

**California Chapter of the American Association of Clinical Endocrinologists
Presents:
Hot Topics in Diabetes and Endocrinology for Primary Care**

**St. Agnes Medical Center
1303 E Herndon Ave
Fresno, CA, 93720**

November 10, 2018

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| 7:00 – 7:45 AM | Breakfast / Registration |
| 7:45 – 8:00 AM | Welcome & Pre-Meeting Assessment
Objectives: <ol style="list-style-type: none">1. After participating in a pre-meeting assessment tool, attendees will be able to recognize areas of potential shortcoming and strive to improve knowledge and current healthcare practices. |
| 8:00 – 8:30 AM | AACE Diabetes Algorithm-with focus on SGLT2 Inhibitors and GLP-1 therapies
TBD
Objectives: <ol style="list-style-type: none">1. How to implement the 2018 AACE Diabetes Algorithm into your practice2. Evaluating options with focus on incorporating SGLT2 Inhibitors and GLP-1ra's into therapy<ol style="list-style-type: none">a. Case scenario requiring addition of SGLT2ib. Case scenario requiring GLP1ra |
| 8:30 – 9:00 AM | Insulin initiation and intensification with focus on Hypoglycemia reduction
Jaiwant Rangi, MD, FACE
Objectives: <ol style="list-style-type: none">1. Recognize when advanced Beta Cell failure is present and basal insulin is necessary2. Know when the newer basal insulin formulations are indicated and how to use these with other agents such as GLP-1 agonists<ol style="list-style-type: none">a. Case scenario requiring insulin initiationb. Case scenario requiring insulin or additional agent intensification |
| 9:00 – 9:30AM | Incorporating CGM into clinical decision making
Etie Moghissi, MD, FACP, FACE
Objectives: <ol style="list-style-type: none">1. Incorporate the newest methods to collect and interpret blood glucose data in your practice2. Identify key components in evaluating the ambulatory glucose profile in order to minimize glucose variability and hypoglycemia of patients with diabetes<ol style="list-style-type: none">a. Case scenario with marked hypo and hyper-glycemia with a normal A1Cb. Case scenario differentiating Somogi phenomenon with Dawn phenomenonc. Case scenario of a patient on MDI regimen who is not performing SBGM often enough |
| 9:30 – 10:00 AM | Cardiovascular outcome studies, is it time for Paradigm shift?
David Chappell, MD
Objectives: <ol style="list-style-type: none">1. Discuss current DM medications with proven CV risk reduction independent of glucose lowering2. Is time to look beyond glycemic control?<ol style="list-style-type: none">a. Case scenario with Diabetic patient s/p MI who needs additional therapy (may be complicated by renal insufficiency)b. Case scenario with Diabetic patient s/p Stroke and history of compensated CHF and normal renal function |

10:00 – 10:15 AM	Panel Discussion
10:15 – 10:45 AM	Break
10:45 – 11:15 AM	Management of hyperlipidemia beyond statins Chris Guerin, MD, FNLA, FACE Objectives: 1. Introduce the New AACE Lipid Guidelines 2. Incorporate new agents to lower LDL cholesterol into a treatment paradigm a. Case scenario with Statin Intolerant patient b. Case study with patient who has Secondary Hyperlipidemia c. Case scenario with patient who has Heterozygous FHH d. Case scenario for Extremely High-Risk patient
11:15 – 11:45 PM	Thyroid conundrums Joseph Hawkins, MD, FACE Objectives: 1. Identify key components of thyroid function studies in different clinical situations 2. Understand the values and pitfalls of Thyroid Ultrasound and thyroid Scan a. Case scenario with Patient in Pregnancy b. Case scenario with Patient with Subclinical Hypothyroidism c. Case scenario with Subacute Thyroiditis d. Case scenario with Hyperthyroidism e. Case scenario with an Incidental Thyroid Nodule
11:45 – 12:15 PM	Panel Discussion
12:15 – 12:30 PM	Post Meeting Assessment Objectives: 1. At the conclusion of the meeting, attendees will be able to measure learning that occurred that will enable the use of new healthcare techniques and practices and to review or confirm existing care modalities.
12:30 PM	Adjourn