3 Live (free) CME/CPE Webconferences

Building a Data-Driven, Multiple Daily Insulin (MDI) Therapy Practice Using Smart Insulin Pens (SIPs)

Approved for 3.0 *AMA PRA Category 1 Credit(s)*™/3.0 ACPE Contact Hours (0.3 CEUs)

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PROGRAM 1

Smart Insulin Pens: Standard of Care for MDI Therapy Patients

Nicholas Argento, MD, FACE

Tuesday, April 28, 2020
8pm ET | 7pm CT
6pm MT | 5pm PT

PROGRAM 2

Building a Data-Driven Practice Model with Smart Insulin Pens

Jennifer Okemah, MS, RD, BCADM, CDE, CSSD

Thursday, May 14, 2020
6pm ET | 5pm CT
4pm MT | 3pm PT

PROGRAM 3

Using Smart Insulin Pen Integrated Data to Optimize Insulin Regimens for MDI Patients

Irl B. Hirsch, MD

Thursday, May 21, 2020
8pm ET | 7pm CT
6pm MT | 5pm PT

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This program is supported by an independent educational grant provided by Companion Medical, Inc.

INTENDED AUDIENCE

Diabetologists, Endocrinologists, Primary Care Physicians, Nurse Practitioners, Pharmacists, Certified Diabetes Educators and other Health Care Professionals interested in the management of diabetes.

EDUCATIONAL OBJECTIVES

At the conclusion of theprogram, participants will be better able to:

1. ***Smart Insulin Pens: Standard of Care for MDI Therapy Patients***
   - Identify how the new insulin-delivery category of smart insulin pens (SIPs), addresses unmet needs (missed doses, calculating doses, numeracy, stacking insulin, fear of hypoglycemia, lack of data) of patients on injection therapy.
   - Describe the *RoadMap* to Smart Insulin Pen development.
   - Facilitate shared decision making, with the patient, to determine best method of insulin delivery.
   - Discuss SIPs with MDI patients to obtain their understanding, adherence, persistence, and optimal insulin usage.

2. ***Building a Data-Driven Practice Model with Smart Insulin Pens***
   - Ensure patients optimally utilize their SIP to assure success and that Care Team has the necessary data to partner with patient in optimizing insulin regimens by
     - Establishing correct insulin therapy settings
     - Setting up meal schedule to match normal routine
     - Syncing SIP to other data sources (CGM and/or blue tooth enabled BGMs)
     - Providing clear expectations to patient on integrating SIP into daily routine and instructing how/when to send data reports to care team

3. ***Using Smart Insulin Pen Integrated Data to Optimize Insulin Regimens for MDI Patients***
   - Maximize use of integrated data reports to partner with patient in optimizing insulin regimen on a timely basis, including via potential remote patient monitoring.
   - Apply in clinical practice, case studies of SIP use in conjunction with BGMs/CGMs, in adult/pediatric patients (>12 years of age).

ACCREDITATION AND CERTIFICATION

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Global Learning Collaborative (GLC), Postgraduate Institute for Medicine (PIM) and CogniMed Inc. GLC is accredited by the ACCME to provide continuing medical education for physicians.

GLC designates this series for a maximum of 3.00 *AMA PRA Category 1 Credit(s)*™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

JOINTLY ACCREDITED PROVIDER™ INTERPROFESSIONAL CONTINUING EDUCATION

In support of improving patient care, this activity has been planned and implemented by the Postgraduate Institute for Medicine and CogniMed Inc. Postgraduate Institute for Medicine 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.

Continuing Pharmacy Education

Postgraduate Institute for Medicine designates this continuing education series for 3.0 contact hour(s) (0.3 CEUs) of the Accreditation Council for Pharmacy Education.

Smart Insulin Pens: Standard of Care for MDI Therapy Patients
Live date: 4/28/2020, (Universal Activity Number - JA4008162-9999-20-2065-L01-P)

Building a Data-Driven Practice Model with Smart Insulin Pens
Live date: 5/14/2020, (Universal Activity Number - JA4008162-9999-20-2103-L01-P)

Using Smart Insulin Pen Integrated Data to Optimize Insulin Regimens for MDI Patients
Live date: 5/21/2020, (Universal Activity Number - JA4008162-9999-20-2105-L01-P)

Type of Activity: Knowledge

Pharmacists have up to 30 days to complete the evaluation and claim credit for participation so that information can be submitted to CPE Monitor as required.

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Jeffrey Rosenberg has nothing to disclose.

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FACULTY

Nicholas Argento, MD, FACE is an Advisory Board/Speaker's Bureau/Consultant for BoehringerIngelheim, ConvaTec, Dexcom, Eli Lilly, Insulet, MannKind, Novo Nordisk and Senseonics.

Jennifer Okemah, MS, RDN, CSSD, BC-ADM, CDE is Speaker for Companion Medical. She is also a Contracted Trainer for Dexcom, Insulet, Medtronic and Tandem.

Irl B. Hirsch, MD is research support for Medtronic Diabetes and Insulet. He is also a consultant for Abbott Diabetes Care, Bigfoot and Roche.

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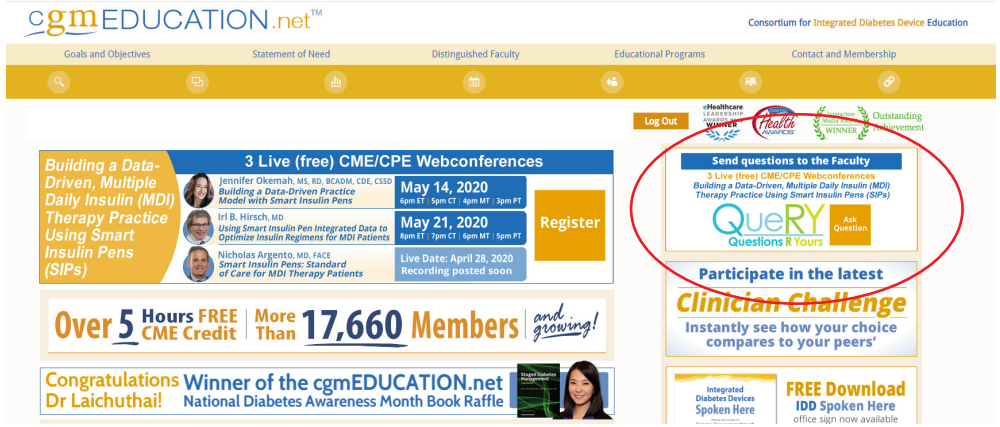

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PROGRAM 1

Tuesday, April 28, 2020

8pm ET | 7pm CT | 6pm MT | 5pm PT

Smart Insulin Pens: Standard of Care for MDI Therapy Patients

Nicholas Argento, MD, FACE

Diabetes Technology Director
Maryland Endocrine and Diabetes Center
Columbia, Maryland

Dr Argento is a senior clinical endocrinologist at the Maryland Endocrine and Diabetes Center in Columbia, Maryland, where he serves as the Diabetes Technology Director. His practice emphasizes the implementation of advanced diabetes technology to improve the lives of those with insulin requiring diabetes. His experience is enriched by the fact that he has had T1D since 1968, and has personally used CGM since August 2006.

He co-authored multiple chapters in the American Diabetes Association 2013 book, "Putting Your Patients on the Pump," and was primary investigator for 3 published retrospective studies on clinical aspects of CGM use, one of which reported the long term results of personal CGM use in a large group of Medicare aged patients (Endocr Pract. 2014;20:1297-1302), and was first author of a T1D Exchange study on the impact of Medicare pump policies on patient care (J Diab Sci Tech 2020, Vol. 14(2) 257–261). He co-authored a November 2018 Diabetes Care commentary on the use of intermittently scanned CGM, and several other recent commentaries on practical applications of CGM and isCGM.

He has presented on CGM and diabetes technology at ADA, EASD, AACE, and Diabetes Technology Society scientific sessions, and spoken to regional, national and international audiences on CGM and insulin pump use. He has represented the Endocrine Society before FDA and CMS on diabetes technology issues, and is actively engaged with and fundraises for JDRF.

9 Critical Functions that Meet Criteria for a Smart Insulin Pen (David Kerr et al)

- No need for another device beyond smart phone
- Provides continuous use for at least 1 year
- Automatically responds to change in time zone
- Automatically records and tracks dose and timing of insulin with option to share with HC Team
- Reminds if dose not taken within a customized time frame
- Ability to differentiate priming from bolus dose
- Provides access to clinical decision support with customized ICR, ISF, Targets, with tracking insulin on board from prior doses
- Ability to integrate with other diabetes technologies, wearables, and diabetes digital platforms
- Allows a person to share remotely with diabetes team

David Kerr, Hope Warshaw, and Nicholas Choi, Endocrine Today May 2019, 20-21

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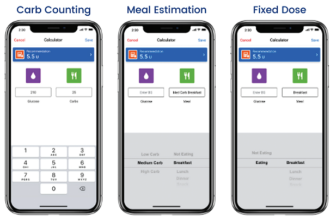
Newly Available for InPen: 3 Modes to Facilitate Appropriate Dosing Across the Spectrum of MDI Therapy

- **Carb Counting Mode (original)**
  - CR, Target, and CF can be set differently for different times of the day
  - IOB and correction calculated
- **Meal Estimation Mode**
  - BK, Lun, Dinner, Snack
  - Small, medium and large
  - IOB and correction calculated but IOB not displayed by default
- **Fixed Dose Mode**
  - BK, Lun, Dinner, Snack
  - IOB and correction calculated but IOB not displayed by default



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PROGRAM 2

Thursday, May 14, 2020

6pm ET | 5pm CT | 4pm MT | 3pm PT

Building a Data-Driven Practice Model with Smart Insulin Pens (SIPs)

Jennifer Okemah, MS, RD, BCADM, CDE, CSSD

Saluté Nutrition, PLLC
Kirkland, Washington

Jennifer has been a registered dietitian/nutritionist since 2005 and a Certified Diabetes Educator since 2007. She has an additional certification as a Sports Specialist in Dietetics as well as being Board Certified in Advanced Diabetes Management. Her unique niche is fluid knowledge on all technology products approved for diabetes care by the FDA.

She loves data! She has been a leader in her field in patient care, mentoring, serving as a preceptor, speaking, creating webinars, writing for nutrition and diabetes blogs as well as authoring scientific publications. But what she loves most is taking confusing, complex information and helping people make it usable for them to reach the health goals they set for themselves.

When she is not in a clinic or office, she can be found on her bicycle training for a JDRF fundraising ride, paddleboarding on Lake Washington (year around), hiking, traveling the world or just reading a book with a nice glass of wine.

Considerations in establishing initial smart insulin device settings:

- Goals of therapy
- Goals of initial settings
- Expectations of patient
- Understanding necessity of fine tuning
- Current self diabetes management behavior
- Tech IQ and support system
- Understanding of terminology
- Understanding insulin types
- TDD, A1C, TIR, hx hypos, fear of hypos, previous education, duration of diabetes

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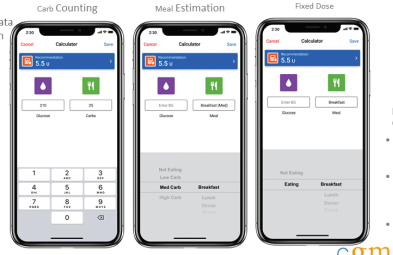
Dose Calculator Modes: Addressing Full-Spectrum of MDI Therapy

Bluetooth-enabled device data shared through Apple Health

- Dexcom G5*, G6*
- Contour Next
- Accu-Check
- OneTouch Verio Flex & Sync
- AgaMatrix Jazz
- One Drop

*3-hour delay



A1c 0.7 to 1.0% reduction in A1c with the use of an automated dose calculator.

MDI patients using a bolus calculator report:

- Reduced fear of hypoglycemia
- Improved confidence in the accuracy of their insulin bolus dose
- Increased treatment satisfaction

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Ziegler R, Cavan DA, Cranston I, et al. Diabetes Care. 2013; 36(11):3613-3619.
Barnard KD, Parkin CG, Young A, et al. J Diab Sci Tech. 2012;6:146-149.
Vallejo-Mora MdR, Carreira-Soler, Linares-Parrado F, Oliveira G, et al. Journal of Diabetes. 2017 (9):24-33.

PROGRAM 3

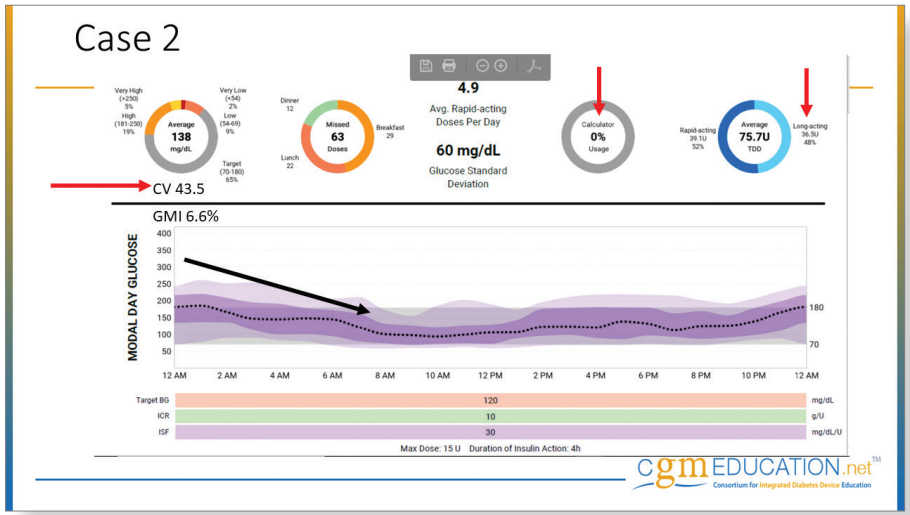
Thursday, May 21, 2020

8pm ET | 7pm CT | 6pm MT | 5pm PT

Using Smart Insulin Pen Integrated Data to Optimize Insulin Regimens for MDI Patients

Irl B. Hirsch, MD

Professor of Medicine
Diabetes Treatment and Teaching Chair
University of Washington School of Medicine
Medical Director
UWMC Diabetes Care Center
Seattle, Washington



Take Away Points

- For modern diabetes management, understanding time-in-range, the glucose management indicator (GMI), the coefficient of variation (CV), and all their targets are needed to understand modern-day diabetes management
- The ability to assess insulin dosing, no matter if by pump or pen is critical to understanding how to best assist our patients
- This needs to be "passive" without any added effort by the patient
- Not having the ability to understand MDI patient dosing up until now has been our biggest gap in assessing diabetes treatment
- Interpreting insulin dosing data needs to be accomplished with the understanding of each patient's story–the data by itself is not sufficient to understand the totality of an individual's diabetes control

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Irl B. Hirsch, MD, is professor and Diabetes Treatment and Teaching Chair at the University of Washington School of Medicine in Seattle.

Dr. Hirsch received his medical degree from the University of Missouri School of Medicine in 1984. He completed residency training in internal medicine at Mount Sinai Medical Center in Miami and Miami Beach, Florida. Dr. Hirsch also was fellowship-trained in endocrinology and metabolism at Washington University School of Medicine in St. Louis.

Dr. Hirsch has dedicated his career to patient care, clinical research and teaching. His focus in these areas is the treatment and management of diabetes. He has an interest in new technologies for the treatment of diabetes, particularly those involved in the use of insulin therapy. This interest centers on the mechanisms of how insulin co-modulates inflammation with glucose and how this results in improved outcomes for patients.

He has been involved in numerous major clinical research trials, including the DCCT, ACCORD, STAR-1, JDRF Sensor Trial, SEARCH, ORIGIN, ADAG, FLAT-SUGAR, and many more involved with insulin therapy.

Additionally, he has an interest in the use of computers in diabetes data management, and how pattern recognition can be used to improve diabetes control and how glycemic variability noted on glucose meter downloads may be an independent risk for microvascular complications.

Dr. Hirsch has authored more than 200 research papers, including a review of insulin in the New England Journal of Medicine. He also has written more than 60 editorials, three commentaries for The Journal of the American Medical Association, numerous book chapters and four books for patients and physicians. He is also a much in demand national and international speaker.

He is the past editor-in-chief of DOC News and Clinical Diabetes and former chair of the Professional Practice Committee for the American Diabetes Association and served as a member of the Endocrine Section of the American Board of Internal Medicine. Currently, he is section editor for Up-To-Date.

Dr. Hirsch has been honored at every level of his career, including being recognized with the Outstanding Young Physician Award by the University of Missouri Alumni Association in 2001, and in 2003 being honored as the American Diabetes Association's Physician- Clinician of the Year. In 2005, he received the American Association of Clinical Endocrinologists' Distinguished Endocrinologist Award, and in 2013, he received the American Diabetes Association's Josiah K. Lilly Sr. Distinguished Service Award. In April 2015 he was elected to a Mastership by the American College of Physicians.

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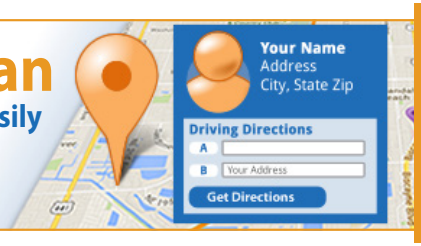

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