



## Pediatric Disorders

### *Cruising the Literature: Pediatric Emergency Medicine 2021*

10/25/2021 | 8:00:00 AM - 8:50:00 AM

Faculty: Richard M. Cantor, MD, FACEP

Keeping up with the expanding pediatric emergency medicine literature is a challenge for busy emergency physicians. The speaker will review the recent literature from the past twelve months & discuss those articles that could affect the way you treat pediatric patients.

- Discuss the most important articles published in the pediatric literature during the past year.
- Identify trends & changes in emergency medicine as they emerge in the literature.
- Discuss the most current diagnostic & therapeutic management in pediatric emergency medicine.

## Pediatric Disorders

### *Pediatric Procedures Lab*

10/25/2021 | 8:00:00 AM - 10:00:00 AM

Faculty: S. Chad Scarboro, MD, FACEP (Moderator)

Performing emergency procedures on sick infants and children can be stressful and frustrating. During this hands-on lab you will be given an opportunity to obtain hands-on practice in several life-saving procedures. Seldinger technique, intraosseous line placement, umbilical vein catheters, and airway management techniques, including intubation, laryngeal mask airway, and needle cricothyrotomy will be demonstrated. (This lab is limited to 45 participants.)

- Demonstrate several techniques for obtaining IV access in an infant or child through such procedures as powered intraosseous access and umbilical vein lines.
- Demonstrate several techniques for managing the airway of an infant or child, including intubation, needle cricothyrotomy, and open cricothyrotomy.
- Demonstrate several techniques for managing pneumothorax in an infant or child, including needle aspiration, pigtail catheter, and thoracostomy tube placement.

## Pediatric Disorders

### *The Crying Game: Evaluation of the Crying, Irritable, Afebrile Infant*

10/25/2021 | 8:30:00 AM - 8:50:00 AM

Faculty: Marianne Gausche-Hill, MD, FACEP, FAAP

The fussy irritable but afebrile infant is a challenge to the most seasoned provider. A frequent complaint with critical implications but often no acute findings is frustrating to physicians and parents. Strategies employed in the evaluation & disposition can engage families & mitigate some of this stress for families & limit risk. Real world techniques that are easily implemented will be the focus of the presentation.

- Describe the approach to the fussy infant.
- Determine ideal testing & diagnostic strategies for evaluation of the infant who is fussy & crying.
- Identify shared risk models & engagement strategies to assist in disposition of patients.



## COURSE DESCRIPTIONS

### Pediatric Disorders

#### *Pediatric Procedures Lab*

10/25/2021 | 12:30:00 PM - 2:30:00 PM

*Faculty: S. Chad Scarboro, MD, FACEP (Moderator)*

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### Pediatric Disorders

#### *Pediatric Procedures Lab*

10/25/2021 | 3:30:00 PM - 5:30:00 PM

*Faculty: S. Chad Scarboro, MD, FACEP (Moderator)*

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## COURSE DESCRIPTIONS

### Pediatric Disorders

#### *Kids Dropping Out: Pediatric ECG From Normal to Disaster*

10/25/2021 | 4:30:00 PM - 4:50:00 PM

*Faculty: Annalise Sorrentino, MD, FACEP*

Pediatric ECGs are not just little pieces of paper. The speaker will explain how & why the "normal" ECG changes over time in kids & what is always abnormal & what can be normally abnormal.

- Discuss how & why the pediatric ECG changes over time.
- Identify the "big bad uglies" on pediatric ECGs
- Explain the differences on ECGs in athletes.
- Discuss the life-threatening conditions that present with chest pain or syncope in pediatric patients.

### Pediatric Disorders

#### *The 1st 60 Minutes: Initial Management of the Critically Ill Infant*

10/25/2021 | 4:30:00 PM - 5:20:00 PM

*Faculty: Richard M. Cantor, MD, FACEP*

Critically ill kids scare all of us! Fortunately, the critically ill child is rare even in the pediatric ED. Unfortunately, this rarity can often lead to discomfort in the management of these patients. Due to the subtle signs & symptoms of illness in children, the initial management is frequently delayed & sub-optimal which can lead to poor outcomes. The presenter will illustrate & highlight the important findings that can alert clinical providers to the child who is critically ill. Evidence-based strategies that will lead to improved clinical outcomes & save lives will be discussed.

- Describe the overt as well as the subtle clinical findings of neonatal shock.
- Discuss methods & strategies to improve the early recognition of the critically ill young infant.
- Explain how to implement protocols aimed at improving the management of the critically ill infants in the ED.



## COURSE DESCRIPTIONS

### Pediatric Disorders

#### *Neurologic Zebras in Kids: Flaccid Myelitis, ADEM, NMDA Receptor Antibodies & More*

10/26/2021 | 9:00:00 AM - 9:20:00 AM

*Faculty: Amanda B. Price, MD*

There are rare & unique presentations of acute neurologic emergencies that present in pediatric patients. Careful assessment, testing & disposition will allow the identification of these rare but very important diseases that appear to be on the rise. Flaccid myelitis, acute disseminated encephalomyelitis, and NMDA receptor encephalitis will be the “zebras” discussed in this lecture.

- Describe specialized techniques to perform a neurologic exam on pediatric patients
- Understand the signs and symptoms of serious acute neurologic conditions in pediatric patients.
- Discuss diagnostic testing, imaging, and specialist consultations required for pediatric patients being evaluated for possible serious acute neurologic emergencies
- Review the emerging identification, diagnosis & treatment of these unusual neurological presentations in pediatric emergency medicine.

### Pediatric Disorders

#### *Kids with Otitis, Bronchitis, Conjunctivitis, or Sinusitis - Who Needs Antibiotics?*

10/26/2021 | 9:30:00 AM - 9:50:00 AM

*Faculty: Dan Imler, MD*

Antibiotic stewardship in children is challenging in the busy ED- correct diagnosis and making patients happy can collide with evidence based medicine. Strategies and tools such as safety net antibiotics, education and communication will be discussed.

- Identify the indications for antibiotics in otitis media, conjunctivitis, sinusitis and bronchitis
- Discuss patient focused strategies to provide evidence based care and antibiotic stewardship
- How to talk to parents about the risks of inappropriate antibiotic use



## COURSE DESCRIPTIONS

### Pediatric Disorders

#### *Pediatric Status Asthmaticus in 2021: What's in Your Kitchen Sink*

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

*Faculty: Emily C. MacNeill, MD*

The severe status asthmaticus patient who is not rapidly responding to your initial therapies can be quite terrifying? What is in your kitchen sick to throw at the toxic, critically ill status asthmaticus pediatric patient? The presenter will discuss the potential techniques & tools available that may help improve the dire situation & prevent the need for intubation. The presenter will also discuss appropriate ventilation management in the event that those strategies were not successful.

- Describe strategies to improve oxygenation & ventilation in the pediatric patient with severe status asthmaticus.
- Discuss the potential pros & cons of using non-invasive ventilation in the pediatric patient with severe status asthmaticus.
- Discuss possible non-traditional use of medications like ketamine to help prevent intubation.
- Management strategies for intubated asthmatic patients?

### Pediatric Disorders

#### *Congenital Cardiac Diseases*

10/26/2021 | 10:30:00 AM - 10:50:00 AM

*Faculty: Alisa A. McQueen, MD, FACEP*

To help the community ED doctor to diagnose and manage neonates with a congenital cardiac disease

- How to diagnose a congenital cardiac disease
- Understand the difference between the two major types of congenital cardiac diseases
- Understand how to manage congenital cardiac diseases in the ED setting

## COURSE DESCRIPTIONS

### Pediatric Disorders

#### *Noisy Breathing in Kids - From Boogers to Badness*

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

*Faculty: Camilo Gutiérrez, MD, FACEP, FAAE*

Bronchiolitis, croup, foreign body aspiration, & pneumonia are just a few of the non-asthma causes of wheezing and cough in pediatric patients. This evidence based review of the evaluation and treatment for these diagnoses and how you can differentiate between benign and serious conditions.

- Recognize pediatric common respiratory diagnoses that cause wheezing and cough
- Differentiate serious causes of respiratory distress versus benign presentations.
- Determine diagnostic & treatment strategies for critical pediatric respiratory diagnoses.

### Pediatric Disorders

#### *Keeping It Simple: Pearls & Pitfalls in Emergency Care of Medically Complex Children*

10/26/2021 | 3:30:00 PM - 3:50:00 PM

*Faculty: Camilo Gutiérrez, MD, FACEP, FAAE*

There has been increased survival for medically complex children creating new and unique challenges to emergency medicine physicians. The initial care of these patients during their emergencies will likely not be in the tertiary or quaternary children's hospital, but more commonly in the community emergency department. Using interactive case scenarios and facilitated small group discussions, this session will help enlighten you and alleviate your fears of providing care to these complex children until they are transported to their designated referral center.

- Identify reasons why it is important to plan for urgent and emergency care of children with medical complexity in all healthcare settings.
- Reflect on their current strategies and challenges in addressing the healthcare needs of children with medical complexity.
- Describe an appropriate emergency management plan for children with medical complexity based on varying clinical scenarios (including medical technology)..



## COURSE DESCRIPTIONS

### Pediatric Disorders

#### *Pediatric Patients & COVID: Carriers & Presentations of Disease*

10/27/2021 | 8:30:00 AM - 8:50:00 AM

*Faculty: Russ Horowitz, MD*

Pediatric patients do not manifest COVID as adult patients may. Fever, respiratory complaints, GI complaints will vary, Devising a testing strategy and treatment can be challenging to the provider, patient and family. Best practices will be presented along with data on the epidemiology of COVID and the experience of Pediatric EDs and Community Hospitals.

- Describe the epidemiology of pediatric manifestations of COVID and MIS-C
- Recognize the clinical and laboratory of MIS-C
- Present optimal strategies for management of COVID+ pediatric patients
- Discuss disposition, quarantine requirements, and outpatient follow up COVID+ pediatric patients

### Pediatric Disorders

#### *Subtle Signs of Abuse: It's Not All About Bruises*

10/27/2021 | 9:30:00 AM - 9:50:00 AM

*Faculty: Alisa A. McQueen, MD, FACEP*

Child physical & sexual abuse is a challenging & difficult problem in the ED. Subtle signs can identify patients who present & are at risk for further trauma. New recommendations for testing & treatment of injuries & STIs have clinicians on the front lines of care for these patients. Discussion of the important role in the linkage to care that EDs play in the care of these patients will also be presented.

- Identify subtle signs of abuse in pediatric patients who present to the ED for evaluation.
- Recognize signs of neglect & determine best care path to provide a safe disposition.
- Evaluate new recommendations of abuse evaluation in the ED including CT/MRI imaging, cervical spine imaging, STI testing & treatment.
- Describe characteristics of human trafficking victims presenting to the emergency department



## COURSE DESCRIPTIONS

### Pediatric Disorders

#### *Pediatric Vital Signs - You Don't Know What You Are Missing*

10/27/2021 | 10:00:00 AM - 10:20:00 AM

*Faculty: Tim Horeczko, MD, MSCR, FACEP, FAAP*

Have you ever asked yourself these questions: How much tachycardia can be attributed to fever or crying? Do I care about the BP of 14/90 in an 11 year old? Is 93% an OK sat for a baby with bronchiolitis to go home? How accurate is the axillary thermometer and do you really need to "add a degree" to make it accurate? Vital signs are vital and give important clues in children that should be ignored. Based on the latest literature, the speaker will discuss vital sign abnormalities that can go home and those that require more work up, referral or admission.

- Define spectrum of normal VS in pediatric patients and understand how it differs adults
- Identify causes of VS abnormalities in children and adolescents
- Review the evidence based evaluation and treatment of hypertension and hypertensive emergencies in children and adolescents
- Understand the legal risks associated with abnormal vital signs at patient discharge

### Pediatric Disorders

#### *Newborn Resuscitation: Born But Not Breathing*

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

*Faculty: Adeola Kosoko, MD, FACEP*

The newly born child in your department will generate a lot of attention naturally. While the vast majority of children who are born in the ED do perfectly fine on their own, occasionally things go awry. Neonatal resuscitation is distinct from resuscitation of older children & adults & deserves specific consideration. The presenter will discuss the unique anatomic & physiologic differences that exist with the newly born. The basic techniques & strategies of resuscitating a newly born patient will be covered. Potential pitfalls & pearls will also be highlighted.

- Explain the anatomic & physiologic differences that exist with a newly born patient & anticipate how those differences will affect the resuscitation.
- Discuss the basic strategies & techniques to successfully resuscitate a newly born child.
- Discuss some of the potential pitfalls of the resuscitation of the newly born child & how to avoid them.



## COURSE DESCRIPTIONS

### Pediatric Disorders

#### *Life-threatening Radiographic Emergencies in Pediatric Patients*

10/27/2021 | 1:30:00 PM - 2:20:00 PM

*Faculty: Russ Horowitz, MD*

In the pediatric patient, life-threatening radiographic findings can often be subtle & easy to miss. Specific pediatric cases will be used to review important & potentially life-threatening findings including cardiac, abdominal, traumatic, & infectious disease emergencies visible on radiographs.

- Discuss how to read radiographic images specific to the pediatric population.
- Recognize life-threatening conditions visible on pediatric radiographs.
- Review the emergent management of serious radiographic findings of numerous pediatric cardiac, abdominal, traumatic, & infectious emergencies.

### Pediatric Disorders

#### *Pediatric Psych: Punk, Parenting, or Psychiatric Emergency?*

10/27/2021 | 3:30:00 PM - 3:50:00 PM

*Faculty: Steven M. Selbst MD, FAAP, FACEP*

Children present with a multitude of psychiatric & behavioral problems at an ever increasing rate. ODD, ADD, ADHD, new medications, social media & bullying, suicidal ideation & homicidal ideation. These patients are different than adult patients for a number of reasons. These will be explored, along with the best practices for evaluation, treatment & disposition of pediatric patients with psychiatric & behavioral problems.

- Describe the pediatric behavioral problems such as ODD, ADHD, ADD & others & their presentations & care in the ED.
- Discuss pharmacologic treatments for acute agitation in pediatric patients
- Explain the assessment, stabilization & safe disposition of the pediatric patient with suicidal or homicidal ideation.



## COURSE DESCRIPTIONS

### Pediatric Disorders

#### *Scary Baby Bellies*

10/27/2021 | 4:30:00 PM - 4:50:00 PM

*Faculty: Adeola Kosoko, MD, FACEP*

Abdominal pain is one of the most frequent pediatric complaints. In the sea of gastroenteritis there are serious diseases that can't be missed. Case-based presentation & review of cardinal symptoms & signs of NEC, volvulus, hirschsprungs & pyloric stenosis. The latest EBM guidelines & management for academic & resource poor settings will be reviewed.

- Recognize critical abdominal pain diagnoses & differentiate from benign presentations.
- Determine diagnostic & treatment strategies for critical pediatric abdominal pain diagnoses.

### Pediatric Disorders

#### *The Critical Child in the Community ED: Optimum Care Without Optimum Resources*

10/27/2021 | 5:00:00 PM - 5:20:00 PM

*Faculty: Joyce Li, MD, MPH*

Many children in the ED require stabilization and then transfer. The speaker will focus on the management of such children outside the confines of a tertiary care children's hospital. Information will be presented on preparation, equipment, staffing, and transfer protocols as well as practical approaches to case-based scenarios. The central role of the community ED in critical care pediatrics will be stressed

- Describe stabilization tips and techniques to manage critically ill or injured children.
- Describe the preparation and equipment resources needed to optimize care in a community ED for critically ill children.
- Understand the importance of having transfer agreements with tertiary care children's hospitals.



## COURSE DESCRIPTIONS

### Pediatric Disorders

#### *Metabolic Disasters in Kids - Lethal Disorders You Have Never Heard of & How to Treat Them*

10/28/2021 | 9:00:00 AM - 9:20:00 AM

*Faculty: Illene Claudius, MD*

There are over 300 disorders of biochemical pathways, and while each is rare, collectively they are more common than you think. The question is how to detect and treat the child with an undiagnosed inborn error of metabolism (IEM). Additionally, how do you care for the patient with a known IEM who is symptomatic? The presenter will cover a rational and reasonable approach to managing these complicated children.

- Describe the possible presentations of inborn errors of metabolism, both subtle and severe.
- List the critical actions to take when managing patient with a known inborn error of metabolism.
- Discuss an approach to the patient in whom you are concerned there may be an undiagnosed inborn error of metabolism.

### Pediatric Disorders

#### *Mistakes You Do Not Want to Make in Pediatric Patients*

10/28/2021 | 9:00:00 AM - 9:50:00 AM

*Faculty: Steven M. Selbst MD, FAAP, FACEP*

Besides the obvious challenges of children's nonverbal clues & their having unique illnesses & presenting symptoms, the diagnosis & treatment can be full of pitfalls. The speaker will explain what key features of childhood illnesses should "raise the red flag" & how not to be missed. Key issues such as missed meningitis & appendicitis, as well as other uncommon "legal" based diagnoses will be discussed. New cases are added yearly to this popular course.

- Identify the challenges of diagnosing illnesses in children & their nonverbal clues.
- Recognize "red flags" in pediatric illness.
- Discuss the most commonly missed pediatric diagnoses: meningitis, appendicitis, intussusceptions, & fractures.



## COURSE DESCRIPTIONS

### Pediatric Disorders

#### *Pediatric Sickle Cell Disasters*

10/28/2021 | 10:30:00 AM - 10:50:00 AM

*Faculty: Tim Horeczko, MD, MSCR, FACEP, FAAP*

Sickle cell disease can cause exquisite physical pain in pediatric patients, but it also can lead to critical medical conditions, that if not managed expertly can cause severe morbidity and mortality. The clues to detecting these emergent and critical conditions, such as splenic sequestration, acute chest syndrome and severe sepsis/bacteremia will be covered as well as their most current management strategies.

- Know the important complications associated with Sickle Cell Disease in children.
- Recognize how these critical illnesses may initially present in subtle fashions.
- Discuss the most evidenced-based management strategies for these critically ill patients.

### Pediatric Disorders

#### *The Unvaccinated Child in the Pediatric ED*

10/28/2021 | 11:30:00 AM - 11:50:00 AM

*Faculty: Ian Kane, MD*

Tetanus, H flu, Measles, Mumps, Pertussis, Polio, and the list goes on. An unvaccinated/partial vaccinated child presenting to the ED with fever or injury presents a challenge because they could have one of these diseases that vaccinated patients rarely get. The speaker the evaluation and treatments that the unvaccinated patient will need and the best way for you to utilize an unique opportunity to provide education/advocacy to families about getting vaccinations.

- Recognize the increased risk for serious infections normally prevented by vaccinations and the unique presentations of uncommon illness unvaccinated children
- Describe the elements of the expanded work up necessary in a febrile unvaccinated child
- Discuss risk/benefits of tetanus toxoid and TIG administration in unvaccinated patients with lacerations/abrasions
- Respectfully advocate parents/family members to vaccinated their children



## COURSE DESCRIPTIONS

### Pediatric Disorders

#### *Sugar & Spice & Everything is NOT Nice: Pediatric Endocrine Emergencies*

10/28/2021 | 12:30:00 PM - 12:50:00 PM

*Faculty: Illene Claudius, MD*

What do a very dehydrated 7-day-old infant, a comatose 2-month-old child, and a 7-year-old child with polydipsia and polyuria have in common? They each have a potentially catastrophic endocrine problem that requires rapid implementation of treatment to prevent severe morbidity and mortality. The speaker will review some of the critical endocrine, how to distinguish among them, and how to begin appropriate resuscitation.

- Discuss the presentation of an infant with congenital adrenal hyperplasia.
- Expertly manage a child in diabetic ketoacidosis
- Recognize and treat a child with a critical thyroid disorder

### Pediatric Disorders

#### *Pediatric Myths, Misnomers & Flat Out Lies*

10/28/2021 | 12:30:00 PM - 12:50:00 PM

*Faculty: Tim Horeczko, MD, MSCR, FACEP, FAAP*

Every clinician knows that intussusception presents with currant jelly stools & procalcitonin is the best test to evaluate a febrile child & if you look hard enough you can always find a palpable olive in an infant with pyloric stenosis. Well, every clinician may be wrong. This session will challenge many of the long held tenets of pediatric emergency medicine in a spirited presentation that will certainly change many of your practices.

- Recognize those long held tenets of pediatrics that are now changing was a result newer evidence based findings.
- Identify how some pediatric dogmas have changed over the last decade.
- Explain how to critically evaluate some of the long standing “golden rules” of pediatric emergency medicine.