NACE
NATIONAL ASSOCIATION FOR CONTINUING EDUCATION

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Clinical Updates for Nurse Practitioners and Physician Assistants: 2011

November 12, 2011
Dallas Marriott Quorom
Dallas, TX

Course Directors
Deborah Paschal, CRNP
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Activity Director
Michelle Frisch, MPH, CCMEP

Program Evaluation
December 1, 2011

In November 2011, the National Association for Continuing Education (NACE) sponsored a CE activity, *Clinical Updates for Nurse Practitioners and Physician Assistants: 2011*, in Dallas, TX.

This educational activity was designed to provide nurse practitioners and physician assistants the opportunity to learn about Pulmonary Arterial Hypertension, Rheumatoid Arthritis, Chronic Pain in the Elderly, and Hypogonadism.

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.

Eighty two healthcare practitioners registered to attend *Clinical Updates for Nurse Practitioners and Physician Assistants: 2011*, in Dallas, TX. Forty seven 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. Forty seven 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 live activity for a maximum of 4 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

AAPA accepts certificates of participation for educational activities certified for *AMA PRA Category 1 Credits™* from organizations accredited by ACCME or a recognized state medical society. Physician assistants may receive a maximum of 4 hours of Category I credit for completing this program.

This program is approved for 4.0 contact hours of continuing education (which includes 2.33 hours of pharmacology) by the American Academy of Nurse Practitioners. Program ID 1110315.

This program was planned in accordance with AANP CE Standards and Policies and AANP Commercial Support Standards.

What is your professional degree?

Label	Frequency	Percent	Valid Percent
MD	0	0.00	0.00
DO	0	0.00	0.00
NP	24	51.06	51.06
PA	22	46.81	46.81
RN	0	0.00	0.00
Other	1	2.13	2.13
Total Valid	47	100.00	100.00

Title
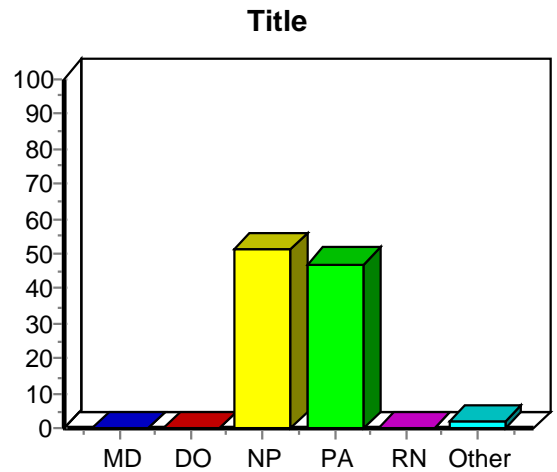
What is your specialty?

| Label	Frequency	Percent	Valid Percent
Primary Care	25	53.19	53.19
Endocrinology	3	6.38	6.38
Rheumatology	0	0.00	0.00
Pulmonology	0	0.00	0.00
Cardiology	1	2.13	2.13
Gastroenterology	1	2.13	2.13
OB/GYN	0	0.00	0.00
Other	17	36.17	36.17
Total Valid	47	100.00	100.00

Specialty
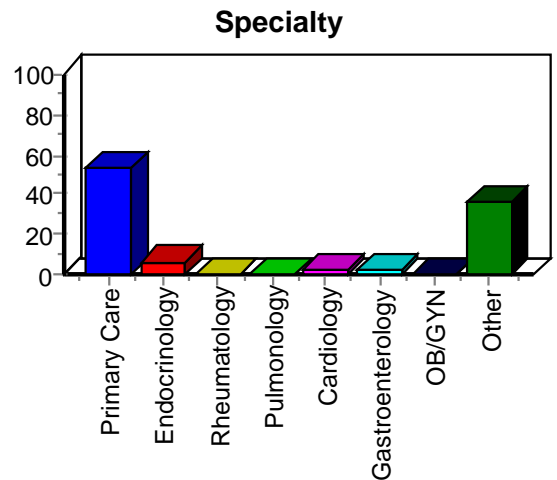
Upon completion of this activity, I can now - Identify the prevalence, risk factors and co-morbid conditions associated with low testosterone; develop a focused history and physical evaluation for diagnosing primary and secondary hypogandism; recognize the importance of testing testosterone levels before prescribing PDE-5 inhibitors; assess the safety, efficacy, benefits, and risks associated with the utilization of treatment options for low testosterone including interactions with other drugs and safe use of testosterone creams and gels; outline the challenges to short- and longterm management and monitoring of testosterone therapy:

| Label	Frequency	Percent	Valid Percent
Yes	44	93.62	93.62
Somewhat	3	6.38	6.38
Not at all	0	0.00	0.00
Total Valid	47	100.00	100.00

Learning Objectives1
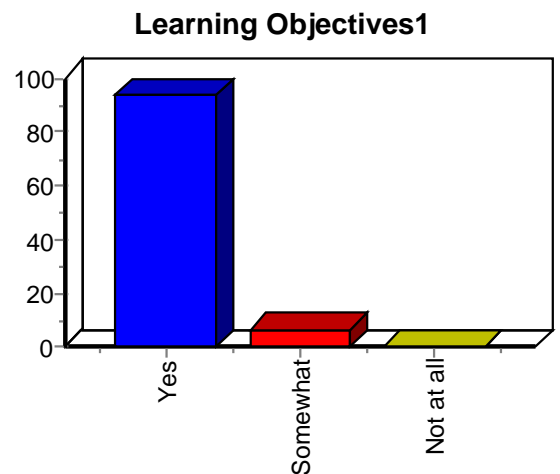
Upon completion of this activity, I can now - Discuss the pathophysiology of PAH; determine when and how to screen patients for PAH; describe current therapies targeting the prostacyclin, nitric oxide-and endothelin-mediated pathways in the management of PAH; discuss the impact of the use of pharmacologic treatment option such as calcium channel blockers in patients diagnosed with PAH; appropriately monitor patients receiving treatment for PAH:

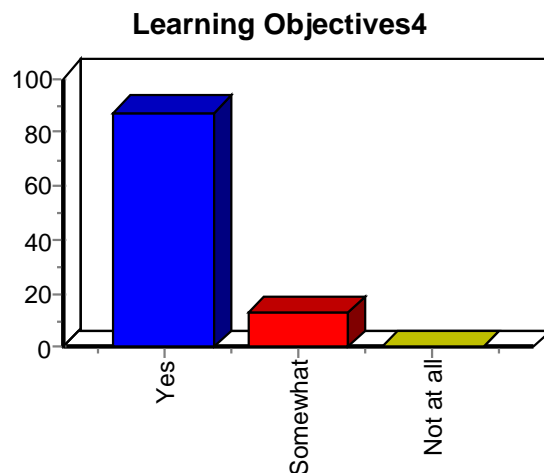| Label	Frequency	Percent	Valid Percent
Yes	39	82.98	86.67
Somewhat	6	12.77	13.33
Not at all	0	0.00	0.00
Total Valid	45	95.74	100.00
Total Missing	2	4.26	
Total	47	100.00	

Learning Objectives2
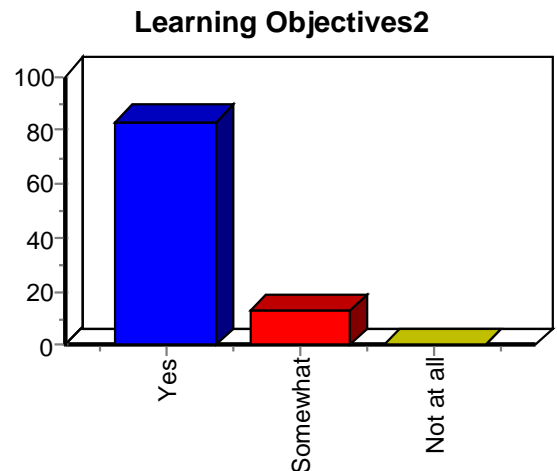
Upon completion of this activity, I can now - Define most recent criteria for the diagnosis of RA; outline potential benefits of early RA diagnosis and aggressive management; employ current approaches to RA management; discuss the use and monitoring of biologic therapies in RA; utilize referrals to arthritis specialists, physical therapists, and occupational therapists when necessary; implement strategies for improving patient education and medication adherence in RA:

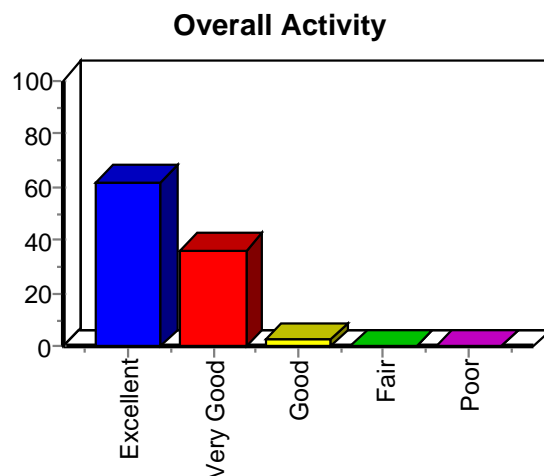| Label	Frequency	Percent	Valid Percent
Yes	46	97.87	97.87
Somewhat	1	2.13	2.13
Not at all	0	0.00	0.00
Total Valid	47	100.00	100.00

Learning Objectives3
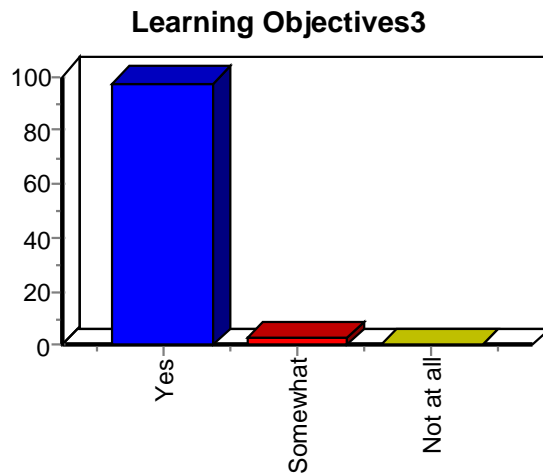
Upon completion of this activity, I can now - Identify age-related differences between younger and older adults that influence treatment decisions for persistent pain; make guidelines-directed decisions about which older adults with persistent pain may be candidates for opioid therapy related to drug safety, efficacy, and tolerability; explain how pharmacologic and nonpharmacologic treatment strategies can be combined to achieve a synergistic effect in pain management:

Label	Frequency	Percent	Valid Percent
Yes	41	87.23	87.23
Somewhat	6	12.77	12.77
Not at all	0	0.00	0.00
Total Valid	47	100.00	100.00

Learning Objectives4

Overall, I would rate this activity as:

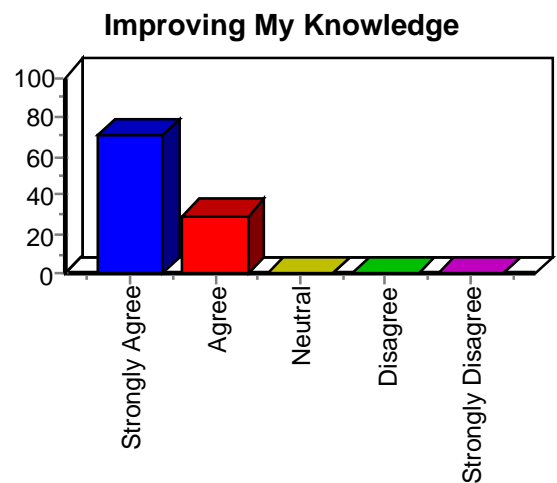| Label	Frequency	Percent	Valid Percent
Excellent	29	61.70	61.70
Very Good	17	36.17	36.17
Good	1	2.13	2.13
Fair	0	0.00	0.00
Poor	0	0.00	0.00
Total Valid	47	100.00	100.00

Overall Activity

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

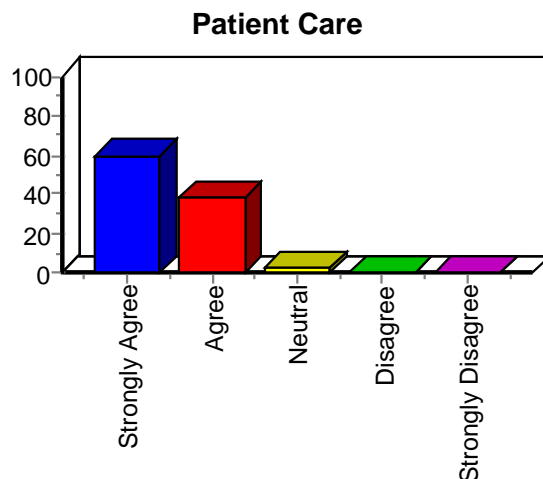| Label	Frequency	Percent	Valid Percent
Strongly Agree	29	61.70	61.70
Agree	17	36.17	36.17
Neutral	1	2.13	2.13
Disagree	0	0.00	0.00
Strongly Disagree	0	0.00	0.00
Total Valid	47	100.00	100.00

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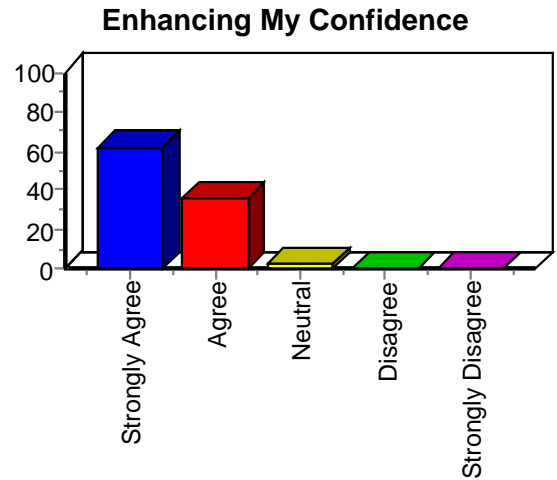
Overall, this activity was effective in improving my knowledge in the content areas presented:

Label	Frequency	Percent	Valid Percent
Strongly Agree	33	70.21	70.21
Agree	14	29.79	29.79
Neutral	0	0.00	0.00
Disagree	0	0.00	0.00
Strongly Disagree	0	0.00	0.00
Total Valid	47	100.00	100.00

Improving My Knowledge

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

Label	Frequency	Percent	Valid Percent
Strongly Agree	28	59.57	59.57
Agree	18	38.30	38.30
Neutral	1	2.13	2.13
Disagree	0	0.00	0.00
Strongly Disagree	0	0.00	0.00
Total Valid	47	100.00	100.00

Patient Care

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

Label	Frequency	Percent	Valid Percent
Very likely	33	70.21	73.33
Somewhat likely	10	21.28	22.22
Unlikely	1	2.13	2.22
Not applicable	1	2.13	2.22
Total Valid	45	95.74	100.00
Total Missing	2	4.26	
Total	47	100.00	

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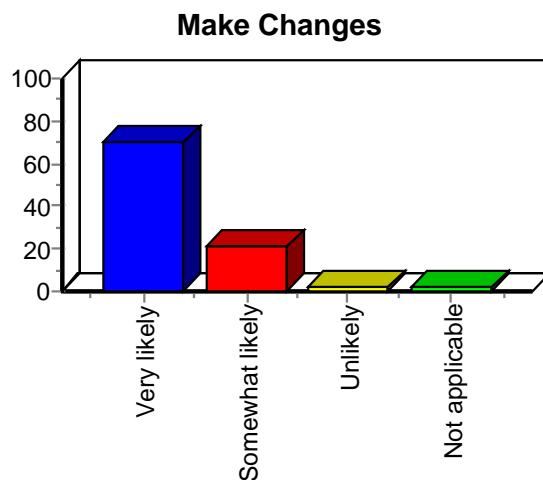
When do you intend to implement these new strategies into your practice?

Label	Frequency	Percent	Valid Percent
Within 1 month	34	72.34	75.56
1-3 months	9	19.15	20.00
4-6 months	1	2.13	2.22
Not applicable	1	2.13	2.22
Total Valid	45	95.74	100.00
Total Missing	2	4.26	
Total	47	100.00	

Implement New Strategies
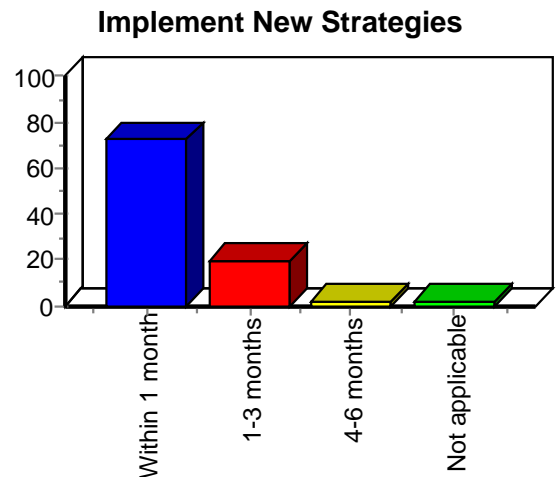
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Brad Hornberger, MPAS, PA-C (Hypo):

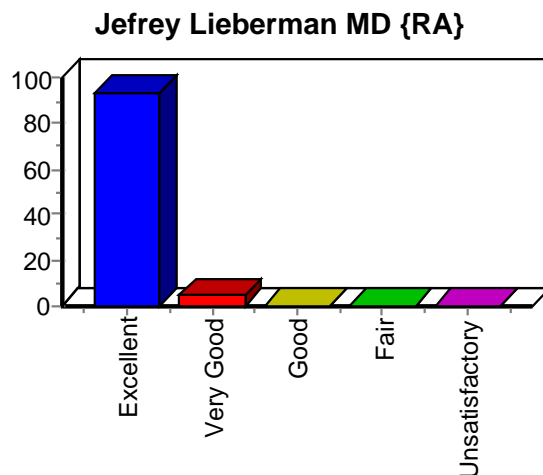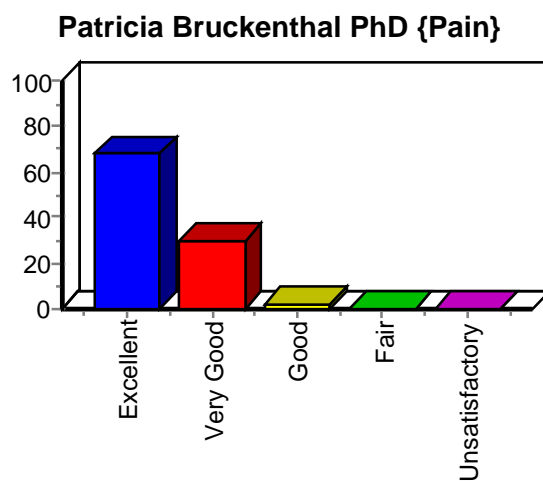| Label	Frequency	Percent	Valid Percent
Excellent	45	95.74	97.83
Very Good	1	2.13	2.17
Good	0	0.00	0.00
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	46	97.87	100.00
Total Missing	1	2.13	
Total	47	100.00	

Brad Hornberger MPAS {Hypo}

In terms of delivery of the presentation, please rate the effectiveness of the speaker: Jefrey Lieberman, MD (RA):

Label	Frequency	Percent	Valid Percent
Excellent	44	93.62	95.65
Very Good	2	4.26	4.35
Good	0	0.00	0.00
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	46	97.87	100.00
Total Missing	1	2.13	
Total	47	100.00	

Jefrey Lieberman MD {RA}

In terms of delivery of the presentation, please rate the effectiveness of the speaker: Patricia Bruckenthal, PhD (Pain):

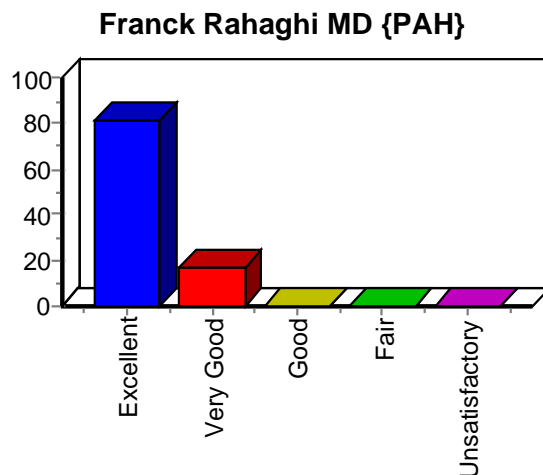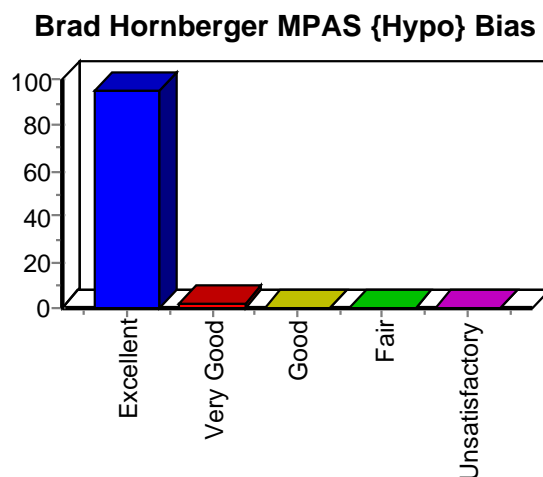| Label	Frequency	Percent	Valid Percent
Excellent	32	68.09	68.09
Very Good	14	29.79	29.79
Good	1	2.13	2.13
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	47	100.00	100.00

Patricia Bruckenthal PhD {Pain}

In terms of delivery of the presentation, please rate the effectiveness of the speaker: Franck Rahaghi, MD (PAH):

Label	Frequency	Percent	Valid Percent
Excellent	38	80.85	82.61
Very Good	8	17.02	17.39
Good	0	0.00	0.00
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	46	97.87	100.00
Total Missing	1	2.13	
Total	47	100.00	

Franck Rahaghi MD {PAH}

To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Brad Hornberger, MPAS, PA-C (Hypo):

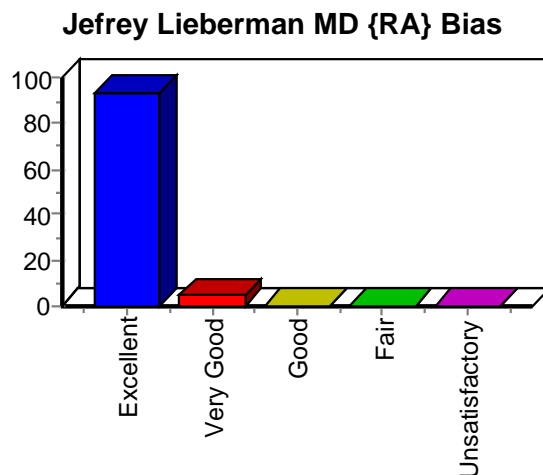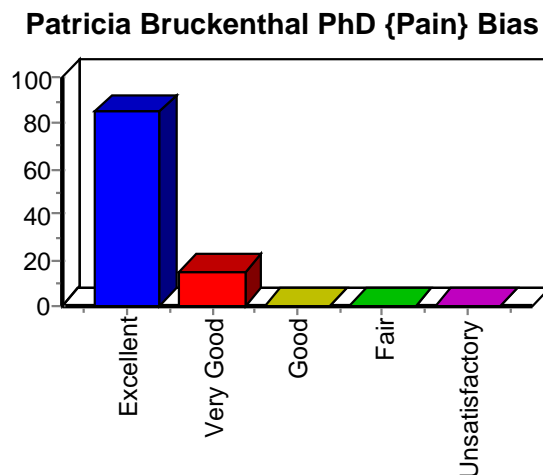| Label	Frequency	Percent	Valid Percent
Excellent	45	95.74	97.83
Very Good	1	2.13	2.17
Good	0	0.00	0.00
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	46	97.87	100.00
Total Missing	1	2.13	
Total	47	100.00	

Brad Hornberger MPAS {Hypo} Bias

To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Jefrey Lieberman, MD (RA):

Label	Frequency	Percent	Valid Percent
Excellent	44	93.62	95.65
Very Good	2	4.26	4.35
Good	0	0.00	0.00
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	46	97.87	100.00
Total Missing	1	2.13	
Total	47	100.00	

Jefrey Lieberman MD {RA} Bias

To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Patricia Bruckenthal, PhD (Pain):

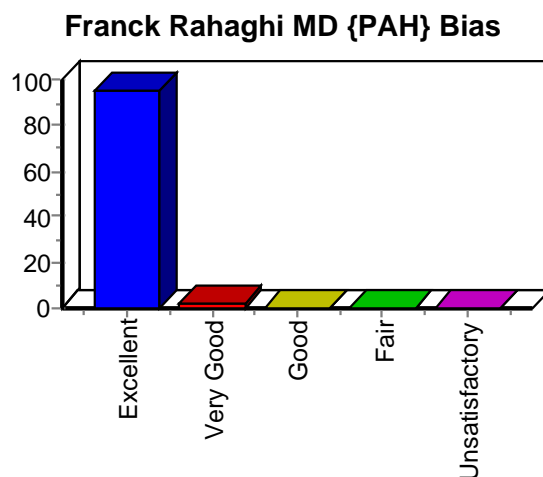| Label	Frequency	Percent	Valid Percent
Excellent	40	85.11	85.11
Very Good	7	14.89	14.89
Good	0	0.00	0.00
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	47	100.00	100.00


Patricia Bruckenthal PhD {Pain} Bias

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

Label	Frequency	Percent	Valid Percent
Excellent	45	95.74	97.83
Very Good	1	2.13	2.17
Good	0	0.00	0.00
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	46	97.87	100.00
Total Missing	1	2.13	
Total	47	100.00	

Franck Rahaghi MD {PAH} Bias

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

Label	Frequency	Percent	Valid Percent
Topics covered	28	59.57	59.57
Location/ease of access	29	61.70	61.70
Faculty	1	2.13	2.13
Earn CME credits	43	91.49	91.49
Total Valid	47	100.00	100.00

Reasons for Participating
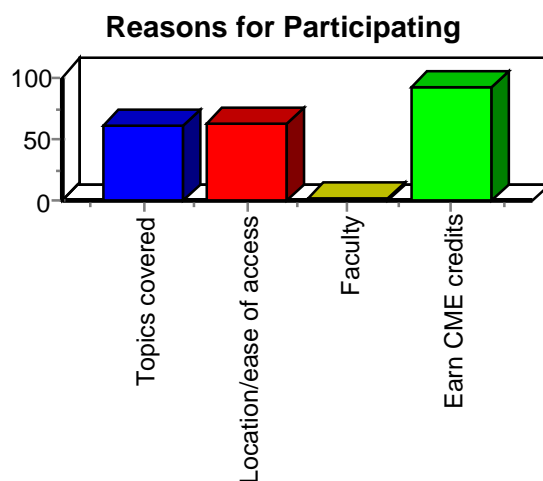
Future CE activities concerning this subject matter are necessary:

Label	Frequency	Percent	Valid Percent
Strongly agree	14	29.79	29.79
Agree	18	38.30	38.30
Neutral	14	29.79	29.79
Disagree	0	0.00	0.00
Strongly Disagree	1	2.13	2.13
Total Valid	47	100.00	100.00

Future CE Activities
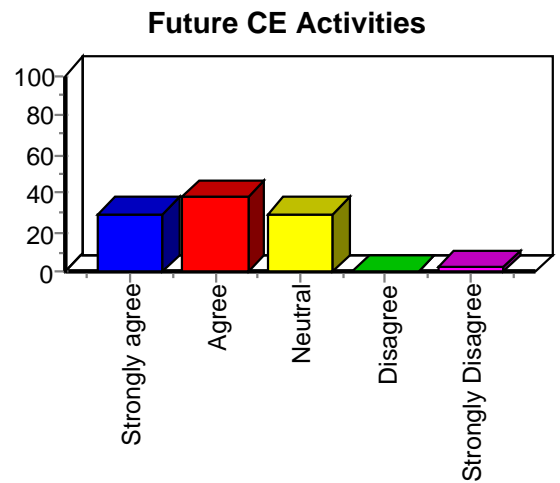
What is your professional degree?

Comment
ACNS

What is your specialty?

Comment
Surgery
Surgical Oncology
Internal Medicine
Mental Health
Ped Neurology
Cardiac Surgery
Urology
Family
Orthopedics
Transplant
Internal Medicine
Urology
Internal Medicine

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

Comment
More specific care for Pulmonary Hypertension
Evaluation, treatment, follow up care needed to treat each section discussed
Labs to order for each diagnosis, reasons for early referral, importance of patient education
When to refer patients. Echo are not always reliable
Better assessment based on particular diagnosis. Use of appropriate pharmacology to treat right combined treatment
History of patient - listen and look
I am more knowledgeable about what labs to order first line with various medical conditions. Also I can provide more patient education based on research studies presented
New guidelines for RA. Guidelines for the management of the elderly
Pain management. Conjunctive treatment
Starting new therapies earlier
Check LH with testosterone. Evaluate coping skills - could be reason looks like drug seeker. Putting RA all together
Strategy for testing for Hypogonadism, Pain Management
Clarifying what level to begin testosterone therapy. Plan strategies for pain management in the elderly patient
Diagnosis and management of Hypogonadism, PAH and pain
Aggressively look for signs in my patient population
New ways to diagnose, recognize patients at risk for these various conditions
Who to screen for Hypogonadism. Strategies for pain management in the elderly
More sensitive to patient pain needs. Increased awareness of Hypogonadism
Improved management of pain and PAH
I like the handouts provided. Questions asked with microphone so can hear clearly what was asked
Good H&P. When to refer
Diagnosis of low testosterone, classification, adding LH & FSH. Risk factors for RA
Identifying and testing for low testosterone. Referral based on 10-20 causes: 1. multiple scales, 2. use appropriate verbage, 3. risk evaluation, 4. use for A's pain treatment. Synergistic approach to pain management. 1. early referral, 2. early diagnosis and management, 3. RA CV risk factor. Correctly asses true PAH
Screening for testosterone and integrate into patient care. Careful and personalized pain evaluations in the elderly
Mainly pharmacological strategies
More frequent screening for low testosterone levels. Interpretation of ECHO results. Screening for RA and other joint diseases
How to work up a patient better with applicable lab tests to order when presenting with low testosterone or joint pain symptoms
Pulmonary HTN diagnosis

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

Comment
DM
Obesity, weight loss, women fatigue
Morbid obesity. Bariatric surgery. Acute abdomen
Autoimmune diseases. Hepatitis. Diastolic heart failure
Renal management
Cardiology, HPTN, Hyperlipidemia, DM
Diabetes complications and treatment
Assessment of abdominal pain. Antibiotic therapy. Emotional strategies for oncology/chronic illness patients
CHF, HTN, DM
CV Issues. Bowel Issues
Anxiety, Depression
Mental Illness
Anything
Migraine HA
Diabetes, PCOS, Osteoporosis, Safe presenting guidelines for pain management
Diabetes Type II. Metabolic Syndrome. Obesity - strategies that work. Polycystic Ovarian Syndrome. Hyperthyroidism. Multiple Sclerosis. Neurologic D2 - Migraines
EKG, GI Diseases, Osteoporosis treatments, Dermatology
DM, HTN, HLD, DA, Chronic Pain, Hypo-and Hyperthyroidism
Psychiatric, Methadone, Seizures
Toxicity and relation to disease states. Heavy metals and environmental industrial chemicals. I can provide you with practitioners who are experts in this field. Call me
Appropriate use of antibiotics. Chronic Cough
Primary care headache. Epilepsy. Pediatrics. New guidelines for HTN or Hyperlipidemia or Diabetes meds
New recommendations regarding HTN, DMII and Hyperlipidemia
Any
Prostate cancer, Incontinence, Sleep Disorders, Social Issues Affecting Patients, Celiac Disease
Cardiovascular topics
More topics on Endocrine and Immunology
Addictions
Dermatology. Orthopedics
Hepatology, Transplant
GYN, Urology, ENT
More cardiology
Gout management. Asthma
Cardiology, EKG readings

Additional comments:

Comment
Great conference. Great speakers
Fort Worth area would be a good option
Good location with easy parking
It will be great if such seminars or half-day Saturday conferences are held once a month in Dallas Metroplex
Good job
V@ɐ\Á[˘
Œ|Á^&č¦^•Á̧^¦^Á¢&^||^} c̃ÃÇÁ•]^&æ̃æ|ˆÁˋ}ʃˆ^åÁthe first lectureËstraight-forward information.
2nd lecture was wonderful. V@ˆÁæ̃|Á^] oÁ ^Á̃ʃ c^¦^•c^åÈ
V@ɐ\Á[˘
Job well done
Excellent information. One of the best conferences I've attended. Thank you
Great learning opportunity. I liked the interactive Q&A's with the response cards
Great program
Excellent speakers. Very informative and entertaining
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Great topics and speakers, too. More pharmacology hours, if possible