

COPD NOW:

Practical Strategies in Medical
Management of Stable
Disease and Exacerbations

CME/CNE symposium



Final Outcomes Report

*This activity is supported by independent educational grants from
AstraZeneca Pharmaceuticals LP, Boehringer Ingelheim
Pharmaceuticals, Inc., and Sunovion Pharmaceuticals, Inc.*



COPD NOW:

Medical Management of
Stable Disease and Exacerbations

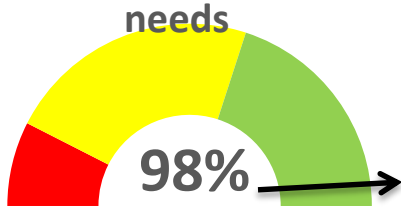


CME/CNE symposium

Dashboard: Activity Impact

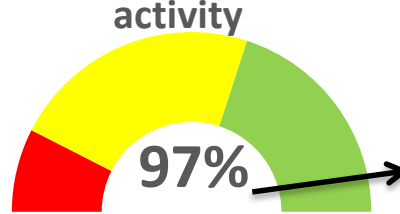
Final Report: Dashboard: Series of (8) Live Symposia

Participants who reported the activity met their educational needs



Overall relative knowledge gain from pre- to post-activities
40%

Participants who intend to make changes in practice as a result of activity



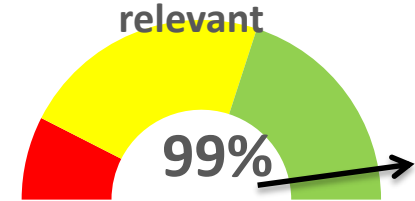
349
Learners (Live)



65%
Prescribers

- 31% MD/DO
- 34% NP/PA

Participants who reported content was evidence-based and clinically relevant



Estimated # of patients impacted per month
7,000+

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Dashboard: Activity Impact

Online Enduring Program Metrics for (3) Modules Launched 9/29/17

Initial Assessment and Management of Stable COPD (Module 1)

- ✓ Completers: 665
- ✓ Total Learners: 1308
- ✓ Total Participants: 3010

Learning to Assess and Manage Patients with Frequent COPD Exacerbations (Module 2)

- ✓ Completers: 415
- ✓ Total Learners: 527
- ✓ Total Participants: 1033

Roundtable: Management of Patients with COPD (Module 3)

- ✓ Completers: 620
- ✓ Total Learners: 954
- ✓ Total Participants: 2131

Overall relative knowledge gain from pre- to post-activities

54%



TOTAL PARTICIPATION:
Completers: 1,700
Learners: 2,789
Participants: 6,174



Participant Breakdown:
51% Prescribers

- MD/DO: 28 %
- NP/PA: 23%



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Final Report: Background: **Series of (8) Live Symposia**

Background:

The live portion of this educational initiative encompasses eight meetings across the country featuring expert speakers, video patient cases, ARS polling and resources to help attendees convert information into practice. The goal of this program is to improve the knowledge and competence of pulmonologists, allergists and primary care physicians, as well as physician assistants and nurse practitioners in the diagnosis, management, and treatment of severe asthma.

Learning Objectives

1. Discuss the key updates from the 2017 GOLD Guidelines and their application to the diagnosis and management of COPD .
2. List the pharmacotherapies and non-pharmacologic therapies for management of COPD according to 2017 GOLD guidelines.
3. Review effective communication strategies to improve engagement and self-management for patients with COPD.

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Final Report: Accreditation, Audience and Outcomes Strategy: **Series of (8) Live Symposia**

Accreditation Details: In support of improving patient care, NJH is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. NJH is also accredited by the Accreditation Council for Pharmacy Education (ACPE) and the California Board of Registered Nursing (CBRN) to provide continuing education for the healthcare team. ***NJH will designate the live evening symposia for a maximum of 2.25 AMA PRA Category 1 Credits™.***

Target Audience: Family Physicians and Internal Medicine Physicians, along with Community Pulmonologists and Primary Care Physicians that diagnose and treat COPD are the primary target audience members for this educational program. In addition, nurse practitioners, physician assistants, and nurses who treat patients with COPD are the secondary target audience who will benefit from the program.

Educational Outcomes Strategy: Outcomes will be measured via participation totals, specialty, medical designation, pre-test, post-test, interactive polling questions, evaluations and 45-day follow up surveys. The metrics will demonstrate participation, satisfaction, learning, engagement, change in knowledge and competence, and self-reported performance to achieve Moore's Level 4 outcomes.



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Final Report: Faculty: Series of (8) Live Symposia

Amen Sergew, MD

Assistant Professor, Department of Medicine,
Division of Pulmonary, Critical Care and Sleep Medicine
Section of Critical Care Medicine
National Jewish Health, Denver, CO



Steven Lommatzsch, MD

Assistant Professor, Department of Medicine, Division of
Pulmonary, Critical Care and Sleep Medicine
National Jewish Health, Denver, CO



Anthony Gerber, MD, PhD

Associate Professor, Department of Medicine, Division of Pulmonary,
Critical Care and Sleep Medicine
Department of Biomedical Research
National Jewish Health, Denver, CO



COPD NOW: Medical Management of Stable Disease and Exacerbations

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Final Report: Faculty: **Series of (8) Live Symposia**

Barry Make, MD

Professor, Department of Medicine, Division of Pulmonary, Critical Care and Sleep Medicine
National Jewish Health, Denver, CO



James Finigan, MD

Director, The Respiratory Centers of Excellence
Medical Director, Lung Cancer Screening Program
Associate Professor, Division of Pulmonary, Critical Care and Sleep Medicine
Division of Oncology, Cancer Center
Department of Medicine, National Jewish Health, Denver, CO



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Final Report: Attendees Per City: **Series of (8) Live Symposia**

Kansas City, MO: 6/21/2017	36
St. Louis, MO: 6/28/2017	38
Indianapolis, IN: 7/12/2017	25
Nashville, TN: 7/27/2017	32
Houston, TX: 8/9/2017	56
Atlanta, GA: 8/10/2017	71
Philadelphia, PA: 10/12/2017	46
Chicago, IL: 10/19/2017	45

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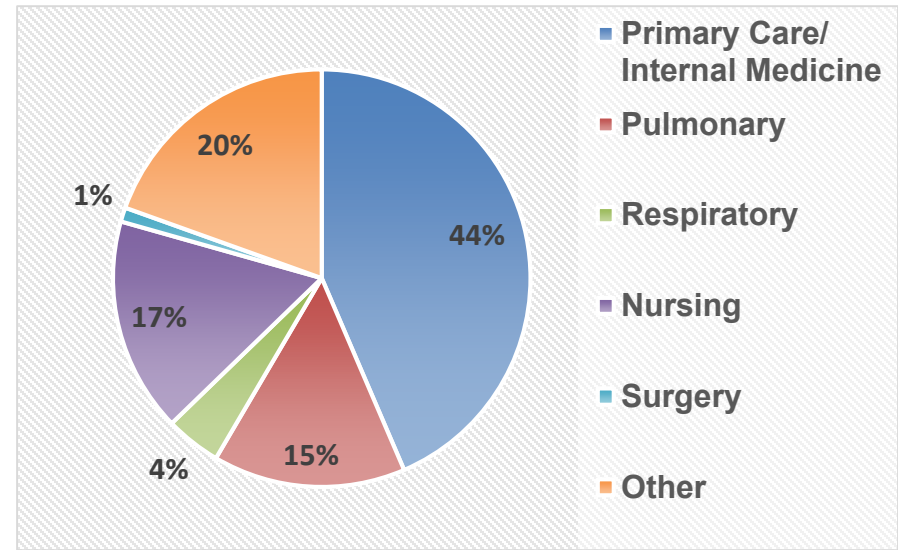
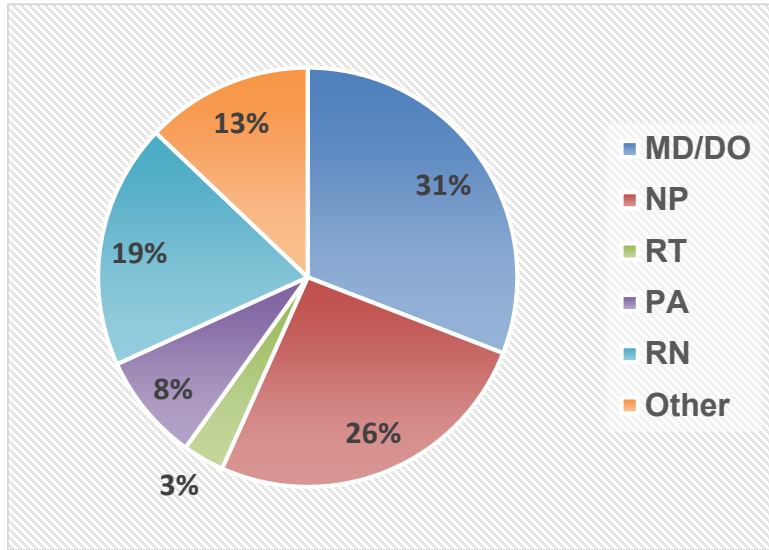
To address lower than projected attendance, NJH added temporary staff to our arsenal of marketing strategies. In addition to redoubling our traditional marketing efforts through mail and email, these staff made calls and sent invitations to physician practices in the areas where there were meetings to increase awareness of the opportunity. While attendance was lower than expected, we were encouraged by the strong feedback we received about the content and structure of the event.

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Final Report: Attendee Breakdown & Specialty: Series of (8) Live Symposia



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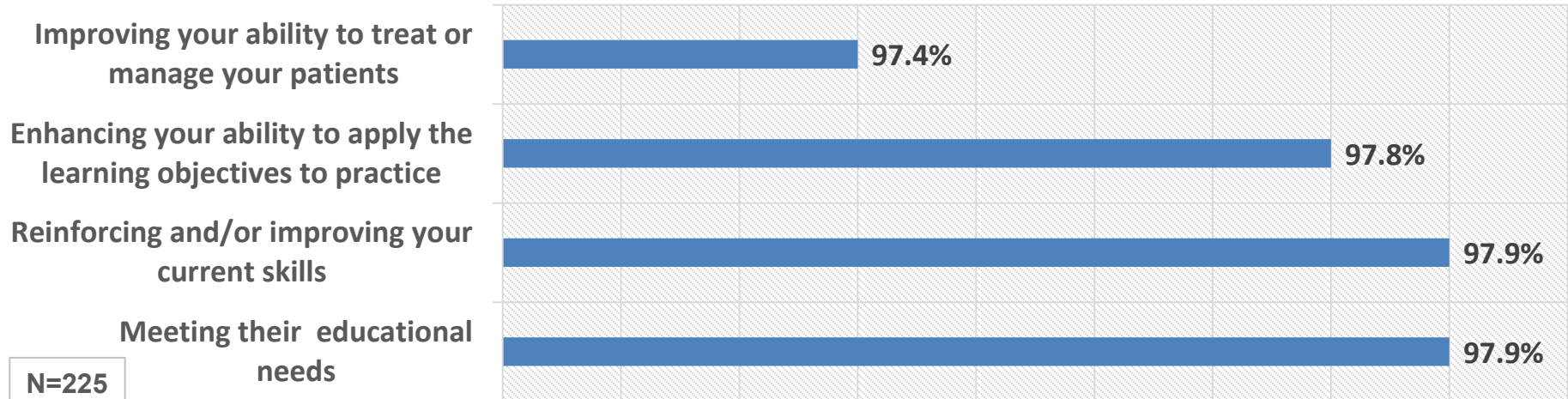
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Final Report: Level 2 and 3 Outcomes (Satisfaction/Learning): **(8) Live Symposia**

Participants reported that the activity was
“Good” to “Excellent” at:



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Final Report: Pre-test/Post-test Questions: (8) Live Symposia

Question 1

The therapy with the greatest potential to influence the natural progression of COPD is:

- A. Combination long-acting beta agonist/inhaled steroid use twice a day
- B. Roflumilast tablet orally once a day
- C. Pulmonary rehabilitation program for 12 weeks
- D. Smoking Cessation**

Original Question 2

Immediate medical evaluation should occur for a COPD patient exhibiting which of the following symptoms:

- A. Cough with purulent sputum
- B. Fever
- C. Wheezing
- D. Shortness of breath at rest**
- E. A and D

Question 3

An important consideration for patients when cleaning an albuterol inhaler is to:

- A. Remove the canister and float it in water
- B. Wash the canister and holder with water
- C. Remove the canister and wash the holder with water**
- D. Inspect the mouthpiece for obstructions and wipe with a dry cloth

**Question 1 showed a decrease in knowledge in St. Louis and Indianapolis; and Question 2 showed no change or a decrease in knowledge in Kansas City, Nashville and Atlanta. After careful analysis by faculty, it was determined that these questions may not be clear and that there may be a need for additional education and clarification around these topics in future education.*

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CME/CNE symposium

Final Report: Pre-test/Post-test Questions: (8) Live Symposia

Question 4

An increased risk for COPD exacerbation can be precipitated by:

A. Underlying severity of the COPD

- B. A history of sinusitis
- C. Chronic use of long acting beta agonist (LABA)
- D. A recent influenza vaccination

Question 5

All of the following represent increased risk for COPD exacerbation EXCEPT:

- A. History of previous exacerbations
- B. Male Gender**
- C. Poor/low lung function
- D. Depression

Question 6

Medications demonstrated to reduce the risk of COPD exacerbations include:

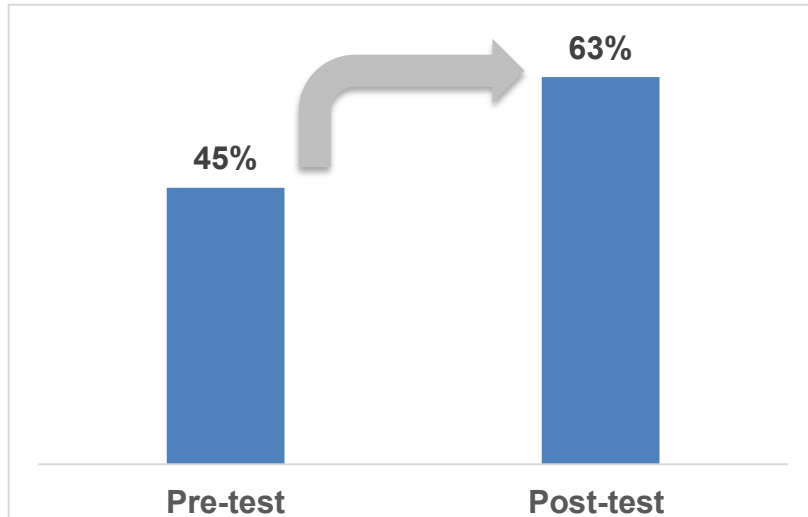
- A. Daily oral corticosteroid use
- B. Inhaled long acting muscarinic antagonists (LABA)
- C. Combinations of long acting beta agonists and inhaled corticosteroids
- D. B and C Only**
- E. A, B and C

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Final Report: Level 3 and 4 Outcomes (Knowledge/Competence): (8) Live Symposia



Average relative gain in knowledge and competence: **40% increase from baseline to post-test**

Overall relative increase
from pre- to post-
activity



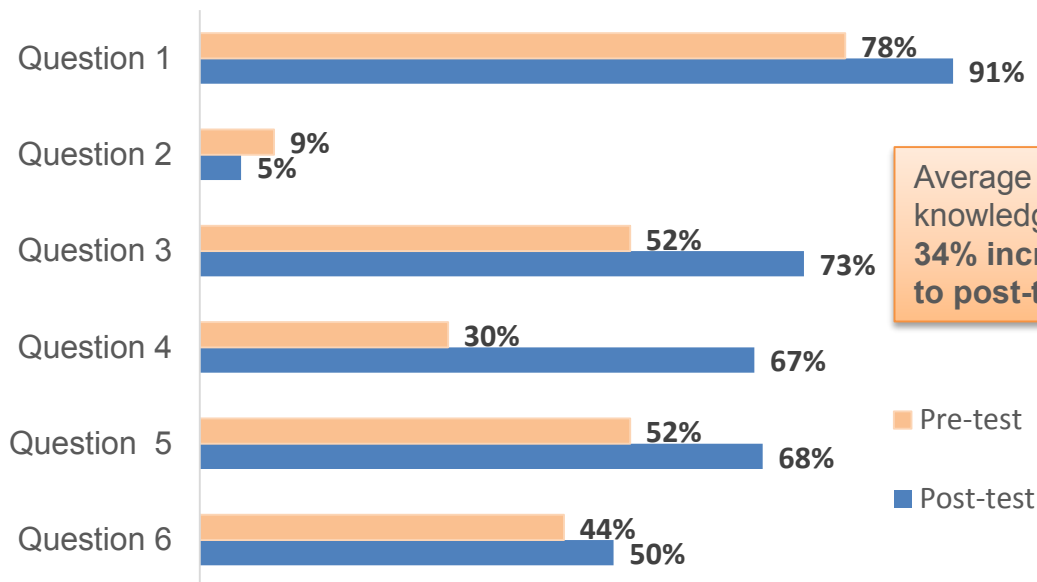
40%

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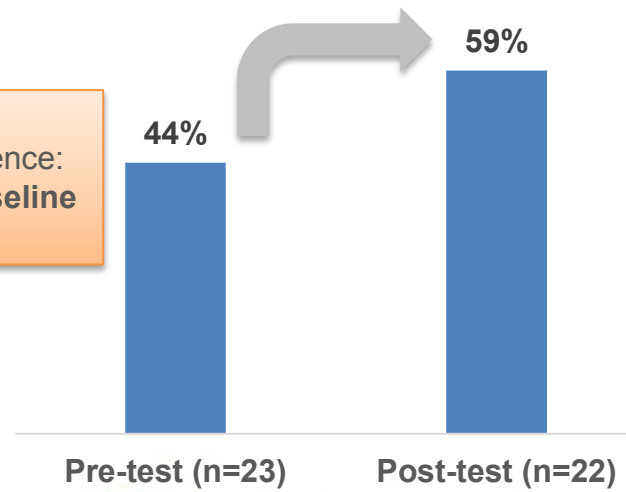
CME/CNE symposium

Final Report: Pre- to Post-Test Analysis: Kansas City: (8) Live Symposia



Average relative gain in knowledge and competence: **34% increase from baseline to post-test**

Pre-test
Post-test

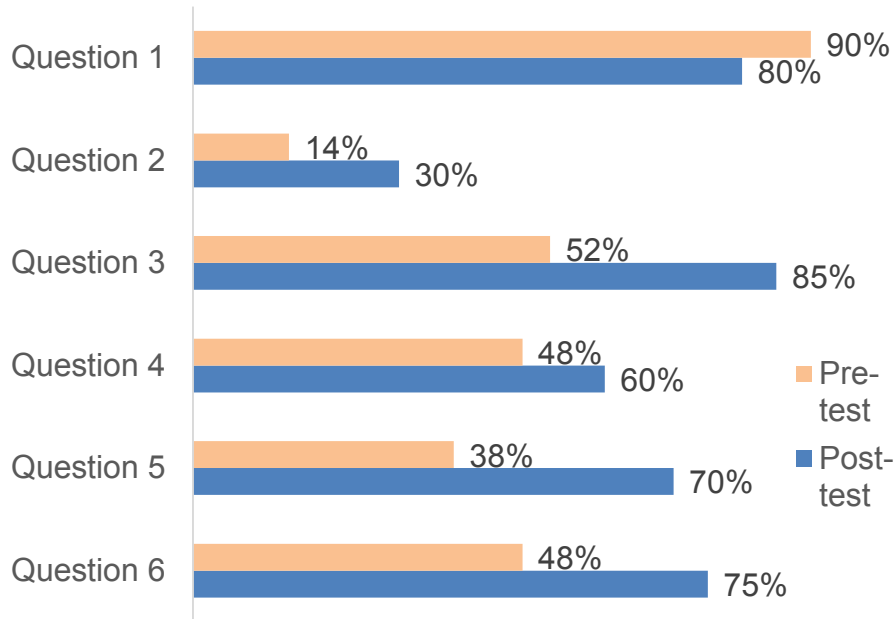


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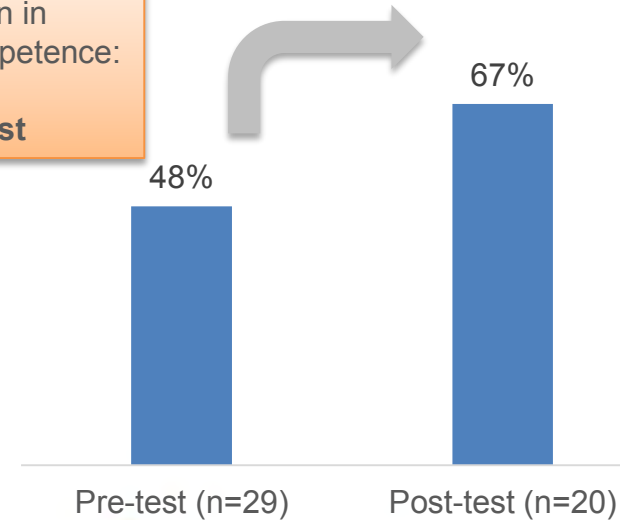


CME/CNE symposium

Final Report: Pre- to Post-Test Analysis: St. Louis: (8) Live Symposia



Average relative gain in knowledge and competence: **40% increase from baseline to post-test**

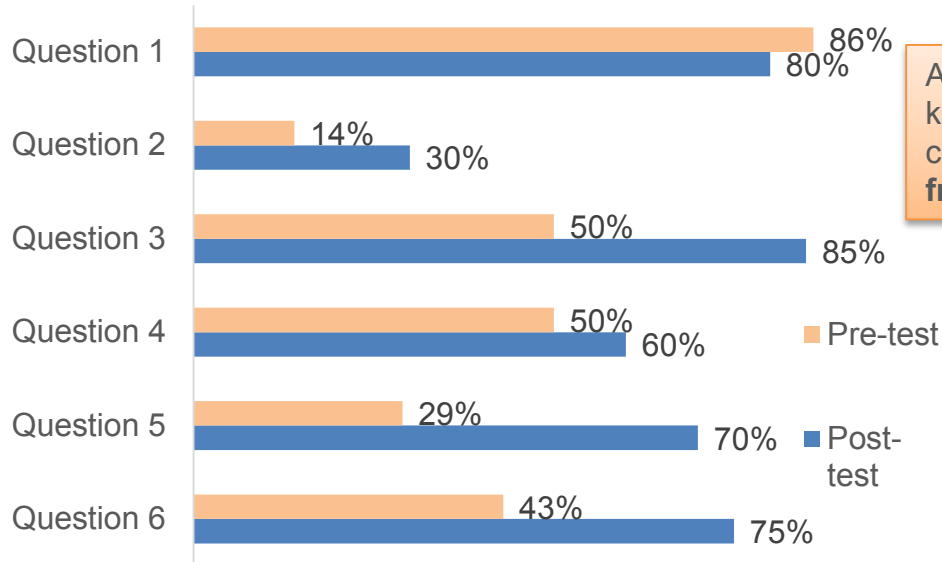


COPD NOW: Medical Management of Stable Disease and Exacerbations

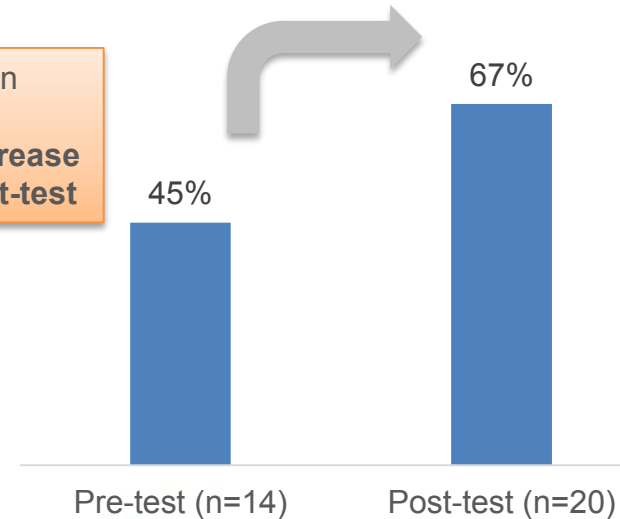


CME/CNE symposium

Final Report: Pre- to Post-Test Analysis: Indianapolis: (8) Live Symposia



Average relative gain in knowledge and competence: **49% increase from baseline to post-test**

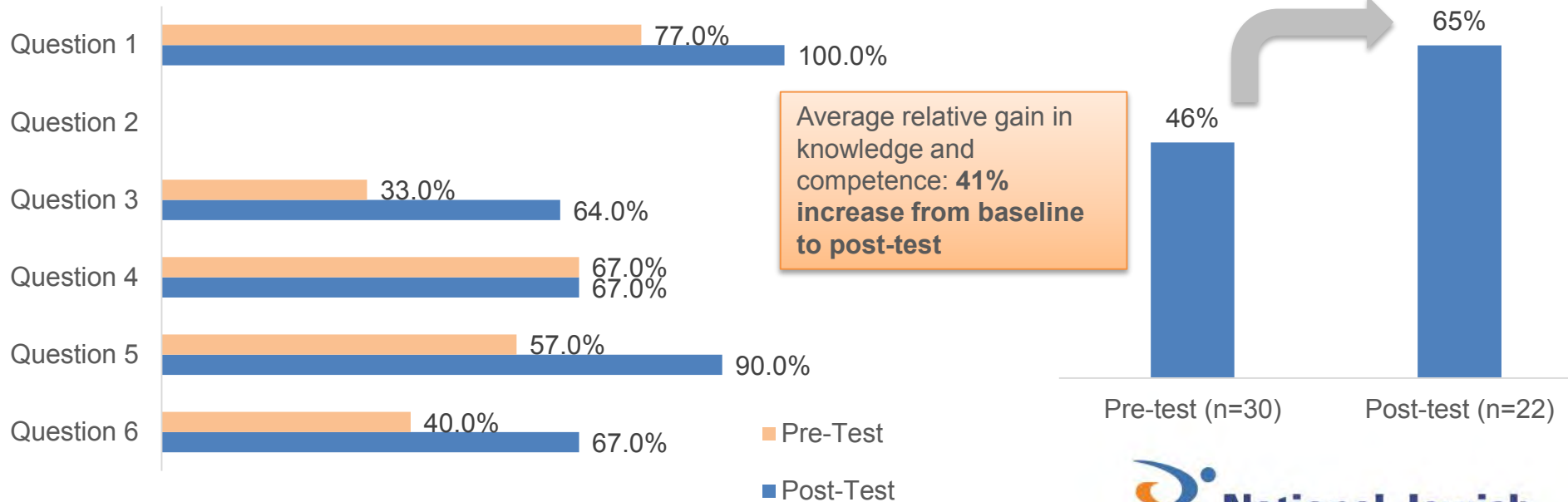


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CME/CNE symposium

Final Report: Pre- to Post-Test Analysis: Nashville: (8) Live Symposia

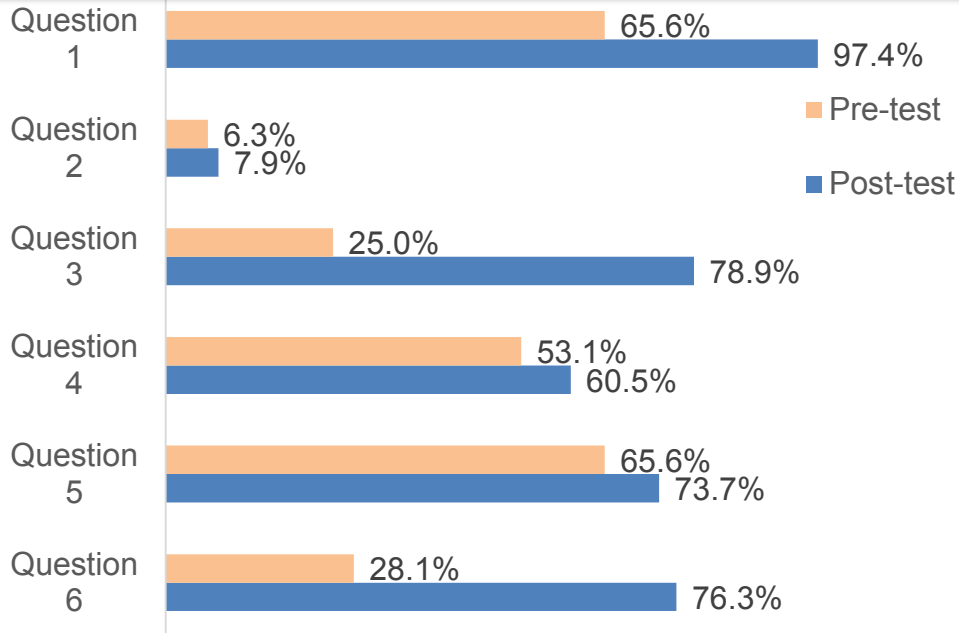


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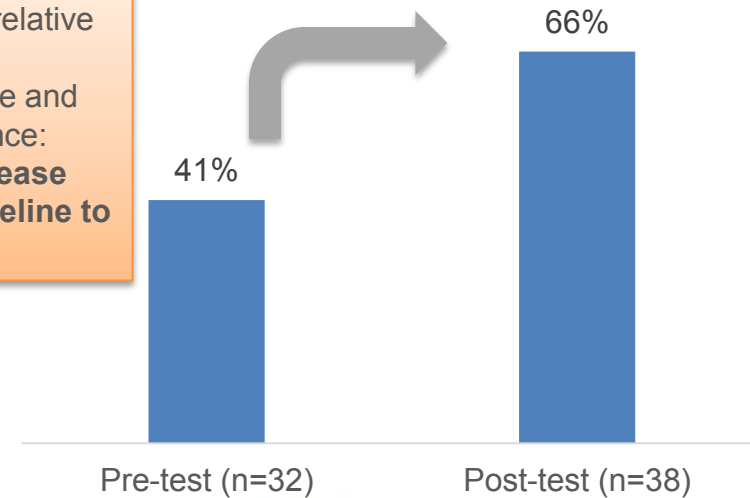


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Final Report: Pre- to Post-Test Analysis: Houston: (8) Live Symposia



Average relative gain in knowledge and competence: **61% increase from baseline to post-test**

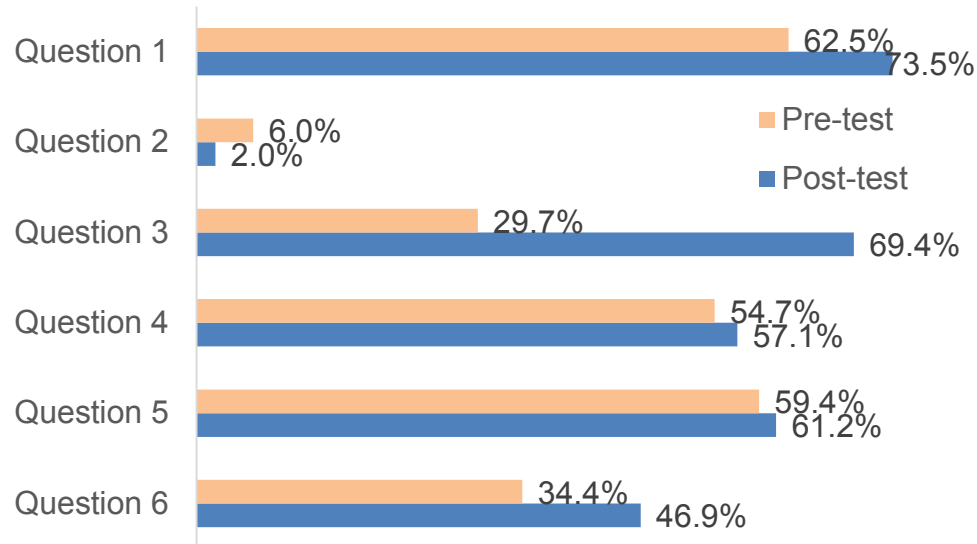


COPD NOW: Medical Management of Stable Disease and Exacerbations

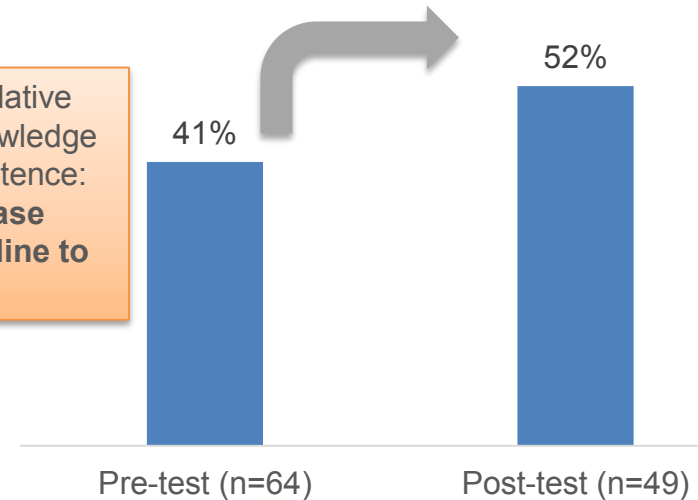


CME/CNE symposium

Final Report: Pre- to Post-Test Analysis: Atlanta: (8) Live Symposia



Average relative gain in knowledge and competence: **27% increase from baseline to post-test**

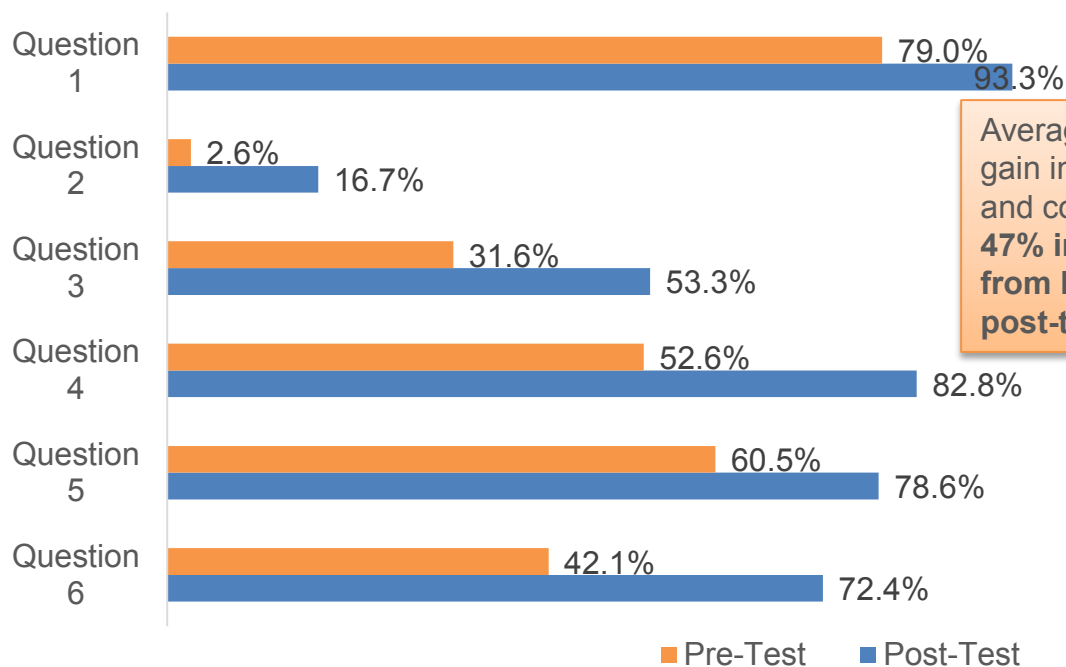


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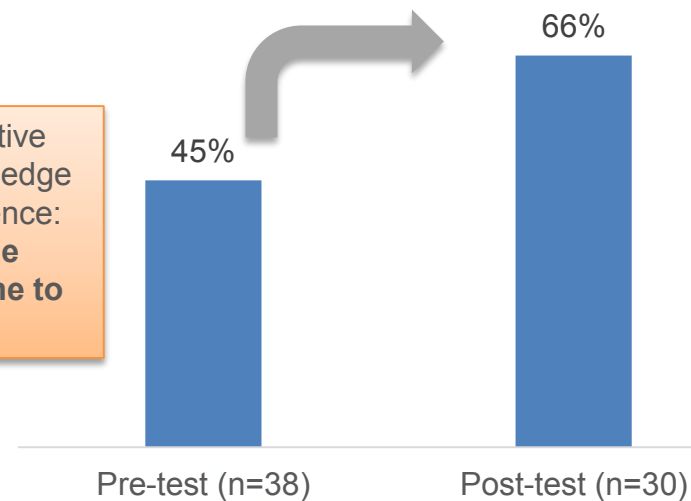


CME/CNE symposium

Final Report: Pre- to Post-Test Analysis: Philadelphia: (8) Live Symposia



Average relative gain in knowledge and competence: **47% increase from baseline to post-test**

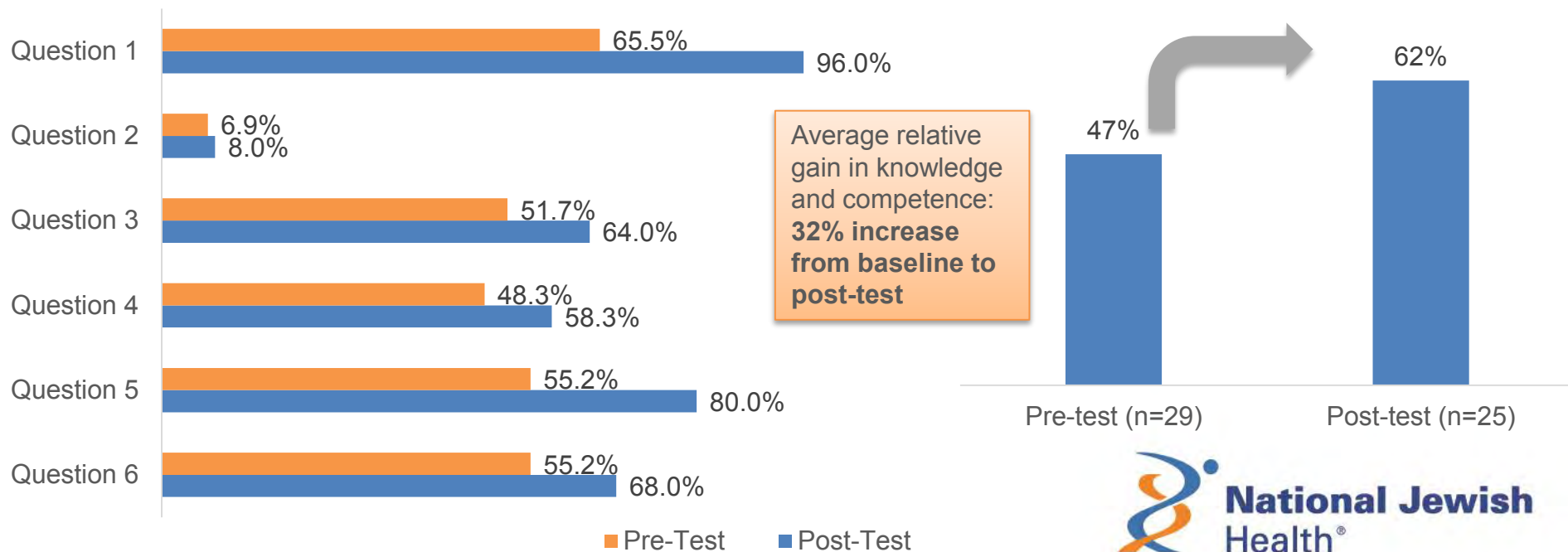


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CME/CNE symposium

Final Report: Pre- to Post-Test Analysis: Chicago: (8) Live Symposia



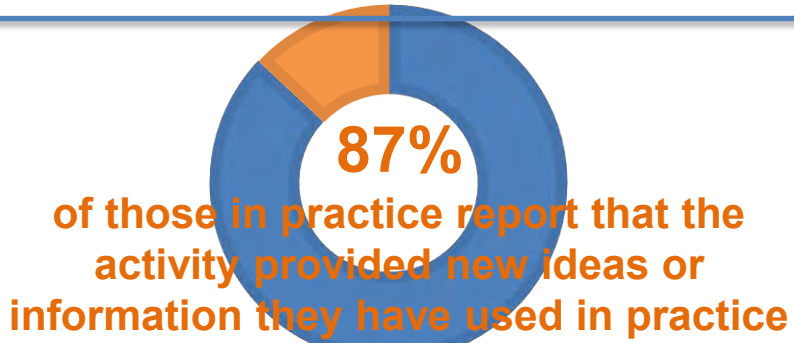
COPD NOW: Medical Management of Stable Disease and Exacerbations



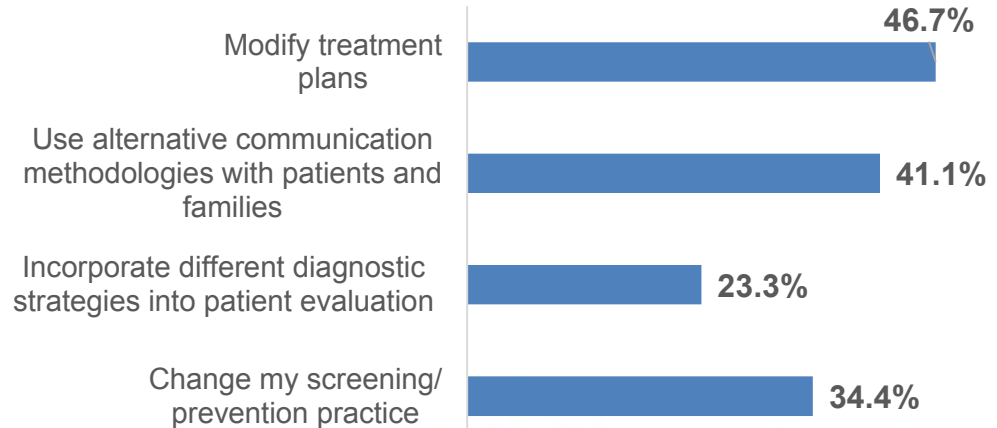
CME/CNE symposium

Final Report: Level 5 Outcomes (Self-Reported Performance)

(8) Live Symposia



Changes participants report having made:



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Final Report: Evaluation Data

(8) Live Symposia

- ✓ **97%** of participants reported that they intend to make changes in practice as a result of this activity
- ✓ **100%** of participants reported that the material was presented in an objective manner and free of commercial bias
- ✓ **99%** of participants reported that the content presented was evidence-based and clinically relevant
- ✓ **99%** of participants reported that the activity addresses strategies for overcoming barriers to optimal patient care



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Final Report: ARS Questions

(8) Live Symposia

ARS Question 1

Based on the GOLD 2017 Guidelines, how can we best assess the patient to determine therapy?

- A. GOLD Stage
- B. Symptoms
- C. Number of exacerbations
- D. A&C
- E. **B&C**

ARS Question 2

Based on GOLD 2017 Guidelines, what would be our patient's initial therapy?

- A. SABA as needed
- B. **LABA or LAMA**
- C. LABA/ICS
- D. Nothing at this point

ARS Question 3

She had a walk oximetry. At rest she is 91%, with ambulation drops to 87%. She needs:

- A. Oxygen at rest 2L and walking 3L
- B. Oxygen with 2L walking only
- C. Need an oxygen titrate to determine the amount of oxygen
- D. **Doesn't need any oxygen**



**Of note, the ARS data did not capture for the St. Louis meeting.*

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Final Report: ARS Questions

(8) Live Symposia

ARS Question 4

Exacerbations can be reliably diagnosed by a single lab test.

- A. True
- B. False**

ARS Question 5

Which of the following are implicated as causes of COPD exacerbations?

- A. The “common” cold
- B. Influenza infection
- C. High levels of particulate matter pollution
- D. All of the above**

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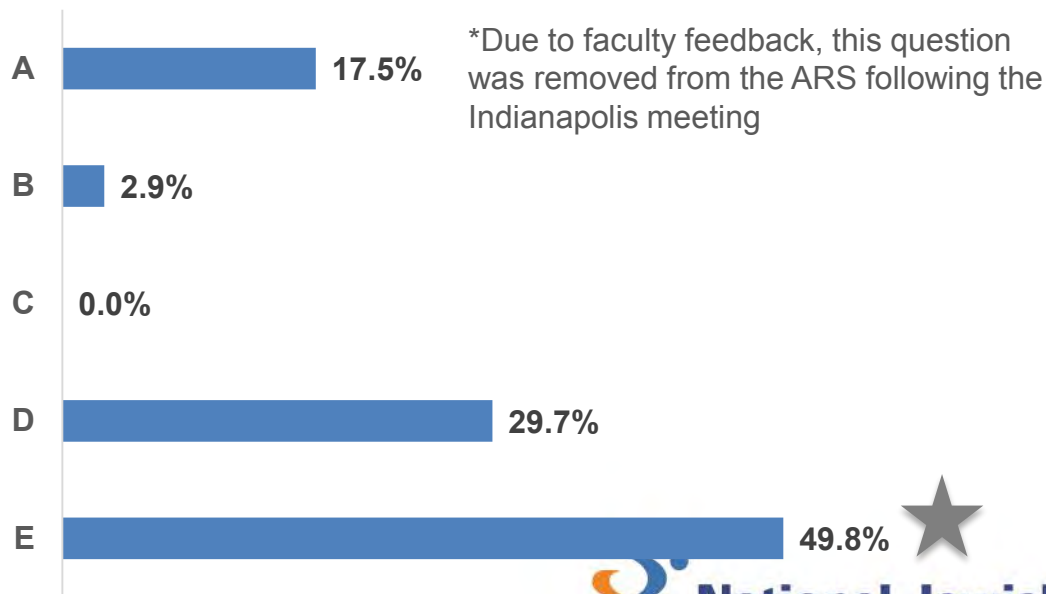
Final Report: ARS Question 1

(8) Live Symposia

ARS Question 1

Based on the GOLD 2017 Guidelines, how can we best assess the patient to determine therapy?

- A. GOLD Stage
- B. Symptoms
- C. Number of exacerbations
- D. A&C
- E. B&C



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Final Report: ARS Question 2

(8) Live Symposia

ARS Question 2

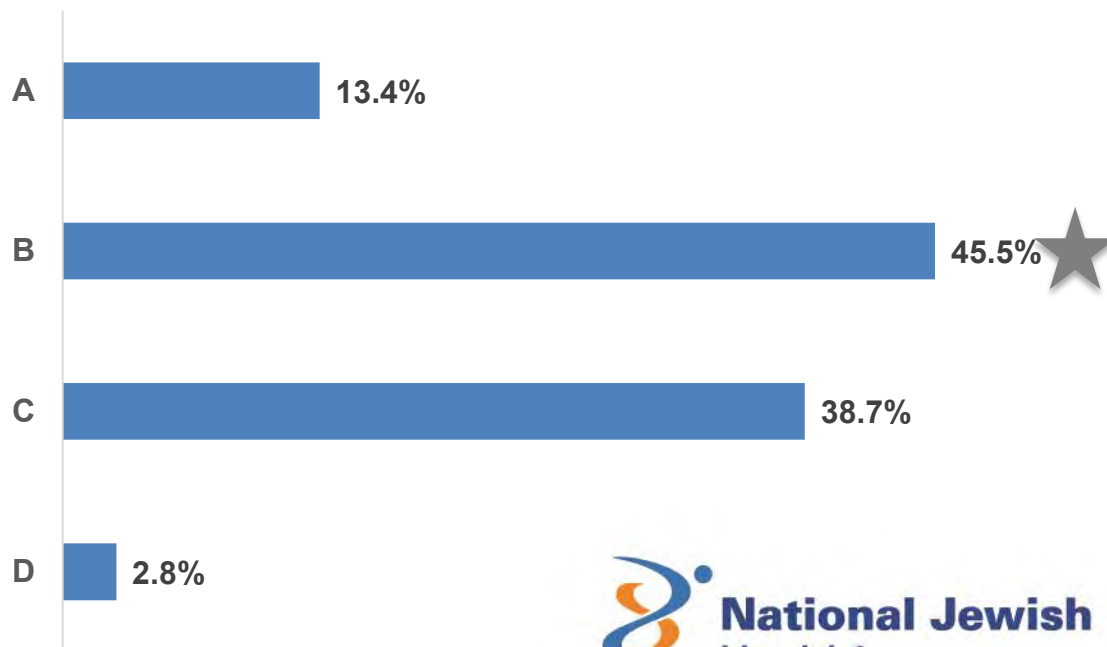
Based on GOLD 2017 Guidelines, what would be our patient's initial therapy?

A. SABA as needed

B. LABA or LAMA ★

C. LABA/ICS

D. Nothing at this point



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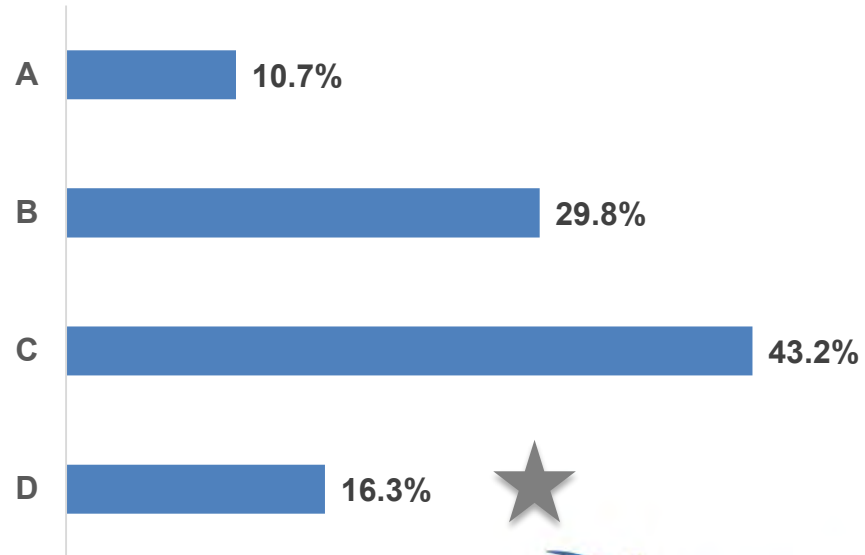
Final Report: ARS Question 3

(8) Live Symposia

ARS Question 3

She had a walk oximetry. At rest she is 91%, with ambulation drops to 87%. She needs:

- A. Oxygen at rest 2L and walking 3L
- B. Oxygen with 2L walking only
- C. Need an oxygen titrate to determine the amount of oxygen
- D. Doesn't need any oxygen** ★



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*Of note, this question was added after the Kansas City meeting so it does not include KC data.

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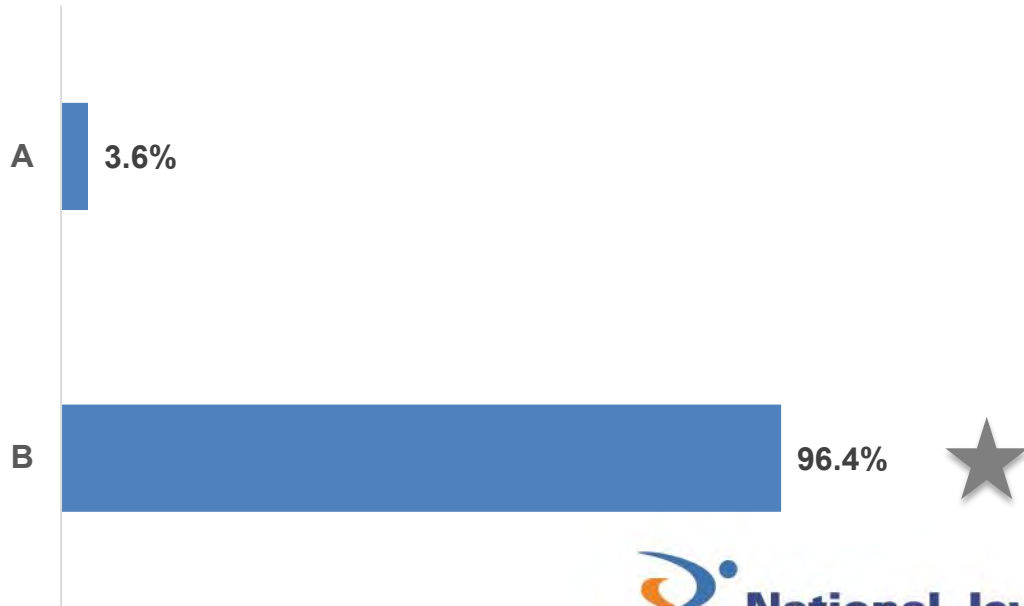
Final Report: ARS Question 4

(8) Live Symposia

ARS Question 4

Exacerbations can be reliably diagnosed by a single lab test.

- A. True
- B. False**



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Final Report: ARS Question 5

(8) Live Symposia

ARS Question 5

Which of the following are implicated as causes of COPD exacerbations?

- A. The “common” cold
- B. Influenza infection
- C. High levels of particulate matter pollution
- D. All of the above ★

A 0.6%

B 0.9%

C 0.8%

D 97.7% ★

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Online Activity

Final Status Report

Launched September 29, 2017:

<https://copdnow.njhealtheducation.org>

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Online Enduring Program – (3) Modules

Background

The online portion of this educational initiative encompasses three interactive and multimedia modules led by expert speakers addressing key points of practice. The online activity features interactive polling questions, feedback, downloadable slide decks and a clinical reference aid to help improve the knowledge and competence of pulmonologists and primary care physicians in the diagnosis, management, and treatment of COPD.

Learning Objectives

1. Discuss the key updates from the 2017 GOLD Guidelines and their application to the diagnosis and management of COPD .
2. List the pharmacotherapies and non-pharmacologic therapies for management of COPD according to 2017 GOLD guidelines.
3. Review effective communication strategies to improve engagement and self-management for patients with COPD.

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Online Enduring Program – (3) Modules

Accreditation Details: In support of improving patient care, NJH is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. NJH is also accredited by the Accreditation Council for Pharmacy Education (ACPE) and the California Board of Registered Nursing (CBRN) to provide continuing education for the healthcare team. ***NJH will designate the online activity for a maximum of 1.5 AMA PRA Category 1 Credits™.***

Target Audience: Family Physicians and Internal Medicine Physicians, along with Community Pulmonologists and Primary Care Physicians that diagnose and treat COPD are the primary target audience members for this educational program. In addition, nurse practitioners, physician assistants, and nurses who treat patients with COPD are the secondary target audience who will benefit from the program.

Educational Outcomes Strategy: Outcomes will be measured via participation totals, specialty, medical designation, pre-test, post-test, interactive polling questions, and evaluations. The metrics will demonstrate participation, satisfaction, learning, engagement and change in knowledge and competence to achieve Moore's Level 4 outcomes.



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Online Metrics:

- ✓ **Completed: 1,700**
- ✓ **Total Learners: 2,789**
 - MD/DO: 28%
 - NP/PA: 23%
- ✓ **Total Participants: 6,174**

Online Enduring Program – (3) Modules

CME COURSES

This online program includes patient case videos and lectures from leading experts in the field of COPD. Program Chairs are Barry Maikle, MD, and Steven Lommatzsch, MD, of National Jewish Health. It is designed for primary care physicians and community pulmonologists, nurse practitioners, physician assistants, and nurses who are involved in the management of COPD. This free CME activity includes two 30-minute modules and a one-hour roundtable discussion. Learners can complete each activity individually for separate credits.

[ENROLL NOW](#)

[or learn more](#)

Initial Assessment and Management of Chronic Obstructive Pulmonary Disease (COPD) Without Frequent Exacerbations

Karen Serlin, MD
Assistant Professor, Division of Pulmonary, Allergy and Critical Care Medicine
National Jewish Health
National Jewish University, University of Colorado

Learning Objectives

- Discuss the key updates from the 2017 GOLD Guidelines and their application to the diagnosis and management of COPD
- Recognize the role of exacerbations in the management of COPD
- Select appropriate pharmacologic therapy based on the most recent 2017 GOLD Guidelines for the management of COPD

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Online Enduring Program – (3) Modules

Initial Assessment and Management of Stable COPD

(Module 1)

- ✓ Certificates: 656
- ✓ Completed: 665

Learners: 1308

Participants: 3010

Learning to Assess and Manage Patients with Frequent COPD Exacerbations

(Module 2)

- ✓ Certificates: 409
- ✓ Completed: 415
- ✓ Learners: 527

Participants: 1033

Roundtable: Management of Patients with COPD

(Module 3)

- ✓ Certificates: 611
- ✓ Completed: 620

Learners: 954

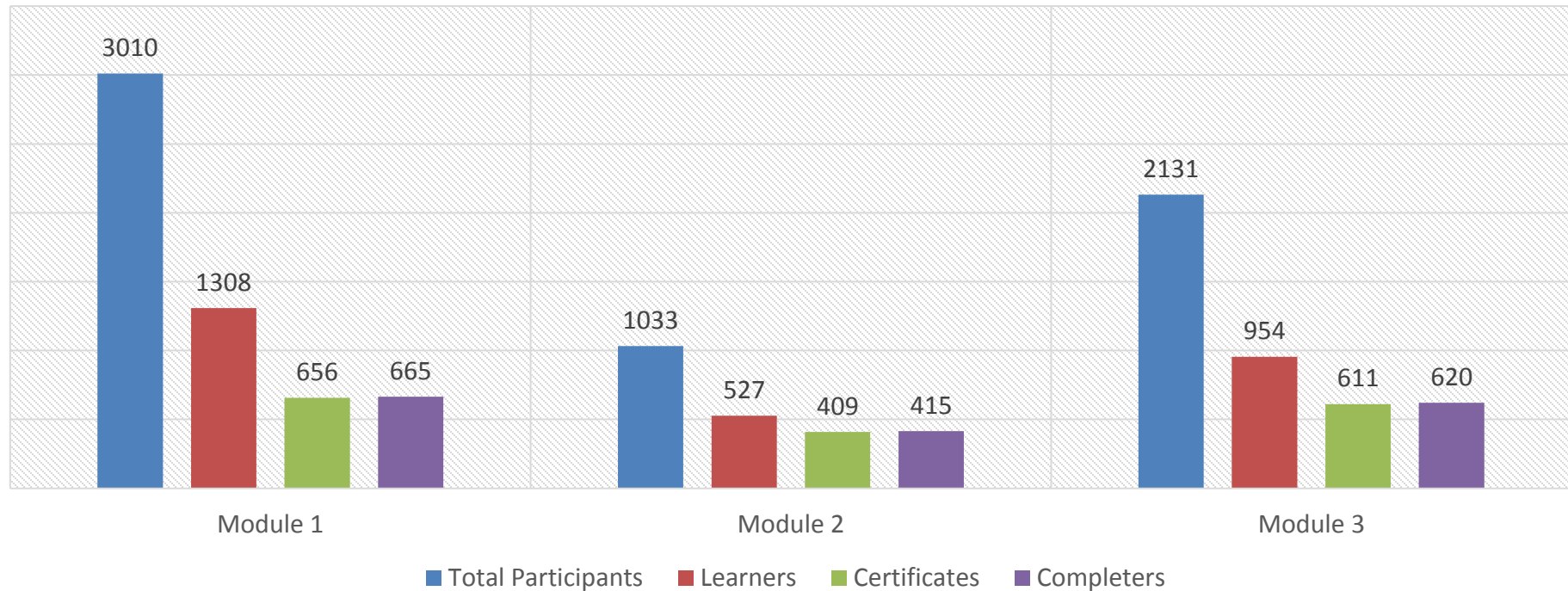
Participants: 2131

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Online Enduring Program – (3) Modules



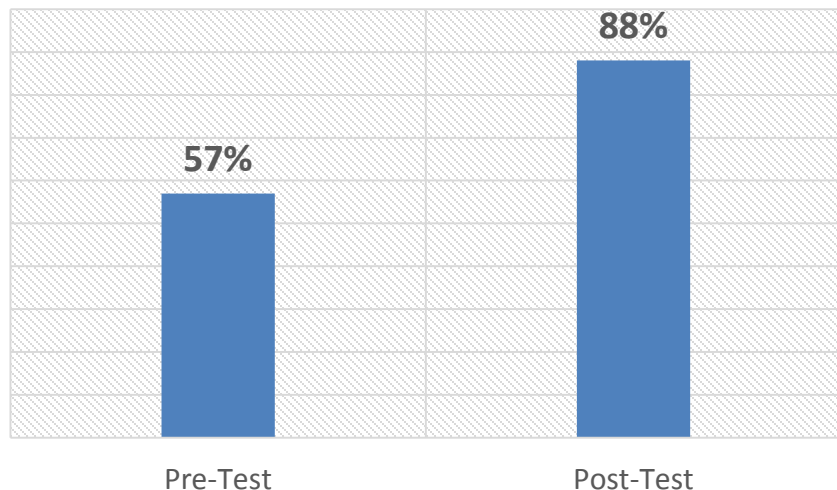
COPD NOW: Medical Management of Stable Disease and Exacerbations



CME/CNE symposium

Online Enduring Program – (3) Modules

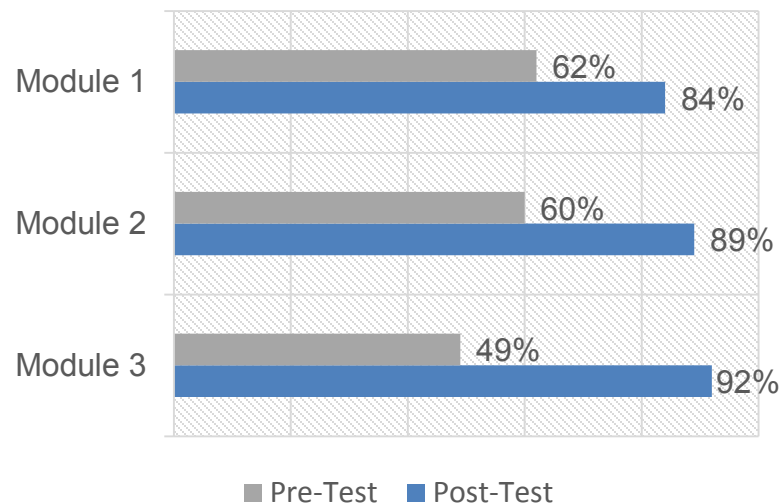
Aggregate Pre- to Post-Test



Gain in Knowledge

Participants demonstrated a **54% relative gain in knowledge and competence** as a result of this activity.

Pre- to Post-Test by Module

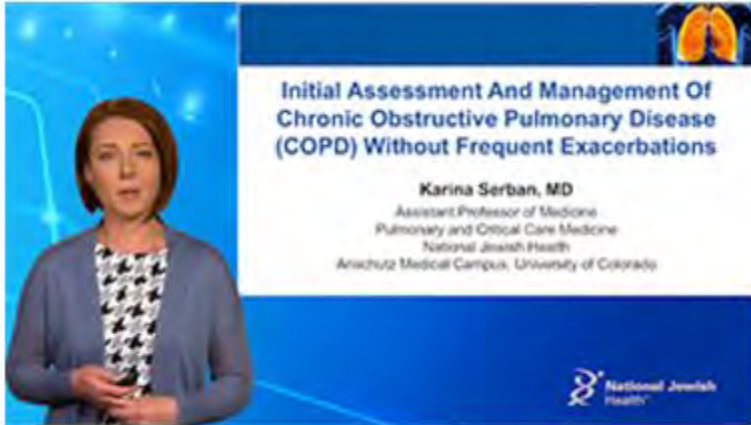


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Online Enduring Program – (3) Modules



Module 1: Initial Assessment and Management of Stable COPD

CME Credit: .50

In this module, Dr. Serban, discussed the initial assessment and management of stable patients with COPD, as well as the importance of return demonstration for patients who use inhaler devices.



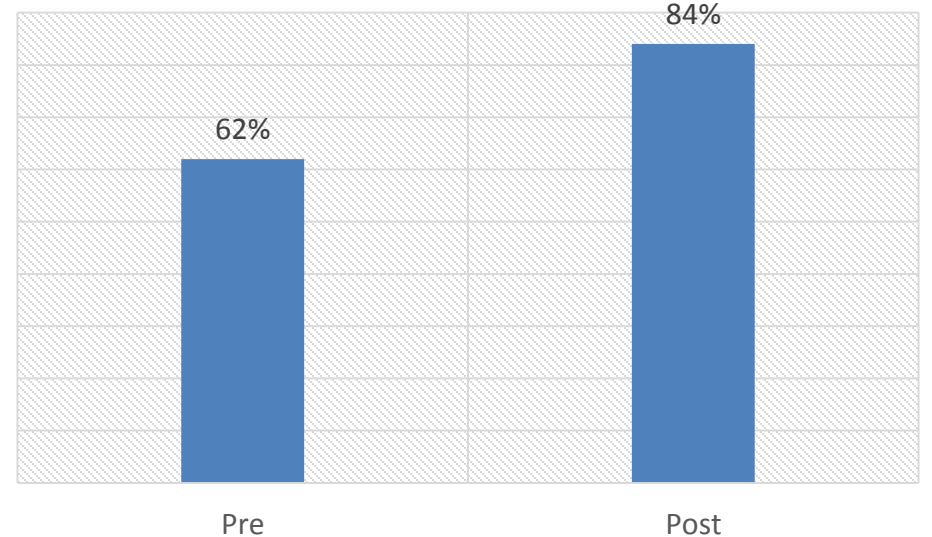
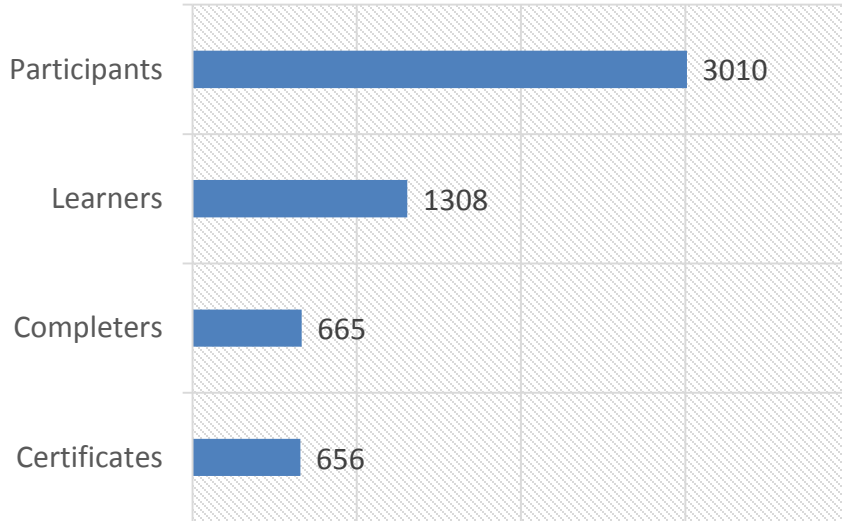
COPD NOW: Medical Management of Stable Disease and Exacerbations



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Online Enduring Program – (3) Modules

Module 1: *Initial Assessment and Management of Stable COPD Participation and Aggregate Change in Knowledge*



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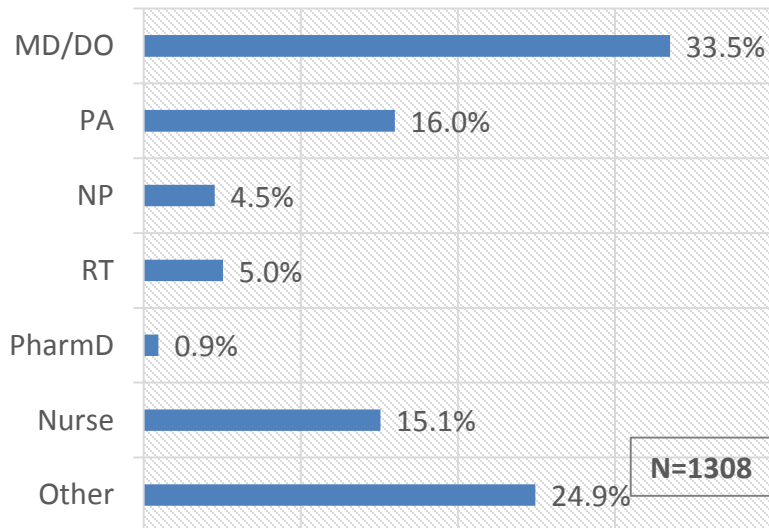
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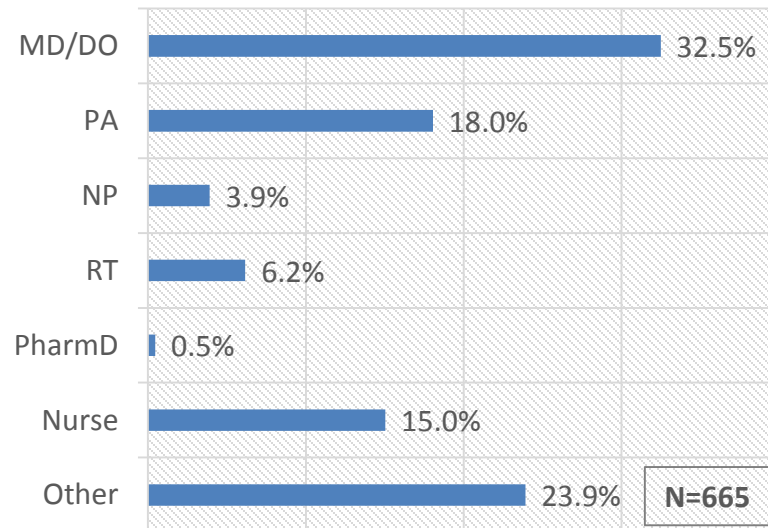
Online Enduring Program – (3) Modules

Module 1: *Initial Assessment and Management of Stable COPD* (Participation)

Participant Breakdown (Learners)



Participant Breakdown (Completers)



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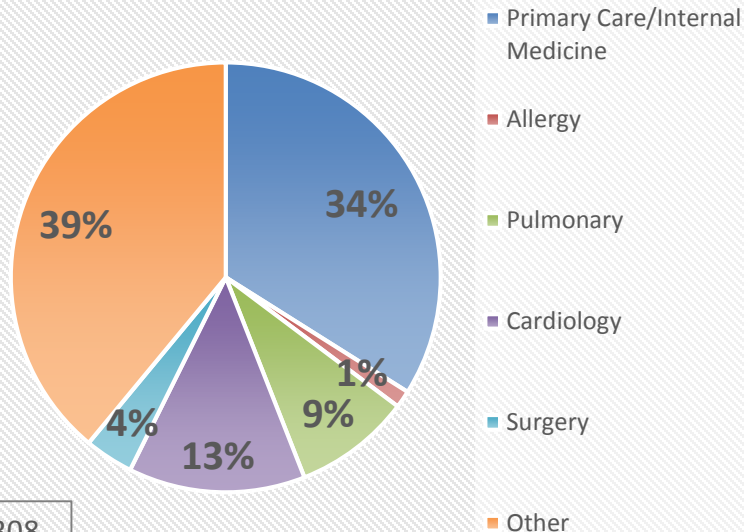


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Online Enduring Program – (3) Modules

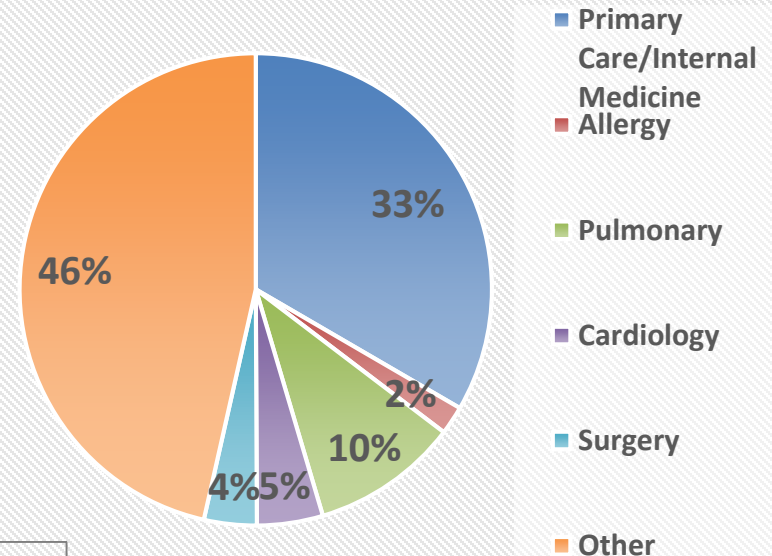
Module 1: *Initial Assessment and Management of Stable COPD* (Specialties)

Specialty Breakdown (Learners)



N=1308

Specialty Breakdown (Completers)



N=665

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Online Enduring Program –Module 1

Pre- to Post-Test Case Based Question

Let's consider Mark's case one more time. His oximetry at rest is 91%. With ambulation he drops to 87%. What is the next step in your approach?



Doesn't need oxygen

50.99%

21.02%

Post Ave
N= 704

Need an oxygen titration study to determine the amount of oxygen

19.74%

46.02%

Pre N=
728

Oxygen with 2L walking only

19.03%

22.53%

Oxygen at rest 2L and walking 3L

10.09%

10.44%

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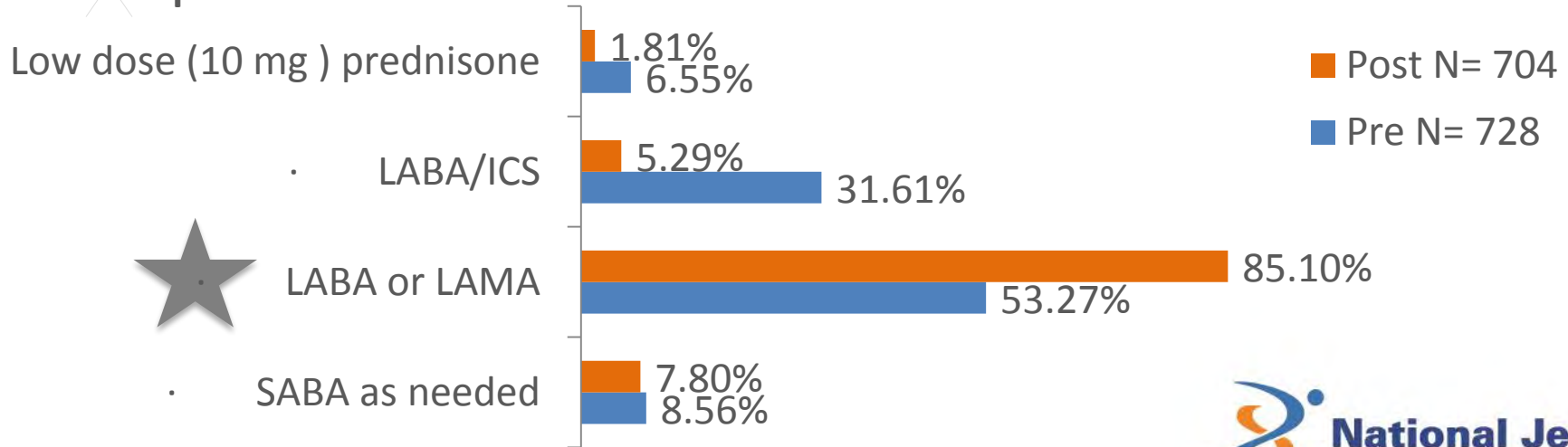


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Online Enduring Program –Module 1

Pre- to Post-Test Case Based Question

Based on the clinical data collected during the activity, what would be the best therapy for our patient?



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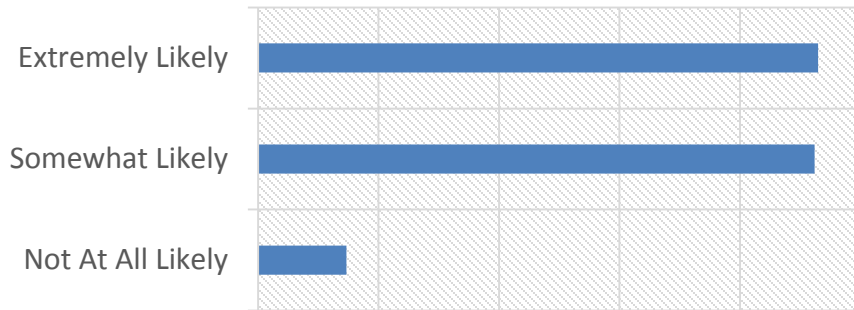


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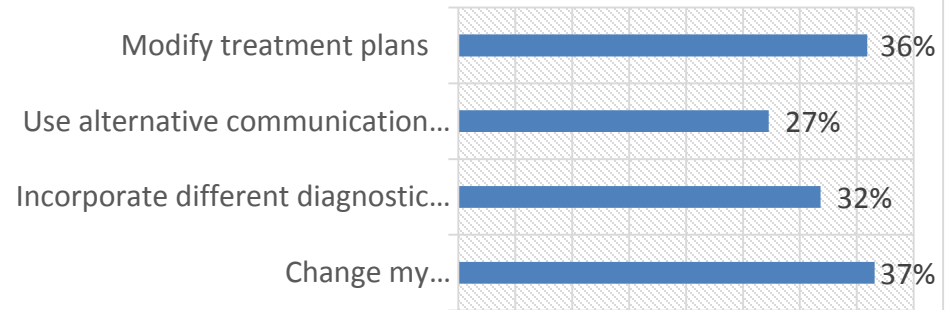
Online Enduring Program – (3) Modules

Module 1 Evaluation: *Initial Assessment and Management of Stable COPD*

As a result of what I learned, I intend to make changes in my practice:



As a result of what I learned, I intend to make the following changes in my practice:



Module 1: 92% of Participants reported that they were somewhat or extremely likely to make a change in their practice

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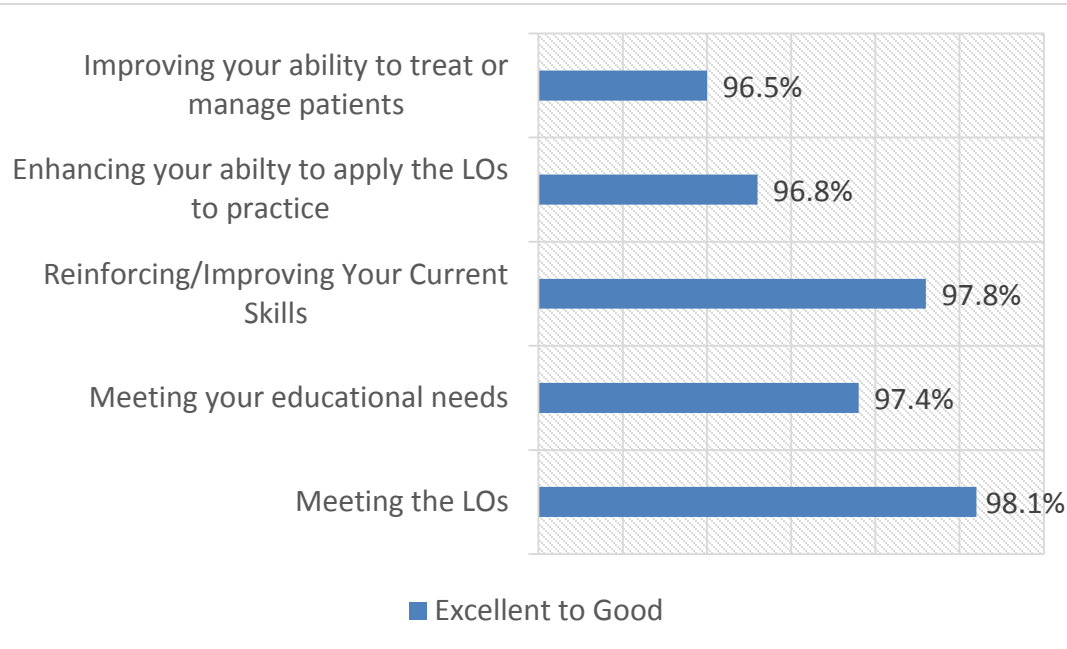


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Online Enduring Program – (3) Modules

Module 1 Evaluation: *Initial Assessment and Management of Stable COPD*

Participants report the activity was “Excellent” to “Good” at:



Evaluation

- ✓ 100% reported the material was presented without commercial bias
- ✓ 99% reported the activity addressed strategies for overcoming barriers to optimal patient care



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Online Enduring Program – (3) Modules

Learning Objectives

- Discuss the key updates from the 2017 GOLD Guidelines and their application to the diagnosis and management of COPD.
- Recognize the role of exacerbations in the management of COPD.
- Select appropriate therapies based on the new 2017 Gold Guidelines for the management of COPD.



 National Jewish Health

Module 2: Learning to Assess and Manage Patients with Frequent COPD Exacerbations: Changing the Future by Planning Today

CME Credit: .50

In this module, Dr Finigan, outlined the goals and treatment options for those patients experiencing frequent COPD exacerbations.

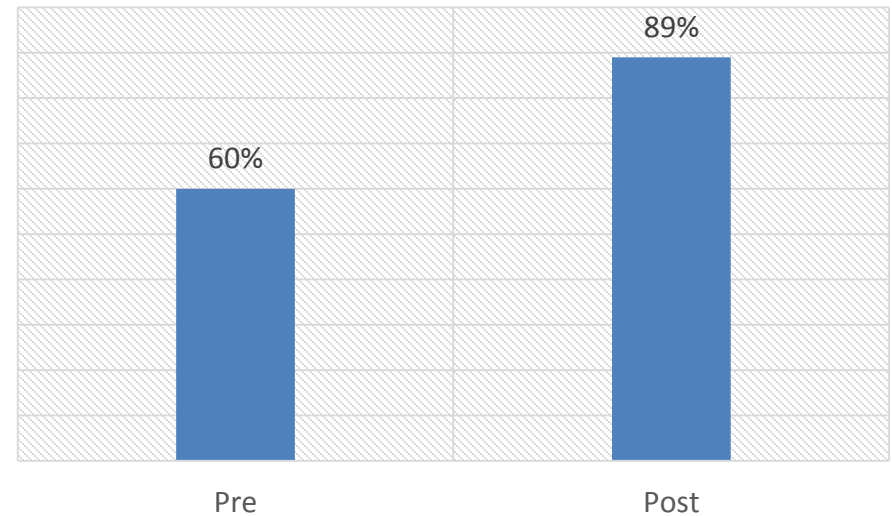
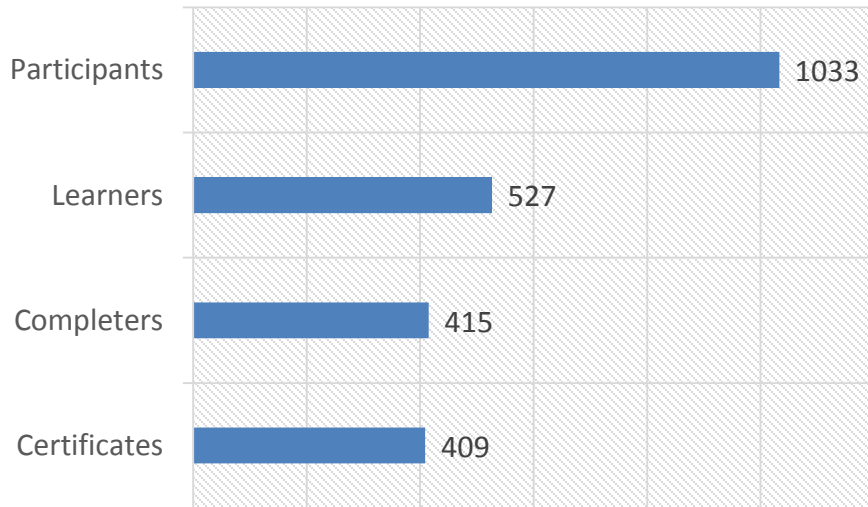
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Online Enduring Program – (3) Modules

Module 2: *Learning to Assess and Manage Patients with Frequent COPD Exacerbations* *Participation and Aggregate Change in Knowledge*



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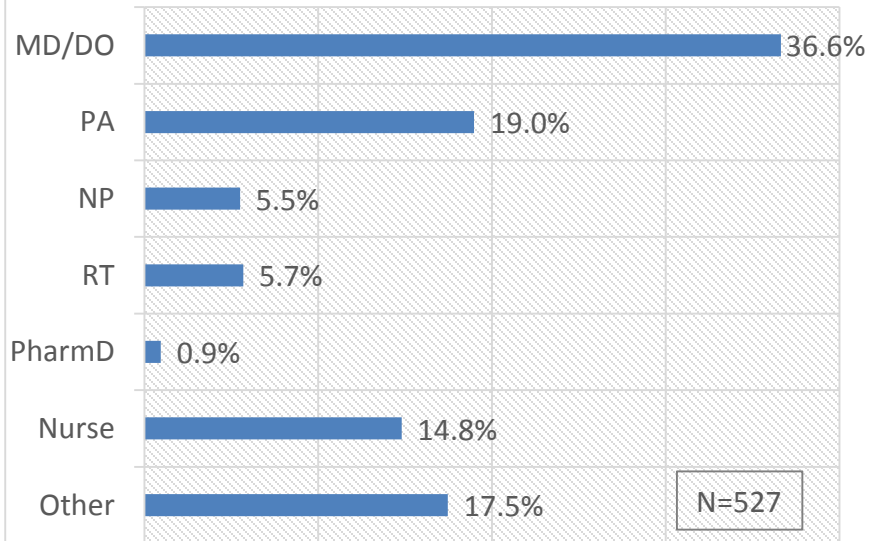


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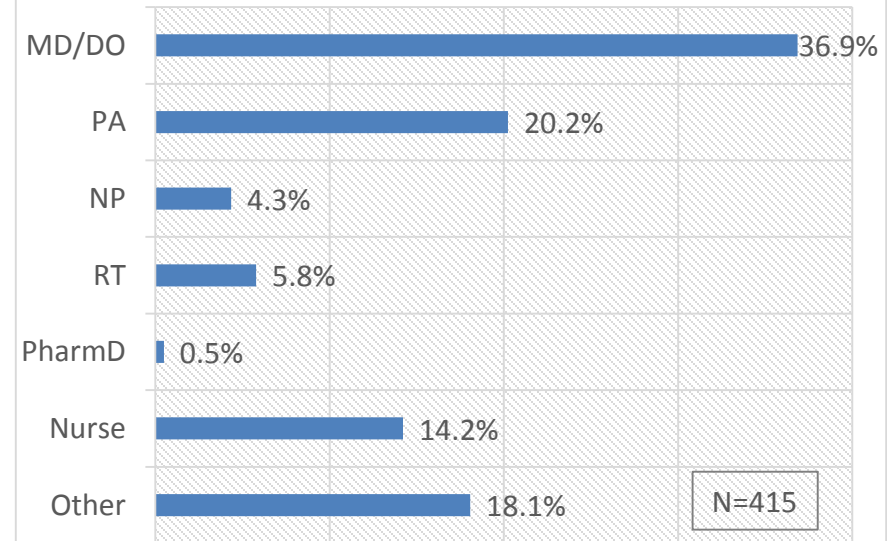
Online Enduring Program – (3) Modules

Module 2: *Learning to Assess and Manage Patients with Frequent COPD Exacerbations* (Participation)

Participant Breakdown (Learners)



Participant Breakdown (Completers)



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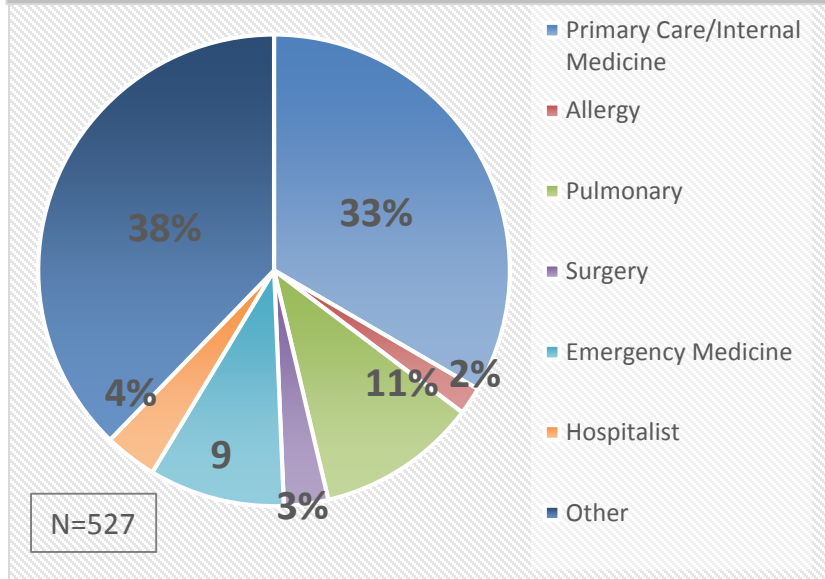


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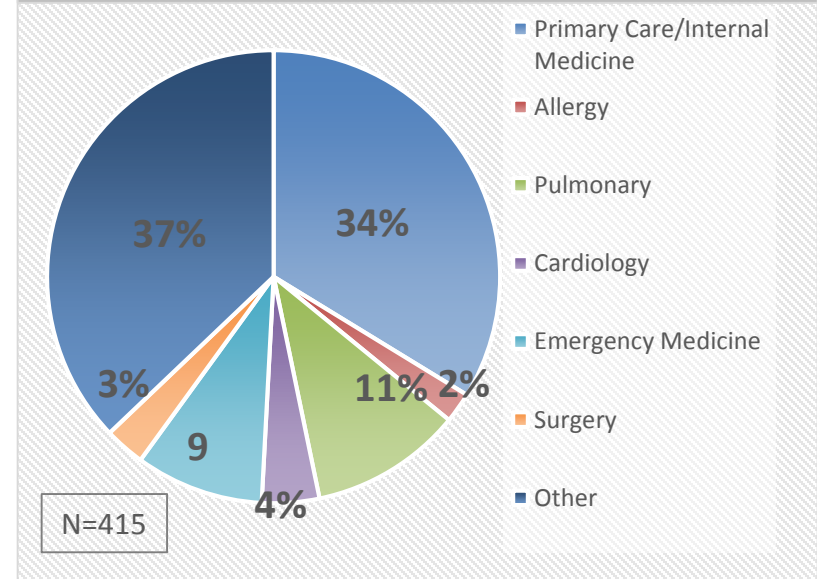
Online Enduring Program – (3) Modules

Module 2: *Learning to Assess and Manage Patients with Frequent COPD Exacerbations* (Specialties)

Specialty Breakdown (Learners)



Specialty Breakdown (Completers)



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Medical Management of Stable Disease and Exacerbations

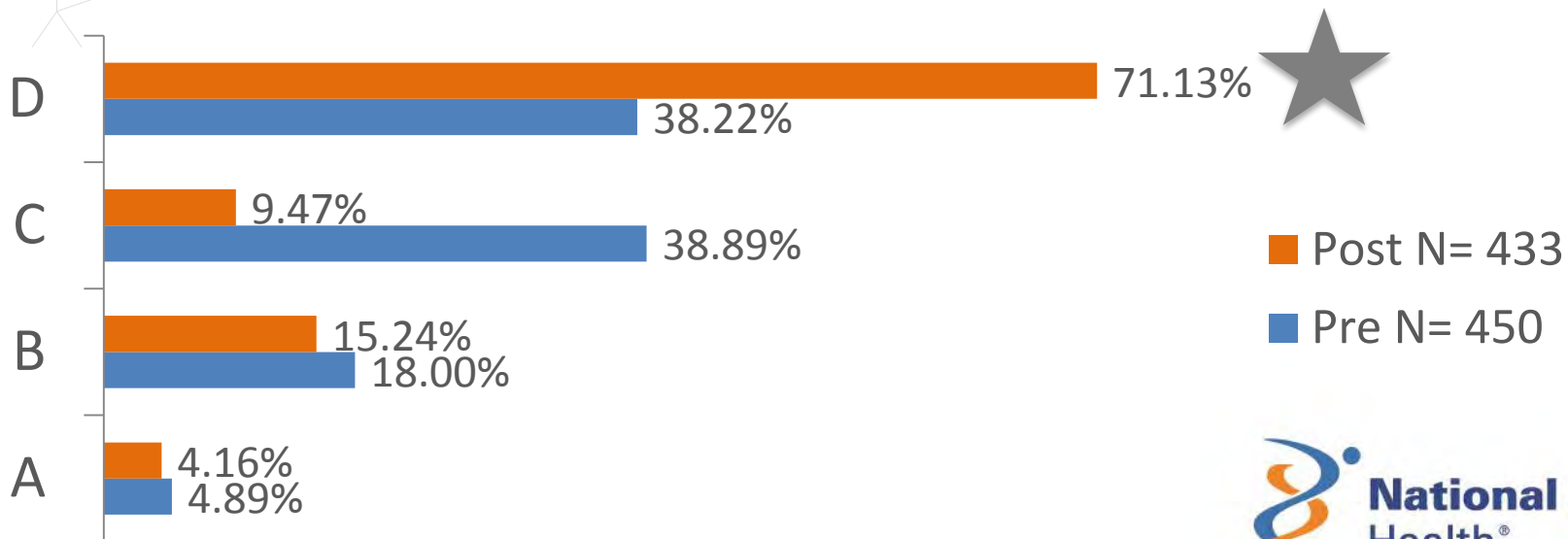


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Online Enduring Program –Module 2

Pre- to Post-Test Case Based Question

Based on GOLD 2017 Guidelines, what would be our patient's Category/Group of COPD?



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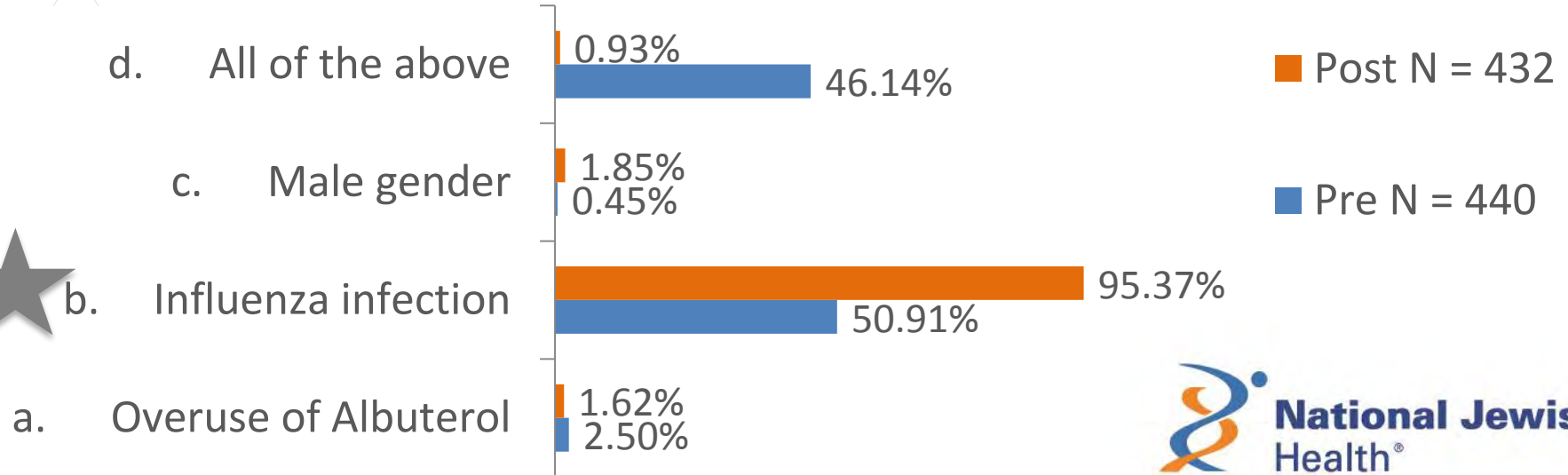


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Online Enduring Program – Module2

Pre- to Post-Test Question

Which of the following are implicated as causes of COPD exacerbations?



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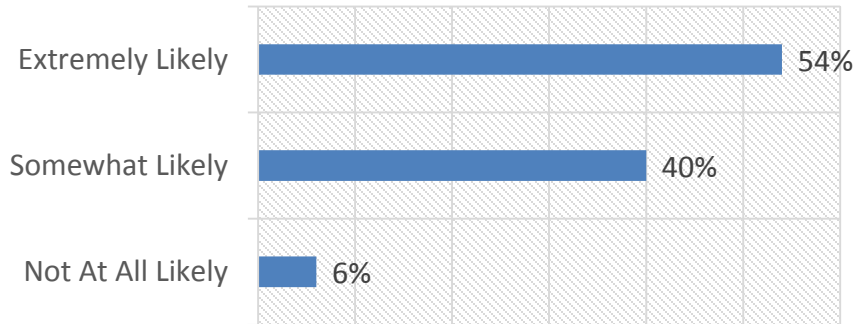


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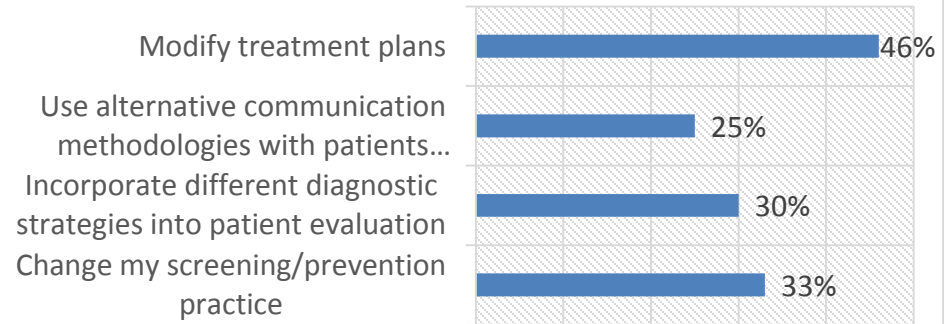
Online Enduring Program – (3) Modules

Module 2 Evaluation: *Learning to Assess and Manage Patients with Frequent COPD Exacerbations*

As a result of what I learned, I intend to make changes in my practice:



As a result of what I learned, I intend to make the following changes in my practice:



Module 2: 94% of Participants reported that they were somewhat or extremely likely to make a change in their practice

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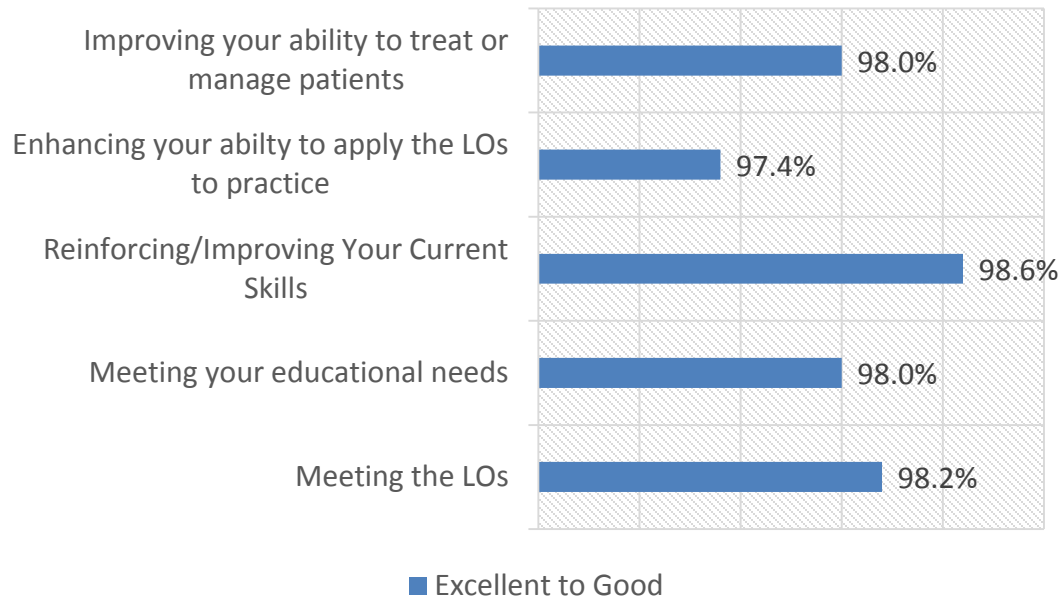


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Online Enduring Program – (3) Modules

Module 2 Evaluation: *Learning to Assess and Manage Patients with Frequent COPD Exacerbations*

Participants report the activity was “Excellent” to “Good” at:



Evaluation

- ✓ 100% reported the material was presented without commercial bias
- ✓ 99% reported the activity addressed strategies for overcoming barriers to optimal patient care

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Online Enduring Program – (3) Modules

Module 3: Roundtable:
Management of Patients With
COPD

CME Credit: 1.0

In this module, expert faculty participate in a roundtable discussion about the newly updated GOLD Guidelines, as well as asking you, the viewer, questions related to the management of COPD.



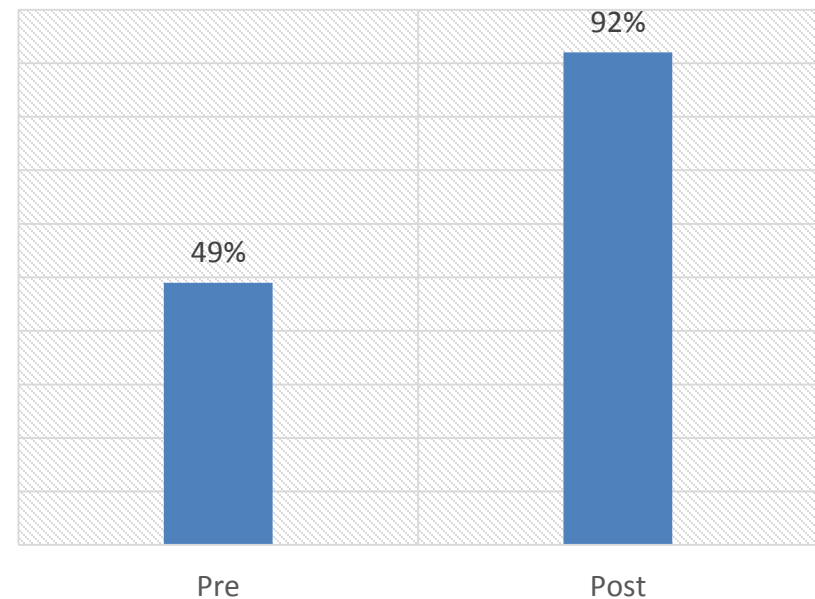
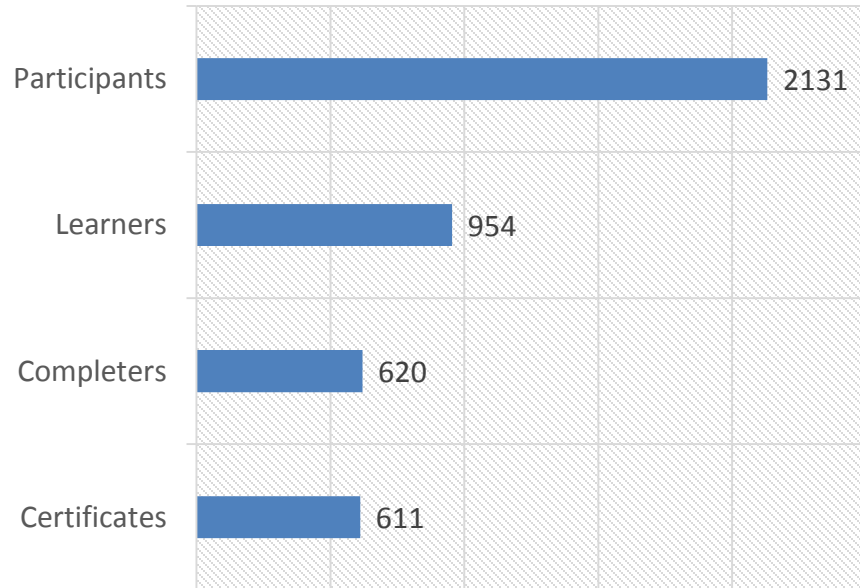
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Online Enduring Program – (3) Modules

Module 2: *Learning to Assess and Manage Patients with Frequent COPD Exacerbations* *Participation and Aggregate Change in Knowledge*



COPD NOW: Medical Management of Stable Disease and Exacerbations

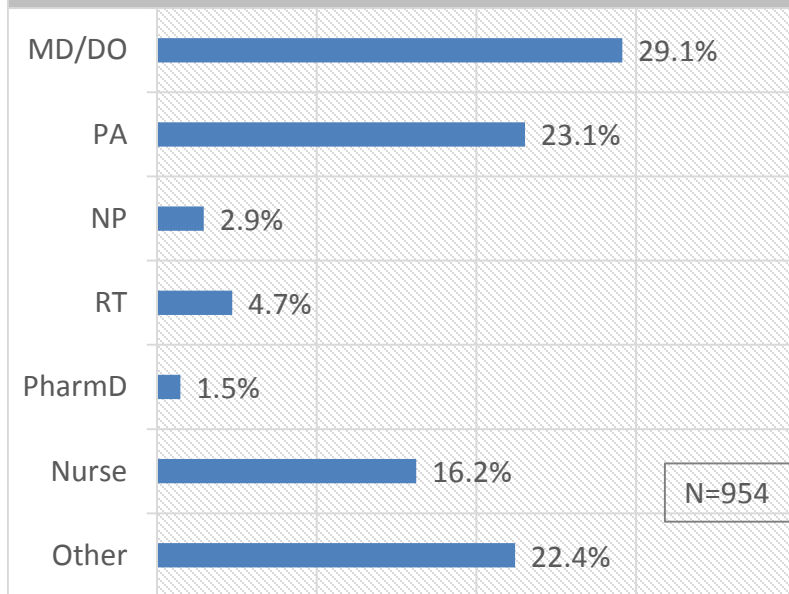
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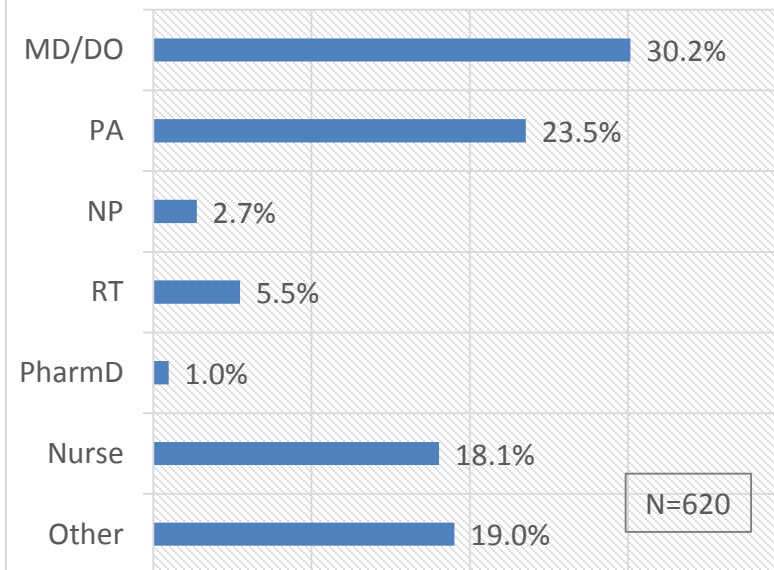
Online Enduring Program – (3) Modules

Module 3: *Roundtable: Management of Patients with COPD* (Participation)

Participant Breakdown (Learners)



Participant Breakdown (Completers)



COPD NOW:

Medical Management of Stable Disease and Exacerbations

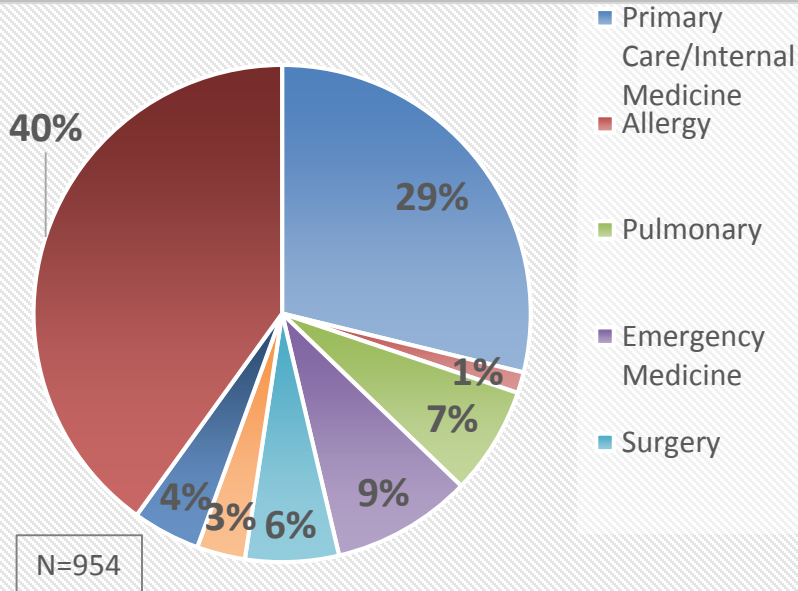


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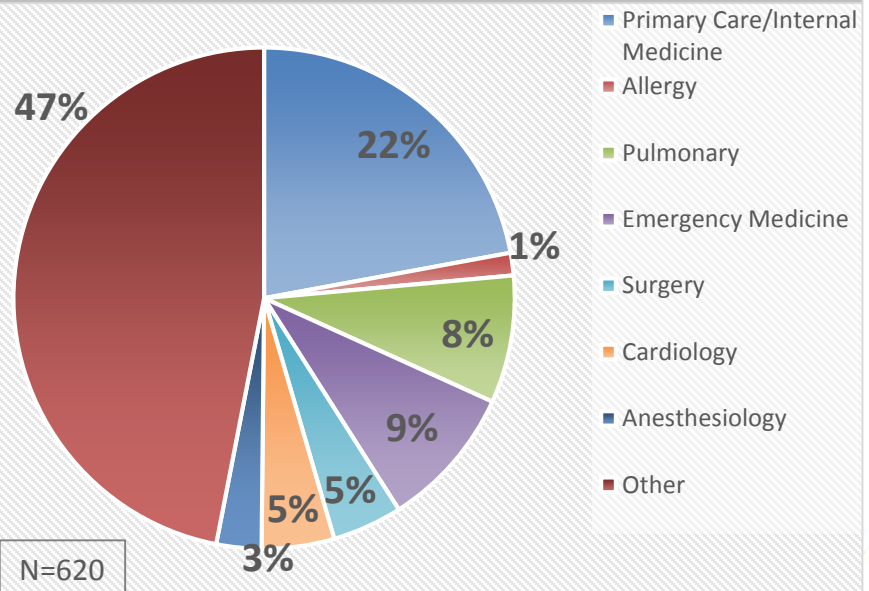
Online Enduring Program – (3) Modules

Module 3: *Roundtable: Management of Patients with COPD (Specialties)*

Specialty Breakdown (Learners)



Specialty Breakdown (Completers)



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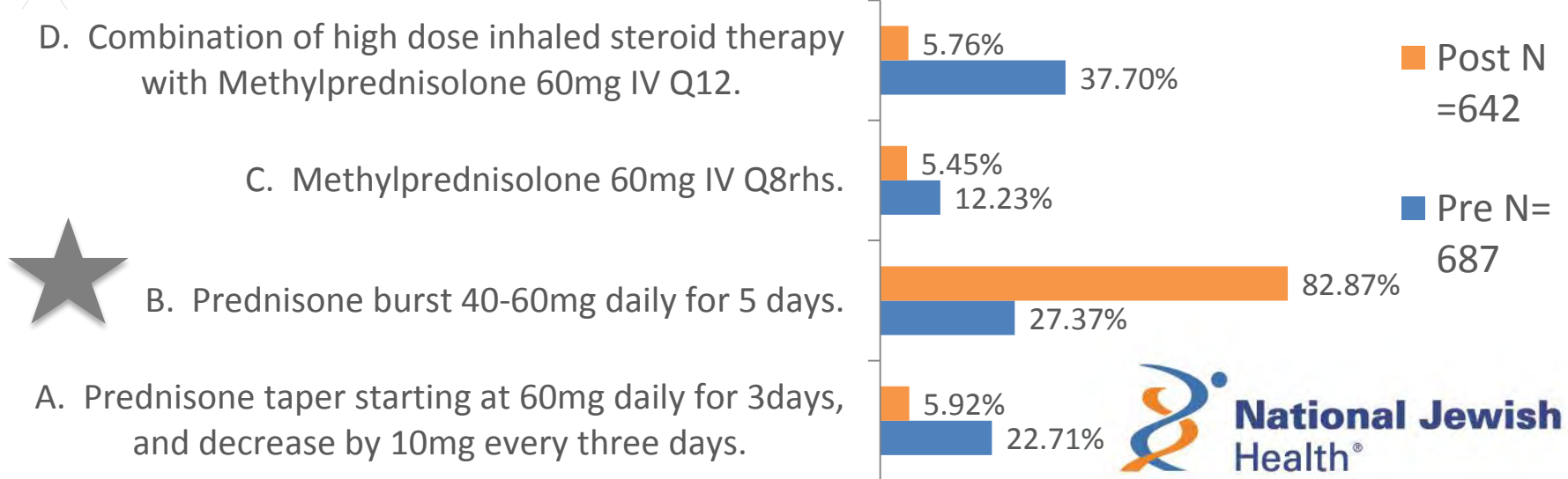


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Online Enduring Program –Module3

Pre- to Post-Test Question

What is the standard GOLD 2017 recommendation for systemic steroid treatment for a patient admitted with an acute COPD exacerbation?



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Online Enduring Program –Module 3

Pre- to Post-Test Question

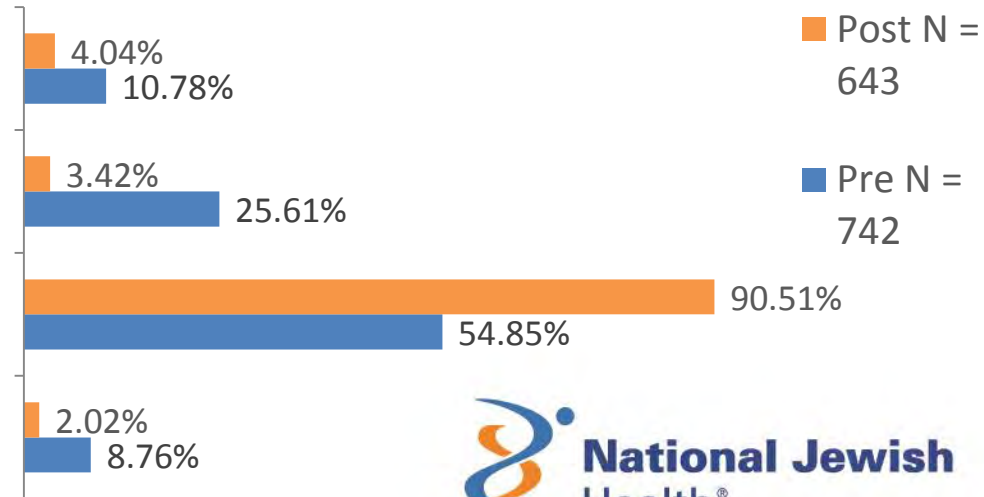
Who should supplemental oxygen be prescribed for?

D. A patient who has normal daytime saturations, but desaturates below 88% while sleeping for a total of 4 minutes during the night.

C. A patient who has saturations at rest of 90%, but desaturates to 82% with ambulation.

B. A patient who has saturations at rest that are less than 88% on room air.

A. A patient who is discharged from the hospital after experiencing a COPD exacerbation.



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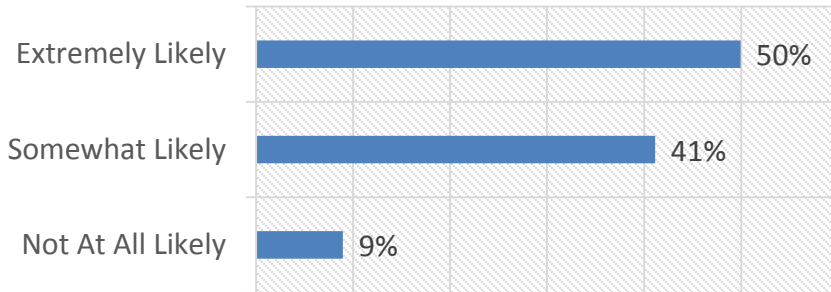


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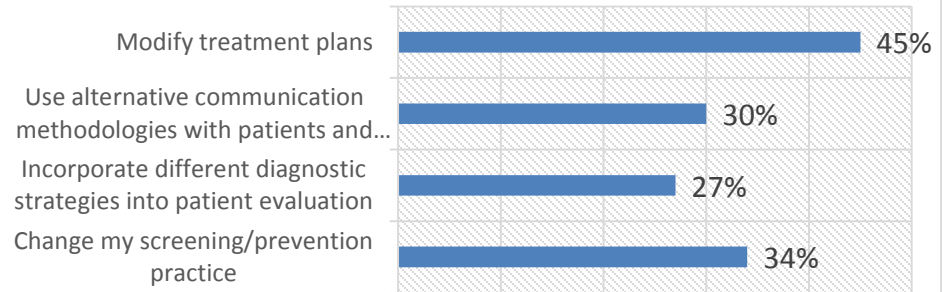
Online Enduring Program – (3) Modules

Module 3 Evaluation: *Roundtable: Management of Patients with COPD*

As a result of what I learned, I intend to make changes in my practice:



As a result of what I learned, I intend to make the following changes in my practice:



Module 3: 91% of Participants reported that they were somewhat or extremely likely to make a change in their practice

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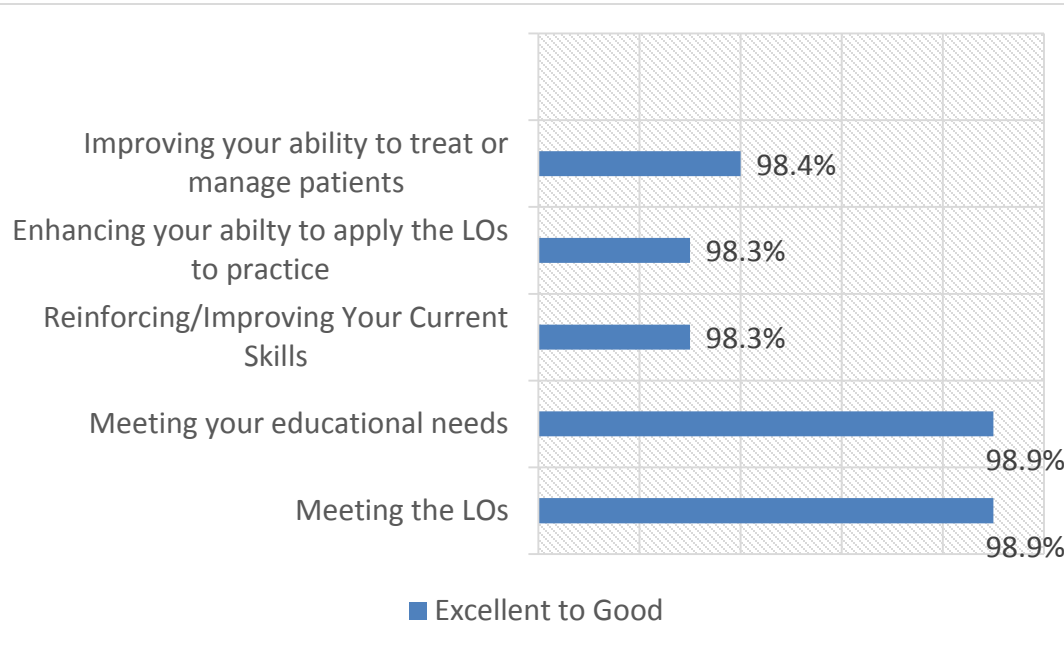


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Online Enduring Program – (3) Modules

Module 3 Evaluation: *Roundtable: Management of Patients with COPD*

Participants report the activity was “Excellent” to “Good” at:



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Thank you for your support of this educational initiative!

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