

Enhancing Clinical Excellence

CME Sponsors:American Medical Seminars, Inc.Activity Title:Primary Care and Women's Health: An Update and ReviewActivity Dates:May 6-10, 2019Presenting Faculty:Herbert L. Muncie, Jr., M.D. and Albert J. Peters, D.O., F.A.C.O.G.

NARRATIVE DESCRIPTION

Following this course, the participant should be able to appraise the typical etiology of the Gynecologic disorders presented; apply improved diagnostic methods and ordering of tests in the Primary Care office and Emergency Medicine setting; choose the appropriate treatment and drugs for commonly seen GYN disorders as well as identify treatment failures vs. recurrence. This activity is expected to result in improved competence when making an 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, with a focus on diagnosis, treatment and when to refer. Since Women's Health and Gynecology is a field of medicine that covers various aspects of different specialties and is highly requested, this course was designed to cover a wide range of topics essential to all practitioners at the level of a practicing physician.

SPECIFIC TOPIC OBJECTIVES Day 1

Amenorrhea.

Upon completion of this session, using ACOG Practice Guidelines, the participant should be able to: $_{\rm GL,\ COMP}$

- 1. Assess the various causes of primary and secondary amenorrhea and their associated health risks, as well as apply the appropriate evaluation for both.
- 2. Begin a management plan specific to the etiology of amenorrhea.
- 3. Categorize the various anatomic and functional levels of distinction with respect to amenorrhea.

Anemia – A Finding, Not Yet a Diagnosis.

Upon completion of this session, using the Cochrane Abstract Database and AAFP Guidelines, the participant should be able to: EBM,GL, COMP

- 1. Distinguish the etiologies for the common anemias.
- 2. Construct the diagnostic evaluation to determine the etiology of each anemia.
- 3. Develop the therapeutic options for each identified anemia.
- 4. Formulate the appropriate follow-up evaluations for assessing the treatment efficacy.

Abnormal Uterine Bleeding

Upon completion of this session, using ACOG Practice Guidelines, the participant should be able to: $_{\rm GL,\ COMP}$

1. Define abnormal uterine bleeding.

- 2. Differentiate between functional and organic causes.
- 3. Manage most non-surgical etiologies of this problem.

Contraceptive Options - Helping Women Make an Informed Choice.

Upon completion of this session, using the ACOG Practice Guidelines and the Cochrane Abstract Database, the participant should be able to: $^{\rm EBM,GL,}_{\rm COMP}$

- 1. Appraise the pharmacologic differences in oral contraceptives and their role in contraceptive efficacy.
- 2. Formulate the treatment options for contraception other than oral contraceptives.
- 3. Specify the relative and absolute contraindications to oral contraceptives.
- 4. Relate the circumstances that would be eligible for emergency contraception and the appropriate emergency contraception method for each situation.

Day 2

Chronic Anovulation.

Upon completion of this session, using ACOG Guidelines, the participant should be able to:

- 1. Discriminate between the hypothalamic, pituitary and ovarian causes of anovulation.
- 2. Investigate associated health risks.
- Formulate an appropriate treatment regimen.

Osteoporosis: Treatment and Prevention.

Upon completion of this session, using the USPSTF, NOF Guidelines and the Cochrane Abstract Database, the participant should be able to: $^{\rm EBM,GL,}_{\rm COMP}$

- 1. Debate the importance of the risk factors for an osteoporosis fracture.
- 2. Employ the diagnostic testing for patients at risk with osteoporosis.
- 3. Select the therapeutic medication to treat osteoporosis based upon the indications and side effects.
- 4. Assess the therapeutic role of repeating the DXA scan in patients treated for osteoporosis.

Menopause: Myths and Realities.

Upon completion of this session, using ACOG Practice Guidelines and recommendations from the North American Menopause Society (NAMS), the participant should be able to: EBM,GL, COMP

- 1. Classify the various issues that face the menopausal woman.
- 2. Differentiate between true concerns and current anecdotal myths.
- 3. Discuss topics such as: osteoporosis, cardiovascular disease, breast cancer and

© 2019 American Medical Seminars® ALL RIGHTS RESERVED

www.AmericanMedicalSeminars.com C:\Users\kstrong\Dropbox (CME4Life)\AMS Documents\AMSFiles\2018-2019(S33A21V16)\33rdSeries-Live\2.3Objectives\20190506-Gyn-MunciePeters\MunciePetersOBJ.doc



Enhancing Clinical Excellence

 CME Sponsors:
 American Medical Seminars, Inc.

 Activity Title:
 Primary Care and Women's Health: An Update and Review

 Activity Dates:
 May 6-10, 2019

 Presenting Faculty:
 Herbert L. Muncie, Jr., M.D. and Albert J. Peters, D.O., F.A.C.O.G.

endometrial cancer as well as their current therapies.

4. Critically evaluate evidence-based menopause literature.

Migraine Headaches – Update on Diagnosis and Treatment.

Upon completion of this session, using the International Headache Society and U.S. Headache Consortium Guidelines and the National Guideline Clearinghouse and the evidence-based reports from Clinical Evidence, the participant should be able to: EBM,GL, COMP

- 1. Construct the approach for evaluating a patient with possible migraine headaches.
- 2. Assess the advantages of supportive therapy and lifestyle changes in treating migraine headaches compared to pharmacologic therapy.
- 3. Appraise the pharmacologic options for treating the acute pain of a migraine headache.
- 4. Recommend a prophylactic therapy regimen for patients with recurrent migraine headaches.

Day 3

Hirsutism.

Upon completion of this session, using ACOG Practice Guidelines, the participant should be able to: GL, COMP

- 1. Understand the pathophysiology of abnormal body hair growth in women.
- 2. Differentiate the source of androgen excess.
- 3. Employ current treatment options.

Evaluation and Initial Management: Benign Breast Disease.

Upon completion of this session, using the American Cancer Society Guidelines and the Cochrane Abstract Database, the participant should be able to: $^{\rm EBM,GL,}_{\rm COMP}$

- 1. Differentiate the signs and symptoms associated with benign breast disease.
- 2. Formulate an evaluation for breast pain (mastalgia), breast lumps, and nipple discharge.
- 3. Specify the treatment options for breast pain, nipple discharge and breast infections.
- 4. Distinguish the symptoms and physical findings associated with rare benign breast disease conditions.

Infertility for the Primary Care Physician.

Upon completion of this session, using Guidelines set forth by the American Society of Reproductive Medicine, the participant should be able to: ^{GL, COMP}

- 1. Historically evaluate the infertile couple.
- 2. Determine when to begin a work-up for the infertile couple.
- 3. Perform a basic evaluation for infertility.

- 4. Provide a basic treatment plan for the infertile couple.
- 5. Determine when to refer the infertile couple for specialized care.

Ischemic Heart Disease in Women.

Upon completion of this session, using the American College of Cardiology, the American Heart Association, the USPSTF Guidelines and the Cochrane Abstract Database, the participant should be able to: ^{EBM,GL, COMP}

- 1. Differentiate the symptoms that women with coronary artery disease (CAD) exhibit in contrast to those experienced by men.
- 2. Recommend the evidence-based interventions to prevent CAD in women.
- 3. Formulate the recommendations to treat the risk factors for CAD in women.
- 4. Specify the treatment required for women with proven CAD.

Day 4

Treatment of Sexually Transmitted Infections.

Upon completion of this session, using the CDC Guidelines and the Cochrane Abstract Database, the participant should be able to: ^{EBM,GL, COMP}

- 1. Determine the appropriate diagnostic testing for complaints suggestive of a sexually transmitted infection.
- 2. Select the therapy for the commonly encountered sexually transmitted infections.
- 3. Formulate the follow-up testing and evaluations for sexually transmitted infections.
- 4. Recommend the therapeutic options for preventing herpes simplex infections.

Premenstrual Syndrome.

Upon completion of this session, using ACOG Guidelines and NIH Guidelines, the participant should be able to: $^{\rm GL,\ COMP}$

- 1. Correctly diagnose patients with this disorder using NIH guidelines.
- 2. Utilize current effective and FDA-approved therapies.
- 3. Formulate an appropriate differential diagnosis for PMS.

Venous Thromboembolism (VTE): Diagnosis and Treatment.

Upon completion of this session, using the ACCP and ATS Guidelines and the Cochrane Abstract Database, the participant should be able to: ^{EBM,GL, COMP}

- 1. Determine the diagnostic testing for evaluating a patient for possible VTE.
- 2. Apply the algorithm for diagnosing a pulmonary embolism in multiple clinical settings.



SPECIFIC OBJECTIVES

Enhancing Clinical Excellence

 CME Sponsors:
 American Medical Seminars, Inc.

 Activity Title:
 Primary Care and Women's Health: An Update and Review

 Activity Dates:
 May 6-10, 2019

 Presenting Faculty:
 Herbert L. Muncie, Jr., M.D. and Albert J. Peters, D.O., F.A.C.O.G.

- Differentiate the advantages and disadvantages of outpatient treatment compared to inpatient treatment for venous thromboembolism (VTE).
- 4. Order the frequency of monitoring and the adjustments needed for warfarin therapy in the treatment of VTE.

Pelvic Pain.

Upon completion of this session, using ACOG Practice Guidelines, International Pelvic Pain Society (IPPS) and the Cochrane Abstract Database, the participant should be able to: EBM,GL, COMP

- 1. Assess the patient with acute or chronic pain.
- 2. Identify the differential diagnosis and choose appropriate management options for the patient.
- 3. Differentiate patients who require immediate attention to their pelvic pain versus the chronic pain patient.

Day 5

Gynecologic Emergencies.

Upon completion of this session, using ACOG and CDC Guidelines, the participant should be able to: $^{\rm GL}_{\rm COMP}$

- 1. Recognize the more common and significant gynecologic emergencies.
- 2. Formulate a rapid and concise treatment plan for various emergencies, such as:
 - a. Ectopic pregnancies,
 - b. Uterine hemorrhage,
 - c. Gynecologic infections.
 - 3. Provide follow-up care to the postgynecologic emergency patient.

Adult Health Screening and Immunizations – Evidence-Based Approach.

Upon completion of this session, using the USPSTF and the Cochrane Abstract Database, the participant should be able to: $^{\rm EBM,GL,\ COMP}$

- 1. Apply the evidence-based recommendations for preventive screening tests for adults.
- 2. Determine the immunizations required for adults.
- 3. Appraise the side effects of adult immunizations.
- 4. Select the contraindications for each adult immunization and their alternative therapy.
- 5. Plan when screening tests can be discontinued in adults.

Endometriosis.

Upon completion of this session, using ACOG Practice Guidelines and Practice Committee Guidelines - ASRM, the participant should be able to: GL,, COMP

1. Have a high degree of accuracy in the suspicion of endometriosis based on symptoms and physical examination.

- 2. Review current management options with particular attention toward agents that can be effectively used by the primary care provider.
- 3. Guide patients with regard to long-term management for pain and/or fertility considerations.
- 4. Understand the risks and benefits of various treatment options for endometriosis as well as recurrence risk.

Use and Interpretation of Thyroid Tests.

Upon completion of this session, using the American Thyroid Association Guidelines and the Cochrane Abstract Database, the participant should be able to: EBM,GL, COMP

- 1. Integrate the serum tests for thyroid function.
- Interpret thyroid tests results that occur in clinical settings.
- 3. Recommend the appropriate follow-up testing of abnormal thyroid tests and the frequency of these evaluations.
- 4. Appraise the need to treat subclinical hypothyroidism or subclinical hyperthyroidism.