

**** Materials for this course will release 05/16/2022 ****

Infectious Diseases Self-Assessment Program (IDSAP) Book 1: Abdominopelvic Cavity Infections and Antimicrobial Toxicities (Cert # L229232)

Teaser: This Self-Assessment Program series provides Infectious Disease pharmacists with pertinent therapeutic updates to enhance their practice skills and improve patient outcomes.

Tag: Certifications; Infectious Disease



ACPE Numbers: Various – see listing below

Pre-Sale Date: 04/20/2022

Release Date: 05/16/2022

Expiration Dates: 11/15/2022

Activity Type: Application-based

CE Credits: 16 contact hours (BPS and ACPE)

Activity Fee: \$75 (ASHP member); \$110 (non-member)

Accreditation for Pharmacists



The American College of Clinical Pharmacy and American Society of Health-System Pharmacists are accredited by the Accreditation Council for Pharmacy Education as providers of continuing pharmacy education.

Target Audience

The target audience for Infectious Diseases Self-Assessment Program (IDSAP) Book 1: Abdominopelvic Cavity Infections and Antimicrobial Toxicities is board certified and advanced-level infectious disease pharmacists involved in evidence-based management strategies for the prevention and management of drug-resistant gram-negative infections.

Activity Overview

This course is intended for board certified pharmacists in need of recertification credit and is designed based on the content outline developed by the Board of Pharmacy Specialties (BPS). The course consists of 4 learning modules (see table below) and provides up to 16 contact hours of continuing pharmacy education and/or recertification credit.

Learners will be required to review the content and complete the associated online assessments. The learner must be able to correctly answer the questions based upon their interpretation of the content, as well as “baseline specialty specific knowledge and/or easily retrievable information.” For purposes of this course, “baseline specialty specific knowledge and/or easily retrievable information” is defined as product labeling and well-established standards of practice in the specialty practice.

These activities are part of the ACCP and ASHP and professional development program for BCIDP recertification approved by the BPS.

Recertification Credit*

Board certified pharmacists are eligible to receive up to 16 contact hours of recertification credit for completing this course. To earn recertification credit, learners must review the activity content and successfully complete the online assessments by the deadline. Only completed assessments will be eligible for credit; no partial or incomplete assessments will be processed. You are allowed only one attempt to successfully complete this assessment.

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Learning Activity	ACPE Number	Credit Hours	*Assessment Pass Point
Abdominopelvic Cavity Infections and Antimicrobial Toxicities I	0217-9999-22-044-H01-P	4.0	TBD
Abdominopelvic Cavity Infections and Antimicrobial Toxicities II	0217-9999-22-045-H01-P	6.5	TBD
Abdominopelvic Cavity Infections and Antimicrobial Toxicities III	0217-9999-22-046-H01-P	5.0	TBD
Abdominopelvic Cavity Infections and Antimicrobial Toxicities IV	0217-9999-22-047-H01-P	4.5	TBD

LEARNING OBJECTIVES

Abdominopelvic Cavity Infections and Antimicrobial Toxicities I

ACPE Number: 0217-9999-22-044-H01-P

Chapter: C. difficile Epidemiology and Treatment

- Assess the burden of *Clostridioides difficile* infection (CDI) on hospitalized and non-hospitalized patients.
- Analyze the phenotypic and molecular epidemiology of *C. difficile* to gain insight into the prognosis of CDI and direct antimicrobial stewardship efforts.
- Distinguish between the drug therapy recommendations in several of the leading CDI guidelines.
- Evaluate FDA-approved therapies and agents currently used off-label to determine their place in therapy.

Chapter: C. difficile Infection and the GI Microbiome

- Assess the role of the GI microbiome in the pathogenesis of primary and recurrent *Clostridioides difficile* infection (CDI).
- Distinguish patient-specific microbiome-mediated risk factors for CDI.
- Evaluate the evidence for microbiome-targeted therapies for CDI primary and secondary prevention.

Abdominopelvic Cavity Infections and Antimicrobial Toxicities II

ACPE Number: 0217-9999-22-045-H01-P

Chapter: Low-risk Community-Acquired Intraabdominal Infections

- Distinguish between the different types of uncomplicated and complicated intra-abdominal infections (IAIs) according to pathophysiology and presumptive microbiology.
- Evaluate patients with an IAI by risk of treatment failure and death based on patient and infection characteristics.
- Design an appropriate supportive care plan of the hospitalized patient with an IAI.
- Develop an appropriate empirical antimicrobial regimen for a patient with an IAI.
- Develop an appropriate definitive or step-down therapy for a patient with an IAI.

Chapter: High-risk Community- and Hospital-Acquired Intraabdominal Infections

- Design an appropriate empiric therapeutic regimen for patients with high-risk CA-clAI or HA-clAI.
- Distinguish appropriate situations when empiric antifungal therapy is warranted.
- Evaluate microbiology culture results to guide changes in empiric therapy.
- Develop an appropriate definitive and/or oral stepdown therapy.
- Justify an appropriate duration of therapy for patients with high-risk CA-clAI or HA-clAI.

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Abdominopelvic Cavity Infections and Antimicrobial Toxicities III

ACPE Number: 0217-9999-22-046-H01-P

Chapter: Kidney Toxicity of Antimicrobials

- Evaluate the risk of kidney toxicity in patients taking commonly used antibiotic agents.
- Distinguish the various mechanisms that cause antibiotic-induced kidney toxicity.
- Classify the severity for acute kidney toxicity and identify traditional and novel urinary biomarkers for antibiotic-induced kidney toxicity.
- Develop strategies and ways to decrease antibiotic induced kidney toxicity.

Chapter: Evaluating and Reporting Antimicrobial-Related Harms

- Apply knowledge of the frequency of antimicrobial-related adverse events.
- Evaluate patient pharmacotherapy plans for possible antibiotic-related adverse events.
- Design stewardship strategies to track and prevent antimicrobial harms.

Abdominopelvic Cavity Infections and Antimicrobial Toxicities IV

ACPE Number: 0217-9999-22-047-H01-P

Interactive Case: Spontaneous Bacterial Peritonitis

- Distinguish spontaneous bacterial peritonitis (SBP) from other types of spontaneous infections, bacteriascites, and secondary peritonitis.
- Assess the most likely causative pathogen(s) in a patient with SBP according to recent epidemiologic data.
- Design an optimal anti-infective therapy for a patient with SBP or a common variant of SBP.
- Evaluate current and alternative/experimental strategies to prevent SBP.
- Develop antimicrobial stewardship strategies for patients at risk of or diagnosed with SBP.

Interactive Case: PK/PD Dosing Strategies in UTI

- Apply basic principles of pharmacokinetics/pharmacodynamics (PK/PD) into patient care.
- Evaluate patient anatomical structures and the associated anomalies of the genitourinary tract as they relate to drug absorption, distribution, metabolism and excretion processes.
- Assess unique PK/PD principles as they relate to UTIs that may differ from other sources of infections.
- Calculate antimicrobial pharmacokinetic parameters specific to UTIs.
- Evaluate pertinent PK/PD considerations for the treatment of special patient populations.

Interactive Case: Antimicrobial Prophylaxis for Post-Urologic Surgery UTI

- Evaluate patients for postoperative UTIs and apply available guideline recommendations for antimicrobial prophylaxis.
- Evaluate common urologic procedures and patient-specific factors for the risk of postprocedural UTIs.
- Analyze the supporting evidence for urologic surgery prophylaxis to identify optimal antimicrobial prophylactic regimens.
- Develop strategies to implement urologic surgery stewardship in practice.

Disclosures

In accordance with our accreditor's Standards of Integrity and Independence in Accredited Continuing Education, ASHP requires that all individuals in control of content disclose all financial relationships with ineligible companies. An individual has a relevant financial relationship if they have had a financial relationship with an ineligible company in any dollar amount in the past 24 months and the educational content that the individual controls is related to the business lines or products of the ineligible company.

An ineligible company is any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. The presence or absence of relevant financial relationships will be disclosed to the activity audience.

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No one in control of the content of this activity has a relevant financial relationship (RFR) with an ineligible company.

TBD

All other persons in control of content do not have any relevant financial relationships with an ineligible company.

As required by the Standards of Integrity and Independence in Accredited Continuing Education, all relevant financial relationships have been mitigated prior to the CPE activity.

Methods and CE Requirements

Activities consist of educational materials, assessments, and activity evaluations. In order to receive continuing pharmacy education credit, learners must:

- Complete the attestation statement
- Review all content
- Complete and pass the assessments
- Complete the evaluations

Follow the prompts to claim, view, or print the statement of credit within 60 days after completing the activity.

System Technical Requirements

Courses and learning activities are delivered via your Web browser and Acrobat PDF. For all activities, you should have a basic comfort level using a computer and navigating web sites.

View the [minimum technical and system requirements](#) for learning activities.

Development

These activities were developed by ACCP and ASHP.