
- Appraise precipitating etiologies of heart failure including causes for hospitalization and readmission for heart failure
- Compare prognostic importance and clinical relevance for certain cardiac biomarkers in patients with both acute and chronic heart failure

Advanced Point-of-Care Ultrasound


AAPA Category 1 CME: 1.25

Description: This case-based session provides a detailed discussion regarding the clinical utility of diagnostic point-of-care ultrasound (POCUS) in the setting of two common critical illnesses, undifferentiated hypotension and sepsis. Organ systems is reviewed, and new organ systems, including soft tissue and focused renal ultrasound, is discussed. Additionally, integration of multiple organ system examinations to elevate care of the critically ill patient is discussed. Moreover, an in-depth look at the current literature pertaining to use of diagnostic POCUS, while contrasting it with current standard of care, is highlighted. The session covers the positive impact POCUS can have on evaluation and treatment of common, life-threatening medical illnesses. This session is most applicable to PAs familiar with POCUS who evaluate and treat acutely ill patients.

Learning Objectives:

At the end of this session, the participant should be able to:

- Summarize scope and indications for Point-of-Care Ultrasound (POCUS) of the heart, lungs, kidneys and soft tissues

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- Interpret POCUS images of the heart, lungs, kidneys and soft tissues, in the setting of acute, critical illness
 - Contrast evidence for standard of care with POCUS
 - Discuss the effect POCUS has on diagnostic evaluation and treatment of acute, critical illness
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Arterial Blood Gas (ABG) Interpretation

AAPA Category 1 CME: 1

Description: The interpretation of arterial blood gases (ABG) frequently causes anxiety and confusion among many clinicians. Providers get bogged down trying to figure out how something metabolic is somehow compensating for something respiratory and miss an obvious disorder. A systematic approach for analyzing ABGs is crucial for the practicing PA. This session is not a biochemistry lesson but rather a practical look at blood gas interpretation in the clinical setting.

Learning Objectives:

At the end of this session, the participant should be able to:

- Develop a systematic approach to arterial blood gas (ABG) interpretation
 - Recognize primary metabolic and respiratory disorders
 - Use formulas to determine the presence of secondary disorders
 - Calculate and apply the Alveolar-arterial gradient
-

Assessing Acute Abdominal Pain: A Practical Review


AAPA Category 1 CME: 1

Description: The evaluation and treatment of acute abdominal pain requires a broad knowledge of many different GI and non-GI illnesses. It is extremely important to make a correct diagnosis as quickly as possible. There can occasionally be confusion in this process, especially when testing does not correlate with suspected findings. This interactive practical session reviews the typical and atypical GI presentations of pain and non-GI sources of pain. The session includes several case discussions. At the conclusion of this session, participants will have a virtual clinical toolbox to help in the diagnosis and management of acute abdominal pain.

Learning Objectives:

At the end of this session, the participant should be able to:

- Recognize that the patient's description of severity of abdominal pain does NOT distinguish Irritable Bowel Syndrome from surgical emergencies
- Discover how 'Alarm Symptoms' are important in clinical practice
- Define the appropriate evaluation and treatment for diverticulitis

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- Appropriately select U/S, MRCP, HIDA and ERCP when evaluating biliary tract disease
 - Recognize that abdominal pain in women may arise from cardiac illness
-

Asthma Update

AAPA Category 1 CME: 1.25

Description: The 2019 and 2020 GINA Asthma Guidelines change not only the definition of asthma but the way we are to treat asthma. This session explores these guidelines and how they relate to primary and urgent care. A plan is developed for the treatment of the asthma patient along with a plan for treating the exacerbations that are common to patients with asthma. The session outlines the red flags for patients with severe asthma and ways to treat the severe asthmatic in both the outpatient and the emergency setting. This session ends with tips and tricks from 20 years of treating asthma.

Learning Objectives:

At the end of this session, the participant should be able to:

- Recall and restate the 2020 GINA Asthma Guidelines for the treatment of asthma and asthma exacerbations
 - Apply the knowledge learned to the typical asthma patient seen in the outpatient and urgent care setting
 - Summarize the way the new GINA Asthma Guidelines effect the way we treat asthma that is mild to moderate as well as severe and difficult-to-treat asthma
 - Review pearls of asthma care that includes inhaler technique, spacer use and the concurrent treatment of comorbid conditions that affect asthma
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Basic ECG Workshop, Part I


AAPA Category 1 CME: 1.25

Description: Interpreting 12-lead ECGs is an important skill for any clinician, although it can be a difficult skill to become comfortable with or even master. This session provides the participant with the basic skills needed to become more knowledgeable and comfortable in utilizing this important diagnostic tool. The activity is divided into two parts. Part I focuses on basic descriptive analysis of ECGs (determining heart rate, rhythm, calculating intervals, axis and R-wave progression. Part II focuses on evaluating several common ECG pathologies listed in the objectives. Support materials is provided to help with your development and reinforcement of learning this skill set.

Learning Objectives:

At the end of this session, the participant should be able to:

- Analyze the basic ECG components required to assess pathology to include heart rate, rhythm, axis and waveform intervals

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- Develop a simple method to enable consistent assessments of unknown ECGs for common pathologies
 - Identify the common variances within normal ECGs
 - Interpret normal ECGs, Bundle Branch Blocks, IVCDs and Fascicular Blocks, using specific diagnostic criteria
-

Basic ECG Workshop, Part II

AAPA Category 1 CME: 1.25

Description: Interpreting 12-lead ECGs is an important skill for any clinician, although it can be a difficult skill to become comfortable with or even master. This session provides participants with the basic skills needed to become more knowledgeable and comfortable in utilizing this important diagnostic tool. The activity is divided into two parts. Part I focuses on basic descriptive analysis of ECGs (determining heart rate, rhythm, calculating intervals, axis and R-wave progression. Part II focuses on evaluating several common ECG pathologies listed in the objectives. Support materials is provided to help with your development and reinforcement of learning this skill set.

Learning Objectives:


At the end of this session, the participant should be able to:

- Analyze the basic ECG components required to assess pathology to include heart rate, rhythm, axis and waveform intervals
 - Develop a simple method to enable consistent assessments of unknown ECGs for common pathologies
 - Identify the common variances within normal ECGs
 - Interpret normal ECGs, Bundle Branch Blocks, IVCDs and Fascicular Blocks, using specific diagnostic criteria
-

Brace Yourself: A Guide to Orthopaedic Splinting

AAPA Category 1 CME: 1

Description: While orthopaedic PAs are expected to demonstrate expertise when it comes to splint and cast application, such skills are necessary in other settings with considerable frequency. Radiology interpretation, joint assessment, and the need for immobilization often become the responsibility of the EM clinician, as well as those in urgent care and even primary arenas. This session navigates first through the most common fractures, as well as soft tissue injuries, that can be anticipated in all such settings. Associated plain film images complements injury discussions, incorporating the history of mechanical trauma to pertinent exam findings. Respecting contraindications and post-splint complications, this session demonstrates proper splint application. Such splints to include volar, ulnar

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gutter, sugar tong and thumb spica of the upper extremities, and posterior splint of the foot and ankle. Brace yourself: this will be fun!

Learning Objectives:

At the end of this session, the participant should be able to:

- Identify common extremity injuries that warrant immobilization with splinting
 - Execute proper techniques and placement of upper and lower extremity splints
 - Describe contraindications to splint use, as well as post-application complications
-

Coagulation Conundrums: A Case-based Approach

AAPA Category 1 Self-Assessment CME: 1.5

Description: Increased bleeding and bruising are common complaints in primary care. Preoperative assessment of the clotting system is a very common task for primary care providers. A working knowledge of the clotting system is necessary for diagnostic work-up, laboratory interpretation, and treatment of common bleeding disorders. Hypercoagulable states can lead to MIs, DVTs, PEs, and thrombotic strokes. Atrial fibrillation is one of the most common reasons for anti-coagulation therapy. PAs need to know the common presentations, diagnostics, and therapy for clotting issues.

Learning Objectives:


At the end of this session, the participant should be able to:

- Recognize common laboratory patterns for common bleeding disorders seen in primary care
 - Diagnose common bleeding and clotting disorders
 - Formulate a treatment plan or referral for common bleeding and clotting disorders
-

Emergency Medicine Update: A Case-Based Review of Recent Impactful Literature

AAPA Category 1 CME: 1

Description: This case-based session reviews the current emergency medicine literature. New literature is published continuously across numerous journals. While review of this research is critical to maintaining evidence-based practice, limited time and access are potential barriers to staying up-to-date. The presenter has filtered the vast quantity of recent emergency medicine literature to present the most relevant articles for practice. Some presented content is also highly applicable to outpatient acute care. Topics includes chest pain disposition, anticipatory guidance on concussions, bag-mask ventilation during intubation, a clinical prediction rule for febrile infants, point-of-care ultrasound, and management of pediatric vomiting and diarrhea. Participating in this session empowers clinicians to make evidence-based decisions in frequently encountered emergency medicine and acute-care situations.

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Learning Objectives:

At the end of this session, the participant should be able to:

- Utilize the HEART score to make disposition decisions in cases of potential acute coronary syndrome
 - Provide anticipatory guidance on concussion recovery and treatment
 - Appraise the utility of a clinical prediction rule for the management of febrile infants under 90-days-old
 - Outline the role of bag-mask ventilation during intubation
 - Discuss the role of point-of-care ultrasound in diagnosing selected ocular complaints and performing lumbar punctures
-

Essential Risk Stratification for Practicing Evidenced-Based Medicine

AAPA Category 1 CME: 0.75

Description: Risk stratification tools have become increasingly popular and are essential in the medical decision-making process of patient disposition. Risk stratification tools are highly tied to evidence-based medicine. These tools not only help with identifying and calculating risk but when used and documented correctly, can provide a safety net that can prevent adverse patient outcomes and potentially prevent liability. This session aims to ensure that the audience of existing risk stratification tools that can be used in everyday practice and to expose the learner to new tools that have come out in the last few years.

Learning Objectives:


At the end of this session, the participant should be able to:

- Discuss risk stratification calculations; when and why they are used
 - Calculate and interpret the CHA2DS2-VASc Score for Atrial Fibrillation and Stroke Risk
 - Calculate and interpret the HEART Score for Major Cardiac Events
 - Calculate and interpret the Wells' Criteria and PERC Rule for DVT and PE
 - Calculate and interpret the CURB-65 Score for Pneumonia Severity
-

Evaluation and Treatment of the Red Eye

AAPA Category 1 CME: 1.25

Description: The primary and urgent care physician assistant can anticipate a host of ocular complaints on a regular basis, very often involving some version of the red eye. Given the spectrum of etiologies and clinical implications, this discussion is intended to familiarize the participants with the most common presentations. Sources will range from basic mechanical stressors to minor inflammatory changes to serious infectious causes. A brief consideration of anatomy lends to a problem specific exam and narrow differential diagnosis. Most of the dialogue will work through basic questions as to "what's

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the red," "why's the red," and "how bad is it" per each red eye complaint. With successful prompt management and minimal referrals, we should aim to optimize patient ocular care in the primary setting.

Learning Objectives:

At the end of this session, the participant should be able to:

- Execute a problem-focused examination of the red eye
 - Differentiate among a host of red eye pathologies
 - Initiate proper plan of care and/or referral for prompt management
-

Figuring It Out: Chronic Abdominal Pain

AAPA Category 1 CME: 1.25

Description: Chronic abdominal pain patients are often left searching for answers. This session helps participants figure out challenging patients with chronic abdominal pain. Emergency, pediatric, GI, and surgical PAs will be introduced to evidence-based practices including historical, physical exam (PE), imaging, dietary, and pharmaceutical tips to help address this growing population.

Learning Objectives:


At the end of this session, the participant should be able to:

- Discuss the common presentation of chronic abdominal pain. Briefly compare and contrast acute, functional, and chronic abdominal pain
 - Review the initial history and physical exam, including the classic presentation of major problems based on abdominal topography
 - Discuss common etiologies of pain in the abdomen including hepatic, biliary, gastric, intestinal/inflammatory, vascular, GU, GYN and musculoskeletal etiologies
 - Explain the work-up of chronic abdominal pain including serologic testing, stool testing, and imaging
 - Discuss the medical, surgical, and dietary interventions that can lead to success in dealing with challenging chronic abdominal pain patients
-

Foresight: 5 Ocular Emergencies Not to Miss

AAPA Category 1 CME: 1.25

Description: As many ocular complaints present first in primary settings, it is crucial that providers exercise confidence and competence in the management of such patients. What may seem a daunting discipline is actually quite reasonable to navigate when approached in a consistent and systematic manner. The beginning of the session considers the eye by way of history and exam, with emphasis on key points and findings to create a narrow and workable differential diagnosis. The latter portion will

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work through the five most common ocular emergencies. Walking through each urgent eye and its associated 'purple shiner' (aka red flag), the discussion will demonstrate a stepwise progression to the diagnosis and appropriated intervention. Appreciating the role of primary PAs with the emergent eye, it is imperative that providers enhance their ability to care for such patients. Armed with foresight, we become the first-line advocate of ocular medicine.

Learning Objectives:

At the end of this session, the participant should be able to:

- Describe a systematic approach to the eye, considering questions/findings that lend to a narrow differential diagnosis
 - Discuss the five major ocular emergencies, identifying classic presentations and intervening for optimal results
 - Demonstrate confidence in ocular care, with increased competency and improved patient outcomes
-

From the ER to the OR: Timely Orthopaedic Emergencies

AAPA Category 1 CME: 1.25

Description: Timeliness for recognition and consultation for orthopaedic emergencies may be imperative. Knowing how to quickly identify and treat these clinical scenarios is critical to prevent morbidity and mortality. The most common traumatic and atraumatic musculoskeletal emergencies will be introduced with the focus of the session on early diagnosis and emergent treatment options. PAs specializing in emergency medicine and orthopaedic surgery will provide their perspectives on clinical presentation and acute management options for these musculoskeletal conditions.

Learning Objectives:


At the end of this session, the participant should be able to:

- Identify musculoskeletal emergencies that require immediate orthopaedic consultation
 - Differentiate from urgent and emergent conditions based on clinical presentation and diagnostics
 - Discern vital information and relate findings to an orthopaedic specialist
 - Explain first-line treatment options for common musculoskeletal emergencies
-

Human Trafficking: Learning the Provider's Advantage

AAPA Category 1 CME: 1.25

Description: This session aims for educating PAs on how to identify and engage with human trafficking victims in a variety of clinical settings. In addition, the participants are taught how to follow a standard law enforcement and medical protocol for personal safety and the safety and rescue of the patient. It ill

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include both a live lecture and on-camera interview with experts, including former human trafficking survivors and law enforcement.

Learning Objectives:

At the end of this session, the participant should be able to:

- Recognize specific physical, social and emotional signs which are commonly displayed by human trafficking victims
 - Use questions to ask a patient and the corresponding programmed responses commonly given of trafficked victims
 - Recognize common reasons a victim would see a provider given the clinic focus - i.e. women's health scenarios versus ED
 - Utilize two handouts: a list of common terms used in 'the life' and a infographic of steps to take if you suspect a patient is being trafficked
-

Intermediate ECG interpretation

AAPA Category 1 CME: 1.25

Description: This session includes conduction abnormalities, probability of supraventricular versus ventricular tachycardia, and describe clinical significance. Discussion will include the clinical significance of electrical deflections on ECG, ECG changes in relation to physiological events, QRS axis shifts in relation to various disease states, ECG patterns for presence of myocardial ischemia, injury and infarction, presence of conduction abnormalities indicating bundle branch blocks, probability of supraventricular (SVT) vs. ventricular tachycardia (VT), and causes, clinical presentation and treatments for QT prolongation.

Learning Objectives:


At the end of this session, the participant should be able to:

- Describe clinical significance of electrical deflections on ECG
 - Review ECG changes in relation to physiological events
 - Analyze QRS axis shifts in relation to various disease states
 - Evaluate ECG patterns for presence of myocardial ischemia, injury and infarction
 - Determine the presence of conduction abnormalities indicating bundle branch blocks
-

Introduction to Point-of-Care Ultrasound

AAPA Category 1 CME: 1

Description: This is a case-based session providing a detailed discussion of the clinical utility of diagnostic point-of-care ultrasound (POCUS) for patients with cardiopulmonary complaints. The session contains a thorough discussion of the basics of POCUS and image acquisition, indications and scope of

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POCUS of organ systems commonly evaluated by POCUS. Additionally, it will provide an in-depth look at the current literature pertaining to use of diagnostic POCUS, while contrasting it with current standard of care. This session discusses the positive impact POCUS can have on evaluation, prognostication, and treatment decisions for common complaints and diagnoses. It is applicable to PAs practicing in many clinical specialties, from POCUS novice to expert alike. Use of case-based learning and audience response system (ARS) will ensure participant retention.

Learning Objectives:

At the end of this session, the participant should be able to:

- Explain the basics of ultrasound physics
 - Summarize scope and indications for Point-of-Care Ultrasound (POCUS) of the heart and lungs
 - Interpret POCUS images of the heart and lungs
 - Contrast evidence for standard of care with POCUS
 - Discuss the effect POCUS has on diagnostic evaluation, prognostication, and treatment of acute cardiopulmonary pathology
-

Introduction to Point-of-Care (POCUS)

AAPA Category 1 CME: 1

Description: This session provides an introductory lecture about the basic principles of bedside ultrasound, and how to use ultrasound in clinical practice.

Learning Objectives:

At the end of this session, the participant should be able to:


- Explain the indications for the use of bedside ultrasonography
 - Explain the basic mechanics of ultrasound
 - Define the components of an eFAST exam, as well as point-of-care cardiac and lung ultrasound
 - Develop a comfort level with utilizing the ultrasound machines in your clinical practice
-

Introduction to the Stop the Bleed Program

AAPA Category 1 CME: 0.75

Description: The Stop the Bleed Program is a national initiative from the American College of Surgeons to train and empower individuals to act during active shooter and intentional mass casualty incidents to stop uncontrolled life threatening bleeding and save lives. While victims can quickly die from uncontrolled bleeding, these deaths are preventable.

Learning Objectives:

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At the end of this session, the participant should be able to:

- Describe the concepts of the Hartford consensus and how this document evolved into the development of the Stop the Bleed curriculum
 - Recall the circumstances surrounding the cause of and the presenting characteristics of life threatening hemorrhage
 - Demonstrate effective hemorrhage control through the application of direct pressure to a simulated wound
 - Describe the rationale for the use of tourniquet and demonstrate the proper placement to effectively control life threatening hemorrhage
 - Describe when wound packing would be indicated and demonstrate proper technique in packing a simulated open wound
-

Low Back Pain: Evaluation and Management in Emergency and Ambulatory Settings

AAPA Category 1 CME: 0.75


Description: This session draws from current literature and best practices to discuss the evaluation and treatment of patients presenting with low back pain in emergency and ambulatory settings. Attendees will gain an understanding of the societal costs of low back pain and be presented with a systematic approach to the evaluation and management of this common medical problem. Patient cases will be used to describe how historical information and physical examination findings lead to refining differential diagnoses in patients with low back pain. Determining evidence-based diagnostic testing, treatment planning and referral patterns based on patient presentation and medical setting (emergent vs. ambulatory) will be emphasized.

Learning Objectives:

At the end of this session, the participant should be able to:

- Discuss the prevalence of low back pain and its societal costs
 - Create a differential diagnosis of low back pain based on patient presentation and discuss how this may differ based on medical setting
 - Describe the focused physical examination of a patient complaining of low back pain
 - Discuss key elements to refining differential diagnoses for patients with low back pain based on historical data and physical examination findings
 - Discuss appropriate evidence-based methods for determining diagnostic testing, treatment planning and referral patterns based on patient presentation
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Migraine in the Adult Patient

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AAPA Category 1 CME: 1.25

Description: Migraine headaches affect both men and women in the United States. Migraine is a highly prevalent disorder that affects 11% of the U.S. population. It is the source of significant suffering for individuals and their families. In fact, approximately 17% of women and 6% of men had at least one migraine attack in the previous year. Treatment options have changed over the past 2 years with new classes of medications entering the market. Providers need to be up to date on the most current recommendations for the acute and preventive treatment options for migraine patients. This session uses variable case studies to illustrate the subtleties that inform providers about the correct diagnosis and most effective treatment options for migraine patients.

Learning Objectives:

At the end of this session, the participant should be able to:

- Describe the major clinical features of migraine
 - Explain the principles of acute and prophylactic therapy for migraine headaches
 - Recognize common migraine subtypes
 - Formulate a treatment plan for migraine patients
-

Pneumonia

AAPA Category 1 CME: 0.75

Description: This session focuses on recent literature updates from American Thoracic Society (ATS) for the diagnosis and treatment of pneumonia. The discussion will focus on newly-published guidelines from ATS and Infectious Disease Society of America on how to diagnose and treat patients with community acquired pneumonia.

Learning Objectives:


At the end of this session, the participant should be able to:

- Review and discuss new guidelines for the diagnosis and treatment of community acquired pneumonia
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Point-of-Care Ultrasound and COVID-19

AAPA Category 1 CME: 1.25

Description: Point-of-care ultrasound (POCUS) has had a growing importance in a variety of clinical arenas over the past several years. With the recent development of COVID-19 in the United States, POCUS has become essential to many providers on the front lines. This session focuses on the basics of ultrasound and their applications in the care of patients with COVID-19. Participants will see scans from

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patients with COVID-19 and receive information on the rapidly progressing recommendations for pulmonary and cardiac ultrasound in this population.

Learning Objectives:

At the end of this session, the participant should be able to:

- Identify the benefits of use of POCUS in patients with COVID-19
 - Recognize the ultrasound findings of normal lung and compare them with the findings seen in patients with COVID-19
 - Identify signs of cardiac complications on ultrasound, including myocarditis, pericardial effusion and thrombosis
 - Describe recommendations for decontamination of ultrasound equipment following use on COVID-19 positive patients
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Responder Communications in Disaster: Is Less Really More?

AAPA Category 1 CME: 1

Description: Is less really more? Medical professionals in clinic and hospital settings need to account for convergence behavior to disrupt responder communications in disaster, especially when there is a mass casualty (MASCAL) situation that overwhelms local resources. Emergency management is an art linked to different types of improvisation. Incident commanders and other key stakeholders will require situation reports. Ultimately, there is no panacea to facilitate dialogue, but it may behoove an organization to design a communications strategy and viably use the IDEA Model to distribute key messages with PACE: (1) Primary, (2) Alternate, (3) Contingent, and (4) Emergent forms of communication.

Learning Objectives:


At the end of this session, the participant should be able to:

- Describe the importance of responder communications in disaster
 - Describe emergency management when there is a MASCAL that overwhelms local resources
 - Describe how incident commanders and key stakeholders will require situation reports
-

Risky Rashes: A Review of Dermatologic Emergencies

AAPA Category 1 CME: 1

Description: Though there are only a few true dermatologic emergencies, they carry a high mortality rate and can be easy to miss. This session discusses Steven-Johnson Syndrome, toxic epidermal necrolysis, drug reaction with eosinophilia and systemic symptoms, and necrotizing fasciitis. Participants learn tips on making these challenging diagnoses early in a patient's presentation. A review of the current guidelines for management and updates based on recent literature will be discussed in detail.

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Dermatologic emergencies can present in nearly every setting and speciality, and participating in this session prepares clinicians to identify and manage these emergent conditions effectively and efficiently.

Learning Objectives:

At the end of this session, the participant should be able to:

- Recognize the clinical features, diagnose, and appropriately treat Stevens-Johnson Syndrome (SJS) and toxic epidermal necrolysis
 - Describe why erythema multiforme major is not part of the SJS-TEN continuum
 - Recognize the clinical features, diagnose, and appropriately treat DRESS Syndrome
 - Recognize the clinical features, diagnose, and appropriately treat necrotizing fasciitis
 - Discuss the current literature regarding management of erythema multiforme major, Stevens-Johnson Syndrome, and toxic epidermal necrolysis
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Sepsis and Septic Shock

AAPA Category 1 CME: 1

Description: Although sepsis outcomes have improved in recent years, overall morbidity and mortality remain high. Sepsis is common but is frequently unrecognized by clinicians at initial presentation. This leads to delay in treatment and poor outcomes. The Third International Consensus Definitions for Sepsis and Septic Shock, otherwise known as Sepsis-3, has updated and simplified definitions, focusing clinical criteria on organ dysfunction. These simplified definitions and diagnostic criteria are easy to apply in any setting and gives providers the tools to quickly recognize sepsis and start treatment immediately. This session focuses on the early recognition of sepsis and management strategies to decrease mortality.

Learning Objectives:


At the end of this session, the participant should be able to:

- Define sepsis and septic shock
 - Discuss the use of the Sequential Organ Failure Assessment score in identifying patients with sepsis
 - Demonstrate effective aggressive resuscitation, early antibiotics, source control and other strategies to improve mortality
 - Utilize procalcitonin and lactic acid levels in managing sepsis
-

SIS: Case Studies in Domestic Violence and Child Abuse

AAPA Category 1 CME: 1.25

Description: Through a series of dynamic, interactive case studies and ample time to answer questions, this is an opportunity to address some of those important questions clinicians may have regarding the investigation, detection, and management of child abuse and intimate partner violence (aka

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interpersonal violence, domestic violence). No question is too big, too small, or not elegant enough! Let's work together to break down the discomfort around these topic areas and make ourselves more holistic, better educated, more informed healthcare providers!

Learning Objectives:

At the end of this session, the participant should be able to:

- Identify common clinical features and history presentations of child abuse and intimate partner violence (IPV)
 - Describe initial investigation and interventions for child abuse and IPV
 - Discuss treatment and follow-up care, including mandated reporting, for cases of child abuse and interpersonal violence
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Suturing Techniques and Wound Care

AAPA Category 1 CME: 0.75

Description: Topics include wound healing theory, superficial wound management, local anesthesia, suture and needle selection, proper follow-up wound care management, basic and advanced wound closure techniques.

Learning Objectives:


At the end of this session, the participant should be able to:

- Identify several aspects of wound healing theory
 - Discuss superficial wound management
 - Describe local anesthesia administration
 - Select appropriate sutures and needles
 - Discuss proper follow-up wound care management
-

Tipsy to Tremulous: Managing Alcohol Intoxication and Withdrawal

AAPA Category 1 CME: 1

Description: The management of acutely intoxicated patients and those with chronic alcohol use presents challenges for the emergency department provider. Patients with alcohol intoxication and possible withdrawal represent a high-risk presentation. As such, the emergency medicine PA must be diligent to ensure high-quality patient care and diagnose co-existing, life-threatening disorders, in addition to managing the acute intoxication. This session explores the spectrum of medical problems related to the consumption of alcohol. Topics include acute alcohol intoxication, alcohol abuse, sequelae of alcohol abuse, and withdrawal. The goal of this session is to provide the attendee with an approach to the evaluation, pharmacologic, and other means of management, as well as disposition decision-making for the patient with problems related to alcohol use.

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Learning Objectives:

At the end of this session, the participant should be able to:

- Recognize co-existing, life-threatening disorders related to alcohol consumption
 - Develop an approach to the evaluation of patients with alcohol intoxication and/or possible withdrawal
 - Identify patients at risk for withdrawal, using tools such as the Clinical Institute Withdrawal Assessment for Alcohol Scale (CIWA-Ar)
 - Determine treatment strategies for patients who would benefit from pharmacologic treatment
 - Discuss disposition decision-making for the patient with problems related to alcohol use
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Update in Hospital Medicine: Recent Literature Impacting Clinical Care in the Inpatient Setting

AAPA Category 1 CME: 1.25

Description: Recently published literature that impacts the practice of hospital medicine should be identified and utilized by practitioners in an ongoing basis. However, the volume of literature published annually or even weekly is too much for any individual practitioner to actively assimilate. The presenting faculty utilize a systematic method to comb the medical literature to identify the most relevant published literature that impact the practice of hospital medicine over the last 12-18 months. They present this literature in an interactive, case-based fashion that engages the audience and facilitates learning. They summarize practical points that practitioners should actively utilize to incorporate the published literature into clinical practice immediately.

Learning Objectives:


At the end of this session, the participant should be able to:

- Interpret important published literature evidence in hospitalized patients that changes or confirms the management of these patients
 - Describe updates in the management of acutely sick patients including critically ill patients in the hospital
 - Incorporate into clinical practice recently published literature to provide optimal management of hospitalized patients
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Wilderness Trauma Management

AAPA Category 1 CME: 1.25

Description: There are specific and important factors in the assessment, stabilization, resuscitation, and monitoring of trauma patients in wilderness/austere environments. The standard ATLS protocols are important and helpful, but special consideration must be made in the face of limited diagnostic and

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Total AAPA Category 1 CME Credits: 33.75
Total AAPA Category 1 Self-Assessment CME Credits: 1.5

therapeutic resources, prolonged or difficult evacuation/transport, and challenging or dangerous environmental factors. PAs who are involved in remote medical care, disaster medicine, and global health will benefit from an enhanced understanding of some of the differences in the assessment and treatment of trauma patients in wilderness/austere environments. This session reviews the different types of trauma algorithms (ATLS, MARCH, AAABBBCCC), their functionality and limitations. It will also emphasize the importance of rapid, aggressive hemorrhage control and why this is even more critical in limited resource environments.

Learning Objectives:

At the end of this session, the participant should be able to:

- Describe the basic aspects of trauma assessment in the wilderness/austere environment
 - Recognize the basic tenants of advanced hemorrhage control in the wilderness/austere environment
 - Describe evacuation and ongoing assessment considerations for trauma patients in the wilderness/austere environment
 - Describe key differences in assessment and treatment of trauma patients in the wilderness/austere environment
 - Explain critical concepts in the stabilization/resuscitation of trauma patients in the wilderness/austere environment
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