

Hematologic Disorders

Hemostasis Without Direct Pressure: ED Applications of Tranexamic Acid

Faculty: Colin G. Kaide, MD, FACEP

The WHO lists Tranexamic Acid (TXA) as an “essential medication”, & the drug’s ability to stop bleeding in multiple clinical scenarios may prove to be very useful for the practicing emergency physician. Learn about the pharmacology of this relatively inexpensive medication, & identify how TXA can be used in trauma, GYN, ENT, & other acute ED patients.

- Discuss the indications, contraindications, & common adverse reactions to TXA.
- Review the literature supporting the use of TXA in trauma.
- Identify ED patients without acute trauma who may benefit from TXA, such as uncontrolled vaginal bleeding, epistaxis, and/or hyphemia.

Stop the Bleeding: New Technologies For Hemorrhage Control

Faculty: Megan Boysen Osborn, MD, FACEP

All bleeding stops eventually, but preferably prior to exsanguination. So when the direct pressure with gauze isn’t doing the trick, what else is out there? The speaker will introduce the latest & greatest in hemorrhage control technology for use in both the pre-hospital & emergency department settings. Additionally, the speaker will discuss recent advances & literature surround blood replacement products.

- Review the latest technologies for acute control of bleeding in the pre-hospital setting.
- Review the latest technologies for acute control of bleeding in the ED setting.
- Demonstrate the use of devices.

Anticoagulation Reversal: Part of the ABCs of Resuscitation

Faculty: Michael A. Gibbs, MD, FACEP

Anticoagulation complicates the management of many critically ill & injured patients. With the novel anticoagulants that exist, the reversal of these medications has become even more challenging. An approach that emphasizes the early recognition & management of hemorrhages associated with anticoagulations will be discussed.

- Identify the various anticoagulation medications & their potential reversal strategies.
- Discuss emphasizing anticoagulation reversal as part of the initial resuscitation strategy.

Common Cancer Conundrums and Five "Can't Miss" Oncologic Emergencies

Faculty: Megan Boysen Osborn, MD, FACEP

Cancer patients are a unique population in the emergency department. While some will present to the ED with life-threatening diagnoses, others present for symptomatic control of bothersome symptoms. This course will discuss the management of cancer patients who present when outpatient therapies aren't enough to relieve their symptoms. The course will specifically cover the management of: intractable nausea/vomiting, intractable pain, mucositis, and dehydration, among others.

- Consider alternative anti-emetic therapies to relieve chemotherapy-related nausea and vomiting.
- List five oncologic emergencies that require immediate treatment.
- Explain when a cancer patient with a common chief complaint warrants further workup .
- Discuss the management of these five oncologic emergencies.

How to Discharge VTE Patients Safely

Faculty: Colin G. Kaide, MD, FACEP

ED providers are experts at detecting VTE, but do all patients with VTE need to be admitted? The speaker will review the latest evidence regarding factors that make a patient a potential candidate for outpatient treatment & the therapeutic options for anticoagulation, & discuss the pitfalls of sending a patient with a PE home.

- Review evidence-based clinical factors that make a patient with an VTE safe to treat as an outpatient.
- Discuss the optimal anticoagulation strategy for the treatment of PE as an outpatient.
- Identify potential medical-legal pitfalls of discharging an ED patient with thromboembolic disease.

Thinking Twice About Transfusions: When TACOs & TRALIs Turn Treatment Into Tragedy

Faculty: Alisa V. Wray, MD, FACEP

Over 85 million red blood cell units are transfused worldwide each year & up to 8 percent of cases are complicated by transfusion reactions. While virus transmission is the most widely publicized risk of blood transfusion, complications such as transfusion associated circulatory overload (TACO) & transfusion related acute lung injury (TRALI) occur much more frequently & cause a higher rate of mortality. During this case-based discussion the speaker will highlight six complications of transfusion, focusing on the diagnosis, prevention, & management.

- Identify the indications for blood transfusion in acute & chronic anemia.
- List the six most common complications of blood transfusion & discuss their management.
- Discuss the indications for ordering leukoreduced, washed, & irradiated blood products.