



CME Sponsors: American Medical Seminars, Inc.
 Activity Title: Hospital Medicine: Management of the Hospitalized Adult Patient
 Activity Dates: April 1-5, 2019
 Presenting Faculty: Vandana Y. Bhide, M.D., F.A.C.P., F.A.A.P., A.B.I.H.M.; David A. Horowitz, M.D.; Ganesan Murali, M.D.; and Arshad A. Wani, M.D.

NARRATIVE DESCRIPTION

Following this course, the participant should be able to formulate a practical approach to common disorders found in the hospitalized adult patient; determine the diagnostic tests that can be used to determine the severity of the patient's problem and make an accurate diagnosis; apply the various treatment options available and recognize when to treat and when to call for a specialist. This activity is expected to result in improved competence in making an appropriate diagnosis and providing effective treatment and consultation 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. As recent advances in diagnostic modalities and treatments make it necessary to improve competence in an inpatient setting, this course was designed as an update for all practitioners at the level of a practicing physician in the hospital setting.

SPECIFIC OBJECTIVES

Day 1

Bronchial Asthma: An Update.

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

1. Appraise the pathophysiology of this inflammatory disease.
2. Develop a stepwise approach to treatment of asthma and management of status asthmaticus.
3. Differentiate the patient who is not responding and specify indications for subspecialty referral.

Pleural Diseases: Effusions and Pneumothorax.

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

1. Determine the etiology of various pleural effusions by means of cases.
2. Formulate the investigation and management of pleural effusions.
3. Detect the presentation of pneumothorax.
4. Develop the clinical approach to management of pneumothorax using the ACCP Delphi Guidelines.

Systolic and Diastolic Heart Failure.

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

1. Appropriately manage decompensated heart failure in hospitalized patients.
2. Assess the indications for positive inotropic agents and ultrafiltration in systolic heart failure.
3. Distinguish the treatment of systolic versus diastolic heart failure, as per the 2013

ACCF/AHA Guidelines for heart failure management.

Atrial Fibrillation in the Hospitalized Patient.

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

1. Assess and evaluate treatment options for atrial fibrillation with rapid ventricular response, as per the 2010 HFSA Guidelines.
2. Employ appropriate anticoagulation strategies for atrial fibrillation.
3. Distinguish the advantages of rhythm versus rate control treatment strategies, 2014 ACC/AHA Guidelines for atrial fibrillation management.
4. Determine the possible underlying causes of CHF exacerbations.

Day 2

Challenging Infections: Methicillin Resistant Staphylococcus Aureus, Clostridium difficile.

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

1. Assess and apply appropriate treatment strategies for different types of methicillin resistant staph aureus infections, as per the IDSA Guidelines.
2. Employ rational use and relate the precautions of newer antibiotics when treating resistant bacteria.
3. Distinguish Guideline based treatment of Clostridium difficile infections, as per the AGA Guidelines.

Consultative Medicine: Transfusion Guidelines, Delirium in the Hospitalized Patient.

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

1. Interpret changes in the updated 2012 American College of Chest Physicians Evidence-Based Guidelines for Antithrombotic Therapy.
2. Assess restrictive red blood cell transfusion strategy as recommended by American Association of Blood Banks (AABB) guidelines.
3. Evaluate clinical factors that make patients more prone to hospital and postoperative delirium.
4. Employ evidence-based strategies to treat delirium in hospitalized patients.

Pulmonary Cases for Review - Part I.

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

1. Develop a differential diagnosis and approach to a patient with a non-resolving infiltrate.
2. Assess the causes and determine the evaluation of solitary lung nodule.



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- Evaluate idiopathic pulmonary fibrosis and employ current management using the ATS/ERS Guidelines.

Arterial Blood Gas: A Six Step Approach to Rapid Interpretation.

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

- Distinguish and determine the type of acid base disturbance – Acidosis and Alkalosis.
- Determine the anion gap and its role in defining and treating acid base disorders.
- Assess osmolal gap and urine anion gap.
- Develop the management of acid base disorders by a case based discussion.

Day 3

Critical Care Cases for Review - Part I.

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

- Detect acute liver failure (ALF) and develop appropriate plans for management of ALF and acetaminophen OD.
- Detect pulmonary edema in the ICU and formulate a plan for the management of ARDS.
- Integrate the management of a patient with cardiac arrest based on AHA-ACLS Guidelines with consideration for therapeutic hypothermia and develop a brain death protocol.

Pneumonia.

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

- Differentiate the presentation of various cases of pneumonia and management.
- Distinguish the different pathogens that cause pneumonia.
- Apply evidence-based recommendations for prevention of pneumococcal pneumonia.
- Plan the approach to health care associated pneumonia.

Novel Oral Anticoagulants.

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

- Differentiate the advantages and disadvantages of commonly used anticoagulants.
- Employ evidence-based anticoagulation bridging regimens.
- Assess the approved indications for various anticoagulation agents.
- Apply the evidence-based indications for anticoagulation in hospitalized patients.

Update in Perioperative Medicine.

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

- Appraise pre-operative cardiac risk stratification and management strategies, as per the ACC/AHA Risk Clinical Predictors.
- Determine the role of non-invasive stress testing, echocardiography, coronary angiography and the use of biomarkers to assess peri-operative cardiac risk, as per the ACC/AHA (2014) Perioperative CV Evaluation Guidelines.
- Relate the indications for beta blockers, statins and aspirin in the peri-operative period.
- Evaluate the bleeding risks of commonly prescribed medications and OTC supplements taken pre-operatively.

Day 4

Septic Shock.

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

- Define shock and differentiate the various types of shock.
- Develop and apply the concept of sepsis management bundles.
- Formulate and manage the early resuscitation of septic shock, vasopressor use and monitoring.
- Specify the current controversies in management of septic shock based on SCCM/Survival Sepsis Campaign Guidelines.

Pulmonary Cases for Review – Part II.

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

- Identify and properly evaluate sleep apnea and excessive daytime sleepiness.
- Specify the various causes of hemoptysis and develop an appropriate plan for management.
- Apply the evidence-based recommendations of pulmonary embolism including thrombolysis or appropriate referral for vena caval filters.

Approach to the Management of Stroke.

Upon completion of this session, the participant should be able utilize the latest evidence based medicine and guidelines to: ^{EBM, GL, COMP}

- Develop a strategy to assess the common presentations of stroke/TIA.
- Utilize current initial treatment strategies appropriately.
- Develop a strategy to stratify the risk of stroke.
- Develop a secondary prevention plan.



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Approach to the Management of Chest Pain.

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

1. Evaluate the complaint in the context of history, physical exam, and EKG findings.
2. Develop a strategy to use cardiac biomarkers in the evaluation of ACS.
3. Use recent research studies and guidelines to develop an approach to the patient with chest pain.

2. Detect and assess hypertensive emergencies in the ICU and prescribe appropriate management.
3. Develop the management of a patient with acute gastro-intestinal bleeding.

Day 5**Approach to the Management of Diabetes in the Hospitalized Patient.**

Upon completion of this session, the participant should be able to utilize the latest evidence based medicine and guidelines to: ^{EBM, GL, COMP}

1. Develop a diabetes treatment strategy that identifies and reaches a target glucose.
2. Develop a diabetes treatment strategy that integrates the issues of chronic management.
3. Develop a diabetes treatment strategy that utilizes insulin effectively.

Strategies to Address the Issue of Preventable Hospital Readmissions.

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

1. Identify the factors which contribute to increase risk of readmission.
2. Stratify the risk for readmission utilizing evidence-based tools.
3. Develop a transition of care strategy to reduce the likelihood of a preventable readmission.

COPD – Overview of Patient Management.

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

1. Appraise the definition and integrate the pathophysiology of COPD.
2. Assess the clinical management of various issues regarding COPD.
3. Treat acute exacerbations and outpatient management including long-term oxygen and pharmacologic treatment based on ATS/ACCP Guidelines.
4. Evaluate the need of referral for surgical and newer treatments for emphysema.

Critical Care Cases for Review - Part II.

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

1. Detect acute renal failure in the ICU and employ appropriate management using the International Consensus Guidelines.