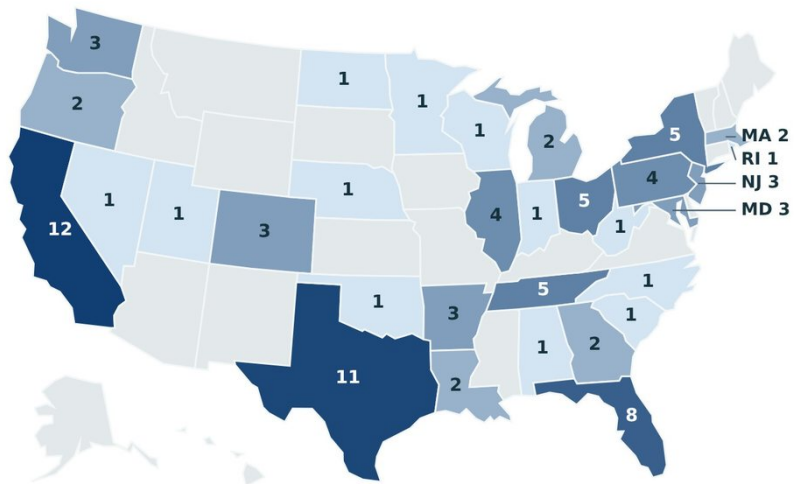
SAMPLE REPORT SLIDES

Learner distribution

Primary intended learners (n=93) by state and US Census region. Pts/mo = moderate-to-severe asthma patients seen per month (self-reported).



South

39 learners

≈1,690 pts/mo
avg 50

Practice type
- **44%** Private
- **26%** Hospital
- **21%** Academic
- **10%** Other

Location
- **38%** Urban
- **51%** Suburban
- **10%** Rural

On a biologic

32%

of uncontrolled patients**

West

22 learners

≈1,060 pts/mo
avg 59

Practice type
- **45%** Private
- **23%** Hospital
- **23%** Academic
- **9%** Other

Location
- **55%** Urban
- **36%** Suburban
- **9%** Rural

On a biologic

23%

of uncontrolled patients**

Midwest

16 learners

≈720 pts/mo
avg 51

Practice type
- **38%** Private
- **38%** Hospital
- **25%** Academic

Location
- **56%** Urban
- **25%** Suburban
- **19%** Rural

On a biologic

27%

of uncontrolled patients**

Northeast

15 learners

≈410 pts/mo
avg 30

Practice type
- **47%** Private
- **33%** Hospital
- **13%** Academic
- **7%** Other

Location
- **47%** Urban
- **53%** Suburban

On a biologic

29%

of uncontrolled patients**

*One learner did not report a state. **Self-reported. Illustrative data.

SAMPLE REPORT SLIDES

Learning gain

Learning objective: Apply evidence-based criteria to select biologic therapy for patients with uncontrolled moderate-to-severe asthma.

Case vignette (pre and post)

A 46-year-old woman has had 3 exacerbations requiring oral corticosteroids in the past year despite high-dose ICS-LABA plus a LAMA. Adherence and inhaler technique are confirmed. Blood eosinophils are 420 cells/µL and FeNO is 38 ppb.

What is the most appropriate next step?

A Start maintenance oral corticosteroids

B Add montelukast (LTRA)

C **Add a type 2–targeted biologic**

D Switch to a different high-dose ICS-LABA

E Refer for bronchial thermoplasty

Evidence-based answer: C, add-on biologic for uncontrolled type 2 asthma (GINA Step 5)

Primary intended

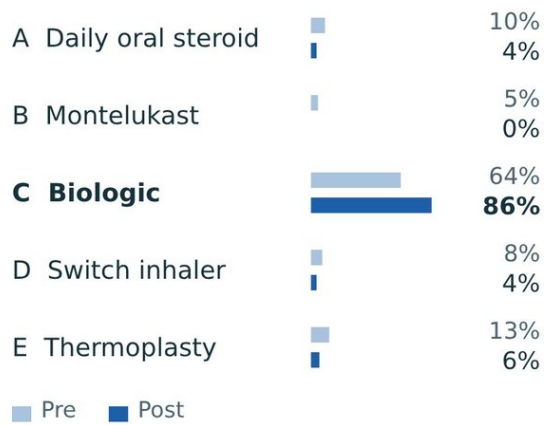
n = 78

Pre → Post

64% → 86% **+22 pts**

McNemar p < .001

Responses, pre vs post



Secondary intended

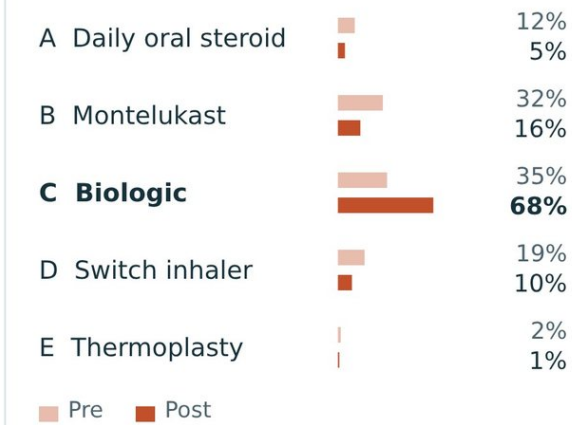
n = 112

Pre → Post

35% → 68% **+33 pts**

McNemar p < .001

Responses, pre vs post



Simulated data for illustration, hypothetical activity. McNemar test compares paired pre/post responses.

SAMPLE REPORT SLIDES

Learner insights

Key takeaways: who we reached and where gaps remain.

Biologic use vs. benchmarks

23–32%

of uncontrolled patients on a biologic (specialist estimate by region)

- About 1.5–2× the 15.6% national rate in severe uncontrolled asthma[1]
- Still, 68–77% of uncontrolled patients are not on a biologic
- South highest (32%), in line with the top published state rate (Mississippi, 27.9%)[1]

So what: Many eligible patients likely remain untreated

Who the activity attracted

49 pts/mo

average for specialists, vs 12 for primary care learners

- Community-based: 72% in private or health-system practice (20% academic)
- Already prescribing: 64% of specialists correctly applying evidence-based treatment for uncontrolled moderate-to-severe asthma before the activity
- Primary care reach: 45% NP/PA and 16% rural

So what: Busy, experienced clinicians refining practice, not novices

Where they need help

32%

of primary care learners chose montelukast pre-activity (16% post)

- Recognizing type 2 markers (eosinophils, FeNO) that signal eligibility
- Knowing when to refer: 42% of PCPs unfamiliar with biologics[2]
- Specialists: closing the gap between eligibility and prescribing

So what: Next: phenotyping, referral pathways, access barriers

Simulated learner data. [1] Camargo et al., Ann Allergy Asthma Immunol 2024;132:602–609. [2] Patel et al., ACAAI Annual Scientific Meeting 2023 (survey of 85 PCPs).