Emergency Medicine Pearls -
Management of Massive Pulmonary Embolism

11/15/2026 to 11/15/2029

Enduring Material

Purpose:

Massive pulmonary embolism (PE) is a life-threatening cardiovascular emergency that can rapidly progress from apparent stability to circulatory collapse. This educational activity reviews the pathophysiology of massive PE, emphasizing the critical role of acute right ventricular failure and increased pulmonary vascular resistance. Participants will explore evidence-informed management strategies, including anticoagulation, thrombolytic and catheter-based interventions, hemodynamic support, pulmonary vasodilator therapy, and considerations surrounding fluid administration and mechanical ventilation. Practical bedside pearls and a physiology-based treatment approach will help clinicians recognize deterioration early and optimize outcomes for patients experiencing massive PE.

Objectives:

1 Describe the pathophysiology of massive pulmonary embolism and its impact on right ventricular function and hemodynamic stability.
2 Recognize clinical signs and indicators of impending right ventricular failure and circulatory collapse in patients with massive pulmonary embolism.
3 Differentiate evidence-based management strategies from interventions that may worsen hemodynamic compromise in massive pulmonary embolism.
4 Apply physiologically guided approaches to hemodynamic support, including appropriate use of anticoagulation, reperfusion therapies, vasopressors, and pulmonary vasodilator
5 Implement strategies to minimize complications associated with fluid administration and airway management in patients with severe pulmonary embolism.
6 Communicate findings effectively across the interprofessional team to support timely, evidence-based evaluation and disposition of patients with pulmonary embolisms

Target Audience:

Physician, Nurse - RN, EMS, Nurse -LPN/LVN

For successful completion:

- Watch video
- Complete pre and post-test
- Complete evaluation

Accreditation & Credit Designation:

Accreditation

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INTERPROFESSIONAL CONTINUING EDUCATION

In support of improving patient care, Avera 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 Education Credit Designation(s)

IPCE CREDIT™

IPCE (Team-based): This activity was planned by and for the healthcare team, and learners will receive 0.75 IPCE credit(s) for learning and change.

REMINDER Attendance can be texted up to 24 hours after the activity

Avera

Medicine CME: Avera designates this live activity for a maximum of 0.75 *AMA PRA Category 1 Credit(s)*™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Successful completion of this CME activity, which includes participation in the evaluation component, enables the learner to earn credit toward the CME of the American Board of Surgery's Continuous Certification program. It is the CME activity provider's responsibility to submit learner completion information to ACCME for the purpose of granting ABS credit.

Nurse CE: Avera designates this activity for a maximum of 0.75 ANCC contact hour(s). Nurses should claim only the credit commensurate with the extent of their participation in the activity.

MN EMS: This education qualifies as Continuing Education, LCCR, or ICCR in the State of Minnesota. EMTs will receive 0.75 continuing education credit(s) for participating in this course.

SD BMOE: This course SD27CE442 has been approved for 0.75 continuing education credits by the South Dakota Board of Medical and Osteopathic examiners (BMOE).

Additional Information:

Feedback person for this educational activity is:

Enduring Material available from 11/15/2026 to 11/15/2029

- This course content was reviewed on 11/11/2026

Disclosure Policy:

Due to the regulations required for CE credits, all conflicts of interest that persons in a position to control or influence the education must be fully disclosed to participants. In observance of this requirement, we are providing the following disclosure information: all relevant financial relationships disclosed below have been mitigated.

Name of individual	Individual's role in activity	Nature of Relationship(s) / Name of Ineligible Company(s)
Kelly Boyd, MSN	Lead Planner	Nothing to disclose
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Scott VanKeulen, MD	Faculty	Nothing to disclose