**SPEAKER ABSTRACT TEMPLATE**

**CAPA ANNUAL CONFERENCE**

**SPEAKER NAME (INCLUDING CREDENTIALS):**

**PROFESSION: Physician Assistant**

 PA+  MD  Pharm  RN/NP  Other

**ORGANIZATION AFFILIATIONS:**

**CONTACT INFORMATION:**

**ADDRESS:**  **CITY:**

**PROVINCE/STATE:** **POSTAL CODE/ZIP:**

**EMAIL:** **TELEPHONE:**

**CHECKLIST: PROPOSAL SUBMISSION ITEMS (REQUIRED)**

 Complete Abstract Template  Complete Disclosure Form

 Learning Objectives (minimum of 3)  Consent to Share Presentation

 Alignment with CanMEDS-PA (role & description)

**TITLE OF PRESENTATION: Prurigo Nodularis – A Multidisciplinary Disease**

**LEARNING PRESENTATION STYLE: CPD ACTIVITY ACCREDITATION TYPE:**

 Lecture/Seminar+  Group Learning

 Workshop  Simulation Activity

**** Panel  Self-Assessment

 Debate

**LEARNING ENGAGEMENT TECHNIQUES:**

 Live Polling +  Question & Answer+

 Demonstration  Role Playing

 Discussion  Simulation

**EPA-PA ALIGNMENT:**

 EPA 1 Practices patient-focused, safe, ethical, professional, and culturally competent medical care across the healthcare continuum.

 EPA 2 Obtains histories and performs physical examinations, demonstrating the clinical judgement appropriate to the clinical situation.

 EPA 3 Formulates clinical questions and gathers required clinical evidence to advance patient care and communicates those results to the patient and medical team.

 EPA 4 Formulates and prioritizes comprehensive differential diagnoses.

 EPA 5 Develops and implements patient-centered, evidence-based treatment plans within the formalized physician, clinical team and caregiver relationship.

 EPA 6 Accurately documents the clinical encounter incorporating the patient's goals, caregiver goals, decision-making, and reports into the clinical record.

* EPA 7 Collaborates as a member of an inter-professional team in all aspects of patient care including transition of care responsibility.

 EPA 8 Recognizes a patient requiring immediate care, providing the appropriate management and seeking help as needed.

 EPA 9 Plans and performs procedures and therapies for the assessment and the medical management appropriate for general practice.

 EPA 10 Engages and educates patients on procedures, disease management, health promotion, wellness, and preventive medicine.

 EPA 11 Recognizes and advocates for the patient concerning cultural, community, and social needs in support of positive mental and physical wellness.

 EPA 12 Integrates continuing professional and patient quality improvement, lifelong learning, and scholarship.

**ABSTRACT (250 WORD MAXIMUM):**

Prurigo Nodularis (PN) is a chronic disorder of the skin. Patients with PR present to a to variety of medical professionals and it can be difficult to make an appropriate diagnosis and treatment plan. Considering the significant impact Prurigo Nodularis (PN) has on patients’ quality of life, it is critical for patients to receive a timely diagnosis and oftentimes can be difficult to treat. Furthermore, understanding the underlying pathogenesis is important to determine the optimal treatment approach. This presentation presents the pathogenesis of PN, the impact it has on patients’ quality of life, recommendations for its diagnostic workup, and treatment approaches and strategies to individualize therapy for patients with PN. PAs will be able to formulate an appropriate differential diagnosis and be able to treat this condition with confidence.

**LEARNING OBJECTIVES (MINIMUM OF THREE).**

At the conclusion of this session, the participant will be able to:

1. Understand the pathogenesis and clinical presentation of PN
2. Be able to identify a patient presenting with PN
3. Create a differential diagnosis for PN
4. Understand the standards of treatment and monitoring
5. Distinguish between appropriate treatment plans for patient with PN

**DISCLAIMER**

I hereby acknowledge that I have chosen to participate in the Canadian Association of Physician Assistants Annual Conference. Furthermore, I will cover the cost of my expenses incurred to attend the conference such as travel, accommodations, meals, etc. I will also not hold CAPA liable for any unforeseen circumstances that may cause additional expenses while attending the CAPA conference.

Name: Signature:

Date:

*\*If your presentation is selected you will be provided with a confirmation letter outlining pertinent information for speakers and will be asked to submit tentative slides by September. Please note that these slides can be modified however are required by this date for CAPA to apply for accreditation of your session.*