

Materials for this course will release 10/19/2022

Ambulatory Care Pharmacy Specialty Recertification Literature Study: Module 1A-B (Cert # L229137)

Teaser: The Literature Study Module provides immediate access to peer-selected, contemporary articles that are relevant to specialty practice. After learners review the content, they must successfully complete an online assessment to earn recertification credit.

Tag: Certifications; Ambulatory Care



ACPE Numbers: Various – see listing below

Pre-Sale Date: 09/21/2022

Content Release Date: 10/19/2022

Expiration Dates: 10/17/2023

Activity Type: Application-based

CE Credits: 8 contact hours

Activity Fee: \$55 (ASHP member); \$110 (non-member)

Accreditation for Pharmacists



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

Target Audience

These Literature Studies are designed to help board-certified pharmacists who are seeking recertification contact hours to maintain their Board of Pharmacy Specialties (BPS).

Activity Overview

The Literature Study Module 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). This module consists of 2 online home study activities (see table below). Each activity is designed to assess the learners' ability to analyze and apply peer-selected contemporary articles to practice.

Module 1A -- Updates in Heart Failure: This module focuses on updates in heart failure, including the management of diuretic resistance, as well as new heart failure guidelines.

Module 1B -- Challenges in Ambulatory Care Pharmacy: This module focuses on challenges in ambulatory care pharmacy, including management of patients with depression or obesity, as well as optimizing antithrombotic therapy after acute coronary syndromes.

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 Literature

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Study, “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 professional development program for BCACP recertification approved by the BPS.

Recertification Credit*

Board certified pharmacists are eligible to receive up to 8 hours of recertification credit for completing this module. 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.

Learning Activity	ACPE Number	Contact Hours	Assessment Pass Point
Ambulatory Care Pharmacy Literature Study Module 1A: Updates in Heart Failure	0204-9999-22-956-H01-P	4	TBD
Ambulatory Care Pharmacy Literature Study Module 1B: Challenges in Ambulatory Care Pharmacy	0204-9999-22-957-H01-P	4	TBD
		8.0 BPS	

Articles and Learning Objectives

Module 1A: Updates in Heart Failure

ACPE #: 0204-9999-22-956-H01-P

This module focuses on updates in heart failure, including the management of diuretic resistance, as well as new heart failure guidelines.

Agarwal R, Sinha AD, Cramer AE et al. Chlorthalidone for hypertension in advanced chronic kidney disease. *N Engl J Med.* 2021; 385:2507-19.

Learning Objectives:

- Describe the Chlorthalidone in Chronic Kidney Disease (CLICK) study by Agarwal and colleagues of patients with advanced chronic kidney disease (CKD) and poorly controlled hypertension.
- Develop recommendations for the use of the thiazide-like diuretic chlorthalidone in patients with advanced chronic kidney disease (CKD) and poorly controlled hypertension despite antihypertensive drug therapy.

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Felker GM, Ellison DH, Mullens W et al. Diuretic therapy for patient with heart failure—JACC state-of-the-art review. *J Am Coll Cardiol.* 2020; 75:1178-95.

Learning Objectives:

- Describe renal physiology and response to diuretics, the pharmacology and pharmacodynamics of diuretics, mechanisms and strategies for overcoming diuretic resistance, and loop diuretic use in patients with acute or chronic heart failure.
- Develop recommendations for the use of diuretic therapy in patients with heart failure.

Anker SD, Butler J, Filippatos G et al. Empagliflozin in heart failure with a preserved ejection fraction. *N Engl J Med.* 2021; 385:1451-61.

Learning Objectives:

- Describe the Empagliflozin Outcome Trial in Patients with Chronic Heart Failure with Preserved Ejection Fraction (EMPEROR-Preserved).
- Develop recommendations for the use of empagliflozin in patients with chronic heart failure with preserved ejection fraction (HFpEF).

Heidenreich PA, Bozkurt B, Aguilar D, et al. 2022 AHA/ACC/HFSA guideline for the management of heart failure: a report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines. *J Am Coll Cardiol.* 2022;79:e263–e421. **IMPORTANT: For this Literature Study, the following sections are assessed: 4.1, 4.2, 7.3, 11.1, 12, 13**

Learning Objectives:

- Describe the 2022 American Heart Association (AHA)/American College of Cardiology (ACC)/Heart Failure Society of America (HFSA) guideline for the management of heart failure (HF).
- Develop recommendations for the management of patients with heart failure with reduced ejection fraction (HFrEF).

Module 1B: Challenges in Ambulatory Care Pharmacy

ACPE #: 0204-9999-22-957-H01-P

This module focuses on challenges in ambulatory care pharmacy, including management of patients with depression or obesity, as well as optimizing antithrombotic therapy after acute coronary syndromes.

Rodriguez F, Harrington RA. Management of antithrombotic therapy after acute coronary syndromes. *N Engl J Med.* 2021; 384:452-60.

Learning Objectives:

- Describe the currently recommended approach and evidence base for use of antiplatelet and anticoagulant therapies in patients with acute coronary syndrome (ACS).
- Develop recommendations for the use of antithrombotic therapy in patients with acute coronary syndrome (ACS).

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Wilding JPH, Batterham RL, Calanna S et al for the STEP 1 Study Group. Once-weekly semaglutide in adults with overweight or obesity. *N Engl J Med.* 2021; 384:989-1002.

Learning Objectives:

- Describe the STEP 1 study by Wilding and colleagues of semaglutide as an adjunct to lifestyle intervention for overweight or obese adults without diabetes mellitus.
- Develop recommendations for the use of subcutaneous semaglutide as an adjunct to lifestyle intervention in adults with overweight or obesity without diabetes mellitus.

Wadden TA, Bailey TS, Billings LK et al. Effect of subcutaneous semaglutide vs placebo as an adjunct to intensive behavioral therapy on body weight in adults with overweight or obesity: the STEP 3 randomized clinical trial. *JAMA.* 2021; 325:1403-13.

Learning Objectives:

- Describe the STEP 3 study by Wadden and colleagues of semaglutide as an adjunct to intensive behavioral therapy with an initial low-calorie diet for patients with overweight or obesity.
- Develop recommendations for the use of subcutaneous semaglutide as an adjunct to behavioral therapy, dietary intervention, and other lifestyle modifications in adults with overweight or obesity without diabetes mellitus.

Rubino D, Abrahamsson N, Davies M et al. Effect of continued weekly subcutaneous semaglutide vs placebo on weight loss maintenance in adults with overweight or obesity: the STEP 4 randomized clinical trial. *JAMA.* 2021; 325:1414-25.

Learning Objectives:

- Describe the STEP 4 study by Rubino and colleagues of the long-term use of subcutaneous semaglutide as an adjunct to lifestyle intervention for weight loss maintenance in overweight or obese adults without diabetes mellitus.
- Develop recommendations for the long-term use of subcutaneous semaglutide as an adjunct to lifestyle intervention for weight loss maintenance in overweight or obese adults without diabetes mellitus.

Lewis G, Marston L, Duffy L et al. Maintenance or discontinuation of antidepressants in primary care. *N Engl J Med.* 2021; 385:1257-67. **IMPORTANT: Information contained in the Supplement is also assessed.**

Learning Objectives:

- Describe the Antidepressants to Prevent Relapse in Depression (ANTLER) trial by Lewis and colleagues.
- Develop recommendations for the duration of antidepressant therapy in primary care patients with a long history of depressive episodes, antidepressant use, or both.

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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.

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

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

ACCP and ASHP collaborate on ambulatory care activities.