“I’m weak & dizzy, I’m hot & bothered, I’m cold & have no energy.” Vague complaints often lead to extensive & expensive ED workups. While patients with metabolic disorders frequently present to the ED, most endocrine disorders present less often. The speaker will review how to recognize & treat adrenal insufficiency, hypothyroidism, thyroid storm, hyperparathyroidism, new onset diabetes mellitus, & metabolic syndrome.

- Discuss the presentation, management & disposition in cases of hypothyroidism.
- Discuss the presentation, management, & disposition in cases of thyrotoxicosis.
- Discuss the presentation, management & disposition in cases of adrenal insufficiency.
- Review new onset diabetes mellitus, & metabolic syndrome.

Acid base rules are easily mastered, but when does pH really matter? During this interactive “choose your own adventure” discussion, the speaker will lead you down the rabbit hole of hydrogen ions into an emergency wonderland where pH status actually makes a difference. Utilizing patient cases from toxicology, metabolic disorders, trauma, & other emergencies, the speaker will guide you & your patient safely beyond the Henderson Hasselbalch equation by providing a common sense approach to acid base emergencies that actually matter.

- Define the pathophysiology of common acid base disorders utilizing the clinically relevant strong ion approach.
- Explain an effective strategy for rapid diagnosis utilizing clinical presentation, traditional blood tests, & other techniques.
- Outline lifesaving therapeutic strategies to safely treat & prevent acid base disorders.
Metabolic and Endocrine Disorders

**DKA & HHS: The Sweetest High-Yield Pearls & Pitfalls**

10/26/2021 | 8:30:00 AM - 9:00:00 AM

Diabetic ketoacidosis & hyperosmolar syndrome are the most common life-threatening complications of the growing epidemic of diabetes in the US. Timely recognition is essential to initiating appropriate management in the ED. Careful attention to fluid administration, electrolyte replacement, & insulin therapy is essential to reducing hospital length of stay & complications. During this case-based interactive discussion, the speaker will review cases of diabetic emergencies. Important similarities & differences in pathophysiology & management will be reviewed. Best evidence will be summarized in practical strategies to bring back to your ED.

- Discuss the unique pathophysiology DKA & hyperosmolar syndrome in the ED.
- Outline diagnostic strategies and introduce euglycemic DKA.
- Compare evidence-based yet practical treatment plans to get the sugar down & the patient home.

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Metabolic and Endocrine Disorders

**Debunking Myths of Electrolytes in Resuscitation - Ca, HCO3, Mg, etc**

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

This new and exciting lecture will focus on debunking myths in resuscitation. When should calcium be used? Sodium bicarbonate? What about magnesium? Here we'll use a case-based approach to tackle myths regarding electrolytes in resuscitation.

- Discuss electrolyte imbalances relevant to the critically ill patient requiring resuscitation
- Review indications for the use of electrolytes in the resuscitation of critically ill patients
- Debunk myths regarding use and misuse of electrolytes in resuscitation using a case-based approach
He was in the ED “just sleeping it off”, but now he’s in full withdrawal. The speaker will review the current preventative treatments & management strategies for the patient in alcohol withdrawal. Various assessment scales & treatment algorithms that are available will also be discussed.

- Describe the pros & cons of the various assessment scales used to manage alcohol withdrawal.
- Discuss how to recognize the impending alcohol withdrawal patient.
- Discuss aggressive treatment options available for the alcohol withdrawal patient & in the era of drug shortages.

Electrolyte emergencies often present with subtle clinical manifestations yet may culminate in a near death experience for the patient & clinician! Six short lectures which will cover signs, symptoms, & treatment for the following electrolyte abnormalities: hyponatremia, hypernatremia, hypokalemia, hyperkalemia, hypercalcemia, & hypomagnesemia.

- Discuss presentation, management, & disposition in cases of hypo & hypernatremia.
- Discuss presentation, management, & disposition in cases of hyper & hypokalemia.
- Discuss presentation, management, & disposition in cases of hypercalcemia & hypomagnesemia.
Metabolic and Endocrine Disorders

Deadly Dialysis: A Review of Dialysis Complications & Their Initial Management

10/28/2021 | 9:30:00 AM - 10:00:00 AM

There are 468,000 patients on dialysis in the United States and these patients commonly present to the community emergency department with complications. Understanding the common complications and treatments is essential for the emergency physician. We will review the most common dialysis complications (infection, metabolic derangement, vascular access issues) and their acute treatments.

- Review the most common presenting complications in dialysis patients
- Discuss acute treatment of dialysis complications
- Review the latest evidence-based practices for dialysis complications presenting to the emergency department