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Clinical Updates for Nurse Practitioners and Physician Assistants: 2011



**November 5, 2011
Hyatt Regency Grand Cypress
Orlando, FL**

Course Directors
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Activity Director
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**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 Orlando, FL.

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.

Ninety healthcare practitioners registered to attend *Clinical Updates for Nurse Practitioners and Physician Assistants: 2011*, in Orlando, FL. Forty three 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 one 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.

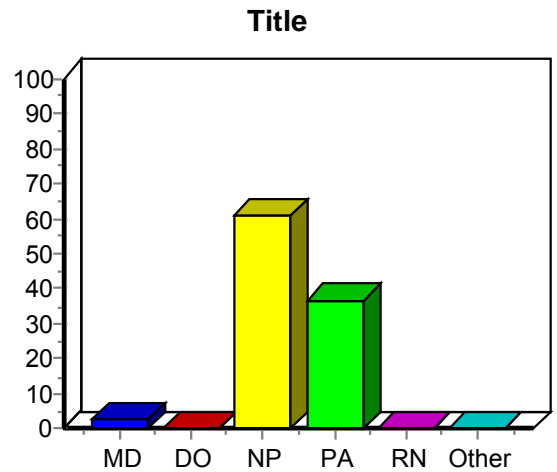
AAPA accepts certificates of participation for educational activities certified for *AMA PRA Category 1 Credits™* from organizations accredited by ACCME or a recognized state medical society. Physician assistants may receive a maximum of 4 hours of Category I credit for completing this program.

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.

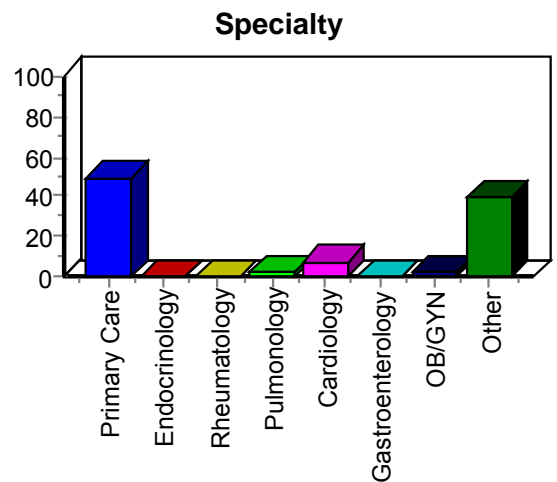
What is your professional degree?

| Label | Frequency | Percent | Valid Percent |
|-------------|-----------|---------|---------------|
| MD | 1 | 2.44 | 2.44 |
| DO | 0 | 0.00 | 0.00 |
| NP | 25 | 60.98 | 60.98 |
| PA | 15 | 36.59 | 36.59 |
| RN | 0 | 0.00 | 0.00 |
| Other | 0 | 0.00 | 0.00 |
| Total Valid | 41 | 100.00 | 100.00 |



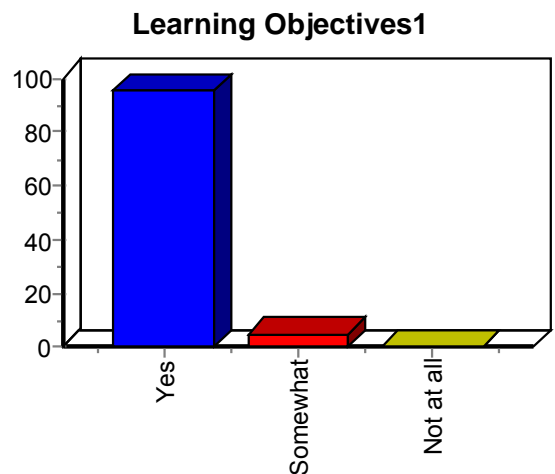
What is your specialty?

| Label | Frequency | Percent | Valid Percent |
|------------------|-----------|---------|---------------|
| Primary Care | 20 | 48.78 | 48.78 |
| Endocrinology | 0 | 0.00 | 0.00 |
| Rheumatology | 0 | 0.00 | 0.00 |
| Pulmonology | 1 | 2.44 | 2.44 |
| Cardiology | 3 | 7.32 | 7.32 |
| Gastroenterology | 0 | 0.00 | 0.00 |
| OB/GYN | 1 | 2.44 | 2.44 |
| Other | 16 | 39.02 | 39.02 |
| Total Valid | 41 | 100.00 | 100.00 |



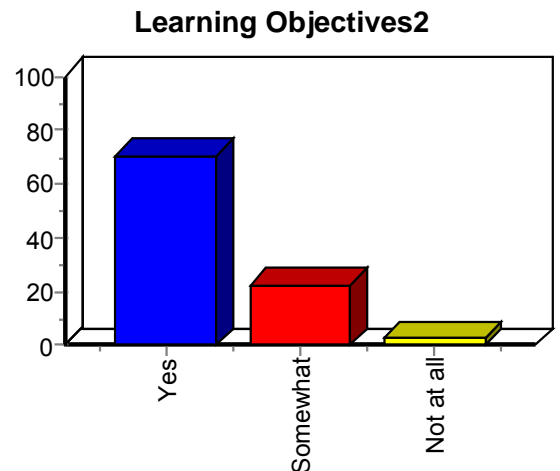
Upon completion of this activity, I can now - Identify the prevalence, risk factors and co-morbid conditions associated with low testosterone; develop a focused history and physical evaluation for diagnosing primary and secondary hypogandism; recognize the importance of testing testosterone levels before 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 | 39 | 95.12 | 95.12 |
| Somewhat | 2 | 4.88 | 4.88 |
| Not at all | 0 | 0.00 | 0.00 |
| Total Valid | 41 | 100.00 | 100.00 |



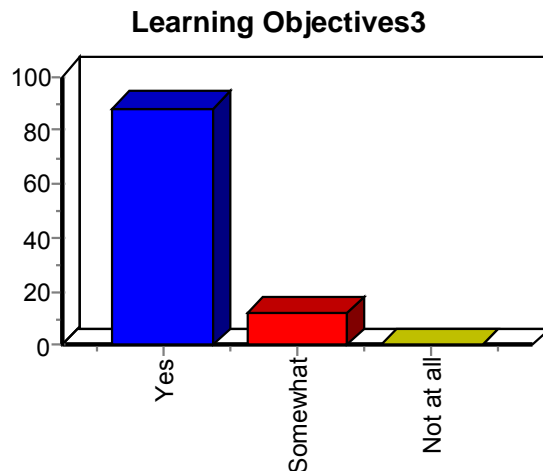
Upon completion of this activity, I can now - Discuss the pathophysiology of PAH; determine when and how to screen patients for PAH; describe current therapies targeting the prostacyclin, nitric oxide-and endothelin-mediated pathways in the management of PAH; discuss the impact of the use of pharmacologic 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 | 29 | 70.73 | 74.36 |
| Somewhat | 9 | 21.95 | 23.08 |
| Not at all | 1 | 2.44 | 2.56 |
| Total Valid | 39 | 95.12 | 100.00 |
| Total Missing | 2 | 4.88 | |
| Total | 41 | 100.00 | |



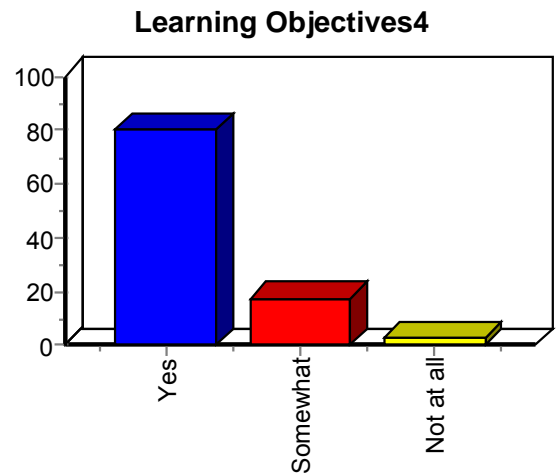
Upon completion of this activity, I can now - Define most recent criteria for the diagnosis of RA; outline potential benefits of early RA diagnosis and aggressive management; employ current approaches to RA management; discuss the use and monitoring of biologic therapies in RA; utilize referrals to arthritis 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 | 36 | 87.80 | 87.80 |
| Somewhat | 5 | 12.20 | 12.20 |
| Not at all | 0 | 0.00 | 0.00 |
| Total Valid | 41 | 100.00 | 100.00 |



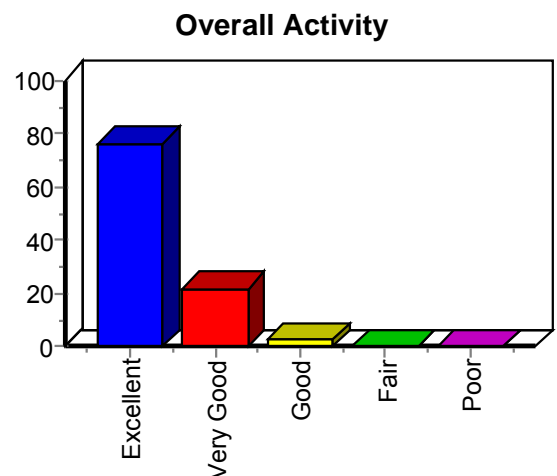
Upon completion of this activity, I can now - Identify age-related differences between younger and older adults that influence treatment decisions for persistent pain; make guidelines-directed decisions about which older adults with persistent pain may be candidates for opioid therapy related to drug 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 | 33 | 80.49 | 80.49 |
| Somewhat | 7 | 17.07 | 17.07 |
| Not at all | 1 | 2.44 | 2.44 |
| Total Valid | 41 | 100.00 | 100.00 |



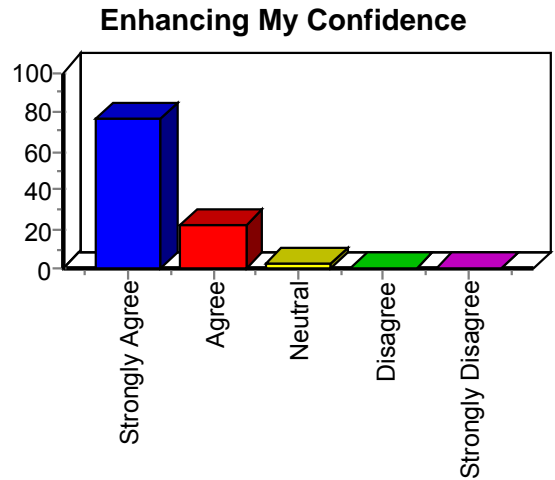
Overall, I would rate this activity as:

| Label | Frequency | Percent | Valid Percent |
|-------------|-----------|---------|---------------|
| Excellent | 31 | 75.61 | 75.61 |
| Very Good | 9 | 21.95 | 21.95 |
| Good | 1 | 2.44 | 2.44 |
| Fair | 0 | 0.00 | 0.00 |
| Poor | 0 | 0.00 | 0.00 |
| Total Valid | 41 | 100.00 | 100.00 |



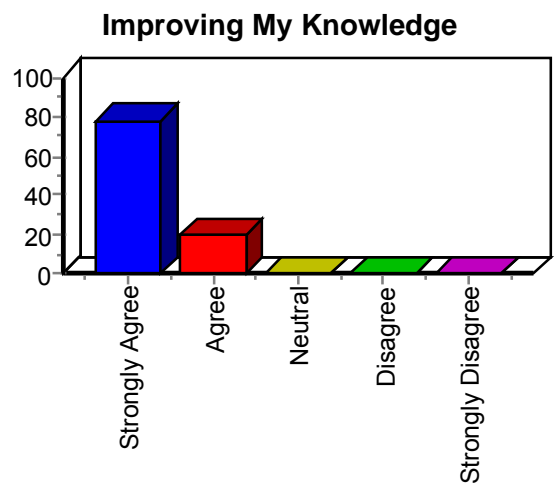
Overall, this activity was effective in enhancing my confidence in caring for patients with the condition(s) presented?

| Label | Frequency | Percent | Valid Percent |
|-------------------|-----------|---------|---------------|
| Strongly Agree | 31 | 75.61 | 75.61 |
| Agree | 9 | 21.95 | 21.95 |
| Neutral | 1 | 2.44 | 2.44 |
| Disagree | 0 | 0.00 | 0.00 |
| Strongly Disagree | 0 | 0.00 | 0.00 |
| Total Valid | 41 | 100.00 | 100.00 |



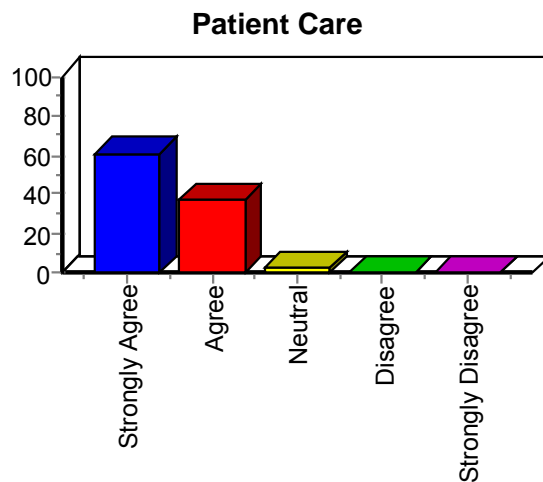
Overall, this activity was effective in improving my knowledge in the content areas presented:

| Label | Frequency | Percent | Valid Percent |
|-------------------|-----------|---------|---------------|
| Strongly Agree | 32 | 78.05 | 80.00 |
| Agree | 8 | 19.51 | 20.00 |
| Neutral | 0 | 0.00 | 0.00 |
| Disagree | 0 | 0.00 | 0.00 |
| Strongly Disagree | 0 | 0.00 | 0.00 |
| Total Valid | 40 | 97.56 | 100.00 |
| Total Missing | 1 | 2.44 | |
| Total | 41 | 100.00 | |



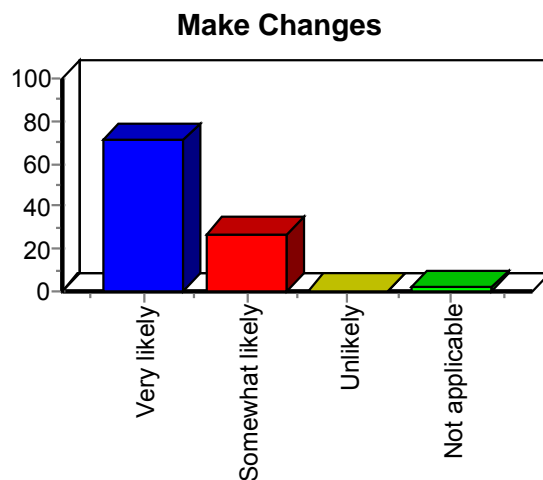
As a result of this activity, I have learned new strategies for patient care:

| Label | Frequency | Percent | Valid Percent |
|-------------------|-----------|---------|---------------|
| Strongly Agree | 25 | 60.98 | 60.98 |
| Agree | 15 | 36.59 | 36.59 |
| Neutral | 1 | 2.44 | 2.44 |
| Disagree | 0 | 0.00 | 0.00 |
| Strongly Disagree | 0 | 0.00 | 0.00 |
| Total Valid | 41 | 100.00 | 100.00 |



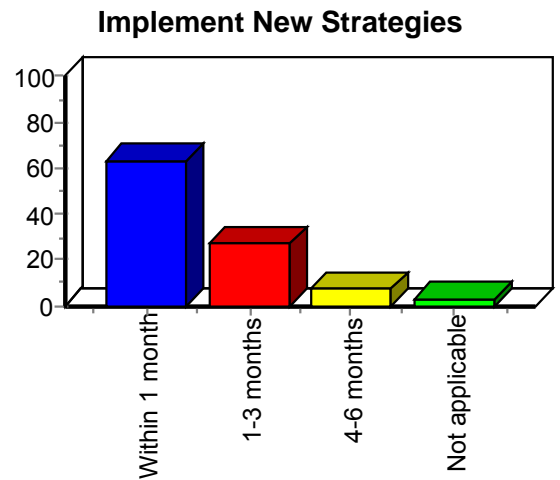
How likely are you to implement these new strategies in your practice?

| Label | Frequency | Percent | Valid Percent |
|-----------------|-----------|---------|---------------|
| Very likely | 29 | 70.73 | 70.73 |
| Somewhat likely | 11 | 26.83 | 26.83 |
| Unlikely | 0 | 0.00 | 0.00 |
| Not applicable | 1 | 2.44 | 2.44 |
| Total Valid | 41 | 100.00 | 100.00 |



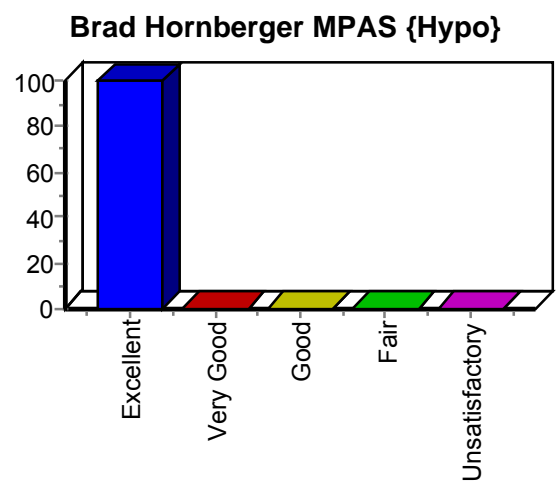
When do you intend to implement these new strategies into your practice?

| Label | Frequency | Percent | Valid Percent |
|----------------|-----------|---------|---------------|
| Within 1 month | 26 | 63.41 | 63.41 |
| 1-3 months | 11 | 26.83 | 26.83 |
| 4-6 months | 3 | 7.32 | 7.32 |
| Not applicable | 1 | 2.44 | 2.44 |
| Total Valid | 41 | 100.00 | 100.00 |



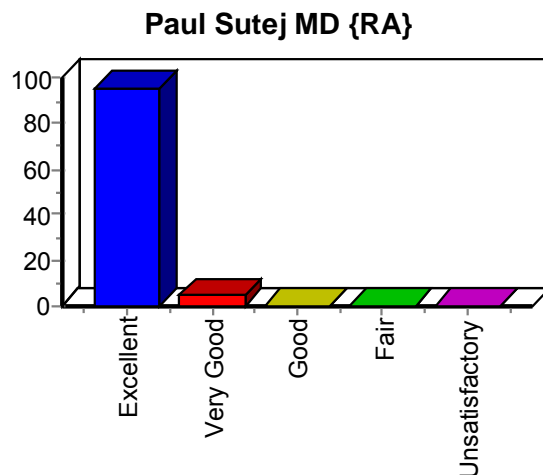
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Brad Hornberger, MPAS, PA-C (Hypo):

| Label | Frequency | Percent | Valid Percent |
|----------------|-----------|---------|---------------|
| Excellent | 41 | 100.00 | 100.00 |
| Very Good | 0 | 0.00 | 0.00 |
| Good | 0 | 0.00 | 0.00 |
| Fair | 0 | 0.00 | 0.00 |
| Unsatisfactory | 0 | 0.00 | 0.00 |
| Total Valid | 41 | 100.00 | 100.00 |



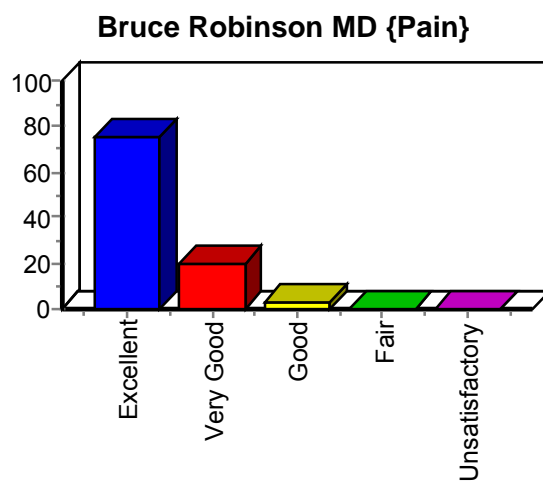
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Paul Sutej, MD (RA):

| Label | Frequency | Percent | Valid Percent |
|----------------|-----------|---------|---------------|
| Excellent | 39 | 95.12 | 95.12 |
| Very Good | 2 | 4.88 | 4.88 |
| Good | 0 | 0.00 | 0.00 |
| Fair | 0 | 0.00 | 0.00 |
| Unsatisfactory | 0 | 0.00 | 0.00 |
| Total Valid | 41 | 100.00 | 100.00 |



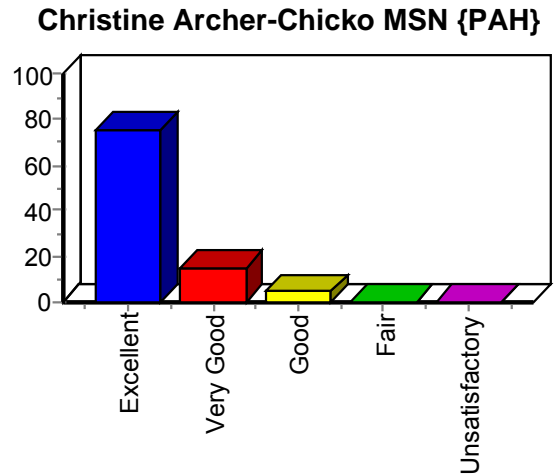
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Bruce Robinson, MD (Pain):

| Label | Frequency | Percent | Valid Percent |
|----------------|-----------|---------|---------------|
| Excellent | 31 | 75.61 | 77.50 |
| Very Good | 8 | 19.51 | 20.00 |
| Good | 1 | 2.44 | 2.50 |
| Fair | 0 | 0.00 | 0.00 |
| Unsatisfactory | 0 | 0.00 | 0.00 |
| Total Valid | 40 | 97.56 | 100.00 |
| Total Missing | 1 | 2.44 | |
| Total | 41 | 100.00 | |



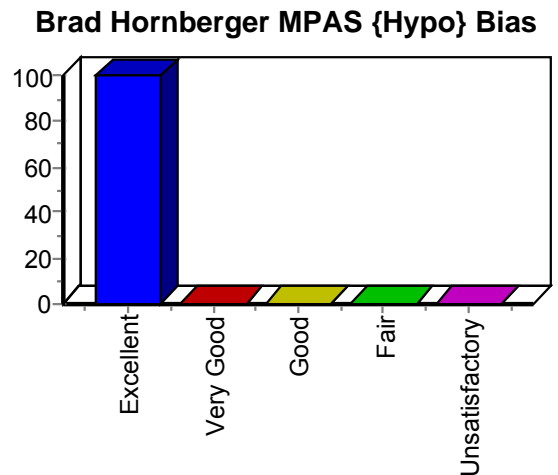
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Christine Archer-Chicko, MSN, CRNP (PAH):

| Label | Frequency | Percent | Valid Percent |
|----------------|-----------|---------|---------------|
| Excellent | 31 | 75.61 | 79.49 |
| Very Good | 6 | 14.63 | 15.38 |
| Good | 2 | 4.88 | 5.13 |
| Fair | 0 | 0.00 | 0.00 |
| Unsatisfactory | 0 | 0.00 | 0.00 |
| Total Valid | 39 | 95.12 | 100.00 |
| Total Missing | 2 | 4.88 | |
| Total | 41 | 100.00 | |



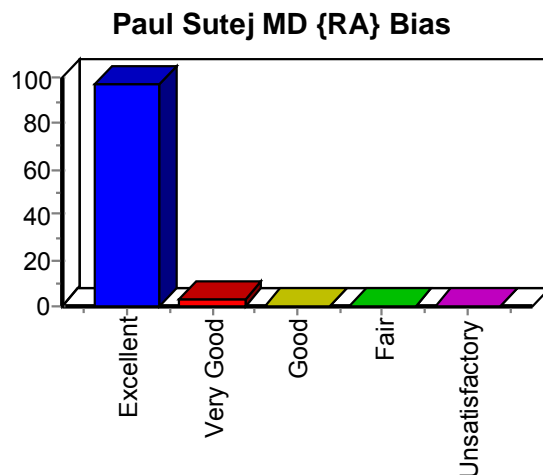
To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Brad Hornberger, MPAS, PA-C (Hypo):

| Label | Frequency | Percent | Valid Percent |
|----------------|-----------|---------|---------------|
| Excellent | 41 | 100.00 | 100.00 |
| Very Good | 0 | 0.00 | 0.00 |
| Good | 0 | 0.00 | 0.00 |
| Fair | 0 | 0.00 | 0.00 |
| Unsatisfactory | 0 | 0.00 | 0.00 |
| Total Valid | 41 | 100.00 | 100.00 |



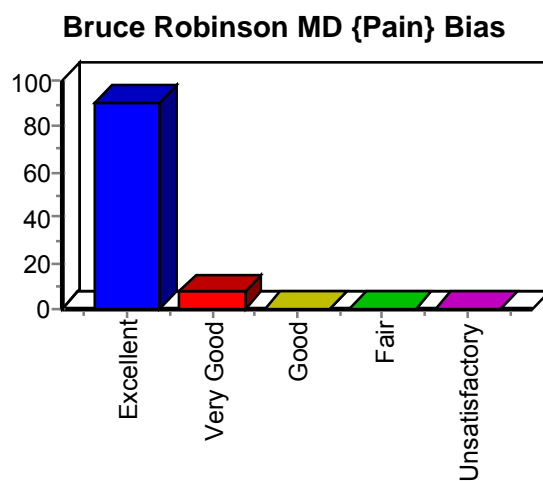
To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Paul Sutej, MD (RA):

| Label | Frequency | Percent | Valid Percent |
|----------------|-----------|---------|---------------|
| Excellent | 40 | 97.56 | 97.56 |
| Very Good | 1 | 2.44 | 2.44 |
| Good | 0 | 0.00 | 0.00 |
| Fair | 0 | 0.00 | 0.00 |
| Unsatisfactory | 0 | 0.00 | 0.00 |
| Total Valid | 41 | 100.00 | 100.00 |



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

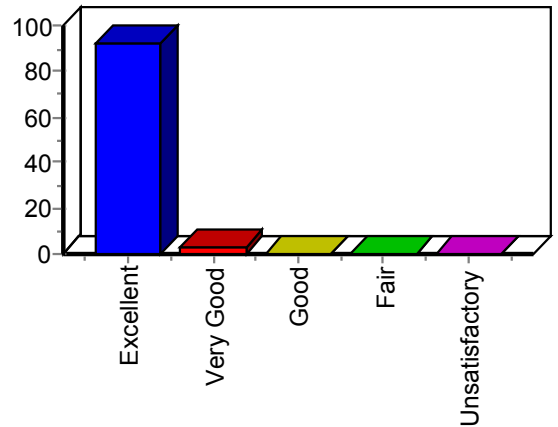
| Label | Frequency | Percent | Valid Percent |
|----------------|-----------|---------|---------------|
| Excellent | 37 | 90.24 | 92.50 |
| Very Good | 3 | 7.32 | 7.50 |
| Good | 0 | 0.00 | 0.00 |
| Fair | 0 | 0.00 | 0.00 |
| Unsatisfactory | 0 | 0.00 | 0.00 |
| Total Valid | 40 | 97.56 | 100.00 |
| Total Missing | 1 | 2.44 | |
| Total | 41 | 100.00 | |



To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Christine Archer-Chicko, MSN, CRNP (PAH):

| Label | Frequency | Percent | Valid Percent |
|----------------|-----------|---------|---------------|
| Excellent | 38 | 92.68 | 97.44 |
| Very Good | 1 | 2.44 | 2.56 |
| Good | 0 | 0.00 | 0.00 |
| Fair | 0 | 0.00 | 0.00 |
| Unsatisfactory | 0 | 0.00 | 0.00 |
| Total Valid | 39 | 95.12 | 100.00 |
| Total Missing | 2 | 4.88 | |
| Total | 41 | 100.00 | |

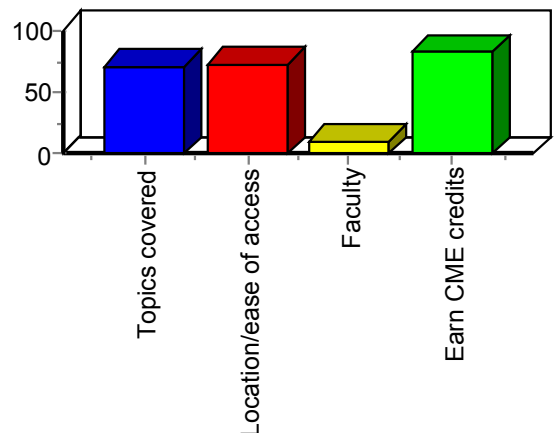
Christine Archer-Chicko MSN {PAH} Bias



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

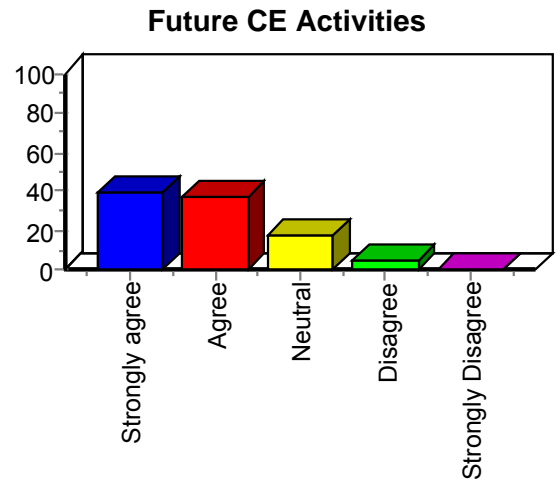
| Label | Frequency | Percent | Valid Percent |
|-------------------------|-----------|---------|---------------|
| Topics covered | 29 | 70.73 | 70.73 |
| Location/ease of access | 30 | 73.17 | 73.17 |
| Faculty | 4 | 9.76 | 9.76 |
| Earn CME credits | 34 | 82.93 | 82.93 |
| Total Valid | 41 | 100.00 | 100.00 |

Reasons for Participating



Future CE activities concerning this subject matter are necessary:

| Label | Frequency | Percent | Valid Percent |
|-------------------|-----------|---------|---------------|
| Strongly agree | 16 | 39.02 | 40.00 |
| Agree | 15 | 36.59 | 37.50 |
| Neutral | 7 | 17.07 | 17.50 |
| Disagree | 2 | 4.88 | 5.00 |
| Strongly Disagree | 0 | 0.00 | 0.00 |
| Total Valid | 40 | 97.56 | 100.00 |
| Total Missing | 1 | 2.44 | |
| Total | 41 | 100.00 | |



What is your professional degree?

| Comment |
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What is your specialty?

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| Surgery |

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

| Comment |
|--|
| Importance of testing testosterone. Importance of early use of biologic therapies. Use of modified functional pain scale |
| Be able to better assess patients and refer them to a specialist |
| Importance of testosterone level testing. Start work up for RA and PAH while pending evaluation by specialist |
| Avoid fentanyl patch on elderly. Refer to cardiologist for PAH. Early recognition of hypogonadism by appropriate testing |
| More precise history taking and more aware of how to evaluate further and when to refer |
| Work orthopedic spine surgery - education helpful with re-certification |
| Better understanding of pharmacokinetics and treatment modalities |
| Refer when appropriate. Establish diagnosis |
| Testosterone screening in men with fatigue and Diabetes. More diagnostic study for RA with bilateral PIP joint pain. Different options |
| Evaluate for possible low testosterone and sent for early testing. Benefits of early identification and treatment. Age related evaluation for pain and treatment. Early evaluation and treatment of RA |
| Not to prescribe Fentanyl patch to an elderly patient. PAH diagnosis and treatment |
| Handouts of guidelines. Upcoming lectures |
| Adequate treatment. Order appropriate labs and studies. Know when to refer to a specialist |
| Early intervention in RA management. Assess co morbidities to hypogonadism. Accurate diagnosis of PAH. Timely diagnosis and treatment |
| Better assessment questions. Testing and referral needs of patients will be better assessed |
| Managing Hypogonadism |
| Hold biologicals with infection |
| Prompt referral to specialist |
| Considering testosterone in patients. Using pain scales for patients |
| Evaluate patients more frequently and aggressively |
| More knowledge base |

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

| Comment |
|--|
| Use of radiologic testing |
| Melanoma and new treatments |
| Femoral artery |
| Pediatrics. Acute care pediatrics and adult autoimmune disorders |
| Geriatric topics and care |
| Female HRT. Anti-aging topics. Aesthetics, Botox and fillers. Orthopedic topics such as assessment of knees, shoulders, hips and lumbar. Dermatology - skin cancer, lesions, Vitamin D and treatment |
| Anything - surgical, urology, etc |
| Gout, Arthritis, Women's Health |
| Renal, Hypertension, CV D3 |
| Cardiac, Syncope, Infection, Hypertension, Thyroid |
| More attention to geriatric needs on any topic where applicable. More pharma |
| HIV |
| Allergy related topics. Asthma and respiratory disorders as well as vaccines. Osteoporosis and Osteopenia. Dermatologic disorders |
| Dermatology |
| Dermatology |
| DA, COPD, CAD, MRSA |
| Obesity. Erectile Disorder |
| New ATP guidelines. New medications in pharmacology. Adult population and geriatric |
| New changes in antibiotic treatments, childhood obesity and STD in younger adults. |
| Diabetes, HTN, Asthma, Endocrine disorders in general, Ortho topics, Renal Disorders |
| Primary prevention strategies including compliance strategies. CAD. HTN |
| Management of Hypothyroid Disease. Skin Disorders |
| Any topics |
| Pain management in post-op "special" patients (i.e. pregnancy, liver/renal insufficiency, multiple allergies). How to find good apps for iPhones. Which ones are good to use for practice? |
| DM. New medications |
| Women's Health |

Additional comments:

| Comment |
|---|
| Thank you very much |
| Very good conference. Half day sessions are great and the cost is super. Consider hotel with free parking such as Coronado Springs (Disney) |
| PAH lecture very interesting |
| Very good program |
| Wow. The speakers were well prepared. Information was presented with comprehensive references, very effective slides and booklet to take back to clinic to refer back to in the future |
| Thank you for this opportunity. Great to finish on time |
| Florida NP's and PA's cannot prescribe any controlled prescription (opioids) medications |
| Excellent program |
| Wonderful. |
| Excellent content. Thank you for providing a free CME conference just for our target audience. Very well organized |
| Very well prepared and presented. Thank you |
| Thank you |
| Always excellent speakers. Very informative |
| The content presented was very useful and the faculty were very good. It would be helpful to include abbreviations written out and a list of generic medications and their brand names in the handout as a reference. |
| Very good content and speakers Enjoyed the Q&A |
| Thanks for the handouts |