

PULMONARY I

Learning Objectives for Chronic Obstructive Pulmonary Disease

1. Recommend interventions based on the risk factors, status, and progression of chronic obstructive pulmonary disease (COPD).
2. Develop and justify optimal therapy based on the current understanding of the pathophysiology of COPD and available clinical evidence.
3. Develop a pharmacotherapy care plan for exacerbations and progressive symptoms of COPD.
4. Design appropriate quality indicators for treatment of COPD.
5. Devise a pharmacotherapy care plan for tobacco cessation.

Learning Objectives for Update on Guidelines and Controversies in the Treatment of Asthma

1. Given specific patient data, design a therapeutic plan consistent with the new National Institutes of Health guidelines for a patient with severe acute asthma.
2. Given specific patient data, design a therapeutic plan consistent with the new National Institutes of Health guidelines for a patient with chronic asthma.
3. Summarize the rationale for using specific drugs and delivery systems for a hospital-wide patient care path for severe acute asthma.
4. Argue why specific anti-asthma drugs should be available for the treatment of chronic asthma.
5. Justify a pharmacist-based chronic asthma clinic for improving patient outcomes.

Learning Objectives for Sleep-Related Disorders

1. Distinguish patients who are at risk for or who have undiagnosed sleep disorders.
2. Evaluate the impact sleep disorders may have on patient health, quality of life, and severity and treatment of comorbid conditions and diseases.
3. Assess patient sleep complaints, conduct sleep histories, evaluate sleep quality, and quantify daytime sleepiness to select and optimize pharmacotherapy for insomnia and sleep apnea.
4. Design a treatment plan that optimizes non-pharmacological and pharmacological therapies for management of insomnia and sleep apnea.
5. Analyze the link between sleep apnea and cardiovascular morbidity and mortality.
6. Diagnose and devise an appropriate treatment plan for hypertension, heart failure, stroke, arrhythmias, and metabolic syndrome in patients with sleep apnea.