



Agenda

Saturday, January 31, 2026

7 a.m. – 5:30 p.m.

Registration

7 – 8 a.m.

Breakfast

8 – 8:15 a.m.

Welcome From the Course Directors

8:15 – 9 a.m.

The Itchy Patient

Erin Monahan, DMSc, PA-C, CAQ-Derm

We will explore causes of itching with and without observable dermatologic causes. We will also discuss a variety of OTC and prescription medications that treat itching so you have something to recommend besides diphenhydramine!

At the conclusion of this session, participants should be able to:

- Construct a thorough HPI for the chief complaint of itching
- Differentiate an eruption and/or lesions from excoriations
- Identify common and less common causes of itching with rash and causes of itching without rash
- Select appropriate labs and imaging to investigate itching without rash
- Recommend or prescribed appropriate topical or systemic therapy to treat pruritis

9:05 – 10 a.m.

Urinalysis Conundrums

M. Jane McDaniel, MS, MLS(ASCP)SC

Primary care providers are often faced with the responsibility of making a diagnosis based on the results of laboratory tests involving urinalysis microscopic procedures. A thorough knowledge of the microscopic elements being identified in a urine sample is essential to proper interpretation of these laboratory tests. Using a series of cases, participants will be presented with patient scenarios that will include urinalysis results and microscopic evaluation of urine sediment. This presentation will promote better understanding of the concepts involved and highlight the significance of a variety of urinalysis microscopic findings that aid in making a diagnosis.

At the conclusion of this session, participants should be able to:

- Correlate urine dipstick results to provider-performed urine microscopy findings to assist in making a clinical diagnosis
- Analyze the urine dipstick and microscopic findings of common renal disorders noted in primary care
- Utilize urinalysis dipstick and microscopic findings to separate unusual disorders from more commonly encountered disorders

9:05 – 10 a.m.

“My Tummy Hurts” vs “MY TUMMY HURTS!": Abdominal Pain, Preliminary Workups, and When to Be Concerned

Rachel Rosinski, PA-C

The most important concept in any symptom presentation is, in my opinion, "sick or not sick." This ultimately allows prioritization of care. Does this patient need to go to the emergency room, or take a fiber supplement? Surprisingly (or unsurprisingly), these two presentations can sometimes appear similarly despite their contrasting outcomes.

Family medicine providers can be invaluable in initial workup especially when time is of the essence for the diagnosis and treatment of various gastrointestinal conditions.

At the conclusion of this session, participants should be able to:

- Describe non-acute abdomen
- Describe acute abdomen
- Explain next steps including diagnosis and workup
- Discuss IBD in and out of the office

10 – 10:30 a.m.

Exhibits/Break

10:30 – 11:25 a.m.

Respiratory Constipation: When Your Patient Has a Difficult Time Getting Air Out

John "Kenny" Larsen, PA-C

Asthma and COPD are major global health concerns. Asthma affects approximately 262 million people worldwide, with a prevalence of about 3-7% in adults, varying by region. COPD impacts around 384 million people, primarily those over 40, with a global prevalence of 10-12% in adults. Both conditions disproportionately affect low- and middle-income countries due to limited healthcare access and environmental factors like air pollution.

Annual economic costs are substantial: asthma accounts for roughly \$80 billion in the U.S. alone, driven by hospitalizations, medications, and lost productivity. COPD costs exceed \$50 billion annually in the U.S., with similar burdens globally, largely due to exacerbations and long-term care. Indirect costs, such as absenteeism, add significantly to the economic impact. Effective management, including early diagnosis and treatment, can reduce these burdens, but access to care remains a critical challenge.

At the conclusion of this session, participants should be able to:

- Identify early and late signs and symptoms of obstructive lung dysfunction related to type 2 inflammation
- Explain the pathophysiology of obstructive lung dysfunction related to type 2 inflammation
- Discuss how to gain effective control over obstructive lung dysfunction related to type 2 inflammation

11:30 a.m. – 12:15 p.m.

Silent But Progressive: Navigating CKD in Primary Care

Becky Ness, PA-C, MPAS

Chronic Kidney Disease (CKD) affects nearly 1 in 7 adults in the U.S. yet often goes undiagnosed until advanced stages. This presentation equips primary care advanced practice providers (APPs) with practical tools to identify, stage, and manage CKD in the primary care setting. Topics include evidence-based screening strategies, interpretation of eGFR and albuminuria, guideline-directed medical therapy to slow disease progression, management of common complications, and criteria for timely nephrology referral. Case-based discussions will reinforce practical application, empowering attendees to play a pivotal role in reducing CKD-related morbidity and progression.

At the conclusion of this session, participants should be able to:

- Identify risk factors for chronic kidney disease (CKD) and describe appropriate screening strategies for high-risk populations in the primary care setting
- Interpret estimated glomerular filtration rate (eGFR) and albuminuria values to accurately stage CKD
- Implement evidence-based interventions to slow CKD progression, including blood pressure management, glycemic control, and RAAS inhibitor use

- Recognize common complications of CKD (e.g., anemia, mineral bone disorder, hyperkalemia) and initiate first-line management strategies
- Determine appropriate timing for nephrology referral and collaborate effectively with specialists in the co-management of patients with progressive CKD

11:30 a.m. – 12:15 p.m.

Translating the Electrical Language of the Heart: An EKG Review

Laine Markham, MMS, MBA, PA-C

This comprehensive session provides a practical and systematic approach to electrocardiogram (EKG) interpretation, essential for all healthcare professionals. We will review the fundamental principles of EKG interpretation, followed by a structured methodology for analyzing EKG tracings. The presentation will cover the recognition of normal findings and the identification of critical abnormalities such as arrhythmias, conduction disturbances, and ischemic changes. Through case-based discussions and visual examples, participants will enhance their diagnostic accuracy and confidence in utilizing EKG findings to guide clinical decision-making, and optimize patient care. This review is designed to solidify foundational knowledge and refine interpretation skills.

At the conclusion of this session, participants should be able to:

- Identify the key components of a normal electrocardiogram (EKG) tracing
- Systematically interpret common EKG abnormalities, including rate, rhythm, axis, and intervals
- Differentiate between various types of conduction disorders, arrhythmias, and their EKG manifestations
- Recognize EKG findings associated with myocardial ischemia, injury, and infarction
- Apply EKG interpretation skills to clinical case scenarios for improved patient management

12:15 – 1:15 p.m.

Lunch and Learn

12:30 – 1:15 p.m.

Test & Take Action: Ending the HIV Epidemic Lunch Session

Corie Cruz-Beniasians, PA-C, MS-PA, AAHIVE

Adopting an HIV status neutral approach, this presentation will describe current epidemiology, highlight missed opportunities in testing, underscore the importance of routine screening, and outline key HIV treatment/prevention strategies aimed at reducing HIV transmission and narrowing gaps in care.

****This presentation is sponsored by Gilead Sciences***

1:15 – 2:10 p.m.

Look-Alike Lesions and Eruptions

Erin Monahan, DMSc, PA-C, CAQ-Derm

Do you feel like every rash looks the same? You're not alone. Let's look at different but similar rashes and lesions and learn how to distinguish them from each other.

At the conclusion of this session, participants should be able to:

- Compare similar rashes and identify small differences
- Differentiate nail fungus from non-infectious nail conditions
- Differentiate between types of annular lesions
- Compare acne mimickers

1:15 - 2:10 p.m.

It's Not Just for Kids: Managing Adults With ADHD

Julie Thomas, DMSc., PA-C, DFAAPA

Adult ADHD is a common condition affecting approximately 5 percent of the adult population. This session will help clinicians accurately diagnose and treat Adult ADHD through a series of clinical cases covering a spectrum of Adult ADHD presentations. Learn about current pharmacotherapy and psychotherapy options as well as current guidelines for Adult ADHD.

At the conclusion of this session, participants should be able to:

- Describe the prevalence of adult ADHD in the United States
- Diagnose adults with ADHD using the US Guidelines for adults with ADHD
- Apply current psychotherapy and pharmacotherapy recommendations to treat adults with ADHD
- Discuss patient education and shared decision-making for the management of adults with ADHD
- Discuss the risks and benefits of using medications to treat adults with ADHD

2:15 - 3:10 p.m.

Catching Cognitive Decline Early: Recognizing Subtle Signs and Knowing When to Act

April Wiechmann, PhD, MBA, FNAP

Subtle changes in memory and cognition are often overlooked in busy primary care settings, yet early recognition is critical for timely diagnosis and intervention. This session provides a case-based framework for distinguishing between normal aging, mild cognitive impairment, and early dementia. Attendees will learn how to identify “red flag” clinical patterns, when to order initial labs and imaging, and when to refer for neuropsychological testing or neurology follow-up. The lecture will also emphasize practical strategies for talking with patients and families about memory concerns, addressing fears and stigma while guiding them toward appropriate next steps. With the growing importance of early treatment options — including infusion therapies for Alzheimer’s disease — family medicine providers play a vital role in recognizing cognitive decline at its earliest stages.

At the conclusion of this session, participants should be able to:

- Identify subtle cognitive and behavioral changes that may signal MCI/early-stage Alzheimer’s disease or other dementias
- Distinguish between benign age-related changes and concerning patterns that warrant further evaluation
- Determine when and how to refer patients for neuropsychological testing and/or neurology consultation
- Communicate effectively with patients and families about memory concerns, including how to frame next steps and reduce stigma

2:15 – 3:10 p.m.

ABCs of Common Arrhythmias: AFib/Flutter, Bradycardia, and (premature) Contractions

Laine Markham, MMS, MBA, PA-C

This lecture will provide a review of some common cardiac arrhythmias, including atrial fibrillation, atrial flutter, premature contractions (PACs and PVCs), and bradycardia. We will explore the clinical presentations, EKG findings, and underlying causes of each condition. The focus will be on developing a practical, clinical approach to diagnosis and management. We will also cover the crucial role of anticoagulation in preventing thromboembolic events and discuss how to apply the CHA₂DS₂-VASc score to guide treatment decisions. The goal is to equip

you with the knowledge and skills needed to effectively manage these commonly seen arrhythmias in your clinical practice.

At the conclusion of this session, participants should be able to:

- Differentiate between the clinical presentations, EKG findings, and etiologies of atrial fibrillation, atrial flutter, premature contractions (PACs and PVCs), and bradycardia
- Formulate an initial diagnostic and management plan for a patient presenting with one of the arrhythmias discussed, including the appropriate use of medications
- Apply the CHA₂DS₂-VASc score to assess a patient's risk of stroke and select an appropriate anticoagulation strategy for patients with atrial fibrillation
- Identify potential complications of the discussed arrhythmias, such as stroke, heart failure, and syncope, and outline a plan for their prevention and management

3:15 – 3:45 p.m.

Exhibits/Break

3:45 – 4:40 p.m.

I've Got Your Back: Diagnosis and Treatment of Back Pain

Joe Carter, DMSc, PA-C

Back pain is one of the most common complaints in primary care, yet it presents a wide range of diagnostic and management challenges. This session will provide family medicine providers with a practical, evidence-based approach to evaluating back pain in the outpatient setting. We will review key red flag symptoms that single serious underlying conditions, outline an efficient and targeted workup, and discuss first-line treatment strategies for common etiologies. Participants will also learn when to initiate referrals to specialty care. The focus will be on actionable, real-world tools you can implement immediately your practice.

At the conclusion of this session, participants should be able to:

- Diagnostic approach to differentiate mechanical, neuropathic and systemic causes of back pain in the primary care setting
- Appropriate treatment strategies and referral pathways based on severity, etiology and patient specific factors
- Key red flag symptoms and exam findings to guide urgent or emergent evaluation

3:45 – 4:40 p.m.

Turning Off the Toss and Turn: A Practical Approach to Sleep Disruption

Devon Fenner, PA-C

Most patients with presentation of "insomnia" encountered at the primary care level can appreciate improved sleep quality through optimizing sleep hygiene measures. For those who don't demonstrate improvement, when to conduct sleep testing and/or begin further treatment.

At the conclusion of this session, participants should be able to:

- Describe normal physiology of sleep
- Discuss sleep disorders, including sleep disordered breathing and restless leg syndrome, on sleep disruption
- Illustrate practical management of insomnia

4:45 – 5:30 p.m.

No Need to Shake: Primary Care for Patients with Seizures

Allyson Hamacher, PA-C, RD

Whether a patient presents with a possible first-time seizure, or has an established history of epilepsy, the primary care PA can play a critical role in the initial evaluation, decision on when to refer, and long-term management of these patients. Using real patient cases, this session will cover differentiating seizure from other conditions, appropriate initial workup for possible first-time seizure, which seizure medicines to initiate, special populations to consider, and how to empower your patients with a seizure safety plan and educational resources.

At the conclusion of this session, participants should be able to:

- Differentiate between seizure and other conditions
- Implement evaluation to workup both provoked and unprovoked seizures
- Select appropriate antiepileptic medications for patients based on comorbidities
- Recognize important monitoring, special populations with seizures
- Develop seizure safety plan, educational resources for patients and families

4:45 – 5:30 p.m.

The Parachute Problem: Rethinking Evidence and Elevating Lifestyle Medicine in Primary Care

James C. Somers, DHSc, PA-C, DFAAPA

This session uses the classic “parachute problem” to re-examine how clinicians judge what truly works, especially when comparing lifestyle interventions to drug-based, single-chemical treatments. By exploring why lifestyle medicine often appears less powerful than it is, primarily due to evidence models built for pharmaceuticals rather than behavior change, we’ll reveal how intervention “dose” and fidelity shape outcomes. Participants will see the real strength of lifestyle medicine in chronic disease management and learn practical ways to integrate nutrition, sleep, and physical activity into everyday primary care visits with clarity and confidence.

At the conclusion of this session, participants should be able to:

- Analyze how the “parachute problem” reframes traditional evidence hierarchies and explains why lifestyle interventions often appear less effective than they truly are
- Discuss the core principles and physiologic foundations of lifestyle medicine—including nutrition, sleep, and physical activity—and their relevance to chronic disease prevention and management in primary care
- Identify the features of high-impact lifestyle interventions versus low-dose, low-fidelity approaches, and interpret study findings with these distinctions in mind.
- Apply brief, practical counseling strategies to integrate lifestyle medicine into routine primary care visits, even within time-limited encounters.

6:30 – 8:30 p.m.

Mad Apple by Cirque du Soleil (*Separate Registration Required*)

Sunday, February 1, 2026

7 a.m. – 5:15 p.m.

Registration

7 – 8 a.m.

Breakfast

8 – 8:55 a.m.

Optimizing Immunization Practices: Your Role, Your Impact

Isabel Valdez, PA-C

Vaccine-preventable infectious diseases continue to pose significant health burdens globally, with vaccines preventing both morbidity and mortality. Despite the importance of vaccinations, immunization rates amongst adults are suboptimal. This session will review the risk factors, clinical features and epidemiology of vaccine preventable diseases. In addition, the numerous factors influencing vaccine uptake at the patient, provider, and system levels will be discussed. This session will

equip healthcare professionals with tools, communication strategies, and practical solutions to improve adult vaccine uptake in primary care.

At the conclusion of this session, participants should be able to:

- Articulate the risk factors, clinical features, epidemiology and burden of disease associated with prevalent vaccine preventable infectious diseases
- Summarize current vaccine recommendations, including available clinical immunization resources
- Recognize patient-specific, provider-related, and systemic barriers to vaccine uptake and develop strategies to overcome these obstacles in the primary care setting
- Select evidence-based strategies to increase immunization rates in their patient populations, considering factors such as vaccine hesitancy, patient education and workflow integration within the primary care setting

*Supported by educational grants from GlaxoSmithKline and Pfizer

9 – 9:55 a.m.

AI in Healthcare Today and Tomorrow: Practical Tools and Emerging Frontiers

James C. Somers, DHSc, PA-C, DFAAPA

Generative AI is rapidly reshaping primary care, from documentation and diagnostics to patient engagement and workflow efficiency. This session introduces primary care PAs to the core concepts behind large language models and demonstrates how these tools can enhance, rather than replace, clinical judgment. Participants will explore the real-world benefits, limitations, and ethical considerations of AI while gaining practical strategies for safely integrating AI into daily practice. We will also look ahead to the emerging innovations that may redefine healthcare delivery in the coming decade.

At the conclusion of this session, participants should be able to:

- Explain the foundational concepts behind generative AI and large language models (LLMs) and describe how these technologies are transforming healthcare delivery, documentation, and decision-making
- Describe current applications of AI in primary care, including clinical decision support, ambient documentation, and patient engagement tools

- Evaluate the benefits, limitations, and ethical considerations of AI-enabled tools, with attention to diagnostic accuracy, bias, transparency, and clinician-patient relationships
- Identify emerging frontiers in AI for healthcare, such as predictive analytics, multimodal models, and personalized medicine, and apply a practical framework for integrating these tools into clinical workflows

9 – 9:55 a.m.

Pain Management in the Age of the Opioid Epidemic

Deanna Bridge Najera, MPAS, MS, PA-C, DFAAPA

Chronic pain is extremely common, with estimates ranging from 20-30% of the adult population struggling with pain related conditions. Many primary care providers find themselves managing their patient's pain, both acutely and chronically. This is in the context of the persistent opioid epidemic as well as national guidelines regarding prescribing opioids. What is a provider to do? This presentation will help attendees better assess both the initial evaluation as well as the inherited patient, exploring alternative, evidence based methods of pain control to assist in developing a comprehensive pain management plan.

At the conclusion of this session, participants should be able to:

- Explore the diagnostic work up of chronic pain complaints, including assessing risk for substance use and screening for mental health
- Evaluate various pharmacologic treatment options for chronic pain, with an emphasis on non-opioid treatments
- Summarize non-pharmacologic approaches to pain management
- Outline the development of comprehensive pain management plans
- Rebranding patients from 'drug-seeking' or 'relief-seeking'

10 - 10:30 a.m.

Exhibits/Break

10:30 – 11:25 a.m.

Sensitive Areas, Serious Insights: Practical Tools for Vulvovaginal Evaluation in Primary Care

Julia M. Burkhardt MS, PA-C

This session will equip PAs with essential skills to diagnose and manage three frequently encountered vulvovaginal conditions in primary care: herpes simplex virus (HSV), vaginitis, and vaginal dryness. Through case-

based discussion and evidenced-based insights, participants will learn to distinguish these conditions using key clinical features, targeted histories, and physical exam findings. The session emphasizes a structured diagnostic approach, incorporating point-of-care testing, microscopy, and selective laboratory evaluation to refine differential diagnoses. Treatment strategies will be explored with guidance on choosing appropriate modalities based on symptom severity and patient-specific factors. Practical pearls on patient counseling, recurrence management, and psychosocial impact will also be shared. By the end of the session, participants will confidently recognize red flags, apply clinical reasoning, and initiate timely, patient-centered treatment plans that align with current guidelines.

At the conclusion of this session, participants should be able to:

- Recognize common vulvar and vaginal disorders seen in primary care and differentiate them using key clinical features
- Formulate a targeted differential diagnosis using clinical reasoning and appropriate diagnostic tools for vulvar and vaginal complaints.
- Select evidence-based treatment options tailored to individual patient factors and guideline recommendations
- Provide patient-centered education and follow up to support symptom management and long-term care

10:30 – 11:25 a.m

Outpatient Management of Congestive Heart Failure

Jaan Kelly, DMS, PA-C

Congestive heart failure remains one of the leading causes of morbidity, mortality, and patient encounters worldwide. With an aging population with comorbidities such as hypertension, diabetes, chronic kidney disease, and coronary artery disease; early identification and intervention have never been more important. This session will review the current AHA/ACC/HFS guidelines for the treatment of patients with heart failure with an emphasis on patient identification, risk factor modification, evidence-based workup, patient education, treatment, and follow-up.

Regardless of your practice area, this session will provide you with practical insights to improve outcomes and quality of life for patients living with heart failure.

At the conclusion of this session, participants should be able to:

- Recall guideline-directed medical therapy for the treatment of heart failure according to the ACC guidelines
- Recognize patients at risk for heart failure
- Discuss strategies to mitigate diuretic resistance
- State strategies to reduce hospitalization and improve quality of life for heart failure patients

11:30 a.m. – 12:15 p.m.

I Want to Lose Weight—Now What? Treatment Options and Medication Insights for PAs in Primary Care

Colleen Sloan, PA-C, RDN

Obesity is one of the most common—and complex—conditions managed in primary care, yet treatment often stops at lifestyle advice. In this session, Physician Assistant and Registered Dietitian Colleen Sloan breaks down the real-world tools every PA needs to diagnose and treat obesity using evidence-based, patient-centered strategies confidently. You'll explore the full range of treatment options, from behavioral counseling and nutrition to bariatric surgery and anti-obesity medications. Special emphasis will be placed on obesity management medications: when to prescribe them, how to manage side effects, and what to expect when patients discontinue. Through real patient cases, Colleen will also demonstrate how to reframe success beyond the scale, communicate more effectively around weight, and help patients build sustainable goals. Whether you're new to obesity management or looking to sharpen your approach, you'll leave with practical tools, scripts, and clinical pearls to better support patients at every stage of their journey.

At the conclusion of this session, participants should be able to:

- Compare lifestyle, pharmacologic, and surgical treatment options for obesity management
- Evaluate the appropriate use of anti-obesity medications in clinical practice
- Identify, counsel, and support patients through common side effects of anti-obesity medications
- Support non-scale victories and apply goal-setting strategies to support long-term patient success

12:15 – 1:15 p.m.

Lunch (Provided)

1:15 – 2 p.m.

Rheumatology

Garland James, PA-C

At the end of this session a provider should be able to recognize clinical presentation and pathophysiology as well as treatment options for various rheumatological disorders.

At the conclusion of this session, participants should be able to:

- Discuss the pathophysiology clinical presentation and treatment options for psoriatic arthritis
- Describe treatment options for different rheumatological conditions in a dermatology space
- Explain the shared space between dermatology and rheumatology in treating diseases

1:15 – 2 p.m.

It's Got to Be a Thyroid Problem...Right?

Jada Hansberry, MS, MPAS, PA-C

In this session you will learn how to diagnose, and treat hyper and hypothyroid patients, as well as distinguish subclinical hypothyroid patients. Real patient cases will be discussed.

At the conclusion of this session, participants should be able to:

- Diagnose and treat common hypothyroid problems
- Diagnose and treat common hyperthyroid problems
- Know what to do when a patient can't get in to see an endocrinologist quickly

2:05 – 3 p.m.

Current Trends in Pharmacy Compounding

Jennifer Fix, PharmD, MBA, BCGP

Here's your chance to learn about compounding pharmacy, quality assurance related to compounding, and clinic efficiency related to working with pharmacies. We will discuss hot topics in compounding and trending active pharmaceutical ingredients (APIs) including GLP-1s. We will leave enough time for an "Ask the Pharmacist" session.

At the conclusion of this session, participants should be able to:

- Discuss when to consider prescribing a compounded medication
- Discuss the quality assurance and regulatory framework for compounding pharmacies

- Recognize trending active pharmaceutical ingredients (APIs), their uses, side effects, and prescribing
- Consider components of clinical efficiency related to medications, patients, and records

2:05 – 3 p.m.

Medication Considerations in the Peri-operative Patient

Leslie Clayton DMSc, PA-C, DFAAPA

Which medications a patient should hold or continue during the perioperative period is often confusing to many family medicine providers. This lecture will break down how to approach these decisions in a way that will make it less daunting and leverage a common-sense approach. Patient education is vital to ensuring compliance for the best outcomes and risk management related to medications before and after surgery.

At the conclusion of this session, participants should be able to:

- Discuss current recommendations for medication adjustments in the preoperative period for cardiac, anticoagulant, diabetic medications and miscellaneous meds
- Make proper recommendations to the surgical and perioperative teams regarding medication monitoring during the pre- and post-operative periods
- Provide patient education regarding recommended medication adjustments, as needed in accordance with current evidence-based standards

3 – 3:30 p.m.

Exhibits/Break

3:30 – 4:25 p.m.

Transgender Medicine for Primary Care

Hayden Middleton, DMSc, PA-C

The "Transgender Medicine for Primary Care" lecture will cover the basics of caring for transgender patients - both needed preventive care and prescribing and managing hormone replacement therapy (HRT).

At the conclusion of this session, participants should be able to:

- Synthesize professional wording to inquire about the gender identity of a patient
- Discuss how to address those whose gender identity is disparate from their sex designated at birth
- Describe the etiology of potential complications of gender-affirming hormone therapy

- Discuss the approach to addressing the preventative health care needs of LGBTQ patients

3:30 – 4:25 p.m.

Cardiovascular Crossroads: Managing Hypertension, Dyslipidemia, CHF, and More in Primary Care

Isabel Valdez, PA-C

Standing at the cardiovascular crossroads should not be daunting for APPs, especially after this session where we'll use case-based learning to integrate the latest 2025 ACC/AHA Guidelines. Implement these evolving guidelines into complex, real-world patients while managing hypertension and hyperlipidemia in primary care, guiding patients safely through post-hospitalization CHF follow-up, and addressing complex care management of after life-altering cardiovascular events with your patients. Together, we'll practice evidence-based decision-making, refine differential diagnoses, and build treatment strategies that improve continuity of care beyond the hospital walls. Leave with practical pearls to elevate your outpatient practice on Monday morning.

At the conclusion of this session, participants should be able to:

- Integrate the 2025 ACC/AHA hypertension guidelines, including updated thresholds, targets, and integration of the PREVENT risk calculator into treatment decisions
- Develop evidence-based management plans that incorporate lifestyle and pharmacologic strategies for patients with cardio-renal-metabolic comorbidities
- Demonstrate clinical reasoning through case-based analysis of common and complex cardiovascular presentations such as heart failure and ACS
- Formulate patient-centered treatment strategies that address multimorbidity, transitions of care, and long-term cardiovascular risk reduction

4:30 – 5:15 p.m.

Updates in HIV Prevention

Casey Messer, DHSc, PA-C, AAHIVS

This session will provide everything you need to know about HIV prevention in 2026! Updated clinical guidelines incorporate screening for HIV into routine medical care. Utilization of preexposure prophylaxis (PrEP) medications continues to expand, with a new long-acting injectable medication option administered only twice per year. Do you think you know when HIV PrEP is appropriate and how to manage it? Snap and clap and touch your toes!

At the conclusion of this session, participants should be able to:

- Discuss the current epidemiology of HIV
- Identify guidelines for biomedical prevention of HIV
- Evaluate clinical indications for use of HIV PrEP

4:30 – 5:15 p.m.

Autoimmune

Garland James, PA-C

At the end of the session a provider should be able to recognize clinical presentation and pathophysiology as well as treatment options for various Autoimmune disorders.

At the conclusion of this session, participants should be able to:

- Discuss dermatology, autoimmune disorders
- Describe clinical presentation of common dermatology disorders
- Discuss treatment recommendations for common autoimmune disorders seen in dermatology

Monday, February 2, 2026

7 a.m. – 4 p.m.

Registration

7 – 8 a.m.

Breakfast

8 – 8:55 a.m.

If You Are 48, Hot, Can't Sleep and Are Rage-Filled, It Could Be Perimenopause. I Can Help.

Jennifer Ramsey APRN, CNM, MSCP

This presentation will provide a basic understanding and confidence when prescribing hormones during the perimenopause and menopause transition.

At the conclusion of this session, participants should be able to:

- State the FDA indications for MHT and contraindications for MHT
- State the difference between bio-identical and compounded hormones
- State treatment options for Female Hypoactive Sexual Desire Disorder

9 – 9:55 a.m.

Outpatient Medical Coding Basics

Vic Holmes, PA-C; EdD

This session will provide an update on the current medical billing situation including basic billing principles. We will also discuss incident-to billing pearls and pitfalls and special codes you can use today to improve your reimbursement.

At the conclusion of this session, participants should be able to:

- Discuss the importance of accurate coding, coding terms, and principles
- Select the most appropriate medical decision-making levels for outpatient encounters
- Discuss the correct implementation of incident-to billing in outpatient situations
- Discuss the value proper coding can add to the PA/Physician relationship
- Discuss the essential features and coding aspects of a telehealth encounter

9 – 9:55 a.m.

Achey Breaky Gut: Managing Pediatric Gastric Complaints

Genevieve DelRosario, MHS, PA-C

This presentation will use a case-based approach to highlight six of the most common pediatric gastrointestinal conditions. Through real-world patient scenarios, participants will explore the presentation, diagnostic evaluation, and management of pyloric stenosis, celiac disease, constipation, inflammatory bowel disease, and gastroesophageal reflux disease. Each case will reinforce practical decision-making skills relevant to PA clinical practice, with a focus on red-flag findings, evidence-based interventions, and referral thresholds.

At the conclusion of this session, participants should be able to:

- Recognize the hallmark clinical presentation and diagnostic findings of pyloric stenosis and distinguish it from other causes of infant vomiting
- Identify risk factors, clinical manifestations, and appropriate screening tests for celiac disease in children
- Apply evidence-based approaches to the diagnosis and management of pediatric constipation, including lifestyle, dietary, and pharmacologic strategies

- Recognize the clinical spectrum of inflammatory bowel disease in children and determine when referral to pediatric gastroenterology is warranted
- Formulate management plans for gastroesophageal reflux disease (GERD) in infants and children, balancing conservative measures with pharmacologic therapy when indicated

10 – 10:30 a.m.

Break for Hotel Check Out

10:30 – 11:15 a.m.

The Platelet Playbook: A Practical Guide to PRP in Musculoskeletal Practice

Temilola Abdul, MD, CAQSM

This session will help participants understand PRP biology and preparation differences. Participants will be shown how to recognize evidence-based indications and patient selection. When to implement counseling, as well as injection and rehabilitation strategies for best outcomes will also be addressed.

At the conclusion of this session, participants should be able to:

- Review the history and evolution of PRP in musculoskeletal medicine
- Understand PRP biology and preparation methods
- Recognize evidence-based indications and patient selection criteria
- Implement patient counseling, injection techniques, & rehab strategies

10:30 – 11:15 a.m.

Bad Blood: Pediatric Anemias

Susan E. Kirk, PA-C, DFAAPA, CAQ-Peds

Anemia is one of the most common abnormal laboratory findings within the lifespan of the patient. A primary care provider is most likely to be the one to uncover an anemia and begin treatment, along with triaging the patient to determine the need for urgent/emergent evaluation or follow up with a specialist. While frequently related to nutritional deficiencies or blood disorders, anemia may also be the first laboratory sign of an underlying chronic disease. This session will cover the common and urgent findings in pediatric anemias.

At the conclusion of this session, participants should be able to:

- Interpret the severity of anemia within a clinical context
- Formulate a differential diagnosis for pediatric anemias
- Recognize and initiate treatment for pediatric anemias

11:20 a.m. - 12:15 p.m.

Low Testosterone in Cisgender Men: Diagnosis and Treatment

Hayden Middleton, DMSc, PA-C

The lecture will outline the basics of etiology, pathophysiology, and diagnosis of both primary and secondary hypogonadism and dive into the treatment for primary hypogonadism.

At the conclusion of this session, participants should be able to:

- Describe the difference between primary and secondary hypogonadism
- Discuss the diagnostic approach to a cisgender male with low testosterone
- Explain appropriate testosterone replacement and ongoing recommended monitoring and follow-up

11:20 a.m. - 12:15 p.m.

Urgent Care Unpacked: Common Conditions, Quick Fixes, and Practical Pearls

Chasity Falls, DMSc, MS, PA-C

Urgent Care Unpacked: Common Conditions, Quick Fixes, and Practical Pearls will dive into the fast-paced world of urgent care, highlighting the conditions and injuries most commonly encountered in practice. Designed for primary care providers, the presentation will cover practical approaches to managing everything from sprains and lacerations to respiratory infections and abscesses. Participants will also review common procedures, including splinting, suturing, and wound care, with an emphasis on when to treat, when to refer, and how to adapt care based on available resources. The talk will explore unique challenges in rural versus urban urgent care settings and discuss strategies for supporting underinsured or underserved patients. Attendees will leave with actionable pearls to enhance patient care and confidence in handling urgent presentations.

At the conclusion of this session, participants should be able to:

- Identify the most common conditions seen in urgent care, including respiratory, musculoskeletal, dermatologic, and gastrointestinal presentations

- Differentiate between cases appropriate for urgent care versus emergency referral
- Review common injuries and urgent care procedures, such as wound management, splinting, abscess drainage, and foreign body removal
- Discuss challenges and strategies in providing urgent care in rural versus urban settings
- Examine barriers to care among underinsured populations and approaches to optimize management in urgent care settings
- Apply current evidence-based guidelines for vaccination in children and adolescents to patient cases

12:15 – 1:15 p.m.

Lunch (Provided)

1:15 – 2:10 p.m.

Current Issues in Pediatric Preventative Medicine: a Case-based Approach

Kristy Luciano, MS, PA-C

This presentation will use a case-based approach to discuss current evidence-based vaccination recommendations for children and adolescents and effective communication strategies with vaccine hesitant families. Screening guidelines for anxiety and recommendations for screen use and sleep in adolescence will be reviewed. Finally, the use of BMI in screening for overweight and obesity and effective communication strategies when talking about these diagnoses will be discussed.

At the conclusion of this session, participants should be able to:

- Apply current evidence-based guidelines for vaccination in children and adolescents to patient cases
- Apply screening guidelines for anxiety in children and adolescents and apply to a pediatric patient population
- Implement evidence-based recommendations on screen use and sleep in adolescence
- Review the use of BMI in screening for obesity in the pediatric patient population
- Accurately interpret growth charts and effectively communicate with families when discussing a diagnosis of overweight or obesity

2:15 – 3:10 p.m.

Healing the Divide: Integrating MAT Training into Primary Care for Substance Use Disorders

Chasity Falls, DMSc, MS, PA-C, DFAAPA

Healing the Divide: Integrating MAT into Primary Care for Substance Use Disorders explores the critical role of PAs in addressing the growing burden of substance use disorders (SUDs) through evidence-based, compassionate care. This session will provide an overview of Medication-Assisted Treatment (MAT), including clinical indications, pharmacologic options, and integration strategies for primary care settings. Participants will examine patient selection, regulatory considerations, and models of interdisciplinary care that support long-term recovery. Barriers such as stigma, access, and provider readiness will be discussed, with practical solutions offered for real-world application. Emphasizing harm reduction and trauma-informed care, this session empowers PAs to expand access to MAT and improve outcomes for patients living with SUD.

At the conclusion of this session, participants should be able to:

- Describe the epidemiology and impact of substance use disorders (SUDs) in the primary care setting
- Explain the principles and evidence base of Medication-Assisted Treatment (MAT) for opioid and alcohol use disorders
- Summarize FDA-approved medications for MAT, including indications, mechanisms of action, and monitoring requirements
- Recognize barriers to MAT implementation in primary care and propose strategies to overcome stigma, logistical, and regulatory challenges
- Apply harm reduction principles and trauma-informed care when engaging patients in SUD treatment

3:15 – 4 p.m.

Don't Be Ill-Advised; Be Well-Informed: A Preventative Medicine Approach

Megan Fondren, PA-C

This session will discuss and differentiate the levels of prevention (primary, secondary, tertiary) and apply them to patient care scenarios as well as review current guidelines and recommendations for screenings, immunizations, and lifestyle counseling. Participants will also develop care plans that incorporate behavioral change techniques, health education, and follow-up strategies. Participants will identify

strategies to collaborate across healthcare disciplines and address social determinants of health that impact access to preventative services

At the conclusion of this session, participants should be able to:

- Analyze the principles and scope of preventative health in clinical practice
- Evaluate evidence-based preventative strategies for common chronic conditions
- Implement patient-centered preventative health plans
- Promote interdisciplinary collaboration and address health equity in preventative care

4 p.m.

Closing Remarks