



CME Sponsors: American Medical Seminars, Inc.
 Activity Title: Emergency Medicine: Practicing According to the Evidence
 Activity Dates: April 25-29, 2016
 Presenting Faculty: Sean M. Fox, M.D.; Michael A. Gibbs, M.D., F.A.C.E.P.;
 and Andrew D. Perron, M.D., F.A.C.E.P., F.A.C.S.M.

NARRATIVE DESCRIPTION

Following this course, the participant should be able to appraise the epidemiology, demographics and common clinical presentations for the diseases and disorders discussed; construct an appropriate history, physical exam and laboratory evaluation to develop cost-effective and accurate diagnosis; manage as well as employ appropriate follow-up and/or specialty referral for the diseases and disorders presented. This activity is expected to result in improved competence in making appropriate diagnosis and providing effective treatment and referral or follow-up care with the overall goal of improving patient outcomes.

The emphasis will be on aligning physician behavior with current guidelines and evidence-based medicine, as indicated within each topic's specific objectives. Emergency Medicine is a specialty that has a high rate of utilization and change in standards of care. It is often the point of entry for medical care; therefore, this course was designed to be of value to all practitioners at the level of a practicing physician in an effort to keep them abreast of current clinical practices in Emergency Medicine.

SPECIFIC OBJECTIVES

Day 1

Wide-Complex Tachycardias: When is V-Tach Not V-Tach?

Upon completion of this session, the participant should be able to: ^{EBM, COMP}

1. Analyze the possible etiologies and ECG appearance of wide complex tachycardias.
2. Discriminate ECG features of these rhythms that will help differentiate between ventricular tachycardia and other more benign etiologies.
3. Appraise evidence-based treatment of these dysrhythmias.
4. Assess the clinical significance of the underlying medical conditions that result in these dysrhythmias.

Pericarditis and Myocarditis: How Can 2 Diseases Sound So Similar & Act So Differently?

Upon completion of this session, the participant should be able to: ^{EBM, COMP}

1. Illustrate the pathophysiology and clinical presentation of these two entities.
2. Differentiate the potential pitfalls in the diagnosis and management of these diseases.
3. Analyze the commonalities and differences of these closely related diseases.
4. Recommend evidence-based work-up and treatment options for pericarditis and myocarditis.

Acute Asthma: What's in the Kitchen Sink

Acute asthma exacerbations can affect all age patients and can present with a wide variety of severity. Unfortunately, asthma exacerbations are still a leading cause of morbidity and mortality. Upon completion of this session, using the most current available literature and national organization recommendations, the participant should be able to:

1. Describe the various therapies and techniques to manage the critically ill patient with asthma exacerbation.
2. Develop evidenced-based strategies to help avoid intubating the patient with severe asthma exacerbation.
3. Describe methods to successfully manage the crashing asthmatic patient.

Seizures: That's Not a Dance Move.

Seizures may present in rather subtle and dramatic fashions. The subtle seizure is often a diagnostic challenge while the dramatic one may present management challenges. This course will focus on the most state of the art concepts related to the evaluation and management of seizures in the Emergency Department today. Upon completion of this session, using the recent literature and national organizations recommendations, the participant should be able to:

1. Describe the most appropriate evaluation for a patient with a new onset seizure in the Emergency Department.
2. List useful methods therapies and management strategies for patients with simple seizures.
3. Describe the appropriate management of a patient with status epilepticus.
4. Expect and account for the potential complications of the specific therapies for status epilepticus.

Day 2

Mastering CHF.

Congestive Heart Failure (CHF) is a common presentation in our Emergency Departments. Sometimes, the more common a condition, the more complacent we may become with it. This presentation will focus on this very diverse condition that may present with mild or life threatening symptoms and will ensure that you are able to deliver the most optimal care regardless of the clinical situation. Upon completion of this session, using the most current evidence and recommendations from the American Heart Association and national colleges, the participant should be able to:

1. Select the most appropriate initial therapies for the patient with mild and moderate CHF exacerbations.



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2. Know which medications, which are often prescribed for CHF, can potentially do more harm than good.
3. Select the most appropriate initial therapies for the patient with more severe CHF exacerbations.
4. Describe management strategies for the patient with CHF exacerbation complicated by arrhythmias or hypotension.
3. Assess and differentiate both effective as well as disproved therapies in the treatment of back pain using the Cochrane Database.
4. Specify potential pitfalls in the treatment and disposition of low back pain.

**Day 3
Turning Error into Opportunity.**

Upon completion of this session, the participant should be able to: ^{COMP}

1. Specify the elements of the emergency care environment that predisposes the clinician to decision-making errors.
2. Develop and integrate cognitive strategies that reduce the likelihood of error.
3. Design and implement effective methods for reviewing, discussing and addressing medical errors.

Hypertension – Just the Facts!

Upon completion of this session, the participant should be able to: ^{GL, COMP}

1. Determine the emergency department "essentials" for the assessment of the patient with hypertension.
2. Develop a rational framework for the ED treatment of acute hypertension based on specific clinical scenarios.
3. Integrate essentials of the current JNC guidelines.

ST-Segment Elevation: MI or Not MI.

Upon completion of this session, the participant should be able to: ^{COMP}

1. Analyze the wide variety of clinical conditions that can result in ST elevation on the ECG.
2. Detect ECG findings that can aid the clinician in determining the significance of ST-elevation on an ECG.
3. Evaluate and employ possible adjuncts a clinician can use to further define the significance of ST-elevation on an ECG.

Acute Coronary Syndrome in the ED: So Many Drugs and So Little Time.

Upon completion of this session, the participant should be able to: ^{EBM, GL, COMP}

1. Analyze the scope of the problem of ACS in the ED.
2. Integrate the evidence-based treatment of ACS based on the latest applicable literature.
3. Relate the areas of controversy in the treatment of this disease entity.
4. Assess emerging therapies that may prove useful for the treatment of ACS in the ED.

Electronic Educational Morsels and More: Tools to Stay Ahead of the Curve.

The informational highway is getting faster every day. Staying on top of the most current topics and controversies is becoming increasingly difficult. While textbooks are invaluable resources, their materials are dated. Even current journal articles can be yesterday's news. Even when you have the must current journal, finding time to actually go through it is challenging. While the task of staying abreast of the current medical knowledge has always been a challenge, today there are a number of tools that can assist physicians with this need to be life-long learners. Upon completion of this session, using vetted and quality tools, the participant should be able to:

1. Identify useful online resources that will assist in staying up to date with the vast EM topics.
2. Identify useful electronic tools that will assist in staying up to date with the vast EM topics.
3. Discuss useful strategies to deliver this useful content in an organized fashion and avoid informational-overload.

Minor Closed Head Injury: An Evidence-Based Approach.

Upon completion of this session, the participant should be able to: ^{EBM, GL, COMP}

1. Assess and relate the pathophysiology of minor closed head injury.
2. Appraise the literature as it pertains to minor closed head injury and apply ACEP Guidelines as they relate to minor CHI.
3. Recommend diagnostic algorithms appropriate for the evaluation and management of minor CHI in light of best-evidence available.

Low Back Pain in the ED: What We Know, What We Think We Know, and What We Don't Know.

Upon completion of this session, the participant should be able to: ^{EBM, COMP}

1. Apply an evidence-based approach to the evaluation of non-traumatic back pain.
2. Differentiate the "red flags" that should heighten the suspicion for serious pathology in the evaluation of back pain.



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5. Apply and integrate the updated ACC/AHA guidelines for the management of patients with unstable angina and non ST-segment elevation myocardial infarction.

Day 4

PE and DVT in the Emergency Department.

Upon completion of this session, the participant should be able to: ^{EBM, GL, COMP}

1. Analyze the scope of the problem of thromboembolic disease in the ED.
2. Employ the latest diagnostic algorithms and adjuncts available to aid the clinician in the diagnosis of thromboembolic disease.
3. Appraise the evidence-based treatment of thromboembolic disease based on the latest applicable literature and apply applicable ACEP Guidelines.
4. Assess the limitations of current diagnostic modalities for these diseases.

Thrombolysis for Stroke.

Upon completion of this session, the participant should be able to: ^{GL, COMP}

1. Analyze and integrate the principles and pathophysiology of stroke and stroke treatment.
2. Appraise the applicable medical literature that is available to the clinician along with the latest ASA Guidelines.
3. Debate the performance of thrombolysis for stroke to this point in time.
4. Appraise the controversy in the medical literature regarding this therapy.
5. Determine emerging technologies and therapies that may prove useful for the treatment of stroke in the ED.

Aortic Disasters.

Upon completion of this session, the participant should be able to: ^{COMP}

1. Specify the pathophysiology and clinical presentations, and formulate ED management, of the following:
 - a. Abdominal aortic aneurysm,
 - b. Traumatic aortic disruption,
 - c. Essentials of aortic dissection.

Abdominal Pain Case Studies.

Upon completion of this session, the participant should be able to: ^{EBM, COMP}

1. Develop an evidence-based approach to evaluation of the ED patient with abdominal pain.
2. Determine and avoid common pitfalls in the assessment of patients with abdominal pain.
3. Detect and assess high-risk scenarios related to patients with abdominal pain.

Day 5

Early Goal Directed Therapy in Sepsis: Why All the Fuss?

Upon completion of this session, the participant should be able to: ^{GL, COMP}

1. Determine the pathophysiology of sepsis and the sepsis syndrome.
2. Evaluate the scope of the problem regarding effective management of sepsis in the ED.
3. Appraise the principles of early goal-directed therapy in the treatment of sepsis.
4. Employ the applicable "surviving sepsis" guidelines.
5. Assess the potential gains that can be realized, as well as the pitfalls to avoid, in the management of sepsis utilizing early goal directed therapy.

Community Acquired Methicillin Resistant *Staphylococcus aureus* (CA-MRSA): An Update.

Upon completion of this session, the participant should be able to: ^{EBM, COMP}

1. Assess risk factors for CA-MRSA infection.
2. Specify the best-evidence management of skin and soft-tissue infections in the era of drug resistance.
3. Assess both pharmacologic and non-pharmacologic management strategies for this disease entity.
4. Demonstrate familiarity with the latest treatment recommendations for CA-MRSA as directed by the CDC.

Mastering Local and Regional Anesthesia.

Upon completion of this session, the participant should be able to: ^{COMP}

1. Appraise the pharmacology of local anesthetics.
2. Analyze recent controversies in local anesthetic techniques.
3. Determine and employ regional anesthetic techniques appropriate for the ED.

Trauma Case Studies.

Upon completion of this session, the participant should be able to: ^{COMP}

1. Specify and apply critical issues in the evaluation and management of the injured patient using a case-based format.
2. Identify the essentials of early ED care for the trauma patient using a case-based approach.
3. Discuss the "essentials" of the effective inter-facility trauma transfer.