Clinical Updates for Nurse Practitioners and Physician Assistants: 2016

Activity Evaluation Summary

CME Activity: Clinical Updates for Nurse Practitioners and Physician Assistants
Saturday, October 29, 2016
Sheraton Charlotte Airport
Charlotte, NC

Course Directors: Deborah Paschal, CRNP and Gregg Sherman, MD

Date of Evaluation Summary: November 11, 2016

In November 2016, the National Association for Continuing Education (NACE) sponsored a live CME activity, **Clinical Updates for Nurse Practitioners and Physician Assistants: 2016**, in Charlotte, NC.

This educational activity was designed to provide nurse practitioners and physician assistants the opportunity to learn about diagnosis and management of patients with varied conditions such as heart failure, psoriasis, atopic dermatitis, COPD and alpha-1 antitrypsin deficiency, idiopathic pulmonary fibrosis, and atrial fibrillation.

In planning this CME activity, the NACE performed a needs assessment. A literature search was conducted, national guidelines were reviewed, survey data was analyzed, and experts in each therapeutic area were consulted to determine gaps in practitioner knowledge, competence or performance.

Two hundred and two healthcare practitioners registered to attend Clinical Updates for Nurse Practitioners and Physician Assistants: 2016 in Charlotte, NC. One hundred and one healthcare practitioners actually participated in the conference. Each attendee was asked to complete and return an activity evaluation form prior to the end of the conference. Ninety-eight completed forms were received. The data collected is displayed in this report.

CME ACCREDITATION

The Association of Black Cardiologists, Inc. is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The Association of Black Cardiologists, Inc. designates this educational activity for a maximum of 1 *AMA PRA Category 1 Credit*™ . Physicians should claim only the credit commensurate with the extent of their participation in the activity.

The National Association for Continuing Education is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The National Association for Continuing Education designates this live activity for a maximum of 6 *AMA PRA Category 1 Credits*™ . Physicians should claim only the credit commensurate with the extent of their participation in the activity.

National Association for Continuing Education is approved as a provider of nurse practitioner continuing education by the American Association of Nurse Practitioners. AANP Provider Number 121222. This program has been approved for 7 contact hours of continuing education (which includes 3.25 pharmacology hours).

AAPA accepts certificates of participation for educational activities certified for *AMA PRA Category 1 Credit*™ from organizations accredited by ACCME or a recognized state medical society. PAs may receive a maximum of 7 Category 1 credits for completing this activity.

Integrated Item Analysis Report

What is your professional degree?

Response	Frequency	Percent	Mean: 3.25
MD	1	1.02	
DO	0	0.00	
NP	75	76.53	
PA	16	16.33	
RN	2	2.04	
Other	2	2.04	
No Response	2	2.04	

Indicate the number of patients you see each week in a clinical setting regarding each therapeutic area listed: Heart Failure:

Response	Frequency	Percent	Mean: 2.45
None	23	23.47	
1-5	37	37.76	
6-10	20	20.41	
11-15	8	8.16	
16-20	5	5.10	
21-25	0	0.00	
> 25	3	3.06	
No Response	2	2.04	

Indicate the number of patients you see each week in a clinical setting regarding each therapeutic area listed: Psoriasis:

Response	Frequency	Percent	Mean: 1.91
None	23	23.47	
1-5	64	65.31	
6-10	9	9.18	
11-15	0	0.00	
16-20	0	0.00	
21-25	0	0.00	
> 25	1	1.02	
No Response	1	1.02	

Indicate the number of patients you see each week in a clinical setting regarding each therapeutic area listed: Atopic Dermatitis:

Response	Frequency	Percent	Mean: 2.38
None	20	20.41	
1-5	47	47.96	
6-10	15	15.31	
11-15	6	6.12	
16-20	1	1.02	
21-25	4	4.08	
> 25	2	2.04	
No Response	3	3.06	

Indicate the number of patients you see each week in a clinical setting regarding each therapeutic area listed: COPD:

Response	Frequency	Percent	Mean: 3.11
None	17	17.35	
1-5	27	27.55	
6-10	20	20.41	
11-15	10	10.20	
16-20	10	10.20	
21-25	6	6.12	
> 25	6	6.12	
No Response	2	2.04	

Indicate the number of patients you see each week in a clinical setting regarding each therapeutic area listed: Idiopathic Pulmonary Fibrosis:

Response	Frequency	Percent	Mean: 1.49
None	56	57.14	
1-5	36	36.73	
6-10	2	2.04	
11-15	1	1.02	
16-20	1	1.02	
21-25	0	0.00	
> 25	0	0.00	
No Response	2	2.04	

Indicate the number of patients you see each week in a clinical setting regarding each therapeutic area listed: Atrial Fibrillation:

Response	Frequency	Percent	Mean: 2.78
None	18	18.37	
1-5	32	32.65	
6-10	22	22.45	
11-15	10	10.20	
16-20	3	3.06	
21-25	5	5.10	
> 25	4	4.08	
No Response	4	4.08	

Upon completion of this activity, I can now: Recognize risk factors and use of biomarkers in the diagnosis, prognosis and risk stratification of heart failure; Understand the pathophysiologic and cultural differences between racial groups in determining management strategies for heart failure; Demonstrate ability to recognize patients at risk for early heart failure based on physical exam and other clinical factors; Implement evidence based strategies to decrease symptoms and improve quality of life for patients with heart failure.

Response	Frequency	Percent	Mean: 1.23
Yes	74	75.51	
Somewhat	22	22.45	
Not at all	0	0.00	
No Response	2	2.04	

Upon completion of this activity, I can now: Recognize the clinical presentation and current immunopathophysiology of psoriasis and psoriatic arthritis; Identify and discuss the significance of the ever-expanding numbers of co-morbid conditions and emerging biofactors associated with psoriatic disease; Discuss current therapeutic protocols for psoriasis and its related disorders; Interpret latest evidence-based data on emerging treatment options for psoriatic disease.

Response	Frequency	Percent	Mean: 1.18
Yes	81	82.65	
Somewhat	15	15.31	
Not at all	1	1.02	
No Response	1	1.02	

Upon completion of this activity, I can now: Review and characterize the clinical features of atopic dermatitis (AD); Discuss the current immunopathophysiology of AD; Identify strategies for comprehensive treatment; Identify and position emerging topical therapies as well as targeted biologic agents as a new treatment category for AD.

Response	Frequency	Percent	Mean: 1.20
Yes	79	80.61	
Somewhat	17	17.35	
Not at all	1	1.02	
No Response	1	1.02	

Upon completion of this activity, I can now: Discuss diagnostic strategies for alpha-1 antitrypsin deficiency (AATD); Incorporate testing into COPD treatment algorithm; Describe evolving treatment options for patients with AATD.

Response	Frequency	Percent	Mean: 1.27
Yes	69	70.41	
Somewhat	25	25.51	
Not at all	0	0.00	
No Response	4	4.08	

Upon completion of this activity, I can now: Implement an appropriate strategy for diagnosing a patient with suspected idiopathic pulmonary fibrosis (IPF); Discuss and contrast the available pharmacotherapeutic options for patients with IPF; Describe the non-pharmacotherapeutic options for IPF patients; Establish the clear role for the primary care clinician in diagnosing and managing disease in IPF patients.

Response	Frequency	Percent	Mean: 1.23
Yes	71	72.45	
Somewhat	21	21.43	
Not at all	0	0.00	
No Response	6	6.12	

Upon completion of this activity, I can now: Identify those patients at risk for cardioembolic stroke who are appropriate candidates for anticoagulation; Recognize common misperceptions about anticoagulation risk to improve communication and patient adherence; Discuss the management of bleeding in patients on anticoagulants; Describe the role of continued anticoagulation in the setting of emerging non-pharmacologic therapy.

Response	Frequency	Percent	Mean: 1.15
Yes	69	70.41	
Somewhat	12	12.24	
Not at all	0	0.00	
No Response	17	17.35	

Overall, this was an excellent CME activity:

Response	Frequency	Percent	Mean: 1.22
Strongly Agree	76	77.55	
Agree	19	19.39	
Neutral	1	1.02	
Disagree	0	0.00	
Strongly Disagree	0	0.00	
No Response	2	2.04	

Overall, this activity was effective in improving my knowledge in the content areas presented:

Response	Frequency	Percent	Mean: 1.23
Strongly Agree	75	76.53	
Agree	23	23.47	
Neutral	0	0.00	
Disagree	0	0.00	
Strongly Disagree	0	0.00	
No Response	0	0.00	

As a result of this activity, I have learned new and useful strategies for patient care:

Response	Frequency	Percent	Mean: 1.24
Strongly Agree	75	76.53	
Agree	21	21.43	
Neutral	1	1.02	
Disagree	0	0.00	
Strongly Disagree	0	0.00	
No Response	1	1.02	

As a result of this activity, I have learned new strategies for patient care. List these strategies:

Response
Will discuss Alpha1 testing with appropriate patients more, consider history, will implement other means for CHF d/t ethnicity. Have to work with bibasilar crackles/SOB/chronic cough
I'm in urology
New medications for heart failure that I was not familiar with in the past (Ivabradine and Sacubitril). New awareness of psoriatic arthritis
Testing for ATT deficiency in COPD patients, pursuing why patients have "chronic changes" on CXR
Consider race with heart failure treatment, obtain lab results for AATD for COPD
Need office to buy spirometry, psoriasis
Patient with psoriatic arthritis and 9LFT will encourage to see specialist for treatment
I work in a surgical clinic and the knowledge regarding optimization of heart failure, COPD, Diabetic, AFib patients prior to surgery is useful
Initiate treatment of psoriasis, reminded of importance of Bidil in AA population with HFrEF
Identification of patients with risk factors for CHF
HF treatment option i.e. Ivabradine, Ibumetrix for scabies, CHADS2/VAS scoring
Considering race with HF management. Identifying comorbidities in patients with psoriasis, managing COPD, testing for IPF
Based on patient condition, preselection, apply new therapies if appropriate
Diagnosis of heart failure and treatment, psoriasis treatment, different diagnosis score of AFib, IPF diagnosis, ADD
No Bactum with MTX, different bet. systolic/diastolic CHF (regarding EF)
Looking at full patient, review symptoms for IPF

As a result of this activity, I have learned new strategies for patient care. List these strategies:

Response
Early recognition of heart failure and early initiation of treatment, use of biomarkers, diagnose COPD, AATD and spirometry
Risk assessment, management, education
I specialize in Nephrology, so these activities will keep me up to date on more Primary Care topics
Checking more patients for COPD and Alpha-1
Atopic dermatitis approaches, considering ethnicity in heart failure
Recognize heart failure/ethnic groups risks, appropriate PE on the heart failure patient
Consider race when treating HF; consider testing for AATD in all COPD patients. Consider using spirometry more regularly
Spirometry
Use of sacubitril in HF, optimize in proven meds, oral for recalcitrant AD
Expanding knowledge options for heart failure. Using Carlamor/will try Invokana in a DM patient with HF
Appropriate treatment for CHF to include race. Early treatment and referral for patients with IPF
New drug to manage HF in blacks; increased understanding of HF better; better identification of patient with AP
AIP testing, spirometry, classify COPD
Medications for psoriasis
Test for Alpha-1, use spirometry in office
New Rx for T2DM, treatment of CHF, identifying Derm disorders
Consideration of ethnicity in CHF. Treatment of psoriasis/dermatitis
Chronic conditions on CXR to HRCT and do not give bronchodilators IPF. Refer to lung specialist in regards to #1
I will be more aggressive with treating COPD based on GOLD stage and CHF based on guidelines
As I do not directly manage these patients, as I work in specialty care, it makes me more aware of treatment options/strategy used in patients that have these comorbid conditions
New emerging treatment for patient population
Knowing when to refer a moderate to high risk patient to a Cardiologist; now more aware of a lot of the new pharmacologic agents available
Testing spirometry and AATD
Using GOLD criteria for COPD treatment more effectively, using CHAD2VASC-with definite need for anticoagulation; appropriate imaging for lung disease
Specific and definitive diagnosis of IPF
Great topics and speakers. Very clear, knowledgeable
Use biomarkers to identify HF (BNP). Prescribe Elidel for AD or episerism, consider high resolution CT diagnosis IPF
Additional testing to assure not missing vital details, ie spirometry
Evaluate for CHF and refer appropriately. Refer to Dermatologist. Rashes unresponsive to Isthine treatment; follow up to ensure compliance, refer appropriately lung disease
Identifying CHF-class, symptoms of Exacorestorn, when to refer to Cardiology, options to treat deratitis
When to add Ivabradine, when to start systemic of biologic therapy in psoriasis, doing AATD testing in COPD patients and HDCT scanning in IPF patients
Teaching lifestyle changes in patients with COPD
Diagnostic - when to order; what to look for in an assessment
Initiation of different therapies for CHF based upon ethnicity, assess for comorbidities in psoriasis, increase spirometry
When to consider Ivabradine

How likely are you to implement these new strategies in your practice?

Response	Frequency	Percent	Mean: 1.43
Very likely	71	72.45	
Somewhat likely	18	18.37	
Unlikely	0	0.00	
Not applicable	8	8.16	
No Response	1	1.02	

When do you intend to implement these new strategies into your practice?

Response	Frequency	Percent	Mean: 1.56
Within 1 month	69	70.41	
1-3 months	13	13.27	
4-6 months	4	4.08	
Not applicable	11	11.22	
No Response	1	1.02	

In terms of delivery of the presentation, please rate the effectiveness of the speaker: Elizabeth Ofili, MD - Heart Failure:

Response	Frequency	Percent	Mean: 4.84
Excellent	81	82.65	
Very Good	16	16.33	
Good	0	0.00	
Fair	0	0.00	
Unsatisfactory	0	0.00	
No Response	1	1.02	

In terms of delivery of the presentation, please rate the effectiveness of the speaker: Paul S. Yamauchi, MD - Psoriasis:

Response	Frequency	Percent	Mean: 4.76
Excellent	78	79.59	
Very Good	16	16.33	
Good	2	2.04	
Fair	1	1.02	
Unsatisfactory	0	0.00	
No Response	1	1.02	

In terms of delivery of the presentation, please rate the effectiveness of the speaker: Paul S. Yamauchi, MD - Atopic Dermatitis:

Response	Frequency	Percent	Mean: 4.64
Excellent	71	72.45	
Very Good	19	19.39	
Good	5	5.10	
Fair	2	2.04	
Unsatisfactory	0	0.00	
No Response	1	1.02	

In terms of delivery of the presentation, please rate the effectiveness of the speaker: Franck Rahaghi, MD - COPD:

Response	Frequency	Percent	Mean: 4.73
Excellent	72	73.47	
Very Good	20	20.41	
Good	3	3.06	
Fair	0	0.00	
Unsatisfactory	0	0.00	
No Response	3	3.06	

In terms of delivery of the presentation, please rate the effectiveness of the speaker: Franck Rahaghi, MD - Idiopathic Pulmonary Fibrosis:

Response	Frequency	Percent	Mean: 4.74
Excellent	73	74.49	
Very Good	19	19.39	
Good	3	3.06	
Fair	0	0.00	
Unsatisfactory	0	0.00	
No Response	3	3.06	

In terms of delivery of the presentation, please rate the effectiveness of the speaker: Daniel T. Thibodeau, PA-C - Atrial Fibrillation:

Response	Frequency	Percent	Mean: 4.75
Excellent	64	65.31	
Very Good	21	21.43	
Good	0	0.00	
Fair	0	0.00	
Unsatisfactory	0	0.00	
No Response	13	13.27	

To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Elizabeth Ofili, MD - Heart Failure:

Response	Frequency	Percent	Mean: 4.83
Excellent	80	81.63	
Very Good	16	16.33	
Good	0	0.00	
Fair	0	0.00	
Unsatisfactory	0	0.00	
No Response	2	2.04	

To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Paul S. Yamauchi, MD - Psoriasis:

Response	Frequency	Percent	Mean: 4.85
Excellent	83	84.69	
Very Good	13	13.27	
Good	1	1.02	
Fair	0	0.00	
Unsatisfactory	0	0.00	
No Response	1	1.02	

To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Paul S. Yamauchi, MD - Atopic Dermatitis:

Response	Frequency	Percent	Mean: 4.78
Excellent	80	81.63	
Very Good	13	13.27	
Good	4	4.08	
Fair	0	0.00	
Unsatisfactory	0	0.00	
No Response	1	1.02	

To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Franck Rahaghi, MD - COPD:

Response	Frequency	Percent	Mean: 4.85
Excellent	82	83.67	
Very Good	12	12.24	
Good	1	1.02	
Fair	0	0.00	
Unsatisfactory	0	0.00	
No Response	3	3.06	

To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Franck Rahaghi, MD - Idiopathic Pulmonary Fibrosis:

Response	Frequency	Percent	Mean: 4.86
Excellent	83	84.69	
Very Good	11	11.22	
Good	1	1.02	
Fair	0	0.00	
Unsatisfactory	0	0.00	
No Response	3	3.06	

To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Daniel T. Thibodeau, PA-C - Atrial Fibrillation:

Response	Frequency	Percent	Mean: 4.83
Excellent	70	71.43	
Very Good	14	14.29	
Good	0	0.00	
Fair	0	0.00	
Unsatisfactory	0	0.00	
No Response	14	14.29	

Which statement(s) best reflects your reasons for participating in this activity:

Response	Frequency	Percent	Mean: -
Topics covered	65	66.33	
Location/ease of access	71	72.45	
Faculty	7	7.14	
Earn CME credits	81	82.65	
No Response	2	2.04	

Future CME activities concerning this subject matter are necessary:

Response	Frequency	Percent	Mean: 1.58
Strongly agree	51	52.04	
Agree	36	36.73	
Neutral	8	8.16	
Disagree	0	0.00	
Strongly Disagree	1	1.02	
No Response	2	2.04	

What topics would you like to see offered as CME activities in the future?

Response
CXR interpretation, complicated psych patients refractory to SSRI/SNRS
Sickle Cell

What topics would you like to see offered as CME activities in the future?

Response
Understanding spirometry
Workshops or specific diseases - cardio, derm
More pediatric topics!
Rashes. IBS. Managing Primary Care emergencies
Women's Health. Psychiatry. How to read PFT's; inhaler use for patients, sarcoidosis
Xray interpretation. Current immunization guidelines. Clinical skills procedures
Oncology; Hematology; Psychiatric; Diabetes
Infectious Disease, Thyroid Disease and pain management
Pulmonary HTN with comorbid, COPD
EKG interpretation, reading xrays
Prenatal refresher, xray, dental emergencies, antibiotic refresher, high-risk pharmacology review
Movement disorders
Skills/procedures
Psychiatry in Primary Care, more Dermatology
CHF, diabetes, psych issues, respiratory disease, ovarian cancer, radiology - reading CXR
Asthma, Gout
Obesity and psych
Opioid abuse in Primary Care, COPD and AATD
HF, COPD/AAT
Asthma, fractures
EKG, review heart sounds, skip disorders in clinical family practice/most common ones
New diabetes agents, electrolyte derangements/treatment. New drug update. Cardio-renal syndrome, renal A and P, using diuretics
PFT - use of machine/reading results
Cardiovascular workshops for measuring heart failure
Diabetes/HTN update
Female Health, hot topics
Dementia (variation/types, diagnosis, treatment, and progression)
Obesity, treatment of HTN, newest guidelines, diagnosis, evaluation, treatment options. Metabolic syndrome
Workshops on Derm and Biopsy, wound care, podiatry - plantar fascitis, bunions, etc. COPD and spirometry evaluation
Managing asthma, COPD
Orthopedics!
Hematology; EKG workshop, cardiovascular workshops
Mental Health
Diet/nutrition workshops on assessment of JVD and Bronchialdietotrs, proper use
Reading of xrays
Cardiology w/s; not enough time for this wonderful cardiac w/s by Dr. Olif. Antibiotic usage in geriatric population. How to manage behavioral disturbance in patients with Dementia. CAD. Afib Part I and II - complex topic
Xray course, musculoskeletal exam and treatment, different types of anemias
Bug bites, any other skin, migraines, Neurology (seizures), anemia syndromes, pediatric, ICD-10, billing
Hemagloblaepatics
Insomnia in menopausal female, chronic back pain, Vertigo
More cardiac related
STEMI, NSTEMI, EKG interpretation, CKD, ventilator care
Treatment of pneumonia, treatment of UTI, management of gout, anemia evaluation, chest xrays
More CHF, preventive cardiology, more dermatology

What topics would you like to see offered as CME activities in the future?

Response
Musculoskeletal injuries and treatment options
Orthopedic topics. Pain management
ESRD, hypertension
Psychopharmacology, chest xray interpretation
Oncology
Differentiating different heart sounds, diagnostic testing and treatment options for each. Different causes of couch, how to approach and treat. Reading/interpreting PFT results and diagram
Depression, anxiety, sleep - non benzo
Inhaler use (teaching), heart failure diagnostic measures
EKG analysis, new antidepressants
Hep C diagnosis/management. Rheumatoid arthritis diagnosis and management, review of HTN pharm agents
More dermatology topics, pain management, more pharmacology, PFT/spirometry testing; hands on suturing/other workshops
Thyroid disease and labs, hormone replacement therapies
Eye disorders, urological conditions, interpretation of minor xrays, i.e. knees, elbows, CXR, sinus, ankle, foot
Dermatology, seizure, anxiety, opioid issues
Spirometry casing
Would like to have more cardiology workshops, xray reads as well, more COPD also
More heart failure updates
CHF/AFib. MI. Neuroctia, CVA seizures, ortho, head injuries, HA/migraines
Metabolic syndrome, Dementia, psychiatric disorders
Proper cancer screening
Cardiovascular. Reading of chest xray. Discussion of various inhalers used for COPD
Obesity, Women's Health, mental health and the use of antidepressants
Heart failure
CXR interpretation
Latest topics are always welcomed
Stress testing options
Insomnia, anxiety, depression, stress, new recommendations regarding cholesterol, musculoskeletal disorders, orthopedic issues
Psychiatry in Primary Care settings!

Additional comments:

Response
Take pulmonary fibrosis out and switch to women's/men's health
Add C/V workshop for handle on physical exam
Difficulty following Yamauchi's lecture, didn't like question format, too many all but except questions. These concerns may be due to my weakness with Dermatologic Diseases; however, I don't feel that my clinical understanding of Atopic Dermatitis and Psoriasis was improved after this lecture
I really appreciate all of the speakers and readiness to discuss the disease
Thank you!
All speakers very engaging, international and knowledgeable
Great conference - look forward to next year. Room cold all day
Would like more cardiology
Excellent instructors; good location; great topics
More of such CME will be great in the future

Additional comments:

Response
Franck Rahaghi excellent speaker, especially with complicated topics. A lot of the pre/post questions - the last talk was difficult at the end of the day - lots of study trials
Great CME! Thank you!
Dr. Yamauchi was excellent! Dr. Rahaghi was also excellent. Difficult subject!
Thank you!
I am a FNP and PMHNP - great way to review my FNP knowledge
Dr. Ofili is excellent
Excellent conference
Thank you for providing free educational CME. This is my third conference in the almost 5 years as an FNP
Great staff!
Absolutely the best CME I have attended in years!
Love Dr. Ofili - more please
Loved it! My first NACE!
Excellent program and location. The lunch speaker was the best
None, excellent, well-coordinated conference with outstanding speakers!
Elizabeth Ofili, MD great job, spoke a little quickly, combined with accent a little difficult to understand. Yamauchi had accent but spoke slowly, clearly, easy to understand
The information from Dr. Rahaghi was great. Needed more information on BOOP, more on radiologic imaging, would be of benefit. Thank you
Option to serve hot water for tea drinkers as not all attendees are coffee drinkers would be greatly appreciated
Nice hotel. Great CME activity
Excellent conference
Most of the reference slides were over 5 years old. There should be more up to date information. Today is world psoriasis day
Great conference
Great course, love the location! Complementary (offering continental breakfast, meals). Would like to see more hands-on/audience participation. Demonstrating use of inhalers, lung sounds
Great lecturers
Break is appreciated after every lecture
I would like to see more vendors with books and items for sale - that would be useful in practice
Flash drive with slides of content
Enjoyed product theater - speaker was very engaging
No cost for CME program a big bonus!