



**A Unique Systems-Based Clinical Review Created  
By One of the leading Physician Assistant Programs in the U.S.**

**Earn up to 120 Hours of AAPA Category 1 CME credits!**

Sponsored by Emory University School of Medicine  
Accredited by the American Academy of Physician Assistants

What's included in this document:

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- Detailed data sheet describing all of the product features (there are many!)

Continually updated, the Emory Clinical Systems Review program includes something for all advanced clinical practitioners including video lectures, practice quizzes and questions, self-assessment CME exam, study pearls and more.

- *Sample slides from Cardiology module*

Many of the clinical subject modules include accompanying slide decks with rich interpretive and visual information. Included in this packet are sample Cardiology slides taken from the actual course. The full Cardiology deck contains 75 slides!

- *GI Study Pearls*

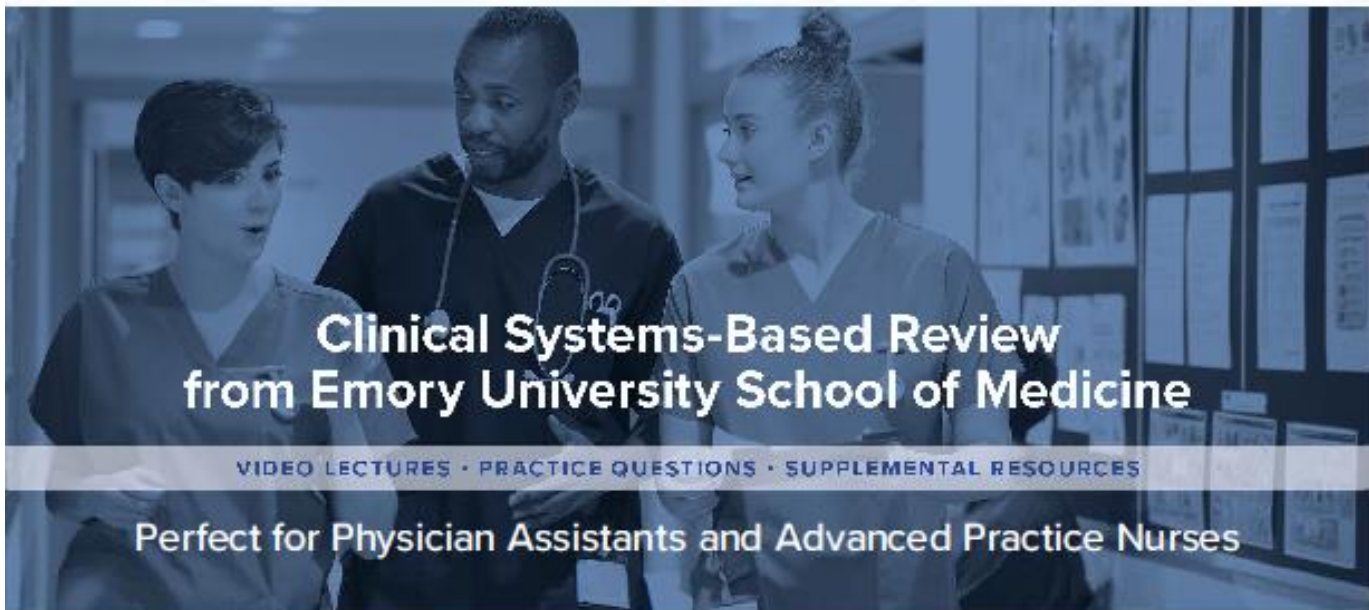
Many of the clinical subjects covered include special study pearls, helping you to focus on what's important. Enclosed are the study pearls from the GI module.

- *Sample links to Medscape articles for further learning*

Many of the modules also include a special section featuring links to additional free related resources from Medscape. We have included the supplemental Cardiology Medscape list for you to see for yourself.

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**Complete this program to build your clinical confidence**



## Clinical Systems-Based Review from Emory University School of Medicine

VIDEO LECTURES · PRACTICE QUESTIONS · SUPPLEMENTAL RESOURCES

Perfect for Physician Assistants and Advanced Practice Nurses

### Save Time, Money, and Stress for CME, Board Review or Both!

The Emory Review Program, now in its 31st year, consists of 48 hours of lectures and supplemental materials to refresh the learner's knowledge on a wide range of core medical problems and content. To benefit from this program, participants should have a broad base of primary care knowledge. Perfect for PAs and Advanced Practice Nurses including Family Nurse Practitioners.

#### PRODUCT FEATURES

- 48 hours of recorded lectures and 500 self assessment questions based on lecture content
- Digital syllabus with notes
- Exam Master practice tests
- Online access to slide decks, PDF handouts, and study pearls
- 100-Question CME exam
- Includes 10 hours of pharmacology instruction
- Covers 11 body systems and special topics

#### EARN CME CREDITS

- 80 hours of CAT 1 Self Assessment hours!
- ANCC CE Eligible\*
- AANP CE Eligible\*
- Equates to 120 CAT 1 hours when logging with the NCCPA

\*Contact your credentialing authority for verification

\*CME requires completion and passing of CME exams

#### PROGRAM COURSES

- Cardiology
- Renal & Genitourinary System
- Pulmonary
- Gastrointestinal System/ Nutrition
- Musculoskeletal System
- Eye, Ear, Nose & Throat
- Neurology
- Endocrine/Lipids/Diabetes
- Reproductive OB/GYN
- Infectious Diseases
- Psychiatry
- Dermatology
- Hematology
- Pain Management
- Pediatrics
- Emergency Medicine
- Professional Issues
- Board Review Skills Review

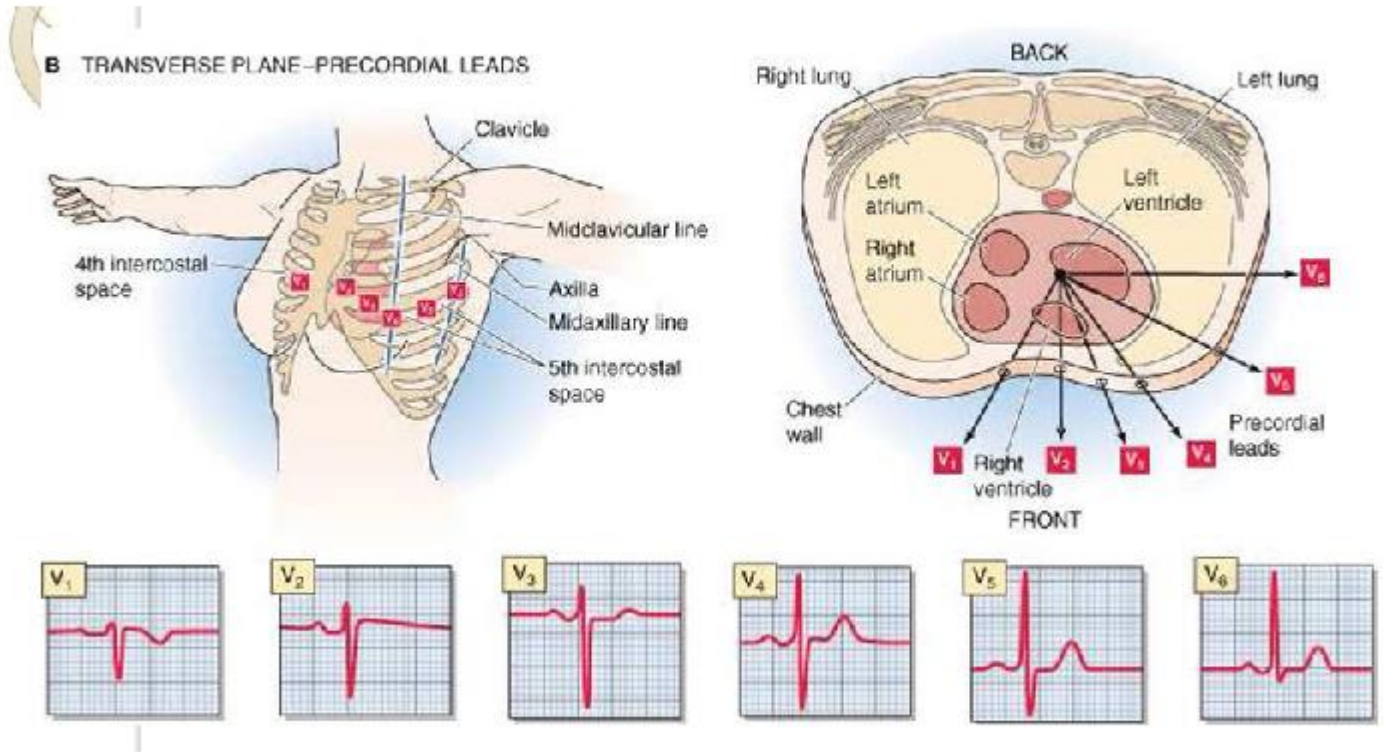
#### NEW FEATURES

- 500 quiz questions based on video lectures and 100 question CME test
- 96 downloadable videos in 20-30 minute segments
- Module certificates provided after completion of each
- Continually updating content



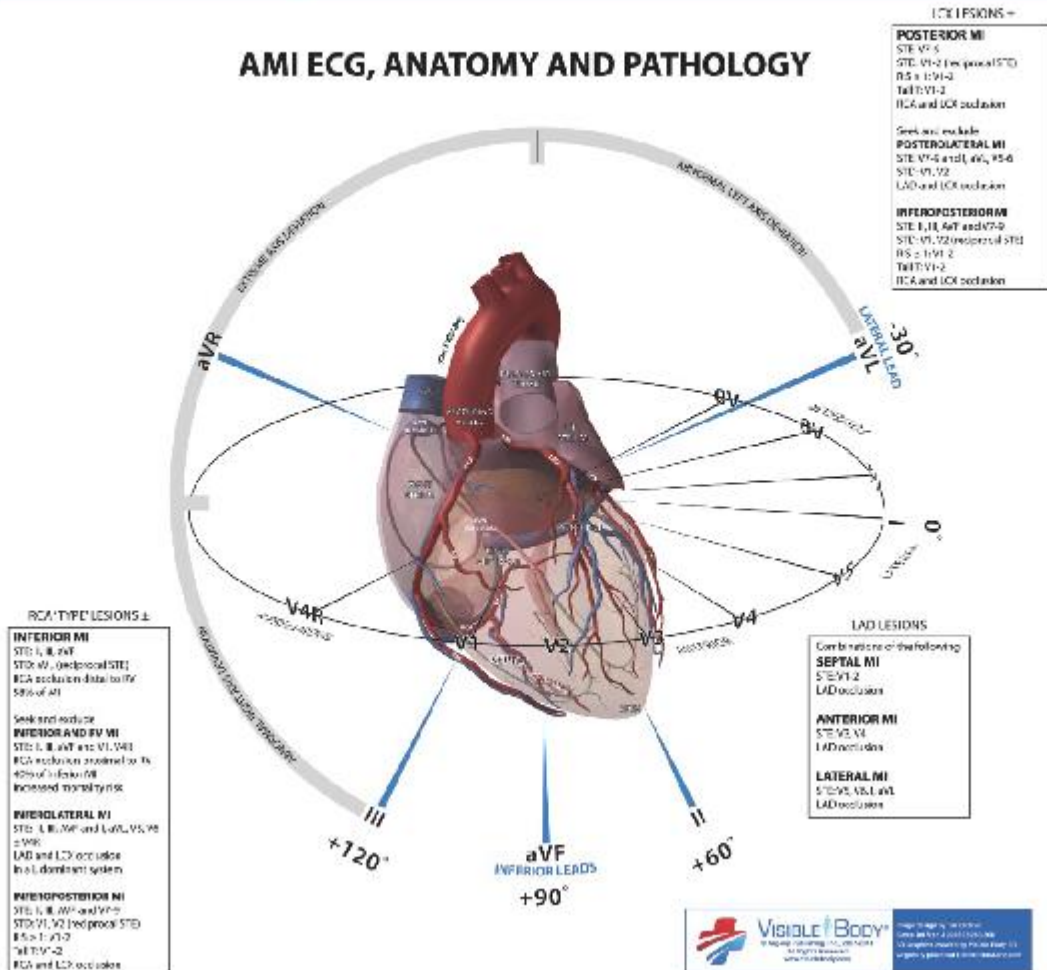
**Institutional Licensing Plans Available**  
For more information, contact Jim Pearson: [jpearson@exammaster.com](mailto:jpearson@exammaster.com)

# Precordial Leads



# 360 View of the Heart

## AMI ECG, ANATOMY AND PATHOLOGY



## GI Study Pearls

1. Peptic ulcer disease - epigastric pain with variable relationship to meals Characterized by rhythmicity and periodicity. May have no antecedent complaint. Complications - "coffee grounds" emesis, melena, hematochezia
2. Malabsorption diseases - diarrhea, steatorrhea, weight loss, vitamin deficiency
3. Inflammatory bowel disease -  
Crohn's colitis, full thickness, may occur mouth to anus, insidious onset, often in RLQ, can have fistulas  
Ulcerative colitis, limited to colon, bloody diarrhea
4. Diverticulitis - acute abdominal pain and fever, LLQ tenderness and mass, leukocytosis
5. Colorectal Cancer - signs dependent on tumor location, often late findings, screening saves lives, fecal globin, change in bowel habit, iron deficient anemia -check ferritin.
6. Diarrhea - check for c. difficile if associated with prior antibiotic use  
Acute - less than 2-3 weeks, generally self limiting  
Non-inflammatory - watery, non-bloody, peri-umbilical symptoms  
Inflammatory - fever, bloody diarrhea, less volume, lower abdominal symptoms  
Alarm symptoms - severe illness, abdominal pain, > 6 bloody stools daily, immuno-compromised, age > 70  
Chronic - greater than 3 weeks  
Osmotic - stool volume decreases with fasting, increased osmotic gap  
Secretory - little change with fasting, normal osmotic gap  
Inflammatory - fevers, bleeding, abdominal pain  
Malabsorption - weight loss, high fecal fat  
Motility disorders - systemic diseases, intestinal surgery  
Chronic infections - parasites, AIDS, medication side effects  
Factitious diarrhea - laxative abuse, osmotic or secretory
7. Hepatitis - elevated transaminases, chronic is present for 6 months  
Viral A - self limiting, no chronic disease  
Viral B - exposure to blood or body fluids, acute and chronic, high incidence in Asian population, pregnancy = high risk, newborn with vaccination and HBIG in first 12 hours. Risk of hepatocellular carcinoma in non cirrhotic patient, flares will occur with immune suppression, monitor transaminase and viral count  
Viral C - exposure to blood, up to 85% chronic disease, monitor transaminases, treatment ~50% effective  
Autoimmune - usual young to middle age women, positive Anti Nuclear Antibodies, Smooth muscle antibodies (actin)
8. Alcoholic liver disease - chronic alcohol use 80g/d for men (2 drinks daily), 30-40g/d for women (1 drink daily), transaminase increased, AST / ALT ratio usually >1, fat usually found in liver
9. Primary Biliary Cirrhosis - often in middle age women, alkaline phosphatase increased, positive Anti Mitochondrial Antibody, characteristic liver biopsy.

10. Hemochromatosis - elevated iron saturation, serum ferritin, family history, associated with arthralgia, cirrhosis, enlarged heart, hypogonadism.
11. IBD
  - a. Crohn's affects the whole GI tract, transmural, loves the TI and has complications (strictures/fistulas)
  - b. Ulcerative colitis is limited to the colon and causes bloody diarrhea
12. Diverticulitis-LLQ pain, constipation or diarrhea, fever; CT is best test; Tx-cipro/flagyl or augmentin
13. H pylori and NSAIDs cause the majority of ulcers
  - a. Clarithromycin, Amoxicillin, PPI is first line for H pylori treatment
  - b. Substitute flagyl for amoxicillin if PCN allergy
14. Colorectal cancer presents with Fe+ deficiency anemia, change in bowel habits, rectal bleeding or no symptoms; location of tumor changes presentation; Screen patients @ 50, 45 in African Americans
15. Hepatitis
  - a. Hepatitis A-self limiting
  - b. Hepatitis B-exposure to blood or body fluids, <5% adults become chronic
    - c. Risk of HCC even if not cirrhotic
      - ii. Vaccinate! HBsAb – “Anti-HBs” is the only test that will be positive in a person who is vaccinated but not exposed to the virus
    - d. Hepatitis C-blood exposure Up to 85% before chronic; treat to SVR
- 16 Diarrhea
  - a. if acute consider infectious cause and think about risk factors (camping, lake water, daycare); If ABX or hospitalization think C. Diff
  - b. if chronic—think malabsorption (pancreatitis, celiac disease) , inflammatory (IBD), functional/IBS
- 17 Dysphagia
  - a. motility disorder (achalasia): liquid and solid dysphagia
  - b. GERD/esophagitis
  - c. Stricture: meats/potatoes
  - d. EOE: young male with asthma and allergies
  - e. Cancer
    - i. Adenocarcinoma is from Barrett's and in the lower esophagus
    - ii. SCC is related to alcohol and smoking and is in the mid esophagus
- 18 Painless jaundice and weight loss—think Pancreatic CA; imaging with CT or MRI; elevated TB and Alk Phos; patient >50
- 19 Cholelithiasis causes biliary colic episodes <4 hours, negative exam vs acute cholecystitis with symptoms >4 hours, ill appearing, positive Murphy's sign
- 20 Appendicitis: 2nd and 3rd decades; periumbilical pain becomes RLQ with N/V; CT scan is best test
  - a. McBurney's point tenderness: maximal tenderness at 1.5 to 2 inches from the anterior superior iliac spine (ASIS) on a straight line from the ASIS to the umbilicus
  - b. Rovsing's sign: RLQ pain with palpation of the LLQ
  - c. Psoas sign: RLQ pain with passive right hip extension

d. Obturator sign: When the clinician flexes the patient's right hip and knee followed by internal rotation of the right hip, this elicits RLQ pain

21. Iron deficiency anemia is the most common nutrient deficiency in toddlers, teenage girls, and women of child-bearing age

22. If the gut works, use it! (enteral over parenteral nutrition)

23. Fat soluble vitamins: K(ool)-ADE

# Special Links to Medscape Articles

## Cardiovascular System

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### **Conduction disorders/Dysrhythmias - Dysrhythmia Video**

- [Atrial fibrillation/flutter](#)
  - [Atrioventricular block](#)
  - [Bundle branch block left right](#)
  - [Paroxysmal supraventricular tachycardia](#)
  - [Premature beats](#)
  - [Sick sinus syndrome](#)
  - [Sinus arrhythmia](#)
  - [Torsades de pointes](#)
  - [Ventricular fibrillation](#)
  - [Ventricular tachycardia](#)
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### **Valvular disorders - Valvular Issues Video**

- [Aortic Stenosis/Insufficiency](#)
- [Mitral Stenosis/Insufficiency](#)
- [Pulmonary Stenosis/Insufficiency](#)
- [Tricuspid Stenosis/Insufficiency](#)

### **Congenital heart disease**

- [Atrial septal defect](#)
  - [Coarctation of aorta](#)
  - [Patent ductus arteriosus](#)
  - [Tetralogy of Fallot](#)
  - [Ventricular septal defect](#)
- 

### **Coronary artery disease - Cardiology Common Diseases Video**

- [Acute myocardial infarction](#)
  - o *Non-ST-segment elevation*
  - o *ST-segment elevation*
- [Angina pectoris](#)
  - o *Prinzmetal variant*
  - o *Stable*
  - o *Unstable*
- [Heart failure](#)



## **Vascular disease**

- [Aortic aneurysm/dissection](#)
- [Arterial embolism/thrombosis](#)
- [Arteriovenous malformation](#)
- [Giant cell arteritis](#)
- [Peripheral artery disease](#)
- [Phlebitis/thrombophlebitis](#)
- [Varicose veins](#)
- [Venous insufficiency](#)
- [Venous thrombosis](#)

## **Traumatic, infectious, and inflammatory heart conditions**

- [Acute and subacute bacterial endocarditis](#)
- [Acute pericarditis](#)
- [Cardiac tamponade](#)
- [Pericardial effusion](#)

## **Cardiomyopathy**

- [Dilated](#)
- [Hypertrophic](#)
- [Restrictive](#)

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## **Hypertension - Diabetes/Hypertension/Lipids Video**

- [Essential hypertension](#)
- [Hypertensive emergencies](#)
- [Secondary hypertension](#)

## **Lipid disorders**

- [Hypercholesterolemia](#)
- [Hypertriglyceridemia](#)

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## **Hypotension \_ Emergency Medicine Video**

- [Cardiogenic shock](#)
- [Orthostatic hypotension](#)
- [Vasovagal hypotension](#)

# CME 100-Question Assessment Exam Blueprint/Topics

<b>I. Infectious Diseases</b>	B. Knee injury
	C. Shoulder injury
A. Lyme disease	D. Spine
B. Syphilis	E. Osteoarthritis
C. UTI	F. Fracture
	G. Shoulder
<b>II. Dermatology</b>	H. Osteomyelitis
	I. Carpal Tunnel
A. dermatitis	A. Shoulder injury
B. Molluscum	
C. Psoriasis	<b>VII. Genitourinary</b>
<b>III. Psychiatry</b>	A. stones
	B. infection
A. eating disorder	C. torsion
B. Medication	D. cancer
C. anxiety disorder	E. scrotal pain
D. obsessive compulsive disorder	F. obstruction
E. substance abuse	G. BPH
	H. hematuria
<b>IV. GI</b>	I. prostate
A. Acute Diarrhea	<b>VIII. OB-GYN</b>
B. Appendicitis	
C. Colon Cancer	A. Vaginal bleeding
D. Chronic Diarrhea	B. Pregnancy
E. Bowel Obstruction	C. Amenorrhea
F. RUQ Pain	D. Cervical Screening
G. Zollinger Ellison Syndrome	E. Post Partum
H. Acute abdomen	
I. RLQ pain	<b>IX. Endocrine</b>
J. Peptic Ulcers	
	A. Diabetes
<b>V. Cardiovascular</b>	B. Thyroid
	C. Adrenal
A. Valvular Disease	D. Calcium
B. Chest Pain	E. Statin
C. CAD diagnosis	A. Thyroid
D. Bundle Branch Block	
E. Aortic Stenosis	<b>X. Neurology</b>
F. LBBB	
G. Mitral Stenosis	A. Vertigo
H. Giant Cell Arteritis	B. Sciatica
I. ACS	C. Seizures
J. Pericarditis	D. Stroke
K. Pharmacology	E. Meningitis
L. Ventricular hypertrophy	
M. CHF	<b>XI. Hematology</b>
N. PAD	
O. Cardiac conduction abnormalities	A. Anemia
P. Aneurysm	B. Bleeding
Q. EKG	C. Myeloma
<b>VI. Ortho</b>	<b>XII. Eye</b>
A. Elbow pain	A. visual loss