



## **INTERNAL MEDICINE FOR PRIMARY CARE: GERIATRICS/INFECTIOUS DISEASES/MEN'S UROLOGY**

**San Diego, CA - Hotel del Coronado  
January 23 - 25, 2026**

**Friday, January 23, 2026**

**7:00 am**

**Check-In**

**7:30 am - 8:30 am - Infectious Diseases**

**Respiratory Tract Infections**

Discussion highlighting critical points regarding the diagnosis and management of pneumonia and bronchitis – with a focus on the impact of multidrug resistant pathogens

**8:30 am - 9:30 am - Infectious Diseases**

**Gastrointestinal Infections & Clostridioides Difficile**

Presentation on important enteric pathogens and their recognition, diagnosis and management; special emphasis on clostridioides difficile colitis and related updates from the ID and infection control literature

**9:30 am - 9:40 am**

**Coffee Break**

**9:40 am - 10:40 am - Infectious Diseases**

**Skin & Soft Tissue Infections**

Presentation on important skin and soft-tissue infections and their prompt recognition, emphasizing evaluation and management strategies

**10:40 am - 11:40 am - Men's Urology**

**Androgen Replacement and Sexual Function**

Treatment algorithm and safety profiles for the treatment of erectile dysfunction; testosterone supplementation for the treatment of ED or hypogonadism

**11:40 am - 12:40 pm - Men's Urology**

**Sexually Transmitted Infections in Men**

Presenting symptoms, lesions, latencies, diagnostic work-ups and therapies of the common sexually transmitted diseases

**12:40 pm**

**Session Adjourns**

**Saturday, January 24, 2026**

**7:00 am**

**Arrival**

**7:30 am - 8:30 am - Men's Urology**

**Benign Male Genitourinary Conditions**

Appropriate primary medical management of lower urinary tract symptoms (LUTS) (also known as BPH) as well as identification of patients with complex or refractory cases that warrant referral; diagnosis and treatment of epididymitis, testicular pain, prostatitis and other benign findings

**8:30 am - 9:30 am - Men's Urology**

**Male Malignancies (Prostate & Testicular)**

Biology and treatment options using current medical technology of prostate cancer; evaluation and treatment of testicular cancer and long-term ramifications after cure

**9:30 am - 9:40 am**

**Coffee Break**

**9:40 am - 10:40 am - Infectious Diseases**

**Immunizations**

Presentation on key vaccine preventable diseases and their presentations with an emphasis on the latest recommendations including newest schedules, safety and efficacy information

**10:40 am - 11:40 am - Geriatrics**

**Approach to the Geriatric Patient**

The demographics of aging and the physiologic changes in the elderly patient; Medication use in the elderly including changes in age-related pharmacokinetics and pharmacodynamics and medication adherence; Review of risky medications often used in elderly patients

**11:40 am - 12:40 pm - Geriatrics**

**Controversies in the Management of Hypertension in Older Adults**

Best evidence for treatment goals for hypertension in diabetics and those with previous stroke; Controversial evidence for the various guidelines for diagnosing and treating hypertension in older adults; Best evidence-based medications for hypertension

**12:40 pm**

**Session Adjourns**

**Sunday, January 25, 2026**

**7:00 am**

**Arrival**

**7:30 am - 8:30 am - Geriatrics**

**Alzheimer's & Other Dementias**

Review of normal age-related changes in cognitive function as well as disorders of memory and cognition as part of dementing illness; Mental status exams, including their limitations in evaluating memory; Various types of dementia and the importance of an accurate diagnosis; Current treatment options for various kinds of dementia; Potentially reversible dementias; The responsibilities of healthcare providers in managing patients with dementia

**8:30 am - 9:30 am - Geriatrics**

**Managing Behavior Problems in Dementia Patients**

Review of common behavior disorders often seen in patients with dementia; Behavioral techniques which have shown to be effective in managing some of the behavior disorders in patients with Alzheimer's and other dementias, focusing on the management of these patients without the use of psychotropic medications; Examples of behavior disturbances along with the behavior management technique which was effective in managing the patient with the behavior problem; Review of the potential adverse effects of the psychotropic medications usually used to manage behavior

**9:30 am**

**Conference Adjourns**

### Target Audience

This program is targeted to office-based primary care providers and other health professionals with updates in primary care medicine

### Learning Objectives

Upon completion of this program, participants should be better able to:

- List common causative pathogens for various respiratory tract infections
- Evaluate the severity of diarrhea and evaluate the need for treatment
- Review epidemiology and microbiology of skin and soft tissue infections (SSTI)
- Recommend appropriate immunizations based on patient specific risk factors
- Discuss medical management of male sexual health
- Evaluate and manage sexually-transmitted infections in men
- Differentiate between benign prostate conditions and prostate cancers
- Discuss the biology and screening, and treatment options of prostate and testicular cancer
- Utilize a comprehensive geriatric assessment to identify potential issues in the elderly patient
- Evaluate hypertension in elderly patients and recommend appropriate treatment based on individual risk factors
- Diagnose and treat cognitive impairment, dementias, and Alzheimer's disease
- Discuss strategies for the management of difficult behaviors in patients with dementia without the use of psychotropic medications

### **Disclosure of Relevant Financial Relationships**

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## Accreditation Statements

### Joint Accreditation for Interprofessional Continuing Education



JOINTLY ACCREDITED PROVIDER™  
INTERPROFESSIONAL CONTINUING EDUCATION

In support of improving patient care, Medical Education Resources is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

This activity was planned by and for the healthcare team, and learners will receive 12 Interprofessional Continuing Education (IPCE) credits for learning and change.

### Physician Credit Designation

#### AMA PRA Category 1 Credits™

Medical Education Resources designates this live activity for a maximum of 12 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

### American Board of Internal Medicine MOC Recognition (ABIM)



Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to 12 (part II) MOC points in the American Board of Internal Medicine's (ABIM) Maintenance of Certification (MOC) program. Participants will earn MOC points equivalent to the amount of CME credits claimed for the activity. It is the CME activity provider's responsibility to submit participant completion information to ACCME for the purpose of granting ABIM MOC credit.

### American Academy of Family Physicians (AAFP)

AAFP has reviewed Internal Medicine for Primary Care: Geri/ID/Men's Uro and deemed it acceptable for up to 12.00 Live AAFP Prescribed credit(s). Term of approval is from 1/23/2026 to 1/25/2026. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

### American Osteopathic Association (AOA)

These programs are approved for 12 hours in Category 2-A by the American Osteopathic Association.

### American College of Emergency Physicians (ACEP)

This program is approved by the American College of Emergency Physicians for a maximum of 12 hours of ACEP Category I credit.

### Canadian Physicians

The American Academy of Family Physicians (AAFP) and the College of Family Physicians of Canada (CFPC) have a bilateral reciprocal certification agreement whereby: CME/CPD activities held across the Canada - U.S. border are certified according to the nationality of the primary target audiences regardless of where the providers are located. The activities will be reviewed according to

the criteria of the certifying organization.

### **Nursing Credit Designation**

#### **American Nurses Credentialing Center (ANCC)**

Medical Education Resources designates this live activity for a maximum of 12 ANCC nursing contact hours. Nurses will be awarded contact hours upon successful completion of the activity.

This activity is designated for 6.25 ANCC pharmacotherapeutic contact hours.

#### **American Academy of Nurse Practitioners (AANP)**

The American Academy of Nurse Practitioners (AANP) Certification Board recognizes and accepts continuing education (CE) contact hours from activities approved by AMA, ACCME, ANCC, AANP, AAFP and AACN.

#### **California Board of Registered Nursing**

Medical Education Resources is approved by the California Board of Registered Nursing, Provider Number 12299, for 12 contact hours.

### **Physician Associates Credit Designation**

#### **American Academy of Physician Associates (AAPA)**



Medical Education Resources has been authorized by the American Academy of PAs (AAPA) to award AAPA Category 1 CME credit for activities planned in accordance with AAPA CME Criteria. This activity is designated for 12 AAPA Category 1 CME credits. PAs should only claim credit commensurate with the extent of their participation.

### **Pharmacy Accreditation**

#### **Accreditation Council for Pharmacy Education (ACPE)**



Medical Education Resources (MER) designates this live continuing education activity for 12 contact hours (1.2 CEUs) of the Accreditation Council for Pharmacy Education.

Universal Program Number: JA0003680-0000-26-006-L01-P

Participants will be required to sign in at the start of the program and/or complete a program evaluation.

Credits will be uploaded into CPE Monitor within 60 days of the activity.

This activity is certified as Knowledge-based CPE.