AGENDA

SATURDAY, JUNE 11TH

7:30 a.m. – 8:05 a.m. Welcome/Introductions and Tips for Success
Bryan Lizza, Pharm.D., BCPS, BCCCP

8:05 a.m. – 9:35 a.m. Complex Case: Post-Cardiac Surgery
Paul Szumita, Pharm.D., FCCM, BCPS, BCCCP
ACPE Number: 0204-0000-16-931-L01-P
Application-based: 1.5 credit hours
Objectives:
At the end of the presentation, the pharmacist should be able to:
1. Correctly answer case-based questions about appropriate treatment and monitoring of a complex post-cardiac surgery patient to include pain, agitation and delirium, glucose management, and heparin-induced thrombocytopenia.
2. Examine the impact of critical illness on pre-existing conditions (e.g., endocrine disorders, pain).
3. Recommend quality assurance and process improvement methods relevant to critical care.
4. Assess the relationship between institutional guideline development and evidence-based critical care literature.

9:35 a.m. – 9:45 a.m. Break

9:45 a.m. – 11:15 a.m. Complex Case: Acute Coronary Syndrome
Jill Starykowicz, Pharm.D., BCCCP
ACPE Number: 0204-0000-16-932-L01-P
Application-based: 1.5 credit hours
Objectives:
At the end of the presentation, the pharmacist should be able to:
1. Correctly answer case-based questions about appropriate treatment and monitoring of a complex critical care patient with acute coronary syndrome.
2. Adjust treatment and monitoring plans related to alterations of pharmacodynamics and pharmacokinetics in the critically ill.
3. Select appropriate devices required for treatment and monitoring of a critical care patient.
4. Determine appropriate fluid and electrolyte management and monitoring based on patient-specific factors.
11:15 a.m. – 12:45 p.m. Complex Case: Hyperglycemic Emergency and Community-Acquired Pneumonia
Angela L. Bingham, Pharm.D., BCPS, BCNSP, BCCCP
ACPE Number: 0204-0000-16-933-L01-P
Application-based: 1.5 credit hours
Objectives:
At the end of the presentation, the pharmacist should be able to:
1. Correctly answer case-based questions about appropriate treatment and monitoring of a complex critical care patient with hyperglycemic emergency and community-acquired pneumonia.
2. Select appropriate routes and methods of administration for medications in critically ill patients.
3. Determine appropriate fluid, electrolyte and acid/base management and monitoring based on patient-specific factors.
4. Recommend appropriate use of agents for acute volume resuscitation.
5. Identify medication safety issues and strategies pertinent to patients requiring care in the ICU.
6. Identify appropriate nutrition support in the critically ill patient.

12:45 p.m. – 2:00 p.m. Lunch

2:00 p.m. – 3:00 p.m. Research Design, Evidence-Based Medicine and Statistical Analysis, Part 1
Linda Tyler, Pharm.D., FASHP
ACPE Number: 0204-0000-16-934-L04-P
Application-based: 2 credit hours
Objectives:
At the end of the presentation, the pharmacist should be able to:
1. Interpret biomedical literature with regard to study design methodology, statistical analysis, and significance and applicability of reported data and conclusions.
2. Explain the use of evidence-based treatment guidelines and protocols.
3. Summarize key points from the most current pharmacy practice literature.

3:00 p.m. – 3:15 p.m. Break

3:15 p.m. – 4:15 p.m. Research Design, Evidence-Based Medicine and Statistical Analysis, Part 2
Linda Tyler, Pharm.D., FASHP
*See Part 1 Above

4:15 p.m. – 4:30 p.m. Break
SATURDAY, JUNE 11TH (CONT.)

4:30 p.m. – 6:00 p.m.  Complex Case: Warfarin-associated Intracranial Hemorrhage
Bryan Lizza, Pharm.D., BCPS, BCCCP
ACPE Number: 0204-0000-16-935-L01-P
Application-based: 1.5 credit hours

Objectives:
At the end of the presentation, the pharmacist should be able to:
1. Correctly answer case-based questions about appropriate treatment and monitoring of a complex critical care patient with oral anticoagulant (OAC)-associated intracranial hemorrhage (ICH).
2. Select appropriate neurologic monitoring techniques.
3. Recommend appropriate use of agents for acute volume resuscitation and hemostasis (e.g., blood products, hemostatic agents).
4. Examine the impact of critical illness on preexisting conditions (e.g., cardiovascular diseases).
5. Determine appropriate fluid and electrolyte management and monitoring based on patient-specific factors.
**SUNDAY, JUNE 12TH**

7:30 a.m. – 7:35 a.m. **Announcements**
Mary M. Hess, Pharm.D., FASHP, FCCM, FCCP

7:35 a.m. – 9:05 a.m. **Complex Case: Pneumonia**
Mary M. Hess, Pharm.D., FASHP, FCCM, FCCP
ACPE Number: 0204-0000-16-936-L01-P
Application-based:  1.5 credit hours

*Objectives:*
At the end of the presentation, the pharmacist should be able to:
1. Correctly answer case-based questions about appropriate treatment and monitoring of a complex critical care patient with multiple conditions, including pneumonia and acute respiratory distress syndrome (ARDS).
2. Identify drug interactions and adverse drug events common in critical care and methods to document.

9:05 a.m. – 9:20 a.m. **Board of Pharmacy Specialties Examination Overview**
Brian Lawson, Pharm.D.

9:20 a.m. – 9:30 a.m. **Break**

9:30 a.m. – 10:30 a.m. **Practice Administration and Development, Part 1**
Susan Skledar, B.S.Pharm., M.P.H., FASHP
ACPE Number: 0204-0000-16-937-L04-P
Application-based:  2 credit hours

*Objectives:*
At the end of the presentation, the pharmacist should be able to:
1. Develop a plan to monitor and evaluate compliance with, and impact of, policies and guidelines (e.g., institutional, evidence based).
2. Select quality assurance methods and improvement activities, including needs assessment techniques, aimed at enhancing the safety and effectiveness of medication-use processes in the critical care area.
3. Identify metrics for evaluating the quality of critical care pharmacy services (e.g., lengths of ICU stay, mortality, cost-effectiveness).
4. Examine the evidence-based literature that supports that value of critical care pharmacy.
5. Describe the application and integration of evidence-based critical care literature into institutional guidelines and processes.
6. Evaluate regulatory/IRB requirements relative to conducting critical care research.
7. Determine factors that enhance the education and training of critical care pharmacists available in published documents from relevant professional societies (e.g., ASHP, ACCP, SCCM).
10:30 a.m. – 10:45 a.m. Break

10:45 a.m. – 11:45 a.m. Practice Administration and Development, Part 2
Susan Skledar, B.S.Pharm., M.P.H., FASHP
*See Part 1 Above

11:45 a.m. – 1:00 p.m. Lunch

1:00 p.m. – 2:30 p.m. Complex Case: Sepsis
Heather Torbic, Pharm.D., BCPS
ACPE Number: 0204-0000-16-938-L01-P
Application-based: 1.5 credit hours
Objectives:
At the end of the presentation, the pharmacist should be able to:
1. Correctly answer case-based questions about appropriate treatment and monitoring of a complex critical care patient with an intra-abdominal infection, sepsis/SIRS, and shock.
2. Select appropriate routes of administration for medications in critically ill patients.
3. Adjust treatment and monitoring plans related to alterations of pharmacodynamics and pharmacokinetics in the critically ill.
4. Determine appropriate use of agents for acute volume resuscitation and hemostasis (e.g., crystalloids, colloids).

2:30 p.m. – 4:00 p.m. Complex Case: Oncologic Emergencies: Febrile Neutropenia and Tumor Lysis Syndrome
Todd Canada, Pharm.D., BCNSP, FASHP, FTSHP
ACPE Number: 0204-0000-16-939-L01-P
Application-based: 1.5 credit hours
Objectives:
At the end of the presentation, the pharmacist should be able to:
1. Correctly answer case-based questions about appropriate treatment and monitoring of a complex critical care patient with febrile neutropenia and tumor lysis syndrome.
2. Determine appropriate fluid, electrolyte and acid/base management and monitoring based on patient-specific factors.
3. Examine the impact of critical illness on pre-existing conditions (e.g., cancer).

4:00 p.m. – 4:15 p.m. Break
4:15 p.m. – 5:45 p.m.  Complex Case: GI Bleeding
John Marshall, Pharm.D., FCCM, BCPS, BCCCP
ACPE Number: 0204-0000-16-940-L01-P
Application-based: 1.5 credit hours
Objectives:
At the end of the presentation, the pharmacist should be able to:
1. Correctly answer case-based questions about appropriate treatment and monitoring of a complex critical care patient with gastrointestinal bleeding, alcohol withdrawal, refeeding syndrome, hepatorenal syndrome, cirrhosis, and acute renal injury.
2. Adjust treatment and monitoring plans related to alterations of pharmacodynamics and pharmacokinetics in the critically ill.
3. Select appropriate routes of administration for medications in critically ill patients.
4. Determine appropriate use of agents for acute volume resuscitation and hemostasis (e.g., blood products, hemostatic agents).

5:45 p.m. – 6:00 p.m.  Closing Remarks
ACCREDITATION FOR PHARMACISTS

The American Society of Health-System Pharmacists is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education.

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