



CME Sponsors: American Medical Seminars, Inc.
 Activity Title: Infectious Diseases: Adult Issues in the Outpatient and Inpatient Settings
 Activity Dates: March 11-15, 2019
 Presenting Faculty: Valerianna Amorosa, M.D.; Stephen J. Gluckman, M.D., F.A.C.P., F.I.D.S.A.; and Janet M. Hines, M.D.

NARRATIVE DESCRIPTION

Following this course, the participant should be able to recognize the epidemiology and classify commonly presenting infectious diseases; determine the clinical manifestations, pathogenesis and methods of diagnosing the presenting diseases; and apply the current recommendations of pharmacologic management, referral or follow-up and prevention. 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. Since Infectious Diseases is a specialty field of medicine that affects all areas of Primary Care to include FM, IM, EM and Pediatrics, this course was designed to cover the spectrum of Infectious Diseases essential to all practicing physicians.

SPECIFIC OBJECTIVES**DAY 1****Immunizations for Adults.**

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

1. Differentiate between myths and facts concerning vaccine administration.
2. Based on ACIP up-to-date guidelines, evaluate indications, contra-indications, efficacy and side effects of adult immunizations.
3. Recommend immunizations indicated for different risk groups such as health care providers, college students and inhabitants of long term care facilities.

Chronic Fatigue Syndrome.

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

1. Demonstrate how to diagnose CFS and how to distinguish it from chronic fatigue.
2. Relate the history of CFS.
3. Determine the management and how not to mismanage, a patient with CFS as per the current Institute of Medicine Diagnostic Criteria.

Acute Pharyngitis and Sinusitis.

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

1. Determine the features and predictors that guide your diagnostic testing of acute pharyngitis.

2. Apply the best courses of treatment and overall management based on pharyngitis treatment guidelines.
3. Develop a framework for treatment and antibiotic prescribing for acute sinusitis.

Community Acquired Pneumonia and Respiratory Tract Infections.

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

1. Appraise the epidemiology of community acquired pneumonia.
2. Construct the differential diagnosis and employ specific management when making the diagnosis of community acquired pneumonia.
3. Appraise the rising incidence of resistance and utilize alternative therapies when indicated.
4. Determine the role of antibiotics in bronchitis.
5. Recognize the rationale for antibiotic guidelines.

DAY 2**Soft Tissue and Bone Infections.**

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

1. Construct an approach to making the diagnosis of common skin and soft tissue infections.
2. Assess common infections to include streptococcal and staphylococcal infections and necrotizing fasciitis, diabetic foot infections, bite wound infections and bone and joint infections.
3. Apply appropriate treatment and management of these commonly seen infections and decide when specialist referral is indicated as per the current IDSA Guidelines for skin and soft tissue infections.

Infections in the Immunocompromised Patient.

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

1. Appraise the immunocompromised patient who is at most risk for serious infections due to diabetes, malignancy, and chemotherapy or medications such as the immunomodulators as per the published EBM/RCT studies in Diabetes Care, Infectious Disease Clinics N.A., Journal of Rheumatology and others.
2. Employ standard of appropriate preventative care in various immunocompromised populations seen in primary care.
3. Apply an approach to the treatment and follow up of these infections for each type of at risk patient.

Fever of Unknown Origin.

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



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1. Discuss the pathogenesis of fever and its physiologic importance.
2. Describe the major causes of FUO's.
3. Integrate normal temperature regulation and the relevance of this to disease states.
4. Formulate an approach to FUO for a given patient based upon the multicenter and expert panel reviews published and referenced.

Meningitis: Commonly Asked Questions.

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

1. Interpret normal CSF parameters.
2. Interpret abnormal CSF findings and apply them to the proper management of patients.
3. Relate an understanding of some of the more controversial clinical areas associated with the management of meningitis such as:
 - a. The IDSA guidelines on the use of steroids;
 - b. Who requires a CT scan prior to a lumbar puncture;
 - c. The effect of prior antibiotic treatment on the interpretations of CSF.
4. Discriminate the causes of aseptic meningitis with specific emphasis on the non-viral, treatable etiologies.

DAY 3

What Every Primary Care Provider Should Know About HIV.

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

1. Relate the present epidemiology of HIV.
2. Develop an up-to-date understanding of the prognosis for a newly infected person.
3. Assess the major viral and host factors that determine the present approach to the management of a person infected with HIV as per the NIH, CDC & IDSA Guidelines.
4. Determine risk to health care workers and develop a plan to manage an exposed health care worker as per the current CDC and USPSTF Guidelines.

Sexually Transmitted Diseases.

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

1. Relate the present epidemiology of STDs in this country.
2. Develop a differential diagnosis and a diagnostic and treatment approach for the following STD syndromes based on CDC guidelines:
 - a. Urethritis;
 - b. Vaginitis;
 - c. Genital ulcer(s).

3. Specify the diagnosis and management of syphilis, gonorrhea, chlamydia, herpes simplex, and HPV.
4. Relate the proper use of a condom so that they may properly educate patients.

Influenza and Pandemic Influenza.

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

1. Integrate the epidemiology, infection control precautions and other preventive measures related to influenza infections.
2. Appraise the role of influenza vaccine and antiviral therapy as well as supportive measures in the prevention and treatment of influenza as per the CDC Guidelines.
3. Formulate key issues of Bioemergency preparedness for the primary care practitioner.

Approach to the Patient with Fever and Rash.

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

1. Describe the etiology of commonly seen infectious and non-infectious rashes that are associated with fever.
2. Develop a differential diagnosis based upon the type of rash on presentation.
3. Recognize the scenarios in which emergent treatment of fever/rash are warranted.

DAY 4

Epidemics in the News.

Upon the completion of this session, the participant should be able to relate the following about each of these four presently active viral epidemics: ^{GL, EBM, COMP}

- a. Ebola Zaire;
 - b. MERS-CoV;
 - c. Chikungunya;
 - d. Pertussis;
 - e. Measles;
 - f. Zika;
1. Appraise how the transmission mechanisms and risk of infection has impacted the incidence of these viruses in the U.S.
 2. Recognize and determine, through appropriate WHO and CDC resources, the geographic distribution of each viral illness.
 3. Determine the various presentations and differentiate the clinical syndromes from other common infectious processes in patients presenting to a primary care practice.
 4. Determine the features and predictors to formulate an approach to each illness that will help guide your diagnostic testing decisions for



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making an appropriate diagnosis as per the current CDC and WHO Guidelines.

5. Assess the risk to health care workers and other patients while determining public health implications in an effort to deploy appropriate resources and methods of Infection control as per the CDC and WHO recommendations and Guidelines.

Common Issues Surrounding Tick Borne Illnesses in the U.S.

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

1. Determine the major tick vectors in the United States and their associated diseases.
2. Relate the proper technique for tick removal.
3. Differentiate the clinical presentations, diagnosis and treatment of the major tick borne diseases in the United States: Lyme disease, babesiosis, ehrlichiosis, and Rocky Mountain spotted fever as per the CDC and IDSA Guidelines.

Update in Antibiotic Therapy.

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

1. Appraise the pharmacology and antibacterial spectrum of activity of the newer antibiotics.
2. Assess the indications for use of newer agents based on sites of infection and susceptibility patterns and apply the appropriate drug recommendation to key clinical scenarios as per the IDSA guidelines.
3. Relate the side effects, adverse reactions and important drug-drug interactions affiliated with each antibiotic.

Tuberculosis Update.

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

1. Appraise how the changing epidemiology of tuberculosis has impacted the incidence of the disease in the U.S.
2. Detect and manage latent tuberculosis infection, including appropriate use of gamma-interferon release assays as per the CDC recommendations and Guidelines.
3. Apply the principles of treatment of TB disease, specify how to increase medication adherence, and detect adverse drug reactions.
4. Differentiate patient characteristics to anticipate multi-drug resistance.

DAY 5

Gastroenteritis.

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

1. Relate the major pathogenic mechanisms that result in diarrhea.
2. Differentiate the major pathogens responsible for acute gastroenteritis.
3. Utilize an efficient approach in the evaluation of a patient with acute gastroenteritis as the normal host and in persons with HIV or recent travel.
4. Diagnose and treat various common causes of gastroenteritis as per the current ACG guidelines.

The Alphabet Soup of Viral Hepatitis.

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

1. Compare and contrast viral hepatitis A through E. Similarities and differences will be stressed, particularly the risks of developing chronic infection and the complications of chronic infection.
2. Distinguish the significant features of hepatitis A through E and interpret the various hepatitis serologies.
3. Select appropriate patients for treatment.
 - a. Established and new treatment options will be covered as per the CDC and USPSTF Guidelines.
4. Select appropriate strategies and options for patients to prevent the acquisition of hepatitis.

Multi-Drug Resistant Infections.

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

1. Assess to identify and avoid or minimize the urgent and serious threats of drug resistance as identified by the CDC and IDSA.
2. Apply the most effective and appropriate treatment and strategy for each infection.
3. Determine when specialist referral will result in an improved outcome.

Bloodstream Infections and Endocarditis.

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

1. Analyze the epidemiology and risk factors for bloodstream infections and endocarditis in patients presenting to a primary care practice.
2. Employ the diagnosis and management skills for bloodstream infections and infective endocarditis as per the current IDSA guidelines.
3. Recognize post-infection patient management issues and apply appropriate endocarditis prophylaxis measures as per the AHA guidelines.