

| FRIDAY, July 24, 2026 – 9.0 total CME | | |
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| Daily Chairs: Justine Suba-Cohen, DO, FAAFP and Gerica Alvarado, MD, FAAFP | | |
| | Lectures & Workshops | Objectives |
| 7:00am - 6:30pm | | Registration |
| 7:00 - 8:00am | Breakfast - La Sirena I | |
| 8:00 - 9:00am Lecture | From Home Districts to Captiol Hill: Strategies for Local and Federal Advocacy Tim Grunert, MD, MPH, FAAFP Approved for 1.0 Prescribed CME | 1) Explain how Family medicine advocacy translates daily exam-room realities into systemic policy changes 2) Discuss strategies for protecting primary care funding, reducing prior authorization burdens and defending public health infrastructure and preserving access to federal student aid and medical training 3) Learn how grassroots storytelling backed by national data can help tell the primary care story |
| 9:00 - 10:00am Lecture | Wound Care Ryan Huang, DO Approved for 1.0 Prescribed CME | 1) Evaluate acute/chronic wounds 2) Review healing physiology 3) Review treatment of underlying comorbidities 4) Discuss sharp debridement, selecting optimal dressings and preventing pressure injuries 5) Discuss coordinating multidisciplinary care teams. |
| 10:00 - 10:15am | Break | |
| 10:15 - 11:15am Lecture | PCSK9 Inhibitors in Primary Prevention: A New Paradigm for Family Physicians Pam R. Taub, MD Approved for 1.0 Prescribed CME* <i>*Supported by an independent educational grant from Amgen</i> | 1) Describe the evolving evidence base for PCSK9 inhibition, including key secondary prevention trials and new primary prevention data, and explain how this evidence supports earlier, more intensive LDL-C lowering in selected high-risk patients without prior ASCVD events 2) Identify primary prevention patients in family medicine who may benefit from PCSK9 inhibitor therapy by integrating global cardiovascular risk, LDL-C thresholds, prior lipid-lowering therapy, comorbidities, and current guideline recommendations into individualized treatment decisions 3) Outline practical strategies for effective communication and collaboration between family physicians, APPs, and cardiovascular/lipid specialists to co-manage high-risk patients who are candidates for PCSK9 inhibitors in both secondary and primary prevention, including clear referral criteria, shared-care plans, and coordinated follow-up to optimize outcomes and adherence. |
| 11:15am - 12:15pm Lecture | Evaluating the Role and Impact of Primary Care Providers on the Treatment of Patients With Moderate-to-Severe Asthma Louis Kuritzky, MD and Michael E. Wechsler, MD, MMSc Approved for 1.0 Prescribed CME | 1) Define high-intensity treatment in patients with asthma 2) Utilize clinical indicators to assess or refer patients for escalation of asthma therapy, including add-on biologics 3) Analyze efficacy and safety data of available biologics for the treatment of asthma 4) Apply recommendation for biomarker testing in evaluation of patients with asthma 5) Implement strategies for effective management of patients with asthma with biologic therapies in collaboration with asthma specialists |
| 12:15 - 1:15pm Lunch & Exhibits | Lunch & Exhibits | |
| 1:15 - 2:45pm Workshop | Integrating Substance Use Disorder Treatment into Your Practice: Tips & Best Practices Maureen Strohm, MD, FAAFP, DFASAM Approved for 1.5 Prescribed CME* <i>*Eligible for Credit towards Pain Management, Misuse and Abuse of Controlled Substances or Addiction</i> | 1) Describe why integration of care for patients who use drugs (PWUDs) into primary care is important 2) Identify current trends and workflows within your practice regarding care for patients with SUD 3) Discuss strategies and steps to integrate care for patients who use drugs (PWUDs) into your primary care setting. |
| 2:45 - 3:45pm Lecture | A Practical Approach to Joint Pain in Primary Care Kenneth Grant, MD Approved for 1.0 Prescribed CME | 1) Discuss how to differentiate joint pain 2) Review inflammation from mechanical etiologies 3) Discuss ordering targeted labs 4) Identify urgent referral red flags to prevent long-term damage. |
| 3:45 - 4:00pm | Break | |
| 4:00 - 5:00pm Lecture | Palliative Care Amy J. Hachquet, MS, LMFT Approved for 1.0 Ethics CME | 1) Evaluate causes of distress (e.g., pain, dyspnea, nausea, and delirium) and safely balance treatments such as opioids or adjuvant medications against adverse effects 2) Develop skills to facilitate difficult discussions about death, dying, and prognosis, ensuring medical interventions align with the patient's values, dignity, and wishes 3) Coordinate physical, psychological, social, and spiritual support by effectively utilizing interdisciplinary palliative care teams and community resources 4) Navigate the ethical, legal, and practical realities of hospice enrollment and end-of-life transitions |
| 5:00 - 6:30pm Lecture | Board Exam Jeopardy! Jeffrey Ng, MD, FAAFP Approved for 1.5 Prescribed CME | This session is designed to help physicians and residents pass the ABFM certification or recertification exam by increasing clinical knowledge, enhancing test-taking skills, and reviewing the latest evidence-based guidelines. Objectives include identifying knowledge gaps, improving diagnostic skills, and covering sample ABFM board exam questions in a fun and interactive environment. |
| 6:30 - 9:00pm | Exhibit Hall and 20 th Annual NAFF Sip & Savor Social and Silent Auction | |

SATURDAY, July 25, 2026 – 8.0 total CME
Daily Chairs: Amanda Magrini, MD, FAAFP and Troy Bertoli, MD

| | Lectures & Workshops | Objectives |
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| 7:00am - 5:45pm | Registration - Convention Center | |
| 7:00 - 8:00am | Breakfast - La Sirena I | |
| 8:00 - 9:00am Lecture | <p>What Every Family Medicine Physician Should Know About Hepatic Encephalopathy: Recognition, Differential Diagnosis, Diagnostic Testing, and Appropriate Referral Vignan Manne, MD</p> <p>Approved for 1.0 Prescribed CME* <i>*Supported by an independent educational grant from Salix Pharmaceuticals</i></p> | <p>1) Recognize the clinical spectrum of hepatic encephalopathy (covert and overt), including key signs, symptoms, and common precipitants, in adult patients seen in family medicine practice 2) Differentiate hepatic encephalopathy from other common causes of altered mental status using focused history, examination, validated scoring systems, and appropriate diagnostic testing (eg, basic labs, ammonia when appropriate, neuroimaging, and psychometric tools), and determine when additional workup is warranted 3) Apply evidence based strategies to initiate early management measures and coordinate timely referral to gastroenterology/hepatology or emergency services for patients with suspected or confirmed hepatic encephalopathy, based on disease severity, recurrence risk, and red flag features.</p> |
| 9:00 - 11:00am Lecture/Workshop | <p>Treating Obesity Beyond the Scale: Evidence-Based, Personalized Approaches for Chronic Disease Management Timothy R. Gilbert, MD</p> <p>Approved for 2.0 Prescribed CME</p> | <p>1) Summarize the rationale for treating obesity as a chronic, progressive disease that requires early intervention 2) Establish individualized weight loss targets and long-term treatment strategies for people with obesity that consider guideline recommendations and the latest evidence 3) Select appropriate pharmacotherapies for obesity management based on treatment goals, patient characteristics, and comorbidities 4) Apply shared decision-making principles to address patient concerns and support treatment adherence</p> |
| 11:00 - 11:15am | Break | |
| 11:15 - 12:15am Workshop | <p>NAFP Student/Resident Research Poster Displays</p> <p>Approved for 1.0 Prescribed CME</p> | <p>Review and vote for the best research poster display. Poster authors will be available throughout the day to discuss their research. Participants will be entered into a drawing for a cash prize.</p> |
| 12:15 - 1:30pm Lunch | Sponsored Lunch Program | |
| 1:30 - 3:30pm Round Tables | <p>Patient-Oriented Evidence that Matters (POEMs) Round Tables Justine Suba-Cohen, DO, FAAFP and Gerica Alvarado, MD, FAAFP</p> <p>Approved for 2.0 Prescribed CME</p> | <p>1) Review summaries of valid research that are relevant to the clinical practice of family medicine 2) Discuss how studies qualify to be POEMs such as a) Did the research focus on an outcome that patients care about (e.g., morbidity, mortality, quality of life)? b) Is the problem that has been studied common and is the intervention feasible? and c) Does the information have the potential to change the practice of many physicians? 3) Learn how to apply this new information in your practice 4) Sharpen skills to critically assess new medical information</p> |
| 3:30 - 4:00pm | Break - Wellness Activity | |
| 4:00 - 5:00pm Lecture | <p>GI Pearls for Primary Care Jose Aponte, MD</p> <p>Approved for 1.0 Prescribed CME</p> | <p>1) Review the core clinical presentations in the GI patient 2) Discuss abdominal pain and the difference between acute (e.g., appendicitis, cholecystitis) vs chronic (e.g., Irritable Bowel Syndrome) 3) Review Motility & Reflux- Managing Gastroesophageal Reflux Disease (GERD) and review drug-induced constipation (e.g., anticholinergics, GLP-1s) 4) Discuss Bleeding- Assess Upper vs. Lower GI bleeds 5) Review preventive care & screening for colorectal cancer 5) Review screening for high-risk populations for viral hepatitis and managing complications</p> |
| 5:00 - 6:00pm Lecture | <p>Social Media Advocacy for Family Physicians Bright Zhou, MD</p> <p>Approved for 1.0 Prescribed CME</p> | <p>Discuss the benefits of Social media advocacy 2) Review how social media can be used to educate our patients with evidence-based information 3) Discuss how to use social media to counter rampant medical misinformation 4) Discuss how you can use social media to influence public policy using real-world clinical stories and build a digital community trust that can elevate the visibility of primary care</p> |
| 6:30pm | <p align="center">Island Time After-Party</p> <p align="center">Come join us for some indoor/outdoor fun at the beach! Meet our Local Residents and Students along with Local Physicians and NAFP Leaders. Join us for appetizers and cocktails. Don't miss out!!!</p> <p align="center"><i>Sponsored by: Valley Health System</i></p> | |

SUNDAY, July 26, 2026 – 4.5 total CME
Daily Chairs: Justine Suba-Cohen, DO, FAAFP and Gerica Alvarado, MD, FAAFP

| | Lectures & Workshops | Objectives |
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| 8:00 - 9:00am Breakfast & Lecture | <p style="text-align: center;">Advancing Lung Cancer Screening Excellence—Empowering Primary Care Providers to Close Critical Gaps in Early Detection Nate Falk, MD, MBA, CPE, FAAFP</p> <p style="text-align: center;">Approved for 1.0 Prescribed CME</p> | <p>1) Apply current lung cancer screening guidelines to identify eligible patients 2) Address coverage and reimbursement requirements, and implement evidence-based screening protocols in clinical practice 3) Identify and counsel expanded high-risk groups for lung cancer screening, including minorities, never-smokers, occupational exposure groups, veterans, and individuals in high-burden geographic areas outside traditional age and smoking criteria 4) Apply Lung-RADS and Fleischner Society guidelines to classify pulmonary nodules based on size, morphology, and patient risk factors</p> |
| 9:00 - 10:00am Lecture | <p style="text-align: center;">Connecting Minds to Support Cognitive Health and Early Alzheimer's Disease: Refining Skills and Workflows for Prevention, Detection, and Diagnosis Charles Vega, MD, FAAFP</p> <p style="text-align: center;">Approved for 1.0 Prescribed CME</p> | <p>1) Integrate blood-based biomarker testing into the diagnostic evaluation of patients with suspected early symptomatic AD 2) Differentiate mild cognitive impairment (MCI) from normal aging using appropriate cognitive assessment tools 3) Incorporate multi-domain risk assessment into routine clinical care to identify and characterize modifiable and non-modifiable risk factors for cognitive decline 4) Work with members of the care team to develop a personalized cognitive health plan for patients with or at risk for cognitive decline</p> |
| 10:00 - 11:00am Lecture | <p style="text-align: center;">2026 ACC/AHA Lipid Management Guidelines Update Bradley S. Havins, MD and Cheyenne Bair, OMS-IV</p> <p style="text-align: center;">Approved for 1.0 Prescribed CME</p> | <p>1) Update new Clinical Practice Guidelines regarding Lipid Management 2) Discuss role of Lipoprotein (a) in new guidelines 3) Refine how Coronary Artery Calcium scoring can be used for reclassification of risk</p> |
| 11:00am - 12:30pm Lecture/Group Discussion | <p style="text-align: center;">Hot Topics in Family Medicine Panel:</p> <p style="text-align: center;">Kelsie Little, MD - The Big Beautiful Bill and what it means for FM Bright Zhou, MD - LGBTQIA Care Joanne Leovy, MD - Climate Change and impacts on health Henry Charoen, DO - AI and Virtual Care Challenges Angelica Co, DO - Wellness Centers and Medi Spas</p> <p style="text-align: center;">Approved for 1.5 Prescribed CME</p> | <p>The Big Beautiful Bill: Discuss the Impacts regarding federal health programs, patient care, and financial structures: Medicaid and Coverage Restrictions: A major goal is to restrict eligibility for Medicaid, CHIP, and ACA plans for certain non-citizens. It also mandates more frequent (every six months) Medicaid eligibility determinations and shortens the retroactive coverage period.</p> <p>LGBTQIA+ Care- Discuss challenges in reducing long-standing health disparities by establishing culturally competent clinical environments. Review actionable clinical strategies leveraging clinical guidance and inclusive training to meet specific community needs:</p> <p>Climate Change and impacts on health- Discuss how climate change undermines core global health objectives by increasing toxic air pollution, shifting infectious disease distributions, and straining healthcare infrastructure.</p> <p>AI and Virtual Care Challenges- Discuss patient data privacy, worsening health disparities via algorithmic bias, and eroding clinical empathy. Discuss the over-reliance on automation, degradation of critical reasoning skills and increase in physician administrative burden when tools fail.</p> <p>Wellness Centers and Medi Spas- Discuss core regulatory and safety concerns, counterfeit and illegal products, upselling of unregulated wellness trends like intravenous (IV) vitamin therapies and compounded weight-loss injections</p> |

Close of the 37th Annual Summer CME Meeting

WE HOPE TO SEE YOU NEXT YEAR!!!