



To assist us in evaluating the effectiveness of this activity and to make recommendations for future educational offerings, please take a few minutes to complete the post-test and evaluation form. Penn State College of Medicine and PVI, PeerView Institute for Medical Education, respect and appreciate your opinions. You may return this post-test and evaluation form on site to a PeerView staff member or via mail, fax, or e-mail. There are no prerequisites and there is no fee to participate in this activity or to receive CME credit.

In order to receive a Statement of Credit, you must attend the live activity and complete the post-test and evaluation form in their entirety.

Mail to: Attn: Jerilyn Hansen
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174 W. 4th Street, Suite 182
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Fax to: 877-572-0781
E-mail to: info@peerview.com
Online: www.peerviewpress.com/SevereAsthma

CME Post-Test: Please write your answers in the answer key below.

1. Which of the following cytokines is a treatment target for patients with eosinophilic asthma?
 - a. IL-5
 - b. IL-6
 - c. IL-8
 - d. IL-17
2. Which of the following statements is true regarding the use of mepolizumab in patients with eosinophilic asthma?
 - a. It is approved only for adult patients.
 - b. It improved lung function, quality of life, and exacerbation rates.
 - c. It has been shown to improve lung function but not exacerbation rates.
 - d. It improves exacerbation rates but has not been shown to have an oral steroid-sparing effect.
3. Which of the following statements is true regarding the use of reslizumab in patients with eosinophilic asthma?
 - a. It is FDA approved for patients aged 12 years and older.
 - b. It improved lung function but not exacerbation rates.
 - c. It improved lung function and exacerbation rates.
 - d. It is administered subcutaneously.
4. Which of the following patients would most likely be classified as SARP Cluster 5, severe fixed airflow asthma?
 - a. Early onset, decreased FEV₁, but reversible to near normal with bronchodilators, high symptom burden
 - b. Decreased FEV₁, that is less reversible with bronchodilators; COPD similarities
 - c. Decreased FEV₁, that is reversible to near normal with bronchodilators, atopic, oral steroid-dependent
 - d. Early onset, atopic, normal lung function
5. A patient with allergic eosinophilic asthma is an appropriate candidate for either anti-IgE or anti-IL-5 therapy. How would you proceed?
 - a. Firmly recommend omalizumab, as it should be tried first in patients with both allergic and eosinophilic asthma.
 - b. Firmly recommend mepolizumab, as it should be tried first in patients with both allergic and eosinophilic asthma.
 - c. Firmly recommend reslizumab, as it should be tried first in patients with both allergic and eosinophilic asthma.
 - d. Educate the patient about the options and decide together on the best course of action.

Post-Test Answer Key: Please write your answers to the 5 CME questions in this key.

1. _____ 2. _____ 3. _____ 4. _____
5. _____

CME Activity Evaluation Form

1. To what extent have the information and practice strategies discussed in this activity improved your ability to competently manage patients with asthma?

Not at all				Very much	I do not manage asthma patients directly
1	2	3	4	5	N/A

2. After participating in this activity, how often do you plan to do the following in the care of your patients with asthma?

	Never	Infrequently	Sometimes	Frequently	Always	I do not manage asthma patients directly
Classify patients according to phenotype	1	2	3	4	5	N/A
Select treatment based on patient phenotype	1	2	3	4	5	N/A
Involve patients in decisions regarding their care	1	2	3	4	5	N/A

3. Please indicate your level of agreement with the following statements:

	Strongly disagree				Strongly agree	
The content was presented in a fair and unbiased manner.	1	2	3	4	5	
The content was evidence-based.	1	2	3	4	5	
The content was relevant to my practice.	1	2	3	4	5	
The format of this activity was useful and conducive to learning.	1	2	3	4	5	
The faculty demonstrated expertise in subject matter.	1	2	3	4	5	
The interactive questions positively impacted my learning.	1	2	3	4	5	

4. As a result of your participation in this activity, please indicate your ability to meet each of the stated educational objectives.

	Not able to meet the objective after participating			Very able to meet the objective after participating		
Discuss the pathogenesis of severe asthma in the context of features that represent targets for novel biologic therapies	1	2	3	4	5	
Identify targeted biologic treatments for severe asthma in terms of their mechanism of action, efficacy, and safety	1	2	3	4	5	
Employ strategies to phenotype patients with severe asthma in order to select the most appropriate treatment	1	2	3	4	5	
Apply approaches to communicate with severe asthma patients regarding unique aspects of their disease and the management plan	1	2	3	4	5	

5. Please indicate the likelihood of the following statements:

	Not at all likely				Very likely
I will make changes to my practice after participating in this activity.	1	2	3	4	5
Practice changes I make based on this activity will improve my patients' outcomes.	1	2	3	4	5
I would participate in future activities on this topic presented in a similar format.	1	2	3	4	5
I would recommend this activity to my colleagues.	1	2	3	4	5

6. Which of the following barriers or challenges that you encounter in your care of patients with asthma will this activity help you overcome? Indicate all that apply.

- ☐ Engaging patients and caregivers in shared decision making
 ☐ Coordinating care with interdisciplinary team
- ☐ Patient adherence
 ☐ Decision making in the presence of conflicting evidence
- ☐ Lack of training/experience with this specific topic
 ☐ Cost/Reimbursement/Therapy Approval Status
- ☐ Other (please specify): Detailed feedback is encouraged and appreciated _____
- ☐ None; I do not encounter barriers in the care of these patients

This CME activity is jointly provided by Penn State College of Medicine and PVI, PeerView Institute for Medical Education.

Request for Credit

Physicians: Please complete the following:

This live activity has been certified for a maximum of 1.0 *AMA PRA Category 1 Credit™*. Physicians should only claim credit commensurate with the extent of their participation in the activity (15 minutes = 0.25 credit).

I certify my actual time spent to complete this live activity to be:

- ☐ I participated in the entire activity and claim 1.0 *AMA PRA Category 1 Credit™*
☐ I participated in part of the activity and claim ____ *AMA PRA Category 1 Credit™*

Contact Information (*required)

*First Name:	*Last Name:
*Degree:	Specialty:
*Address:	
*City:	*State/Province:
*ZIP/Postal Code:	*Country:
Phone Number:	Fax Number:
*E-mail (required for electronic copy of Statement of Credit):	
NPI Number:	

- ☐ I would like to receive e-mail alerts about upcoming PeerView Press educational activities.



Attendance Roster

Instructor:

Matthew Gordon, M.D.

Credits: 1.00

☒ Direct Sponsored

☐ Jointly Sponsored

Date:

☒ Inter-professional ☐ Single Discipline

"Targeted Therapies for Severe
Asthma: Picking the Right
Treatment for the Right Patient"

Please Check One:

☐ St. Vincent's Birmingham

☐ St. Vincent's Blount

☐ St. Vincent's Chilton

☐ St. Vincent's East

☐ St. Vincent's St. Clair

☐ St. Vincent's One Nineteen

☐ External

☐ Other:

Name (Please Print)	Hospital/Ministry/ Business	(Pharmacy) DOB & NABP #	Check That Apply
			<input type="checkbox"/> MD <input type="checkbox"/> DO <input type="checkbox"/> NP <input type="checkbox"/> PA <input type="checkbox"/> RN <input type="checkbox"/> Pharmacist <input type="checkbox"/> RPh <input type="checkbox"/> Pharmacy Tech <input type="checkbox"/> OT <input type="checkbox"/> PT <input type="checkbox"/> Social Worker <input type="checkbox"/> Student <input type="checkbox"/> Other
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Physicians: St. Vincent's Health System is accredited by the Medical Association of the State of Alabama to provide continuing medical education for physicians. Designation Statement: The St. Vincent's Health System designates this live activity for a maximum of 1.0 *AMA PRA Category 1.00 Credit(s)*[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Nurse: Ascension Health is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. Provider Number: P0340. This activity is approved for 1.0 Contact Hours continuing education.

Pharmacists: The St. Vincent's Health System is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. Completion of this knowledge-based activity provides for 1.0 contact hour (0.1 CEU) of continuing pharmacy education credit.

Faculty/Course Director/Planners: STVHS has selected all faculty participating in this activity. It is the policy of STVHS that all CME/CE planning committees, faculty, authors, editors, and staff disclose relationships with commercial interests upon nomination or invitation of participation. Disclosure documents are reviewed for potential conflicts of interest and if relevant, they are resolved prior to confirmation of participation. Only those participants who have no conflict of interest or who agreed to an identified resolution process prior to their participation were involved in this activity.

Please scan back for credit to: lisa.davis2@ascension.org (Info must be completely filled out for credit)

Fax: (205) 838-3518