December 3, 2019

9:40 - 10:25 - Multiple Sclerosis, Dr. Laurin

1. Define multiple sclerosis and name common syndromes associated with this disease.
2. Describe the diagnostic criteria for MS and describe the McDonald criteria. Describe common CSF findings in MS.
3. Describe the types of clinical phenotypes in MS.
4. Describe the treatment for an acute MS exacerbation/flare

10:25 – 11:10 - Headache, Dr. Yancy

1. List the types of primary and secondary headaches, and know what symptoms point to secondary headaches.
2. Describe criteria for diagnosing migraine headaches and how to use the POUND mnemonic.
3. Define a “thunderclap headache.” What percentage of these headaches are associated with subarachnoid hemorrhage? Describe the appropriate steps and algorithm evaluation for subarachnoid hemorrhage.
4. Compare and contrast (in table format) the following syndromes including the clinical presentation, pathophysiology, diagnostic tests, and treatment options of the following: Idiopathic Intracranial Hypertension (Pseudotumor Cerebri), Intracranial hypotension, trigeminal neuralgia, and rebound headache (medication overuse headache).
5. Describe medication options for abortive therapy for a migraine headache and refractory migraine.
6. Know when to pursue migraine prevention treatment, how successful migraine prevention therapy is, and which drugs are recommended for migraine prevention.

11:30 – 12:15 - Epilepsy, Dr. Wang

1. Define epilepsy, simple partial seizure, complex partial seizure, tonic-clonic seizure, and absence seizure.
2. Describe the clinical syndromes of temporal lobe epilepsy, frontal lobe epilepsy, idiopathic generalized epilepsy, and juvenile myoclonic epilepsy.
3. Make a differential diagnosis for seizure, and describe ways to distinguish these diagnoses from a true seizure.
4. Describe the initial management of a first seizure in an adult and the appropriate evaluation, including indications for CT, MRI, or lumbar puncture.
5. Describe the indications for anti-epileptic drug therapy for partial versus generalized epilepsy.
6. Define status epilepticus, and describe its treatment algorithm.