
CSB2A Controlled Substance Review

Price: \$485.00

Register: (866) 611-5599 or www.AmericanSeminar.com

**Special Association accreditation may vary. See website.*

Update on Ketamine and Esketamine - James W. Murrrough, MD and Stephan Carlson, MD

Explain the neurotrophic hypothesis of depression; Sketch the mechanism of action of ketamine and related agents; Summarize the findings of randomized trials that established the efficacy of ketamine and esketamine for treatment of depression; Select appropriate candidates for treatment of depression and suicidal ideation with ketamine or esketamine; Follow consensus guidelines when using ketamine or esketamine.

QUALIFIES FOR CLINICAL PHARMACOLOGY

PS 49 - 07

Safe Deprescribing of Benzodiazepines - Susan W. Lehmann, MD, Erin VanMeter, PharmD, Christina Prather, MD and Collen Christmas, MD

Identify appropriate and inappropriate uses of benzodiazepines; Select effective modalities to treat anxiety related to cognitive dysfunction; Recognize the symptoms of withdrawal from benzodiazepines; Consider pharmacokinetic and pharmacodynamics factors when planning withdrawal from benzodiazepines; Develop plans to taper chronic use of benzodiazepines.

QUALIFIES FOR GERIATRICS, CLINICAL PHARMACOLOGY AND CONTROLLED SUBSTANCES

IM 67 - 38

Opioids and Acute Pain - J. Douglas Jaffe, DO

Educate patients on the potential for addiction when using opioid medications for analgesia; Recognize the complexities of providing analgesia to patients who are taking buprenorphine; Summarize the characteristics of ketamine; Describe advantages of using ultrasound-guided neurofascial plane nerve blocks; Counsel patients about postoperative pain to help set reasonable expectations.

QUALIFIES FOR PAIN MANAGEMENT, SUBSTANCE ABUSE, CONTROLLED SUBSTANCES

AN 62 - 43

Role of Healthcare in Addressing the Opioid Crisis - Sandeep Kapoor, MD

Assist clinical leaders in combatting the opioid crisis; Foster collaboration among clinicians, health care systems, community organizations, and governments to address the opioid crisis; Describe the role of naloxone in caring for patients with opioid use disorder; Create an institutional protocol for consistently using the Screening, Brief Intervention, and Referral to Treatment tool; Encourage other clinicians to take ownership of the opioid crisis by educating themselves and obtaining the waivers required to provide medication-assisted treatment.

QUALIFIES FOR SUBSTANCE ABUSE AND CONTROLLED SUBSTANCES

IM 67 - 21

Perioperative Management for Orthopedic Surgery in the Patient Recovering from Opioid Addiction - Jennifer M. Hargrave, DO, Lynne D. Boone, DO, Robert J. Corba, DO and Jessica K. Goeller, DO

Differentiate among options available for MAT; Make appropriate recommendations for discontinuation of MAT therapies prior to surgical procedures; Prescribe postoperative analgesia with the lowest risk for contributing to relapse of a patient who has recovered from opioid addiction; Identify signs of withdrawal from buprenorphine; Compare the efficacies and safety of medications used to ease perioperative pain and anxiety in patients who have recovered from opioid addiction.

QUALIFIES FOR PAIN MANAGEMENT, SUBSTANCE ABUSE, CONTROLLED SUBSTANCES

AN 62 - 42