

Name of Recipient	Program Name	Program Description	Amount
University of	Recognizing and	Iron deficiency in patients with heart failure occurs	\$125,00
Cincinnati	Treating Iron	frequently but is often overlooked, and is increasingly being recognized as an important	
College of	Deficiency in	comorbidity as an independent predictor of poorer clinical outcomes even in the absence of anemia.	
Medicine	Patients with Heart	Many healthcare professionals are not appropriately screening, diagnosing, and treating iron deficiency in	
	Failure: Achieving	HF patients and may be reluctant to prescribe intravenous iron therapies despite their demonstrated	
	Better Outcomes	efficacy and safety. To ensure that clinicians are providing optimal care to patients with heart failure, we	
	and Quality of Life	propose the development of a novel, interactive, infographic-based educational platform, in which an	
		expert in heart failure will guide learners through the recognition and management of iron deficiency in patients with heart failure.	
Medscape, LLC	Exploring Iron	A Clinical Anthology features 3 interrelated aspects of a condition or topic that may be	\$227,596
•	Deficiency Anemia	resented as a text-based multi-article activity by 3 separate experts. As such, this format is	
	in Special	particularly ideal to explore expert perspectives on a complex topic. The Clinical Anthology	
	Populations	offers the opportunity to showcase different "editorial" voices through single or multiple	
		text-based formats within 1 activity. All articles launch simultaneously with a single set of	
		learning objectives. A video segment will be included as one of the articles.	
		Proposed Content	
		Interview 1 (Video segment):	
		Incidence of IDA	
		Treatment options in patients who fail oral therapy	
		Clinical profile of IV iron	
		Interview 2:	
		Special population in women's health- postpartum	
		• Team-based care	
		Incidence, mechanism, special considerations, treatment options	
		Interview 3:	
		Special population in women's health- Heavy menstrual bleeding and abnormal bleeding	
		Team-based care	
		Incidence, mechanism, special considerations, treatment options	



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Penn Medicine	11 th Penn Inflammator Bowel Disease Symposium Update and Future Directions	The 11th Penn Inflammatory Bowel Disease Symposium will highlight the advances in diagnosis and treatment of IBD. The program will include lectures by nationally and internationally recognized experts which will be followed by interactive panel discussions. A wide array of topics will be discussed including the pathophysiology of IBD, pharmacologic therapies and surgical interventions. Participants will receive a comprehensive overview of the latest available research and clinical information on evaluation and management of patients with IBD. This activity has been designed for gastroenterologists, gastrointestinal surgeons, GI fellows and residents, physician assistants, clinical nurse specialists, radiologists, pathologists, nutritionists and other health care professionals.	\$ 15,000
Pharmacy Times Continuing Education	The Impact and Management of Iron-Deficiency Anemia in Women's Health	Pharmacy Times Continuing Education proposes an accredited initiative entitled "The Impact and Management of Iron-Deficiency Anemia in Women's Health." The educational activity will be a 12-14 Page peer-reviewed in-book printed in Pharmacy Times in June 2019. This publication is distributed to 173,000 subscribers, which are all retail, community, and independent pharmacists. The in-book will be available as a digital article, available to over 166,000 monthly online users (retail, community, health-system, specialty, managed care pharmacists) at www.pharmacytimes.org for up to 1 year. The identified gaps indicate a need to educate pharmacists on the prevalence and impact of iron-deficiency anemia in women's health. Iron deficiency and iron deficiency anemia are highly prevalent among women throughout their lives. Women are particularly vulnerable to iron deficiency/iron deficiency anemia, including those with heavy menstrual bleeding and pregnant/postpartum women. Despite the high prevalence of iron deficiency/iron deficiency anemia in women, the condition is still underdiagnosed and therefore undertreated, with serious clinical consequences. Pharmacists have a role critical role in the management of iron deficiency and iron deficiency anemia by screening and providing education to patients about their risk of anemia and treatment options.	\$ 85,785



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Post Graduate	Advances in Iron	Iron deficiency (ID) affects up to one-third of the world's population and is particularly common in elderly	\$ 181,370
Institute for	Repletion Therapy	individuals and those with certain chronic diseases such as chronic kidney disease, and congestive heart	7 101,570
Medicine		failure (Drozd 2017). Many of those affected are unaware of ID and cannot recognize its symptoms	
Wicarchic	Of Iron Deficiency in	(Pratt 2016). For patients with heart failure (HF), ID is an independent predictor of outcomes and a major	
	Patients with Heart	contributor to exercise intolerance (Mordi 2018). At least half of all patients with HF have comorbid ID	
	Failure to Improve	regardless of age, sex, race, anemia, and left ventricular ejection fraction; yet, the condition is	
	Outcomes and Quality	under-recognized and untreated in most patients (Lam 2018; Von Haehling 2015). There is considerable	
	Of Life	interest in iron deficiency as an emerging therapeutic target after positive results from several clinical	
	Of Life	trials investigating intravenous iron treatment in HF patients. These trials- FAIR-HF, CONFIRM-HF and	
		EFFECTHF- showed statistically significantly beneficial effects of ferric carboxymaltose versus placebo or	
		standard of care, on symptoms, functional capacity and oxygen consumption (Anker 2009; Ponikowski	
		2014; van Veldhuisen 2017). New studies- AFFIRM-AHF, FAIR-HF2 and HEART-FID- have been initiated	
		to evaluate the effects of ferric carboxymaltose on morbidity and mortality outcomes (Mordi 2018).	
GHAAP	Gastroenterology and	The Chronic Liver Disease Foundation (CLDF) and Gi Health Foundation (GiHF) recognize the important	\$ 100,000
	Hepatology for	role nurse practitioners and physician assistants, herein referred to as advanced practice providers (APPs),	4 200,000
	Advanced Practice	play in the health care and management of patients with chronic liver disease (CLD) and gastrointestinal	
	Providers (GHAPP)	(GI) disorders, including, but not limited to, nonalcoholic fatty liver disease (NAFLD), nonalcoholic	
	A 2019 Educational	steatohepatitis (NASH), hepatitis B (HBV), hepatitis C (HCV), the complications of cirrhosis, gastroparesis,	
	Initiative	inflammatory bowel disease (IBD), irritable bowel syndrome (IBS), and iron deficiency anemia (IDA).	
		With an aging U.S. population and the growing shortage of physicians, APPs are becoming more important	
		in today's health care environment.	
		In response, the joint-providership of the Annenberg Center for Health Sciences at Eisenhower	
		(the Annenberg Center), CLDF and GiHF is excited to propose the 2019 Gastroenterology and Hepatology	
		Advanced Practice Providers (GHAPP) educational initiative. Educational content will be tailored	
		specifically for APPs and feature scientific information on emerging developments in the multidisciplinary	
		treatment of patients with GI disorders and CLD. The educational initiative will feature the 2nd Annual	
		GHAPP National Conference, a regional conference series, an on-demand presentation series and the	
		educational resources on GHAPP's portal. The initiative's total targeted reach is 2,300 APPs.	



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CEC	Creative Educational Concepts	Iron deficiency anemia is a prevalent condition with far-reaching consequences. Fortunately, recent revisions to treatment targets and a recommendation for novel approaches are helping shift and solidify the treatment and management paradigm in iron-deficiency anemia (IDA). As frontline clinicians with expertise across a multiplicity of women's health conditions, obstetricians and gynecologists are optimally placed within the healthcare team to ensure the provision of safe, effective, and evidence-based treatment approaches for female patients with IDA. Hence, the goal of this educational initiative is to equip obstetricians, gynecologists, and other women's health professionals with the latest published and emerging data related to prevalence, risk factors, and therapeutic strategies for IDA, with an emphasis on IV iron supplementation modalities, in an effort to improve outcomes for their patients. This important educational curriculum includes a live, one hour presentations at individual ACOG District Meetings held throughout the United States in the Fall of 2019. ACOG District Meetings ACOG has 12 districts and 98 sections that represent various geographical regions, countries, territories, and states in North and South America. Each district is led by a chair who serves on the Executive Board. Live, regional meetings are an optimal way to reach practitioners at the grassroots level. The interactive presentation will consist of 7 educational activities, conducted throughout the U.S., targeting OB/GYNs in a variety of ACOG District Meetings. Educational sessions at ACOG District Meetings are typically offered during meal times. Planning for this series will occur immediately upon grant approval with a targeted roll-out beginning August 2019. CEC Experience with Live Multimodal Meetings CEC has over ten years of proven success and expertise in coordination of speakers and content for multimodal, community-based meetings. These meetings are an excellent way to reach those clinicians that are truly "in the	\$ 212,000



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SABM – Society for the Advancement of Blood Management	Evaluation and Management of Iron Deficiency Anemia in Cardiac Surgery	Cardiac surgery is one of the leading causes of anemia due to severe pre-and-post operative anemia. Currently, there are no clear indications for the treatment for pre and post-op anemia in the cardiac surgery population. Additionally, studies have shown that iron deficiency anemia (IDA) with or without anemia, is an independent predictor of increased mortality and hospitalization. Several studies have also confirmed the adjusted negative effects of IDA on endurance and quality of life. IDA—not anemia, was associated with impaired health-related quality of life. IDA, not hemoglobin levels, were independently associated with submaximal exercise capacity. Therefore, normal hemoglobin levels do not exclude IDA. The development of a practical, evidence based algorithm for the treatment of IDA in the cardiac surgery population is a step forward to addressing this unmet need. SABM, a non-profit 501(c)(3), was founded in 2001 by healthcare providers, physicians and nurses who saw the need for a new way of thinking about transfusion as a therapy. SABM included thought leaders who promulgated the concept of patient blood management as the new standard of care. The SABM mission is broad, its foundation based on appropriate evidence-based transfusion guidelines, the management of anemia, optimization of coagulation and minimization of bleeding, and utilization of interdisciplinary blood conservation strategies. The goal is improved patient outcomes. Today, SABM is globally recognized as an educational resource for patient blood management. SABM provides public education, and also advances best practices to thousands of healthcare providers through continuing medical education programs and development of learning tools and evidence based clinical pathways.	77,000.00



2019 CONTINUING MEDICAL EDUCATON GRANTS

SABM – Societ
for the
Advancement
of Blood
Management

Support of the 2019 Annual Meeting Multi-Disciplinary Program

2019 Annual Meeting:

The goal of this multidisciplinary program is to educate and promote the improvement of patient outcomes using patient blood management (PBM). Participants will examine the current evidence in the use of blood and blood-related products, therapeutic techniques for clinical practice—including hemostasis, control of surgical bleeding and anemia management—and strategies to address administrative barriers and promote clinical practice improvements in the hospital setting. Networking professionals will be able to share insights about new educational tools and evidence based clinical pathways. Each year we strive to give the participants the most effective and current information with which to treat their patients. This is accomplished with nationally recognized speakers, live case demonstrations, simulation labs, poster presentations and panel discussions with Q & A.

55,000.00

SABM is a not-for-profit, multi-disciplinary professional society of physicians, nurses, and technicians with expertise in transfusion medicine and patient blood management. SABM is committed to excellence and is a leader in the field of patient blood management. SABM is grounded in scientific validation, evidence-based practices and focused on promoting the patients' best interest through effective and optimal patient blood management. We promote education and training to achieve change through a multidisciplinary approach to patient blood.

Our members recognize the benefits of effective patient blood management. SABM's goal is to work toward incorporating patient blood management modalities into clinical practice and help the public and medical communities to embrace the benefits of simple, safe and effective blood management practices.

SABM defines its mission to improve health outcomes by advancing comprehensive patient blood management (PBM) practices, promoting innovative research, and providing quality professional and public education. PBM is defined as the "timely application of evidence-based medical and surgical concepts designed to maintain hemoglobin concentration, optimize hemostasis and minimize blood loss in an effort to improve patient outcome." SABM has advanced PBM best practices to thousands of health care providers through hundreds of CME programs and the development of educational tools and evidence based clinical pathways. Through this education, physicians and practitioners employing PBM have experienced improved outcomes for their patients, including shortened hospital stays and fewer post-op complications. Improving blood utilization improves patient safety, and thereby reduces healthcare costs.