



In December 2010, the National Association for Continuing Education (NACE) sponsored a CME program, ***Challenges in Pulmonary and Critical: 2010***, in Weston, FL.

The focus of this CME activity was to provide an update in the prevention, diagnosis, and management of pulmonary disease to pulmonologists, hospitalists, and other health care providers who treat patients with pulmonary diseases. Current findings in pulmonary research in such topics as idiopathic pulmonary fibrosis, bronchiectasis in adults, pulmonary hypertension, interventional bronchoscopy, and alpha-1 antitrypsin deficiency were presented.

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.

One hundred fifty four healthcare practitioners registered to attend ***Challenges in Pulmonary and Critical: 2010***, in Weston, FL. Ninety four healthcare practitioners actually attended this conference. Each attendee was asked to complete and return an activity evaluation form prior to the end of the conference. Eighty three completed forms were received. The data collected is displayed in this report.

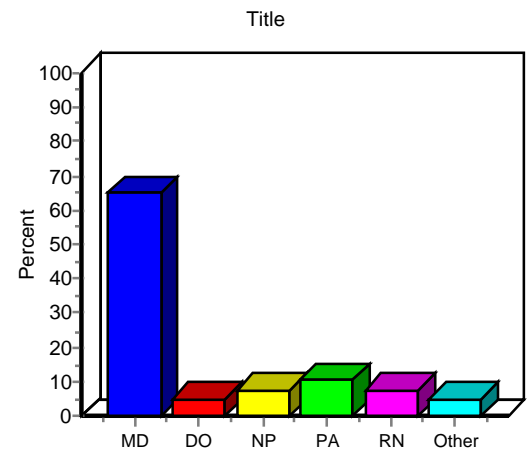
#### CME ACCREDITATION

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 educational activity for a maximum of 4 *AMA PRA Category 1 Credits™*. Physicians should only claim credit commensurate with the extent of their participation in the activity.

This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of Cleveland Clinic Florida and the National Association for Continuing Education. The Cleveland Clinic Florida is accredited by the ACCME to provide continuing medical education for physicians. The Cleveland Clinic Florida designates this educational activity for a maximum of 2 *AMA PRA Category 1 Credits™*. Physicians should only claim credit commensurate with the extent of their participation in the activity.

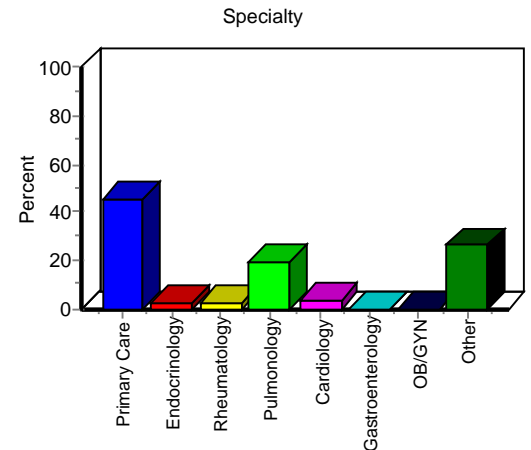
### What is your professional degree?

Label	Frequency	Percent	Valid Percent
MD	54	65.1	65.1
DO	4	4.8	4.8
NP	6	7.2	7.2
PA	9	10.8	10.8
RN	6	7.2	7.2
Other	4	4.8	4.8
Total Valid	83	100.0	100.0



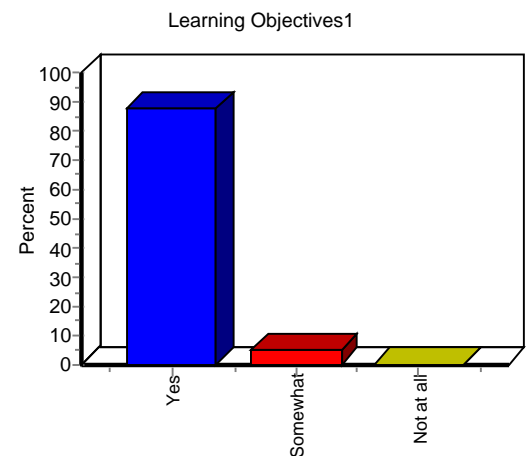
### What is your specialty?

Label	Frequency	Percent	Valid Percent
Primary Care	38	45.8	45.8
Endocrinology	2	2.4	2.4
Rheumatology	2	2.4	2.4
Pulmonology	16	19.3	19.3
Cardiology	3	3.6	3.6
Gastroenterology	0	0.0	0.0
OB/GYN	0	0.0	0.0
Other	22	26.5	26.5
Total Valid	83	100.0	100.0



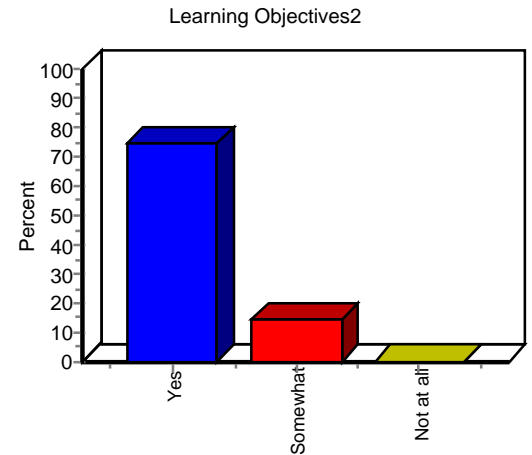
**Upon completion of this activity, I can now - Explain the pathophysiology of bronchiectasis; Discuss steps in the diagnosis and assessment of bronchiectasis and cystic fibrosis; Use evidence-based treatments for adult cystic fibrosis:**

Label	Frequency	Percent	Valid Percent
Yes	73	88.0	94.8
Somewhat	4	4.8	5.2
Not at all	0	0.0	0.0
Total Valid	77	92.8	100.0
Total Missing	6	7.2	
Total	83	100.0	



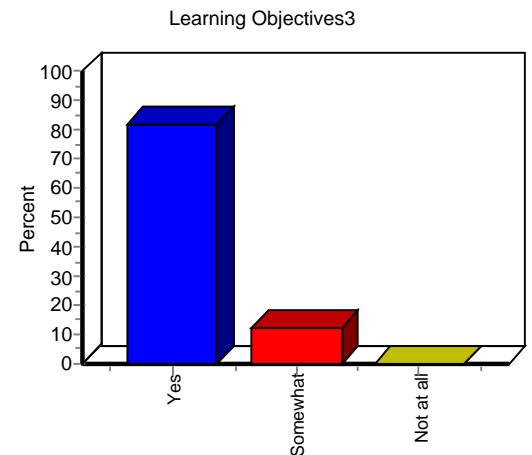
**Upon completion of this activity, I can now - Explain the differential diagnosis of interstitial lung diseases; Discuss the new guidelines in the management of IPF; Discuss the future promises in therapy: Pulmonary Hypertension and IPF, new discoveries, anticoagulation:**

Label	Frequency	Percent	Valid Percent
Yes	62	74.7	83.8
Somewhat	12	14.5	16.2
Not at all	0	0.0	0.0
Total Valid	74	89.2	100.0
Total Missing	9	10.8	
Total	83	100.0	



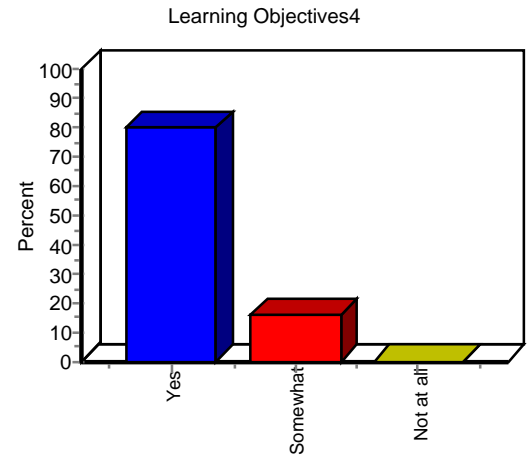
**Upon completion of this activity, I can now - Explain patient selection and outcomes of airway valves in the management of emphysema; Explain patient selection and treatment in asthma bronchoscopic thermoplasty; Discuss new horizons for Interventional Bronchoscopy:**

Label	Frequency	Percent	Valid Percent
Yes	68	81.9	87.2
Somewhat	10	12.0	12.8
Not at all	0	0.0	0.0
Total Valid	78	94.0	100.0
Total Missing	5	6.0	
Total	83	100.0	



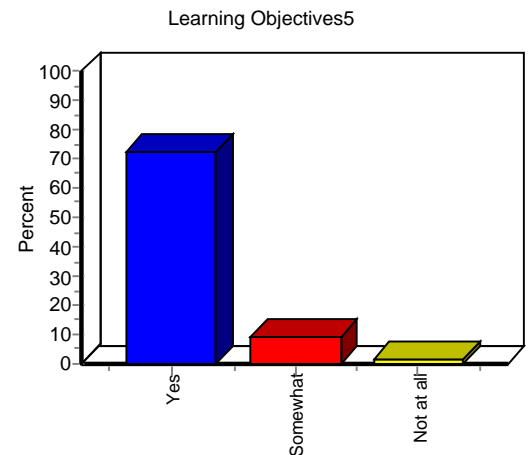
**Upon completion of this activity, I can now - Understand the pathophysiology of pulmonary arterial hypertension (PAH); Diagnose and accurately assess disease severity in PAH; Effectively use recommended therapies including targeted treatment options for PAH:**

Label	Frequency	Percent	Valid Percent
Yes	66	79.5	83.5
Somewhat	13	15.7	16.5
Not at all	0	0.0	0.0
Total Valid	79	95.2	100.0
Total Missing	4	4.8	
Total	83	100.0	



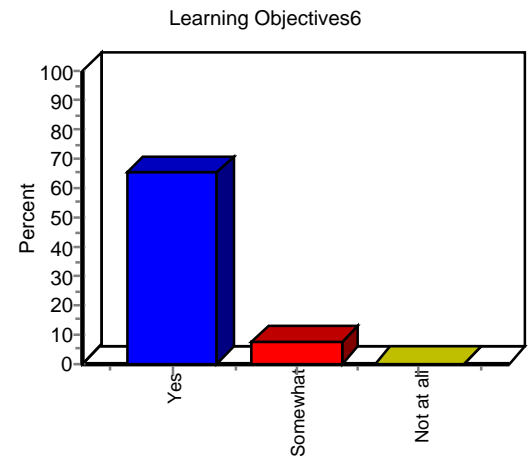
**Upon completion of this activity, I can now - Review the prevalence of alpha-1 antitrypsin deficiency (AATD); Explore novel approaches to increase AATD testing; Recognize the implications of GINA in genetic testing and AATD:**

Label	Frequency	Percent	Valid Percent
Yes	60	72.3	87.0
Somewhat	8	9.6	11.6
Not at all	1	1.2	1.4
Total Valid	69	83.1	100.0
Total Missing	14	16.9	
Total	83	100.0	



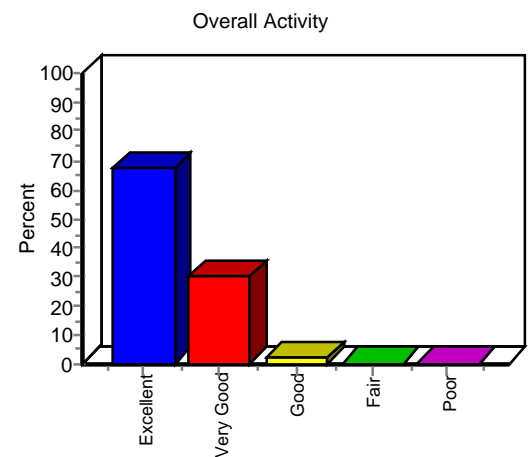
**Upon completion of this activity, I can now - Discuss creation of systematic differential diagnosis; Discuss use of medical imaging in pulmonary medicine; Explain use and correlation with pathological findings:**

Label	Frequency	Percent	Valid Percent
Yes	54	65.1	90.0
Somewhat	6	7.2	10.0
Not at all	0	0.0	0.0
Total Valid	60	72.3	100.0
Total Missing	23	27.7	
Total	83	100.0	



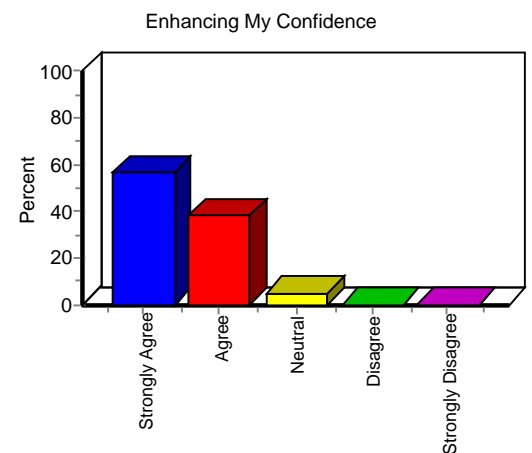
**Overall, I would rate this activity as:**

Label	Frequency	Percent	Valid Percent
Excellent	56	67.5	67.5
Very Good	25	30.1	30.1
Good	2	2.4	2.4
Fair	0	0.0	0.0
Poor	0	0.0	0.0
Total Valid	83	100.0	100.0



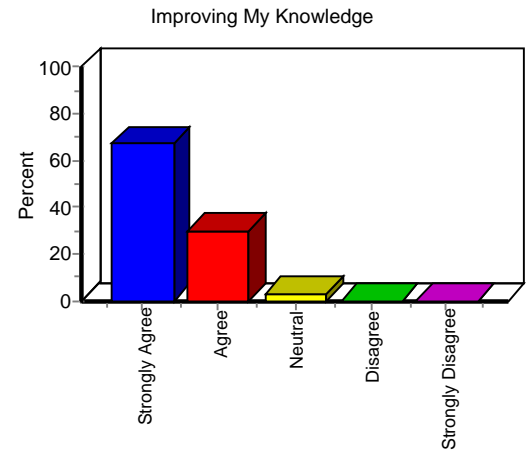
**Overall, this activity was effective in enhancing my confidence in caring for patients with the condition(s) presented?**

Label	Frequency	Percent	Valid Percent
Strongly Agree	47	56.6	56.6
Agree	32	38.6	38.6
Neutral	4	4.8	4.8
Disagree	0	0.0	0.0
Strongly Disagree	0	0.0	0.0
Total Valid	83	100.0	100.0



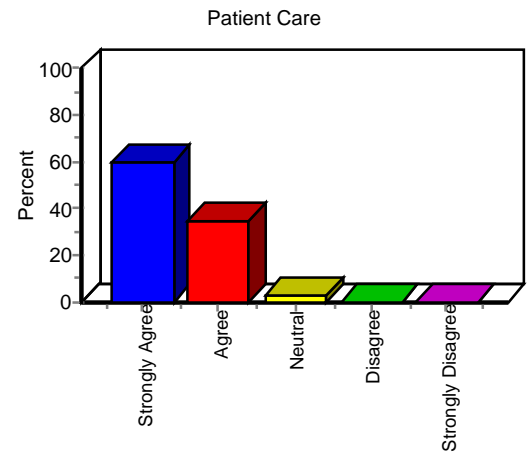
**Overall, this activity was effective in improving my knowledge in the content areas presented:**

Label	Frequency	Percent	Valid Percent
Strongly Agree	56	67.5	67.5
Agree	25	30.1	30.1
Neutral	2	2.4	2.4
Disagree	0	0.0	0.0
Strongly Disagree	0	0.0	0.0
Total Valid	83	100.0	100.0



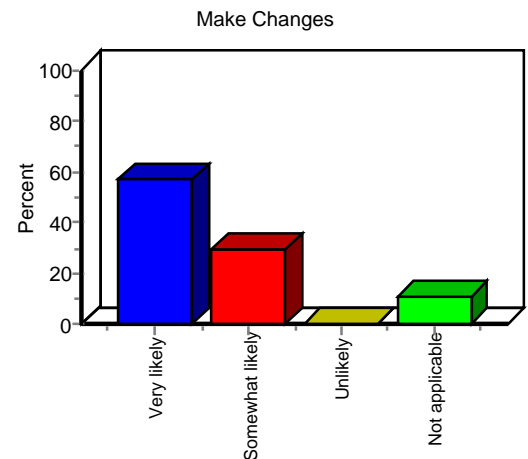
**As a result of this activity, I have learned new strategies for patient care:**

Label	Frequency	Percent	Valid Percent
Strongly Agree	50	60.2	61.7
Agree	29	34.9	35.8
Neutral	2	2.4	2.5
Disagree	0	0.0	0.0
Strongly Disagree	0	0.0	0.0
Total Valid	81	97.6	100.0
Total Missing	2	2.4	
Total	83	100.0	



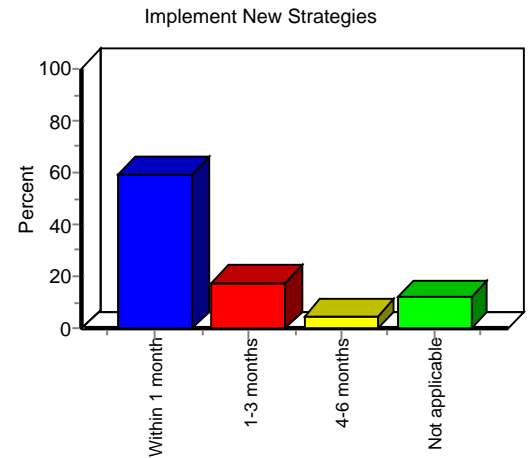
**How likely are you to implement these new strategies in your practice?**

Label	Frequency	Percent	Valid Percent
Very likely	47	56.6	58.8
Somewhat likely	24	28.9	30.0
Unlikely	0	0.0	0.0
Not applicable	9	10.8	11.3
Total Valid	80	96.4	100.0
Total Missing	3	3.6	
Total	83	100.0	



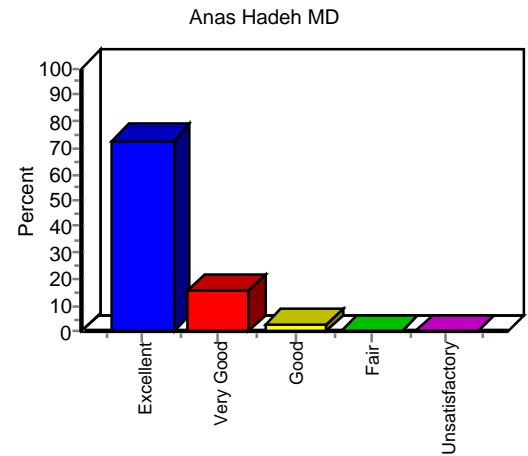
**When do you intend to implement these new strategies into your practice?**

Label	Frequency	Percent	Valid Percent
Within 1 month	49	59.0	62.8
1-3 months	15	18.1	19.2
4-6 months	4	4.8	5.1
Not applicable	10	12.0	12.8
Total Valid	78	94.0	100.0
Total Missing	5	6.0	
Total	83	100.0	



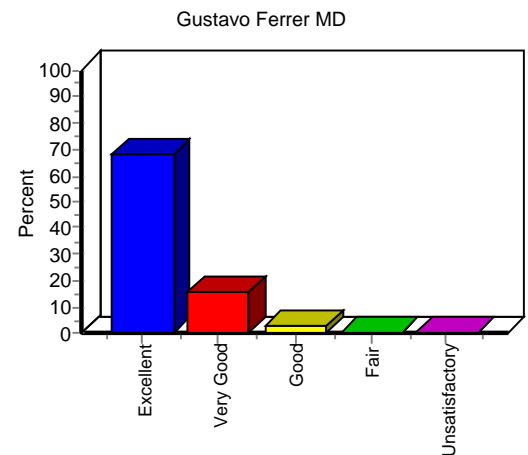
**In terms of delivery of the presentation, please rate the effectiveness of the speaker: Anas Hadeh, MD:**

Label	Frequency	Percent	Valid Percent
Excellent	60	72.3	80.0
Very Good	13	15.7	17.3
Good	2	2.4	2.7
Fair	0	0.0	0.0
Unsatisfactory	0	0.0	0.0
Total Valid	75	90.4	100.0
Total Missing	8	9.6	
Total	83	100.0	



**In terms of delivery of the presentation, please rate the effectiveness of the speaker: Gustavo Ferrer, MD:**

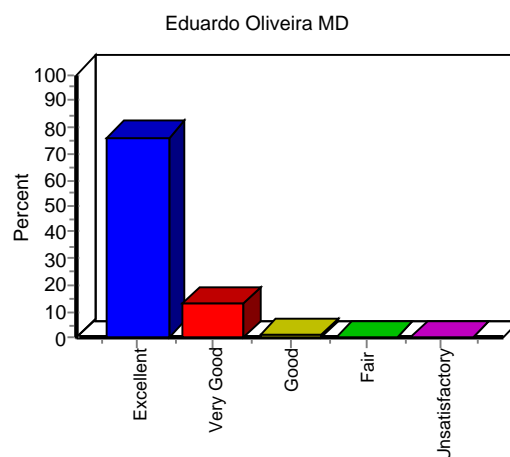
Label	Frequency	Percent	Valid Percent
Excellent	56	67.5	78.9
Very Good	13	15.7	18.3
Good	2	2.4	2.8
Fair	0	0.0	0.0
Unsatisfactory	0	0.0	0.0
Total Valid	71	85.5	100.0
Total Missing	12	14.5	
Total	83	100.0	





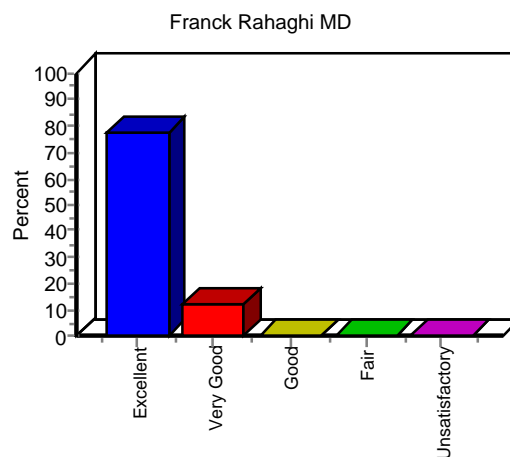
**In terms of delivery of the presentation, please rate the effectiveness of the speaker: Eduardo Oliveira, MD:**

Label	Frequency	Percent	Valid Percent
Excellent	63	75.9	84.0
Very Good	11	13.3	14.7
Good	1	1.2	1.3
Fair	0	0.0	0.0
Unsatisfactory	0	0.0	0.0
Total Valid	75	90.4	100.0
Total Missing	8	9.6	
Total	83	100.0	



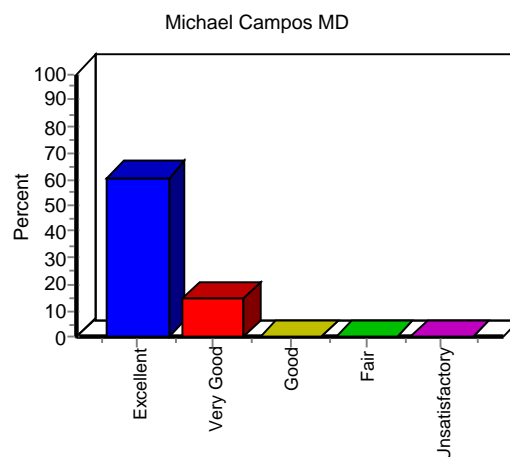
**In terms of delivery of the presentation, please rate the effectiveness of the speaker: Franck Rahaghi, MD:**

Label	Frequency	Percent	Valid Percent
Excellent	64	77.1	86.5
Very Good	10	12.0	13.5
Good	0	0.0	0.0
Fair	0	0.0	0.0
Unsatisfactory	0	0.0	0.0
Total Valid	74	89.2	100.0
Total Missing	9	10.8	
Total	83	100.0	



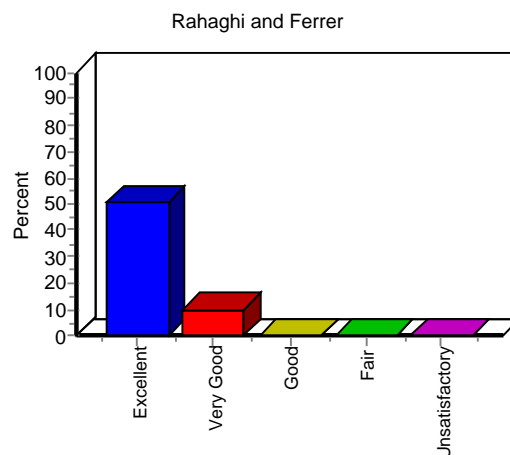
**In terms of delivery of the presentation, please rate the effectiveness of the speaker: Michael Campos, MD:**

Label	Frequency	Percent	Valid Percent
Excellent	50	60.2	80.6
Very Good	12	14.5	19.4
Good	0	0.0	0.0
Fair	0	0.0	0.0
Unsatisfactory	0	0.0	0.0
Total Valid	62	74.7	100.0
Total Missing	21	25.3	
Total	83	100.0	



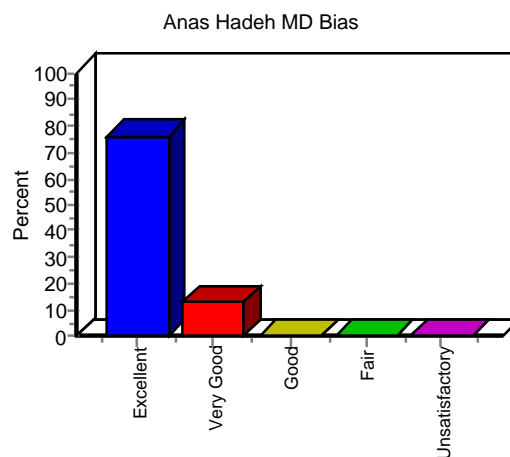
In terms of delivery of the presentation, please rate the effectiveness of the speaker: **Franck Rahaghi, MD and Gustavo Ferrer, MD:**

Label	Frequency	Percent	Valid Percent
Excellent	42	50.6	84.0
Very Good	8	9.6	16.0
Good	0	0.0	0.0
Fair	0	0.0	0.0
Unsatisfactory	0	0.0	0.0
Total Valid	50	60.2	100.0
Total Missing	33	39.8	
Total	83	100.0	



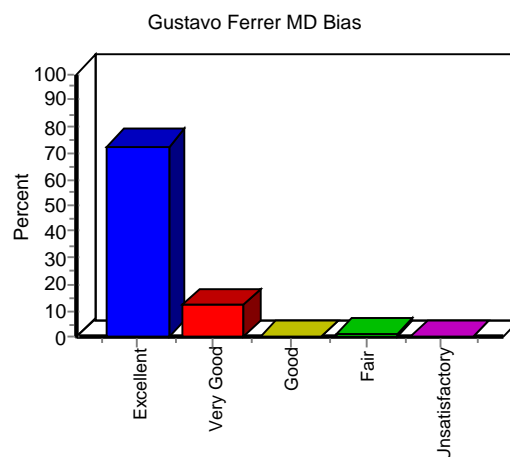
To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? **Anas Hadeh, MD:**

Label	Frequency	Percent	Valid Percent
Excellent	63	75.9	85.1
Very Good	11	13.3	14.9
Good	0	0.0	0.0
Fair	0	0.0	0.0
Unsatisfactory	0	0.0	0.0
Total Valid	74	89.2	100.0
Total Missing	9	10.8	
Total	83	100.0	



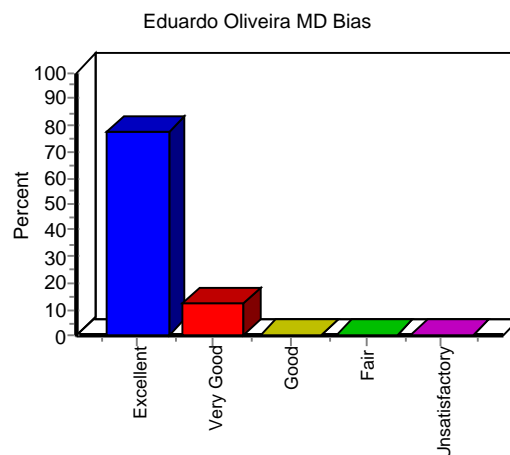
To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? **Gustavo Ferrer, MD:**

Label	Frequency	Percent	Valid Percent
Excellent	60	72.3	84.5
Very Good	10	12.0	14.1
Good	0	0.0	0.0
Fair	1	1.2	1.4
Unsatisfactory	0	0.0	0.0
Total Valid	71	85.5	100.0
Total Missing	12	14.5	
Total	83	100.0	



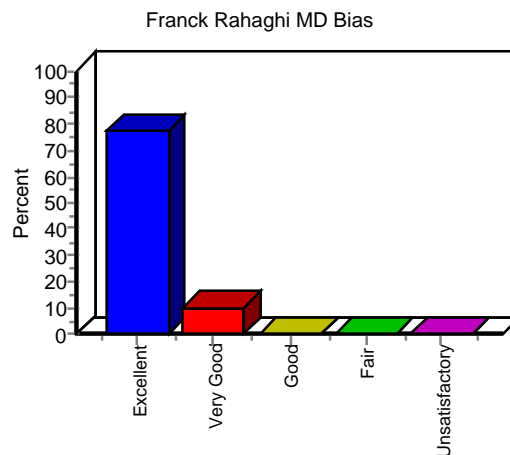
**To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Eduardo Oliveira, MD:**

Label	Frequency	Percent	Valid Percent
Excellent	64	77.1	86.5
Very Good	10	12.0	13.5
Good	0	0.0	0.0
Fair	0	0.0	0.0
Unsatisfactory	0	0.0	0.0
Total Valid	74	89.2	100.0
Total Missing	9	10.8	
Total	83	100.0	



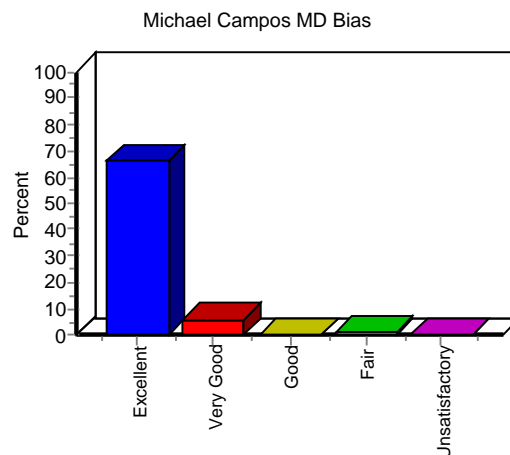
**To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Franck Rahaghi, MD:**

Label	Frequency	Percent	Valid Percent
Excellent	64	77.1	88.9
Very Good	8	9.6	11.1
Good	0	0.0	0.0
Fair	0	0.0	0.0
Unsatisfactory	0	0.0	0.0
Total Valid	72	86.7	100.0
Total Missing	11	13.3	
Total	83	100.0	



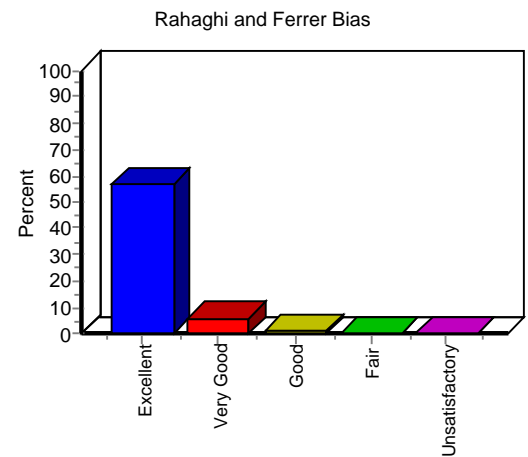
**To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Michael Campos, MD:**

Label	Frequency	Percent	Valid Percent
Excellent	55	66.3	90.2
Very Good	5	6.0	8.2
Good	0	0.0	0.0
Fair	1	1.2	1.6
Unsatisfactory	0	0.0	0.0
Total Valid	61	73.5	100.0
Total Missing	22	26.5	
Total	83	100.0	



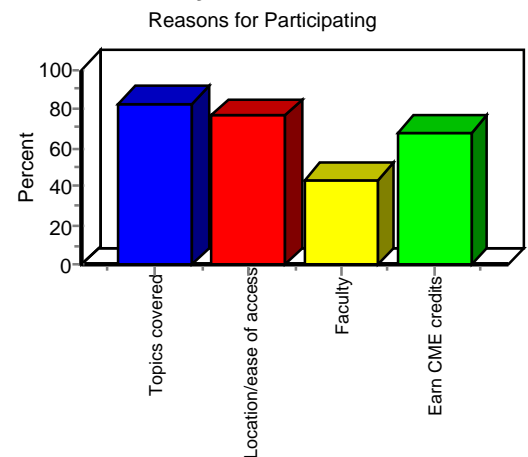
**To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Franck Rahaghi, MD and Gustavo Ferrer, MD:**

Label	Frequency	Percent	Valid Percent
Excellent	47	56.6	88.7
Very Good	5	6.0	9.4
Good	1	1.2	1.9
Fair	0	0.0	0.0
Unsatisfactory	0	0.0	0.0
Total Valid	53	63.9	100.0
Total Missing	30	36.1	
Total	83	100.0	



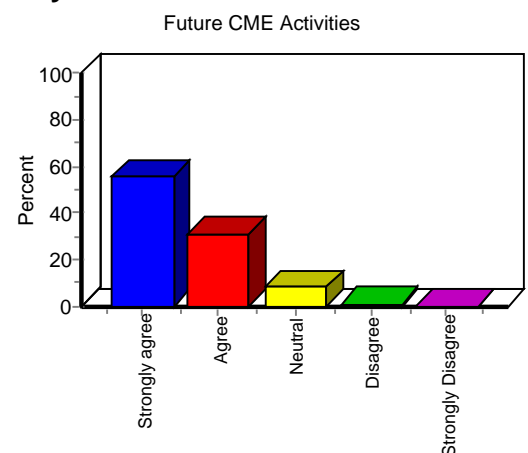
**Which statement(s) best reflects your reasons for participating in this activity:**

Label	Frequency	Percent	Valid Percent
Topics covered	69	83.1	84.1
Location/ease of access	63	75.9	76.8
Faculty	36	43.4	43.9
Earn CME credits	56	67.5	68.3
Total Valid	82	98.8	100.0
Total Missing	1	1.2	
Total	83	100.0	



**Future CME activities concerning this subject matter are necessary:**

Label	Frequency	Percent	Valid Percent
Strongly agree	46	55.4	57.5
Agree	26	31.3	32.5
Neutral	7	8.4	8.8
Disagree	1	1.2	1.3
Strongly Disagree	0	0.0	0.0
Total Valid	80	96.4	100.0
Total Missing	3	3.6	
Total	83	100.0	



## What is your professional degree?

Comment
LPN
LPN
LPN
CPC

## What is your specialty?

Comment
Internal Medicine
Pharmacy
Research
Hospitalist
Internal Medicine
Critical Care
Geriatrics
Surgery
Internal Medicine
Psychiatry
Urgent care
Pathology
Nuclear Medicine
Palliative Care
Pathology
Women's Health
Occupational Health
Urgent Care

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

Comment
Refer for thermoplasty; refer IPFs to clinical trials; test fad in COPDers and liver disease
Better approach in diagnosis and treatment
Very clinical content which we can benefit from
Paid attention to guidelines; followed after management protocols always
Better understanding of diagnosis and management of CF and non CF bronchiectasis, pul HT, IPF, and ART def
It is important to treat patients as individuals as well as practice evidence-based medicine
Echo for PAH; BT for severe asthma; inhaled AB for bronchiectasis; refer IPF for trials
HRCT for identification of ILD and Bronchoscopy thermal therapy for sever asthmatic patients and Azithromyciu
Indications for pulmonary med referral
Tight relationship with pulmonologist and Alpha-1 antitrypsin def diagnosis
More aggressive eval of potential PAH patients
I will consider Cystic Fibrosis more often in adults; check echocardiogram with attention to R heart in suspected PH; test each COPD patient for 2-1-antitrypsin and spirometry; consider pulmonary diseases in patients with connective tissue and arthritis diseases
Increase combination therapy for mgt of pulmonary arterial hypertension; refer to pulmonary re: IPF
Evaluate and screen for AAT; evaluate and see patient at risk for PH; request echocardiogram to evaluate RVSP; implement flu use of spirometry at the PCP affect

Comment
Increase testing for CF in patients with hereditary; implement new questions for evaluation of IPF; use of targeted treatment for PAH
Improve patient care
Concerning COPD evaluation and discovery of new patients that can definitely be helped
Excellent meeting
Referral to neurological center
Greater awareness of diagnostic considerations. This will reduce diagnostic oversight; have greater chance diagnosis and treatment
Knowledge, self-awareness, better patient care
Alpha-1 in COPD
Guidelines in the pulmonary disease; follow protocols of ways; patient selection and treatment; the assess the difference between treated and control in the change of rate of mild exacerbations
I am going to test for alpha deficiency to every patient with COPD. If a patient has hypersensitivity to hay-improvement with olasenofian alone; pleural effarian in patients with RA-don't do nothing; refer to rheumatologist leave it alone
Improve communication with families and patients; implement new screening protocols; implement revised diagnostic protocols
More pulmonary consults; more spirometry; more Alpha-1 evaluations
Diagnosis and assessment of bronchiectasis and effectively use recommended therapies for PAH
Greater awareness of value of bronchoscopic thermoplasty for severe asthma patients
PAH management
Understand the bronchiectasis and cystic fibrosis and more comprehensive treatment; better approach in the management escalated with the PH
When to consider bronchiectasis placed valves and more aggressive combination therapy for PAH
Patients with COPD; better diagnosis of lung disease
Caring for severe and complicated pulmonary patients with rarer diseases such as PAH, non CF bronchiectasis; possible treatment options in the realm of ABX's and PCE and B2 agonists, etc; also novel approaches in severe asthma and therapeutic approaches
Assess new options for treatment
Many of the strategies not applicable in private practice
PAH and CF new treatment options; asthma new treatment strategies; AAD testing
Use HD CTSCN
bronchiectasis treatment and AAT testing
To consider earlier combined treatment in PAH and PVH and to think of echo imaging earlier; to consider bronchectic patients as CF and non-CF and adjust approach; consider techniques for post thoracic surgery leak and asthma
I will be able to screen better and classify my patients with pulmonary diseases. I will be able to discuss different strategies with my pulmonary consultants. I will start testing for Alpha-1 antitrypsin deficiency
Identify new strategies for severe asthma patients
Indications for values for asthma and emphysema and understanding diagnosis of PHTM

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

Comment
Atelectasis
COPD treatment
Lung transplant-state of art
Update lung cancer management and new strategies
Depression, anxiety, HTN, type I and type 2 DM, dermatology
Pulmonary embolism Dx and Rx preventions and COPD
Open
Thyroid diseases
Newer approaches in asthma treatment
Pulmonary infectious diseases
Pulmonary complications in connective tissue diseases
Vitamin D and DM
Neurological updates and ARDS
More neuro-degenerative disease
Future medical tests
Sleep disorders, rheumatologic lung disorders, vasculitis, lung imaging, cancer staging and Rx
Pulmonary problems during pregnancy
Hypertension of osteoarthritis-new data and back pain update
Infectious disease update-diagnosis, treatment, relevant immunology, emerging pathogens, HIV immunology
Hematology and GI
Depression, ADD, HTN, DM, anxiety, pain medicine
Bronchiolitis obliterans and NSIP
Chronic pain treatment and addiction to pain killers
Infectious diseases, epidemiology, oncology
Urinary incontinence
ID and endo
Medical therapies for COPD and severe asthma and recent FDA recommendations
Yes
HIV and domestic violence
Breast and colon cancer
Chemotherapy; radiation; oncology
Any in pulmonary diseases
Evidence-based guidelines for the care of the general ICU patient
Cardiology and infectious diseases-newer concepts and antibiotics
Updates on all broad topics in pulmonary med
Lung cancer
Hypertension in blacks and drug therapy
Clinical nutrition
Liver diseases, inflammatory bowel diseases, update of screening tests for CA
Infectious disease and kidney disease

**Additional comments:**

Comment
Thank you
OK
This course was excellent. Thank you
I would strongly recommend the CME activity- very educational and informative
Very informative-the speakers are great. The topics are interesting and handouts very helpful
Breaks between lectures
Excellent conference
Very good
Thank to all the speakers-great challenge
Excellent meeting
The 3rd NACE attended this year partly because of their outstanding character
Excellent arrangement
OK
The site is better, parking is good
Excellent
Vit D deficiency and insufficiency
Thank you
Excellent presentations
Well planned; discusses more rarer topics in respiratory medicine
Thanks
PAH lecture and speaker excellent
Thanks
Excellent program