



CME Sponsors: American Medical Seminars, Inc.
 Activity Title: **Primary Care: Top Topics in Geriatrics**
 Activity Dates: February 4-8, 2019
 Presenting Faculty: Gary H. Oberlender, M.D., F.A.C.P. and John W. Pendleton, M.D., F.A.C.P., F.A.C.R.

NARRATIVE DESCRIPTION

Following this course, the participant should be able to identify the etiologies, epidemiologies and presenting clinical manifestations of the disorders described; implement a differential diagnosis and laboratory assessment plans; outline the therapeutic intervention, possible complications and preventive measures. 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.

When indicated in the specific objectives, emphasis will be on aligning physician behavior with current guidelines and evidence-based medicine with a focus on diagnosis, treatment and when to refer. In consideration of our aging population, a physician is expected to be competent in the fundamentals of Geriatric Medicine and rely upon a specialist only when absolutely necessary; therefore, this course was designed as a review and update for all practitioners at the level of a practicing physician.

SPECIFIC OBJECTIVES

The attendees of this program will be instructed on the following Geriatric and Rheumatologic issues with an emphasis on practical and useful information that may be evaluated for immediate application to their individual practice settings.

DAY 1**Delirium in the Elderly - Current Concepts.**

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

1. Specify diagnostic features and common causes of delirium in seniors.
2. Distinguish the causes of persistent delirium.
3. Use evidence based medicine to formulate treatment approaches to delirious seniors.
4. Recognize treatment options for intermittent agitation using evidence based medicine.

Practical Points for the Musculoskeletal Exam for the Primary Care Provider.

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

1. Perform an evidence based screening exam to detect evidence of an underlying arthritis in an asymptomatic patient.
2. Apply evidence based maneuvers in the shoulder exam to detect an impingement syndrome and adhesive capsulitis.
3. Relate the location of pain and the earliest exam changes indicative of arthritis of the hip.

4. Employ the most sensitive test to detect effusions of the knee joint.

Evaluation and Treatment of Dementia in Seniors.

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

1. Determine the common causes of cognitive dysfunction and dementia in seniors.
2. Develop an evidence based evaluation of seniors with cognitive dysfunction.
3. Evaluate the relative risks and benefits of available treatment options for dementia in seniors.
4. Distinguish the central role of caregiver education and support in treating seniors with dementia.

Osteoarthritis: Diagnosis and Treatment in the Older Patient.

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

1. Appraise the newer understandings of the pathophysiology of OA.
2. Distinguish the typical and atypical clinical features of OA.
3. Utilize the American College of Rheumatology guidelines for the treatment of OA of the hand, hip and knee.
4. Distinguish OA symptoms from those of other localized or generalized disorders.

DAY 2**Advanced Nutritional Assessment and Therapy.**

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

1. Integrate readily available clinical data to make accurate nutritional assessments in seniors.
2. Relate metabolic changes in aging to assess risk for malnutrition.
3. Apply an evidence based approach to treatment of undernutrition in seniors.

Osteoporosis: Contemporary Diagnosis and Treatment.

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

1. Assess the differences in the WHO, physiologic, and clinical definition of osteoporosis.
2. Use the WHO Fracture Risk Assessment Tool (FRAX) to assess the absolute 10 year fracture risk for an individual patient.
3. Determine the most appropriate treatment for patients with osteopenia and osteoporosis using the National Osteoporosis Guidelines.
4. Use an evidence based method to assess the adequacy of Vitamin D supplementation.



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Vitamin B-12 and Vitamin D in Seniors.

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

1. Integrate the normal physiology of Vitamins B-12 and D.
2. Differentiate the pathologic syndromes associated with B-12 and D deficiency.
3. Develop an evidence based evaluation of B-12 and D deficiency for seniors.
4. Develop an evidence based approach to treatment options for B-12 and D in seniors.

The Geriatric Patient: Evidence-Based Answers to Frequently Asked Questions.

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

1. Apply evidence based recommendations to patients questions about the use of multivitamins.
2. Recommend the most appropriate treatment for nocturnal leg cramps.
3. Advise the appropriate dietary recommendations for patients with arthritis.
4. Recommend evidence based treatment for restless leg syndrome.

DAY 3

Health Maintenance and Exercise for the Older Patient.

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

1. Apply evidence-based cancer screening recommendations from the United States Preventive Task Force and the American Geriatric Society to the older patient.
2. Prescribe recommended vaccinations for the older patient based on the Advisory Committee on Immunization Practices of the CDC.
3. Assess the risks of an exercise program and how to minimize them in the older patient.
4. Specify the components of an exercise program.

Sensible Approaches to Geriatric Infections.

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

1. Recognize atypical presentations of infectious illness in the elderly.
2. Differentiate the causes of pneumonia and UTI in seniors.
3. Specify an evidence based approach to appropriate antibiotic usage.
4. Appraise evidence based considerations in emerging antibiotic resistance.
5. Apply evidence based options in the prevention and treatment of *C. difficile* illness in seniors.

A Diagnostic and Therapeutic Approach to the Patient Presenting with an Inflammatory Arthritis.

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

1. Utilize the physical examination findings to narrow the differential diagnosis.
2. Use evidence based information in choosing the most appropriate lab tests in evaluating a patient presenting with an inflammatory arthritis.
3. Apply the American College of Rheumatology Classification Criteria in patients suspected of having rheumatoid arthritis.
4. Determine the most appropriate disease modifying medication for a patient based on the American College of Rheumatology treatment guidelines.

Geriatric Depression: Advances in Diagnosis and Treatment.

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

1. Differentiate the variety of clinical presentations of depressive disorders in seniors.
2. Appraise the utility of, and plan to use, the Geriatric Depression Scale.
3. Apply an evidence based approach to antidepressant drug therapy in seniors.
4. Apply the evidence based recommendations for use of non-drug antidepressant therapy.

DAY 4

Sensible Prescribing Practices for the Elderly.

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

1. Appraise and appreciate the limits of published trials studies on drug safety and efficacy for seniors.
2. Assess the subtle but significant drug side effects in the elderly.
3. Distinguish undesirable prescribing practices and employ better approaches based on current evidence-based referenced literature.

Treatment of Chronic Pain in the Elderly.

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

1. Relate the adverse effects of NSAIDs in the elderly and prescribe them in accordance with the American College of Rheumatology guidelines.
2. Recognize the risk factors associated with an increased risk of accidental overdose from opiates.
3. Specify the ADRs associated with opiate use in the elderly.



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4. Develop an evidence based treatment plan for a patient with neuropathic pain.

Contemporary Issues in End of Life Care.

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

1. Develop a practical approach to assessment of the whole patient in a hospice setting.
2. Formulate effective approaches to common physical symptoms in the terminally ill.
3. Integrate effective clinical care of patients and their families in the last days of life based on current evidence-based literature, Guidelines and recommendations of the American Geriatrics Society and the National Hospice and Palliative Care Organization.
4. Relate dementia as a terminal illness.

Office Orthopedics in the Older Patient.

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

1. Recognize the common causes of acute low back pain in the elderly.
2. Use evidence based maneuvers to assess the likelihood of a patient having spinal stenosis.
3. Differentiate between the different metabolic pathways of the statins and relate how that would impact prescribing for patients on multiple other drugs.
4. Use evidence based techniques to determine the likelihood of a patient having a rotator cuff tear.

DAY 5

Polymyalgia Rheumatica and Giant Cell Arteritis.

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

1. Integrate and relate the typical symptoms, physical findings, and laboratory abnormalities in polymyalgia rheumatica.
2. Use evidence based information to determine the appropriate initial dose of prednisone in patients with PMR.
3. Detect the typical and atypical presentations of GCA.
4. Determine the appropriate indication and technique for temporal artery biopsy.
5. Prescribe the most effective treatment and distinguish the most serious complications of GCA.

A Practical Approach to Falls and Urinary Incontinence in the Elderly.

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

1. Integrate the concept of multifactorial causes underlying falls and employ the American

- Geriatrics Society Guidelines for the Prevention of Falls and urinary incontinence in seniors.
2. Develop a full assessment approach to evaluate different causes, using detailed physical examination and functional performance evaluations.
3. Differentiate the effects of normal aging from pathologic processes and adverse drug effects as risk factors for falls and incontinence.
4. Apply NIH guidelines to formulate a preventative and therapeutic plan of care.

Gout and Pseudogout in the Elderly.

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

1. Distinguish the unique characteristics of gout in the elderly.
2. Develop a treatment plan based on the American College of Rheumatology treatment guidelines for the treatment of gout.
3. Determine the clinical manifestations of calcium pyrophosphate deposition.
4. Differentiate the polarized microscopic findings for uric acid and CPPD crystals.

Improving Communication Skills in Medical Practice.

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

1. Appraise the variety of ways that people perceive communication and process information.
2. Assess your personal communication strengths and limitations.
3. Determine communication issues unique to older patients.
4. Develop practices and apply skills to maximize effective communication and listening based on current literature.