



COURSE DESCRIPTIONS

Geriatric

It's What You Say, Not How You Say It: The 5-Minute ED Goals of Care Conversation

10/25/2021 | 1:30:00 PM - 1:50:00 PM

Faculty: David Wang, MD

How come families "don't get" that they're loved one is dying? Why would they still choose the ICU even when faced with certain death? Research has shown that goals of care conversations sometimes have little to do with transferring information from physician to patient. How can you guide families when emotions crowd out cognition? I will walk through a 5-minute framework to help you ask the right questions, present choices more effectively, and support family when more knowledge simply doesn't matter.

- Understand the triple bias towards optimism in surrogate prognostication
- Introduce sequences of key questions that invaluable stage conversations
- Learn how certain phrases in goals conversations help move families to decisional closure

Geriatric

Homeward Bound: A Tale of Two Hospice Patients in Your ED

10/26/2021 | 8:00:00 AM - 8:20:00 AM

Faculty: David Wang, MD

Compare and contrast the usual ED approach and a palliative approach to common hospice patient presentations. When communication and care decisions are outcomes-oriented, you may do greater good for the patient while requiring less time.

- Review reasons why hospice patients should come to the ED
- Understand which hospice patients would not benefit from admission
- Introduce communication framework to rapidly address goals of care in the ED



COURSE DESCRIPTIONS

Geriatric

Stop the Belly-Aching: Pearls & Pitfalls in the Care of Older Adults with Abdominal Pain

10/26/2021 | 2:00:00 PM - 2:20:00 PM

Faculty: Luz M. Silverio, MD

The grey wave is coming! By 2030, 25 percent of all ED patients will be considered geriatric. This unique population is harder to diagnose while being more susceptible to increased morbidity. The speaker will focus on the abdominal issues that cannot be missed. The speaker will present the keys to both physical exam findings & diagnostics that will make the care of these patients make you feel young again.

- Discuss common surgical causes of abdominal pain in older adults, with a focus on surgical emergencies such as vascular catastrophes, perforations, & infections.
- Describe the workup, imaging, & treatment modalities for common causes of abdominal pain.
- Review the physiologic differences related to certain medical conditions as well as the potential complications in the geriatric population

Geriatric

The Unique Intersection of Palliative & Emergency Medicine: Elevating Patient Care & Physician Satisfaction

10/27/2021 | 12:30:00 PM - 12:50:00 PM

Faculty: Rita A. Manfredi-Shutler, MD, FACEP

When palliative medicine interfaces with emergency medicine in the ED we often think “end of life,” “comfort care,” or “hospice.” A large number of emergency physicians have misconceptions regarding the meaning of palliative care, often equating it to a cessation of treatment efforts, forgoing treatment for reversible conditions, and end-of-life care. The intersection of palliative principles in emergency medicine is much more. It has become increasingly recognized that trajectories for patients’ hospital courses are often set in the Emergency Department. Treatment success is being redefined to include not only remission of illness, but also outcomes congruent with a patient’s goals. Palliative approaches in emergency medicine focus on relieving the suffering and symptoms of patients with serious illness to achieve the best possible quality of life for the patient and family. This presentation will outline palliative principles that can be utilized in emergency practice to enhance care of the seriously ill patient, reduce pain, aggressively treat symptoms, and improve physician to patient connections which further serve to enrich physician professional satisfaction and wellbeing.

- Examine the difference between standard care in the ED and an approach utilizing palliative principles
- Illustrate how palliative principles employed in emergency medicine enhance patient care and connection
- Demonstrate strategies to reveal what matters most to a seriously ill patient when administering emergency care.



COURSE DESCRIPTIONS

Geriatric

How & Why Geriatric ED Accreditation is a Good Idea for Your Hospital, Your ED & Your Patients

10/27/2021 | 4:00:00 PM - 4:20:00 PM

Faculty: Christina Shenvi, MD, PhD, FACEP

Ready to become an accredited geriatric emergency department? Review the benefits of becoming accredited and learn some tips and tricks from those that have been through the process.

- Review the criteria for becoming a GEDA center.
- Discuss barriers and solutions to becoming a GEDA center.
- Review steps for becoming a GDA center.

Geriatric

Brittle & Broken: Geriatric Trauma Practical Pearls & Pitfalls

10/28/2021 | 12:00:00 PM - 12:50:00 PM

Faculty: Rita A. Manfredi-Shutler, MD, FACEP

Older adults will make up an even greater percent of ED patients in the coming decades. Unfortunately they are both more prone to injuries, and can be more challenging to diagnose and manage. The physiologic changes that occur with aging that contribute to frailty and reduced physiologic reserve will be reviewed, and tied into practical pearls for diagnosis and treatment of older adults particularly with head injuries, rib fractures, hip fractures, and trauma in the anticoagulated patient.

- Explain the physiology behind frailty and falls in older adults.
- Discuss the morbidity and mortality associated with common injuries seen in the ED
- Provide specific pearls and practical advice in the management of head injuries, rib fractures, hip fractures, and trauma in anticoagulated patients.