

## New Pharmacotherapies for Type 2 Diabetes

1. Compare and contrast the differences between the drug therapy recommendations of several of the latest and leading diabetes guidelines.
2. Assess the differences in incretin-based therapies for the treatment of type 2 diabetes mellitus (T2DM) and tell how they compare with other agents to treat hyperglycemia.
3. Delineate the role and place in therapy of bromocriptine and colesevelam in the treatment of T2DM.
4. Convert a patient with T2DM with significant hyperglycemia to an insulin-only drug regimen.
5. Evaluate the latest noncardiac precautions, contraindications, or warnings with agents used in the treatment of hyperglycemia.

## Cardiovascular Complications in Patients with Diabetes

1. Evaluate the risk of cardiovascular complications in a patient with diabetes.
2. Design an appropriate treatment plan for patients with diabetes and risk factors (e.g., hypertension and dyslipidemia) for cardiovascular disease (CVD).
3. Assess the role of antiplatelet therapy in primary prevention of CVD in patients with diabetes.
4. Design a treatment plan for patients with diabetes and known CVD.
5. Assess the impact of glycemic control and of the drugs used to achieve it on the risk of CVD.

## Osteoporosis

1. Distinguish new physiologic and pathophysiologic pathways of bone health and their influence on the development of new pharmacotherapy targets.
2. Apply the results of dual-energy x-ray absorptiometry and the fracture risk assessment tool to the assessment of bone status and evaluation for pharmacotherapy.
3. Design an appropriate prevention or treatment plan, including a monitoring scheme, for patients with low bone mass or osteoporosis.
4. Develop a pharmacotherapy plan to prevent or treat glucocorticoid-induced osteoporosis.
5. Identify and resolve potential risks or adverse events associated with osteoporosis pharmacotherapy.