

The Buffalo District of the
New York Chapter American College of Physicians
invites you to attend the following dinner and educational program



Wednesday, April 19, 2017
6:00pm Registration/6:30 Dinner & Educational Program

744 Broadway
Albany, NY 12207
www.nyacp.org
P: 518-427-0366
F: 518-427-1991

Rizotto Ristorante - 930 Maple Road, Williamsville, NY 14221

A Multiple Small Feedings of the Mind

Statin Therapy: Reconciling Recent Recommendations

Faculty: Stanley F. Fernandez, MD, PhD
Associate Professor of Medicine, University of Buffalo Division of Cardiovascular Medicine

Learning Objectives: Review new data from randomized controlled trials on statin therapy in the primary prevention of CAD; Review the 2016 recommendations by the USPSTF on statin use in the primary prevention of CAD and reconcile the different threshold for initiating therapy as recommended by ACC/AHA.

Gout Update: Some New Thoughts on an Old Disease

Faculty: Joseph Grisanti, MD
Medical Director, Buffalo Rheumatology and Medicine, PLLC
Assistant Clinical Professor of Medicine and Rheumatology, State University of New York at Buffalo

Learning Objectives: Review the new "treat to target" paradigm for patients with symptomatic hyperuricemia; Demonstrate the influence urate has on blood pressure and renal function; Review the appropriate use of medications to treat symptomatic hyperuricemia.

The American College of Physicians is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The American College of Physicians designates this live activity for a maximum of *1.0 AMA PRA Category 1 Credit(s)*[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

PRE-REGISTRATION IS REQUIRED. Please provide the information below and **return with payment.** The deadline for reservations or to request refunds due to cancellation (less any processing fees) is Thursday, April 13th.

Name: _____ ACP Member - ID # _____

Office Address: _____ City: _____ Zip: _____

Office Phone: _____ Fax: _____ Email: _____

Dinner Selection (Choose One): _____ Chicken _____ Pasta

Meeting Registration Fee: ACP Members \$30.00 per person/ Non-ACP Members \$40.00 per person

I would like to sponsor a resident/med student member; _____ \$25; Nonmember _____ \$35

Resident/ Student Member Name _____; E-Mail Address _____

Payment Methods: Check - payable to: NYACP, 744 Broadway, Albany, NY 12207

AMEX / Visa / Mastercard / Discover Credit Card # _____

V Code # _____ Name on Card _____

Billing Address (including Zip Code) _____

Expiration Date _____ Signature _____

**FAX REGISTRATION FORM & PAYMENT INFORMATION TO: (518) 427-1991; REGISTER ONLINE AT WWW.NYACP.ORG;
FOR QUESTIONS OR RESERVATIONS BY PHONE CALL: (518) 427-0366**