Oregon State University
College of Pharmacy

Office of Continuing Pharmacy Education
CPE Gap Analysis Worksheet

CPE PROGRAM: 2026 OSHP Fall Seminar

Standard 2: Gap Analysis

The provider must develop CPE activities based on an identified knowledge, skill, and/or practice gap. The provider should identify gaps between what pharmacists and pharmacy technicians currently know or do and what is needed and desired in practice.

Activity Title/Topic	Current Practice	Best/Better Practice	Educational Need	Activity Type
Measles prophylaxis Lorne Walker	New CDC recommendations	Follow new CDC recommendations	Cases are increasing and there is a need to educate pharmacists and technicians on CDC recommendations	☑ Knowledge-based ☐ Application-based Rationale: will address lack of knowledge to CDC recommendations for measles prophylaxis
Staph aureus bacteremia Mara Gosch	Management of S. aureus bacteremia often relies on traditional antibiotic selection and prolonged IV therapy	Incorporate current evidence regarding SAB risk stratification, optimal beta-lactam selection, and appropriate use of oral step-down therapy	Apply emerging evidence to risk-stratify SAB and select appropriate definitive and oral step-down antibiotic therapy.	☐ Knowledge-based ☑ Application-based Rationale: Pharmacists will apply current evidence to patient-specific decisions regarding SAB risk stratification, beta lactam selection, and oral step-down therapy
ESA use restriction and clinical pharmacy agreement Susie Jiing Shiela McCollam	Verify orders per provider discretion	Use restriction for clinical appropriateness and reimbursement optimization	How to navigate CMS NCD and BB warnings with a pharmacist protocol	☐ Knowledge-based ☑ Application-based Rationale: Pharmacists will apply CMS coverage requirements, safety warnings, and institutional criteria when evaluating ESA orders under the clinical pharmacy agreement
New stroke guidelines (30 minutes) Brandon Blaustein	Practice reflects prior stroke guidelines recommendations; pharmacists may not be familiar with recent changes	Incorporate updated stroke guideline recommendations into medication selection, dosing, monitoring, and acute stroke management	Pharmacists needs to identify key changes in the updated stroke guidelines and their implications for pharmacotherapy	☑ Knowledge-based ☐ Application-based Rationale: Provides pharmacists with updated knowledge of new and revised stroke guideline recommendations

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When/how/why to utilize cystatin c in medication management (30 minutes) Tianna Leitch	Renal function and medication dosing are primarily assess using serum creatinine-based estimates; cystatin C use is variable	Use cystatin C when appropriate to improve assessment of kidney function and inform medication dosing when creatinine-based estimates may be unreliable	Pharmacists need to recognize when cystatin C provides additional value over creatinine-based estimates and interpret cystatin C-based kidney function estimates for medication management	☐ Knowledge-based ☑ Application-based Rationale: Pharmacists will apply cystatin C results to clinical scenarios to assess kidney function and guide medication management
Dyslipidemia guidelines Bruce Warden	Management is based on prior dyslipidemia recommendations and familiar approaches to lipid-lowering therapy	Incorporate new/updated dyslipidemia guideline recommendations into cardiovascular risk assessment and selection/intensification of lipid-lowering therapy	Pharmacists need to identify key changes in updates dyslipidemia guidelines and determine how they affect selection and intensification of lipid-lowering therapy	☐ Knowledge-based ☑ Application-based Rationale: Pharmacists will apply updated dyslipidemia recommendations to optimize lipid-lowering therapy and cardiovascular risk reduction
BOP Inspection Gary Runyon				☑ Knowledge-based ☐ Application-based Rationale: