Evidenced-Based Screening, Diagnosis, & Management of Congenital CMV: an interactive case-based presentation

Session Type: State of the Art Plenary

Submitter: Shannon Ross

Participant(s)

1. KF

Karen B. Fowler, DrPH

Position:

Professor of Pediatrics, Division of Infectious Diseases

Organization:

University of Alabama School of Medicine

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. NA

Nitin Arora, MD, MPH

Position:

Assistant Professor

Organization:

University of Alabama School of Medicine

	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP $$
3.	SP Swetha Pinninti, MD
	Position: Assistant Professor of Pediatrics
	Organization: University of Alabama at Birmingham
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, PIDS $$
4.	SR Shannon Ross, MD,MSPH
	Position: Professor of Pediatrics
	Organization: University of Alabama School of Medicine
	Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR, PIDS

Session Description

Session Description

Congenital CMV infection is an important cause of children's hearing loss and developmental disabilities. Although congenital CMV occurs in 1 in 200 births, routine universal screening is not standard in the US. Newborn CMV screening is not endorsed by the Recommended Uniform Screening Panel (RUSP); however, many states and hospitals are conducting targeted, enhanced (targeted plus risk-based), or universal screening of newborns. This session will utilize interactive case-based scenarios to 1) review the policy landscape of congenital CMV screening in the US and health equity; 2) review the current evidence for CMV screening modalities in the newborn nursery and neonatal intensive care unit, and whether multiple approaches are needed; and 3) review the evidence for the evaluation and treatment of infants identified with CMV on newborn screening, and discuss where more studies are needed.

Learning Objectives

- 1. Describe the current CMV screening policies and different newborn CMV screening programs in the United States.
- 2. Select the appropriate diagnostic test to screen infants for CMV in the newborn nursery and neonatal intensive care unit
- 3. Understand how to evaluate and manage an infant with congenital CMV infection.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50-100

2. Target audience

Attendees interested in infectious diseases, neonatology, general pediatrics, developmental and behavioral pediatrics, and public health

3. Tracks

General Pediatrics

Infectious Diseases

Neonatology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. N/A
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic is congenital CMV infection, including infectious diseases. neonatology, general pediatrics, and public health

Presentation Titles and Durations

Current congenital CMV screening policy at the state and national levels Karen B. Fowler, DrPH

Duration of Presentation in Minutes

20

Newborn CMV screening: one size doesn't fit all

Nitin Arora, MD, MPH

Duration of Presentation in Minutes

15

Newborn CMV screening: one size doesn't fit all

Swetha Pinninti. MD

Duration of Presentation in Minutes

Interactive case-based scenarios on diagnosis and management of congenital CMV Shannon Ross, MD,MSPH **Duration of Presentation in Minutes** 40

Medical Decision Making in Pediatric Gender-Affirming Care: A Case-Based Discussion for Providers Across Pediatrics

Session Type: Panel Discussion

Submitter: Brittany Allen

Participant(s)

1. BA

Brittany J. Allen, MD

Position:

Associate Professor of Pediatrics

Organization:

University of Wisconsin School of Medicine and Public Health

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. GS

Gina Sequiera, MD, MS

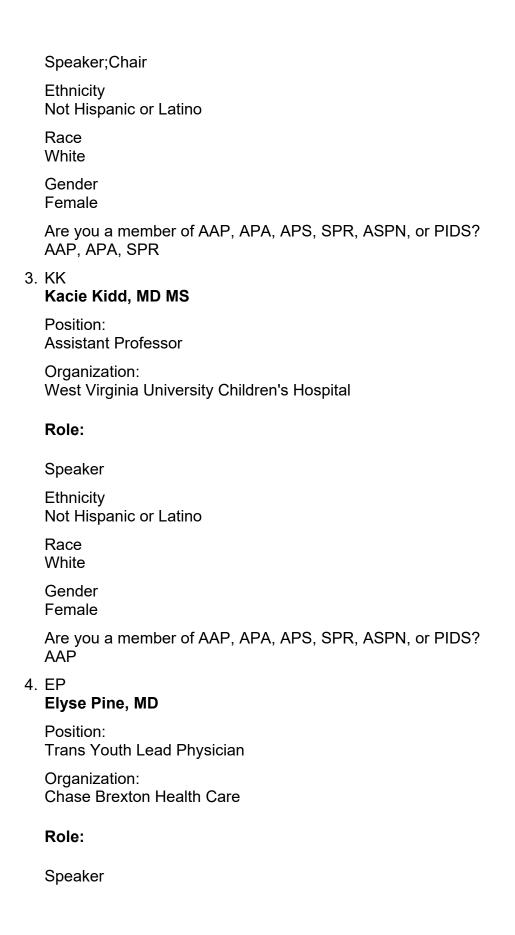
Position:

Assistant Professor of Pediatrics

Organization:

Seattle Children's

Role:



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. AC

Ariel Cohen, MD, MSEd

Position:

Physician

Organization:

Kaiser Permanente - Mid-Atlantic Permanente Medical Group

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Many transgender, non-binary, and gender diverse (TNG) youth experience a combination of gender dysphoria (distress over one's body not matching one's gender identity) and anti-trans stigma and discrimination. Many healthcare providers in endocrinology, adolescent medicine, and general pediatrics are caring for increasing numbers of TNG youth. There are, however, many challenges to delivering high-quality health care for TNG youth: (1) few

pediatric providers have received education or training in this area; (2) a combination of anti-trans stigma and discrimination from society, including legislative discrimination; and (3) limited opportunities to collaborate with other experienced providers about complex cases. This international conference environment provides a unique opportunity to bring individuals with diverse perspectives together to discuss challenging cases with other providers from across specialities and across the globe. This session will use a case-based format to facilitate a dialogue between providers who have existing clinical experience caring for TNG youth. It is our hope that this collaboration and the opportunity to engage with members of a multidisciplinary expert panel will provide attendees an opportunity to develop critical thinking skills to manage medically complex TNG adolescents in their clinical practice. Success metrics would include: tracking number of attendees (outcomes: total number, different specialities represented, different levels of training represented) as well as pre and post-session assessments to assess changes in provider knowledge, attitudes and skills. This proposal is supported by the Executive Committee for the AAP Section on LGBT Health and Wellness.

Learning Objectives

- 1. Identify resources available to support the provision of gender-affirming care in pediatric primary care.
- 2. Formulate management plans for sample complex cases from available empirical evidence, clinical knowledge, and personal/expert experiences.
- Describe differences approaches to sample complex cases in the care of gender diverse youth based on discussion by multidisciplinary panel of experts.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

60

2. Target audience

Any physician, APP, or other healthcare worker involved or interested in gender-affirming care; any general pediatrician or pediatric subspecialist with patients receiving gender-affirming care interested in understanding more about medical considerations related to gender-affirming care

3. Tracks

Adolescent Medicine
Diversity, Equity, and Inclusion
Endocrinology

General Pediatrics Mental Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. Workshop submission (if accepted): This Workshop Will Not Be Televised: Protest Health and Safety for the Pediatrician We may have more challenges with timing on 5/1/2023 due to one of the speaker's commitments
- 6. If your session was presented at another conference, please describe the conference and presentation.

A similar session was presented at SAHM in 2018 with large attendance and participation. This session would change the cases, but use a similar format.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply

8. Additional comments

For clarification of sounds request: We only need mics, no additional sound.

For clarification of session agenda:

Introduction of session and cases - 10 minutes - Britt Allen and Gina Sequeira

Audience review of cases (ideally at tables in small groups) - 30 minutes Panel discussion of cases, facilitated by Britt Allen and Gina Sequeira - 50 minutes (~3 cases, 10 minutes discussion and 5-7 minutes of questions/case)

9. Does this submission involve one or more specialties or disciplines?

Yes - chairs have backgrounds in General Pediatrics and Adolescent Medicine. We plan for panelists with backgrounds in Pediatric Endocrinology, Pediatric and Adolescent Gynecology, and Mental Health.

Presentation Titles and Durations

Introduction: Session orientation and introduction to cases (with Gina Sequiera) Brittany J. Allen, MD

Panel Discussion Facilitation (co-facilitator BA; panelists EP, KK, AC, and a mental health provider)

Gina Sequiera, MD, MS

Duration of Presentation in Minutes

50

Panel Discussion (Facilitation: BA and GS, with panelists EP, AC, and a mental health provider)

Kacie Kidd, MD MS

Duration of Presentation in Minutes

50

Panel Discussion (Facilitation: BA and GS, with panelists AC, KK, and a mental health provider)

Elyse Pine, MD

Duration of Presentation in Minutes

50

Panel Discussion (Facilitation: BA and GS, with panelists EP, KK, and a mental health provider)

Ariel Cohen, MD, MSEd

Duration of Presentation in Minutes

Emerging and Re-Emerging Viral Threats to Children

Session Type: State of the Art Plenary

Submitter: Cynthia Bearer

Participant(s)

1. CB

Cynthia Bearer, MD, PhD

Position:

Professor, Pediatrics

Organization:

Case Western Reserve University School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR

2 SM

Sarah B. Mulkey, MD, PhD

Position:

Prenatal-Neonatal Neurologist, Associate Professor, Department of Neurology and Pediatrics

Organization:

Children's National Health System

	Role:
	Speaker;Chair
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? \ensuremath{SPR}
3.	EM Eleanor Molloy, MB PhD FRCPI
	Position: Chair and Professor of Paediatrics
	Organization: Trinity College Dublin
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? \ensuremath{SPR}
4.	NH Nada Harik, MD
	Position: Associate Professor of Pediatrics
	Organization: Children's National Hospital
	Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, PIDS

5. DB

Daniel J. Bonthius, MD, PhD

Position:

Professor

Organization:

Levine Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

The past decade has seen the emergence of new viruses which cause disease in children such as COVID 19 and multisystem inflammation syndrome in children (MIS-C), viruses such as Zika that became newly identified as a teratogen, and others that are re-emerging as the globe warms, such as West

Nile Virus. Some viruses have just been overlooked, such as lymphocytic choriomeningitis virus (LCMV) and are likely responsible for more infections than recognized. This session will pull together information on causes, pathophysiology, treatment and outcomes of these viral threats to children. Specifically, the following will be addressed: Zika, COVIID 19, MIS-C, Parechorvirus, and LCMV. The following are the speakers and presentations:

- 1. Cynthia F. Bearer, MD, PhD, Rainbow Babies & Children's Hospital. Introduction.
- 2. Sarah Mulkey, MD, PhD., Children's National Hospital. Lessons from Zila virus and Long-term impact on Child Development
- 3. Eleanor Molloy, MB, PhD, Trinity College Dublin.
- 4. Nada Harik, MD, Children's National Hospital. Neonatal Parechovirus Infection.
- 5. Daniel Bonthius, MD, PhD, Levine Children's Hospital. Injury to the Developing Brain by Lymphocytic Choriomeningitis Virus.
- 6. Panel Discussion and Wrap-Up

Learning Objectives

- 1. Describe infection with Zika, LCMV and parechovirus
- 2. Identify the multisystem inflammatory syndrome from COVID 19 infect in children
- 3. Be able to take the next steps in identifying and treating disease from these viruses.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

All pediatricians, neonatologists, Maternal-Fetal-Medicine specialists, all trainees

3. Tracks

Adolescent Medicine
Children with Chronic Conditions
COVID-19

Developmental and Behavioral Pediatrics Global Neonatal & Children's Health Infectious Diseases Neonatology

Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Pediatric Research Sponsored Workshop - Publication Pearls
- If your session was presented at another conference, please describe the conference and presentation.
 Not applicable
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? The Impact of Policies on Health and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Yes, infectious disease, critical care, neonatology, public health

Presentation Titles and Durations

Introduction (5 min), Panel Discussion (5 min) Cynthia Bearer, MD, PhD

Duration of Presentation in Minutes

10

Zika Virus and long-term Impact on Child Development Sarah B. Mulkey, MD, PhD

Duration of Presentation in Minutes

20

New Insights in COVID 19-associated Multisystem Inflammatory Syndrome in Children

Eleanor Molloy, MB PhD FRCPI

Duration of Presentation in Minutes

20

Neonatal Parechovirus Infections

Nada Harik, MD

Duration of Presentation in Minutes

20

Injury to the Developing Brain by Lymphocytic Choriomeningitis Virus.

Daniel J. Bonthius, MD, PhD

Duration of Presentation in Minutes

Genetic Liver Disease: A New Perspective

Session Type: Hot Topic Symposia

Submitter: Hiroki Kondou

Participant(s)

Chair

1. HK Hiroki Kondou, N/A, Doctor of Pediatric Gastroenterology Position: M.D., Ph.D. Organization: JPS/ASPR Role: Submitter **Ethnicity** Not Hispanic or Latino Race Asian Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 2. KB Kazuhiko Bessho, MD, PhD Position: **Professor** Organization: Jikei University of Health Care Sciences Role:

	Ethnicity Prefer not to respond
	Race Asian
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
3.	RS Ronald J. Sokol, MD
	Position: Professor
	Organization: Children's Hospital Colorado
	Role:
	Chair
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APS, SPR
1.	WB WILLIAM F. BALISTRERI, N/A, MD
	Position: PROFESSOR - CINCINNATI CHILDREN'S HOSPITAL
	Organization: CCHMC - Univ of Cincinnati
	Role:
	Speaker

	Ethnicity Prefer not to respond
	Race Prefer not to respond
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
5.	HC Huey-Ling Chen, MD, PhD
	Position: Professor, Department of Pediatrics,
	Organization: National Taiwan University Hospital
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
6.	KI Kazuo Imagawa, MD, PhD
	Position: Assistant Professor
	Organization: University of Tsukuba
	Role:
	Speaker

	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
7.	sU shuichiro Umetsu, MD
	Position: Department of pediatric hepatology and gastroenterology
	Organization: Saiseikai Yokohama-shi Tobu Hopital
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Prefer not to respond
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
8.	SK Saul J. Karpen, MD PhD FAASLD
	Position: Professor of Pediatrics
	Organization: Emory University School of Medicine
	Role:
	Speaker

Ethnicity
Not Hispanic or Latino

Race White

Gender Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

In recent years, remarkable progress has been made in the field of genetic liver diseases, and the causative genes have been identified one after another. In this symposium, we will review the progress in diagnosis and management of the inborn errors of bile acid metabolism (IEBAM) and inherited cholestatic liver diseases such as progressive familial intrahepatic cholestasis (PFIC). Bile acids (BA) are synthesized by the liver from cholesterol through a complex series of reactions involving at least 14 enzymatic steps. In IEBAM, one of these steps in BA synthesis is impaired, resulting in failure to produce normal BA and inhibition of BA production, which in turn results in accumulation of abnormal BA and intermediate metabolites, accumulation occurs. Failure to synthesize BA results in decreased bile flow and decreased intraluminal solubilization of fats and fat-soluble vitamins, and the intermediates created because of blockade in the BA biosynthetic pathway may be toxic to hepatocytes. PFIC, on the other hand, is an ever-increasing group of diseases. Genetics has helped unravel the disease mechanisms, and we can better understand the spectra of phenotypes associated with mutations in each gene. Different responses to medical and surgical management, based on genetic etiology and molecular mechanisms, are becoming apparent. We will share the results of panel genetic testing for infantile cholestasis in USA and Asian countries, discuss the next approach when panel genetic testing fails to provide a diagnosis and promote future collaborative clinical research between USA and Asian countries.

Learning Objectives

 Upon completion, participants will be able to understand the recent advances in the diagnosis and treatment of inborn errors of bile acid metabolism.

- 2. Upon completion, participants will be able to understand the recent advances in the diagnosis and treatment of inherited cholestatic liver diseases.
- Upon completion, participants will be able to understand the etiologies of pediatric liver diseases in USA and Asian countries, novel infantile cholestatic diseases

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

Pediatricians and neonatologists who are involved or interested in diagnosis, management and clinical research of pediatric liver diseases.

3. Tracks

Academic and Research Skills

Clinical Research

Epidemiology

Gastroenterology/Hepatology

General Pediatrics

Genomics/Epigenomics

Neonatology

Pharmacology and Therapeutics

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Hepaology, Gastroenterology, Nutrition.

6. If your session was presented at another conference, please describe the conference and presentation.

Nothing in particular.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

Nothing in particular.

9. Does this submission involve one or more specialties or disciplines?

Topic is genetic liver diseases involving Hepatology, Metabolism, Neonatology and General Pediatrics.

Presentation Titles and Durations

Recent Advances in the Inborn Errors of Bile Acid Metabolism.

WILLIAM F. BALISTRERI, N/A, MD

Duration of Presentation in Minutes

20

Recent Advances in the Diagnosis and Treatment of Inherited Cholestatic Liver Diseases.

Huey-Ling Chen, MD, PhD

Duration of Presentation in Minutes

20

Use of a Comprehensive 61-Gene Cholestasis Sequencing Panel Cholestatic Infants, Children in Japan and Southeast Asia.

Kazuo Imagawa, MD, PhD

Duration of Presentation in Minutes

15

Biallelic Mutations in the LSR Gene Cause a Novel Type of Infantile Intrahepatic Cholestasis.

shuichiro Umetsu, MD

Duration of Presentation in Minutes

10

Use of a Comprehensive 66-Gene Cholestasis Sequencing Panel in 2171 Cholestatic Infants, Children, and Young Adults.

Saul J. Karpen, MD PhD FAASLD

Duration of Presentation in Minutes

Implementation of CBME- An International Perspective on what works and what doesn't!

Session Type: Hot Topic Symposia

Submitter: David Turner

Participant(s)

1. AA

Adelle R. Atkinson, Atkinson, MD, FRCPC

Position:

Professor of Paediatrics and Associate Chair - Education

Organization:

The Hospital for Sick Children

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APA

2. DT

David A. Turner, MD

Position:

Vice President, Competency-Based Medical Education

Organization:

American Board of Pediatrics

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

3. PP

Patricia Poitevien, MD, MSc

Position:

Associate Professor

Organization:

The Warren Alpert Medical School of Brown University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

Session Description

Session Description

Competency-based medical education (CBME) involves developing education and assessment priorities based on patient needs, and the determination of what competences are required to address those needs. Integrating the needs of patients into an educational design is an important priority worldwide as the

medical community works to improve the care of patients. The Royal College of Physicians and Surgeons of Canada has committed to a national implementation of CBME as their framework for medical training, entitled Competence By Design (CBD), which is now well down the path of implementation across medical specialties. In the US, the American Board of Pediatrics has also committed to CBME for the future of education and assessment. This session will begin with an overview from one of the leaders at the Royal College as she describes the implementation of CBD in Canada with an eye toward lessons learned that may be valuable as next steps toward implementation are taken in the US. The session will then include an overview from one of the leaders at the American Board of Pediatrics describing the CBME research efforts that have been undertaken to date in the US and how this research helps inform broader implementation. The conclusion of the session will involve a leader from the Association of Pediatric Program Directors describing how partnership among all stakeholders involved in the education process as we further advance CBME in pediatrics in the US facilitates movement toward a more robust and equitable approach to education and assessment.

Learning Objectives

- 1. Describe the approach to the implementation of competency-based medical education in Canada from a national to individual program level.
- 2. Review the data from competency-based medical education research from the last decade in the US and how it informs future implementation.
- 3. Discuss potential strategies, approaches, and challenges to the implementation of EPAs in US training programs and how it is value added for trainees and patients.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

Pediatric Educators (Including Program Directors and Academic Faculty)
Trainees

General Pediatricians and Pediatric Subspecialists

Department Chairs

Hospital Administrators and Leaders

3. Tracks

Career Development

Diversity, Equity, and Inclusion

General Pediatrics Medical Education Quality Improvement/Patient Safety

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Avoiding other major education-focused sessions would help maximize attendance.
- If your session was presented at another conference, please describe the conference and presentation.
 N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Yes, this session is applicable to general pediatrics and all pediatric subspecialties.

Presentation Titles and Durations

Competence By Design - A national and program level approach to competency-based medical education - lessons learned Adelle R. Atkinson, Atkinson, MD, FRCPC

Duration of Presentation in Minutes

30

How are we doing? A review of the CBME research in pediatrics and pediatric subspecialties from the last decade

David A. Turner, MD

Duration of Presentation in Minutes

30

Centering the patient - Connecting assessment to the most important outcomes Patricia Poitevien, MD, MSc

Duration of Presentation in Minutes

Chronic Cough in a Child: Etiologies and Treatment

Session Type: State of the Art Plenary

Submitter: Miles Weinberger

Participant(s)

1. MW

Miles Weinberger, MD

Position:

Visiting clinical professor of pediatrics, UCSD, Rady Children's

Organization:

University of California, San Diego School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR

Session Description

Session Description

Cough is a common cause for parents to bring their child to a pediatrician. Most acute coughs are self-limited, but some persist. Chronic cough in a child is defined as a cough continuing daily for more than 4 weeks. There is potentially an extensive differential, but a knowledgeable approach can often enable

making the diagnosis based on a careful history and physical exam. This presentation will describe the major causes of chronic cough a pediatrician is likely to encounter in their practice. Emphasis will be on how to determine the cause, how to treat, and when referral is needed.

Learning Objectives

- 1. Upon completion, participant will be able to take an appropriate history related to the common causes of chronic cough
- 2. Upon completion, participant will be able to treat many causes of chronic cough efficiently and effectively.
- 3. Upon completion, participant will be able to appropriately counsel the parents and child about the anticipated results of treatment.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200

2. Target audience

General pediatricians, Pediatric pulmonologists, Pediatric otolaryngologists, Pediatric neurologists, Pediatric nurses, Pediatric respiratory therapists

3. Tracks

Academic and Research Skills

Adolescent Medicine

Asthma

General Pediatrics

Infectious Diseases

Pulmonology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

I know of no topics to be avoided when scheduling this session.

6. If your session was presented at another conference, please describe the conference and presentation.

Components of the presentation proposed for this session have been given at pediatric pulmonary conferences in Taiwan, England, and 10 U.S. Pediatric Pulmonary divisions. There has been no presentation of the topic for this session presented at any national or international meeting.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Science is Real: Research, Misinformation and Trust

8. Additional comments

Presentation Titles and Durations

Chronic Cough in a Child Miles Weinberger, MD **Duration of Presentation in Minutes** 50

"Pulmonary Vascular Disease of Prematurity: Navigating the Phenotypes"

Session Type: Hot Topic Symposia

Submitter: Steven Abman

Participant(s)

1. SA

Steven H. Abman, MD

Position:

Professor

Organization:

University of Colorado School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APS, SPR

2. VK

Vladimir Kalinichenko, MD, PhD

Position:

Professor of Pediatrics

Organization:

Cincinnati Children's Hospital Medical Center

Role:

Speaker
Ethnicity Not Hispanic or Latino
Race White
Gender Male
Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
PM Patrick J. McNamara, McNamara, MB BCH BAO MSC
Position: Professor of Pediatrics & Internal Medicine
Organization: University of Iowa Stead Family Children's Hospital
Role:
Speaker;Chair
Ethnicity Not Hispanic or Latino
Race White
Gender Male
Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR
HM Hussnain S. Mirza, Mirza, MD. MBA
Position: Associate Professor
Organization: Advent Health for Children/ UCF College of Medicine
Role:
Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

5. KY

Karen Young, MD MS

Position:

Associate Professor

Organization:

University of Miami Leonard M. Miller School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR

Session Description

Session Description

Pulmonary hypertension (PH) contributes to high morbidity and mortality in preterm infants, yet mechanisms contributing to PH, the impact of pulmonary vascular disease (PVD) on the clinical course with acute hypoxemic respiratory failure, its impact on outcomes of preterm infants, the role for PH-targeted drug therapies, and long-term sequelae in late childhood and adulthood are poorly understood. PVD in preterm infants includes diverse phenotypes as defined by

timing of onset, severity and contributions to late outcomes. As with term newborns, preterm infants can develop acute hypoxemic respiratory failure (HRF) with systemic levels of pulmonary artery pressure, known as persistent pulmonary hypertension of the newborn (PPHN), and variable levels of early PH have also been demonstrated in preterm infants without severe HRF, representing the delayed pulmonary vascular transition (DPVT) of the lung, which has been associated with higher risk of mortality, prolonged ventilation and BPD. Furthermore, echocardiographic evidence of PH in the early weeks of life is strongly associated with BPD, late PH, and clinical respiratory disease during early childhood. Past studies of older infants and children have shown that echocardiographic signs of PVD can persist and may lead to chronic PH in prematurely-born young adults. Overall, this symposium will present the importance of understanding PVD pathogenesis and characterize the diverse pulmonary vascular phenotypes in preterm infants that may help to guide clinical care and lead to the development of more specific preventive and therapeutic strategies to optimize outcomes of preterm infants.

Learning Objectives

- understand the physiologic basis and develop therapeutic strategies to improve the care of preterm infants with severe acute pulmonary hypertension shortly after birth.
- define the physiology and outcomes of preterm infants with variable patterns of delayed pulmonary vascular transition (DPVT) during the first days and weeks of life.
- 3. develop a clinical strategy for the care of PH in preterm infants with BPD and to anticipate the risk for late PH in early adulthood.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

150 attendees

2. Target audience

Neonatologists, pulmonologists, intensivists, cardiologists

3. Tracks

Cardiology
Critical Care
Cross-Disciplinary
Developmental Biology
Neonatology
Pulmonology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

 Plenary sessions for APS and SPR
- 6. If your session was presented at another conference, please describe the conference and presentation.

 not previously presented
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?
 no

Presentation Titles and Durations

Introduction
Steven H. Abman, MD
Duration of Presentation in Minutes

5

Lung Vascular Development: the Rare Informs the Common Vladimir Kalinichenko, MD, PhD **Duration of Presentation in Minutes**

20

Physiology-Based Management of acute PH in Preterm Infants Patrick J. McNamara, McNamara, MB BCH BAO MSC **Duration of Presentation in Minutes**

20

Delayed Pulmonary Vascular Transition in Premature Newborns Hussnain S. Mirza, Mirza, MD. MBA **Duration of Presentation in Minutes**

20

Novel Strategies for the Treatment of BPD-Associated PH Karen Young, MD MS

Duration of Presentation in Minutes

Beyond the perforation: Ostomy care in the ICU setting

Session Type: Hot Topic Symposia

Submitter: Steven McElroy

Participant(s)

1. SL

Satyan Lakshminrusimha, MD FAAP

Position:

Professor and Chair

Organization:

UC Davis Children's Hospital

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR

2. SM

Steven McElroy, MD

Position:

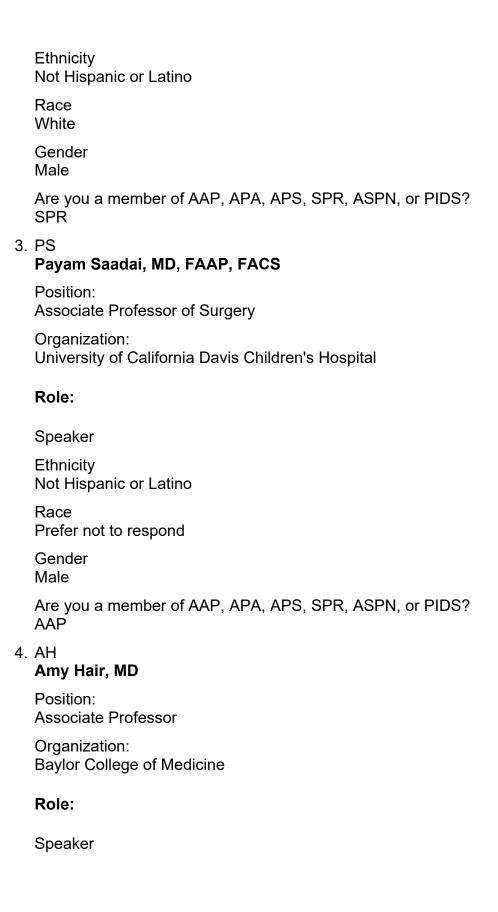
Professor of Pediatrics, Chief of Neonatology

Organization:

University of California, Davis, School of Medicine

Role:

Submitter; Speaker



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

5. CM

Christa Mu, RN, MSN, CCRN, CNS, CELBW

Position:

CNS

Organization:

University of California Davis Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

The immature intestine of the preterm infant is at increased risk of bowel injury leading to perforation and/or resection. To maximize infant growth, optimize nutrition, and allow for bowel healing, ostomies of the bowel are often created by the surgeon at the site of injury. However, these ostomies must often be maintained for weeks before reanastomosis can occur. However, little is in the published literature regarding optional nutrition practices, fluid and electrolyte

management, refeeding through the mucus fistula, and how to best prevent skin breakdown at the ostomy site. In this session, Dr. Steven McElroy (Professor and Chief of Neonatology UC Davis) will discuss common disease processes that require an ostomy. Dr. Payam Saadai (Associate Professor in Surgery at UC Davis with expertise in pediatric and fetal surgery) will discuss how ostomies are created. Dr. Amy Hair (Associate Professor of Pediatrics and Director of NICU Intestinal Rehabilitation Team at Baylor) will discuss optimal nutritional practices when your patient has an ostomy. And Ms. Christa Bedford-Mu (RN and clinical nurse specialist with expertise in skin care and wound healing at UC Davis) will discuss optional management of the ostomy site to prevent complications such as skin breakdown and/or infections. Dr. Satyan Lakshminrusimha (Professor and Chair of Pediatrics, UC Davis) will act as chair of the session.

Learning Objectives

- 1. Understand what diseases may require an ostomy and how they are created.
- 2. Maximize nutrition while an ostomy is in place
- 3. Maintain skin care around the site of the ostomy and prevent complications

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

neonatologists, dieticians, GI physicians, and physicians interested in the nutrition of infants with short bowel disease

3. Tracks

Gastroenterology/Hepatology

Neonatology

Pediatric Nutrition

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. NEC sessions
- 6. If your session was presented at another conference, please describe the conference and presentation.

 N/A

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic is neonatology but involves nutrition

Presentation Titles and Durations

Ostomies in neonates � an introduction (5 min) will also moderate Q&A (15 min)

Satyan Lakshminrusimha, MD FAAP

Duration of Presentation in Minutes

20

Conditions requiring an ostomy among neonates Steven McElroy, MD

Duration of Presentation in Minutes

15

Creation of ostomies, maintenance and reanostomosis Payam Saadai, MD, FAAP, FACS

Duration of Presentation in Minutes

15

Optimizing nutrition in a neonate with an ostomy Amy Hair, MD

Duration of Presentation in Minutes

20

Wound and skin care **♦** practical tips Christa Mu, RN, MSN, CCRN, CNS, CELBW

Duration of Presentation in Minutes

20

Using a Design method to address the challenges Expectant and Parenting Teens in DC face in finishing high school

Session Type: Basic-Translational-Clinical Roundtable

Submitter: Nkechi Enwerem

Participant(s)

1. NE

Nkechi Enwerem, PhD, RN

Position:

ASSOCIATE Professor

Organization:

Howard University

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. ZJ

Zillah J. Jackson Wesley, AA BA MSW LICSW

Position:

Clinical Project Manager Howard University College of Nursing and Allied Health

Organization:

Howard University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

3. DW

Davene B. White, MPH, RN, NNP

Position:

Assistant Professor

Organization:

Howard University College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Authors: Nkechi Enwerem PHD, RN; Davene White MPH, NNP, RN, Zillah J Wesley, MSW, LICSW, Patricia Quinn

Background:

Human-Centered Design (HCD) is a problem solving tool, driven by the needs

of the targeted population. It allows direct input from the end-users which leads to empathetic ideation, prototyping and ultimately implementation of the created intervention.

Goal:

In this study, we used a human-centered design approach to address the challenges faced by Expectant and Parenting Teens (EPTS) in the District of Columbia (DC) from completing high school.

Method:

Data was obtained through research, one-on-one interviews of EPTS, journey maps and the 6-3-5 method to generate ideas.

Result:

HCD sessions engaging a diverse group of stakeholders (EPTS and Experts), identified challenges that EPTS face in completing high school. Themes emerged around (a) Resource Development (create an app for EPTs to provide 24 hour phone support); (b) Transportation (Ride share, Uber services contract for EPTs)) (c) Create day care services in the schools, work places and community or close to home (24 hour day care services, establish day care at work places), (d) Education (co-parenting, financial literacy), (e) Policy and monitoring (virtual learning as an option for EPTs, paid internships or affirmative action for EPTs with high school diploma).

We aim to conduct future sessions to further co-design a tailored tool, that will help EPTS to go to school or work, while maintaining the health and wellbeing of their families by providing age, culturally, appropriate information about quality and conveniently located childcare.

Learning Objectives

- 1. 1. Describe the use of journey map method to identify challenges.
- 2. 2. Discuss the recruitment and retention of EPTS.
- 3. 3. Describe the use of the 6-3-5 method to generate ideas.

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

30

2. **Target audience** Researchers

3. Tracks

Academic and Research Skills Adolescent Medicine Health Equity/Social Determinants of Health Public Health School and Community Health Wellness and Well-being

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

 None
- 6. If your session was presented at another conference, please describe the conference and presentation.

 OPA
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Public Health

Presentation Titles and Durations

Introduction to Human Center Design, Journey Map and the 6-3-5 method Nkechi Enwerem, PhD, RN

Duration of Presentation in Minutes

50

Recruitment and retention of Teens Zillah J. Jackson Wesley, AA BA MSW LICSW **Duration of Presentation in Minutes**

10

TBD

Davene B. White, MPH, RN, NNP

Duration of Presentation in Minutes

5

In the current era of DCC, outline current approaches to cord management in preterm infants not breathing soon after delivery

Session Type: Hot Topic Symposia

Submitter: Anup Katheria

Participant(s)

1. AK

Anup Katheria, Katheria, MD

Position:

Associate Professor

Organization:

University of California, San Diego School of Medicine

Role:

Submitter; Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

2. MM

Michael P. Meyer, MD MRCP FRACP

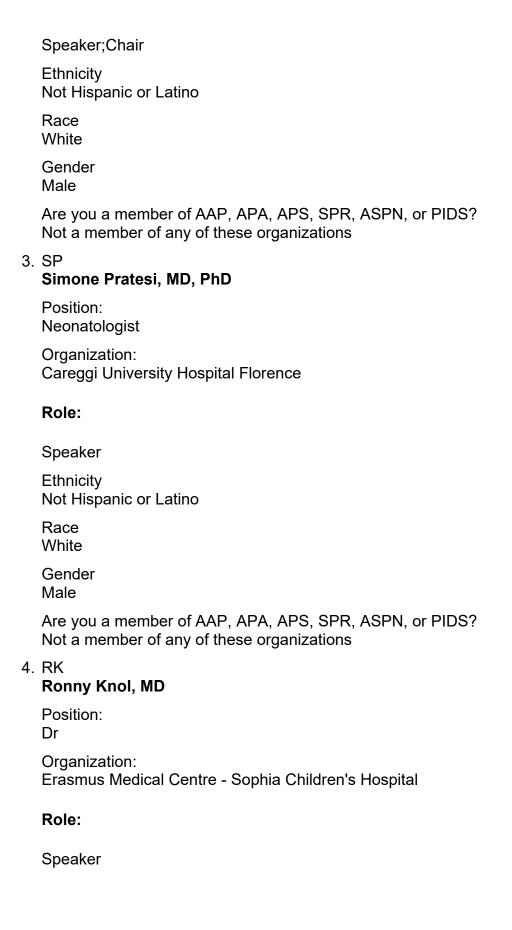
Position:

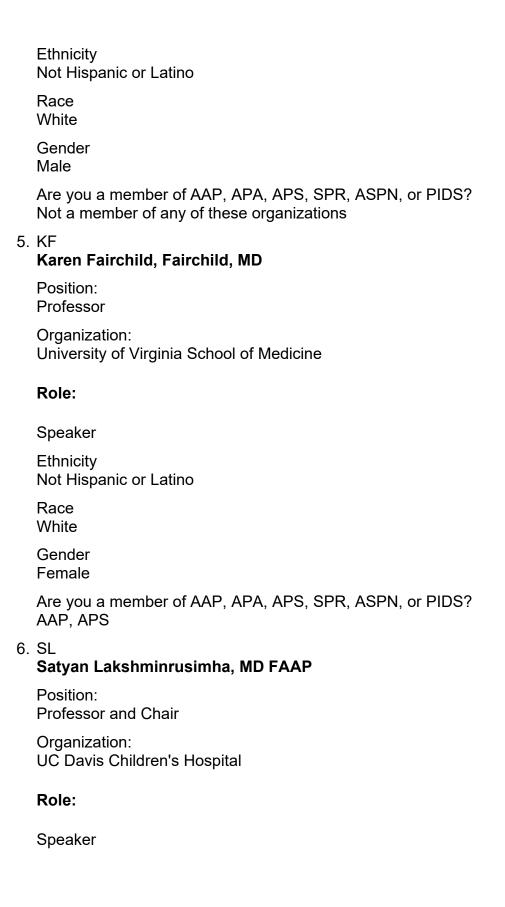
Associate professor

Organization:

University of Auckland

Role:





Ethnicity Not Hispanic or Latino

Race Asian

Gender Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Session Description

Session Description

There is a large body of evidence that has now demonstrated that delayed umbilical cord clamping (DCC) has benefits for term and preterm infants. These benefits include reductions in morbidities and mortality in preterm infants. One important group that has not been included is the nonbreathing, non-vigorous preterm infant. It may be important to determine whether an infant has started to breathe before the umbilical cord is clamped. This has been suggested in a number of small studies where infants who breathed had less blood retained in the placenta and higher hematocrits. Preterm infants also take longer to establish breathing than term newborns, placing greater emphasis on the determination of breathing before the cord is clamped. Animal data recently has been conflicting with some studies showing a hemodynamic benefit, while other demonstrating no difference if ventilation is started before cord clamping. This session will review the translation from bench to bedside, with evidence from cord clamping trials to date. Other strategies such as cord milking and early cord clamping when delayed cord clamping cannot be performed will also be discussed. Lastly, the challenges and future direction of cord clamping studies will be reviewed.

Learning Objectives

- 1. Upon completion, participants will be able to understand the translation of animal to human data for potential benefits of delayed cord clamping.
- 2. Upon completion, participants will be able to explore the knowledge gaps, challenges, and future directions for cord clamping research.
- 3. Upon completion, participants will be able to review the evidence or (or lack thereof) from the current trials to inform current practice

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

200

2. Target audience

Neonatologists, neonatal fellows and residents, and advance practice providers

3. Tracks

Clinical Research

Neonatology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Neonatal Clinical Trials

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

The topic does involved obstetrics due to the nature of the intervention.

Presentation Titles and Durations

Future directions optimizing cord clamping in preterm infants: Is more really better?

Anup Katheria, Katheria, MD

Duration of Presentation in Minutes

10

DCC in preterms not breathing well at birth: evidence and lessons learned from two randomized controlled trials (Part 1), Q&A

Michael P. Meyer, MD MRCP FRACP

Duration of Presentation in Minutes

40

Cord milking versus early cord clamping: is there a role for preterm nonvigorous newborns Simone Pratesi, MD, PhD

Duration of Presentation in Minutes

10

Physiological based cord clamping: Is it better than a time based approach? Ronny Knol, MD

Duration of Presentation in Minutes

10

DCC in preterms not breathing well at birth: evidence and lessons learned from two randomized controlled trials (Part 2)

Karen Fairchild, Fairchild, MD

Duration of Presentation in Minutes

10

Translation of the evidence: What can and can't we take away from animal cord clamping models to understand human physiology

Satyan Lakshminrusimha, MD FAAP

Duration of Presentation in Minutes

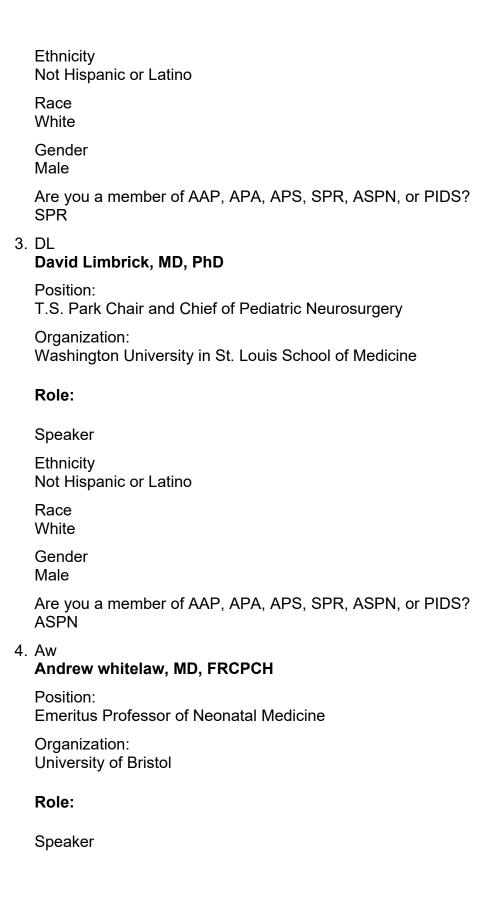
10

Cerebral injuries in intraventricular hemorrhage and emerging therapies

Session Type: **Hot Topic Symposia** Submitter: **PRAVEEN BALLABH**

Participant(s)

1. PB PRAVEEN BALLABH, MD Position: Professor Organization: ALBERT EINSTEIN COLLEGE OF MEDICINE Role: Submitter; Speaker; Chair Ethnicity Prefer not to respond Race Asian Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR 2. CS Christopher D. Smyser, MD, MSCI Position: Professor of Neurology, Pediatrics, and Radiology Organization: Washington University in St. Louis School of Medicine Role: Speaker



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Ethnicity
  Not Hispanic or Latino
  Race
  White
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
5. WP
  Won Soon Park, MD, PhD
  Position:
  professor
  Organization:
  samsung medical center
  Role:
  Speaker
  Ethnicity
  Not Hispanic or Latino
  Race
  Asian
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  Not a member of any of these organizations
6. Ld
  Linda S. de Vries, MD PhD
  Position:
  Em Professor Neonatal Neurology
  Organization:
  University medical center Utrecht
  Role:
  Speaker; Chair
```

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APS

Session Description

Session Description

Intraventricular hemorrhage (IVH) damages both the adjacent white matter and the distant cerebral gray matter. IVH destroys the germinal matrix, suppresses neurogenesis, oligodendrogenesis, and disrupts both white and gray matter development. The pathogenesis of injury is attributed to IVH-induced oxidative stress, inflammation, and mass effect damaging the germinal matrix as well as to posthemorrhagic ventricular dilation (PHVD). Neuroimaging has enhanced our perception of both cerebral gray and white matter injuries and is a valuable predictor of neurodevelopmental outcomes. Potential therapies for IVH are under investigation in preclinical models, and evidence from clinical trials suggests that removal of the blood clot, and strategies to promote myelination, neurogenesis, reducing inflammation and oxidative stress would enhance the outcome of the survivors of IVH.

Learning Objectives

- 1. Discuss recent advances in the understanding of the pathogenesis of white matter and gray matter injuries in premature infants.
- 2. Review neuroimaging studies on structural and functional connectivity in infants with IVH.
- Critically discuss the advances and controversies in the management of Posthemorrhagic Hydrocephalus and emerging therapies for survivors of IVH.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

800

2. Target audience

Neonatalogists, neonatal fellow, neonatal nurse practitioner, pediatric neurologists, pediatric residents, pediatricians.

3. Tracks

Neonatology

Neurology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Friday, April 28
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Brain club, neonatal clinical trials, Any neurology related session

6. If your session was presented at another conference, please describe the conference and presentation.

The presentation will be similar to what we are proposing.

- Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?
 Does not apply
- 8. Additional comments
 None

Presentation Titles and Durations

Pathogenesis of white and gray matter injuries in intraventricular hemorrhage. PRAVEEN BALLABH, MD

Duration of Presentation in Minutes

15

Neuroimaging of structural and functional connectivity in preterm Infants with intraventricular hemorrhage

Christopher D. Smyser, MD, MSCI

Duration of Presentation in Minutes

15

Advances in the management of Posthemorrhagic Hydrocephalus David Limbrick, MD, PhD

Duration of Presentation in Minutes

15

Evidence-based management of survivors with intraventricular hemorrhage. Andrew whitelaw, MD, FRCPCH

Duration of Presentation in Minutes

15

Preclinical and clinical experience of Stem cell therapy in intraventricular hemorrhage

Won Soon Park, MD, PhD

Duration of Presentation in Minutes

15

Questions and answer session will be chaired by Dr. Linda de Vries Linda S. de Vries, MD PhD

Duration of Presentation in Minutes

10

Adolescent Drug Overdoses: A Need to Confront a Toxic Drug Supply with Policy, Prevention, and Harm Reduction Strategies

Session Type: Hot Topic Symposia

Submitter: Michael Toce

Participant(s)

1. SH

Scott E. Hadland, MD, MPH, MS

Position:

Division Chief

Organization:

Massachusetts General Hospital

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. MT

Michael S. Toce, MD MS

Position:

Instructor of Pediatrics

Organization:

Boston Children's Hospital

Role:

Submitter; Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

3. MR

Madeline H. Renny, MD

Position:

Assistant Professor of Emergency Medicine, Pediatrics, and Population Health Science and Policy

Organization:

Icahn School of Medicine at Mount Sinai

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

Youths continue to be impacted by the overdose epidemic with illicitly manufactured fentanyl's fueling a rise in overdose deaths. In addition to opioids, overdoses related to stimulants and benzodiazepines are also

increasing. Compounding this is a drug supply that subjects unsuspecting users to adulterants and/or contaminants.

There is a paucity of pediatric research that examines overdoses, prevention and harm reduction strategies, and policy implications. Adolescents represent a unique population when it comes to harm reduction strategies; adopting a "one-size fits all" model for reducing drug-related harms is likely to fail.

This panel will present pediatric-based research that focuses on drug-related overdoses, including:

What other substances (in addition to opioids) are contributing to the rise in both fatal and non-fatal overdoses? Dr. Hadland will focus on stimulant overdoses and the unique challenges they represent among pediatric patients.

What constitutes the US "drug supply"? Dr. Toce will present data describing what adulterants and/or contaminants are detected and how treatment strategies need to adapt to the changing environment.

Prescription drug monitoring programs (PDMPs) have emerged as a widely adopted policy intervention aimed at promoting judicious prescribing of opioids and by extension, reducing opioid-related overdoses. Dr. Toce will review research on the association of PDMPs and youth opioid overdoses.

How has naloxone dispensing changed in adolescents in response to the opioid epidemic and what barriers exist? Dr. Renny will discuss trends in naloxone dispensing, identify policies that affect naloxone distribution, and describe potential ways to increase access to naloxone and other harm reduction strategies.

Learning Objectives

- 1. Describe the epidemiology of pediatric stimulant overdoses and highlight the unique challenges in managing stimulant use.
- 2. Differentiate the various adulterants and contaminants in the US drug supply and identify key clinical characteristics to assist with acute treatment.
- Analyze trends in naloxone dispensing to youth and the policies that may impact pediatric patient's access to naloxone and other harm reduction strategies.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

General pediatricians, addiction medicine providers, emergency medicine providers, adolescent medicine providers

3. Tracks

Adolescent Medicine

Emergency Medicine

General Pediatrics

Injury Prevention

Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

EM platforms, adolescent platforms, symposium on adolescent substance use disorder

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

The Role of Pediatric Clinicians in Addressing Rising Stimulant Overdoses in Youth

Scott E. Hadland, MD, MPH, MS

Duration of Presentation in Minutes

25

Adulterants, Contaminants, and the U.S. Drug Supply; Prescription Drug Monitoring Programs and Youth Opioid Overdoses Michael S. Toce, MD MS

Duration of Presentation in Minutes

30

Naloxone Distribution to Youth in the United States: Epidemiology, Policy, and Next Steps

Madeline H. Renny, MD

Duration of Presentation in Minutes

35

Global Child Health: Identifying and Addressing Misinformation about Child Health in Low- and Middle-Income Countries

Session Type: Panel Discussion

Submitter: Rishi Mediratta

Participant(s)

1. RM

Rishi Mediratta, MD, MSc, MA

Position:

Clinical Assistant Professor of Pediatrics

Organization:

Stanford University School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

2. SP

Suzinne Pak-Gorstein, MD, PhD, MPH

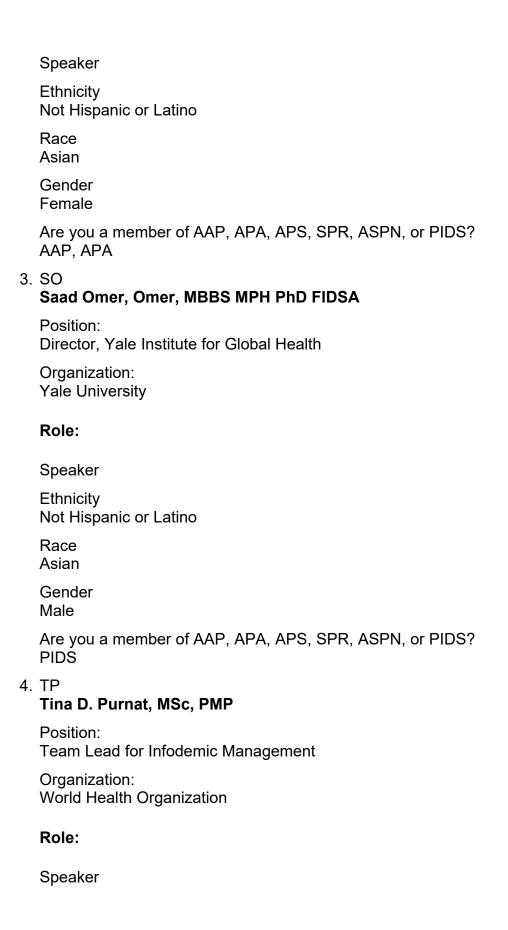
Position:

Associate Professor

Organization:

University of Washington, School of Medicine

Role:



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. GD

Gary L. Darmstadt, Darmstadt, MD, MS

Position:

Associate Dean for Maternal and Child Health, Professor

Organization:

Stanford University School of Medicine

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR, PIDS

Session Description

Session Description

Unfortunately, the spread of misinformation related to child health has been exacerbated over the last several years. Misinformation jeopardizes the success of global neonatal and child health programs and policies designed to promote healthy behaviors and prevent illnesses. Furthermore, misleading information erodes the public's trust in medical and public health authorities and has contributed to the displacement and death of children. This session will

focus on global perspectives on combating misinformation related to neonatal, child, and adolescent health. The panel of experts will review how misinformation about vaccines has impacted children, highlight how misinformation has been understood and addressed at a community level in India, describe the World Health Organization's approach to combating misinformation globally, and outline the best evidence strategies to address the misinformation crisis.

Moderators: Rishi Mediratta and Gary Darmstadt

Rishi Mediratta - Clinical Assistant Professor of Pediatrics, Stanford University School of Medicine (10 minutes)

Suzinne Pak-Gorstein - Associate Professor of Pediatrics, University of Washington (10 minutes)

Aarti Kumar - CEO & Co-Founder, Community Empowerment Lab (15 minutes) Saad Omer - Director, Yale Institute for Global Health, Yale University (15 minutes)

Tina Purnat - Team Lead for Infodemic Management, World Health Organization (15 minutes)

Discussion/Moderated Q&A/Wrap up: Rishi Mediratta and Gary Darmstadt (25 minutes)

Possible questions to address:

How can pediatricians reduce the impact of medical misinformation on child health topics globally?

What are the responsibilities of pediatricians in combating misinformation? What can researchers, clinicians, and educators do in their global health work to make a difference?

Learning Objectives

- 1. Describe a conceptual framework of the impact of misinformation on global child health
- 2. Highlight evidenced-based strategies and research that are needed to address misinformation related to neonatal, child, and adolescent health
- 3. Outline strategies for effectively reducing the impact of misinformation on global child health

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

2. Target audience

Pediatricians and researchers from North America and from low- and middle-income countries

3. Tracks

Academic and Research Skills

Advocacy

Community Pediatrics

Diversity, Equity, and Inclusion

General Pediatrics

Global Neonatal & Children's Health

Health Equity/Social Determinants of Health

Public Health

- Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Monday, May 1
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Please avoid scheduling during Global Neonatal and Child Healthrelated workshops and panel discussions.

6. If your session was presented at another conference, please describe the conference and presentation.

No

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Science is Real: Research, Misinformation and Trust

8. Additional comments

One additional speaker: Aarti Kumar will be added (15 minutes). She was not able to complete the disclosures prior to the submission, and we plan to add her back.

9. Does this submission involve one or more specialties or disciplines?

Topic involves General Pediatrics, Public Health, and Global Neonatal and Child Health

Presentation Titles and Durations

A Global Landscape on Child Health Misinformation Rishi Mediratta, MD, MSc, MA

Duration of Presentation in Minutes

10

Conceptual Models, Drivers, and Evidenced-Based Strategies to Address Misinformation

Suzinne Pak-Gorstein, MD, PhD, MPH

Duration of Presentation in Minutes

10

Combating the Impact of Vaccine Hesitancy on Childhood Illnesses Saad Omer, Omer, MBBS MPH PhD FIDSA

Duration of Presentation in Minutes

15

World Health Organization's Initiatives for Addressing Child Health Misinformation

Tina D. Purnat, MSc, PMP

Duration of Presentation in Minutes

15

Discussion/Moderated Q&A/Wrap up Gary L. Darmstadt, Darmstadt, MD, MS **Duration of Presentation in Minutes** 25

Using Science to Dismantle Racism in Medicine

Session Type: State of the Art Plenary

Submitter: Alyna Chien

Participant(s)

1. AC

Alyna T. Chien, MD, MS

Position:

Assistant Professor

Organization:

Boston Children's Hospital / Harvard Medical School

Role:

Submitter; Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APA, SPR

2. KG

Keisha L. Gibson, Gibson, MD MPH

Position:

Associate Professor of Medicine and Pediatrics

Organization:

University of North Carolina at Chapel Hill School of Medicine

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR, ASPN

Session Description

Session Description

This State-of-the-Art Plenary will open with a review of how, for centuries, race has served as a poor proxy for both genetic and social risk. It will then review how two distinct lines of research—one genetic and the other sociological—have identified true markers of genetic risk and developed validated measures of social risk phenomenon such as mistrust, discrimination, and racism. It concludes with an example of how both lines of research used to provide a unifying approach to diagnosing kidney disease as an example of how science can be used to overcome racism in medicine via clinical algorithms. Panelists will help attendees understand key concepts such as genetic ancestry and geographic ancestry rather than the race essentialism (i.e., the belief that racial groups reflect discrete genetic categories).

This session is put forth by the SPR PAS Program Content Workgroup. Speaker invitations are in progress and all speakers are leaders within their fields and URiMs (e.g., current or past scientific directors of NIH Institutes)...

Learning Objectives

- 1. Understand the history of the concept of race and of racial essentialism in medicine.
- Understand modern concepts of genetic and geographic ancestry and be able to name at least one validated method for measuring social risks for poor health.
- 3. Have insight into how modern concepts of genetic and social risk can be applied to medical decision-making today.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200

2. Target audience

This Plenary:

- -applies to learners of all career stages, including trainees and those pursuing a wide variety of careers within medicine.
- should receive a Cross-Disciplinary Spotlight because it draws on numerous scientific disciplines: history, genetics, medicine, genetics, epidemiology, sociology, and medicine.
- -addresses all three themes of PAS 2023—Science is Real, Overcoming Racism, and Impact of Policies on Health and Research

3. Tracks

Advocacy

Basic Science

Career Development

Clinical Research

Digital Therapeutics

Epidemiology

Health Services Research

Leadership and Business Training

Medical Education

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Not sure vet
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

Addressing & Overcoming Racism in Clinical Care and Research Science is Real: Research, Misinformation and Trust

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Yes, this plenary should receive of Cross-Disciplinary Spotlight

Presentation Titles and Durations

1. How did we get here? 2. Ancestry and Disease in the Age of Genomic Medicine 3. Every Day Discrimination 4. The GFR Story. Keisha L. Gibson, Gibson, MD MPH **Duration of Presentation in Minutes** 75

Create a sustainable research or clinical network: A practical design workshop

Session Type: Basic-Translational-Clinical Roundtable

Submitter: Damian Roland

Participant(s)

1. DR

Damian Roland, PhD, FRCPCH

Position:

Head of Service, Children's Emergency Department

Organization:

Leicester Hospitals and University

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. LN

Lise Nigrovic, MD, PhD

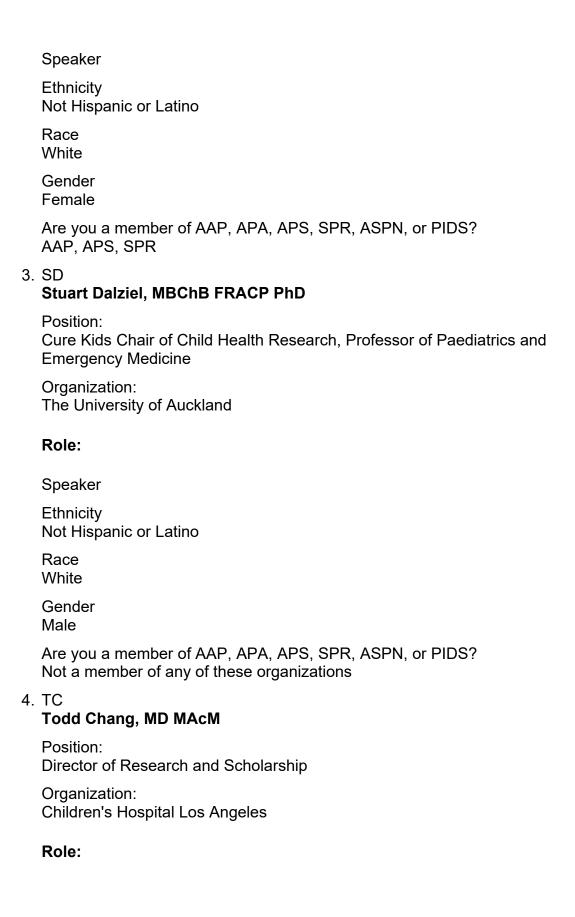
Position:

Associate Professor of Pediatrics and Emergency Medicine

Organization:

Boston Children's Hospital

Role:



Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

Creating networks aligned to important goals is vital to improve patient care. Over the last two decades, several pediatric emergency care (PEC) research networks have been formed worldwide to advance knowledge in emergency medical services for children. Drivers for creation of these networks include investigation of high frequency but understudied diseases, as well as low frequency, high-stakes illnesses. An example of the former is the study of suicide screening in large numbers of geographically or ethnically diverse populations. An example of the latter is study of fluid therapy in sepsis.

The PERN (Pediatric Emergency Research Networks), formed over 10 years ago, is a "network of PEC research networks" which addresses pertinent PEC issues, by evaluating millions of pediatric patients around the world as potential research subjects. Several important publications have resulted from this global effort.

Networks take on many shapes and sizes but there are many common elements to their success. This workshop will highlight how the research network from PERN, can be used as a model for all sub-specialties, by sharing successes and lessons learned. This interactive session will facilitate development of the participants network development ideas across three broad themes/topics that can benefit from collaboration between multi-center research or clinical networks.

Knowledge translation: How to best disseminate information and evidence to minimize practice variation;

Clinical: How to prioritize clinical conditions so that research and dissemination will have maximal impact.

Administration: How best to collaborate and overcome organizational/governance issues, including data management and ethics, with limited resources:

Learning Objectives

- 1. Participants will understand how research networks operate and what are enablers and obstacles to their success
- 2. Participants will define purpose(s) of their network and be able to list key stakeholders relevant to their network and how to effectively communicate with them
- 3. Will be able to describe the initial steps to setting up a network relevant to their research or clinical priorities.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

30

2. Target audience

All paediatric specialties

3. Tracks

Academic and Research Skills

Clinical Research

Emergency Medicine

General Pediatrics

Health Services Research

Leadership and Business Training

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Presenters likely to be involved in Paediatric Emergency Medicine

Presenters likely to be involved in Paediatric Emergency Medicine tracks.

6. If your session was presented at another conference, please describe the conference and presentation.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

This session will utilise the participants ideas, while there is some taught element, the critical feature of this session is for the participants to discuss, debate, challenge ideas around the creation of a network they would like to generate. These discussions, facilitated by the Chair and Speakers will form the mainstay of this session.

9. Does this submission involve one or more specialties or disciplines?

While this is being lead by PEM specialists the topic matter is relevant to all child health groups.

Presentation Titles and Durations

Introduction, Scene Setting and Concluding Comments (to describe how the session will work and detail expected outcomes)

Damian Roland, PhD, FRCPCH

Duration of Presentation in Minutes

30

Clinical (Facilitation of participants ideas about how their network will aid clinical practice and drive improvement)

Lise Nigrovic, MD, PhD

Duration of Presentation in Minutes

20

Administration (Facilitation of participants ideas about how best to operationalise their network)

Stuart Dalziel, MBChB FRACP PhD

Duration of Presentation in Minutes

20

Knowledge Translation (Facilitation of participants ideas about how their network will aid knowledge translation)

Todd Chang, MD MAcM

Duration of Presentation in Minutes

Keeping Abreast - 2022 AAP Policy Statement on Breastfeeding and the Use of Human Milk

Session Type: Hot Topic Symposia

Submitter: Heidi Szugye

Participant(s)

1. HS

Heidi Szugye, DO, IBCLC, FAAP

Position:

Assistant Professor

Organization:

Cleveland Clinic Children's

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. SL

Suet Kam Lam, MD MPH MS

Position:

Assistant Professor of Pediatrics

Organization:

Case Western Reserve University School of Medicine

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

In July 2022, the American Academy of Pediatrics published an update of the Breastfeeding and the Use of Human Milk policy. The update has been met with controversial media attention amid a formula shortage and period when women's health is in the spotlight more than ever. This session aims to take a deeper dive into all of the changes in the policy by comparing and contrasting differences between the current and prior policy statement, presenting the research evidence for these changes, and discussing the clinical relevance and application of these changes. We will take a comprehensive and holistic approach to the policy update but also categorize changes into 6 key themes to allow for easy application and recall when attendees return to practice. These 6 themes include: 1) avoiding a one size fits all approach to breastfeeding support, 2) assessing for barriers and disparities in breastfeeding support, 3) the relationship between duration of breastfeeding and maternal and infant health benefits, 4) the role of shame in breastfeeding, 5) misconceptions surrounding contraindications to breastfeeding or breast milk feeding, and 6) support beyond the pediatrician.

Learning Objectives

- 1. Compare and contrast 25 differences between the 2012 and 2022 policy updates.
- 2. Explain the evidence and rationale behind updates.
- 3. Recognize opportunities to implement and support new policy updates in clinical practice.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

General pediatricians, pediatric hospitalists, pediatric residents

3. Tracks

Advocacy

Breastfeeding/Human Milk

Community Pediatrics

General Pediatrics

Health Equity/Social Determinants of Health

Hospital Medicine

Pediatric Nutrition

Well Newborn

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Also submitted a workshop on written feedback

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research Addressing & Overcoming Racism in Clinical Care and Research Science is Real: Research. Misinformation and Trust

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

General pediatrics, pediatric hospital medicine, nutrition, public health/policy

Presentation Titles and Durations

AAP Breastfeeding Policy Update: Introduction & Risk stratifying, contraindications, and durational benefits Heidi Szugye, DO, IBCLC, FAAP

Duration of Presentation in Minutes

55

Kam: AAP Breastfeeding Policy Update: Disparities, shame, and support

Suet Kam Lam, MD MPH MS **Duration of Presentation in Minutes**35

Impact of Implementing a Value-Based Care Curriculum in a Pediatric Residency Program

Session Type: Hot Topic Symposia

Submitter: Matthew Le

Participant(s)

1. ML

Matthew Le, MD

Position:

Assistant Professor

Organization:

University of Oklahoma College of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian, White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

Session Description

Session Description

This session aims to detail the impact of the implementation of a value-based care curriculum into a pediatric residency program. It hopes to inform discussion on similar implementation at other programs.

Learning Objectives

- 1. Upon completion, participants will be able to identify the need for a value-based curriculum in their residency.
- 2. Upon completion, participants will be recognize the barriers to teaching value-based care.
- 3. Upon completion, residency programs will be able to determine if implementing a value-based care curriculum would benefit their residents

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

40

2. Target audience

Residency program directors, APDs, chief residents, current residents looking for ways to get involved in curriculum development.

3. Tracks

Advocacy

Medical Education

Quality Improvement/Patient Safety

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. N/A
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

Impact of Implementing a Value-Based Care Curriculum in a Pediatric Residency Program
Matthew Le, MD

Duration of Presentation in Minutes

Patient and Family Advisory Councils and Co-production with Historically Marginalized Patients and Families

Session Type: Hot Topic Symposia

Submitter: Ndidi Unaka

Participant(s)

1. AB

Andrew F. Beck, MD MPH

Position:

Associate Professor, Attending Pediatrician

Organization:

Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

2. MF

Meghan L. Fanta, MD, MS

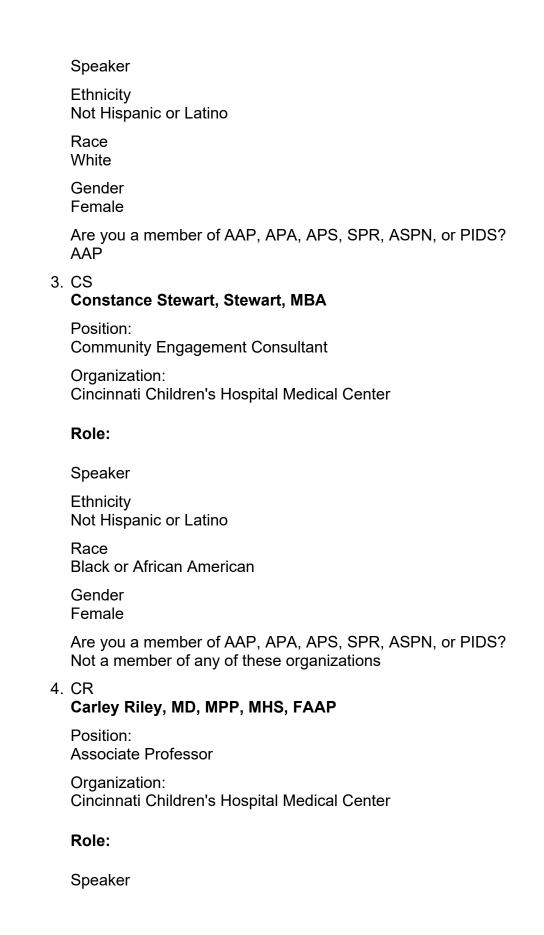
Position:

Assistant Professor

Organization:

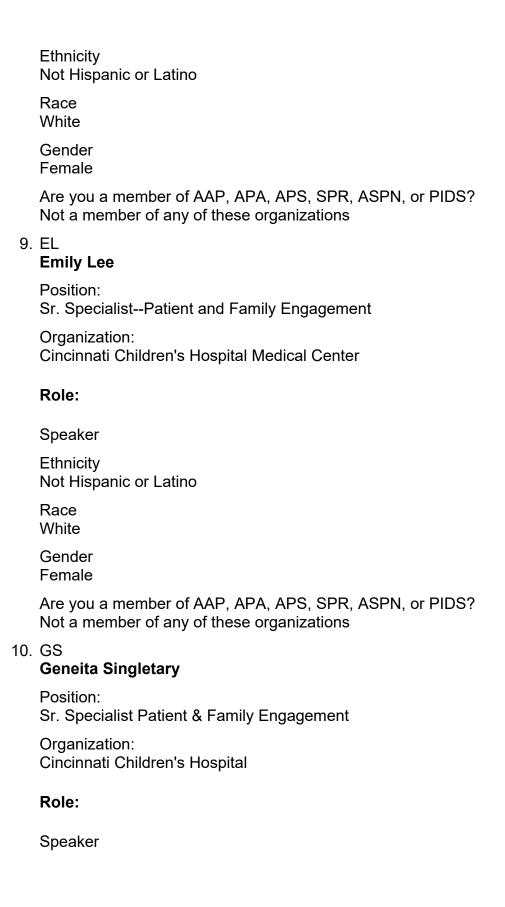
Cincinnati Children's Hospital Medical Center

Role:



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Ethnicity
  Not Hispanic or Latino
  Race
  White
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP
5. NU
  Ndidi Unaka, MD, MEd
  Position:
  Associate Professor
  Organization:
  Cincinnati Children's Hospital Medical Center
  Role:
  Submitter; Speaker; Chair
  Ethnicity
  Not Hispanic or Latino
  Race
  Black or African American
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, APA
6. PD
  Pam Dardess, MPH
  Position:
  Vice President, Strategic Initiatives and Operations
  Organization:
  Institute for Patient- and Family-Centered Care
  Role:
  Speaker
```

	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
7.	CC Carlos A. Casillas, MD, MPH
	Position: Fellow in Hospital Medicine
	Organization: Cincinnati Children's Hospital Medical Center
	Role:
	Speaker
	Ethnicity Hispanic or Latino
	Race Prefer not to respond
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP
8.	DN Dawn Nebrig, MSW, LISW-S
	Position: Director, Family Relations
	Organization: Cincinnati Children's Hospital Medical Center
	Role:
	Speaker



Ethnicity
Not Hispanic or Latino

Race

Black or African American

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Health systems employ a variety of methods that seek to amplify patient and family voices. For example, patient and family advisory councils (PFACs) are an invaluable mechanism through which health systems, and units within those systems, partner with patients and families in the development, implementation, and evaluation of organizational policies and processes that support patient- and family-centered care. Yet, organizations have failed to systematically implement PFACs, and other engagement strategies, in ways that ensure patients and families from historically marginalized backgrounds are meaningfully and consistently engaged. While PFACs across children's hospitals demonstrate a strong capacity for partnership with patient and family advisors (PFAs), PFACs often do not reflect the patient populations they serve. Serving on PFACs can be challenging for those with less flexible work schedules, limited childcare options, limited English proficiency, or priorities that compete for limited time. Inclusion of voices of historically marginalized patients and families is necessary if we are to successfully close outcome gaps.

This session will provide an opportunity for participants to develop a better understanding of the concept of co-production and its relevance in creating partnerships between health systems and individuals with lived experience. Presenters will highlight the current state of PFACs at children's hospitals with a focus on PFA diversity and inclusion. Finally, we will share emerging best practices for initial and sustained engagement of patients and families from marginalized backgrounds in institutional initiatives through an exemplar case study (e.g., reimbursing PFAs for their time, providing flexible scheduling, modifying recruitment strategies).

Learning Objectives

- 1. Define co-production and identify strategies through which it can be pursued with individuals with lived experience.
- 2. Share the current state of PFACs across children's hospitals and make the case for diverse and inclusive PFACs as a matter of justice.
- 3. Highlight tangible and equitable ways to foster sustained engagement and partnership with families from marginalized backgrounds.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

general and subspecialty physicians, allied health professionals, students and trainees

3. Tracks

Diversity, Equity, and Inclusion Health Equity/Social Determinants of Health Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. N/A
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Addressing & Overcoming Racism in Clinical Care and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

YES - pertinent to everyone. Also in addition to the roles of the presenters above, the physicians represent gen peds, hospital medicine and critical care medicine.

Presentation Titles and Durations

Setting the stage - the case for equitable patient and family engagement and inclusion

Andrew F. Beck, MD MPH

Duration of Presentation in Minutes

15

Setting the stage - the case for equitable patient and family engagement and inclusion

Meghan L. Fanta, MD, MS

Duration of Presentation in Minutes

15

Co-production - a core practice in the pursuit of child health and well-being Constance Stewart, Stewart, MBA

Duration of Presentation in Minutes

20

Co-production - a core practice in the pursuit of child health and well-being Carley Riley, MD, MPP, MHS, FAAP

Duration of Presentation in Minutes

20

Current state of patient-family advisory councils at US Children's Hospitals Ndidi Unaka, MD, MEd

Duration of Presentation in Minutes

20

Current state of patient-family advisory councils at US Children's Hospitals Pam Dardess, MPH

Duration of Presentation in Minutes

20

Current state of patient-family advisory councils at US Children's Hospitals Carlos A. Casillas, MD, MPH

Duration of Presentation in Minutes

20

Ensuring lived experience informs organizational policies and processes through a robust Patient & Family Engagement Program Dawn Nebrig, MSW, LISW-S

Duration of Presentation in Minutes

20

Ensuring lived experience informs organizational policies and processes through a robust Patient & Family Engagement Program Emily Lee

Duration of Presentation in Minutes

20

Ensuring lived experience informs organizational policies and processes through a robust Patient & Family Engagement Program Geneita Singletary

Duration of Presentation in Minutes

Gastroenterology/ Hepatology: Allergic Diseases in Children and Adolescents - FPIES, EoE, and Diet - What does it all mean?

Session Type: Hot Topic Symposia

Submitter: maria Perez

Participant(s)

1. DA

Dan Atkins, MD

Position:

Associate Professor of Pediatrics

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. JW

Joshua B. Wechsler, MD, MS

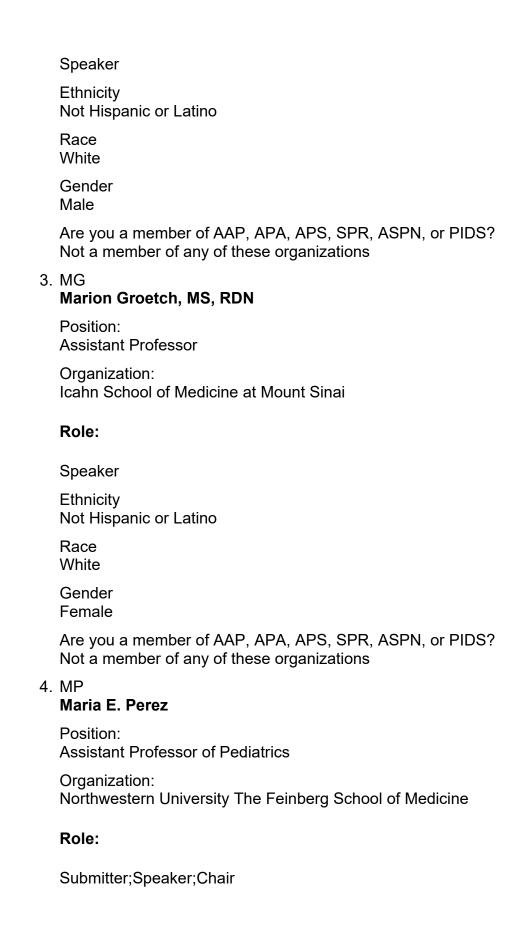
Position:

Assistant Professor of Pediatrics and Medicine

Organization:

Ann & Robert H. Lurie Children's Hospital of Chicago

Role:



Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Learn about the latest up to date information related to allergic GI diseases in children and adolescents including food protein induced enterocolitis (FPIES), allergic proctocolitis (AP), eosinophilic esophagitis (EoE), and nutritional management of these disorders from some of the world's leading experts

Learning Objectives

- have an improved understanding of allergic GI diseases including food protein induced enterocolitis (FPIES) and allergic proctocolitis (AP) in children/ adolescents including diagnosis and management
- 2. have an improved understanding of eosinophilic esophagitis (EoE) in children and adolescents including diagnosis and management
- 3. have an improved understanding of the nutritional management of allergic GI diseases including FPIES and EoE

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

40-50

2. Target audience

General pediatricians, pediatric subspecialists including gastroenterologists and neonatologists, pediatric trainees, and other pediatric providers including RNs, APNs, RDs, etc

3. Tracks

Allergy, Immunology and Rheumatology Gastroenterology/Hepatology Pediatric Nutrition

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. avoid other GI/ Hepatology/ Allergy/ Nutrition topics
- 6. If your session was presented at another conference, please describe the conference and presentation.

 not applicable
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments none
- Does this submission involve one or more specialties or disciplines?
 Gastroenterology, Allergy, Nutrition

Presentation Titles and Durations

Food Protein Induced Enterocolitis (FPIES) and Allergic Proctocolitis (AP) - An Update

Dan Atkins. MD

Duration of Presentation in Minutes

25

Eosinophilic Esophagitis: An Update on Diagnosis and Management Joshua B. Wechsler, MD, MS

Duration of Presentation in Minutes

25

Nutritional Management for Allergic GI Diseases Marion Groetch, MS, RDN

Duration of Presentation in Minutes

25

Q&A Session Maria E. Perez

Duration of Presentation in Minutes

Is cardiovascular surveillance in the NICU overrated? My heart says Yes? My head says no?

Session Type: Debate/Pro-Con Discussion

Submitter: ANNIE Janvier

Participant(s)

1. GA

Gabriel Altit, MDCM, MSc, FRCPC, FAAP

Position:

Neonatologist - Assistant Professor

Organization:

McGill University Faculty of Medicine and Health Sciences

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR

2. SB

Shazia Bhombal, MD

Position:

Associate Professor

Organization: **Emory University School of Medicine** Role: Speaker **Ethnicity** Not Hispanic or Latino Race Asian, Native Hawaiian and other Pacific Islander Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? **AAP** 3. KB Keith Barrington, MB ChB Position: **Professor of Pediatrics** Organization: Universite de Montreal Faculty of Medicine Role: Speaker; Chair **Ethnicity** Not Hispanic or Latino Race White Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? **SPR** 4. ED **Eugene Dempsey, MD** Position: Professor

Organization: University College Cork Role: Speaker; Chair **Ethnicity** Not Hispanic or Latino Race White Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 5. AJ ANNIE Janvier, MD, PhD Position: Professor of Pediarics and Clinical Ethics Organization: University of Montreal Role: Submitter; Speaker **Ethnicity** Not Hispanic or Latino Race White

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

Gender Female

SPR

A plethora of new technologies to monitor cardiovascular physiology is being integrated into Neonatal Intensive Care Units (NICU). This monitoring is costly, requires specific expertise, increases the manipulation of newborns, is a possible source of discomfort and in some situations can represent a barrier to skin-to-skin care. On the other hand, studies are increasingly describing the benefits of physiologically based approaches. Sometimes, technologies are implemented in the NICU without strong evidence. Early adopters may overstate the benefits of these technologies, while later (or non) adopters point towards limited evidence. In this pro-con debate, we will hear the perspectives on the evidence surrounding near-infra-red-spectroscopy (NIRS) and targeted neonatal echocardiography.

What evidence is required in order to introduce a new surveillance method into the NICU? Do we need to prove that a method improves clinically important outcomes? Or that it is cost-effective? Or that it is acceptable to parents? Some cardiovascular technologies have been subjected to randomized controlled trials, but most current standard monitoring was introduced without such evidence. How much data do we need before requiring all neonatal trainees to learn a new technique, or should it be recognized as a sub-speciality of neonatology?

We will review what is known about the impacts of NIRS and targeted neonatal echocardiography, on processes of care, and clinical outcomes, whether there are truly adverse impacts, and will review what is optimal cardiovascular monitoring of sick infants.

Learning Objectives

- 1. Evaluate the relevance and usefulness of functional heart ultrasounds and NIRS in the NICU.
- 2. Understand the benefits and potential harms regarding the use of point of care echocardiography and NIRS and how new technology is introduced in Neonatology.
- 3. Discuss the ethical and parental perspectives regarding the increased technological monitoring in the NICU, outside of a research context.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

About 100

2. Target audience

Neonatal and cardiology clinicians (staff, fellows, NNPs), as well as residents.

3. Tracks

Academic and Research Skills

Cardiology

Clinical Bioethics

Clinical Research

Critical Care

Epidemiology

Health Services Research

Neonatology

Quality Improvement/Patient Safety

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Neonatal cardiology sessions, neonatal clinical trials.
- 6. If your session was presented at another conference, please describe the conference and presentation.

This session was never presented as such by all speakers have presented with others KB-AJ, KB-GA, GA-CB, ED, KB.

- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

This submission includes both Cardiology and Neonatology as disciplines

Presentation Titles and Durations

Introduction (10 minutes) AND Q&A period and interaction with participants (20 minutes)

Gabriel Altit, MDCM, MSc, FRCPC, FAAP

Duration of Presentation in Minutes

30

We need MORE functional heart echos in the NICU Shazia Bhombal, MD

Duration of Presentation in Minutes

15

We need VERY LITTLE functional heart echos in the Keith Barrington, MB ChB

Duration of Presentation in Minutes

How much NIRS do we need in the NICU? Eugene Dempsey, MD **Duration of Presentation in Minutes** 15

The ethics of technological development in the NICU ANNIE Janvier, MD, PhD **Duration of Presentation in Minutes** 15

Personalized decision-making in Neonatology: speaking about life and death before and after birth

Session Type: Panel Discussion

Submitter: ANNIE Janvier

Participant(s)

1. AJ

ANNIE Janvier, MD, PhD

Position:

Professor of Pediarics and Clinical Ethics

Organization:

University of Montreal

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR

2. RP

Rebecca L. Pearce, Pearce, BSc, MSc, BEd

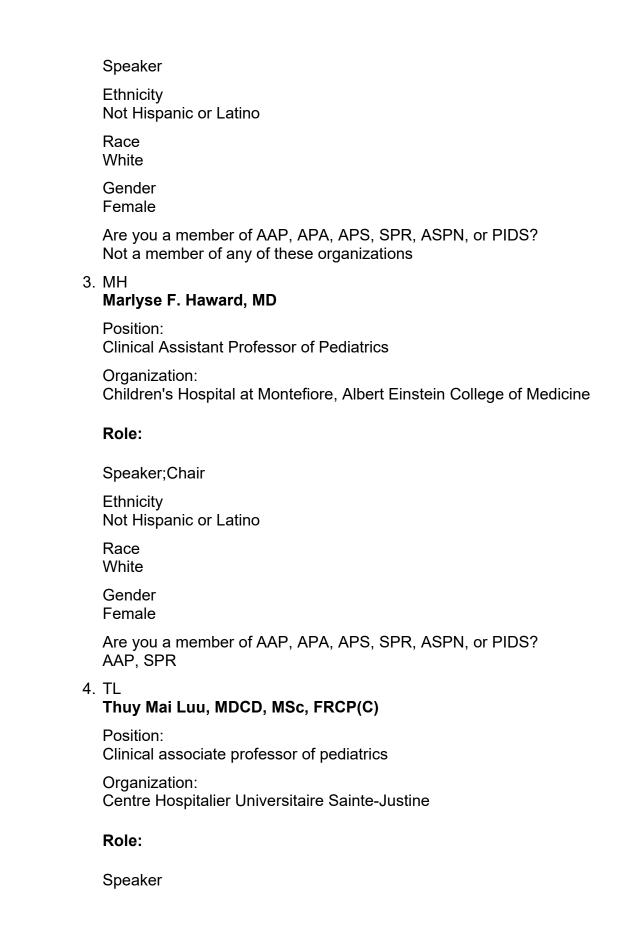
Position:

PhD Candidate

Organization:

McGill University Faculty of Education

Role:



Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. CC

Christy L. Cummings, MD

Position:

Assistant Professor of Pediatrics, Attending Neonatologist, Ethics Associate

Organization:

Boston Children's Hospital, Harvard Medical School

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

Communication with parents is an essential component of neonatal care. For many fragile infants at risk of mortality or morbidity, life-and-death decisions are frequent. Although the majority of deaths occur in the intensive care unit (NICU), position statements have focused on communication during the prenatal consultation. In studies, parents report needing personalized

information, decisions-making strategies and support, as opposed to "one-size-fits-all" information/decision-making models. It is possible to standardize personalized approaches and adapt to parental heterogeneity. We will describe evidence and practical recommendations, such as to personalize information, offer recommendations to parents who seek them, describe outcomes in a balanced way, describe the potential function of a child and his/her family as opposed to diagnoses, speak about life trajectories and hopes. This interdisciplinary panel (including a parent partner) covers personalized and parent-centered communication during three inter-related phases: the antenatal consultation, the NICU hospitalization, and the dying process (when this happens).

Learning Objectives

- 1. Review the evidence behind personalized decision-making in Neonatology and present a model for personalized decision-making during the prenatal consultation, and end-of-life scenarios.
- 2. Examine personalized decision making and description of outcomes in the NICU and consider practical recommendations.
- 3. Review teaching initiatives aimed at optimizing communication skills in clinicians.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100-300 participants: because neonatologists and follow-up physicians and developmentalists are numerous at PAS, this is likely to attract a large crowd. At the 2022 PAS session, a large auditorium was full.

2. Target audience

Clinicians in neonatology, follow-up, developmental medicine, bioethics, pallliative care, critical care, hospital pediatrics.

3. Tracks

Children with Chronic Conditions

Clinical Bioethics

Critical Care

Developmental and Behavioral Pediatrics

Hospital Medicine

Neonatology

Palliative Care

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable

- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 - Bioethics, pailiative care, clinical trials in neonatology, clinical neonatal podiums (such as resuscitation).
- 6. If your session was presented at another conference, please describe the conference and presentation.
 - Some parts of this presentation have been presented at other conferences. All of the speakers have spoken with another person on the panel (AJ, RP, ML), (AJ, CC), (RP, ML), (AJ, ML), (AJ, MH).
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 Does not apply
- 8. Additional comments

Clinicians at this year's PAS, for our 3 panels (identifying the fact that we did not communicate with parents in an optimal fashion; and parental perspectives), asked similar questions and suggested a panel about how to communicate with families, including all the topics described in this proposal.

9. Does this submission involve one or more specialties or disciplines?

The topics discussed are multidisciplinary and include Neonatology, Neonatal follow-up, Bioethics, Palliative care and developmental pediatrics.

Presentation Titles and Durations

Introduction (5 minunutes) AND speaking about life and death in the NICU: personalized strategies (15 minutes)

ANNIE Janvier, MD, PhD

Duration of Presentation in Minutes

20

Parental perspective about numbers, statistics, the NICU and outcomes Rebecca L. Pearce, Pearce, BSc, MSc, BEd

Duration of Presentation in Minutes

10

Strategies to optimize personalized prenatal consultations Marlyse F. Haward, MD

Duration of Presentation in Minutes

15

Speaking about disabilities and parent important outcomes to families Thuy Mai Luu, MDCD, MSc, FRCP(C)

Duration of Presentation in Minutes

Optimizing communication skills in clinicians: a teaching curriculum Christy L. Cummings, MD **Duration of Presentation in Minutes**

Transgender Sports Participation: Inclusion and Fairness?

Session Type: Hot Topic Symposia

Submitter: Dale Ahrendt

Participant(s)

Speaker

1. JS Joshua Smalley, DO Position: Associate Program Director Organization: **SAUSHEC** Role: Speaker Ethnicity Not Hispanic or Latino Race Asian, White Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? **AAP** 2. CC Christina M. Christina, MD MPH Position: Fellowship Director Organization: Children's Mercy, Kansas City Role:

Not Hispanic or Latino

Race

White

Gender

Transgender

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

3. DA

Dale Ahrendt, M.D.

Position:

Adolescent Medicine Faculty

Organization:

San Antonio Military Medical Center

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

Session Description

Session Description

Transgender patients are presenting to primary care providers at younger ages than seen in previous years. They often have questions about how gender transition may impact their lives. For student-athletes, these questions are particularly pronounced given the political and media attention on transgender involvement in sports. Many states and athletic federations have been making new regulations for the inclusion of transgender youth in competitive athletics.

Adding complexity, these rules vary by state and sport. Governing bodies such as the International Olympic Committee and World Athletics have replaced their all-encompassing policy for transgender athletes with a framework of principles that should be used by individual sports to determine their own rules. These rapid changes over the past few years and decentralization of the rule making process means the landscape for youth sports continues to evolve. The two paradigms of inclusion vs. fairness are at the forefront of the debate, but are they incompatible? Providers may be asked by their transgender patients to help advocate for their ability to participate in sports.

In our symposia, we will review the current evidence about the effects of gender affirming hormones on athletic performance and discuss how to interpret what that will mean for sports participation across age range and skill level from elementary and middle school to college and beyond. We will then open the session to all attendees on how this controversial topic may be addressed and how to promote inclusion and fairness for both cis- and transgender women in competitive athletics.

Learning Objectives

- 1. Summarize the performance-related effects of gender-affirming hormone treatment on both male and female transgender athletes
- 2. Discuss the rules that have been implemented by various sports organizations for transgender athletes to participate in competition
- 3. Debate the two paradigms of inclusion and fairness and how they apply to transgender participation in sports

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50-75

2. Target audience

General Pediatricians, Sports Medicine Providers, Endocrinologists

3. Tracks

Adolescent Medicine

Advocacy

Clinical Bioethics

Diversity, Equity, and Inclusion

Endocrinology

Health Equity/Social Determinants of Health

School and Community Health

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

Not Applicable

5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Transgender Health Sports Medicine

6. If your session was presented at another conference, please describe the conference and presentation.

The topic has been presented at the PAS and SAHM conferences in 2022 as a case-based workshop, and at the American College of Sports Medicine as a didactic session. There have been significant changes to the rules for transgender sports participation by national and international sports federations since that time.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Science is Real: Research, Misinformation and Trust

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

General Pediatrics, Adolescent Medicine, Endocrinology

Presentation Titles and Durations

Introduction and Scope of the Problem Joshua Smalley, DO **Duration of Presentation in Minutes** 10

Review of the research Christina M. Christina, MD MPH **Duration of Presentation in Minutes** 20

Discussion of sports and guidelines for participation: Q & A Dale Ahrendt, M.D.

Duration of Presentation in Minutes 60

State of the Art: Primary HTN in Pediatrics and the new AHA statement

Session Type: Hot Topic Symposia

Submitter: Don Batisky

Participant(s)

1. DB

Don Batisky, MD

Position:

Professor of Pediatrics

Organization:

Emory University/Children's Healthcare of Atlana

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, ASPN

2. JF

Joseph Flynn, Flynn, MD, MS

Position:

Professor of Pediatrics

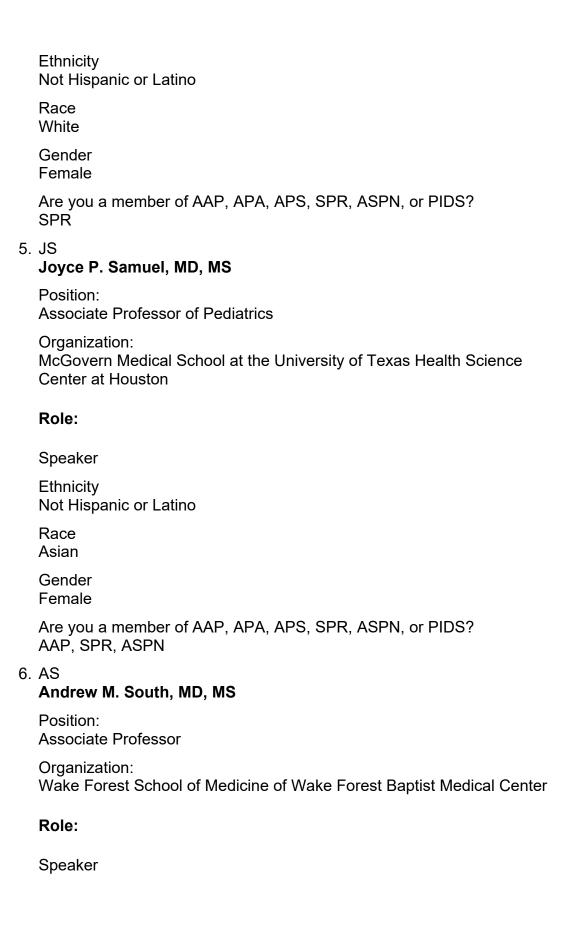
Organization:

University of Washington School of Medicine

Role:

Speaker; Chair

	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR, ASPN $$
3.	CB Carissa Baker-Smith, MD MPH MS FAAP FAHA FACC
	Position: Associate Professor
	Organization: Nemours Children's Hospital
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Black or African American
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP $$
4.	EU Elaine Urbina, MD, MS
	Position: Director, Preventive Cardiology
	Organization: Cincinnati Children's Hospital Medical Center
	Role:
	Speaker



Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR, ASPN

7. TB

Tammy Brady, Brady, MD, PhD

Position:

Associate Professor of Pediatrics

Organization:

Johns Hopkins Medical Institutions

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR, ASPN

Session Description

Session Description

This session focuses on primary HTN based on the forthcoming AHA statement.

Specific areas of focus include: Pathophysiology; link between childhood hypertension and adult cardiovascular disease; drug treatment; and transition to adult care.

Learning Objectives

- 1. Understand the pathophysiology of pediatric primary hypertension
- 2. Explain the link between pediatric hypertension and adult cardiovascular disease
- 3. Develop rationales for pharmacologic management and a transition to adult medicine

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

Nephrologists, Cardiologists, General Pediatrics, Hospitalists, Trainees

3. Tracks

Adolescent Medicine

Cardiology

Children with Chronic Conditions

General Pediatrics

Hospital Medicine

Hypertension

Nephrology

Obesity

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Nephrology topics, ASPN-sponsored sessions

6. If your session was presented at another conference, please describe the conference and presentation.

Not applicable

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

This topic covers Nephrology, Cardiology, Gen Peds, Obesity

Presentation Titles and Durations

Introduction and overview Joseph Flynn, Flynn, MD, MS **Duration of Presentation in Minutes** 5

Understanding the pathophysiology of pediatric primary hypertension Carissa Baker-Smith, MD MPH MS FAAP FAHA FACC

Duration of Presentation in Minutes 20

The link between childhood hypertension and adult cardiovascular risk Elaine Urbina, MD, MS

Duration of Presentation in Minutes 20

Optimizing pharmacologic treatment of pediatric hypertension Joyce P. Samuel, MD, MS **Duration of Presentation in Minutes** 20

Factors to consider when transitioning a patient with hypertension from pediatric to adult care
Andrew M. South, MD, MS **Duration of Presentation in Minutes**20

Questions and wrap-up Tammy Brady, Brady, MD, PhD **Duration of Presentation in Minutes** 5

Academic Careers in Advocacy: How to get promoted and make a realworld impact

Session Type: Hot Topic Symposia

Submitter: Lisa Chamberlain

Participant(s)

1. BS

Barry Solomon, MD, MPH

Position:

Professor of Pediatrics

Organization:

Johns Hopkins University School of Medicine

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

2. LC

Lisa Chamberlain, MD MPH

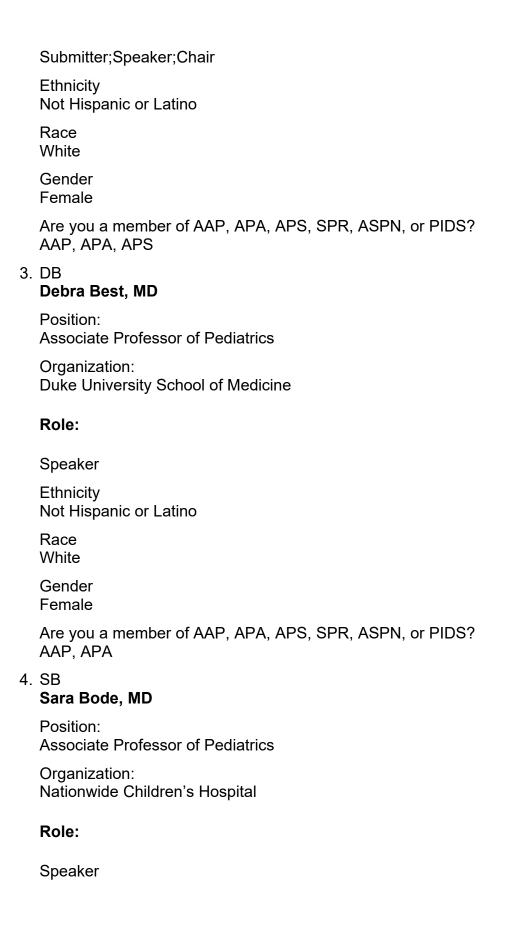
Position:

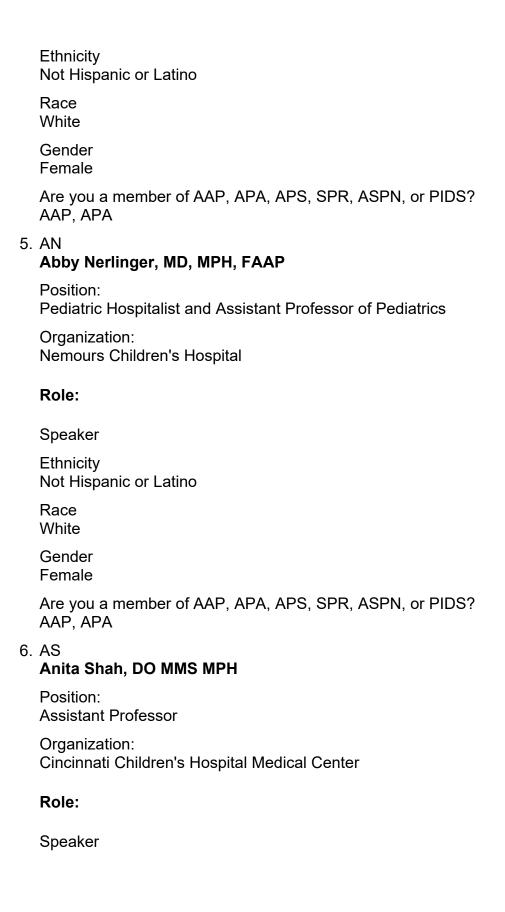
Professor of Pediatrics

Organization:

Stanford Univeristy School of Medicine

Role:





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Ethnicity
  Not Hispanic or Latino
  Race
  Asian
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, APA, SPR
7. MP
  MONA Patel, MD
  Position:
  Associate Professor of Clinical Pediatrics; Chair, Public Policy and
  Advocacy Committee- APA
  Organization:
  Children's Hospital Los Angeles
  Role:
  Speaker
  Ethnicity
  Not Hispanic or Latino
  Race
  Asian
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, APA
8. LB
  Lee S. Beers, MD
  Position:
  Professor of Pediatrics
  Organization:
  Children's National Hospital
  Role:
  Speaker
```

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Ethnicity
   Not Hispanic or Latino
   Race
   White
   Gender
   Female
   Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
   AAP, APA
9. JK
   Jeffrey Kaczorowski, MD
   Position:
   Professor and Vice Chair in Pediatrics
   Organization:
   Golisano Children's Hospital at The University of Rochester Medical
   Center
   Role:
   Speaker
   Ethnicity
   Not Hispanic or Latino
   Race
   White
   Gender
   Male
   Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
   AAP, APS
10. LR
   Lisa Robinson, MD
   Position:
   Vice Dean, Strategy and Operations
   Organization:
   University of Toronto
   Role:
   Speaker
```

Ethnicity Not Hispanic or Latino

Race

Asian, Black or African American

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APS, SPR, ASPN

Session Description

Session Description

Now in the third year of the pandemic many challenges have emerged that threaten child and adolescent wellbeing, including significant learning loss, further marginalization of under-resourced populations, and a Declaration of National Emergency for Child and Adolescent Mental Health issued by AAP, AACAP and CHA. A paradigm shift is required by pediatricians and child health professionals to engage as advocates to address these complex, real-world challenges. Fortunately, the field of academic pediatrics, which has evolved to include advocacy into its educational structure, is now starting to formally embrace advocacy as one pathway to promotion. A recent survey of pediatric department Chairs revealed they view advocacy as increasingly important for faculty and learners, and they similarly responded that advocacy activities were "important" or "very important" when considering faculty career advancement and promotion.

In this joint scholarly session between the APA and APS, one of the first of its kind, we will draw on the strengths of both organizations to advance the conversation of the centrality of advocacy in academic pediatrics. This conversation will be contextualized within the current social context of childhood and state of the field. Overall, we plan to discuss: 1) the importance of advocacy for an academic career in pediatrics; 2) the emerging paths to promotion from exemplar sites, and how these paths vary for clinically vs. research-oriented faculty; 3) the partnerships required for successful advocacy programs; and 4) examining the challenge of sustainability.

Learning Objectives

- Contrast the state of child/adolescent wellbeing today vs. 20 years ago, identifying population level trends requiring advocacy engagement by pediatricians and other child health professionals.
- 2. Demonstrate the range of programs where advocacy is incorporated into appointments and promotions processes, including metrics and the process of advocacy inclusion;
- 3. Appraise the state of pediatric programs where institutionalized advocacy is rooted in a wide range of partners and has sustainable financial support.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50-60

2. Target audience

Trainees, general pediatricians, pediatric subspecialists, educators, pediatric department leadership, policymakers

3. Tracks

Advocacy

Community Pediatrics

Health Equity/Social Determinants of Health

Public Health

School and Community Health

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

Not Applicable

5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

APS Plenary

APA Plenary

6. If your session was presented at another conference, please describe the conference and presentation.

NA

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

NA

9. Does this submission involve one or more specialties or disciplines?

This submission involves advocacy and community pediatrics, pediatric epidemiology, academic medicine, leadership, and career development.

Presentation Titles and Durations

Framing introduction: Overview of the evolving well-being of children and adolescents

Barry Solomon, MD, MPH

Duration of Presentation in Minutes

10

Overview of academic landscape from perspective of pediatric department chairs, hospital CEO & government relations officials Lisa Chamberlain, MD MPH

Duration of Presentation in Minutes

10

A "how to" guide for impacting the promotion process via advocacy - Case example from Duke

Debra Best. MD

Duration of Presentation in Minutes

10

A "how to" guide for impacting the promotion process via advocacy - Case example from Nationwide Children's

Sara Bode, MD

Duration of Presentation in Minutes

10

Incorporating advocacy metrics into A&P: How to measure and describe community impact

Abby Nerlinger, MD, MPH, FAAP

Duration of Presentation in Minutes

5

Incorporating advocacy metrics into A&P: How to measure and describe social media impact

Anita Shah, DO MMS MPH

Duration of Presentation in Minutes

5

Incorporating advocacy metrics into A&P: How to measure and describe impact with legislative officials

MONA Patel, MD

Duration of Presentation in Minutes

5

Advocacy: Models of sustainability

Lee S. Beers, MD

Duration of Presentation in Minutes

10

Advocacy: Models of longitudinal community engagement Jeffrey Kaczorowski, MD

Duration of Presentation in Minutes 10

Moderated Q&A and Closing remarks Lisa Robinson, MD **Duration of Presentation in Minutes** 15

Global child health: Closing the gap between global policies and realities of local settings to improve child health

Session Type: **Panel Discussion**Submitter: **Gary Darmstadt**

Participant(s)

1. GD

Gary L. Darmstadt, Darmstadt, MD, MS

Position:

Associate Dean for Maternal and Child Health, Professor

Organization:

Stanford University School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR, PIDS

2. ME

Mike English, MBBChir, MRCPCH, MD, FMedSci

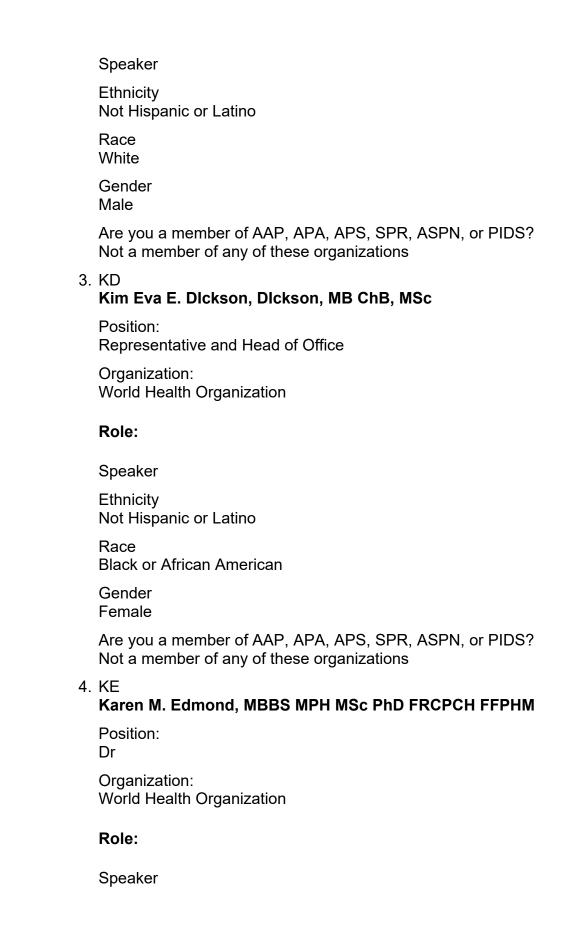
Position:

Prof. International Child Health

Organization:

University of Oxford

Role:



Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. VK

Vishwajeet Kumar, MD & MPH

Position:

Principal Scientist

Organization:

Community Empowerment Lab

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Global recommendations and country policies play a critical role in shaping health care provision in country settings around the world. Often, however, recommendations and policies made by development organizations or governments fail to translate into actions at local levels that improve child healthcare and health outcomes. In this panel, we will explore how global recommendations are developed and disseminated, and how they are

translated into policies and programs in-country at first-referral and tertiary-level hospitals and in communities. We will examine challenges and opportunities for translating global guidelines and national policies into child health impact, including success stories which illustrate effective translation across all levels to improve child health and survival. Ways in which we all can be involved in promoting the implementation of evidence-based guidelines will be discussed.

Learning Objectives

- 1. Discuss the process of developing global guidelines, including considerations in maximizing effective implementation in countries
- Describe examples of translating global guidelines into policies and initiatives for child healthcare at first-referral and tertiary hospitals as well as at community-level in Kenya
- Compare and contrast challenges and opportunities in translating of global recommendations into local child health care programs in Africa, Asia and the Pacific region

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

policy makers, child health researchers, program managers, pediatricians seeking to expand child health impact

3. Tracks

Advocacy

Community Pediatrics

Global Neonatal & Children's Health

Health Equity/Social Determinants of Health

Health Services Research

Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Global newborn, child and adolescent health
- If your session was presented at another conference, please describe the conference and presentation. N/A

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

The topic is translation of global recommendations and country policies into child health impact in countries; it involves newborn care, preterm birth care, case management of infections, public health, policy and advocacy.

Presentation Titles and Durations

Translating global recommendations into child health impact Gary L. Darmstadt, Darmstadt, MD, MS

Duration of Presentation in Minutes

10

Kenyan policy and program applications of the WHO Pocket Book on Hospital Care for Children

Mike English, MBBChir, MRCPCH, MD, FMedSci

Duration of Presentation in Minutes

15

Challenges and opportunities for translation of global recommendations into impact in Africa, Asia and the Pacific

Kim Eva E. Dickson, Dickson, MB ChB, MSc

Duration of Presentation in Minutes

Development and dissemination of WHO child health recommendations Karen M. Edmond, MBBS MPH MSc PhD FRCPCH FFPHM

Duration of Presentation in Minutes

Translation of global recommendations for care of newborn infants into impact in Uttar Pradesh, India

Vishwajeet Kumar, MD & MPH

Duration of Presentation in Minutes

15

Back by Popular Demand! Controversies in Well Newborn Care Debated

Session Type: Debate/Pro-Con Discussion

Submitter: Laura Kair

Participant(s)

1. LK

Laura R. Kair, MD, MAS

Position:

Associate Professor of Clinical Pediatrics

Organization:

University of California, Davis, School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

2. KW

Kelly Wood, MD

Position:

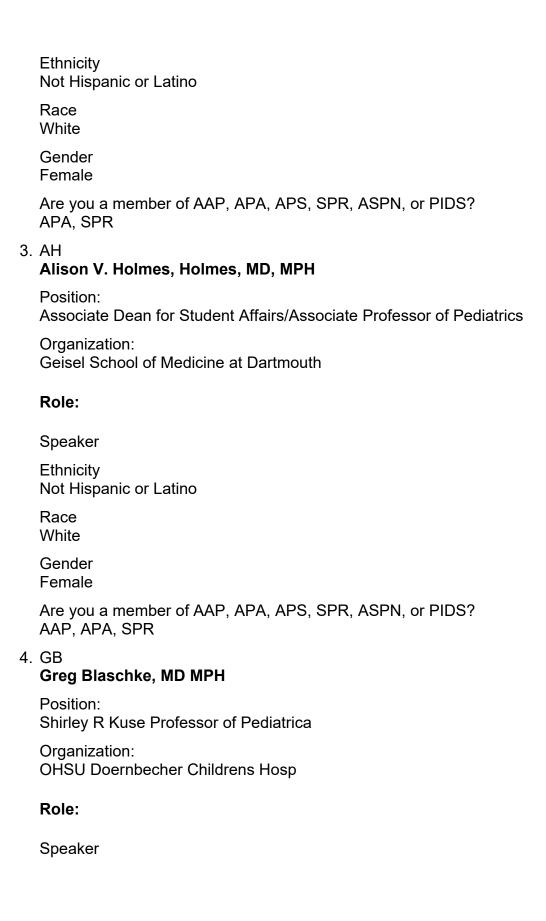
Clinical Professor

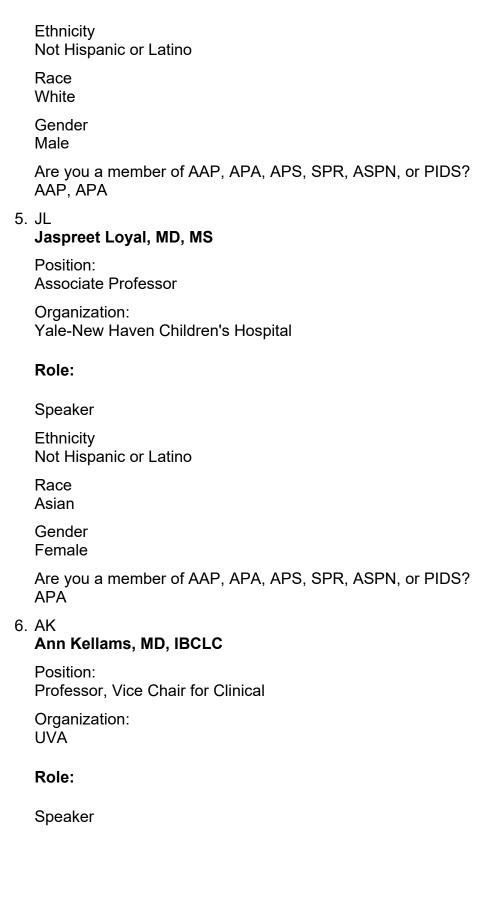
Organization:

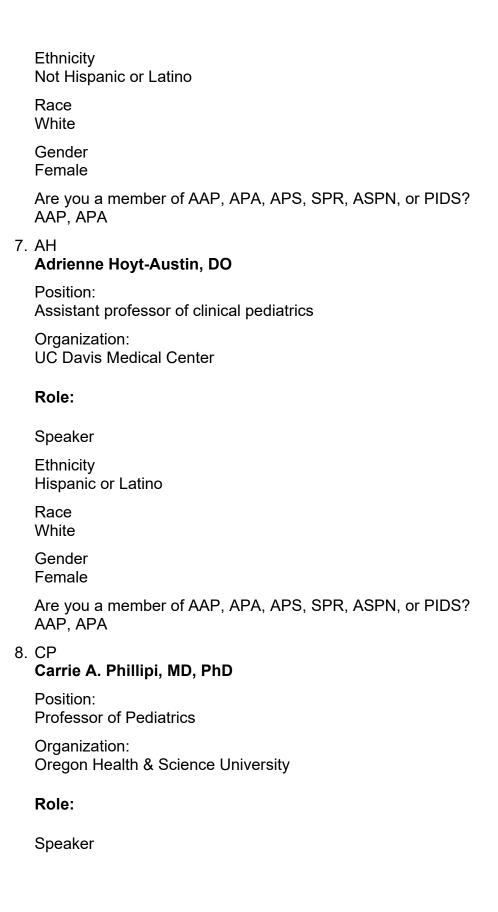
University of Iowa Stead Family Children's Hospital

Role:

Speaker; Chair







Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APA

Session Description

Session Description

There are ~4 million live births in the United States annually, and the majority are healthy term or late preterm neonates cared for in well newborn units. The Better Outcomes through Research for Newborns (BORN) network, a core activity of the Academic Pediatric Association (APA), comprises of over 110 well newborn units in the US and, since 2010, BORN has led collaborative research projects to increase the evidence base for the care of term and late preterm newborns. Many topics in newborn medicine are controversial, and there is considerable practice variation across sites. Three such topics were debated at PAS 2021, and the room was full with an engaged crowd. In this year's session, 6 clinicians will debate 3 controversial topics in well newborn medicine to generate discussion and inspire clinicians, researchers and trainees interested in newborn care and research.

The debate topics will be:

- 1. Circumcision during the hospital stay: yay or nay?
- 2. Bathing of the well newborn: during the hospital stay or at home?
- 3. Lingual frenotomy: who does it and when?

The 90 min session will be divided into 3 blocks of 30 mins. Each speaker will have 8 minutes to argue their side of the topic, and 2 mins each to respond to their colleague's presentation followed by 10 mins for comments or questions from the audience. Specifically:

Topic 1-3: 8 mins (speaker 1), 8 mins (speaker 2), each speaker gets 2 mins to respond to their colleague's presentation, 10 mins of questions/comments from audience.

Learning Objectives

- 1. Provide an overview of 3 commonly debated topics in well newborn medicine
- 2. Share opposing viewpoints on approaches to timing of circumcision, newborn bathing, and treatment of ankyloglossia in well newborn units
- 3. Generate discussion and inspire participants to learn about the BORN network and research priorities

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

300

2. Target audience

General pediatricians, pediatric hospitalists, neonatologists, medical students, residents, fellows

3. Tracks

General Pediatrics Hospital Medicine

Well Newborn

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Newborn SIG, Newborn Nursery Platform Session, Breastfeeding/Human Milk Platform

6. If your session was presented at another conference, please describe the conference and presentation.

Not applicable. BORN Network leadership did a similar Pro/Con Debate last year at PAS, but the three topics selected this year are completely new and the content discussed will be completely new.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

N/A

9. Does this submission involve one or more specialties or disciplines?

General Pediatrics, Pediatric Hospital Medicine, Neonatology

Presentation Titles and Durations

Introductions and Moderation of Q&A Laura R. Kair, MD, MAS **Duration of Presentation in Minutes** 15

Introductions and Moderation of Q&A Kelly Wood, MD **Duration of Presentation in Minutes** 15

Circumcision during the Birth Hospitalization Alison V. Holmes, Holmes, MD, MPH **Duration of Presentation in Minutes** 10

Circumcision Delayed to Outpatient Greg Blaschke, MD MPH **Duration of Presentation in Minutes** 10

Newborn Bathing During the Hospital Stay Jaspreet Loyal, MD, MS **Duration of Presentation in Minutes** 10

Newborn Bathing Delayed Past Discharge Ann Kellams, MD, IBCLC **Duration of Presentation in Minutes** 10

It's a tongue twister: who treats ankyloglossia, and when and how?- Pro Adrienne Hoyt-Austin, DO

Duration of Presentation in Minutes 10

It's a tongue twister: who treats ankyloglossia, and when and how?- Con Carrie A. Phillipi, MD, PhD

Duration of Presentation in Minutes

10

More than just a seat at the table: How parents and children can improve pediatric research

Session Type: Panel Discussion

Submitter: ANNIE Janvier

Participant(s)

1. AJ

ANNIE Janvier, MD, PhD

Position:

Professor of Pediarics and Clinical Ethics

Organization:

University of Montreal

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR

2. RP

Rebecca L. Pearce, Pearce, BSc, MSc, BEd

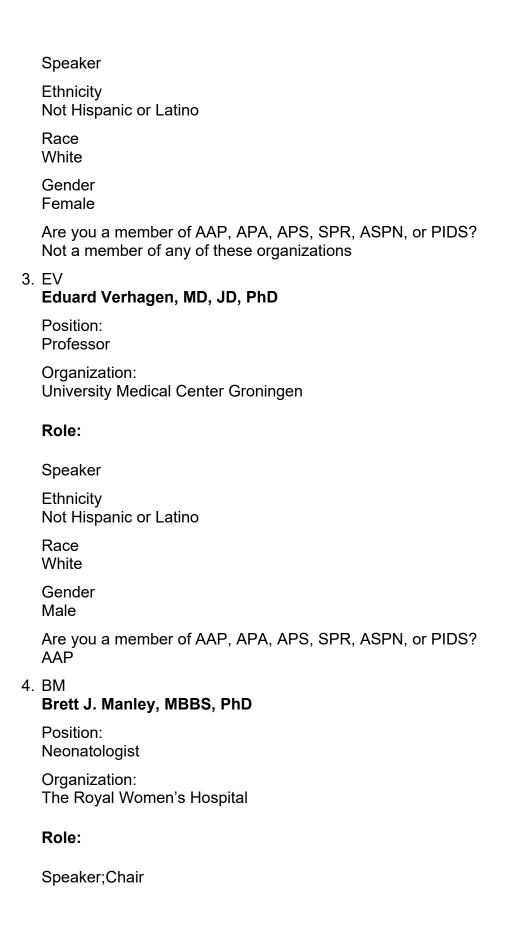
Position:

PhD Candidate

Organization:

McGill University Faculty of Education

Role:



Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. JL

JOHN D. LANTOS, MD

Position:

President

Organization:

JDL Consulting

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS

Session Description

Session Description

In pediatric research today, it is essential to involve parents and patients in the design, conduct, and reporting of research. Stakeholders now routinely participate in formulating research agendas, designing research protocols, analyzing results, and speaking at professional conferences. Often, however, their roles are unclear and, as a result their effectiveness may be suboptimal. Questions arise about how to resolve disagreements between parents and

research methodologists, how to (and how much to) compensate them, and how to clarify their responsibilities and differentiate those from those of other research collaborators. If a parent/patient advisory board recommends a consent methodology, but clinicians, IRBs, ethicists, disagree, how can these disagreements be resolved? When a non-inferiority trial demonstrates that two interventions are statistically equivalent but parents have strong preferences, are they really equivalent? How should such differing conclusions be described in papers or explained to journalists?

This panel will offer practical recommendations to improve these partnerships. We focus on best practices for recruiting parents and defining their role in each research project. Our interdisciplinary panel includes researchers, ethicists, and a parent who is part of parent advisory boards. We offer examples of trials where parents' suggestions led to changes in the consent process and in the types of data that were collected and analyzed. Specific issues include dealing with bereaved parents, including children on IRBs, and co-authoring papers for publication. Our goal is to make sure that the voices of all stakeholders are heard and respected to improve pediatric research.

Learning Objectives

- Describe an overview of the activities performed by resource patients/parents as well as the risks and benefits associated with these partnerships.
- Discuss practical issues for optimizing resource parent/patient engagement in research: protocol development, consent forms, presenting at conferences, article review, etc
- 3. Discuss the integration of children and parents in institutional review boards and for consent processes.

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

about 100-200 participants, this is likely to attract many researchers and clinicians

2. Target audience

Clinical researchers in any pediatric discipline, Neonatologists, researchers, ethicists, trainees.

3. Tracks

Academic and Research Skills Advocacy Clinical Bioethics Clinical Research Critical Care Diversity, Equity, and Inclusion Neonatology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Bioethics, neonatal clinical trials
- 6. If your session was presented at another conference, please describe the conference and presentation.

Seperate components of this talk have been presented at dozens of conference. The speakers are leaders of their field on their topic. All the speakers have presented with other speakers in this group (AJ-RP-PD, BM-PD, AJ-JL, RP-PD, etc) on this (or similar) topics.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research Science is Real: Research, Misinformation and Trust

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Yes, this is a panel with a broad topic that concerns anybody who does clinical research in pediatrics and/or is interested in bioethics: pediatrics, Hospital medicine, adolescent medicine, Neonatology, Critical care, etc

Presentation Titles and Durations

Introduction
ANNIE Janvier, MD, PhD **Duration of Presentation in Minutes**15

A parental perspective Rebecca L. Pearce, Pearce, BSc, MSc, BEd **Duration of Presentation in Minutes** 15

The integration of children and adolescents in research and IRBs Eduard Verhagen, MD, JD, PhD

Duration of Presentation in Minutes

15

Innovative consent mechanisms and the input of parent stakeholders (deferred consent, consent to continue, etc) AND Q&A Brett J. Manley, MBBS, PhD **Duration of Presentation in Minutes** 30

The ethical challenge of resolving stakeholder disagreements JOHN D. LANTOS, MD **Duration of Presentation in Minutes** 15

Scholarly Session ID: 1359467

More is not better: misconceptions about infant growth assessment, weight gain and the impact of early infant nutrition

Session Type: Panel Discussion

Submitter: Paolo Manzoni

Participant(s)

1. PM

Paolo Manzoni, Prof

Position:

MD, PhD

Organization:

University of Torino School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR

2. BK

Berthold V. Koletzko, MD PhD

Position:

MD PhD Dr. h.c. mult. Else Kroner Prof of Pediatrics, Prof. h.c.

Organization:

Dr. von Hauner Children's Hospital, LMU - Univ of Munich

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

3. CM

Camilia Martin, Martin, MD, MS

Position:

Professor of Pediatrics; Chief of Neonatology

Organization:

Weill Cornell Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR

Session Description

Session Description

The historical paradigms about nutrition of neonates and infants have been changing during the last years, and there is an urgent need to address and to discuss the current, updated theories on infant growth and related outcomes. The approach towards areas such as growth assessment, weight gain, and the

impact of early nutrition on healthy growth is currently undergoing evidence-based, patient-oriented updates that may hugely impact on the life-long health outcomes of infants.

The goal of this session will thus be to critically compare the historical perspectives in a number of infant nutrition areas (i.e.,), versus the new, updated perspectives in the same areas.

Learning Objectives

- 1. Understand new tools for assessing infant growth
- 2. Discuss the implications of early rapid weight gain in infants
- 3. Understand new perspectives to evaluate how nutritional quality components impact early growth

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100 to 250

2. Target audience

Neonatologists, Pediatricians, Gastroenterologists, Dietists, Nurses

3. Tracks

Academic and Research Skills

Breastfeeding/Human Milk

Gastroenterology/Hepatology

Neonatology

Obesity

Pediatric Nutrition

Public Health

Wellness and Well-being

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. none
- 6. If your session was presented at another conference, please describe the conference and presentation.

 not applicable
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Science is Real: Research. Misinformation and Trust

8. Additional comments

None

9. Does this submission involve one or more specialties or disciplines?

This Topic involves Nutrition, Neonatology, Obesity, General Pediatrics, and Public Health.

Presentation Titles and Durations

Human milk-fed infants grow differently than formula-fed infants: negative implications of rapid early weight gain. An update Paolo Manzoni, Prof

Duration of Presentation in Minutes

20

New perspectives on impact of early nutrition on healthy growth: quantity and quality of protein supply, energetic efficiency Berthold V. Koletzko, MD PhD

Duration of Presentation in Minutes

20

New perspectives on assessing growth: from weight increase to body fat percentage

Camilia Martin, Martin, MD, MS

Duration of Presentation in Minutes

20

Scholarly Session ID: 1355872

Individualized Neonatal Care-Sex-Specific Approach Matters

Session Type: Hot Topic Symposia

Submitter: Pradeep Alur

Speaker

Participant(s) 1. PA Pradeep Alur, MD Position: Professor Organization: University of Mississippi Medical Center Role: Submitter; Speaker; Chair Ethnicity Not Hispanic or Latino Race Asian Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR 2. NH Naveed Hussain, MBBS, DCH Position: **Professor of Pediatircs** Organization: Connecticut Children's Medical Center Role:

	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Male
3.	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR
	Jv
	Johannes (Hans) B. van Goudoever, Md, PhD
	Position: Professor of Pediatrics, Dean and vicechair executive board,
	Organization: Amsterdam University Medical Centers
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR
4.	KL Krithika Lingappan, MD MS PhD
	Position: Associate Professor
	Organization: Children's Hospital of Philadelphia
	Role:
	Speaker

Ethnicity Not Hispanic or Latino

Race Asian

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

The origins of sexual dimorphism in humans are clinically manifested from early pregnancy. Hence, both intrauterine and postnatal growth nomograms are sex-specific. The naturally produced breast milk has a sex-specific nutrient composition in both animals as well as in humans. It was noted that macaque monkey mothers of sons produced milk with high fat and protein but low sugar concentrations, whereas mothers of daughters had milk with high sugar but low fat and protein concentrations. These findings suggest that continuing the differences may affect nutrient intake, metabolism, and growth.

The effect of sex differences in the management of newborn infants is increasingly reported from animal models and human studies. Pharmacologic studies in a traumatic brain injury piglet model have shown striking differences between males and females. A subset analysis of the multicenter randomized controlled trial in extremely low- birth-weight infants found that the prophylactic use of indomethacin prophylaxis slightly favored males regarding the development of severe IVH (grades III and IV) and long-term outcomes. Therefore it is essential to review the sex differences in drug pharmacokinetics and metabolism to provide more effective care to newborns.

Hormonal differences in male and female infants (especially with adrenocortical hormones) that manifest prenatally and postnatally may provide clues for the male disadvantage in neonatal mortality and morbidity following preterm birth.

Therefore, we believe that a comprehensive review of the multisystemic effects of sexual dimorphism in newborn infants and understanding the underlying biological mechanisms will help us provide more effective individualized neonatal care.

Learning Objectives

- 1) Upon completion, participants will be able to describe the sex-specific differences human breast milk composition and its influence on neonatal diseases.
- 2. 2) Upon completion, participants will be able to understand Sex-based differences in neonatal pharmacokinetics and pharmacodynamics, metabolism, and reconfiguring NICU management based on fetal/neonatal sex
- 3. 3) Upon completion, participants will be able to understand the sex related molecular mechanisms in neonatal lung diseases.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

150

2. Target audience

Neonatologists, Pediatricians, Pediatric residents, Nurse practitioners, Lactation specialists

3. Tracks

Breastfeeding/Human Milk

Clinical Research

Neonatology

Pediatric Nutrition

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

 BPD, Neonatal nutrition, NEC
- If your session was presented at another conference, please describe the conference and presentation. at PAS-2022
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

No

Presentation Titles and Durations

Sex Differences in Breast Milk Composition Pradeep Alur, MD **Duration of Presentation in Minutes** 20

Reconfiguring NICU management based on fetal/ neonatal sex Naveed Hussain, MBBS, DCH **Duration of Presentation in Minutes** 20

Sex differences in hypothalamic pituitary axis and breast milk Johannes (Hans) B. van Goudoever, Md, PhD **Duration of Presentation in Minutes** 25

Sex as a critical biological variable in the neonatal lung. Krithika Lingappan, MD MS PhD **Duration of Presentation in Minutes** 20

Scholarly Session ID: 1364047

The Interplay of Racism, Climate, and the Environment on Children and Adolescents

Session Type: Panel Discussion
Submitter: Tamera Coyne-Beasley

Participant(s)

1. TC

Tamera Coyne-Beasley, Coyne-Beasley, MD, MPH

Position:

Vice-Chair, Pediatrics; Endowed Chair Adolescent Medicine; Division Director, Adolescent Medicine

Organization:

University of Alabama at Birmingham

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS

2. LW

Leslie Walker-Harding, MD

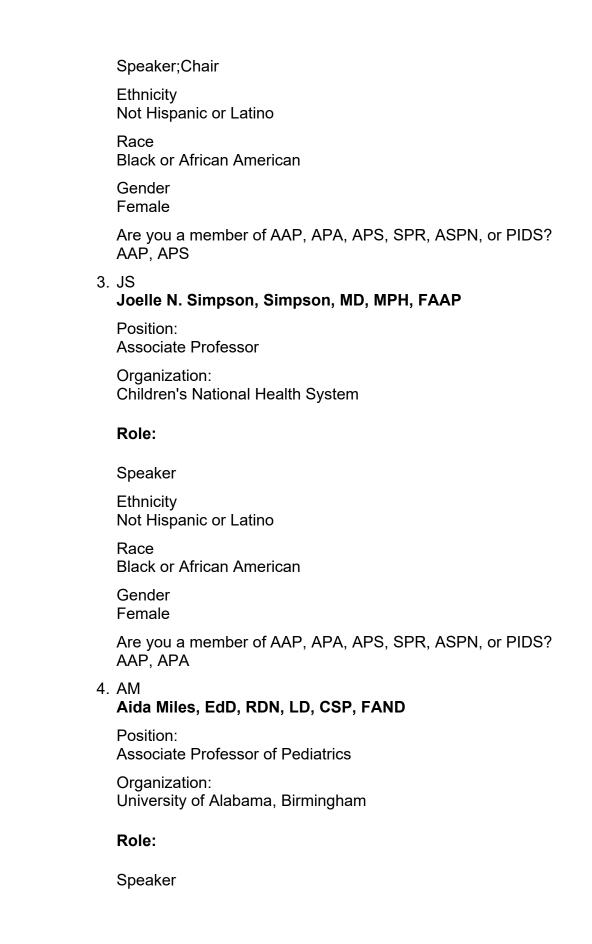
Position:

Professor and Chair Department of Pediatrics/Chief Academic Officer

Organization:

University of Washington School of Medicine

Role:



Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. SS

Sheela Sathyanarayana, MD MPH

Position:

Professor, Pediatrics

Organization:

University of Washington School of Medicine, Seattle Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

Session Description

Session Description

Environmental conditions, or the quality and state of the environment, are an inescapable part of daily life. While many conditions of the environment are naturally occurring, the quality and impacts of the environment are often affected by historical, economic, and sociopolitical factors. Recent environmental crises in the US have disproportionately impacted people of color, people with disabilities or health conditions, low-income communities,

tribal communities, immigrants, the elderly and children. Many aspects of the environment are expected to fluctuate with climate change, which is characterized by rising temperatures and shifting weather patterns across the globe. These include exacerbations of extreme weather events, shifts in food production, and changes to local built environments. As a result, climate change is expected to cause new and worsening public health challenges, especially among disadvantaged communities. We will highlight and discuss the environmental antecedents that impact health and the emergency management infrastructure in place at local, state and federal levels to support those communities. We will also focus on the interplay between racism and the environment, and our nutritional, physical and mental health.

Learning Objectives

- Understand the disproportionate impact on climate change on communities and its impact on physical and mental health, nutrition and social determinants of health
- 2. Discuss our role in and necessity of advocating for environmental justice and climate change interventions
- 3. Plan how we must prioritize and address climate and environmental threats as a primary prevention strategy

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200+

2. Target audience

All providers who take care of children and adolescents

3. Tracks

Adolescent Medicine

Advocacy

Community Pediatrics

Diversity, Equity, and Inclusion

Environmental Health

General Pediatrics

Health Equity/Social Determinants of Health

Mental Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Any APS Plenary presentations
David Nichols Health Equity Award Presentation
Diversity Equity and Inclusion reception

- 6. If your session was presented at another conference, please describe the conference and presentation.

 N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research Addressing & Overcoming Racism in Clinical Care and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

General Pediatrics, Adolescent Medicine, Public Health, Environmental Health, Nutrition Science, Emergency Medicine

Presentation Titles and Durations

The Interplay of Racism, Climate, and the Environment on Children and Adolescents

Tamera Coyne-Beasley, Coyne-Beasley, MD, MPH

Duration of Presentation in Minutes

10

The environmental impacts on physical and mental health and it disproportionate impact on communities Leslie Walker-Harding, MD

Duration of Presentation in Minutes

15

Infrastructure to support community preparation for, mitigation of, response to, or recovery from extreme weather events

Joelle N. Simpson, Simpson, MD, MPH, FAAP

Duration of Presentation in Minutes

15

The impacts of climate change and the environment on nutrition and physical activity habits in children and adolescents.

Aida Miles, EdD, RDN, LD, CSP, FAND

Duration of Presentation in Minutes

15

The impact of the environment and climate change on employment and other social determinants of health

Sheela Sathyanarayana, MD MPH

Duration of Presentation in Minutes

15

Scholarly Session ID: 1344760

National Academy of Medicine Report on Addressing the Long-Term Impact of the COVID-19 Pandemic on Children and Families

Session Type: State of the Art Plenary

Submitter: Tina Cheng

Participant(s)

1. TC

Tina L. Cheng, MD, MPH

Position:

Chair of Pediatrics, CMO, Director of Cincinnati Children's Research Foundation

Organization:

Cincinnati Children's Hospital, University of Cincinnati

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR

2. NH

Nia J. Heard-Garris, Heard-Garris, MD, MSc

Position:

Assistant Professor of Pediatrics

Organization:

Ann & Robert H. Lurie Children's Hospital of Chicago/Northwestern University

	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Black or African American
	Gender Prefer not to respond
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR
3.	JW Joseph L. Wright, MD MPH
	Position: Professor of Pediatrics and Health Policy & Management
	Organization: University of Maryland Schools of Medicine and Public Health
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Black or African American
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS
4.	MY Marci Ybarra, MSW PhD
	Position: Associate Professor
	Organization: University of Wisconsin
	Role:

Speaker

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. TC

Tumaini R. Coker, Coker, MD, MBA

Position:

Professor and Division Chief, General Pediatrics

Organization:

University of Washington/Seattle Children's

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR

Session Description

Session Description

The far-reaching impact of the COVID-19 pandemic—coupled with cooccurring events and historic inequities rooted in structural racism—are expected to have lasting adverse effects on children's physical, mental, and socio-emotional development. The Committee on Addressing the Long-Term

Impact of the COVID-19 Pandemic on Children and Families will release its report in early 2023. This study addresses the consequences of and solutions to the long-term effects of COVID-19 on children living in marginalized communities. COVID-19 has caused unprecedented impacts on the lives of children and families as a result of illness and death; public health safety measures, including school closures; social isolation; financial hardship; food insecurity; disrupted sleep; and gaps in health care access. Co-occurring with the pandemic has been racial trauma, including violence against communities of color; protests against that violence; and the disproportionate impact of COVID-19 on Black, Latino, and Native American families. The committee conducted an extensive critical review of the existing research literature, held information-gathering sessions with key stakeholders (including parents, K-12 educators, health care professionals, early care and education professionals, adolescents, and juvenile justice and child welfare professionals), and commissioned papers to understand the impact of the pandemic on the workforce, housing sector, and student loan repayment on families. This session will describe impacts of the pandemic on children and families in social, emotional, and relational development; learning and education; and physical and mental health and will outline programs and economic and social policies needed to promote recovery and "pandemic proof" for the future.

Learning Objectives

- 1. Identify the effects of the COVID-19 pandemic on children and families in social, emotional, and relational health, learning and education, physical and mental health.
- 2. Describe programs and economic and social policies needed to promote recovery and to "pandemic proof" children and families from future harm.
- 3. Discuss and advocate for the outlined program and policy recommendations

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

150

2. Target audience

Trainees, general pediatricians, subspecialists, educators, policymakers

3. Tracks

Advocacy
Community Pediatrics
COVID-19
General Pediatrics
Global Neonatal & Children's Health

Health Equity/Social Determinants of Health Mental Health Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

COVID-19 pandemic

Health Policy

Mental Health

6. If your session was presented at another conference, please describe the conference and presentation.

AMSPDC conference will present report findings

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research Addressing & Overcoming Racism in Clinical Care and Research Science is Real: Research, Misinformation and Trust

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

yes. COVID pandemic has affected all children and all specialties and disciplines.

Presentation Titles and Durations

Introduction, Statement of Task, A Developmental View Tina L. Cheng, MD, MPH

Duration of Presentation in Minutes

15

Impact on Learning and Education
Nia J. Heard-Garris, Heard-Garris, MD, MSc **Duration of Presentation in Minutes**

Impact on Physical and Mental Health Joseph L. Wright, MD MPH **Duration of Presentation in Minutes**

15

Evidence on Effective Economic and Social Policies Marci Ybarra, MSW PhD

Duration of Presentation in Minutes

15

Report Recommendations for Programs and Policies Tumaini R. Coker, Coker, MD, MBA **Duration of Presentation in Minutes** 12

Scholarly Session ID: 1355490

From Cells to Society: Clinical translational approaches to treating toxic stress in the pediatric primary care setting.

Session Type: Basic-Translational-Clinical Roundtable

Submitter: Rachel Gilgoff

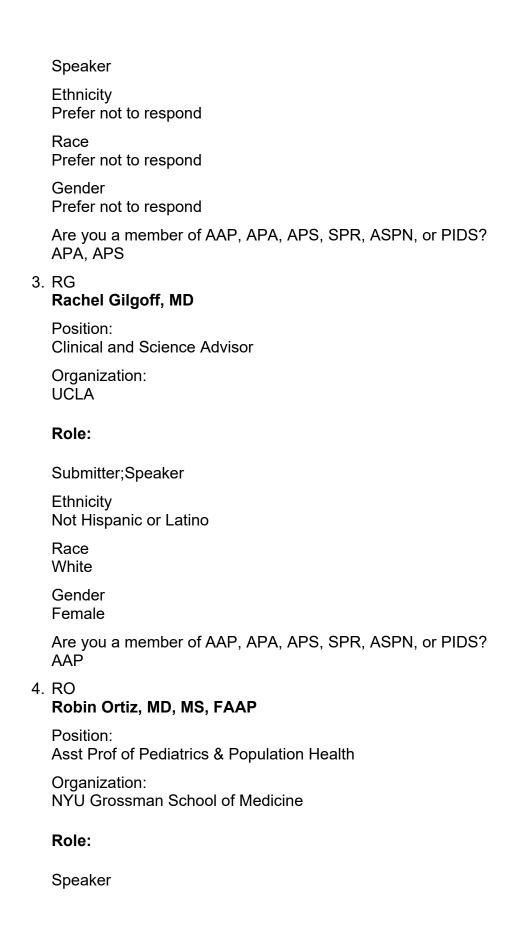
Organization:

UCLA

Role:

Participant(s)

1. MO Mikah Owen, MD, MPH, MBA Position: Senior Director, Clinical and Academic Programs - Health Equity Organization: **UCLA** Role: Chair **Ethnicity** Not Hispanic or Latino Race Black or African American Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP 2. GS George M. Slavich, PhD Professor of Psychiatry and Biobehavioral Sciences



Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

5. DB

Devika Bhushan, N/A, MD

Position:

Senior Advisor to the ACEs Aware Initiative; Former Acting Surgeon General of California

Organization:

ACEs Aware Initiative

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

Stress is on everyone's mind but in no one's medical record. The landmark Adverse Childhood Experiences study sparked a wave of research demonstrating a link between childhood adversity and long-term mental and physical health outcomes including but not limited to asthma, ADHD, learning and behavior issues, addiction, anxiety, and depression. Research highlights

toxic stress, the prolonged activation of the stress response system and subsequent disruptions of neuroendocrine, immune, and genetic function, as an underlying mechanism by which childhood adversity gets "under the skin." While many agree that childhood adversity is a public health crisis, there is less clarity on how to translate population level research data into clinical practice. In this roundtable a panel of translational researchers and clinicians will explore how understanding the science of the stress physiology can provide an opportunity for developing novel diagnostic tools and treatment strategies for healing toxic stress and preventing long-term health issues.

George Slavich PhD will highlight his cellular research examining stress physiology and biomarkers. Rachel Gilgoff MD will discuss the clinical translation, providing the science on safe and promising clinical interventions for toxic stress. Robin Ortiz MD MPH will discuss structural and environmental implications of toxic stress and provide a health equity and community level framework. Devika Bhushan MD MPH will describe lessons learned from California policy and the ACEs Aware Initiative advancing universal ACE screening in primary care. Together, this panel will offer a path for incorporating stress biology on multiple levels: cellular, individual, dyad, family, community, policy and society.

Learning Objectives

- 1. Describe how the science of stress biology can be applied to our clinical response for children who have experienced early life adversity.
- 2. Apply existing theoretical frameworks such as dyadic behavior change and community based participatory research to address toxic stress at the dyadic, family and community levels.
- 3. Define and give examples of cross-sector approaches and policy-level interventions to achieve primary, secondary, and tertiary prevention of childhood adversity and toxic stress.

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

50 - 100

2. Target audience

ACEs and Stress researchers Clinical and translational researchers Primary care providers Integrative medicine providers

3. Tracks

Basic Science

Child Abuse & Neglect

Children with Chronic Conditions

Clinical Research

Developmental Biology

General Pediatrics

Health Equity/Social Determinants of Health

Wellness and Well-being

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

Friday, April 28

Saturday, April 29

 Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 None

6. If your session was presented at another conference, please describe the conference and presentation.

No

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research Addressing & Overcoming Racism in Clinical Care and Research Science is Real: Research, Misinformation and Trust

8. Additional comments

Introductions

Mikah Owen MD, MPH, MBA: Dr. Owen is the Senior Director, Clinical and Academic Programs – Health Equity for the UCLA-UCSF ACEs Aware Family Resilience Network. Dr. Owen also serves as a pediatrician for the Sacramento Youth Detention Facility and the Sacramento County Public Health Department. Dr. Owen's work focuses on developing comprehensive clinical programs and improving systems of care for youth that have been impacted by trauma.

Mikah Owen, MD (chair) will lead introductions of the panelists and provide context and description of the roundtable presentations and discussion. He will also facilitate the panel and audience questions.

First presentation: Stress, Psychobiological Mechanisms, and Translational Biomarkers
George Slavich PhD.

Professor, Department of Psychiatry and Biobehavioral Sciences Founding Director, Laboratory for Stress Assessment and Research Investigator, Staglin One Mind Center for Cognitive Neuroscience Research Scientist, Semel Institute for Neuroscience and Human Behavior Dr. Slavich is a leading authority in the conceptualization, assessment, and management of life stress; in psychological and biological mechanisms linking stress with mental and physical health; and in systems and policies for reducing population-level health disparities and achieving greater health equity by addressing stress-related factors at the individual and collective level. He developed the first online system for assessing lifetime stressor exposure; formulated the first fully integrated, multi-level theory of depression; and is helping pioneer a new field of research called human social genomics, which is revealing how social experiences reach deep inside the body to affect the human genome and health. His recent research focuses on Social Safety Theory, which describes how individual- and community-level experiences of social safety and threat influence the brain and immune system to affect human health, wellbeing, aging, and behavior across the lifespan.

In this roundtable discussion he will highlight his research examining stress, biomarkers, and cellular biology. In particular, he will describe his research in which he collected both neural and cellular data on adolescent females at high and low risk for depression to study how neurons communicate with the immune system to impact health. He will also discuss how state funding through the California Institute for Regenerative Medicine and the California Initiative to Advance Precision Medicine are expanding the opportunities for stress science research and clinical translation.

Second presentation: Toxic Stress Physiology and Individual Healing Rachel Gilgoff MD

Senior Clinical and Science Advisor, ACEs Aware Initiative, UCLA UCSF ACEs and Family Resilience Network

Adjunct Clinical Associate Professor, Department of Pediatrics, Division of Allergy and Immunology, Stanford University School of Medicine As a board-certified general pediatrician, child abuse pediatrician, and integrative medicine specialist, Dr. Gilgoff brings a multidisciplinary approach to ACEs, toxic stress, healing and well-being. Over the course of her career, she has been a co-investigator of the Pediatric ACEs Screening and Resilience Study (PEARLS), the Medical Director of the Clinical Innovations and Research Team within Center for Youth Wellness, and co-founder of the National Committee on Asthma and Toxic Stress. She co-developed the Resiliency Clinic, a group clinic intervention model to treat toxic stress, and more recently, co-created VITAL: Relational Health, a free, on-line learning series on the science and practice of relational health. She is currently an advisor with the California Aces Aware Initiative and the Office of the California Surgeon

General, and a co-PI on "Systems-based, Multidisciplinary Assessment of Adversity and Toxic Stress for Individualized Care (The SYSTEMAATIC Project)," an ACEs and Precision Medicine research project through the California Initiative to Advance Precision Medicine (CIAPM). Dr. Gilgoff is dedicated to addressing health issues resulting from child abuse and toxic stress, creating systems of care that incorporate the science of stress biology and wellness, and collaborating across sectors to develop multidisciplinary, integrative, human-centered, and holistic approaches to healing.

Dr. Gilgoff will specifically discuss how the science of stress physiology provides a window into therapeutic targets for treating toxic stress. She will examine the state of the current research on emerging strategies to treat toxic stress that could be implemented safely today in pediatric primary care as well as those that require further study in the primary care setting. Her focus will provide a precision medicine based approach to individual healing for toxic stress.

Third presentation: Expanding Stress Biology to the Dyad, Family, and Community

Robin Ortiz MD

Assistant Professor, Department of Pediatrics at NYU Grossman School of Medicine

Assistant Professor, Department of Population Health at NYU Grossman School of Medicine

Dr. Ortiz is engaged in research projects within the scope of public health and epidemiology, studying early life environmental, stress, hypothalamic-pituitary-adrenal axis, and epigenetic influences on later life health and disease outcomes. Her career goal is to develop interventions that aim to prevent risk and build resiliency throughout life. To this aim, Dr. Ortiz has completed an NIH pre-bachelorette Intramural Research Training Award, and as a medical student the NIH Medical Research Scholars Program. Her research has spanned across bench, clinical and translational research projects, and involved independent statistical analyses. In these positions she has studied psychosocial, neuroimmune, and biochemical influences in chronic pain, cancer and cardiometabolic disease, and been productive in obtaining many successful recognitions and publications.

Dr. Ortiz will discuss how future research needs to encompass more than just the individual child and expand to include the child's interpersonal relationships, family environment and community. Dr. Ortiz will present two complimentary models – dyadic behavior change and Community-Based Participatory Research (CBPR) as a foundation for addressing toxic stress in clinical practice.

Fourth presentation: Healing from Toxic Stress: A Policy Approach Devika Bhushan, MD is a pediatrician, public health practitioner, and California's former Acting Surgeon General. She has led systems innovation at a statewide level, conceiving of and launching efforts to enhance resilience and promote health equity for millions. She is also a leading voice in destigmatizing living with mental illness. Dr. Bhushan has served as California's Acting Surgeon General (2022) and the inaugural Chief Health Officer of the Office of the California Surgeon General (2019-2022). In these roles, she served as a key public health spokesperson and advisor to the Governor and the Secretary of Health and Human Services. Dr. Bhushan co-launched and led implementation of the ACEs Aware Initiative, the first-in-the-nation, \$500 million program focused on treating toxic stress after childhood adversity to transform health. So far, the Initiative has trained more than 24,000 clinical team members and has directly screened nearly 1 million patients. Dr. Bhushan conceptualized and led development of the Initiative's clinician-facing online curriculum, Becoming ACEs Aware in California, in addition to other key clinical tools and resources. She also served as Editor-in-Chief and lead author of the first California Surgeon General's report that presents a cross-sector blueprint to prevent and address early adversity, entitled Roadmap for Resilience: The California Surgeon General's Report on Adverse Childhood Experiences, Toxic Stress, and Health. Dr. Bhushan has authored other timely public health advisories, publications, and public service announcements, including on addressing youth and caregiver mental health needs, the infant formula shortage, and COVID-19 vaccination. Dr. Bhushan has research, policy, and clinical expertise in adversity and resilience, toxic stress, trauma-informed systems, mental health, the impacts of sex and gender on health, health equity, and addressing the structural determinants of health. Dr. Bhushan has served on Stanford's faculty in the General Pediatrics division, where she taught pediatrics residents and medical students at a federally qualified health center. She is a skilled communicator with significant journalism and editorial experience. Dr. Bhushan's work has been published in The Lancet, Pediatrics, The Los Angeles Times, National Public Radio, and The Sacramento Bee.

While Dr. Slavich focused on the cellular level, Dr. Gilgoff the individual level, Dr. Ortiz the dyadic, family, and community level, Dr. Bhushan will provide the policy perspective. She will provide the background of the California ACEs Aware Initiative, the policy implications, challenges and successes of the initiative, and policy opportunities in the future. She will offer examples of policy-level interventions to achieve primary, secondary, and tertiary prevention of childhood adversity and toxic stress, and provide insight into coordinating sector-specific and cross-

sector approaches to preventing and addressing childhood adversity and toxic stress.

All these panelists will use a health equity lens throughout their presentations as an integral part of addressing toxic stress from a cellular to society level.

We feel that this roundtable will align with all three of your conference themes:

- The Impact of Policies on Health and Research: This roundtable will discuss how California state policy through their ACEs Aware Initiative, California Initiative to Advance Precision Medicine, and California Institute for Regenerative Medicine have contributed to ACEs and toxic stress science and clinical translation into primary care.
- Addressing & Overcoming Racism in Clinical Care and Research: From Robin's draft bulletin on populations disproportionately affected: "Exposure to ACEs and the public health crisis they portend are propagated by inequitable social systems and structures including structural racism, discrimination, and poverty.2 What's further is that the call to action to mitigate the impacts of ACEs and toxic stress through primary, secondary, and tertiary preventive approaches1 is only feasible if systems of inequities are addressed." Dr. Ortiz will help move us from cells and individual healing, to systems-based and society-level strategies to dismantle stress-inducing systems and policies that are leading to stress-related health inequities.
- Science is Real: Research, Misinformation and Trust: Trauma Informed Care is centered around creating safety and trust for our patients. The same must be true for us as providers. This roundtable will help create safety and trust in the science of toxic stress being clear what we know, what we don't know, what tools, strategies and interventions are safe to implement in clinical practice today, and where we need more research.

9. Does this submission involve one or more specialties or disciplines?

Yes. As stress impacts our neurologic, neurodevelopmental, endocrine, metabolic, immune, and genetic systems, the science of stress and stress therapeutics has wide implications for clinical practice. Thus, nearly all of the tracks could be included. ACEs have been associated with over 60 health conditions to date including asthma, allergies, developmental delay, obesity, diabetes, food choices, anxiety, depression, suicidality, early sexual debut, drug use, and more.

Presentation Titles and Durations

Stress, Psychobiological Mechanisms, and Translational Biomarkers George M. Slavich, PhD

Duration of Presentation in Minutes

Toxic Stress Physiology and Individual Healing Rachel Gilgoff, MD **Duration of Presentation in Minutes**

15

Expanding Stress Biology to the Dyad, Family, and Community Robin Ortiz, MD, MS, FAAP

Duration of Presentation in Minutes

15

Healing from Toxic Stress: A Policy Approach

Devika Bhushan, N/A, MD

Duration of Presentation in Minutes

15

Scholarly Session ID: 1359840

CBME – Using Entrustable Professional Activities to Define our Specialty and Address Challenges to Improve Child Health

Session Type: Hot Topic Symposia

Submitter: David Turner

Participant(s)

1. DT

David A. Turner, MD

Position:

Vice President, Competency-Based Medical Education

Organization:

American Board of Pediatrics

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

2. AW

Ariel Winn, MD

Position:

Assistant Professor

Organization:

Boston Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

3. SP

Sue E. Poynter, MD, MEd

Position:

Professor of Pediatrics, Pediatric Residency Program Director

Organization:

Cincinnati Children's/University of Cincinnati

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

Session Description

Session Description

Competency-based medical education (CBME) is an approach to education and assessment designed to meet the needs of our patients. These needs of our patients are defined using Entrustable Professional Activities, or EPAs, which are an important component of CBME that define the essential activities

of the profession that must be performed (e.g., care for a well newborn; care for patients with common, acute problems). These professional activities reflect care that patients need. During training, curricula and assessment must focus on the ability to execute these EPAs with progressively less supervision, and ultimately as part of practice without supervision. The pediatrics and pediatric subspecialty communities, in partnership with the American Board of Pediatrics, have created EPAs that define the practice of general pediatrics and the subspecialties.

In this session, the general principles of CBME will be outlined and a leader from the American Board of Pediatrics will describe the process for developing and defining our specialty using EPAs. The session will include a description of how these EPAs can be used as a framework for lifelong learning from training through practice. The session will also include a description of how EPAs and CBME can be used to identify and address both individual and program gaps. The session will then conclude with a description of the development of a national curriculum focused on addressing educational gaps in behavioral and mental health based on the behavioral and mental health EPA developed by the community.

Learning Objectives

- 1. Describe an Entrustable Professional Activity (EPA) and how EPAs define the practice of pediatrics and pediatric subspecialties.
- 2. Discuss how EPAs can be used to assess gaps and to develop individualized learning plans and curricular improvements.
- Discuss the current gap that exists in behavioral and mental health education in pediatrics and how an EPA-based curriculum can help address this gap.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

Pediatricians

Pediatric Subspecialists

Educators including training program leaders, academic faculty

Trainees

Department/Institutional Leaders/Administrators

Behavioral and Mental Health Experts

3. Tracks

Career Development
Children with Chronic Conditions
Diversity, Equity, and Inclusion
General Pediatrics
Medical Education
Mental Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 If possible, avoiding conflicts with other major education or behavioral/mental health sessions would allow for maximum attendance.
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Yes. This topic is important for general pediatrics and all subspecialties.

Presentation Titles and Durations

Advancing competency-based medical education - Defining our specialty using entrustable professional activities

David A. Turner, MD

Duration of Presentation in Minutes

30

Assessing and addressing individual and curricular gaps using EPAs and the principles competency-based medical education

Ariel Winn, MD

Duration of Presentation in Minutes

30

Addressing the behavioral and mental health crisis through development and implementation of a national curriculum

Sue E. Poynter, MD, MEd

Duration of Presentation in Minutes

30

Modeling the Effects of Racism on Equity in Child Health and Development

Session Type: **Hot Topic Symposia** Submitter: **Deborah Winders Davis**

Participant(s)

1. DD

Deborah Winders Davis, PhD

Position: Professor

Organization:

University of Louisville School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APA

2. JP

Jennifer Porter, MD

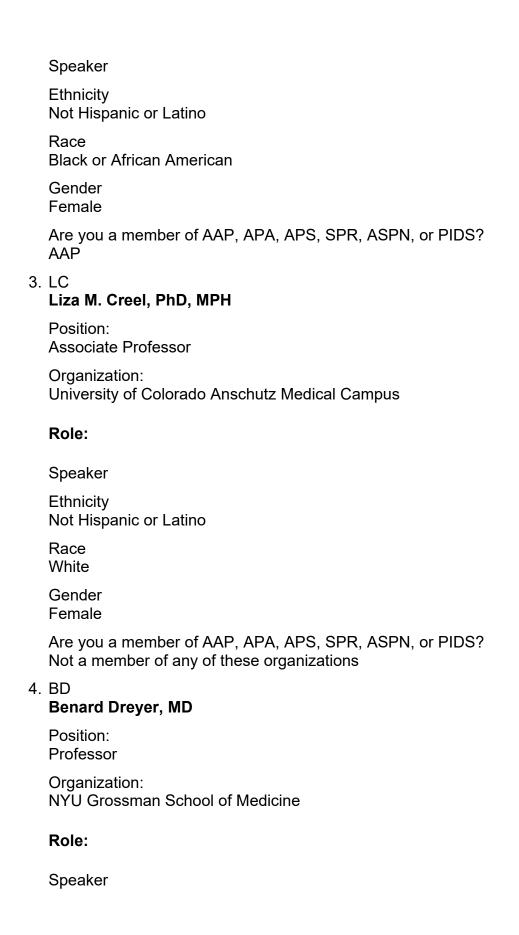
Position:

Associate Professor

Organization:

University of Louisville School of Medicine

Role:



	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS
5.	MS Michelle Stevenson, MD MS
	Position: Professor of Pediatrics
	Organization: University of Louisville School of Medicine
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR
6.	∨J V. Faye Jones, MD, PhD, MSPH
	Position: Professor
	Organization: University of Louisville School of Medicine
	Role:
	Speaker

Ethnicity Not Hispanic or Latino

Race

Black or African American

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

Session Description

Session Description

Literature has identified child health and developmental inequities by race/ethnicity. However, race is a social construct resulting in many misconceptions regarding the mechanisms underlying these inequities. Frequently, inequities are considered alone rather than part of a larger system of structural racism and discrimination. Commonly lacking from models are modifiable protective factors, such as social support, neighborhood cohesion, and racial identity and socialization, that can be addressed through changes in practice and policy development and implementation. Multiple social and environmental factors contribute to child health outcomes. Using an example from child development, participants will explore the complex relationships between these elements, with a focus on family stressors and protective factors. Participants will critique a new model of caregiver scaffolding behavior, which directly influences child cognitive and social-emotional development. The model was adapted from previous models of cumulative stressors yet can be further modified for other child health and developmental outcomes A multidisciplinary team of experts will present the model, discuss policy implications, discuss the relevance of the model to improving child health and developmental outcomes, and engage the audience in an interactive discussion.

Learning Objectives

- 1. 1. identify factors associated with health and developmental inequities.
- 2. 2. Identify factors that may protect against the effects of racism on child and family health and development.
- 3. 3. analyze a theoretical model for use in health equity policy and interventions.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200

2. Target audience

Physicians, non-physician providers, psychologists, social workers, researchers, policy analysts, trainees, and all PAS attendees.

3. Tracks

Clinical Research

Developmental and Behavioral Pediatrics

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Developmental and Behavioral Pediatrics; DEI sessions

- If your session was presented at another conference, please describe the conference and presentation. N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Addressing & Overcoming Racism in Clinical Care and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

The topic is DEI involving general pediatrics, public health, advocacy, and health services research.

Presentation Titles and Durations

Introduction

Deborah Winders Davis, PhD

Duration of Presentation in Minutes

5

It's Racism not Race: How to Reframe a Model for Change Jennifer Porter. MD

Duration of Presentation in Minutes

20

Leveraging Evidence for Policy Development and Implementation Liza M. Creel, PhD, MPH **Duration of Presentation in Minutes** 20

Discussant Benard Dreyer, MD **Duration of Presentation in Minutes** 15

Interactive Discussion/Q and A
Michelle Stevenson, MD MS **Duration of Presentation in Minutes**15

Interactive Discussion/Q and A V. Faye Jones, MD, PhD, MSPH **Duration of Presentation in Minutes** 10

Ethical Issues in Neonatal Precision Medicine – Understanding the Clinical Utility of Genome Sequencing (GS)

Session Type: Hot Topic Symposia

Submitter: John Lantos

Participant(s)

1. JL

JOHN D. LANTOS, MD

Position:

President

Organization:

JDL Consulting

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS

2. LB

Luca Brunelli, MD, PhD

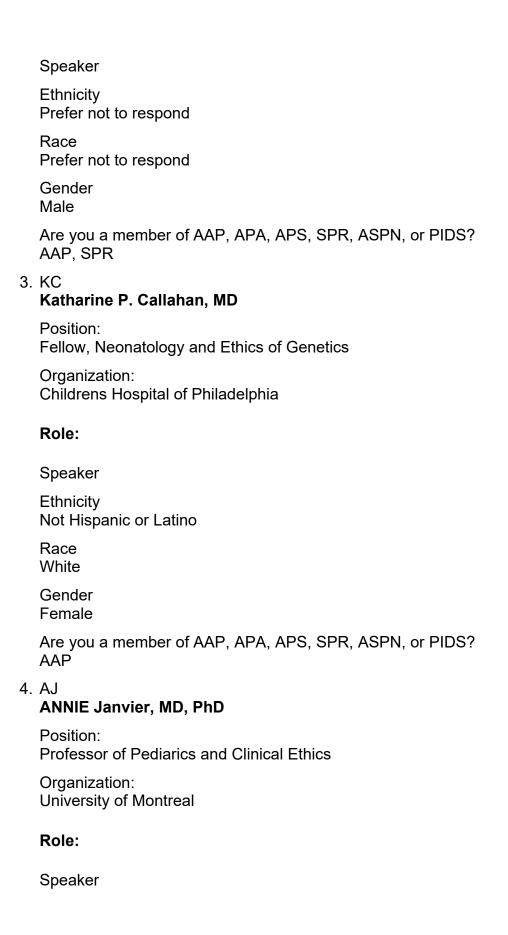
Position:

Professor of Pediatrics

Organization:

University of Utah

Role:



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR

5. RH

Robin Hayeems, ScM PhD

Position:

Scientist

Organization:

The Hospital for Sick Chioldren

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Genome Sequencing (GS) is widely used for the diagnosis of critically ill newborns. There are effective genotype-driven treatments for only a minority of the diseases identified. Thus, utility is generally purely informational and difficult to measure. One commonly reported measure of utility is change of management (COM), e.g., new drugs, cancelled procedures, referrals, family counseling, and rarely palliative care. Does genetic counselling represent a

COM when it has an impact on families? We will highlight several concerns with utilizing COM as a measure of clinical utility. First, patients for whom GS is offered are medically complex. It is often difficult to determine the precise reason for any COM. Second, current approaches to measuring COM highlight change over value. For instance, the common COM of referral to specialists can improve health but can also add cost or worry. Finally, GS results may lead to redirection towards withdrawal of life sustaining treatments. Frequently, this may be in the best interest of the patient. In other cases, however, the predictive value of GS results is uncertain and does not bring any additional data. Do clinicians rely too much on genetic data? In this panel, speakers will critically examine the use of COM and provide several suggestions on how this measure of utility could be improved. We will discuss an innovative tool to assess utility from the clinician's and parent's perspective. We anticipate that improved measurement strategies will advance the understanding of the clinical benefit of GS for critically ill newborns.

Learning Objectives

- 1. Understand current approaches to assessing the clinical utility of diagnostic genome sequencing in the NICU.
- 2. Recognize the usefulness and the shortcomings of "change in management" as a measure of the clinical utility of genomic sequencing in the NICU.
- 3. Critically analyze different approaches to defining and measuring the clinical utility of genomic screening in different populations of babies.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

150

2. Target audience

Neonatologists, geneticists, genetic counselors, bioethicists

3. Tracks

Clinical Bioethics

Genomics/Epigenomics

Neonatology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. genomics, neonatology, bioethics

- If your session was presented at another conference, please describe the conference and presentation.
 N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Science is Real: Research, Misinformation and Trust

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic is genome sequencing for newborns and includes neonatologists, bioethicists, and a basic scientist.

Presentation Titles and Durations

Introduction � the evolution and ambiguity of genome sequencing in newborns JOHN D. LANTOS, MD

Duration of Presentation in Minutes

10

Evaluating outcome studies of GS in the NICU.

Luca Brunelli, MD, PhD

Duration of Presentation in Minutes

15

Informational hazards of GS in newborns and how to overcome them Katharine P. Callahan, MD

Duration of Presentation in Minutes

15

The limits of GS results to inform decisions about forgoing life-sustaining interventions.

ANNIE Janvier, MD, PhD

Duration of Presentation in Minutes

15

An innovative tool for evaluating the clinical utility of GS in newborns. Robin Hayeems, ScM PhD

Duration of Presentation in Minutes

15

So much evidence, so little time: Navigating misinformation and becoming an academic sleuth in the social media age

Session Type: Hot Topic Symposia

Submitter: Rasheda Vereen

Participant(s)

1. RV

Rasheda J. Vereen, rjvereen@gmail.com

Position:

Assistant Professor of Pediatrics; Staff Neonatologist

Organization:

Uniformed Services University of the Health Sciences F. Edward Hebert School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. AM

Atul Malhotra, MD, PhD

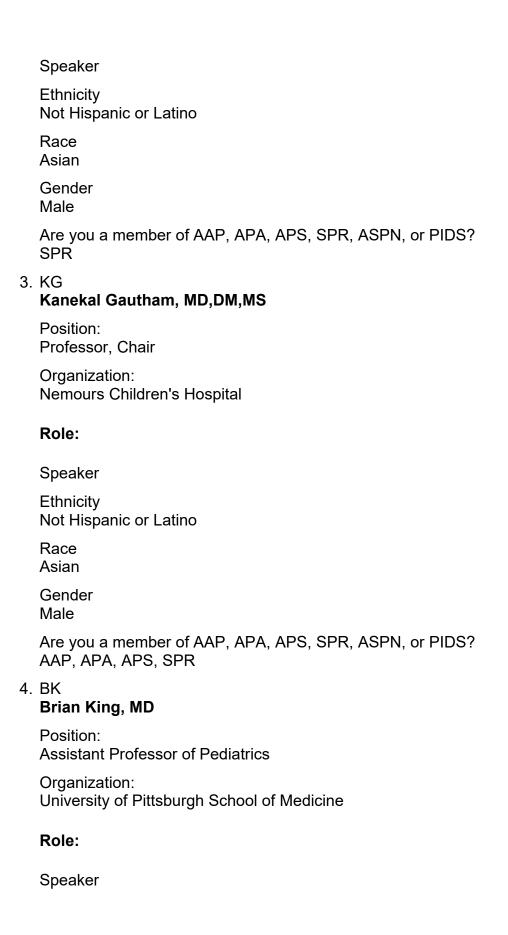
Position:

Consultant Neonatologist & Associate Professor

Organization:

Monash University

Role:



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

5. SM

Souvik Mitra, MD, MSc, PhD, FRCPC

Position:

Associate Professor

Organization:

Dalhousie University & IWK Health

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

In an age with numerous social media platforms where both families and clinicians are more reliant on the internet for information—finding, sharing, understanding, and analyzing the literature is more difficult than ever. Navigating social media has become increasingly difficult with concerns of misinformation and the growing number of methods of dissemination. There are ever-growing challenges to practicing medicine in the age of social media.

Does social media create a practice environment consumed by misinformation or does it provide independent access to the latest best information? How do you navigate the discussion when a family brings you a novel management strategy that they found on social media? How do you identify misinformation—is it just misinterpretation of the evidence or could it be from unreliable sources?

This interactive session will bring together a group of experts with diverse experiences in using social media. We will highlight the benefits and risks in using social media to stay up to date on and pediatric evidence, while giving participants the tools and skills to critically appraise literature. We will discuss the evolution of the impact of social media on medical education and research and further examine publication ethics and the role of social media in identifying research errors and misconduct. The presentation will conclude with examining the responsibility of the academic community in building a culture of trust and research integrity as well as tips for how clinicians can best utilize social media.

Learning Objectives

- 1. Describe the benefits and risks of using social media to stay up to date with the pediatric literature
- Develop skills to identify misinformation disseminated through social media using critical appraisal tools, and build a stronger culture of research integrity
- 3. Discuss social media best use practices and collaborative partnering with families in information sharing

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

All interested in improving their skills in navigating the intersections between scientific literature and social media.

3. Tracks

Academic and Research Skills Career Development Clinical Research General Pediatrics Literacy Medical Education
Social Media & Technology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

 N/A
- 6. If your session was presented at another conference, please describe the conference and presentation.

 N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 Science is Real: Research. Misinformation and Trust
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic focuses on social media use in medicine and the tools are applicable to all disciplines.

Presentation Titles and Durations

Social media is a reality: the current impact on practicing medicine Rasheda J. Vereen, rjvereen@gmail.com

Duration of Presentation in Minutes

15

The algorithm: how social media impacts the ability to find research Atul Malhotra, MD, PhD

Duration of Presentation in Minutes

20

Trustworthiness and misinformation: how social media impacts clinical practice Kanekal Gautham, MD,DM,MS

Duration of Presentation in Minutes

15

Building a community of trust and research integrity Brian King, MD

Duration of Presentation in Minutes

15

Applying Social Media to Practice Souvik Mitra, MD, MSc, PhD, FRCPC **Duration of Presentation in Minutes**

15

De-implementation - The Science of Reducing Low Value Care

Session Type: Panel Discussion Submitter: Ricardo Quiñonez

Participant(s)

1. RQ

Ricardo Quinonez, MD

Position:

Associate Professor - Chief Division of Hospital Medicine

Organization:

Baylor College of Medicine - Texas Children's Hospital

Role:

Submitter; Speaker; Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

2. SH

Samantha House, DO, MPH

Position:

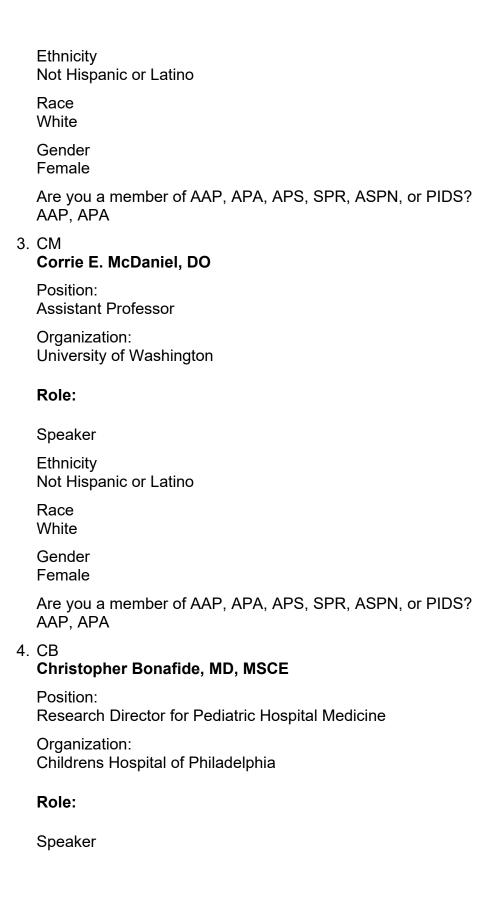
Associate Professor of Pediatrics

Organization:

Children's Hospital at Dartmouth-Hitchcock

Role:

Speaker



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

5. AS

Alan Schroeder, Schroeder, MD

Position:

Clinical Professor

Organization:

Stanford University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

Session Description

Session Description

De-implementation is the discontinuation of practices that have been proven to be ineffective, less effective or less cost-effective than an alternative practices, and are potentially harmful. In healthcare, many practices are often adopted before high-quality evidence supports their implementation. De-implementation efforts often become necessary once evidence is available that highlights the futility of these practices. This session will introduce participants to the concept

of de-implementation and highlight current, active and successful efforts including national collaboratives focused on de-implementation of low-value practices. Panelists will highlight the incremental importance of de-implementation in the COVID era, as well as how it relates to other critical issues facing modern healthcare such as health disparities and climate change. Panel participants are experts in the field of de-implementation science with extensive publications highlighting low-value care practices in pediatrics. They have led and designed national efforts including grant-funded multi-center collaborations to rigorously study best practices for de-implementation of low-value practices.

Learning Objectives

- 1. Define de-implementation science and its importance in health-care
- 2. Discuss the incremental importance of de-implementation in the COVID era and its effect on health equity
- 3. Describe effective de-implementation efforts and their keys to success

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

Wide spectrum of pediatric generalists and subspecialists

3. Tracks

Academic and Research Skills

Clinical Research

COVID-19

Diversity, Equity, and Inclusion

General Pediatrics

Hospital Medicine

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Hospital Medicine SIG

Oral research abstract sessions

6. If your session was presented at another conference, please describe the conference and presentation.

A version of this was presented at the National Pediatric Hospital Medicine meeting

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research
Addressing & Overcoming Racism in Clinical Care and Research

8. Additional comments

This is a novel topic for PAS and we believe it will generate significant interest. Additionally, given PAS' specific focus on issues regarding health equity, there is significant evidence about how low-value care particularly affects patients who are members of disadvantaged populations

9. Does this submission involve one or more specialties or disciplines?

Yes, it cuts across specialties and the lessons can be applicable to all pediatric specialties

Presentation Titles and Durations

Introduction - what is de-implementation and why is it important? Ricardo Quinonez, MD

Duration of Presentation in Minutes

10

Prioritizing De-implementation Post-pandemic - getting back to value Samantha House, DO, MPH

Duration of Presentation in Minutes

15

The De-implementation Loop - why medical interventions are harder to stop than to start

Corrie E. McDaniel, DO

Duration of Presentation in Minutes

15

The Science of De-implementation - writing grants and running deimplementation clinical trials Christopher Bonafide, MD, MSCE

Duration of Presentation in Minutes

15

Safely and Equitably Doing Less: the complicated relationship between deimplementation and health disparities - Q&A

Alan Schroeder, Schroeder, MD

Duration of Presentation in Minutes

35

Physician and Trainee Well-being: A Complex Problem and Systematic Solutions

Session Type: Panel Discussion

Submitter: Julie Young

Participant(s)

1. JY

Julie A. Young, PhD, ATC

Position:

Program Manager

Organization:

Nationwide Children's Hospital

Role:

Submitter; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. JS

Janet R. Serwint, Serwint, MD

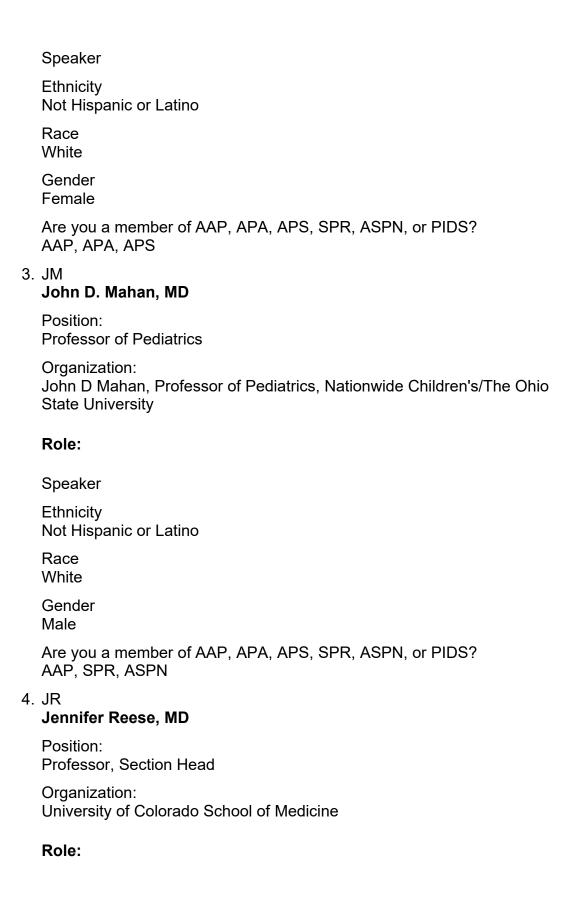
Position:

Professor Emerita of Pediatrics

Organization:

Johns Hopkins University School of Medicine

Role:



Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

5. MB

Maneesh Batra, MD, MPH

Position:

Professor of Pediatrics - Neonatology, Global Health

Organization:

University of Washington School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR

Session Description

Session Description

Physician Well-being is a complex issue that is affecting a great number of practitioners. This panel discussion will offer insights to improve well-being across four domains: Optimizing mental health, engagement in systems improvement, prompting resilience, and maintaining the joy in medicine. Each

domain has components for individual and systems level application. Mental health will focus on the current state of mental health in physicians and practical suggestions to improve. Engagement will focus on empowering physicians to make changes to their environment as a means to help them flourish. Resilience will discuss how personal resilience is important to aide the individual in coping with the stresses of physician work. Joy in Medicine will explore how to connect with the reasons why participants became physicians and how to leverage that energy to improve well-being. There will be a panel discussion of the issues surrounding physician well-being, a panel discussion of cases and then an interactive Q and A session with the audience. This panel currently is running a HRSA funded program in these areas across the nation and will reach 25 hospital systems over the next couple years.

Learning Objectives

- 1. Understand the complex nature of physician well-being (systems science view?) and how individuals and systems have different and similar leverage points to exact change.
- 2. Analyze their individual and work systems behavior and understand how to apply behavior change principles to improve their well-being.
- 3. Implement individual and systems level changes in mental health, engagement, resilience and joy in medicine.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

Pediatricians, trainees, those interested in clinician well-being

3. Tracks

Career Development
Core Curriculum for Fellows
Medical Education
Wellness and Well-being

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. NA
- 6. If your session was presented at another conference, please describe the conference and presentation.

NA

- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

Mental Health as a Vital Sign: Optimizing Physician Mental Health Janet R. Serwint, Serwint, MD

Duration of Presentation in Minutes

15

Engagement in Systems Improvement John D. Mahan, MD **Duration of Presentation in Minutes** 15

The PERMA-H Model for Building Resilience Jennifer Reese, MD **Duration of Presentation in Minutes** 15

Maintaining Joy and Meaning in Medicine Maneesh Batra, MD, MPH **Duration of Presentation in Minutes** 15

Pediatric Telehealth Across the Spectrum: Updated Case Studies in Critical Care, Hospital Medicine and Infectious Disease

Session Type: **Hot Topic Symposia** Submitter: **Vandana Madhavan**

Participant(s)

1. PY

Phoebe H. Yager, MD

Position:

Assistant Professor

Organization:

Massachusetts General Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. CE

Chadi M. El Saleeby, MD

Position:

Assistant Professor

Organization:

MassGeneral Hospital for Children

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

3. VM

Vandana L. Madhavan, MD, MPH

Position:

Clinical Director, Pediatric Infectious Disease

Organization:

MassGeneral Hospital for Children

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, PIDS

Session Description

Session Description

Telehealth use has grown in recent years, exponentially so during the current COVID-19 pandemic, with pediatric providers rapidly adopting various platforms for delivery of care in different settings. The combination of increased availability of and familiarity with necessary technology offers the opportunity

for more systematic implementation, expansion of current programs, and ongoing study of telehealth initiatives to improve quality of care.

We will have a brief 5-minute introduction of the current state of pediatric telehealth including different formats, goals, and licensing and reimbursement considerations. The core of the session will consist of a series of three 15-23minute presentations in which departmental leaders in pediatric critical care, pediatric hospital medicine and pediatric infectious disease will review their experiences in needs assessments; program development and implementation; ongoing program review, improvement, and expansion with discussion of both published and unpublished data; specific challenges in Year 3 of the pandemic; and future directions of several divisional initiatives in telehealth. There will be emphasis on interval updates since a similar symposium was presented at PAS 2021. We will have interspersed 3-5-minute Q&A sessions to allow participants to learn more about presenters' work and conclude with a 15-minute interactive Q&A session to delve further into desired topics (e.g., reimbursement), and share details of their own established or growing programs. As the 2021 symposium was virtual, this session will allow for increased interaction and learning.

Learning Objectives

- 1. Learn about multiple telehealth programs in different clinical settings at one institution and their impacts on patient care, quality and satisfaction
- 2. Identify strategies to implement, study, and/or improve new or existing programs at their own institutions
- 3. Share their own experiences and learn about specific challenges including pandemic-related

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

Pediatricians (primary care and specialists), pediatric surgeons and advanced practice providers interested in learning more about established telehealth programs as they grow their own programs during the pandemic.

3. Tracks

Critical Care General Pediatrics Hospital Medicine Infectious Diseases
Quality Improvement/Patient Safety
Telemedicine/EHR/Medical Informatics

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. N/A
- 6. If your session was presented at another conference, please describe the conference and presentation.

This session was presented in PAS 2021 as a virtual Hot Topic Symposium with same presenters and topics. This proposal will offer updates and insights from the interval two years for providers expanding their own telehealth programs. PHM data has been presented locally and regionally, as interactive workshops at PAS 2019 and PHM 2019 and as research posters at AAP NCE (2018, 2019). Pediatric ID data would have been presented as oral platform at PAS 2020 and was presented as poster at AAP NCE 2020. Manuscripts for both PHM and PID work are in process. Pediatric critical care work has been published in several articles.

- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 Does not apply
- 8. Additional comments

The speakers' sections only total 75 minutes. Each section includes 3-5 minutes of Q&A immediately following. There will also be a 5-minute Introduction and a final 15-minute interactive Q&A section presented by the Chair but these sections are unable to be entered separately as I am also a Speaker for one of the sections.

9. Does this submission involve one or more specialties or disciplines?

Speakers are or have recently worked in Pediatric Infectious Disease (VM, CES), Pediatric Hospital Medicine (CES, VM) and Pediatric Critical Care (PY).

Presentation Titles and Durations

Telehealth in pediatric clinical care: Acute care consultation, virtual rounds, remote simulation-based education

Phoebe H. Yager, MD

Pediatric hospital medicine: Implementation and assessment of post-discharge virtual visits

Chadi M. El Saleeby, MD

Duration of Presentation in Minutes

18

Pediatric infectious disease: Virtual clinic visits, asynchronous e-consults and virtual inpatient consultations
Vandana L. Madhavan, MD, MPH **Duration of Presentation in Minutes**

28

Integrating DEI Principles Into Departmental Culture

Session Type: Hot Topic Symposia

Submitter: Mary Ehlenbach

Participant(s)

1. ME

Mary L. Ehlenbach, MD

Position:

Associate Professor

Organization:

University of WI School of Medicine and Public Health

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian, White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

2. ER

Emily Ruedinger, MD, MEd

Position:

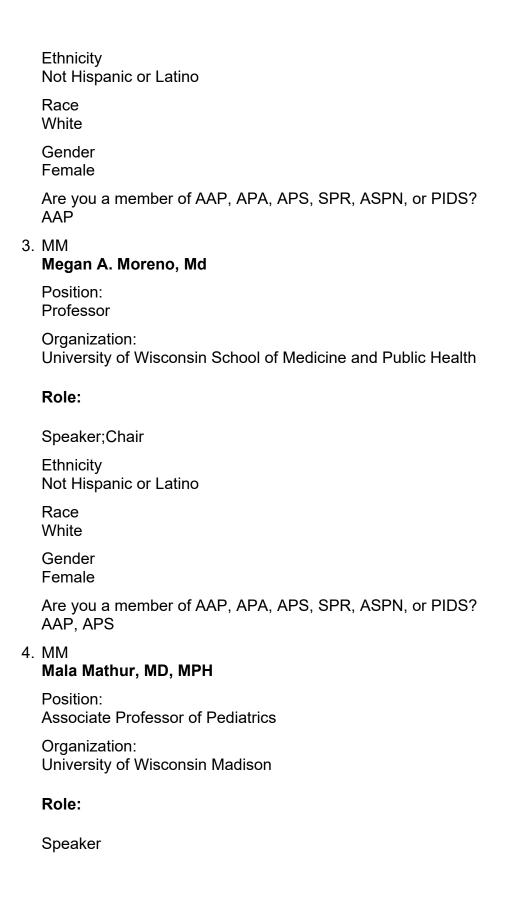
Assistant Professor of Pediatrics, Associate Residency Program Director

Organization:

University of Wisconsin School of Medicine and Public Health

Role:

Speaker



	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA
5.	KM Kelly McGregory, DO, MS, FAAP
	Position: Clinical Associate Professor of Pediatrics
	Organization: University of Wisconsin Hospital and Clinics
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Black or African American
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP
6.	LH Laura Houser, MD
	Position: Clinical Professor
	Organization: University of Wisconsin School of Medicine and Public Health
	Role:
	Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

Integrating diversity, equity, and inclusion (DEI) principles into all aspects of departmental culture is a challenge for many pediatric departments. Successful culture change includes: 1) sustained institutional motivation, 2) tangible support, 3) key collaborations and 4) transparent exploration of DEI incidents. We will explore how these elements advanced DEI culture change in our department.

Sustained institutional motivation: Existing DEI strategic priorities were accelerated during the 2020 summer of social unrest. In words and actions, departmental leadership sponsored the concept that diversity is excellence, facilitating a coalescence of department members with collective will to promote and sustain culture change. A longitudinal social justice curriculum in our department will be highlighted as an example.

Tangible support: Several departmental directorships with dedicated time and resources were formalized in 2021. The Directors of Advocacy, Professional Development, and DEI; a full-time administrative specialist; and residency leaders were critical to integrating DEI into departmental culture across roles. We will discuss strategies to advocate for supports that further DEI initiatives.

Key Collaborations: Pivotal collaborations helped facilitate a DEI-focused culture, including with our institution's DEI leaders and interdepartmental colleagues both within and outside of our institution. Collaborations resulted in implementation of Health Equity Rounds, a key example of culture change.

Transparent Exploration of DEI Incidents: Humility, growth mindset and commitment to lifelong learning create an environment where DEI principles thrive. To model this, we have centered actual DEI incidents that occurred in

our department and hospital in educational endeavors. Health Equity Rounds and other examples will be featured.

Learning Objectives

- 1. Advocate with their departmental leadership for tangible support to build a culture that integrates DEI principles.
- 2. Identify potential collaborations on DEI initiatives that will spark sustainable institutional motivation for culture change.
- 3. Explore one DEI-focused incident in their department that would be instructive to examine transparently and openly.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

Department and institutional leaders, all disciplines at all stages interested in promoting a culture of DEI

3. Tracks

Advocacy

Career Development

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

Leadership and Business Training

Medical Education

School and Community Health

Wellness and Well-being

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Complex Care/CSHCN

Child abuse

adolescent medicine

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Addressing & Overcoming Racism in Clinical Care and Research

8. Additional comments

9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

Welcome & Introductions, Future Directions, Q&A Mary L. Ehlenbach, MD **Duration of Presentation in Minutes** 20

Fostering Sustained Institutional Motivation for CHANGE Emily Ruedinger, MD, MEd **Duration of Presentation in Minutes** 20

Turning Tangible Support Into Culture Transformation Megan A. Moreno, Md **Duration of Presentation in Minutes**10

Longitudinal Relationships & Inclusive Leadership Facilitate Collaboration Mala Mathur, MD, MPH

Duration of Presentation in Minutes

10

Capitalizing on Collaboration & Mentorship Kelly McGregory, DO, MS, FAAP **Duration of Presentation in Minutes** 15

This Happened Here: Transparency Promotes Culture Change Laura Houser, MD

Duration of Presentation in Minutes

15

Perinatal Origins of Pulmonary Vascular Disease: Mechanisms and Therapies

Session Type: Hot Topic Symposia

Submitter: Binoy Shivanna

Participant(s)

1. BS

Binoy Shivanna, MD, PhD

Position:

Associate Professor

Organization:

Baylor College of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

2. SA

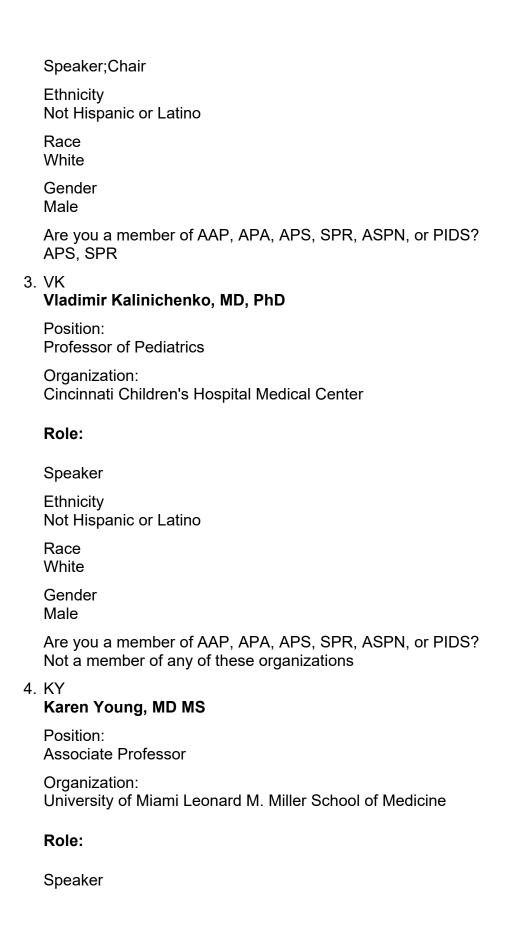
Steven H. Abman, MD

Position:

Professor

Organization:

University of Colorado School of Medicine



	Ethnicity Not Hispanic or Latino
	Race Black or African American
5.	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR
	∨B Vineet Bhandari, MD, DM
	Position: Division Head & Professor
	Organization: The Children's Regional Hospital at Cooper
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR
6.	NA Namasivayam Ambalavanan, MD
	Position: Professor of Pediatrics
	Organization: University of Alabama School of Medicine
	Role:
	Speaker

Ethnicity Not Hispanic or Latino Race Asian Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR 7. NV Nidhy P. Varghese, Varghese, MD FAAP Position: Associate Professor of Pediatrics, Pulmonology; Medical Director, Pulmonary Hypertension Center Organization: Baylor College of Medicine, Texas Chil Role: Speaker Ethnicity Prefer not to respond Race Prefer not to respond Gender Prefer not to respond Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP 8. SL Satyan Lakshminrusimha, MD FAAP Position: Professor and Chair Organization: UC Davis Children's Hospital Role: Speaker

Ethnicity
Not Hispanic or Latino

Race Asian

Gender Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR

Session Description

Session Description

Pulmonary hypertension (PH), a fatal pulmonary vascular disease, remains a frequent complication of developmental lung disorders, including bronchopulmonary dysplasia (BPD), congenital diaphragmatic hernia (CDH), and alveolar capillary dysplasia with misalignment of pulmonary veins despite improved management of infantile respiratory failure. Further, most infants with these disorders respond poorly to conventional pulmonary vasodilators. PH also increases morbidities and mortality in these infants. Thus, the need of the hour is to understand the pathogenesis and develop meaningful therapies for PH in these disorders. Several factors remain poorly understood in these patients, including the molecular process affecting pulmonary endothelial homeostasis; resilience and risk factors for PH progression; the role of artificial intelligence in infantile PH; optimal SpO2 targets; choice of pulmonary vasodilators; and how to initiate and wean supplemental therapies such as diuretics, bronchodilators, and steroids. This symposium addresses these gaps by providing up-to-the-minute information through systematic analyses of preclinical and clinical studies. Dr. Shivanna will begin the session by presenting the overview and impact of this symposium on infants' cardiopulmonary health. Drs. Abman, Kalinichenko, Young, and Bhandari will present novel pathogenic mechanisms of PH associated with developmental lung disorders. Later, Dr. Ambalavanan will present the role of predictive modeling in these disorders, while Drs. Varghese and Lakshminrusimha will highlight the best evidence-based strategies to manage PH in BPD and CDH, respectively. Finally, the symposium participants will be allowed sufficient time to have a robust discussion with the panelists about the roadblocks to clinical translation, future research directions, and collaboration opportunities.

Learning Objectives

- Identify how microRNAs and deregulated signaling of blood vessels and stem cells contribute to the pathogenesis of pulmonary hypertension (PH) in developmental lung disorders.
- 2. Illustrate how to target lung vasculature, microRNAs, and stem cells to prevent and treat PH in infants.
- Analyze the evidence behind the strategies to manage PH in infants with bronchopulmonary dysplasia (BPD) and congenital diaphragmatic hernia (CDH).

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

150

2. Target audience

Basic researchers, Neonatologists, Pulmonologists, Cardiologists, Pathologists, Nutritionists, Microbiologists, and Trainees

3. Tracks

Basic Science

Cardiology

Children with Chronic Conditions

Clinical Research

Developmental Biology

Neonatology

Pharmacology and Therapeutics

Pulmonology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Pulmonary Hypertension, Bronchopulmonary Dysplasia, and Congenital Diaphragmatic Hernia
- 6. If your session was presented at another conference, please describe the conference and presentation.

This session was presented and well received at the 2021 ATS meeting. We have modified the session by including two new talks to keep up with the recent advances in this field. Further, we will provide important updates on the topics since our last session.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply

8. Additional comments

9. Does this submission involve one or more specialties or disciplines?

Topic involves Neonatology, Pulmonology, Cardiology, Pediatric Surgery, Pharmacology and Therapeutics

Presentation Titles and Durations

Introduction (5 minutes) and Q and A (15 minutes)

Binoy Shivanna, MD, PhD

Duration of Presentation in Minutes

20

Angiogenic targets for the prevention of BPD-PH

Steven H. Abman, MD

Duration of Presentation in Minutes

10

Endothelial Progenitor Cells in Developmental Lung Diseases

Vladimir Kalinichenko, MD, PhD **Duration of Presentation in Minutes**

10

Regenerative Stem Cell Therapy in PH associated with BPD and CDH Karen Young. MD MS

Duration of Presentation in Minutes

10

microRNAs in BPD-PH

Vineet Bhandari, MD, DM

Duration of Presentation in Minutes

10

Predictive Modeling in Developmental Lung Disorders Associated with PH Namasivayam Ambalavanan, MD

Duration of Presentation in Minutes

10

An evidence-based approach to diagnose and manage PH in BPD infants Nidhy P. Varghese, Varghese, MD FAAP

Duration of Presentation in Minutes

10

An evidence-based approach to diagnose and manage PH in CDH infants Satyan Lakshminrusimha, MD FAAP

Duration of Presentation in Minutes

10

Pediatric Policy Council Legislative Breakfast: Unpacking the Politicization of Child Health

Session Type: Hot Topic Symposia

Submitter: Matthew Mariani

Participant(s)

1. MM

Matthew S. Mariani

Position:

N/A

Organization:

Pediatric Policy Council

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. SS

Shetal Shah, Shah, MD

Position:

Clinical Professor of Pediatrics

Organization:

New York Medical College

Speaker; Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

3. MD

Mark Del Monte, Del Monte, JD

Position:

CEO\Executive Vice President

Organization:

American Academy of Pediatrics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

Session Description

Session Description

Child advocates are accustomed to ensuring children aren't left out of public policy debates that have important implications for their health and well-being, often reminding elected leaders that children aren't just little adults. The experience of recent years, however, presents different challenges: rather than

an afterthought, children have been thrust into the spotlight in U.S. political discourse. From contentious debates about masking in schools to harmful rhetoric targeting the care of transgender and gender-diverse youth, politicians have made lighting rods of key child health issues, polarizing Americans in their views of what is best for young people and turning children into political footballs. This reality has made advocacy for children more complicated, forcing child advocates to navigate difficult political currents and heated passions. What is behind the focus on issues like critical race theory in schools and book bans? How can we refocus the debate on what is truly best for children? Join the Pediatric Policy Council for this session to explore the politicization of child health. Mark Del Monte, JD, chief executive officer and executive vice president of the American Academy of Pediatrics, and Shetal Shah, MD, chair of the Pediatric Policy Council will be joined by an inside-the-Beltway political commentator to offer insights on the issue and engage the audience in dialogue about how to effectively speak up for children in this challenging environment.

Learning Objectives

- 1. Learn about the dynamics shaping the political discourse around children in the U.S.
- 2. Learn about effective messages to refocus the debate on policies and programs that meet children's needs.
- 3. Identify opportunities for academic pediatricians to speak out in support of child health during turbulent times.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100-150

2. Target audience

Pediatric research and child health advocates

3. Tracks

- Advocacy
 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

 Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

 If possible, please avoid other advocacy-focused sessions.
- 6. If your session was presented at another conference, please describe the conference and presentation.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

Following introductory remarks from Mr. Del Monte and Dr. Shah, the remainder of the hourlong session will be devoted to a presentation from an invited speaker and Q&A.

9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

Welcome Shetal Shah, Shah, MD **Duration of Presentation in Minutes**

Introduction
Mark Del Monte, Del Monte, JD **Duration of Presentation in Minutes**10

Update on liver disease for the nephrologist: From primary diseases involving the liver & kidney to Extracorporeal Therapies

Session Type: Hot Topic Symposia

Submitter: Kimberly Reidy

Participant(s)

1. KR

Kimberly J. Reidy, MD

Position:

Associate Professor

Organization:

Children's Hospital at Montefiore

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN

2. EH

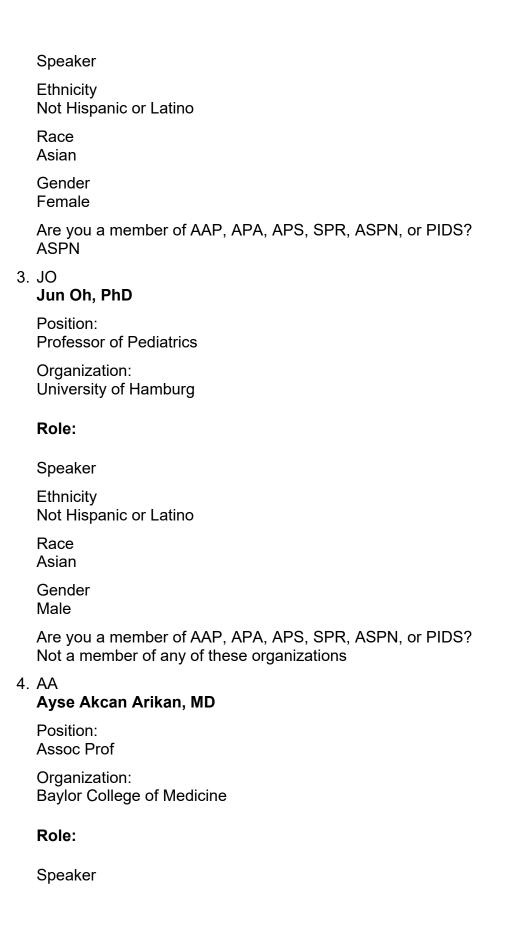
Erum A. Hartung, MD, MTR

Position:

Assistant Professor of Pediatrics

Organization:

Children's Hospital of Philadelphia



	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR, ASPN $$
5.	RR Rebecca Ruebner, MD, MSCE
	Position: Assistant Professor
	Organization: Johns Hopkins University
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, ASPN $$
6.	TW Tennille N. Webb, MD, MSPH
	Position: Assistant Professor
	Organization: University of Alabama at Birmingham/Children's of Alabama
	Role:
	Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN

Session Description

Session Description

Brief Description of Overall Session: This session will seek to review the complex interactions between liver and kidney disease. The session will begin with an overview and update of primary diseases that impact the liver and kidney. The session will then transition into the short-term and long-term management of children with liver disease from a nephrologist's perspective including: AKI, hepatorenal syndrome, extracorporeal therapies for acute liver failure, and managing children after liver transplant.

- 1. Topic/title: An update on diseases that impact the kidneys and liver Objective: Understand new advancements in the pathophysiology, diagnosis, and management of hepatorenal diseases
- 2. Topic/title: Acute kidney injury and hepatorenal syndrome in children with liver disease

Objective: Understand the epidemiology and risk factors for AKI in children with liver disease, understand management of AKI in pediatric liver disease including therapies for hepatorenal syndrome

- 3. Topic/title: Extracorporeal therapies for the management of acute liver failure Objective: Understand the indications and efficacy of extracorporeal liver support systems (CRRT, MARS, plasmapheresis)
- 4. Managing patients with liver transplant: From the OR to CKD Objective: Review kidney related complications and management throughout the course of liver transplantation

Learning Objectives

- 1. 1. Recognize kidney complications of acute liver failure and other diseases that impact both kidney and liver.
- 2. 2. Describe management of acute liver failure with extracorporeal therapies.
- 3. 3. Understand long term kidney complications of liver transplant.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50-100

2. Target audience

Pediatric nephrologists, GI/hepatology, intensive care

3. Tracks

Critical Care

Gastroenterology/Hepatology

Nephrology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 ASPN content
- If your session was presented at another conference, please describe the conference and presentation.
 n/a
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

n/a

9. Does this submission involve one or more specialties or disciplines?

Pediatric nephrology/ hepatology/GI/ intensive care

Presentation Titles and Durations

An update on diseases that impact the kidneys and liver Erum A. Hartung, MD, MTR

Duration of Presentation in Minutes

20

Acute kidney injury and hepatorenal syndrome in children with liver disease

Jun Oh, PhD **Duration of Presentation in Minutes** 20

Extracorporeal therapies for the management of acute liver failure Ayse Akcan Arikan, MD **Duration of Presentation in Minutes** 20

Managing patients with liver transplant: From the OR to CKD Rebecca Ruebner, MD, MSCE **Duration of Presentation in Minutes** 20

Stem cell therapy in neonatology – Experience from early phase clinical trials

Session Type: Hot Topic Symposia

Submitter: Bernard Thebaud

Participant(s)

1. BT

Bernard Thebaud, MD, PhD

Position:

Professor of Pediatrics

Organization:

University of Ottawa Faculty of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR

2. MD

Maria Del Cerro, MD, PhD

Position:

Head of Pediatric Cardiology Department

Organization:

Ramon y Cajal University Hospital

	Speaker
	Ethnicity Prefer not to respond
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
3.	WP Won Soon Park, MD, PhD
	Position: professor
	Organization: samsung medical center
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
4.	EB Elizabeth K. Baker, PhD
	Position: Post Doctoral Research Fellow
	Organization: University of Melbourne
	Role:
	Speaker

	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
5.	DS Duncan J. Stewart, Stewart, MD
	Position: Professor
	Organization: University of Ottawa Faculty of Medicine
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
6.	MR Mario Rüdiger, Prof Dr
	Position: Director of Center for feto/neonatal Health
	Organization: TU Dresden
	Role:
	Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race White

Gender Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

While neonatal mortality has significantly decreased over the past decades, long-term morbidity following prematurity or neonatal injury remains a significant problem. Cell-based therapies have created much excitement in neonatology based on the promise of organ regeneration. Fueled by promising preclinical studies, first early phase clinical trials have begun using a variety of cells for different indications. While mesenchymal stromal cells (MSCs) isolated from umbilical cord tissue or cord blood represent the front runner amongst cell-based therapies to prevent lung and brain injury, the feasibility and safety of human amnion epithelial cells are also being explored. These are early days for cell-based therapies in neonatology and much remains to be learned about the mechanism of action of repair cells, their manufacturing, safe and practical delivery and clinical trial design to optimize their efficacy.

To improve the success of clinical translation of this disruptive technology, principal investigators who have initiated/completed clinical trials using cell-based therapies we will share their experience to answer the following questions:

- How to choose the optimal cell-based product?
- How to monitor safety of cellular biological products in a neonatal setting?
- What are the optimal outcome end-points to assess safety of cell-based interventions?
- What is the optimal target population for early phase trials?
- What are the regulatory requirements for cellular biological products?

Learning Objectives

1. appreciate the rationale for proposing cell-based therapies to treat complications of extreme prematurity

- 2. appreciate the complexity of the clinical translation of cell-based therapy in neonatology
- 3. analyze results of clinical trials using a variety of cell products

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

1500-200

2. Target audience

Health care providers and scientists in the field of neonatology and pediatrics with a special interest in lung and brain diseases and regenerative medicine

3. Tracks

Academic and Research Skills

Basic Science

COVID-19

Developmental Biology

Neonatology

Neurology

Pharmacology and Therapeutics

Pulmonology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Neonatal Clinical Trials

Lung development, injury and repair, Bronchopulmonary dysplasia Neonatal Pulmonary Hypertension

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic is cell-based therapies relevant to neonatology, pulmonology, and neurology

Presentation Titles and Durations

Introduction to cell-based therapies for complications of prematurity Bernard Thebaud, MD, PhD

Duration of Presentation in Minutes

5

Umbilical cord tissue MSC for treating BPD - A Phase I trial Maria Del Cerro, MD, PhD

Duration of Presentation in Minutes

15

Umbilical cord blood-derived MSC for BPD � Phase II trial and 5 year follow up

Won Soon Park, MD, PhD

Duration of Presentation in Minutes

15

Human Amnion Epithelial cells for BPD � better than MSC? Elizabeth K. Baker, PhD

Duration of Presentation in Minutes

15

MSC for COVID-19 related ARDS-Lessons from a pandemic Duncan J. Stewart, Stewart, MD **Duration of Presentation in Minutes**15

Summary, Panel discussion and Q&A Mario Rüdiger, Prof Dr **Duration of Presentation in Minutes** 25

Children with Medical Complexity in the Age of Value-Based Care

Session Type: State of the Art Plenary

Submitter: Jeffrey Brosco

Participant(s)

1. JB

Jeffrey P. Brosco, MD PhD

Position:

Director, Division of Services for Children with Special Health Needs

Organization:

Maternal Child Health Bureau (HRSA)

Role:

Submitter; Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS

2. MW

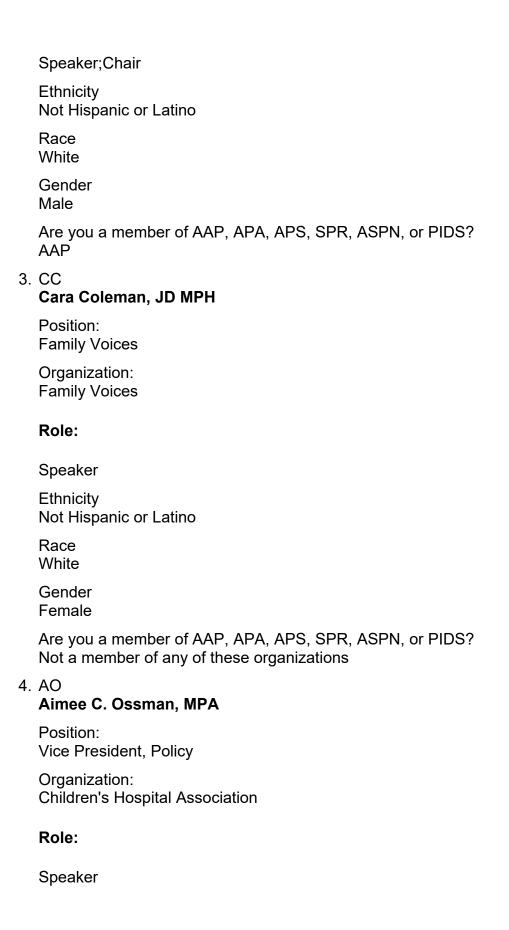
Michael D. Warren, MD MPH

Position:

Associate Administrator

Organization:

Maternal and Child Health Bureau, Health Resources and Services Administration, US Department of Health and Human Services



Ethnicity
Not Hispanic or Latino

Race White

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Children with medical complexity (CMC) represent about 1-2% of children but one-third of child deaths and pediatric health care costs. As defined in the federal ACE Kids Act, these children have one or more chronic conditions that affect three or more organ systems and severely reduce cognitive or physical functioning. As health care payment systems increasingly shift to value-based payments, CMC are at risk if safeguards and proper monitoring are not in place. This session will begin with a brief overview of the strategic plan of the Maternal Child Health Bureau (MCHB) by the Associate Administrator, Dr. Michael Warren, with specific focus on CMC. Next, Dr. Jeffrey Brosco, Director of MCHB's Division of Services for Children with Special Health Needs, will review the epidemiology, challenges, and opportunities for CMC, with special reference to the Division's recently published "Blueprint," a framework developed in partnership with families, healthcare professionals, and other experts to advance the vision that children with special health needs would enjoy a full life and thrive in systems that support their families and their social, health, and emotional needs. Cara Coleman, from Family Voices, will next share insights from her leadership role in outlining critical quality measures for the Blueprint, as well as research findings from the MCHB-funded CMC Collaborative Improvement and Innovation Network. Lastly, Aimee Ossman, who is Vice President, Policy for the Children's Hospital Association, will discuss the ACE Kids Act and what states need to do to implement "health homes" for CMC through Medicaid.

Learning Objectives

 Contrast children with medical complexity with the larger population of children with special health care needs regarding epidemiology, health needs, and state and federal policy.

- 2. Explain federal health policy regarding children with medical complexity, especially the ACE Kids Act.
- 3. Describe outcomes relevant to families and how they can be applied to improve the well-being of children with medical complexity and their families.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

150

2. Target audience

Pediatricians and other clinicians who care for children with medical complexity; health policy leaders; health services researchers

3. Tracks

Advocacy

Children with Chronic Conditions

Developmental and Behavioral Pediatrics

Diversity, Equity, and Inclusion

Epidemiology

General Pediatrics

Health Equity/Social Determinants of Health

Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Other major sessions on health policy (e.g. Medicaid) or children and youth with special health care needs, especially children with medical complexity

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Yes. Speakers (and topic) represent clinical pediatrics, public health, law, advocacy, and health policy.

Presentation Titles and Durations

Epidemiology, challenges, and opportunities for children with medical complexity: Applying the Blueprint Jeffrey P. Brosco, MD PhD

Duration of Presentation in Minutes

15

Overview of the Maternal Child Health Bureau strategic plan and the Blueprint for Change Michael D. Warren, MD MPH

Duration of Presentation in Minutes

What matters for families: Research and aspirations Cara Coleman, JD MPH

Duration of Presentation in Minutes

15

15

The ACE Kids Act: Implementing health homes for children with medical complexity

Aimee C. Ossman, MPA

Duration of Presentation in Minutes

15

Diving Deeper: Using Data to Inform Pediatric Subspecialty Workforce

Planning

Session Type: Hot Topic Symposia

Submitter: Laurel Leslie

Participant(s)

1. RV

Robert J. Vinci, MD

Position:

Joel and Barbara Alpert Chair and Professor of Pediatrics

Organization:

Boston University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS

2. LL

Laurel K. Leslie, MD, MPH

Position:

Vice President, Research

Organization:

American Board of Pediatrics

	Submitter;Speaker;Chair
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS
3.	SK Susan Kline, MS
	Position: Vice Chair, Administration and Finance, Department of Pediatrics
	Organization: Duke University and Private Diagnostic Clinic, PLLC
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
4.	CO Colin J. Orr, MD, MPH
	Position: Assistant Professor
	Organization: University of North Carolina
	Role:
	Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

5. AR

Ann Reed, MD

Position:

Samuel L Katz Distinguished Professor and Chair

Organization:

Duke University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

Recent publications have highlighted decreasing numbers of students from allopathic medical schools entering pediatrics and the potential oversupply, undersupply, or maldistribution of pediatric subspecialists.

This symposium will describe current efforts to better inform pediatric subspecialty workforce planning. The first speaker will discuss the Association

of Medical School Pediatric Department Chairs (AMSPDC) Pediatrics 2025: Workforce Initiative that is being conducted in collaboration with multiple pediatric organizations and catalyzed a National Academies Consensus Study on the pediatric subspecialty workforce. The second presentation will focus on the use of data from the American Board of Pediatrics (ABP) to describe the current pediatric subspecialty workforce, including its diversity, and to partner with the University of North Carolina to model trends for each subspecialty through 2040. The next presentation will focus on AMPSDC's efforts to define clinical full-time equivalency through collaboration with the Association of Administrators in Academic Pediatrics (AAAP). Last, attention to diversity with respect to race/ethnicity and medical school training location (AMG/IMG) will also be discussed.

Each of these efforts will be shared with Q & A available after each session. We will end the symposium with 20 minutes of interactive audience participation in discussing implications and identifying unresolved complexities and data gaps to be addressed in future efforts.

Learning Objectives

- 1. Describe recent efforts to use data to plan for the current and future pediatric subspecialty workforce.
- 2. Understand various aspects of diversity (race/ethnicity, gender, medical school, degree type) and implications for the pediatric subspecialty workforce.
- 3. Identify unresolved complexities and data gaps to address in preparing for the future.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

75

2. Target audience

Department chairs, subspecialists, program directors, fellows, residents

3. Tracks

Children with Chronic Conditions Diversity, Equity, and Inclusion Health Services Research Medical Education

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable

- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 - Please accomodate any other sessions that may be approved.
- 6. If your session was presented at another conference, please describe the conference and presentation.
 - To date, results have been shared at the CoPS and AMSPDC leadership meetings.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- Does this submission involve one or more specialties or disciplines?
 No.

Presentation Titles and Durations

Overview of Session and Update on the Pediatrics 2025 AMSPDC Workforce Initiative

Robert J. Vinci, MD

Duration of Presentation in Minutes

18

Using the ABP's Data to Describe the Current Pediatric Subspecialty Workforce and Model Its Future

Laurel K. Leslie, MD, MPH

Duration of Presentation in Minutes

18

The AMSPDC/AAAP Efforts to Define Clinical Full-Time Equivalency Susan Kline, MS

Duration of Presentation in Minutes

18

Attending to Diversity in the Pediatric Subspecialty Workforce Colin J. Orr, MD, MPH

Duration of Presentation in Minutes

18

Q & A

Ann Reed, MD

Duration of Presentation in Minutes

18

The Future of Pediatric. Primary Care Research

Session Type: Hot Topic Symposia

Submitter: Alexander Fiks

Participant(s)

1. AF

Alex Fiks, Fiks, MD, MSCE

Position:

Professor of Pediatrics

Organization:

Children's Hospital of Philadelphia

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR

2. EP

Eliana M. Perrin, Perrin, MD MPH

Position:

Bloomberg Distinguished Professor of Primary Care

Organization:

Johns Hopkins University Schools of Medicine and Nursing

Role:

Speaker

Ethnicity Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR 3. MC Michael Cabana, MD, MPH Position: Professor & Chair of Pediatrics Organization: Albert Einstein College of Medicine/Children's Hosp at Montefiore Role: Speaker

Ethnicity

Not Hispanic or Latino

Race

Native Hawaiian and other Pacific Islander

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR

4. MW

Michael D. Warren, MD MPH

Position:

Associate Administrator

Organization:

Maternal and Child Health Bureau, Health Resources and Services Administration, US Department of Health and Human Services

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race White

Gender Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

Optimizing pediatric primary care through research and translation into practice has the potential to affect the health and well-being of the 74 million US children. Despite the potential of evidence-based innovation, the US lacks a focused pediatric research agenda attuned to primary care. To address this gap, the Health Resources and Services Administration (HRSA) Federal Maternal and Child Health Bureau has supported the American Academy of Pediatrics (AAP) Pediatric Research in Office Settings (PROS) network, which is partnering with AAP's Committee on Pediatric Research (COPR), to outline research priorities.

US children are increasingly diverse, by race and ethnicity, immigrant background, economic circumstance, and geography. Developing strategic research priorities that address their needs is our challenge. There are widespread inequities in care access, delivery, and outcomes. Mental health problems compromise child well-being; needed services are often scarce. Mistrust threatens established primary care practice in areas such as vaccination and gender affirming care. New promising technologies have emerged to support child health, but lack strong evidence on effectiveness and implementation. Emerging genomic data has the potential to inform patient risk and treatment opportunities, offering insight into personalized medicine to address chronic disease such as obesity, but families and providers may be wary.

Symposium goals: (1) frame priority issues for a pediatric primary care research agenda, (2) highlight emerging opportunities identified through PROS primary care pediatricians and COPR, (3) foster robust discussion between panelists and the audience to advance a pediatric primary care research agenda informed by, and responsive to, primary care stakeholders.

Learning Objectives

- 1. To frame priority issues for a pediatric primary care research agenda
- To highlight emerging opportunities identified by primary care pediatricians in the American Academy of Pediatrics PROS Network and experts on the Committee on Pediatric Research
- 3. To better understand and communicate the rationale behind distinct primary care research priorities informed by, and responsive to, primary care stakeholders

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200

2. Target audience

We expect this Hot Topic Symposium to be of interest to participants at all levels: trainees, including pediatric residents and fellows in generalist fields, as well as practitioners and a broad cross-section of faculty.

3. Tracks

Clinical Research

Community Pediatrics

Diversity, Equity, and Inclusion

General Pediatrics

Health Services Research

Mental Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

AAP Presidential Plenary, Silverman Lecture, QI SIG

- 6. If your session was presented at another conference, please describe the conference and presentation.

 No.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research Addressing & Overcoming Racism in Clinical Care and Research Science is Real: Research. Misinformation and Trust

8. Additional comments

This session has been developed in close partnership with the American Academy of Pediatrics Pediatric Research in Office Settings Network and its Committee on Pediatric Research.

9. Does this submission involve one or more specialties or disciplines?

This sessions involves General Pediatrics/Primary Care

Presentation Titles and Durations

Framing a pediatric primary care research agenda and then, following all talks, engaged audience discussion

Alex Fiks, Fiks, MD, MSCE

Duration of Presentation in Minutes

57

Why primary care research is Important and needs to be intentional Eliana M. Perrin, Perrin, MD MPH

Duration of Presentation in Minutes

11

The role of primary care research in bolstering diversity, equity, and inclusion Michael Cabana, MD, MPH

Duration of Presentation in Minutes

11

Perspectives on the future of primary care research from the federal Maternal and Child Health Bureau

Michael D. Warren, MD MPH

Duration of Presentation in Minutes

11

Frontiers of Transplantation in Children

Session Type: Hot Topic Symposia

Submitter: Kimberly Reidy

Participant(s)

1. KR

Kimberly J. Reidy, MD

Position:

Associate Professor

Organization:

Children's Hospital at Montefiore

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN

2. MM

Marva Moxey-Mims, MD

Position:

Professor of Pediatrics, Chief of Nephrology

Organization:

Children's National Hospital

Role:

Speaker

	Ethnicity Not Hispanic or Latino
	Race Black or African American
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APS, ASPN
3.	RG Rouba Garro, MD
	Position: Associate Professor
	Organization: Emory University and Children's Healthcare of Atlanta
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN
4.	NH Nicole Hayde, MD, MS
	Position: Associate Professor of Pediatrics
	Organization: The Children's Hospital at Montefiore
	Role:
	Chair

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN

5. RE

Rachel M. Engen, Engen, MD MS

Position:

Assistant Professor

Organization:

University of Wisconsin Madison

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN

Session Description

Session Description

Brief Description of Overall Session: This session is targeted at pediatric nephrologists to apprise them of newer developments in kidney transplantation in children. It will provide an overview of advances in organ allocation and immunosuppression agents.

Topic/title: The Role of APOL1 in Organ Allocation and Living Donor Evaluation

Objective: To discuss the implications of utilizing APOL1 in selecting a donor for pediatric kidney transplant candidates

Topic/title: Novel ways to increase donor pool for pediatric kidney transplant candidates

Objective: To discuss various ways to increase donor pool for children (using national kidney donor exchange programs, using A2 donors for blood group B recipients, using DCD donors and PHS high risk donors)

Topic/title: Multi-Organ Transplant involving the kidney Objective: To detail the approach for evaluating children with kidney disease with multiple organ involvment

Learning Objectives

- 1. Understand the role of APOL1 in organ allocation and novel ways to expand donor pool for children in need of renal transplant.
- 2. Recognize the role of newer immunosuppressive agents to promote adherence and improve outcomes in pediatric kidney transplant recipients.
- 3. Describe the role of liver-kidney, kidney alone or liver alone transplant in complex ARPKD patients with different phenotypes

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50-100

2. Target audience

Pediatric nephrologists, cardiologist, GI/hepatology

3. Tracks

Cardiology

Gastroenterology/Hepatology

Nephrology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 ASPN events
- 6. If your session was presented at another conference, please describe the conference and presentation.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

9. Does this submission involve one or more specialties or disciplines?

discuss multi-organ involvement and is relevant to Pediatric nephrology, hepatology, cardiology

Presentation Titles and Durations

The Role of APOL1 in Organ Allocation and Living Donor Evaluation Marva Moxey-Mims, MD

Duration of Presentation in Minutes

20

Novel ways to increase donor pool for pediatric kidney transplant candidates Rouba Garro, MD

Duration of Presentation in Minutes

20

Multi-Organ Transplant involving the kidney Rachel M. Engen, Engen, MD MS **Duration of Presentation in Minutes** 20

Neonatal Medicine and Machine Learning: Big Opportunities for Small Patients

Session Type: Hot Topic Symposia

Submitter: Kristyn Beam

Participant(s)

1. SP

Shama Patel, MD, MPH, FAAP

Position:

Neonatologist + Clinical Informaticist

Organization:

Nationwide Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. KB

Kristyn S. Beam, MD MPH

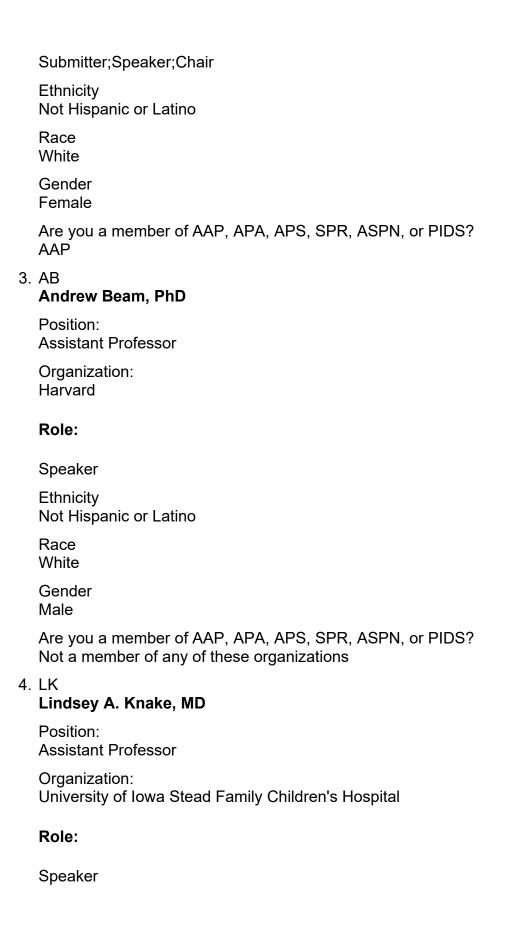
Position:

Neonatologist

Organization:

Beth Israel Deaconess Medical Center

Role:



Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

5. KA

Khyzer Aziz, MD

Position:

Assistant Professor

Organization: Johns Hopkins

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

Since its inception, the field of Neonatology has focused not only on the care of the most critically ill neonates but also on the desire to predict the infants at the highest risk for disease. Researchers have used various statistical methods such as linear and logistic regression to build familiar predictive models of neonatal diseases. From these models, clinical decision support tools and risk predictors have been successfully developed. One challenge with these

prediction models is the small data sets typically used in neonatal research. Recently, artificial intelligence (AI) has emerged as another modality for understanding data both in and out of medicine. While the interest is not completely new in either medicine or neonatology, the subtleties of its use and the precise expertise required for implementation have left a large gap between expectation and reality. Recent advances in data, technology, and computation have allowed AI to elevate predictive models. AI is a broad field and encompasses many areas that range from voice detection and text reading software that we may encounter in daily use, to more intricate black-box predictive models. Al includes methods such as machine learning, convolutional neural networks, random forests, and support vector machines. In this session, we will describe recent uses of AI in neonatology with examples from extubation readiness, quantifying neonatal severity of illness, and bronchopulmonary dysplasia. We will present ways in which Al can help advance our predictive abilities for overall better neonatal outcomes with considerations of data collection and standardization and model selection.

Learning Objectives

- 1. Understand machine learning terminology and how this relates to predictive models in medicine.
- 2. Describe several current examples of predictive models for neonatal outcomes.
- 3. Describe the limitations of data collection and how automated data collection can improve the ability to build new clinical decision support tools.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

We hope to attract neonatologists interested in the field of artificial intelligence and machine learning who wish to understand these methods and consider ways in which they can be used to build better predictive models. We hope attendees will want to learn new ways of thinking about data collection and the challenges that come with data collection when considering the development of further prediction models.

3. Tracks

Neonatology

Telemedicine/EHR/Medical Informatics

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Workshop: "Big Data and the Smallest People: Leveraging Informatics and Machine Learning to Improve Your Clinical and Research Practice"
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?
 No

Presentation Titles and Durations

"Introduction" and "Examples, current use, and implementation challenges of clinical decision support tools"

Shama Patel, MD, MPH, FAAP

Duration of Presentation in Minutes

10

"Examples, current use, and implementation challenges of clinical decision support tools."

Kristyn S. Beam, MD MPH

Duration of Presentation in Minutes

10

"Machine Learning for Neonatology 101" and "Development and Validation of a Deep Learning Model for Prediction of BPD"
Andrew Beam. PhD

Duration of Presentation in Minutes

25

"Neonatal extubation readiness prediction models" Lindsey A. Knake, MD

Duration of Presentation in Minutes

10

"Capturing Real World Clinical Data" and "Quantifying neonatal severity of illness (nSOFA and VIS)"

Khyzer Aziz, MD

Duration of Presentation in Minutes

15

Preterm brain development: the importance of the "everyday"

Session Type: **Hot Topic Symposia** Submitter: **Thiviya Selvanathan**

Participant(s)

1. SM

Steven Miller, MDCM MAS FRPC

Position:

Professor and Head, Pediatrics

Organization:

University of British Columbia

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APS, SPR

2. ET

Emily W. Tam, MDCM, MAS, FRCPC

Position:

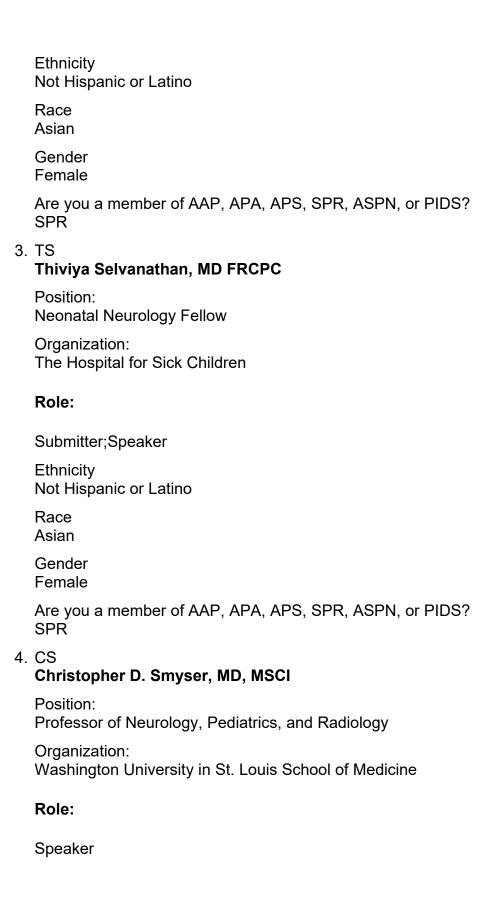
Associate Professor

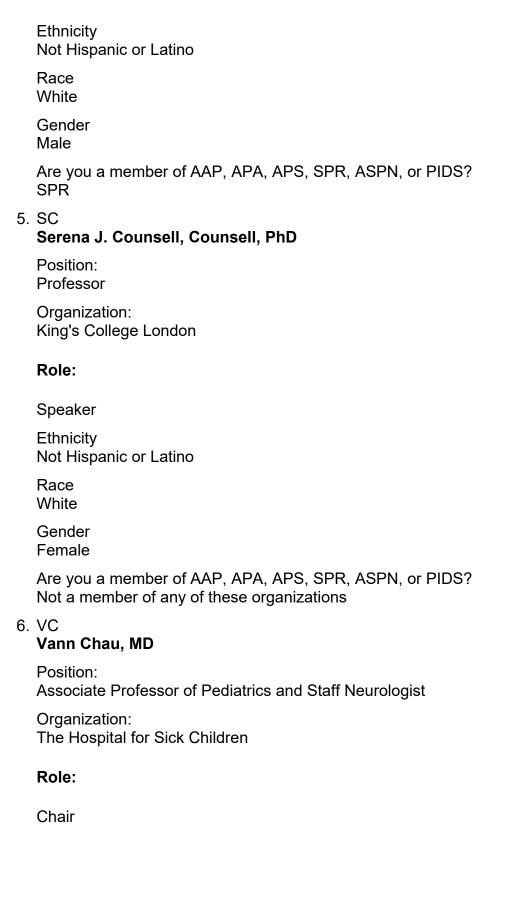
Organization:

The Hospital for Sick Children

Role:

Speaker





Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

This Hot Topic Symposium will provide an overview of the importance of the "everyday" in preterm brain development. The session will begin with two talks on how everyday exposures in the Neonatal Intensive Care Unit, specifically nutritional intake and analgesia exposure, impact early brain development in infants born preterm. This will be followed by an overview of how social determinants of health influence early fetal and neonatal brain development. The session will end with a review of recent advances in the field of neonatal neuroimaging and how these methods can be used to study the impacts of everyday exposures on early brain development.

Learning Objectives

- 1. Understand how everyday exposures (ex: nutrition, analgesia) in the Neonatal Intensive Care Unit contribute to early brain development and neurodevelopmental outcomes in preterm infants.
- 2. Recognize the impacts of social determinants of health on early brain development and neurodevelopment.
- 3. Identify appropriate advanced neuroimaging methods to study the impact of exposures on neonatal brain maturation in their research studies.

Scholarly Session Questions

- Audience size Please enter your best estimate of the expected number of attendees.
 - 150-250 participants
- 2. Target audience

Neurologists, neonatologists, pediatricians, developmental pediatricians, psychologists, neonatal follow-up clinicians, neuroradiologists, psychologists, neuroscientists, imaging scientists

3. Tracks

Clinical Research

Critical Care

Health Equity/Social Determinants of Health

Neonatology

Neurology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 - 1. Perinatal brain club
 - 2. Other hot topic symposia in Neonatal Neurology
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Yes - Neurology, Neonatology, Neuroimaging, Social Determinants of Health, Nutrition

Presentation Titles and Durations

The importance of the �everyday� in preterm brain development: Setting the stage

Steven Miller, MDCM MAS FRPC

Duration of Presentation in Minutes

5

The impact of nutrition on preterm brain development and neurodevelopmental outcomes

Emily W. Tam, MDCM, MAS, FRCPC

Duration of Presentation in Minutes

17

Early-life analgesia exposure and preterm brain health Thiviya Selvanathan, MD FRCPC

Duration of Presentation in Minutes

17

Social determinants of brain maturation Christopher D. Smyser, MD, MSCI **Duration of Presentation in Minutes** 17

Recent advances in neonatal neuroimaging: A window to studying the influence of �everyday� exposures on brain development Serena J. Counsell, Counsell, PhD Duration of Presentation in Minutes 17

Personalized medicine: how your patient's biology transcends "race"

Session Type: Hot Topic Symposia

Submitter: Danielle Ahn

Participant(s)

1. DA

Danielle Ahn, MD

Position:

Assistant Professor

Organization:

Columbia University Medical Ce

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR

2. NY

Nadir Yehya, MD MSCE

Position:

Associate Professor

Organization:

Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity Not Hispanic or Latino
Race Asian
Gender Male
Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
RB Rajit Basu, MD MS FCCM
Position:
Posy and Jon Krehbiel Professor and Chief of Critical Care Professor of Pediatrics Medicine
Organization: Ann & Robert H. Lurie Children's Hospital of Chicago
Role:
Speaker
Ethnicity Not Hispanic or Latino
Race Asian
Gender Male
Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
SP Stacey Pereira, PhD
Position: Assistant Professor
Organization: Baylor College of Medicine
Role:
Speaker

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. JM

Joshua E. Motelow, MD, PhD

Position:

Assistant Professor

Organization:

Columbia University Vagelos College of Physicians and Surgeons

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

Approaching the care of critically ill children with precision medicine techniques challenges the practice of using race as a reliable proxy for biological differences. Genomic approaches in the diagnosis and prognostication of pediatric patients are more accessible and less cost prohibitive, making it possible to use these modalities to remove race as an essential consideration in diagnostic algorithms and clinical practice guidelines. This session explores

the methodologies that counter the current paradigm of race as a biological variable, while also highlighting the biases that persist in these diagnostic approaches.

Learning Objectives

- 1. Explore how precision medicine methodologies are helping to characterize host risk factors in major disease entities.
- 2. Show that inter- and intra-racial differences found in precision medicine approaches do not support race as a legitimate biologic variable.
- 3. Identify considerations for enrolling genomics research participants from diverse backgrounds and how the representation of minority populations in reference datasets influences diagnostic accuracy.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

40

2. Target audience

Pediatricians

3. Tracks

Basic Science

Critical Care

Genomics/Epigenomics

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Partner session entitled "Using Science to Dismantle Racism in Medicine" (the title may have changed)

 If your session was presented at another conference, please describe the conference and presentation.
 N/A

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Addressing & Overcoming Racism in Clinical Care and Research

8. Additional comments

We are hoping to add an additional speaker to address biased control datasets that lead to missed opportunities for precision medicine. If we are able to add this to the session, we will submit a modification.

9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

Introduction
Danielle Ahn, MD

Duration of Presentation in Minutes

10

E-racing bias when prognosticating outcomes in sepsis and ARDS Nadir Yehya, MD MSCE

Duration of Presentation in Minutes

20

A Dynamic Approach to the AKI Phenotype � Focusing on the Child Rajit Basu, MD MS FCCM

Duration of Presentation in Minutes

20

Enrolling diverse populations in newborn genomics research Stacey Pereira, PhD

Duration of Presentation in Minutes

20

Closing remarks, Q&A Joshua E. Motelow, MD, PhD

Duration of Presentation in Minutes

20

Dr. Taeun Chang Memorial Symposium on Neonatal Neuromonitoring

Session Type: Hot Topic Symposia

Submitter: Emily Tam

Participant(s)

1. AM

An Massaro, MD

Position:

Adjunct Professor of Pediatrics

Organization:

Children's National Hospital

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

2. TT

Tammy Tsuchida, MD, PhD

Position:

Professor, Departments of Neurology and Pediatrics

Organization:

Children's National Health System

Role:

Speaker

	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
3.	JS Janet Soul, MDCM
	Position: Director, Fetal-Neonatal Neurology Program
	Organization: Boston Children's Hospital
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? \ensuremath{SPR}
4.	ME Mohamed El-Dib, MD
	Position: Associate Professor of Pediatrcis
	Organization: Harvard Medical School
	Role:
	Speaker

```
Ethnicity
  Not Hispanic or Latino
  Race
  White
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, SPR
5. VC
  Valerie Chock, MD, MS Epi
  Position:
  Associate Professor of Pediatrics
  Organization:
  Stanford University School of Medicine
  Role:
  Speaker
  Ethnicity
  Not Hispanic or Latino
  Race
  Asian
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, SPR
6. ET
  Emily W. Tam, MDCM, MAS, FRCPC
  Position:
  Associate Professor
  Organization:
  The Hospital for Sick Children
  Role:
  Submitter; Speaker; Chair
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Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR

Session Description

Session Description

This symposium is presented in honor of the late Dr. Taeun Chang, a major contributor to the field of neonatal neurology. The symposium will cover a topic she championed during her career, with speakers whose work was deeply influenced by her wisdom, collegiality, and mentorship. Speakers will address the latest knowledge regarding indications for and utility of neuromonitoring tools used in the neonatal intensive care unit for the care of newborns at risk for brain injury, including continuous electroencephalography (EEG), amplitude-integrated EEG (aEEG), and near infrared spectroscopy (NIRS). Controversies regarding the use of these tools will be discussed.

Learning Objectives

- 1. Understand the indications and controversies for the use of continuous EEG in neonates.
- 2. Understand the enduring role of amplitude-integrated EEG in the NICU.
- 3. Understanding the emerging role of NIRS monitoring in the NICU.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

350

2. **Target audience**Neurologists, neonatologists, trainees

3. Tracks

Neonatology Neurology

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

Friday, April 28 Monday, May 1

5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Other neuro-related symposia or sessions

6. If your session was presented at another conference, please describe the conference and presentation. N/A

7. Should your session be considered for one of the special **Highlighted Theme sessions at PAS 2023?**

Does not apply

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic involves Neurology and Neonatology.

Presentation Titles and Durations

Introduction in memory of Dr. Taeun Chang An Massaro, MD

Duration of Presentation in Minutes

Current neuromonitoring tools in the NICU Tammy Tsuchida, MD, PhD **Duration of Presentation in Minutes**

20

Controversies of cEEG and seizure treatment in neonates Janet Soul, MDCM

Duration of Presentation in Minutes

20

The enduring role of amplitude-integrated EEG Mohamed El-Dib. MD

Duration of Presentation in Minutes

20

NIRS monitoring in the NICU Valerie Chock, MD, MS Epi

Duration of Presentation in Minutes

20

Q&A Emily W. Tam, MDCM, MAS, FRCPC **Duration of Presentation in Minutes** 5

Diagnostic Stewardship in Pediatrics- Novel strategies to optimize infectious disease testing in pediatric care

Session Type: **Hot Topic Symposia** Submitter: **Anna Sick-Samuels**

Participant(s)

1. AS

Anna Sick-Samuels, MD, MPH

Position:

Assistant Professor

Organization:

Johns Hopkins Children's Center

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, PIDS

2. CW

Charlotte Woods-Hill, MD MSHP

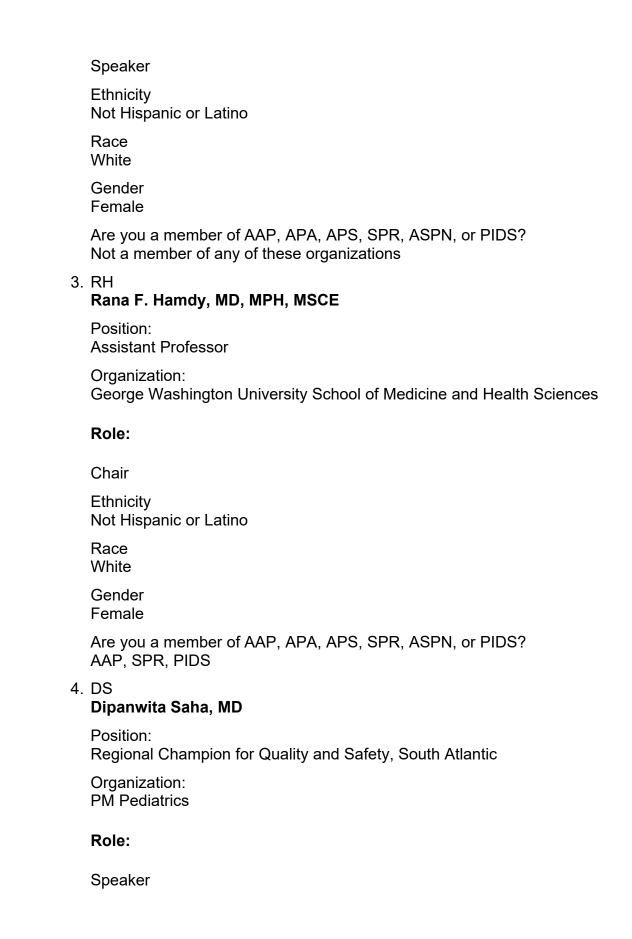
Position:

Assistant Professor

Organization:

Perelman School of Medicine at the University of Pennsylvania

Role:



Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

5. ZW

Zachary I. Willis, MD, MPH

Position:

Assistant Professor of Pediatrics

Organization:

University of North Carolina at Chapel Hill School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? PIDS

Session Description

Session Description

Diagnostic Stewardship, the judicious use of microbiology diagnostic testing, is a rapidly growing field related to antibiotic stewardship as an international and national strategy to combat antimicrobial overuse. Diagnostic stewardship aims to leverage clinical and microbiology attention to optimize management of infectious diseases with ultimate goal of providing high-value care. This session will synthesize data of diagnostic stewardship targets across the pediatric care

continuum from ambulatory urgent care to critical care. In this session, experts will discuss research findings to support clinicians' clinical testing practices around urine, blood, endotracheal and molecular testing.

Dr. Anna Sick-Samuels from Johns Hopkins will provide an overview of diagnostic stewardship principles and current strategies to consider. Dr. Charlotte Woods-Hill from CHOP will discuss the limitations of blood cultures and how strategies to safely reduce testing overuse have successfully reduced testing and treatment across a national PICU collaborative. Dr. Zachary Willis from UNC Children's will describe the advantages and pitfalls of molecular testing options for infectious diseases. Dr. Dipanwita Saha from PM Pediatrics will demonstrate how follow-up and interpretation of urine culture results greatly reduced avoidable antibiotic treatment in ambulatory children.

Learning Objectives

- 1. Define diagnostic stewardship and strategies used to optimize culturing practices in pediatric care
- 2. Differentiate molecular testing options for common infectious processes and understand limitations and benefits of these testing modalities
- 3. Apply strategy of targeted results follow-up and interpretation to improve treatment for urinary tract infections

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100-300

2. Target audience

Physicians and advanced practice providers; nurses; infection preventionists, antibiotic stewardship in critical care, acute care, and ambulatory settings

3. Tracks

Children with Chronic Conditions

Clinical Research

Critical Care

Emergency Medicine

General Pediatrics

Infectious Diseases

Quality Improvement/Patient Safety

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Antibiotic stewardship Sepsis

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

yes- Topic involves general pediatrics, critical care, infectious diseases

Presentation Titles and Durations

Principles of Diagnostic Stewardship Anna Sick-Samuels, MD, MPH **Duration of Presentation in Minutes** 15

Sepsis evaluation and blood culture stewardship Charlotte Woods-Hill, MD MSHP **Duration of Presentation in Minutes**

The role of test result follow-up in urgent care settings Dipanwita Saha, MD **Duration of Presentation in Minutes**

15

15

Molecular diagnostic methods- the future is resulting fast Zachary I. Willis, MD, MPH **Duration of Presentation in Minutes**

Caring for nano-preterm infants: delivery room to discharge and beyond

Session Type: Hot Topic Symposia

Submitter: Manoj Biniwale

Participant(s)

1. MB

Manoj Biniwale, MD

Position:

Associate professor of Pediatrics

Organization:

USC Keck School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. AK

Anup Katheria, Katheria, MD

Position:

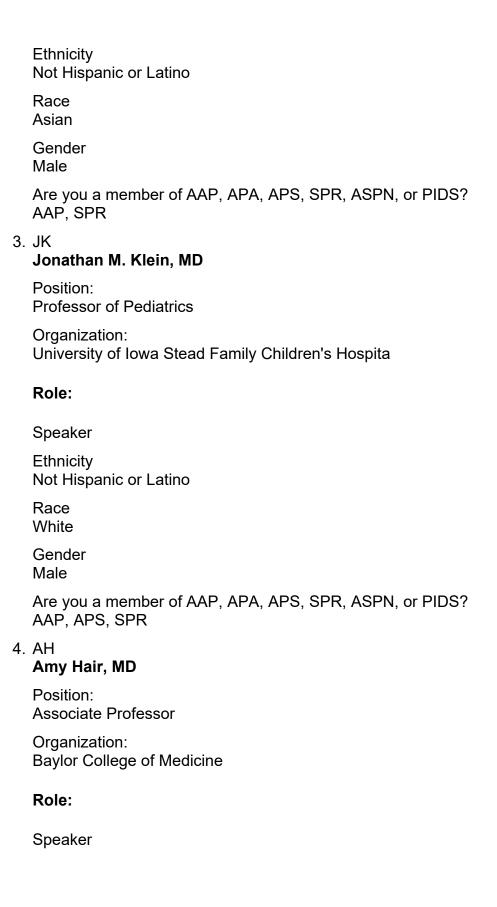
Associate Professor

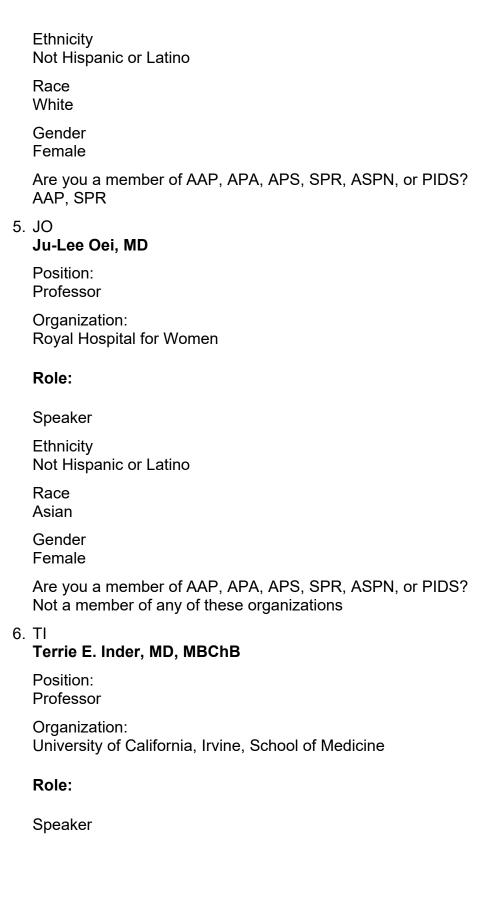
Organization:

University of California, San Diego School of Medicine

Role:

Speaker





Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR

7. RR

Rangasamy Ramanathan, Ramanathan, MBBS, MD.

Position:

Professor/Division Chief/ Program Director

Organization:

Keck School of Medicine of USC

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS

Session Description

Session Description

Even with advances in neonatal care nano-preterm infants (22-24 weeks gestation) pose significant risks including death and long-term morbidities. Practitioners caring for these infants from the delivery room, NICU and follow-up high risk clinics must understand their unique problems and solutions while minimizing short-term and long-term morbidities.

The first talk will focus on providing updated delivery room guidelines including

umbilical cord management at birth for extremely preterm infants. Resuscitation with an intact cord and cord milking will also be reviewed.

We will discuss respiratory management of nano-preterm infants born with profoundly immature lung which is very challenging due to their susceptibility to both mechanical and oxidative injury. Guidelines for clear understanding of how to balance the risks of mechanical injury including volutrauma, atelectatrauma and biotrauma while optimizing ventilatory care within a neuroprotective approach will be provided.

Emphasis will be given on increasing knowledge that oxygen therapy is a continuum of need and vigilant control of oxygen after the nano-preterm infant leaves the hospital, may significantly impact on their survival and outcomes. Nutritional challenges will be discussed including increased energy needs of the extremely preterm infants frequently associated with immaturity of the gastrointestinal tract, intestinal dysmotility, necrotizing enterocolitis, and acute illness. Focus on the use of human milk and enteral nutrition will be provided. Neurological abnormalities and long-term neurodevelopmental problems are far more common in this cohort of infants. Final talk will shed light on the scope of the problem, early recognition and management of neurodevelopmental problems in nano-preterm infants.

Learning Objectives

- 1. Recognize the unique life altering problems faced by nano-preterm infants from birth, in the NICU and after discharge from initial hospitalization
- Describe physiologic principles of managing nano-preterm infants requiring multisystem support while understanding the complications they face throughout their journey in NICU
- 3. Apply strategies to minimize short- and long-term morbidities in extremely preterm infants while providing support in NICU and beyond

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

300

2. Target audience

neonatologists, neonatology fellows, nurse practitioners, pediatric residents, primary care pediatricians, developmental pediatricians, pediatric gastroenterologists, pulmonologists and neurologists

3. Tracks

Critical Care
Developmental and Behavioral Pediatrics
Neonatology

Neurology Pediatric Nutrition Pulmonology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Advanced treatment strategies for managing infants with respiratory failure

Novel High frequency ventilation concepts in minimizing respiratory morbidities

Predicting and Preventing NCPAP Failures in Preterm Newborns

6. If your session was presented at another conference, please describe the conference and presentation.

Individual topics have been presented at national and international conferences before but not this symposium

- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments

All speakers presenting in the symposium are considered experts in this field with their extensive research background and clinical experience taking care of this population

Anup Katheria: Association of Umbilical Cord Milking vs Delayed Umbilical Cord Clamping With Death or Severe Intraventricular Hemorrhage Among Preterm InfantsJAMA. 2019 Nov 19;322(19):1877-1886

Jonathan Klein; First intention high-frequency jet ventilation for periviable infants. Curr Opin Pediatr. 2022 Apr 1;34(2):165-169. Amy Hair: Beyond Necrotizing Enterocolitis Prevention: Improving Outcomes with an Exclusive Human Milk-Based Diet Breastfeed Med. 2016 Mar;11(2):70-4.

Ju-Lee Oei: Neurodevelopmental outcomes of preterm infants after randomisation to initial resuscitation with lower (FiO2 0.6) initial oxygen levels. An individual patient meta-analysis. Arch Dis Child Fetal Neonatal Ed. 2022 Jul;107(4):386-392.

Terrie Inder: Neuroimaging of the Preterm Brain: Review and Recommendations. J Pediatr. 2021 Oct: 237:276-287.e4.

9. Does this submission involve one or more specialties or disciplines?

yes, neonatology, pulmonology, nutrition, critical care, neurology

Presentation Titles and Durations

Concept of nano preterm infants and current state of problem Manoj Biniwale, MD

Duration of Presentation in Minutes

5

Resuscitation for extremely preterm infants: Current concepts and future directions

Anup Katheria, Katheria, MD

Duration of Presentation in Minutes

10

Caring for the Most Immature Lungs: Ventilation Strategies for Infants Born at 22 to 24 Weeks Gestation

Jonathan M. Klein, MD

Duration of Presentation in Minutes

15

Nutritional Management of the Nano Preterm Infant Amy Hair, MD

Duration of Presentation in Minutes

15

Oxygenation of the nano -preterm infants beyond the neonatal intensive care unit

Ju-Lee Oei, MD

Duration of Presentation in Minutes

10

Improving neurological and neurodevelopmental outcomes in nano-preterm infants

Terrie E. Inder, MD, MBChB

Duration of Presentation in Minutes

15

Summary of managing nano-preterm infants and closing remarks Rangasamy Ramanathan, Ramanathan, MBBS, MD.

Duration of Presentation in Minutes

5

The Initiative to Strengthen Primary Health Care: Pediatricians' Voices Needed at the Federal Policy Table

Session Type: Panel Discussion

Submitter: Lauren Hughes

Participant(s)

1. LH

Lauren Hughes, MD, MPH, MSc, MHCDS, FAAFP

Position:

State Policy Director, Farley Health Policy Center

Organization:

University of Colorado

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Until recently, there hasn't been an entity at the federal level whose mission it is to understand primary care's strengths and needs or to promote the value of primary care and its role in solving some of the toughest health and health care

challenges we face: improving health equity, enhancing access to behavioral health services, and ensuring we are prepared for the next pandemic. In September 2021, the US Assistant Secretary for Health announced the launch of the Initiative to Strengthen Primary Health Care, a new effort designed to catalyze collaborative and coordinated primary care policy solutions related to workforce, payment, innovation, technology, research, and social drivers across multiple federal agencies within and beyond the US Department of Health and Human Services. The idea for this Initiative was inspired by the May 2021 consensus report from the National Academies of Sciences, Engineering, and Medicine (NASEM): "Implementing High-Quality Primary Care: Rebuilding the Foundation of Health Care." This report called for the formation of a Secretary's Council on Primary Care to advance "whole-person, integrated, accessible, and equitable primary care." The Council would be composed of federal agency representatives and supported by a federally appointed external advisory committee. Over the past year, the Initiative has gained momentum, issuing an RFI for public comment; co-hosting a public workshop with NASEM; and developing a cross-agency primary care plan for Secretary Becerra. As federal primary care policy begins to change, pediatricians are needed - and ideal - leaders to shape this evolving landscape.

Learning Objectives

- 1. Upon completion, participants will be able to describe the new federal Initiative to Strengthen Primary Health Care, including its purpose and goals.
- 2. Upon completion, participants will be able to identify ways in which pediatricians and their patients can advance primary care policy in the US.
- 3. Upon completion, participants will be able to advocate for the inclusion of pediatric voices and values at key federal primary care policy tables.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

125

2. Target audience

Pediatric policy researchers, leaders, and advocates who are committed to advancing primary care as a common good

3. Tracks

Advocacy

Health Equity/Social Determinants of Health

Public Health

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

- Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

 N/A
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 The Impact of Policies on Health and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

General pediatrics, family medicine, public health, health policy

Presentation Titles and Durations

The Initiative to Strengthen Primary Health Care: Pediatricians' Voices Needed at the Federal Policy Table Lauren Hughes, MD, MPH, MSc, MHCDS, FAAFP **Duration of Presentation in Minutes** 90

Novel Multimodality Neuromonitoring in Infants and Children to help Identify Risk for Acute Neurologic Injury

Session Type: Hot Topic Symposia

Submitter: JIMMY HUH

Participant(s)

1. JH

JIMMY W. HUH, MD

Position:

Director of Pediatric Neurosurgical Neurocritical Care- PICU

Organization:

The Children's Hospital of Philadelphia

Role:

Submitter; Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. WB

Wesley B. Baker, PhD

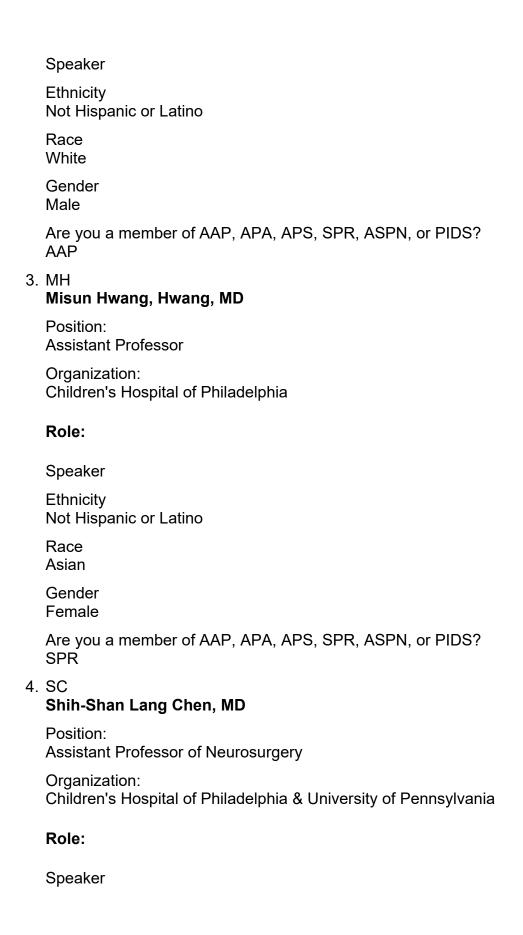
Position:

Assistant Professor

Organization:

Children's Hospital of Philadelphia

Role:



Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

Since "time is brain", there are new neuromonitoring capabilities that can be used in infants and children to help identify risk for acute neurologic injury. Both non-invasive and invasive multimodality neuromonitoring devices that can assess cerebral blood flow, brain oxygenation, mitochondrial activity and intracranial pressure are emerging as new promising diagnostic and predictive indices of acute neuropathologic processes in infants and children at risk for acute neurologic injury in the ED and neonatal and pediatric ICU settings. Such devices can help allow early targeted treatment strategies to help prevent secondary brain injury (eg) administering IVF bolus to help promote improved blood pressure to allow better cerebral blood flow or administering supplemental oxygen for low brain oxygen levels.

In this session, we will give an overview of the newer multimodality neuromonitoring capabilities and actual pediatric cases where the use of this information aided in early diagnosis and treatment to help mitigate acute neurologic injury in the pediatric ED and neonatal and pediatric intensive care units.

Just as importantly, we will give insights in to how we feel that the non-invasive multimodality neuromonitoring devices may potentially be useful in the inpatient pediatric (Non-ICU) settings.

Learning Objectives

- better understand NOVEL NON-INVASIVE MULTIMODALITY neuromonitoring to assess brain tissue oxygen, cerebral blood flow and intracranial pressure in an infant or child
- 2. better understand the role of NOVEL MICROBUBBLE NON-INVASIVE ultrasound technology to assess acute neuropathology in an infant or child

3. better understand the role of NOVEL INVASIVE MULTIMODALITY neuromonitoring to assess for cerebral hypoxia, hyperemia and intracranial pressure in critically-ill pediatric patients

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200

2. Target audience

Pediatric Emergency Medicine, Neonatology, Pediatric Critical Care, Pediatric Neurology, General Pediatrics especially Hospital Medicine

3. Tracks

Critical Care

Emergency Medicine

General Pediatrics

Hospital Medicine

Neonatology

Neurology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 No restrictions
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Pediatric Emergency Medicine, Neonatology, Pediatric Critical Care, Pediatric Neurology, General Pediatrics especially Hospital Medicine

Presentation Titles and Durations

NOVEL NON-INVASIVE neuromonitoring to assess brain oxygen, cerebral blood flow & intracranial pressure in infants & children Wesley B. Baker, PhD

Duration of Presentation in Minutes

25

Novel Non-Invasive Microbubble-Associated Ultrasound to Detect Acute Neuropathology in Infants and Children Misun Hwang, Hwang, MD **Duration of Presentation in Minutes** 25

Novel Invasive Multimodality Neuromonitoring to Detect Cerebral Hypoxia, Hyperemia and Elevated ICP in Pediatric Patients Shih-Shan Lang Chen, MD **Duration of Presentation in Minutes** 25

Combatting racism in the learning environment by cultivating coachability and empowering learners

Session Type: Hot Topic Symposia

Submitter: Kimberly Gifford

Participant(s)

1. MG

Maryellen Gusic, MD

Position:

Senior Associate Dean, Education

Organization:

Lewis Katz School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS

2. SD

Sofia Devers

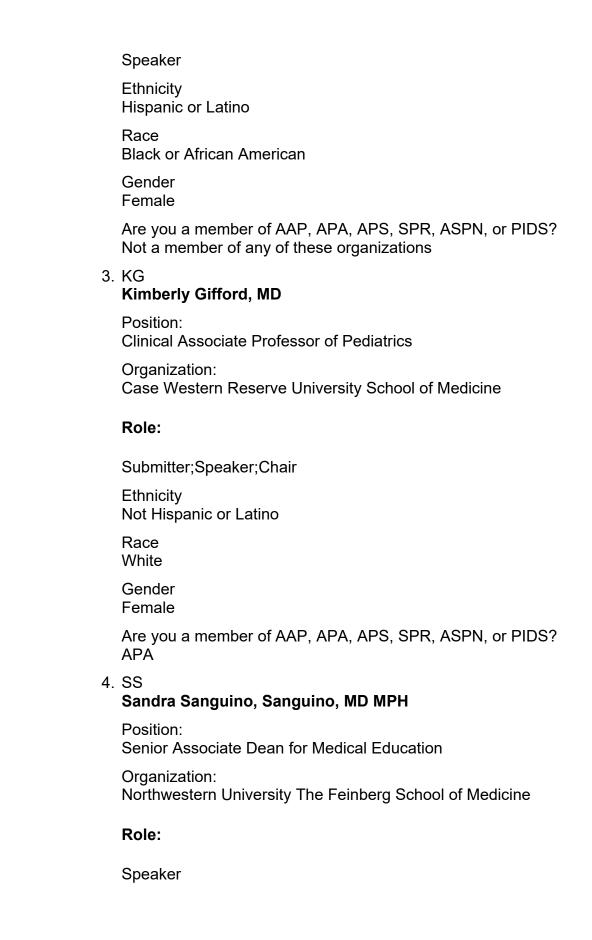
Position:

Medical Student

Organization:

Geisel School of Medicine at Dartmouth

Role:



Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APA

Session Description

Session Description

Learning experiences in medical education are highly variable and at times undermined by systemic racism. Coregulation of learning, a process by which faculty coaches partner with learners to shape the learning experience, empowers learners to assume agency as they progressively develop self-regulated learning skills. Simultaneously, coregulation can serve as a tool to support learners who experience racism and bias in the learning environment. During this symposium, presenters who lead coaching programs will illustrate principles of coregulation and strategies to combat racism with examples from their own coaching programs.

Dr. Gifford will provide a foundation for the discussion of coregulation using the framework of coachability. Dr. Gusic will demonstrate strategies coaches can use to partner with and empower learners to identify learning needs and create a plan to address those needs. Sofia Devers, a senior medical student, will share survey and interview data from medical students who identify with minority groups that are underrepresented in medicine about their experiences with coaching. Dr. Gifford will then explore ways that coaches create psychological safety for learners to develop their professional identity and foster agency to manage identity threats. Dr. Sanguino will illustrate how the infrastructure in coaching programs can identify systemic issues, including issues of racism and bias, so that these issues can be addressed effectively.

Finally, presenters will pose questions to the audience to prime conversations about how to leverage coaching strategies and programs to address racism and bias in the learning environment.

Learning Objectives

- 1. Describe how coregulation of learning can cultivate coachability, empower learners, and promote learner agency
- 2. Explore strategies to create psychological safety, support professional identity development, and manage threats to identity
- 3. Examine the program infrastructure needed to support coaching and address systemic issues that contribute to racism and bias in the learning environment

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50-75

2. Target audience

Educators and educational program leaders who are interested in coaching and in combating racism and bias in the learning environment; Learners who are interested in coaching and in how they can partner with faculty to strengthen skills needed for lifelong learning and to address bias.

3. Tracks

Academic and Research Skills

Career Development

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

Medical Education

Mental Health

Wellness and Well-being

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

APA plenary and business meeting

Update in Medical Education Top Articles

6. If your session was presented at another conference, please describe the conference and presentation.

We have presented some of the themes in this session at a variety of conferences, but this session is newly created.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Addressing & Overcoming Racism in Clinical Care and Research

8. Additional comments

There are technical issues with the submission form and we are unable to include the chair as both doing the introduction and speaking. For clarity, the presentation outline is as follows:

- 1. Kim Gifford Introduction to coachability and coregulation of learning (15min)
- 2. Mary Ellen Gusic Using a coaching approach to partner with learners and promote self-regulated learning (15min)
- 3. Sofia Devers Perspectives of students who identify with minority groups that are underrepresented in medicine (15min)
- 4. Kim Gifford Creating psychological safety to support professional identity development and foster agency to manage threats to identity (10min)
- 5. Sandy Sanguino Program infrastructure to support coaching and identify systemic issues that contribute to racism and bias (15min)
- 6. All presenters: Q/A and discussion with audience about how to leverage coaching strategies and programs to address systemic issues that contribute to racism and bias in the learning environment (20min)
- 9. Does this submission involve one or more specialties or disciplines?

This topic applies to every specialty and discipline. Our speakers represent a variety of different clinical disciplines and educational roles.

Presentation Titles and Durations

Using a coaching approach to partner with learners and promote self-regulated learning

Maryellen Gusic, MD

Duration of Presentation in Minutes

15

Perspectives of students who identify with minority groups that are underrepresented in medicine Sofia Devers

Duration of Presentation in Minutes

15

Creating psychological safety to support professional identity development and foster agency to manage threats to identity Kimberly Gifford, MD

Duration of Presentation in Minutes

25

Program infrastructure to support coaching and identify systemic issues that contribute to racism and bias Sandra Sanguino, Sanguino, MD MPH

Duration of Presentation in Minutes

15

Pediatric Disaster Science-All of Us

Session Type: Hot Topic Symposia

Submitter: **Debra Weiner**

Participant(s)

1. DW

Debra L. Weiner, MD, PhD

Position:

Assistant Professor

Organization:

Boston Childrens Hospital/Harvard Medical School

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

2. SC

Sarita Chung, MD

Position:

Associate Professor, Harvard Medical School

Organization:

Boston Children's Hospital

Role:

Speaker

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Ethnicity
  Not Hispanic or Latino
  Race
  Asian
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, SPR
3. CD
  Cinnamon A. Dixon, DO, MPH
  Position:
  Medical Officer
  Organization:
  Eunice Kennedy Shriver National Institute of Child Health and Human
  Development
  Role:
  Speaker;Chair
  Ethnicity
  Not Hispanic or Latino
  Race
  White
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP
4. LL
  Lorah Ludwig, MA
  Position:
  Lead Public Health Analyst
  Organization:
  Health Resources and Services Administration
  Role:
  Speaker
```

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. EF

Erika Felix, PhD

Position:

Professor

Organization:

University of California, Santa Barbara

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APA

Session Description

Session Description

Disasters and pandemics are increasing in frequency and scope and impact us all. Pediatric disaster science is critical for preparedness, response, mitigation, recovery and prevention that best serves children their families and society. We all have the opportunity and the responsibility to contribute to disaster science and its implementation, even if disaster medicine is not your major career focus. There is now unprecedented imperative, focus on and opportunity

across all sectors of society to build a sustained pediatric disaster research workforce and infrastructure. Learn how your expertise, clinical work and/or research can support pediatric disaster science, and about opportunities to integrate and/or focus on disaster science in your career.

SYMPOSIUM INTRDUCTION

I. PEDIATRIC DISASTER SCIENCE

Why Pediatric Disaster Science

- -Pediatric specific disaster considerations
- -Scope of pediatric disaster and research
- -Engagement in pediatric disaster science-importance and opportunities for all of us, engaging all stakeholders to serve all children/families and society

Pediatric Disaster Research-speaker TBD

- -Surveillance, epidemiology, manifestations, preparedness, response, mitigation, recovery, prevention
- -Data science-collection, management, sharing, analytics, informatics
- -Public health science-guidelines, communication, trust
- -Implementation science

II. PARTNERING TO BUILD PEDIATRIC DISASTER SCIENCE-OPPORTUNITIES, STRATEGIES FOR ENGAGING

AAP, Pediatric Research Networks, Pediatric Disaster Centers of Excellence, Regional Disaster Health Response System

Government, NGO, Industry Pediatric Disaster Research

- -Federal agency research priorities, focus and activities, training opportunities, research tools
- -Disaster Response organizations
- -Pharmaceutical and biomedical engineering industry

Partnering With, Engaging Community

III. FUNDING AND ADVOCACY Funding Opportunities

Pediatric Disaster Science Policy and Advocacy

Learning Objectives

- Recognize the scope and importance of pediatric disaster science for all of us
- 2. Identify opportunities and strategies for engagement in pediatric disaster science

3. Pursue opportunities for funding and for advocating for pediatric disaster science

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50+

2. Target audience

AAP/SPR members all disciplines interested in engaging in pediatric disaster research as part or a major focus of their career. Anticipate of most interest to those in Emergency Medicine, Critical Care, Neonatology, Surgery, Infectious Disease, Complex Care, General Pediatrics and those with interest in disaster, global health, advocacy.

3. Tracks

Advocacy

Clinical Research

Community Pediatrics

Critical Care

Emergency Medicine

Public Health

School and Community Health

Telemedicine/EHR/Medical Informatics

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Saturday, April 29
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Pediatric Emergency Medicine sessions

Disaster sessions

SPR Plenary

6. If your session was presented at another conference, please describe the conference and presentation.

National Academies Sciences Engineering Medicine (NASEM) Pediatric Disaster Science Symposium, Aug 1-2, 2022, Washington DC. Conference sponsored and hosted by NASEM, proposed, co-planned by me, Debra Weiner, MD, PhD and Cinnamon Dixon, DO, MPH, Co-Chair NASEM Action Collaborative on Disaster Research. The purpose of the conference was to convene broad representation of federal and non-federal stakeholder and subject matter experts to scope perspectives, experiences, information and scientific needs related to disasters affecting child populations with the goal of generating high level prioritization of pediatric disaster science foci; opportunities for

alignment and synergy of scientific efforts to collectively and effectively advance pediatric disaster science; and to set the stage for capacity building around evidence-based practices and scientific discovery to improve outcomes of children.

Our proposed PAS 2023 Pediatric Disaster Science-All of Us symposium will incorporate information, ideas, opportunities from the NASEM symposium relevant for AAP/SPR members to promote their engagement in pediatric disaster science, and build a sustained pediatric disaster research workforce and infrastructure within and beyond AAP/SPR.

NASEM symposium details:

~80 invited attendees live, ~50 of those were invited speakers, each talk 7 minutes. On line attendance > 600.

Invited AAP and/or SPR members who spoke at the NASEM symposium and are interested in further advancing pediatric disaster science through AAP/SPR based on concepts, priorities and opportunites discussed at the NASEM symposium, and on their expertise and roles directly relevant to pediatric disaster medicine include Steven Krug, MD-AAP Council on Children and Disasters (COCD) Chair; Sarita Chung, MD-COCD Vice-chair, EMS EIIC Disaster Domain Co-lead, executive council member Pediatric Pandemic Network (PPN); Joelle Simpson, MD, MPH-COCD; David Schoenfeld, MD-COCD Executive Council; Nathan Kupperman, MD, MPH-Founder, past-Chair Pediatric Emergeny Care Applied Research Network (PECARN), past-Chair of the global Pediatric Emergency Research Network (PERN); Charles Macias MD, MPH-EMSC EIIC, Co-director Pediatric Center of Excellence, PNN; Rachel Stanley, MD-PECARN, PPN; Kenneth Mandl, MD, MPH-Informatics; Yvonne Maldonado, MD-Infectious Disease; Robert Wright, MD, MPH-Environmental Epidemiology, Toxicology; Cinnamon Dixon, DO, MPH-Co-Chair NASEM Collalition on Disaster Science, lead planning committee NASEM Pediatric Disaster Science Symposium; Debra Weiner, MD, PhD-COCD member, past SPR Research Advocacy Committee member, planning committee NASEM Pediatric Disaster Science, COCD member.

Session Topics:

Introduction

Setting the Stage for Disaster Science

Prioritizing Research Throughout Disaster Cycles

Fostering Translational Research in Pediatric Disaster Management Plans/Activities

Translational Research-From Practice to Communities

Preparing the Foundation to Conduct Pediatric Disaster Research Developing and Maintaining a Registry of Networks and Scientists Leveraging Big Data

Funding Streams and Regulations to Help Bridge Scientific Gaps Recap and Prioritization Activities

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research Science is Real: Research. Misinformation and Trust

8. Additional comments

Scope of pediatric disaster will include pandemics, natural and manmade disasters, pandemics. Pediatric specific disaster considerations will include vulnerabilities, illness, injury, mental health, impact of children in and on society, child rights.

NASEM is still in the process of reviewing content from the Pediatric Disaster Science Symposium, working with federal partners and programs to further delineate disaster research priorities based on data collected during the meeting, establish collaborations with those at the meeting, and identify pediatric disaster research funding opportunities. They have requested that we defer selection of additional speakers until they have completed the post NASEM symposium after action review process of identifying research priorities, collaborations and funding, which they expect to have done by early November 2022.

9. Does this submission involve one or more specialties or disciplines?

Specialties-Most relevant for Disaster Medicine, Emergency Medicine, Critical Care, Neonatology, Surgery, Complex Care, Infectious Disease, Hospital Medicine, General Pediatrics, Adolescent, Global Health. Research domains-biomedical basic science/translational/clinical research, quality improvement, engineering, social sciences, data science, public health, global health, advocacy Themes/topics-healthcare, mental health, diversity/equity/inclusion, special needs, school, community, environment, pharmaceuticals/therapeutics, technology, telehealth, social media, preparedness, response, mitigation

Presentation Titles and Durations

AAP, Pediatric Research Networks, Pediatric Disaster Centers of Excellence, Regional Disaster Heath Response System Sarita Chung, MD

Duration of Presentation in Minutes

7

Government, NGO, Industry Pediatric Disaster Research (7 min), Funding Opportunities (7 min)

Cinnamon A. Dixon, DO, MPH

Duration of Presentation in Minutes

14

Partnering with, Engaging Community Lorah Ludwig, MA

Duration of Presentation in Minutes

7

Pediatric Disaster Science Policy and Advocacy Erika Felix, PhD

Duration of Presentation in Minutes

7

Pediatric Hospital Based Violence Intervention Programs: Unique Needs, Unique Solutions

Session Type: Panel Discussion

Submitter: Katie Donnelly

Participant(s)

1. KF

Kiesha Fraser Doh, MD

Position:

Assistant Professor of Pediatrics and Emergency Medicine

Organization:

Emory University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

2. MM

Marlene Melzer-Lange, MD

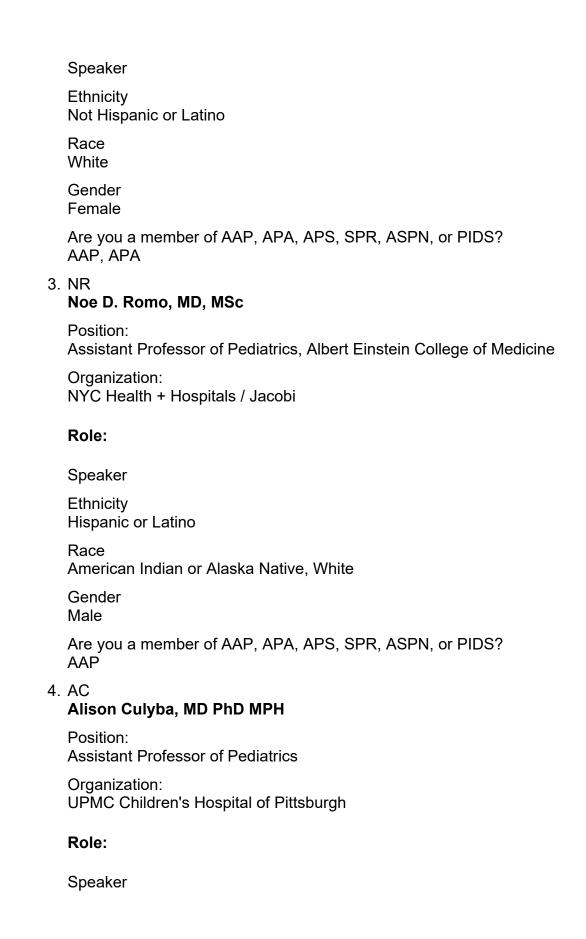
Position:

Professor of Pediatrics (Emergency Medicine)

Organization:

Medical College of Wisconsin

Role:



Ethnicity Hispanic or Latino Race White Gender **Female** Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA 5. JF Joel Fein, MD, MPH Position: Professor of Pediatrics Organization: Perelman School of Medicine at the University of Pennsylvania Role: Speaker **Ethnicity** Not Hispanic or Latino Race White Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR 6. KD Katie Donnelly, MD, MPH Position: Assistant Professor of Pediatrics and Emergency Medicine Organization: Children's National Hospital Role: Submitter; Speaker; Chair

Ethnicity Not Hispanic or Latino

Race White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

With violence the leading cause of death in children ages 1-19, pediatricians, pediatric subspecialists, and hospital systems are looking for ways to address the exposure to and impact of violence for their patients and communities. Hospital-based violence intervention programs (HVIPs) are becoming increasingly common across the U.S. and are dedicated to addressing violence, especially gun violence, in affected communities. These evidence-based programs reach out to clients after violent injury to counsel against retaliation, decrease risk of re-injury and improve morbidity. Given their effectiveness, local governments and philanthropic organizations are more open to funding these projects. The recently passed Bipartisan Safer Communities act sets aside \$250 million to support community violence intervention programs, which includes hospital-based programs.

Though many HVIPs serve adult clients, a number of pediatric-specific HVIPs have been established or are in development to address the unique needs of these patients and their families and communities. Through a panel discussion moderated by Drs. Fraser Doh and Donnelly with medical directors of HVIPs that serve pediatric clients, attendees will learn about what it takes to start and maintain a pediatric HVIP. Topics will include understanding the needs of your patient population, obtaining hospital buy in, securing funding, staffing options, fostering community partnerships, performing research, and ensuring sustainability. Panelists will also discuss how they ensure they are creating and continuing programs that promote health equity for their clients, hospitals, and communities. Participants will break into small groups to develop their idea for an HVIP and share back with the larger group.

Learning Objectives

- 1. Describe the unique needs of the patients served by pediatric hospital-based violence intervention programs
- 2. Review facilitators and barriers of implementing pediatric hospital-based violence intervention programs
- 3. Discuss how to ensure pediatric hospital-based violence intervention programs are equitable, sustainable and serve community needs.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

Pediatricians and allied health professionals interested in learning more about hospital-based violence intervention programs (HVIPs), starting their own HVIP or improving a current HVIP. All levels of learners (medical students, residents, fellows and attendings) are welcome.

3. Tracks

Adolescent Medicine

Advocacy

Community Pediatrics

Emergency Medicine

Health Equity/Social Determinants of Health

Injury Prevention

Public Health

- Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Saturday, April 29
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. N/A
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

emergency medicine, general pediatrics, public health, adolescent medicine

Presentation Titles and Durations

Introductions of Panelists Kiesha Fraser Doh, MD

Duration of Presentation in Minutes

5

Discussion

Marlene Melzer-Lange, MD

Duration of Presentation in Minutes

15

Discussion

Noe D. Romo, MD, MSc

Duration of Presentation in Minutes

15

Discussion

Alison Culyba, MD PhD MPH

Duration of Presentation in Minutes

15

Discussion

Joel Fein, MD, MPH

Duration of Presentation in Minutes

15

Small group break outs and Q and A with audience

Katie Donnelly, MD, MPH

Duration of Presentation in Minutes

25

Story of my strife: Narratives from Academic Pediatrics

Session Type: Panel Discussion

Submitter: Jaspreet Loyal

Participant(s)

1. JP

Jamie M. Pinto, MD

Position:

Associate Professor of Pediatrics, PHM Fellowship Director

Organization:

K. Hovnanian Children's Hospital at Jersey Shore University Medical Center

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. RL

Rebecca Latch, MD

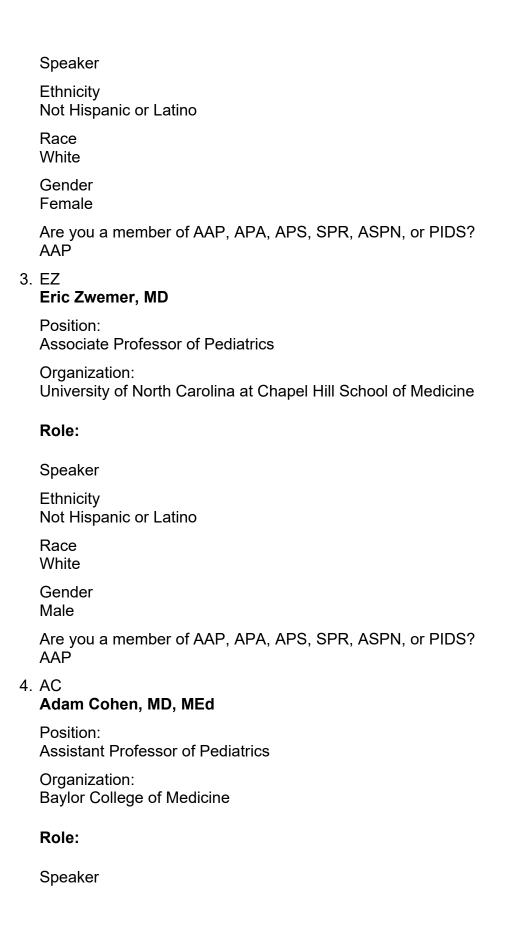
Position:

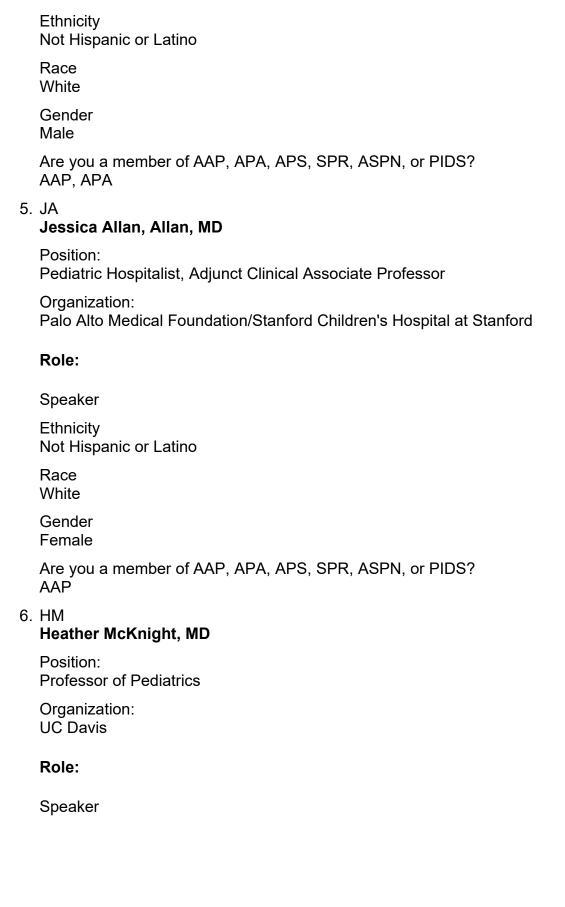
Associate Professor of Pediatrics

Organization:

Arkansas Children's Hospital

Role:





Ethnicity Not Hispanic or Latino Race White Gender Prefer not to respond Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP 7. MK Marta A. King, King, MD, MEd Position: Professor, Pediatric Hospital Medicine Organization: Saint Louis University School of Medicine Role: Speaker **Ethnicity** Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA 8. JL Jaspreet Loyal, MD, MS Position: Associate Professor

Organization:

Yale-New Haven Children's Hospital

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APA

Session Description

Session Description

In the wake of COVID-19, physician burnout is at an all-time high, highlighting a need for tools to promote physician wellness, work satisfaction, and joy. Narrative medicine centered around stories stimulates professional growth and provides a unique window into the life of patients and clinicians highlighting the critical aspect of humanism in our work. Developing a psychological safe space among a small group of peers within or outside one's academic institution can allow for vulnerability within which to share stories and relate. Relating to each other's challenges deepens bonds and mitigates feelings of isolation and burnout in challenging clinical and academic environments with many competing priorities. In this session, a national panel of pediatric hospitalists who are part of the Pediatric Hospital Medicine Advancing Leaders through Mentorship (PALM) peer-mentoring program will share narrative stories from their lives. The session will begin with introductions and a brief description of narrative medicine (10 mins). Eight panelists will each share a 5 min short story about a challenge they faced in their personal or professional life and how they managed the situation (~45 mins). Audience participants will be asked to pairshare a narrative story with a fellow participant, if comfortable (15 mins) and the session will end with a moderated Q&A session (20 mins)...

Learning Objectives

- 1. Recognize the power of narrative medicine and vulnerability in physician wellness
- 2. Share a successful model of peer mentorship as a tool to combat physician
- 3. Normalize the ups and downs of careers in academic medicine and as physicians

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

Academic pediatricians, fellows, residents, junior and senior faculty

3. Tracks

Career Development

Hospital Medicine

Wellness and Well-being

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Any hospital medicine events (plenary, SIGs) or presentations in which any of the speakers are already presenting in

- 6. If your session was presented at another conference, please describe the conference and presentation.

 n/a
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

n/a

9. Does this submission involve one or more specialties or disciplines?

Hospital Medicine, Junior faculty, Division chiefs, Medical Educators, Leaders

Presentation Titles and Durations

A medical error and return of compassion Jamie M. Pinto, MD

Duration of Presentation in Minutes

5

Effects of Medical Child Abuse on the Pediatrician Rebecca Latch, MD

Duration of Presentation in Minutes

If I'm not a PD, who am I?: Rediscovering your professional identity when you don't get that position

Eric Zwemer, MD

Duration of Presentation in Minutes

5

Breaking the Cycle of Overcommittment Adam Cohen, MD, MEd

Duration of Presentation in Minutes

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What breaks your heart? Finding purpose and making meaningful change Jessica Allan, Allan, MD

Duration of Presentation in Minutes

5

Redefining my leadership style Heather McKnight, MD

Duration of Presentation in Minutes

5

Academic Pediatrics Briefs Marta A. King, King, MD, MEd

Duration of Presentation in Minutes

5

Managing Imposter syndrome: Becoming a Division Chief Jaspreet Loyal, MD, MS

Duration of Presentation in Minutes

5

Long Term Respiratory Consequences of Prematurity

Session Type: State of the Art Plenary

Submitter: Richard Martin

Participant(s)

1. RR

Rita M. Ryan, MD

Position:

Professor of Pediatrics

Organization:

Case Western Reserve University School of Medicine-Rainbow Babies & Children's Hospital

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR

2. TR

Thomas M. Raffay, MD

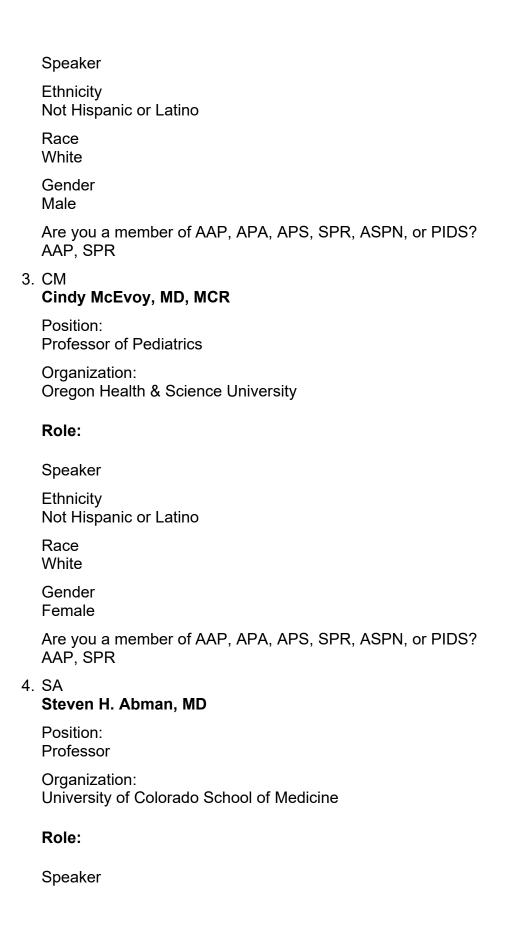
Position:

Assistant Professor

Organization:

Case Western Reserve University

Role:



	Ethnicity Not Hispanic or Latino
	Race White
5.	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APS, SPR
	DG David Gozal, MD, MBA, PhD
	Position: Professor and Chair
	Organization: University of Missouri-Columbia School of Medicine
	Role:
	Speaker
	Ethnicity Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR
6.	TL Tamorah R. Lewis, MD, PhD
	Position: Associate Professor
	Organization: University of Toronto Temerty Faculty of Medicine
	Role:
	Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

7. RM

Richard J. Martin, MD

Position:

Professor of Pediatrics

Organization:

Case Western Reserve University - Rainbow Babies & Children's Hospital

Role:

Submitter; Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS

Session Description

Session Description

"Fetal origins of adult disease" reveals that long-term respiratory outcomes in surviving preterm infants need close attention. Events that occur in the fetal/neonatal period have the potential for positive or negative effects on lung development. This symposium will explore the origins of later respiratory outcomes for preterm infants.

Dr. Raffay uses neonatal rodent models used to characterize the physiologic and mechanistic components of longer-term lung and airway. The balance of contractile and relaxant contributors to airway function and the influence of lung parenchymal injury on airway function contribute to later airway dysfunction.

Increased airway reactivity is common in former preterm infants, even those not extremely preterm. Dr. McEvoy will discuss preventive measures for optimizing respiratory function in these infants.

Dr. Abman will discuss the long-term consequences of prematurity on cardiac function, not only pulmonary vascular disease/resultant pulmonary hypertension, but the poorly understood impacts on biventricular function.

Intermittent hypoxemic events are almost universal in preterm infants and their potential consequences are worrisome. Dr. Gozal will has shown that such episodes, when recurrent, have long-term adverse effects on respiratory control. The high incidence of sleep disordered breathing in childhood may well be attributable to early life intermittent hypoxemia.

The high incidence of prematurity in Black infants is compounded by an increased risk of adverse respiratory outcome. It remains imperative to explore the sociodemographic contributors to this societal problem to improve respiratory outcomes in this risk group. Dr. Lewis will bring her expertise in discussing racial disparities in premature infants with lung disease.

Learning Objectives

- 1. appreciate the effect of NICU care on later respiratory problems for premature infants.
- 2. consider new preventive measures to improve respiratory outcomes in premature infants.
- 3. understand how racial disparities can be discussed positively in the neonatology discipline.

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.
 500

2. Target audience

Neonatologists, Pediatric Pulmonologists, General Pediatricians, Developmental Pediatricians, fellows, residents, trainees

3. Tracks

Developmental Biology

General Pediatrics

Health Equity/Social Determinants of Health

Health Services Research

Neonatology

Pulmonology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. other neonatology pulmonary or respiratory sessions both scholarly sessions and abstract sessions
- If your session was presented at another conference, please describe the conference and presentation.
 NA
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Addressing & Overcoming Racism in Clinical Care and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

The immature Airway: Translational Lessons from Animal Models

Thomas M. Raffay, MD

Duration of Presentation in Minutes

15

Respiratory Function of NICU Graduates in Childhood, Adolescence and Beyond

Cindy McEvoy, MD, MCR

Duration of Presentation in Minutes

15

Pulmonary Vascular and Cardiovascular Outcomes After the NICU Steven H. Abman, MD

Duration of Presentation in Minutes

15

Is Intermittent Hypoxemia of Prematurity a Precursor of Sleep Disordered Breathing?

David Gozal, MD, MBA, PhD

Duration of Presentation in Minutes

15

The Challenge or Racial Disparity in Respiratory Outcomes Tamorah R. Lewis, MD, PhD **Duration of Presentation in Minutes** 15

Panel Discussion, Questions and Answers for all presentations Richard J. Martin, MD **Duration of Presentation in Minutes** 15

Life after the Infant Formula Shortage - How to Help Families Make Evidence-Based Decisions When Choosing a Formula

Session Type: Hot Topic Symposia

Submitter: Bridget Young

Participant(s)

1. KJ

Kirsi Jarvinen-Seppo, MD PhD

Position:

Chief, Pediatric Allergy and Immunology

Organization:

University of Rochester School of Medicine and Dentistry

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR

2. RB

Robert Boyle, MD PhD

Position:

Clinical Reader in Paediatric Allergy

Organization:

Imperial College London

Role:

	Speaker
	Ethnicity Prefer not to respond
	Race Prefer not to respond
	Gender Prefer not to respond
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
3.	DM Daniel Munblit, MD PhD
	Position: Honorary Senior Lecturer
	Organization: Imperial College London
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
4.	BY Bridget E. Young, PhD
	Position: Assistant Professor
	Organization: University of Rochester School of Medicine and Dentistry
	Role:
	Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

In the wake of the infant formula shortage, it has become clear that lack of unbiased medical education about formula, combined with excessive marketing messaging continues to cause stress for formula-feeding families. This hottopic session will highlight novel clinical work about infant formula that will support practitioners. Attendees will leave this session with an improved understanding of how standard formula options differ in macronutrient composition, and how to help families make evidence-based decisions.

Dr Kirsi Jarvinen-Seppo will review the pathology of infant allergy presentation as well as other medical conditions, including gastroesophageal reflux disease (GERD), that warrant usage of a specialized infant formula, including best-practices for introducing these formulas.

Dr Robert Boyle will present research documenting that hypoallergenic formulas are over-prescribed and over-consumed, including consensus recommendations for diagnosing cow's milk allergy in infants and prescribing these formulas appropriately.

Dr Daniel Munblit will present international work documenting how health claims are utilized in infant formula marketing with a focus on excessive marketing practices in the US.

Dr Bridget Young will present research documenting how lactose-reduced formulas are also over-consumed and how to help families make evidence - based choices about infant formula. She will also discuss how the recent formula shortage and influx of foreign formulas in the US has highlighted these concerns. This talk will end highlighting how the formula shortage has presented us with a unique opportunity to improve messaging around infant

formula.

These talks will be followed by a 20-minute panel Q&A to address audience questions.

Learning Objectives

- 1. Identify appropriate clinical indications that warrant referral for allergic evaluation in infants.
- 2. Discuss applicability of health claims used in formula marketing in making formula recommendations
- 3. Identify sources of carbohydrate used in infant formula and medical indications for lactose-free formulas

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

250

2. Target audience

Neonatologists, General Pediatricians, Pediatric Gastroenterologists, Pediatric Allergists, Researchers studying infant nutrition and/or digestion

3. Tracks

Allergy, Immunology and Rheumatology

Gastroenterology/Hepatology

General Pediatrics

Neonatology

Pediatric Nutrition

Public Health

Well Newborn

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Any other programming related to infant formula

Any other programming related to breast milk/breastfeeding

Any other programming related to pediatric allergy

6. If your session was presented at another conference, please describe the conference and presentation.

N/A

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

8. Additional comments

I am unable to add two presentations to one speaker. Dr Young will chair the session intro (2 minutes) and session Q&A.

9. Does this submission involve one or more specialties or disciplines?

Topic is infant formula, involving Nutrition, General Pediatrics, Public Health, and Gastroenterology

Presentation Titles and Durations

Pathology of infant allergy and other medical concerns - Clinical Indications for appropriate use of specialized formula

Kirsi Jarvinen-Seppo, MD PhD

Duration of Presentation in Minutes

17

Hypoallergenic formulas are over-prescribed. How do we change this? Robert Boyle, MD PhD

Duration of Presentation in Minutes

17

Health claims are pervasive in formula marketing, especially in the US Daniel Munblit, MD PhD

Duration of Presentation in Minutes

17

Lactose-reduced formulas are overconsumed. Implications from the US formula shortage

Bridget E. Young, PhD

Duration of Presentation in Minutes

17

Neurocognitive Regression in Children with Down Syndrome: The Role of Neuroinflammation

Session Type: Hot Topic Symposia

Submitter: Jonathan Santoro

Participant(s)

1. JS

Jonathan D. Santoro, MD

Position:

Director of Neuroimmunology, Assistant Professor of Neurology and Pediatrics

Organization:

Division of Neurology, Children's Hospital Los Angeles and Keck School of Medicine of USC

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. LP

Lina Patel, PsyD

Position:

Associate Professor

Organization:

Linda Crnic Institute for Down Syndrome

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

3. SS

Stephanie Santoro, MD

Position:

Clinical Geneticist

Organization:

MassGeneral Hospital for Children

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

Session Description

Session Description

Down syndrome regression disorder (DSRD) is a symptom cluster consisting of neuropsychiatric regression without cause in the seocnd and third decade of life. Symptoms include acute or subacute onset encephalopathy, catatonia, insomnia, hallucinations, delusions, bradykinesia, and new onset "autistic" features. This disorder has been reported for over 80 years although was historically thought to be psychiatric in nature often being described as "late onset autism" or "early onset Alzheimer's disease". For this reason, limited diagnostic investigations were performed and often patients were judged to be beyond more than symptom control from a treatment standpoint. Over the last half decade a variety of studies have more clearly phenotyped this condition allowing for improved recognition of this disorder amongst evaluating pediatricians, neurologists, and psychiatrists. However, only in the past two years has data emerged regarding a potential neuroinflammatory cause to the clinical symptoms of this disorder. Subsequently ground-breaking data has been published on rapid immunotherapy responsiveness in these patients, some of whom are able to achieve normal functional status again within weeks of treatment. This session will provide the most up to date information on this emerging condition including phenotyping, diagnostic and neurodiagnostic investigations, diagnosis, the role of neuroinflammation, and therapeutic approaches. The audience of this session will be pediatricians and pediatricsub specialists who evaluate and treat young persons with Down syndrome.

Learning Objectives

- Upon completion, participants can identify the eight core features of Down Syndrome Regression Disorder (DSRD) and be familiar with etiologies that could mimic clinical symptoms.
- Upon completion, participants should understand which diagnostic studies are essential in the evaluation of DSRD and how data can be used to inform treatment.
- Upon completion, participants should be familiar with therapeutic approaches in the treatment of DSRD and the emerging role of immunotherapy.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

Primary care pediatricians, hospitalists or inpatient pediatricians, neurology sub-specialists.

3. Tracks

Academic and Research Skills Clinical Research

General Pediatrics Genomics/Epigenomics Mental Health Neurology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 none
- If your session was presented at another conference, please describe the conference and presentation. not applicable
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Neurology, Genetics, General Pediatrics, Hospitalist Medicine, Psychiatry

Presentation Titles and Durations

Evidence of Neuroinflammation and Immunotherapy Responsiveness in Persons with Down Syndrome Regression Disorder Jonathan D. Santoro, MD

Duration of Presentation in Minutes

30

Neurocognitive Regression in Down Syndrome: Clinical Features and Diagnosis

Lina Patel, PsyD

Duration of Presentation in Minutes

30

Work Up and Diagnostic Abnormalities in Persons with Down Syndrome Regression Disorder Stephanie Santoro, MD

Duration of Presentation in Minutes

30

Reducing Disparities in Subspecialty Patients Through Social Risk Screening, Education, and Research - the ID Perspective

Session Type: Basic-Translational-Clinical Roundtable

Submitter: Matthew Kronman

Participant(s)

1. MK

Matthew P. Kronman, MD, MSCE

Position:

Professor

Organization:

University of Washington School of Medicine

Role:

Submitter; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? PIDS

2. LV

Louise E. Vaz, Vaz, MD MPH

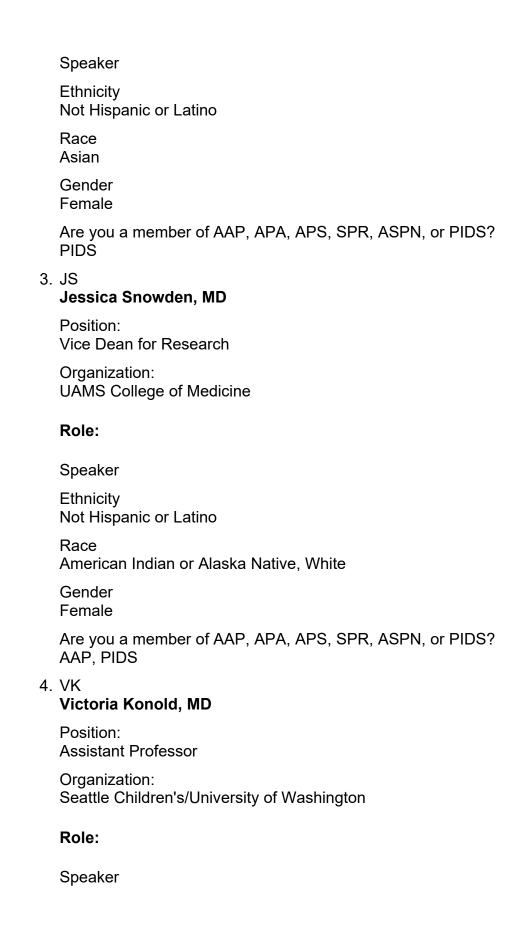
Position:

Associate Professor

Organization:

Oregon Health & Science University

Role:



Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? PIDS

Session Description

Session Description

Both racism and other social risk factors – including poverty, food insecurity, unstable housing, lack of transportation, and limited social support – have a known significant effect on child health. The COVID-19 pandemic has exacerbated these effects, particularly among vulnerable populations. In response, hospital and healthcare systems are moving to identify and address these factors, recognizing the importance of social risk-informed care in influencing health outcomes and reducing the risk of bias and stigma in patient care.

Infectious diseases providers and researchers are well poised to improve equity in the care of their patients, particularly given the historical contexts of HIV/AIDS, tuberculosis, and syphilis, among others. Through this interactive workshop, we will discuss ways to address equity via 1) social risk screening in a specific pediatric infectious disease clinical setting, 2) local and national efforts to improve equitable practices in research, and 3) education and policy updates locally. The format of the session will include three short talks on these topics followed by an interactive session in three smaller groups (based on the three domains of the talks). The goals will be to exchange ideas and best practices across pediatric specialties on how social risk screening is happening at their institutions, lessons learned and discussion around the ethics of such work, and to explore metrics and outcomes needed to advance quality improvement, research, and advocacy efforts in this field.

Learning Objectives

1. Identify methods by which providers can incorporate social risk screening within their clinical practice setting.

- 2. Identify methods by which researchers can incorporate social risk and equity within their research contexts.
- 3. Propose policy updates and educational interventions that foster equity in the clinical environment.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50-100

2. Target audience

Target audience will primarily be Pediatric Subspecialists at all levels of training (medical student through senior faculty), but the content is relevant to General Pediatricians and Hospital Medicine providers as well.

3. Tracks

Academic and Research Skills

Advocacy

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

Health Services Research

Infectious Diseases

Medical Education

Quality Improvement/Patient Safety

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Other PIDS programming, if possible

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

Addressing & Overcoming Racism in Clinical Care and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Presenters are from Infectious Diseases; we hope that other subspecialty groups (e.g., Nephrology, EM, NICU, etc) will join this session to share ideas.

Presentation Titles and Durations

Socially Informed Medical care in Infectious Diseases: Lessons from COpAT (Complex Outpatient Antibiotic Therapy)

Louise E. Vaz, Vaz, MD MPH

Duration of Presentation in Minutes

15

Research initiatives and metrics to reduce disparities in pediatric ID Jessica Snowden, MD

Duration of Presentation in Minutes

15

Local Efforts to Improve Equitable Care Through Education and Policy Change: One Hospital's Experience Victoria Konold, MD

Duration of Presentation in Minutes

15

Family Centered Care in the NICU - What's Next?

Session Type: Panel Discussion

Submitter: Jochen Profit

Participant(s)

1. JP

Jochen Profit, MD, MPH

Position:

Professor of Pediatrics

Organization:

Stanford University

Role:

Submitter; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR

2. DC

Desiree Collins Bradley

Position:

Patient Engagement Network Lead

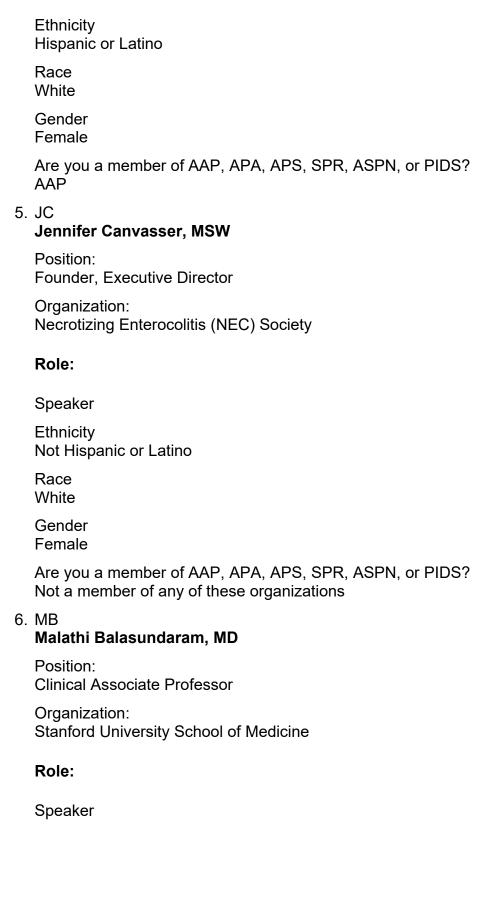
Organization:

ATW Health Solutions

Role:

Speaker

	Ethnicity Not Hispanic or Latino
	Race Black or African American
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
3.	AZ Alex Zavala
	Position: NA
	Organization: NA
	Role:
	Speaker
	Ethnicity Hispanic or Latino
	Race Prefer not to respond
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
4.	LV Lelis Vernon, Vernon, SQIL
	Position: Healthcare Consultant
	Organization: Stanford University School of Medicine
	Role:
	Speaker



Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

Family centered care (FCC) is growing up. Many of the basics and best practices have been established. The field has much visibility and support from providers. National and state quality improvement networks strongly support the role of family centered care. However, critical barriers to FCC remain. For example, implementation is difficult, particularly for hospitals with limited resources; families are often viewed as volunteers rather than expert contributors; delegation of authority for change making is often withheld; and many others.

The goal of this panel discussion is to take stock of where we are, where we want to go, how we get there in an equitable way, and how we know whether what we do is working and having an impact. The session will field diverse family leaders and FCC experts who will explore these topics and provide guidance for clinicians, researchers, and funders to participate in ongoing efforts and participate in new ones.

Learning Objectives

- describe the state of FCC in the NICU setting.
- 2. understand the barriers to scaling FCC
- 3. contribute to overcoming FCC barriers at the hospital, state, and national level.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

75

2. Target audience

Clinicians, researchers, trainees, family representatives

3. Tracks

Health Equity/Social Determinants of Health

Health Services Research

Neonatology

Quality Improvement/Patient Safety

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Neonatal QI

neonatal health equity sessions

Any other family centered care related event

6. If your session was presented at another conference, please describe the conference and presentation.

Vermont Oxford Annual Quality Congress which has very strong family representation.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Addressing & Overcoming Racism in Clinical Care and Research

8. Additional comments

If this session gets selected please waive conference fees for family speakers. I am covering their travel cost.

9. Does this submission involve one or more specialties or disciplines?

No. Neonatal but general principles apply to non-neonatologists

Presentation Titles and Durations

Family Centered Care - State of Play

Desiree Collins Bradley

Duration of Presentation in Minutes

12

Disparities and Family Centered Care - Opportunities and Pitfalls Alex Zavala

Duration of Presentation in Minutes

12

Family Centered Care - A Vision for the Future

Lelis Vernon, Vernon, SQIL Duration of Presentation in Minutes 12

Barriers and Potential Solutions to Family Centered Care Jennifer Canvasser, MSW **Duration of Presentation in Minutes** 12

To Improve We Have to Measure Malathi Balasundaram, MD **Duration of Presentation in Minutes** 12

Applying Human Centered Design Methodology to Create Child Health Interventions

Session Type: Hot Topic Symposia

Submitter: Yael Smiley

Participant(s)

1. BC

Binny Chokshi, MD, MEd

Position:

Associate Professor Pediatrics

Organization:

Uniformed Services University of the Health Sciences F. Edward Hebert School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. EC

Erika R. Cheng, PhD, MPA

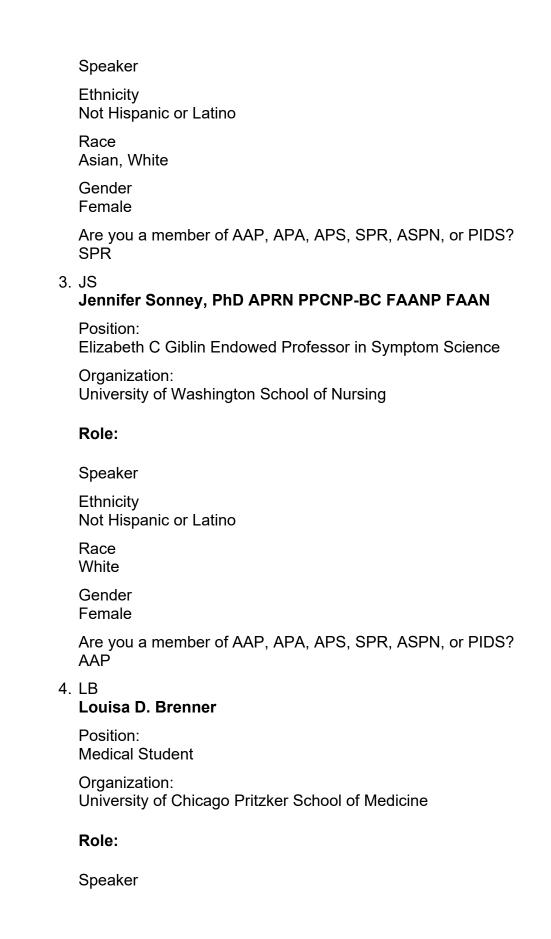
Position:

Assistant Professor of Pediatrics

Organization:

Indiana University School of Medicine

Role:



Ethnicity Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 5. JM Jaytoya C. Manget, Manget, DNP, MSPH, FNP Position: Assistant Professor Organization: The George Washington School of Medicine Role: Speaker **Ethnicity** Not Hispanic or Latino Race Black or African American Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP 6. YS Yael Smiley, MD Position: **Assistant Professor of Pediatrics** Organization: Children's National Hospital Role: Submitter; Speaker; Chair

Ethnicity
Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

Session Description

Session Description

Human centered design (HCD) is a creative approach to problem solving that can be applied to pediatric healthcare interventions. In HCD methodology, solutions are co-developed with "end-users" as patient stakeholders are engaged throughout the design process. The initial ideation phase involves deep research and brainstorming with affected individuals to learn from their lived experiences and priorities. During the prototyping phase, numerous creative ideas are developed and tested. In the implementation phase, innovations are integrated into real world settings and adjusted based on user feedback. By involving "end-users" from the outset, the interventions that result from HCD methodology are primed for maximal impact and sustainability. This session will describe innovative pediatric patient centered interventions that have been developed using HCD methods. The panel is composed of a multidisciplinary group of researchers and clinicians who have applied HCD methods to improve care of pediatric obesity, asthma, well-child care, and adolescent health. Presenters will showcase their application of HCD methods to develop communication strategies, home-based technology, personalized anticipatory guidance tools, and community programs. Audience members of all levels of expertise are encouraged to attend – whether they are experts in HCD methodology or want to learn more about this emerging field.

Learning Objectives

- 1. Describe the human centered design approach to problem-solving.
- 2. Recognize how human centered design methodology can be used in pediatric healthcare.
- 3. Examine clinical interventions developed using human centered design.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

40

2. Target audience

Clinicians, researchers, administrators, educators, trainees

3. Tracks

Academic and Research Skills

Clinical Research

Health Services Research

Pediatric Nutrition

Public Health

Quality Improvement/Patient Safety

Social Media & Technology

Telemedicine/EHR/Medical Informatics

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

AAP Presidential Plenary

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Science is Real: Research. Misinformation and Trust

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Yes. The panel includes pediatricians, nurse practitioners, and health services researchers who will describe how they created new models of care in asthma, general pediatrics, and adolescent health.

Presentation Titles and Durations

Introduction: Principles of human centered design

Binny Chokshi, MD, MEd

Duration of Presentation in Minutes

Generating ideas and brainstorming: Creating innovative tools to communicate obesity risk to parents of infants and toddlers

Erika R. Cheng, PhD, MPA

Duration of Presentation in Minutes

15

Experimenting and prototyping: Leveraging technology for parent-child shared management of asthma

Jennifer Sonney, PhD APRN PPCNP-BC FAANP FAAN

Duration of Presentation in Minutes

15

Implementing into clinical processes: Developing a personalized, interactive anticipatory guidance tool in primary care

Louisa D. Brenner

Duration of Presentation in Minutes

15

Implementing with community coalitions and partnerships: Building a doula program to support pregnant and parenting teens
Jaytoya C. Manget, Manget, DNP, MSPH, FNP

Duration of Presentation in Minutes

15

Q&A: Applying human centered design methodology to create innovative patient centered child health interventions Yael Smiley, MD

Duration of Presentation in Minutes

Weight management in populations with cognitive and behavioral diagnoses: Reducing bias and providing high quality care

Session Type: **Panel Discussion** Submitter: **Eleanor Mackey**

Participant(s)

1. AB

Amy R. Beck, PhD

Position:

Professor of Pediatrics; Pediatric Psychologist

Organization:

Children's Mercy Hospitals and Clinics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. NM

Nazrat Mirza, MD, ScD

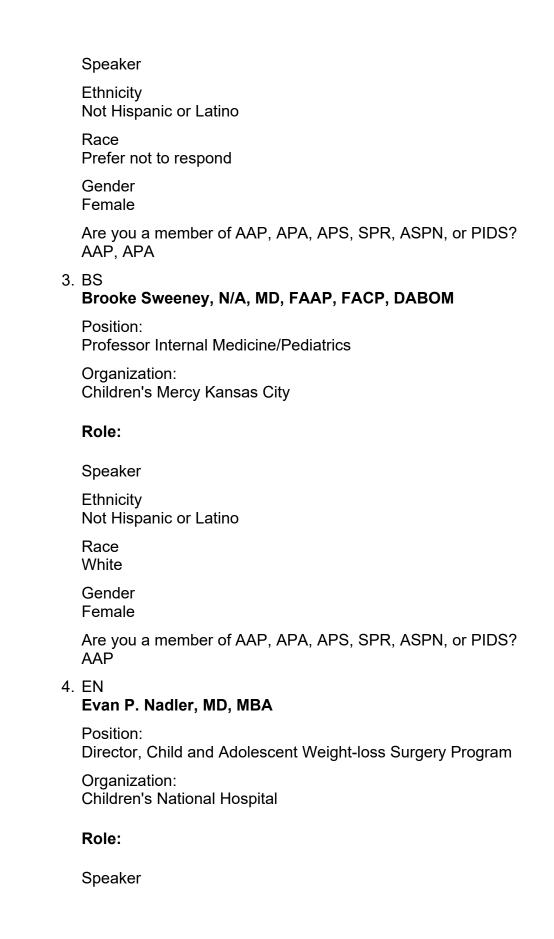
Position:

Associate Professor

Organization:

Children's National Health System

Role:



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Ethnicity
  Not Hispanic or Latino
  Race
  White
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP
5. JF
  Jason D. Fraser, MD
  Position:
  Professor, Program Director Pediatric Surgery Fellowship,
  Organization:
  Childrens Mercy Kansas City
  Role:
  Speaker
  Ethnicity
  Not Hispanic or Latino
  Race
  White
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP
6. EM
  Eleanor R. Mackey, Ph.D.
  Position:
  Associate Professor of Psychology and Behavioral Health
  Organization:
  Children's National Health System
  Role:
  Submitter; Speaker; Chair
```

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APA

7. MD

Meredith Dreyer Gillette, PhD

Position:

Professor of Pediatrics

Organization:

Children's Mercy Hospitals and Clinics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

The goal of the session is to describe weight management options in populations of children and adolescents who also have pre-existing cognitive (e.g., intellectual disability, autism spectrum disorder) or behavioral health (e.g., depression, ADHD, anxiety) diagnoses. Children with these pre-existing conditions are at risk of excess weight due to their medications, stress, and experience of stigma/bullying. Moreover, having a higher weight or larger body

size also makes experiences of bullying, discrimination, and bias more likely, which also raises the risk of experiencing mental health issues. The intersection of experiences of larger body sizes and having cognitive or behavioral diagnoses is especially difficult for those who also experience stigma or bias based on their racial/ethnic identity. Unfortunately, experiences of stigma in populations with obesity extend to interactions with the medical community. Given that high quality weight management is essential for all youth, the current session will focus on how clinicians can provide informed and compassionate care for these children who are at highest risk of obesity.

The panel be composed of multidisciplinary experts in the field of weight management in children and adolescents with comorbid cognitive and behavioral diagnoses representing psychological, medical, and surgical approaches to weight management. The session will start with an introduction to the risk for obesity, bias, and racism in these populations and then describe compassionate and empirically-supported care from psychological, medical, and surgical perspectives. Special attention will be paid to the role of racism and ethnic bias in obesity care, including strategies for reducing said bias.

Learning Objectives

- 1. Upon completion, participants will be able to describe bidirectional risk of obesity and cognitive and behavioral health diagnoses.
- 2. Participants will be able to identify approaches to weight management from multidisciplinary perspectives when working with populations with preexisting cognitive and behavioral health diagnoses.
- 3. Participants will be able to identify ways that racism influences care of youth with higher weight and strategies to reduce racism in care.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

75

2. Target audience

Pediatricians, allied health professionals

3. Tracks

Adolescent Medicine General Pediatrics Mental Health Obesity

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

Not Applicable

- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 - Avoiding overlap with other obesity or bariatric surgery events would be preferable.
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?
 - Addressing & Overcoming Racism in Clinical Care and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic is obesity involving pediatrics, surgery, and psychology.

Presentation Titles and Durations

Bias and racism in the treatment of youth with obesity and cognitive and/or behavioral diagnoses

Amy R. Beck, PhD

Duration of Presentation in Minutes

15

Medical approaches to treatment of youth with obesity and cognitive and/or behavioral diagnoses

Nazrat Mirza, MD, ScD

Duration of Presentation in Minutes

10

Medical approaches to treatment of youth with obesity and cognitive and/or behavioral diagnoses

Brooke Sweeney, N/A, MD, FAAP, FACP, DABOM

Duration of Presentation in Minutes

10

Surgical approaches to treatment of youth with obesity and cognitive and/or behavioral diagnoses

Evan P. Nadler, MD, MBA

Duration of Presentation in Minutes

10

Surgical approaches to treatment of youth with obesity and cognitive and/or behavioral diagnoses

Jason D. Fraser, MD

Duration of Presentation in Minutes

Psychological approaches to treatment of youth with obesity and cognitive and/or behavioral diagnoses

Eleanor R. Mackey, Ph.D.

Duration of Presentation in Minutes

10

Psychological approaches to treatment of youth with obesity and cognitive and/or behavioral diagnoses Meredith Dreyer Gillette, PhD

Duration of Presentation in Minutes

Maternal exposure to environmental metals increases children's risk for the neurological disorders, birth defects, and cancer

Session Type: Hot Topic Symposia

Submitter: Lu Cai

Participant(s)

1. GB

Gregory N. Barnes, MD/PhD

Position:

Executive Director, UL Autism Center

Organization:

Norton Children's Hospital

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. LS

Lonnie Sears, PhD

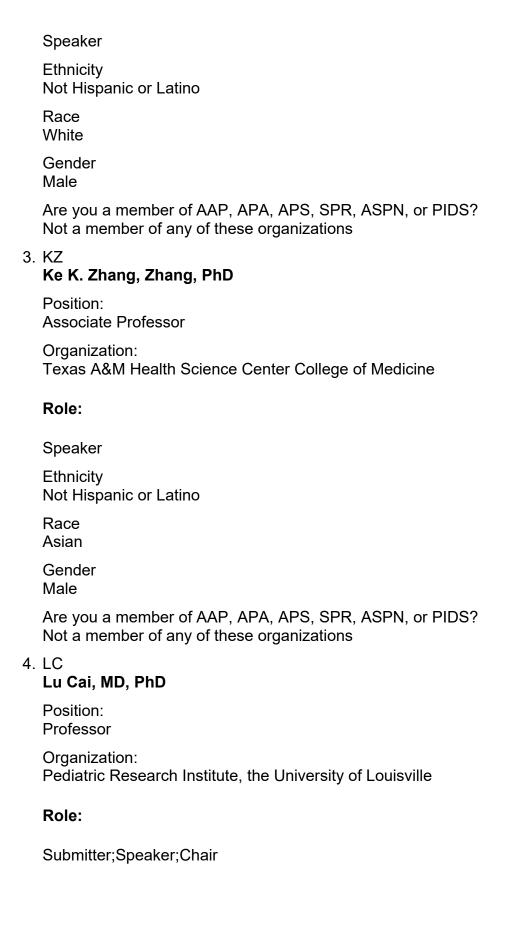
Position:

Professor

Organization:

University of Louisville

Role:



Ethnicity Not Hispanic or Latino

Race Asian

Gender Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Essential metals are crucial for tissue development and cellular function. Therefore, it is important to maintain the essential metal homeostasis which not only relies on the appropriate intake of these essential metals, but also is affected by undesirable intake of nonessential metal. Non-essential heavy metals such as cadmium, arsenic and chromium are considered as chemicals of major public health concern by the World Health Organizations because they are increasingly associated with a variety of adverse health outcomes including neurological disorders, birth defects and metabolic syndrome. Nevertheless, the underlying mechanisms by which non-essential metals influence disease initiation, progression, and exacerbation are not well understood. Specially whether and how maternal exposure to these low-level non-essential metals leading to increased risk of developing diseases in children remain understudied. This symposium, composed of speakers with expertise in a variety of epidemiological to clinical and translational bench works, to highlight the risk of maternal exposure to environmental nonessential metals on developmental origins of disease. Overall, the proposed symposium hot topic will present interesting data and strong evidence for the association of prenatal exposure of non-essential metals and pediatric diseases, such as neurological disorders, birth defects, metabolic syndrome and cancer. Nowadays, the causal effects of complex diseases such as autism, type 2 diabetes, heart failure and cancer are still not clear, thus investigation of the impact of early life environmental exposures on diseases development may shed light on their etiology and thus will contribute to disease prevention and therapy.

Learning Objectives

1. Potential risk of maternal exposure to environmental nonessential metals on developmental origins of disease.

- 2. Potential association of prenatal exposure of non-essential metals and pediatric diseases, such as neurological disorders
- 3. To understand the potential link of prenatal exposure to environmental heavy metals to increase children's diseases is to develop novel strategies for prevention and therapy.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

150 - 200

2. Target audience

- 1) Translational researcher;
- 2) Public health pediatricians
- 3) Community pediatric health careers
- 4) Physician in neonatal medicine
- 5) Environmental health research and caregivers
- 6) Pediatric health-policy makers
- 7) Pediatric oncologists

3. Tracks

Basic Science

Career Development

Children with Chronic Conditions

Community Pediatrics

Developmental and Behavioral Pediatrics

Developmental Biology

Diversity, Equity, and Inclusion

Environmental Health

General Pediatrics

Global Neonatal & Children's Health

Health Equity/Social Determinants of Health

Health Services Research

Medical Education

Neonatology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 None
- 6. If your session was presented at another conference, please describe the conference and presentation.

None else yet

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

8. Additional comments

This is a first attempt to joining PAS community by non-PAS members, therefore, the symposium proposal format that has been actively applied in other societies such as SOT, NeuroScience, ADA and AHA, may not be a perfect format to PAS society; however, once we join in, we can adapt ourselves and improve it able to fit into this society better and better.

9. Does this submission involve one or more specialties or disciplines?

Yes, this involves toxicology (both Drs. Kurt Zhang and Lu Cai have actively worked in the society of Toxicology (SOT), and both Drs. Barnes and Sears have actively worked in Neuroscience communities. Drs. Zhang and Lu also actively involves in American Heart and Diabetes Associations, respectively.

Presentation Titles and Durations

Metal Exposure of Prenatal Brain & Its Impact: Evidence from Epidemiological & Preclinical Studies in Developmental Disorders

Gregory N. Barnes, MD/PhD

Duration of Presentation in Minutes

18

Effects of environmental exposures on neurobehavioral health in children: Implications for neurodevelopmental disorders Lonnie Sears, PhD

Duration of Presentation in Minutes

18

Prenatal Exposure of Cadmium Induces Embryonic Heart Hypertrabeculation and Postnatal Ventricular Hypertrophy

Ke K. Zhang, Zhang, PhD

Duration of Presentation in Minutes

18

Maternal Exposure to Cadmium Exacerbates Post-Weaning Diet-Induced Liver Cancer in offspring

Lu Cai, MD, PhD

Duration of Presentation in Minutes

Novel approaches to pediatric viral vaccine development in the mRNA era - What's next in the pipeline?

Session Type: State of the Art Plenary

Submitter: Mark Schleiss

Participant(s)

1. SP

Sallie R. Permar, Permar, MD, PhD

Position:

Nancy C Paduano Professor and Chair of Pediatrics

Organization:

Weill Cornell Medicine

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR, PIDS

2. MS

Mark R. Schleiss, MD

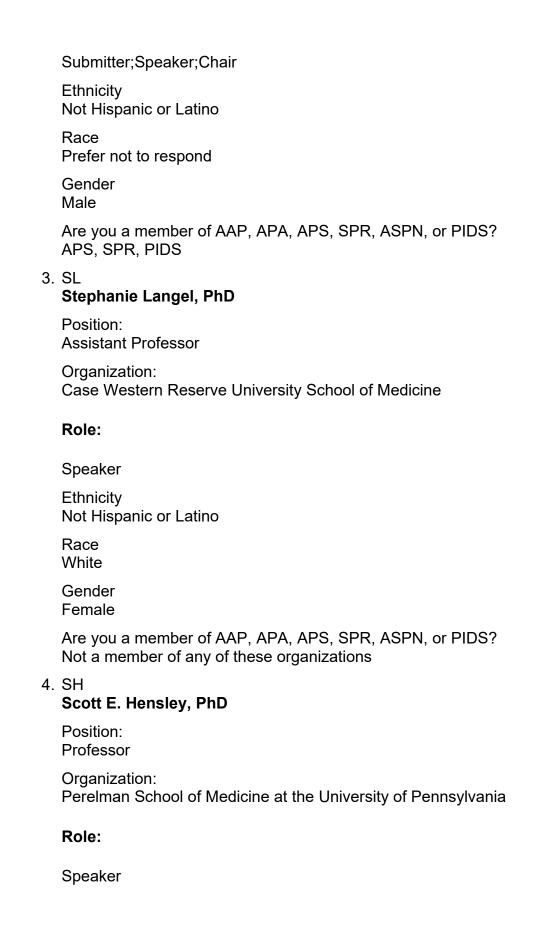
Position:

American Legion and Auxiliary Heart Research Foundation Professor

Organization:

UMN Medical School

Role:



Ethnicity Not Hispanic or Latino

Race White

Gender Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? PIDS

Session Description

Session Description

As we emerge from the COVID-19 pandemic, the landscape of pediatric vaccinology has been forever-changed by the advent of mRNA vaccines. Employment of this vaccine technology profoundly impacted SARS-CoV-2 disease, but what new vaccine technologies and approaches are "on the horizon"? In this state-of-the-art symposium, advances in pediatric vaccinology will be presented by NIH-funded bench/translational vaccine researchers. The focus of the symposium will be to demonstrate how the elucidation of enhanced knowledge of maternal and neonatal immunity has facilitated novel vaccine strategies that both include, and extend beyond, the mRNA landscape. Dr. Permar will discuss passive and active vaccine strategies that leverage emerging concepts on the immunology of the maternal-fetal interface and early life immunity, using HIV vaccines as a paradigm. Dr. Schleiss will present his laboratory's work defining protective maternal immune correlates against congenital CMV infection, emphasizing how this knowledge informs active CMV vaccine trials. Dr. Langel will present her data regarding mucosal maternal vaccination for generation of neutralizing slgA antibodies in breast milk as a potential vaccine against perinatally-acquired viruses. This approach, by boosting "lactogenic immunity" for breast-fed infants, represents a novel protective strategy during this window of great vulnerability. Dr. Hensley will present his laboratory's progress toward solving the long-standing problem of original antigenic sin" in influenza infection, toward the goal of a multivalent, "universal" mRNA-based vaccine. The symposium's overarching goal is to present new knowledge in vaccine immunology that will lead to novel viral vaccines for high-priority areas of unmet need for neonatal and childhood infections.

Learning Objectives

- 1. ...describe how advances in understanding the maternal-fetal immune interface and early life immunity informs novel vaccine design, including early-life immunization approaches for HIV and CMV.
- 2. ...explain the concept of "lactogenic immunity", and explain how mucosal immunization strategies could protect the nursing neonate against pathogens such as RSV, influenza, and norovirus.
- 3. ...recall the concept of "original antigenic sin", recognize how this complicates influenza vaccination, and describe a new, mRNA-based "universal" flu vaccine that obviates this concern.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

400

2. Target audience

Primary care pediatricians; infectious diseases physicians and immunologists; public health researchers; epidemiologists; neonatologists and those who care for newborns; breast milk researchers; immunization delivery researchers

3. Tracks

Allergy, Immunology and Rheumatology

Basic Science

Breastfeeding/Human Milk

COVID-19

General Pediatrics

Immunizations/Delivery

Infectious Diseases

Neonatology

Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 - 1. Avoid duplication with Pediatric Infectious Diseases Society (PIDS) programming sessions.
 - 2. Avoid overlap with Society for Pediatric Research/American Pediatric Society Presidential Plenary/Awards session.
 - 3. Avoid overlap with breastfeeding/human milk sessions.

- 6. If your session was presented at another conference, please describe the conference and presentation.
 - It has not previously been presented at any other conference.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic is Vaccinology, involving Pediatric and Neonatal Immunology, Breast-feeding and Human Milk, Infectious Diseases/Neonatal Infectious Diseases, and Public Health (Vaccines for Viral Infections of Pandemic Potential).

Presentation Titles and Durations

Leveraging early life immunity for long-term vaccine-mediated protection Sallie R. Permar, Permar, MD, PhD

Duration of Presentation in Minutes

20

In the on-deck circle: Is a vaccine against congenital cytomegalovirus (CMV) the next vaccine in the pipeline to be licensed?

Mark R. Schleiss. MD

Duration of Presentation in Minutes

20

Mucosal vaccine strategies targeted to the postpartum period: Boosting lactogenic immunity for suckling infants Stephanie Langel, PhD

Duration of Presentation in Minutes

20

Replacing original antigenic sin with the blessings of induced immunity: Development of a multivalent mRNA influenza vaccine Scott E. Hensley, PhD

Duration of Presentation in Minutes

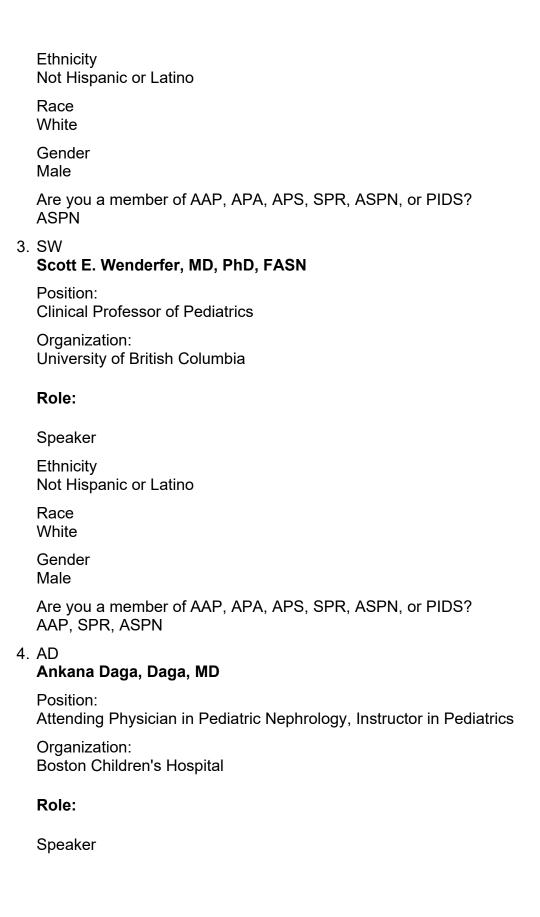
Clinical Advances in Lupus Nephritis - A New Age in Biologic Therapy

Session Type: Hot Topic Symposia

Submitter: Kimberly Reidy

Participant(s)

1. KR Kimberly J. Reidy, MD Position: Associate Professor Organization: Children's Hospital at Montefiore Role: Submitter Ethnicity Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? **ASPN** 2. JL Jerome C. Lane, MD Position: Associate Professor of Pediatrics Organization: Ann & Robert H. Lurie Children's Hospital of Chicago Role: Chair



	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN
5.	EC Ellen Cody, MD, MS
	Position: Assistant Professor
	Organization: Washington University in St. Louis
	Role:
	Chair
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
6.	DO Daryl Okamura, MD
	Position: Associate Professor
	Organization: Seattle Children's
	Role:
	Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR, ASPN

7. BG

Beatrice Goilay, MD

Position:

Associate Professor of Pediatrics

Organization:

The Children's Hospital at Montefiore

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR, ASPN

Session Description

Session Description

Brief Description of Overall Session: Discuss the advances in treatment of lupus nephritis specifically on T cell and B cell directed therapies for both induction and maintenance therapies. This session will provide updates on the cutting-edge research on lupus nephritis pathogenesis, recent clinical trials on biologic therapies, and future developments in treatment.

Topic/title: Do we really need cyclophosphamide?

Objective: Discuss the updates in lupus pathogenesis and the role of B cells. Provide an overview of non-cyclophosphamide containing regimens for induction and maintenance therapy. Discuss the indications for cyclophosphamide rather than MMF and Eurolupus vs NIH regimens.

Topic/title: Voclosporin and calcineurin inhibitors does it really improve outcomes in lupus nephritis?

Objective: Discuss the role of calcineurin inhibitors in the treatment of lupus nephritis. Discuss the difference between Voclosporin and other CNIs. Provide context for choosing CNIs for treatment compared to risk for nephrotoxicity.

Topic/title: Utility of Belimumab as a steroid sparing agent in lupus nephritis Objective: Discuss the role of Belimumab in lupus treatment and effect on reducing long term steroid exposure in lupus nephritis. Review the role of BAFF in lupus pathogenesis and the potential of combination therapy of Belimumab with B cell depletion.

Topic/title: B cell depletion, moving beyond Rituximab Objective: Discuss the effects of depletion of circulating and tissue B cells on lupus. Discuss recent clinical trials on B cell depleting agents such as Obinutuzumab, Rituximab/Obinutuzumab, and the potential for CAR T cell B cell depletion for lupus treatment. Discuss the risk for hypogammaglobulinemia after B cell depletion.

Learning Objectives

- 1. Understand evidence based approaches to management of lupus nephritis.
- 2. Recognize risks of agents used in treatment of lupus nephritis.
- 3. Describe new therapeutic options for treatment of lupus nephritis.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50-100

2. Target audience

Pediatric nephrologists, rheumatologist early, mid and later stage career

3. Tracks

Allergy, Immunology and Rheumatology Nephrology Pharmacology and Therapeutics

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

 other ASPN content
- 6. If your session was presented at another conference, please describe the conference and presentation.

 n/a
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments n/a
- Does this submission involve one or more specialties or disciplines?
 Rheumatology and Nephrology

Presentation Titles and Durations

Do we really need cyclophosphamide? Scott E. Wenderfer, MD, PhD, FASN **Duration of Presentation in Minutes**

20

Voclosporin and calcineurin inhibitors: Do they really improve outcomes in lupus nephritis?

Ankana Daga, Daga, MD

Duration of Presentation in Minutes

20

Utility of Belimumab as a steroid sparing agent in lupus nephritis Daryl Okamura, MD

Duration of Presentation in Minutes

20

B cell depletion, moving beyond Rituximab Beatrice Goilav, MD

Duration of Presentation in Minutes

Moving Beyond Weight, Length, and Head Circumference: Advances in Infant Nutritional Assessment

Session Type: Hot Topic Symposia

Submitter: Sarah Taylor

Participant(s)

1. MB

Mandy B. Belfort, MD, MPH

Position:

Associate Professor of Pediatrics

Organization:

Harvard Medical School

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR

2. CB

Catherine O. Buck, MD

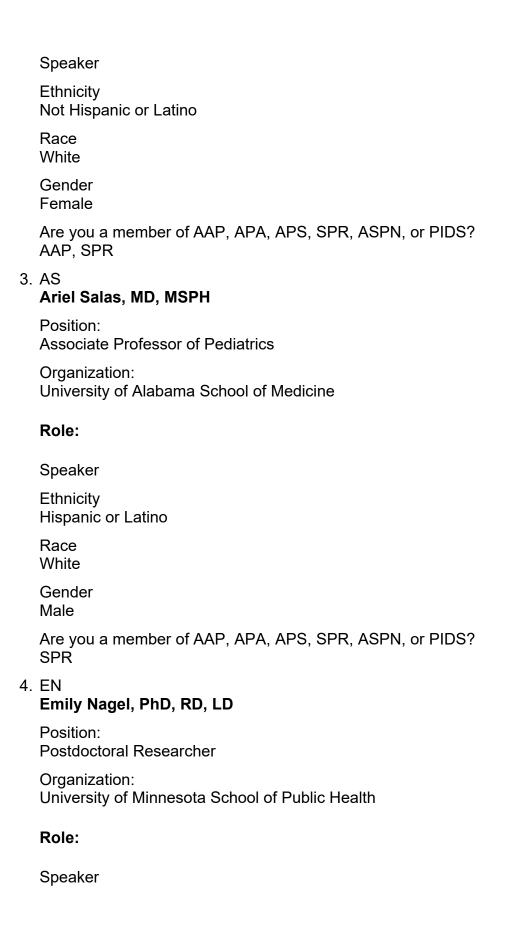
Position:

Assistant Professor of Pediatrics

Organization:

Yale School of Medicine

Role:



	Not Hispanic or Latino
	Race Asian
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
5.	KB Katherine Bell, MD
	Position: Attending Neonatologist; Instructor of Pediatrics
	Organization: Brigham and Womens's Hospital; Harvard Medical School
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR $$
6.	ST Sarah N. Taylor, MD, MSCR
	Position: Professor
	Organization: Yale University
	Role:
	Submitter;Speaker;Chair

Ethnicity

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

Preterm infant growth is essential for neurodevelopment yet the interplay of dietary and non-dietary factors in influencing these outcomes remains poorly understood. Accurate, specific, and dynamic assessment of nutritional status is needed to identify the ideal growth pattern and diet to maximize brain maturation during a critical period while minimizing future metabolic health risk. Neonatal nutrition research is now expanding beyond anthropometrics and applying innovative approaches to assess body composition among newly born and growing infants. The concepts and tools from the field of body composition assessment are highly relevant to research aimed at establishing dietary recommendations for nutritionally vulnerable populations of newborn infants, as well as to the clinical practice of caring for these infants. Chaired by Drs. Mandy Belfort and Sarah Taylor, this hot topic symposium will highlight exciting work being performed by outstanding early career investigators. Pioneering research approaches will be presented by Dr. Caty Buck from Yale School of Medicine, Dr. Emily Nagel from the University of Minnesota, Dr. Ariel Salas from the University of Alabama Birmingham, and Dr. Katherine Bell from Brigham and Women's Hospital and Harvard Medical School. These investigators will highlight how their discoveries apply to establishing best practices in nutritional care and assessment early in the lifecourse, with the opportunity for lasting impact on health and development.

Learning Objectives

- 1. Upon completion, participants will be able to determine the current evidence regarding infant nutritional assessment tools.
- 2. Upon completion, participants will be able to describe the influence of body composition on infant outcomes.

3. Upon completion, participants will be able to describe how research-based nutritional assessments will soon be available for clinical use.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200

2. Target audience

neonatologists, pediatric gastroenterology, trainees, clinical researchers, nutrition researchers, lactation scientists

3. Tracks

Breastfeeding/Human Milk

Clinical Research

Gastroenterology/Hepatology

General Pediatrics

Health Equity/Social Determinants of Health

Neonatology

Pediatric Nutrition

Well Newborn

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

 Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 milk club, nutrition or human milk platform sessions, nutrition and metabolism club
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Addressing & Overcoming Racism in Clinical Care and Research Science is Real: Research, Misinformation and Trust

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Nutrition, Neonatal medicine, and general pediatrics

Presentation Titles and Durations

Duration of Presentation in Minutes

10

Identifying markers of preterm infant metabolic health risk Catherine O. Buck, MD

Duration of Presentation in Minutes

15

Body composition as primary outcome in neonatal clinical trials Ariel Salas, MD, MSPH

Duration of Presentation in Minutes

15

Exploring associations between maternal stress and infant outcomes Emily Nagel, PhD, RD, LD

Duration of Presentation in Minutes

15

Advancing the Clinical Utility of Body Composition Measurement in Infancy: How we translate research tools into clinical care Katherine Bell, MD

Duration of Presentation in Minutes

15

Panel Question and Answer Session Sarah N. Taylor, MD, MSCR **Duration of Presentation in Minutes** 20

Promoting Health Equity and Advancing Child Health Through Cash Transfers

Session Type: Hot Topic Symposia

Submitter: Zoe Bouchelle

Participant(s)

1. ZB

Zoe Bouchelle, MD

Position:

Pediatrician

Organization:

Children's Hospital of Philadelphia

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

2. GD

George Dalembert, MD, MSHP

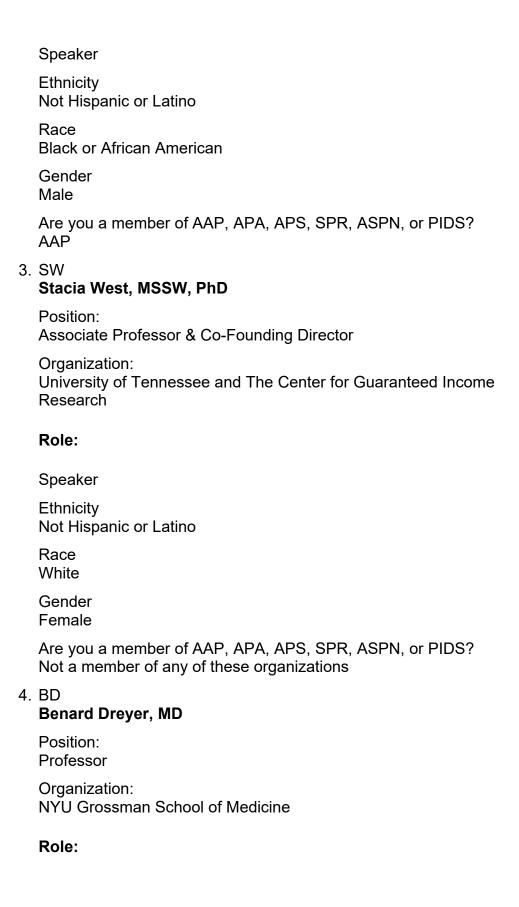
Position:

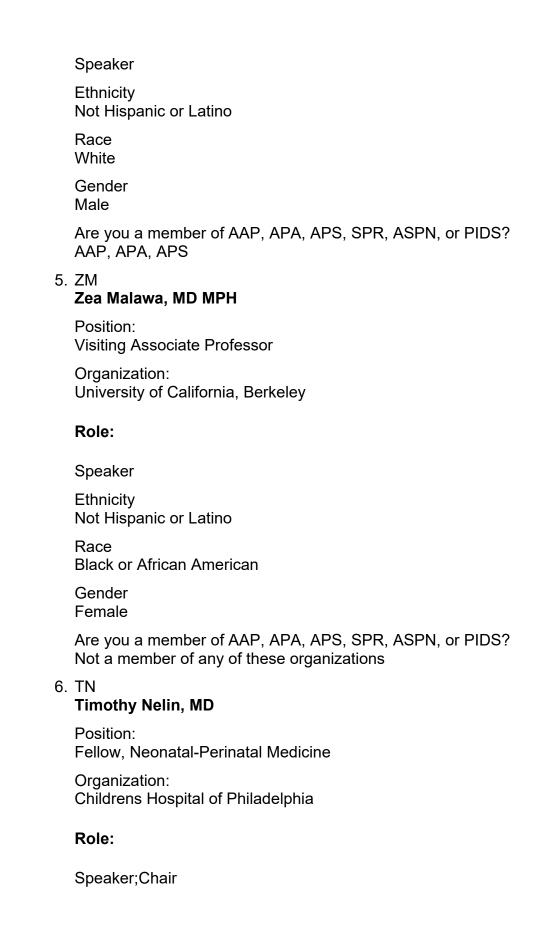
Asst Prof of Clinical Pediatrics

Organization:

Children's Hospital of Philadelphia

Role:





Ethnicity
Not Hispanic or Latino

Race White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

In the U.S., nearly 1 in 6 kids live in families with incomes below the poverty line, and a disproportionate number of Black, American Indiian, and Latino kids grow up in poverty. While current safety net programs succeed in reducing the burden of child poverty, the U.S. continues to have one of the highest child poverty rates among industrialized nations. Because exposure to poverty during childhood is associated with adverse health outcomes3, there is an urgent need to explore alternative strategies to reduce child poverty and its negative downstream impacts.

Unconditional cash transfers represent one such alternative strategy. There is growing public support and political momentum for cash transfer interventions, driven by the economic hardship experienced by many households during the pandemic and increasing recognition of the pervasive impacts of racism on household economic stability and mobility. There is also growing academic interest in examining the causal impact of boosts in income on child health, which has clear implications for public policy.

Drawing on historic and emerging literature and the expertise of our multidisciplinary team, we will present an engaging, interactive discussion at the intersection of unconditional cash transfers and pediatrics. In this hot topic session, we will (1) review the historical evidence base on child poverty and health, (2) examine emerging experimental and quasi-experimental evidence on the impact of boosts in income on child health, and (3) discuss the research and policy landscape for cash transfers as a tool to advance child health and promote health equity.

Learning Objectives

- 1. Synthesize the historical evidence base on child poverty and health.
- 2. Evaluate emerging experimental and quasi-experimental evidence on the impact of boosts in income on child health.
- 3. Examine the research and policy landscape for cash transfers as a tool to advance child health and promote health equity.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200-400

2. Target audience

Pediatric researchers, clinicians, and learners with an interest in health equity, social determinants of health, and family-centered approaches to assess and address structural social and racial inequality and the unmet social and financial needs of families.

3. Tracks

Community Pediatrics

Diversity, Equity, and Inclusion

General Pediatrics

Health Equity/Social Determinants of Health

Health Services Research

Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

We would like to avoid times when other Health Equity / Social Determinants of Health sessions are scheduled.

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

Zoe Bouchelle, MD **Duration of Presentation in Minutes**12

Historical Evidence Linking Poverty to Child Health George Dalembert, MD, MSHP **Duration of Presentation in Minutes** 12

The Case for Unconditional Cash Transfer Research and Policy Stacia West, MSSW, PhD **Duration of Presentation in Minutes**12

Emerging Evidence on Cash Transfers and Child Health Benard Dreyer, MD **Duration of Presentation in Minutes** 12

Cash Transfers to Promote Birth Equity Zea Malawa, MD MPH **Duration of Presentation in Minutes** 12

Question and Answers Timothy Nelin, MD **Duration of Presentation in Minutes** 30

The Adolescent Opioid Overdose Epidemic - Addressing the Crisis from Clinic and Beyond

Session Type: Hot Topic Symposia

Submitter: Andrew Terranella

Participant(s)

1. AT

Andrew Terranella, MD MPH FAAP

Position:

Medical Epidemiologist

Organization:

Centers for Disease Control and Prevention, Division of Overdose Prevention

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. SH

Scott E. Hadland, MD, MPH, MS

Position:

Division Chief

Organization:

Massachusetts General Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

3. SB

Sarah Bagley, MD, MSc

Position:

Assistant Professor of Medicine and Pediatrics

Organization:

Boston University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

Session Description

Session Description

Drug overdose mortality among adolescents in the United States has increased in recent years, driven by overdoses involving illicitly-manufactured fentanyl and psychostimulants. Prevalence of opioid use disorder (OUD) remains high, and overdoses involving fentanyl and synthetic opioids more than tripled from

2019-2021 alone. Treatment with medications for OUD (MOUD) can reduce risk of overdose, and the American Academy of Pediatrics and other professional organizations have recommended MOUD and routine screening for substance use in primary care. However, screening and treatment for adolescents have been underutilized. Understanding the overdose epidemic as well as evidence-based prevention, screening and treatment recommendations are crucial for pediatricians and adolescent-serving clinicians' ability to identify at-risk youth and link them to appropriate care.

This panel will share approaches to addressing OUD and preventing overdose in adolescents. The first presentation will provide an overview of the epidemiology of illicit use of opioids and overdose in the US and review the Center for Disease Control and Prevention's strategic priorities for overdose prevention. The second presentation will provide a clinical approach to preventing OUD in adolescents, including an overview of safe opioid prescribing and early detection of substance use disorders through the American Academy of Pediatrics-recommended strategy of screening, brief intervention, and referral to treatment. The final presentation will provide an overview of evidence-based OUD treatment in adolescents, including use of medications for OUD, behavioral health approaches, harm reduction, and stigma reduction in primary care practice.

Learning Objectives

- Describe the epidemiology of adolescent opioid overdose in the US and how health systems can address OUD and overdose in youth in their communities.
- 2. Implement at least one treatment, harm reduction, or behavioral health intervention in a primary care clinic to reduce the risk of overdose in their patients.
- 3. Understand how stigma affects access to substance use care for adolescents, and recognize and reduce stigmatizing language and behaviors in their own practices.

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

200

2. Target audience

General pediatricians, substance use and addiction medicine specialists, behavioral health specialists, public health practitioners.

3. Tracks

Adolescent Medicine Community Pediatrics General Pediatrics Injury Prevention Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Opioid use epidemiology

Substance use or addiction prevention and treatment Overdose prevention and harm reduction

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments

All presentations will 25 minutes in length. We intend to begin with a 5 minute introduction from Dr. Terranella and will conclude with at 10 minute Q&A session for all presenters, moderated by Dr. Terranella. The platform does not allow us to enter this in the presentation title section as we were instructed. Our apologies.

9. Does this submission involve one or more specialties or disciplines?

Topic is opioid use disorder involving general pediatrics/primary care, addiction medicine, public health and behavioral health.

Presentation Titles and Durations

Public health approaches to opioid use disorder and overdose prevention in adolescents

Andrew Terranella, MD MPH FAAP

Duration of Presentation in Minutes

30

Pediatric primary care-based prevention, screening and referral for youth with opioid use disorders

Scott E. Hadland, MD, MPH, MS

Duration of Presentation in Minutes

25

Integrating treatment for opioid use disorder and overdose prevention in pediatric primary care
Sarah Bagley, MD, MSc

Duration of Presentation in Minutes
35

Born Without Functioning Kidneys; Navigating the Complexities of Care for Infants Born with Severe CAKUT

Session Type: Hot Topic Symposia

Submitter: Kimberly Reidy

Participant(s)

1. KR

Kimberly J. Reidy, MD

Position:

Associate Professor

Organization:

Children's Hospital at Montefiore

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN

2. JM

Jena L. MILLER, MD

Position:

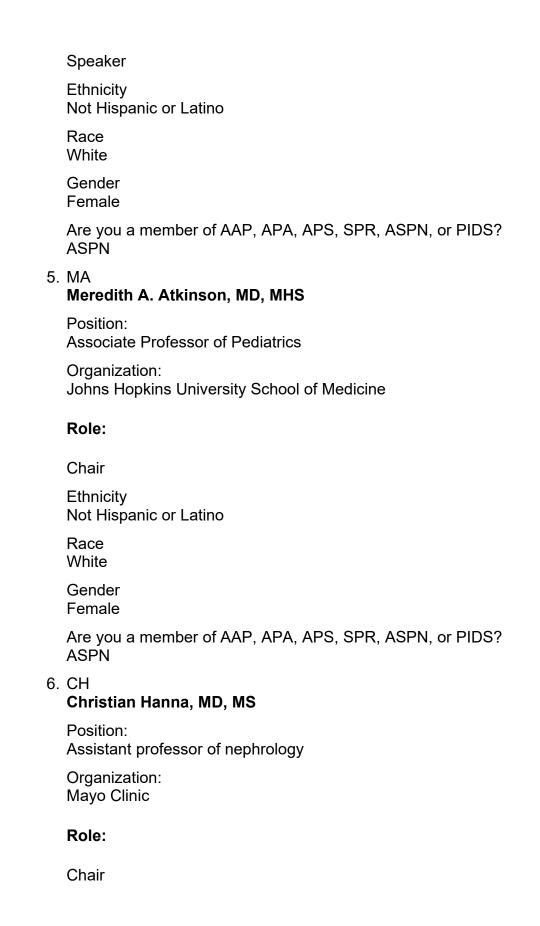
Assistant Professor

Organization:

Johns Hopkins University

Role:

	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
3.	MK Mahima Keswani, Keswani, MD
	Position: Assistant Professor of Pediatrics; Division of Pediatric Nephrology
	Organization: Ann and Robert H. Lurie Childrens Hospital of Chicago; Northwestern Medicine
	Role:
	Speaker
	Ethnicity Prefer not to respond
	Race Prefer not to respond
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
4.	DC Donna J. Claes, Claes, MD, MS, BS Pharmacy
	Position: Associate Professor
	Organization: University of Cincinnati College of Medicine
	Role:



Ethnicity Not Hispanic or Latino

Race White

Gender Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, ASPN

Session Description

Session Description

The goal of this session is to introduce and discuss the complexities of caring for patients with severe congenital anomalies of the kidneys and urinary tract from prenatal diagnosis and possible intervention, through the peri-natal period, and concluding potential long-term sequelae and goals. The session will include discussion of the ethics of fetal surgical interventions for potentially fatal fetal diagnoses, as well as the ethics surrounding offering dialysis to small and premature neonates, advances in neonatal and infant dialysis, and longitudinal care of survivors of neonatal dialysis.

Topic/title: The Complexities of Prenatal Ethical Considerations for Fetuses and Infants with Severe CAKUT Diagnoses and their Caregivers Objective: Discuss Complex ethics of offering pre-natal fetal surgical interventions and dialysis to newborns or fetuses expected to be born with kidney failure.

Topic/title: Prenatal Interventions for Fetuses with Severe CAKUT Diagnoses Objective: Discussion of fetal surgical and medical options for fetuses with severe CAKUT diagnoses. Provide review of prenatal options for biomarker studies. Provide review of RAFT trial.

Topic/title: Advances in Acute Neonatal and Infant Dialysis
Objective: Review and discuss advances in CRRT (CarpeDiem/Aquadex
versus conventional CVVHDF) and peritoneal dialysis in premature and term
neonates requiring dialysis. Review of long/short term outcomes and risk for
associated complications.

Topic/title: Survival, Morbidity and Mortality as a Result of (Heroic) Fetal and Neonatal Intervention

Objective: Discuss clinical, psychosocial, and societal sequelae of fetal and neonatal interventions for severe congenital anomalies of the kidneys and urinary tract. What have the last 30 years taught us?

Learning Objectives

- 1. 1. Understand ethical consideration surrounding decisions of prenatal and postnatal intervention for severe CAKUT.
- 2. 2. Describe fetal surgical and medical interventions for severe CAKUT.
- 3. 3. Explain benefits and risks of various forms of neonatal kidney replacement therapy for children with severe CAKUT.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200

2. Target audience

Early, Mid and Late Career

Nephrologists, neonatologist, ethicists, palliative care

3. Tracks

Critical Care

Neonatology

Nephrology

Palliative Care

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

 other ASPN content
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Neonatology and Nephrology

Presentation Titles and Durations

Prenatal Interventions for Fetuses with Severe CAKUT Diagnoses Jena L. MILLER, MD

Duration of Presentation in Minutes

20

Advances in Acute Neonatal and Infant Dialysis Mahima Keswani, Keswani, MD **Duration of Presentation in Minutes** 20

Survival, Morbidity and Mortality as a Result of (Heroic) Fetal and Neonatal Intervention

Donna J. Claes, Claes, MD, MS, BS Pharmacy

Duration of Presentation in Minutes

20

Policy Responses to Child Health Challenges in a Post-Pandemic World: A Pediatric Policy Council State of the Art Plenary

Session Type: State of the Art Plenary

Submitter: Matthew Mariani

Participant(s)

1. MM

Matthew S. Mariani

Position:

N/A

Organization:

Pediatric Policy Council

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. SS

Shetal Shah, Shah, MD

Position:

Clinical Professor of Pediatrics

Organization:

New York Medical College

Role:

Speaker; Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

Session Description

Session Description

Children have faced numerous challenges throughout the COVID-19 pandemic, from extended periods of social isolation to missed well-child visits. Clinical experience and data show that children have fallen behind on a number of important measures. An ongoing youth mental health crisis is impacting countless young people, with clinicians reporting soaring rates of depression, anxiety, trauma, loneliness, and suicidality in the patients they treat. This national emergency calls for bold, comprehensive action from policymakers. Routine childhood immunization rates remain below prepandemic levels, increasing the risk of vaccine preventable illness for unvaccinated children and the community at large. As the country continues the transition to a post-pandemic normal, it is a critical moment to grapple with the impacts of the last three years on child health and to identify public policy interventions that can bolster children's well-being for years to come. Federal programs like Medicaid and the Vaccines for Children program play an important role in addressing the issues facing young people, and advocacy is needed to ensure these programs remain responsive to their needs. Join the Pediatric Policy Council to learn about the challenges facing young people in a post-pandemic world and the public policy supports that can help them thrive, now and into adulthood.

Learning Objectives

- 1. Describe the challenges facing children in the wake of the COVID-19 pandemic.
- 2. Describe the key public policy decisions influencing child health in the coming year that will help address child health deficits.

3. Engage in in dialogue about the role of pediatric academicians in advocating for child health policies.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100-150

2. Target audience

Pediatric research and child health advocates

3. Tracks

Advocacy

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 If possible, please avoid conflicting with other advocacy-focused sessions.
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments

We plan to have a 5-minute introduction, 3 20-minute talks, and a 25-minute panel discussion with all 3 speakers, moderated by our session chair. Speakers will be identified in the coming months and communicated to PAS staff.

9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

Welcome and Introduction Shetal Shah, Shah, MD

Duration of Presentation in Minutes

The Dobbs Decision: How Will It Impact Children and Pediatric Practice?

Session Type: Hot Topic Symposia

Submitter: David Keller

Participant(s)

Chair

1. DK David M. Keller, Keller, MD Position: **Professor of Pediatrics** Organization: University of Colorado School of Medicine Role: Submitter; Chair Ethnicity Not Hispanic or Latino Race White Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS 2. SB Susan S. Baker, MD, PhD Position: Professor Organization: University at Buffalo Role:

	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS
3.	NC Naomi Cahn, Cahn, J.D., LL.M.
	Position: Professor
	Organization: University of Virginia School of Law
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
4.	SL Scott A. Lorch, MD, MSCE
	Position: Professor of Pediatrics
	Organization: The Children's Hospital of Philadelphia, University of Pennsylvania School of Medicine
	Role:
	Speaker

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Ethnicity
  Not Hispanic or Latino
  Race
  Asian, White
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, APS, SPR
5. CG
  Catherine M. Gordon, MD, MS, MD, MS
  Position:
  Professor of Pediatrics
  Organization:
  Baylor College of Medicine
  Role:
  Speaker
  Ethnicity
  Not Hispanic or Latino
  Race
  White
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, APS, SPR
6. TC
  Tamera Coyne-Beasley, Coyne-Beasley, MD, MPH
  Position:
  Vice-Chair, Pediatrics; Endowed Chair Adolescent Medicine; Division
  Director, Adolescent Medicine
  Organization:
  University of Alabama at Birmingham
  Role:
  Speaker
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Ethnicity Not Hispanic or Latino

Race

Black or African American

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS

Session Description

Session Description

In 2022, the Supreme Court's decision in Dobbs v. Jackson Women's Health System upended 50 years of legal precedents, with important implications for many aspects of the health care of children and youth. Drs. Keller and Baker will moderate the panel which will outline the legal implications of the Dobbs decision and discuss how changes in the law will likely impact practice for our youngest and oldest patients. Professor Naomi Cahn of the University of Virginia Law School will open by outlining the basics of Dobbs decision, the ways in which Dobbs has been applied in different parts of the country, impacting everything from in vitro fertilization to parental notification. Dr. Lorch will then delve into ways in which pediatricians and neonatologists have or will need to change their practice as a result of the rapidly changing legal framework. Finally, Drs.Gordon and Coyne-Beasley will discuss the profound impact of Dobbs on the practice of adolescent medicine. Following the presentations, we will engage in questions within the panel and with the audience.

Learning Objectives

- 1. Explain 3 ways in which the Supreme Court's decision in Dobbs v. Jackson has changed the legal framework for women's reproductive health services.
- 2. Discuss the implications of the Dobbs decision on practice in the delivery room, nursery and NICU.
- 3. Discuss the ways in which practitioners may have to alter practice in their care of adolescent patients because of the Dobbs decision.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

300

2. Target audience

All practitioners and participants with an interest in health policy.

3. Tracks

Adolescent Medicine

Advocacy

Community Pediatrics

General Pediatrics

Health Equity/Social Determinants of Health

Neonatology

Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. PPC sessions
- 6. If your session was presented at another conference, please describe the conference and presentation.

This was presented as a APS Webinar in October 2022, reaching a reasonably wide audience. It was felt that the issue will remain timely, and will have evolved somewhat by the time of the PAS in Woashington DC.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Neonatology and Adolescent Medicine

Presentation Titles and Durations

What is the Dobbs decision, and how does it change the �settled law�? Naomi Cahn, Cahn, J.D., LL.M.

Duration of Presentation in Minutes

15

What are the likely implications for infant and maternal care and mortality? Scott A. Lorch, MD, MSCE

Duration of Presentation in Minutes

15

What are the likely implications for adolescent medicine practice? (Part 1) Catherine M. Gordon, MD, MS, MD, MS **Duration of Presentation in Minutes**15

What are the likely implications for adolescent medicine practice? (Part 2) Tamera Coyne-Beasley, Coyne-Beasley, MD, MPH **Duration of Presentation in Minutes** 15

Toxins in the Foods that Children Eat and the Air that they Breathe

Session Type: State of the Art Plenary

Submitter: Ruth Etzel

Participant(s)

1. RE Ruth A. Etzel, MD, PhD Position: Professor Organization: George Washington University Milken Institute School of Public Health Role: Submitter; Speaker; Chair Ethnicity Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? **AAP** 2. JG John Groopman, PhD Position: Professor Organization: Johns Hopkins University Role: Speaker

	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
3.	FW Felicia Wu, Wu, PhD
	Position: John A. Hannah Distinguished Professor
	Organization: Michigan State University
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
4.	PT Paul Turner, PhD
	Paul Turner, PhD Position:
	Associate Prof
	Organization: UMD School of Public Health
	Role:
	Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Throughout the world, parents are concerned about the presence of toxins in the foods that their children eat as well as in the air that they breathe. Elevated levels of toxins in corn, cereals, nuts, milk, juice and eggs pose a public health problem, especially in low-income countries and in the rural areas of some middle- and high-income countries. This session will describe some of the adverse effects of exposure to these toxins on health, including problems such as delayed growth and development, reduced immune responses, seizures, respiratory problems, and liver cancer.

Learning Objectives

- 1. list some toxins in corn, cereals, nuts, milk, juice and eggs that pose public health problems
- 2. identify major child health impacts of exposures to these toxins
- 3. list ways to prevent children's exposures to toxins in food and air

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200

2. Target audience

General pediatricians, community pediatricians, researchers interested in global health, oncology, immunology, and infectious diseases

3. Tracks

Allergy, Immunology and Rheumatology Community Pediatrics Developmental and Behavioral Pediatrics Environmental Health Epidemiology Gastroenterology/Hepatology Global Neonatal & Children's Health Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Environmental Health Platform session, Environmental Health Poster Session, APA SIG on Environmental Health and Climate Change
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? The Impact of Policies on Health and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Oncology, Immunology, Public Health, Environmental Health

Presentation Titles and Durations

Introduction
Ruth A. Etzel, MD, PhD **Duration of Presentation in Minutes**2

The impact of exposures to aflatoxins on child health John Groopman, PhD

Duration of Presentation in Minutes

Impact of exposures to mycotoxins in foods on child health Felicia Wu, Wu, PhD

Duration of Presentation in Minutes

28

Exposures to fumonisins and deoxynivalenol in foods and child health Paul Turner, PhD

Duration of Presentation in Minutes

28

ADVANCE-d skills for a modern leadership mindset for equity in

pediatrics: Why we must EVOLVE

Session Type: Hot Topic Symposia

Submitter: Jennifer O'Toole

Participant(s)

1. JO

Jennifer O'Toole, MD, MEd

Position:

Professor of Pediatrics and Internal Medicine

Organization:

Cincinnati Children's Hospital Medical Center | University of Cincinnati College of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS

2. NS

Neha H. Shah, MD, MPH

Position:

Associate Professor of Pediatrics

Organization:

Children's National Hospital

Role:

	Speaker
	Ethnicity Prefer not to respond
	Race Asian
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA
3.	∨M Vineeta Mittal, MD MBA
	Position: Professor of Pediatrics, Division Chief Pediatric Hospital Medicine,
	Organization: UT Southwestern Medical Center & Children's Health Dallas TX
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP
4.	NS Nancy D. Spector, MD
	Position: Professor of Pediatrics
	Organization: Drexel University College of Medicine
	Role:
	Speaker

Ethnicity
Not Hispanic or Latino

Race White

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR

Session Description

Session Description

While the various disparities that exist in medicine are well known, changing culture, systems, and policies to alleviate these inequities has been slow. As advocates for child health and a specialty that is comprised of 2/3rds women, pediatricians are uniquely positioned to become agents for change that lead efforts to promote equity in medicine. However, leading change and breaking down infrastructures that have promoted inequity and disparities is challenging. During this highly interactive and informative symposium, attendees be introduced to the concept of modern leadership and its inherent focus on diversity and inclusion, which when coupled with adaptability, restraint, collaboration, morale building, transparency, and courage, can be transformative in promoting equity in our healthcare ecosystems. After comparing and contrasting modern and traditional leadership, we will begin to explore some common scenarios modern leaders face, including identifying and mitigating inequities, developing one's influence, leading up and stimulating change, navigating challenges and setback, and building one's collaborative network. As we explore some of these common scenarios we will utilize think-pair-share and large group discussion exercises to discuss key skillsets one must cultivate as they hone their modern leadership style. Wrapping up the symposium we will include an innovative reflection exercise where attendees evaluate their current leadership style and skillset, and then set SMART goals on how they can become a modern leader for equity and alleviate disparities in medicine. While the content will be focused on those with some previous leadership experience, all are welcome to attend regardless of their experience level.

Learning Objectives

1. Discuss the difference between traditional and modern leadership

- 2. Explore some common scenarios modern leaders face as they strive to promote equity and break down infrastructures of discrimination
- 3. Identify how to evolve their own leadership style to become a modern leader for equity and alleviate disparities in medicine.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

Mid to late-career faculty with leadership experience that have a strong interest in becoming modern leaders for equity in medicine. While the content will be focused on those with some previous leadership experience, all are welcome to attend regardless of their experience level.

3. Tracks

Diversity, Equity, and Inclusion Leadership and Business Training

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Sunday, April 30
 - Monday, May 1
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 None
- 6. If your session was presented at another conference, please describe the conference and presentation.

A longer version of this content was presented at the ADVANCE PHM Gender Equity Symposium 2023 that was in conjunction with the 2022 PHM Meeting. (https://www.advancephm.org/2022-advance-gender-equity-symposium) Over 35 individuals attended this symposium and evaluations from this symposium were very positive.

- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?
 - Addressing & Overcoming Racism in Clinical Care and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Division directors, chairs, education program or clerkship directors

Presentation Titles and Durations

Common scenarios faced by modern leaders in medicine: Identifying and mitigating inequities; Building your network: Q&A Jennifer O'Toole, MD, MEd

Duration of Presentation in Minutes

25

What is modern leadership? How is it different from traditional leadership? What do I need to do to become a modern leader? Neha H. Shah, MD, MPH

Duration of Presentation in Minutes

35

Common scenarios faced by modern leaders in medicine: Developing one's influence

Vineeta Mittal, MD MBA

Duration of Presentation in Minutes

15

Common scenarios faced by modern leaders in medicine: Leading up and stimulating change; Navigating challenges and setbacks Nancy D. Spector, MD

Duration of Presentation in Minutes

15

No Time to Lues: A Call to Arms Amidst a Congenital Syphilis Epidemic

Session Type: Hot Topic Symposia

Submitter: Ryan Rochat

Participant(s)

1. RR Ryan H. Rochat, MD, PhD, MS Position: Assistant Professor Organization: **Baylor College of Medicine** Role: Submitter; Speaker; Chair Ethnicity Not Hispanic or Latino Race White Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, PIDS 2. SW Sarah Wondmeneh, MD, MPH Position: **Epidemic Intelligence Service Officer** Organization: CDC Role: Speaker

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Ethnicity
  Not Hispanic or Latino
  Race
  Black or African American
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  Not a member of any of these organizations
3. IS
  Irene Stafford, Stafford, MD, MS
  Position:
  Associate Professor
  Organization:
  Irene Stafford
  Role:
  Speaker
  Ethnicity
  Not Hispanic or Latino
  Race
  White
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  Not a member of any of these organizations
4. PP
  Pablo J. Pablo Sanchez, MD
  Position:
  Professor of Pediatrics
  Organization:
  Nationwide Children's Hospital -OSU
  Role:
  Speaker; Chair
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Ethnicity

Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR, PIDS

5. KH

Katherine K. Hsu, Hsu, MD, MPH

Position:

Medical Director / Professor of Pediatrics

Organization:

Mass Dept of Pub Health / Boston Univ Med Ctr

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, PIDS

Session Description

Session Description

Congenital syphilis (CS) is a chronic infection acquired by the fetus during pregnancy from a mother infected with Treponema palladium. It has a large spectrum of disease manifestations, from asymptomatic infection to blindness, abnormal bone and teeth formation, deafness, or even death. Despite having a safe and effective treatment for syphilis, cases in the US have reached levels not seen since the 1940s. Unfortunately, as cases have risen in the

reproductive population, so have cases of CS which are up nearly 200% over 4 years from 2017 to 2021. Given this resurgence, there is a need to galvanize our approach to management of this congenital infection, a undertaking that hinges on multidisciplinary education (i.e. OBGYN, neonatology, infectious disease, and primary care providers). In this session we will cover the following topics: the epidemiology of syphilis past and present, laboratory testing to detect syphilis and the role of testing in conventional and reverse algorithms, prenatal care in the prevention of CS, management of CS in the newborn, and preventing CS through statewide health policy. In this Hot-Topic session we hope to cover some of the convoluted aspects of syphilis testing and how test performance and interpretation can lead to misdiagnosis in CS, while highlighting how social determinants of health play a significant role in acquiring this congenital infection. Our planned speakers represent the fields of OBGYN, Neonatology, Pediatrics, and Infectious Disease, and include insights from the CDC and Health Departments who have seen success in mitigating this congenital infection.

Learning Objectives

- Review the epidemiology, prevention, and pathogenesis of syphilis, with a focus on how social determinants of health contribute to this congenital infection
- 2. Discuss the management and complications of perinatal infections with Treponema pallidum
- Recognize limitations with current testing strategies and their effect on the interpretation of algorithms for evaluation and treatment of congenital syphilis.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100-150

2. Target audience

Neonatologist, Hospitalists, Primary Care and Community Providers, Epidemiologists

3. Tracks

Adolescent Medicine
Epidemiology
Health Equity/Social Determinants of Health
Hospital Medicine
Infectious Diseases
Neonatology

Public Health Well Newborn

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 NA
- If your session was presented at another conference, please describe the conference and presentation.
 Not presented
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 The Impact of Policies on Health and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Yes, as the topic is congenital syphilis we have representation from: OBGYN, Neonatology, Pediatrics, Pediatric Infectious Diseases, with input from Academia, Health Departments, and the CDC

Presentation Titles and Durations

Epidemiology of syphilis past and present: Insights into a resurgence Ryan H. Rochat, MD, PhD, MS

Duration of Presentation in Minutes

15

Laboratory testing to detect treponema pallidum infection: A paradox of choice Sarah Wondmeneh, MD, MPH

Duration of Presentation in Minutes

20

Prenatal care and the prevention of congenital syphilis: See one, screen one, treat one

Irene Stafford, Stafford, MD, MS

Duration of Presentation in Minutes

20

Management of congenital syphilis: Follow the Yellow Brick Road? Pablo J. Pablo Sanchez, MD

Duration of Presentation in Minutes

15

Preventing congenital syphilis through statewide health policy: An ounce of prevention and a pound of cure

Katherine K. Hsu, Hsu, MD, MPH **Duration of Presentation in Minutes** 15

Developing a DEI Framework at a Children's Hospital

Session Type: Hot Topic Symposia

Submitter: Melissa Santos

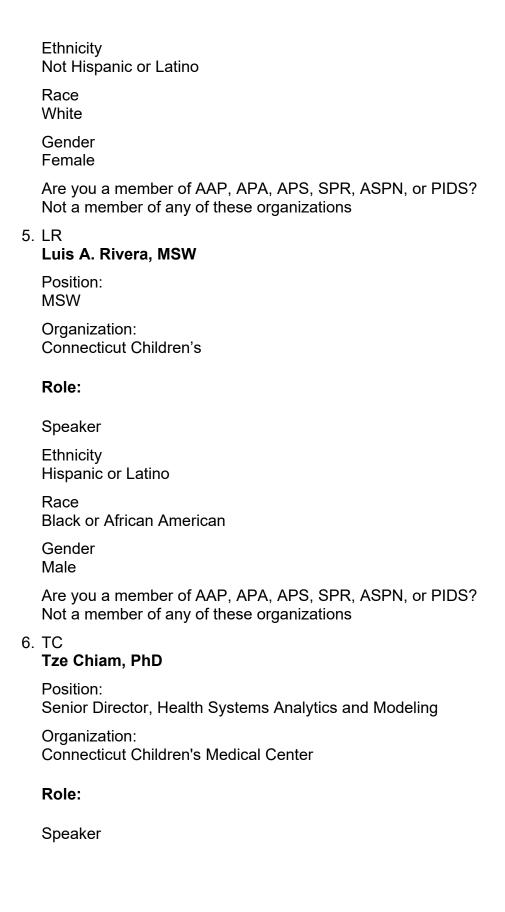
Participant(s)

Role:

Speaker

1. MS Melissa Santos, PhD Position: Associate Chair for Diversity, Equity and Inclusion Organization: CT Children's Role: Submitter; Speaker; Chair Ethnicity Not Hispanic or Latino Race White Gender **Female** Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? **AAP** 2. LM Lisa Marella, BS Position: Sr. Director - Organization Effectiveness, Learning, & Culture Organization: Connecticut Children's

	Ethnicity Prefer not to respond
	Race Prefer not to respond
	Gender Prefer not to respond
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
3.	NC Nicole Cartier
	Position: HR Project & Communications Lead
	Organization: Connecticut Children's Medical Center
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
4.	EB Emily Boushee
	Position: Government Relations Associate
	Organization: Connecticut Children's Medical Center
	Role:
	Speaker



Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

7. LM

Larry Milan, MA

Position:

SVP, Chief Human Resources and Diversity, Equity and Inclusion Officer

Organization:

Connecticut Children's Medical Center

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

The COVID-19 pandemic also gave rise to the racism pandemic. With increased recognition and awareness to the continued marginalization of certain groups, institutions are working to significantly improve, and implement, new initiatives to ensure maintenance of diversity, equity and inclusion (DEI) in all aspects of the running of their organizations. From the use of vendors, to

staff recruitment and retention to patient care, DEI initiatives are necessary components that must be part of the fabric of an organization. However, may DEI initiatives suffer from poor engagement to unfulfilled outcomes to insufficient institutional support. The goal of this hot topic presentation is to discuss the journey of one children's hospital to develop, and implement, their DEI framework. Through a series of presentations, and panel discussion, participants will learn how to initiate institutional DEI work in a transparent and institutionally supported manner, review strategies for assessing needs, understand how to engage key stakeholders, foster networks and develop a comprehensive measurement model to quantify impact. This session will conclude with an extended question and answer period for the sharing of lessons learned and take home strategies.

Learning Objectives

- 1. Upon completion, participants will be able to recognize key elements in developing a DEI roadmap for a healthcare system.
- 2. Upon completion, participants will be able to identify methods of engaging the workforce and community in DEI initiatives.
- 3. Upon completion, participants will be able to report at least two ways to measure DEI impact.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

All - clinicians, researchers, educators, administrators

3. Tracks

Diversity, Equity, and Inclusion Health Equity/Social Determinants of Health Quality Improvement/Patient Safety

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. other diversity implementation topics
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Addressing & Overcoming Racism in Clinical Care and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

yes - this is a diverse panel ranging from clinicians to hospital leadership

Presentation Titles and Durations

Introduction to the Hot Topic Melissa Santos, PhD **Duration of Presentation in Minutes** 10

Impacting the Culture
Lisa Marella, BS

Duration of Presentation in

Duration of Presentation in Minutes 10

Assessing the Culture
Nicole Cartier **Duration of Presentation in Minutes**10

DEI Governance and Leadership Emily Boushee **Duration of Presentation in Minutes** 10

Engaging the Community
Luis A. Rivera, MSW **Duration of Presentation in Minutes**10

Measuring the Impact
Tze Chiam, PhD **Duration of Presentation in Minutes**10

Summary and Q&A Larry Milan, MA **Duration of Presentation in Minutes** 30

Gender Affirming Care for Youth: Providing Evidence Based Care in a Changing World

Session Type: Hot Topic Symposia

Submitter: Melissa Santos

Participant(s)

1. MS

Melissa Santos, PhD

Position:

Associate Chair for Diversity, Equity and Inclusion

Organization: CT Children's

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. SH

Scott E. Hadland, MD, MPH, MS

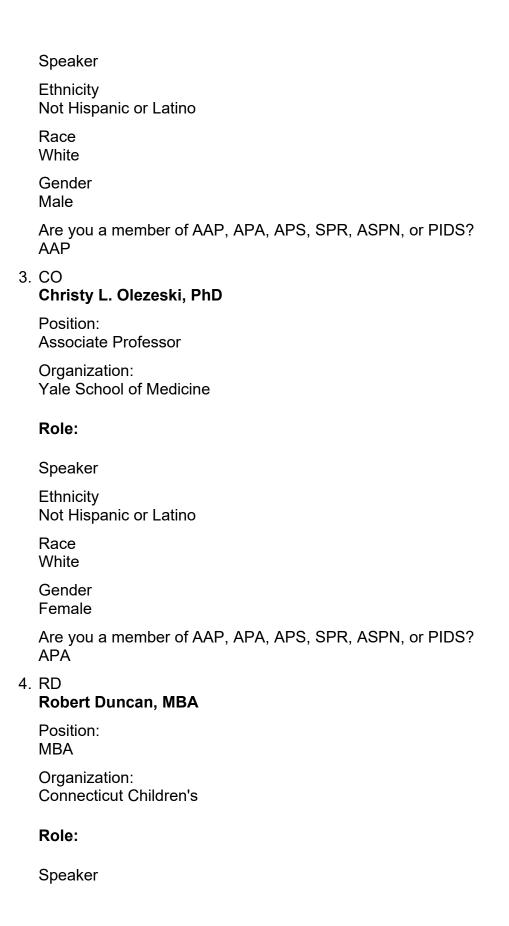
Position:

Division Chief

Organization:

Massachusetts General Hospital

Role:



Ethnicity
Not Hispanic or Latino

Race White

Gender Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

One in five of transgender and nonbinary youth attempted suicide in the past year with more than half seriously considering suicide. Despite major health organizations, including the American Academy of Pediatrics, stating that transgender youth should have access to gender affirming care in a safe clinical space, over 90% of transgender youth report worries that laws will deny them such access. Their fears are real as some states, in response to local laws, have had to close, or significantly alter, the care provided in their gender clinics. In states where clinics have not shut down, programs and providers have been subjected to harassment and threats from those opposing gender affirming care in youth. This leaves the question of where do systems of care go next to manage youth in need of gender affirming care. This hot topic symposium will bring together researchers, clinicians and hospital leadership to discuss innovations in care and next steps as programs continue to provide safe and compassionate gender affirming care to youth. Speaker presentations will include: (a) a new model for providing safe and confidential care; (b) the perspective of providers who have been subjected to harassment due to their care of transgender youth and (c) the views of a hospital COO and their approach to balancing providing evidence based care in the context of strong societal views. An extended Q&A will allows for sharing lessons learned and creating community in this work.

Learning Objectives

- Upon completion, participants will be able to identify key considerations in providing new models of care
- 2. Upon completion, participants will be able to name two strategies for managing safety when being subjected to harassment

3. Upon completion, participants will be able to explain the considerations of hospital leadership in providing gender affirming care for youth

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

all - hospital leaders, clinicians, trainees and researchers

3. Tracks

Adolescent Medicine

Diversity, Equity, and Inclusion

Endocrinology

Health Equity/Social Determinants of Health

Mental Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. other transgender focused presentation
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 The Impact of Policies on Health and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

Introduction; Introducing a new model for safe care for transgender youth Melissa Santos, PhD

Duration of Presentation in Minutes 20

When Professionals Become Targets Scott E. Hadland, MD, MPH, MS

Duration of Presentation in Minutes

Managing care as a target: The psychologists perspective Christy L. Olezeski, PhD **Duration of Presentation in Minutes** 15

The view from hospital leadership: Protecting our patients and staff Robert Duncan, MBA

Duration of Presentation in Minutes 20

Innovations in parental consent to evaluate neonatal treatments

Session Type: Hot Topic Symposia

Submitter: ANNIE Janvier

Participant(s)

1. MR

Matthew Rysavy, MD, PhD

Position:

Assistant Professor / Director of Learning Healthcare

Organization:

McGovern Medical School at the University of Texas Health Science Center at Houston

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

2. RP

Rebecca L. Pearce, Pearce, BSc, MSc, BEd

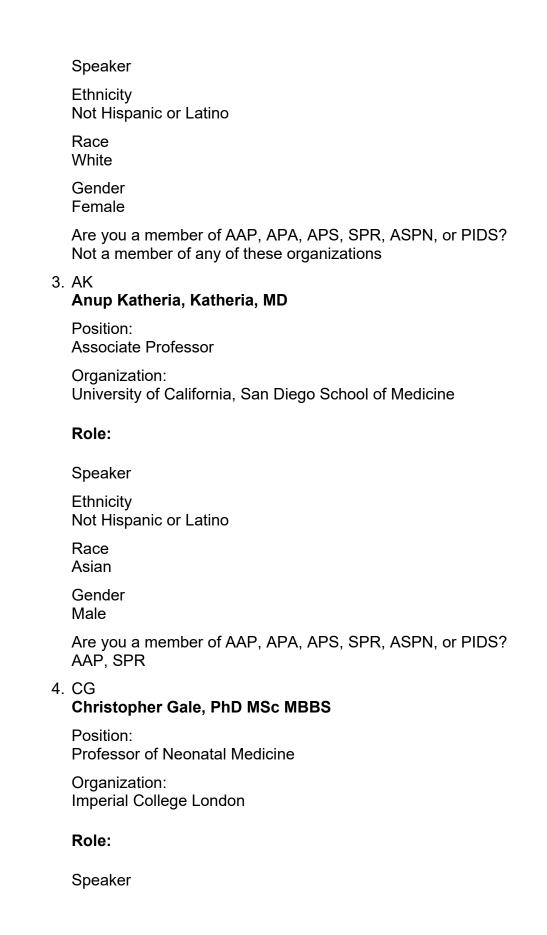
Position:

PhD Candidate

Organization:

McGill University Faculty of Education

Role:



	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
5.	AJ ANNIE Janvier, MD, PhD
	Position: Professor of Pediarics and Clinical Ethics
	Organization: University of Montreal
	Role:
	Submitter;Speaker;Chair
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR
6.	PD Peter G. Davis, MBBS, MD
	Position: Professor
	Organization: University of Melbourne
	Role:
	Speaker

Ethnicity
Not Hispanic or Latino

Race White

Gender Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

Lacking evidence for the safety and efficacy of many common treatments, the practice of neonatology is marked by extreme variations in clinical practice and outcomes among hospitals, geographic regions, and countries. Evaluation of common clinical treatments is critical to reduce unwarranted variation and improve care processes and outcomes. The study of neonatal treatments presents unique challenges, including that: the patients cannot consent for themselves; treatment efficacy and safety cannot be inferred from studies of older children or adults; a high-stakes, unpredictable, and stressful environment (trials in emergency conditions) makes obtaining informed consent from parents complex and sometimes impossible. Such challenges impede study of common treatments and distort study results. As a result, interventions are adopted into widespread practice without adequate evaluation. Emerging research, which asks parents of neonates about their preferences, experiences, and needs for participating in clinical research, has identified shortcomings of existing paradigms of informed consent. Recent innovations to address such shortcomings include: "deferred consent with prior assent," "opt out consent," randomization of units to protocols (cluster randomization) rather than randomizing individual patients, and point-of-care trials. These innovations are intended to improve the quality of evaluations and their representativeness, in order to improve patient care. However, they also raise important ethical, scientific and logistic issues. This international interdisciplinary panel will review research on parental consent in studies of neonatal treatment, describe the pros and cons of recent innovative approaches, and offer recommendations to optimize essential evaluation of common treatments used for neonatology's fragile patients.

Learning Objectives

- 1. Describe the complexity of evaluating commonly used treatments in neonatology.
- 2. Examine research on parental perspectives of consent for treatment evaluations in neonatology.
- 3. Describe pros and cons of strategies including "deferred consent with prior assent," "opt-out consent," cluster randomization, and point-of-care trials.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

This hot topic will attract neonatologists, researchers in neonatology, neonatal trainees, clinical ethicists, researchers and clinicians involved in IRBs and palliative care physicians (many neonates in these studies die).

3. Tracks

Advocacy

Clinical Bioethics

Clinical Research

Critical Care

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

Neonatology

Quality Improvement/Patient Safety

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. clinical ethics, neonatal clinical trials (this topic is of paramount importance for trialists)
- 6. If your session was presented at another conference, please describe the conference and presentation.

Several variations of this presentation were given at conferences, but never with these speakers together. For example grand rounds, presentation at ethics conferences and neonatal conferences.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

Addressing & Overcoming Racism in Clinical Care and Research

8. Additional comments

All the individuals in this panel are international academics who have published on this subject, they each have a unique expertise and are exceptionnal speakers.

9. Does this submission involve one or more specialties or disciplines?

This topic involves the following disciplines: Neonatology, Bioethics, Palliative care, Critical care, Clinical research.

Presentation Titles and Durations

Introduction
Matthew Rysavy, MD, PhD **Duration of Presentation in Minutes**10

A Parent's Perspective on Uncertainty in Neonatal Treatment and Double Standards for Consent

Rebecca L. Pearce, Pearce, BSc, MSc, BEd

Duration of Presentation in Minutes

10

Approaches to Comparative Effectiveness Studies in Emergency Situations: Deferred Consent and Randomizing Unit Protocols Anup Katheria. Katheria. MD

Duration of Presentation in Minutes

20

Approaches to Comparative Effectiveness Studies in Non-emergency Situations: Opt-out Consent and Point-of-Care Trials Christopher Gale, PhD MSc MBBS

Duration of Presentation in Minutes

20

The Complexity of Stakeholder Perspective: Which Stakeholders, How and When? (10 minutes) AND Q&A moderation (10 minutes) ANNIE Janvier, MD, PhD

Duration of Presentation in Minutes 20

.0

Summary and Recommendations Peter G. Davis, MBBS, MD

Duration of Presentation in Minutes

10

Addressing Gaps in Pediatric Behavioral Mental Health Training: Learning from Recent Data and Current Demonstration Projects

Session Type: Hot Topic Symposia

Submitter: Laurel Leslie

Participant(s)

1. LL

Laurel K. Leslie, MD, MPH

Position:

Vice President, Research

Organization:

American Board of Pediatrics

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS

2. CG

Cori Green, MD, MS

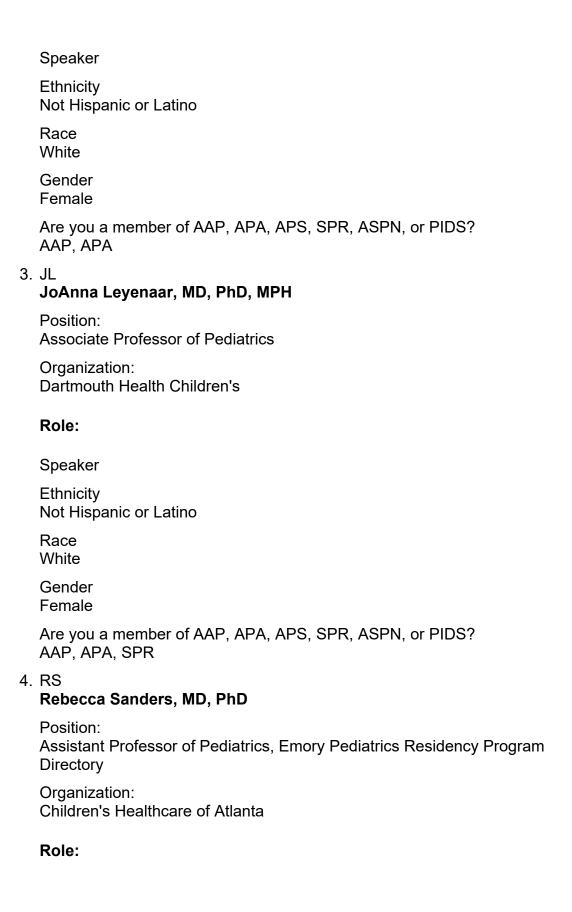
Position:

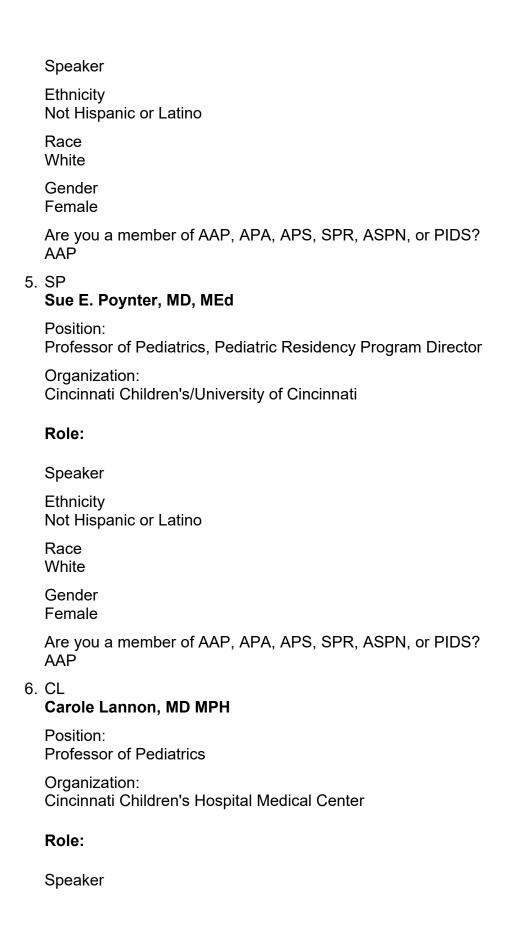
Associate Professor of Clinical Pediatrics

Organization:

Weill Cornell Medicine

Role:





Ethnicity
Not Hispanic or Latino

Race White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

Session Description

Session Description

In 2016, the American Board of Pediatrics (ABP)'s strategic planning committee identified behavioral mental health (BMH) as the critical gap in pediatric training. Since that time, the ABP Foundation and the Association of Pediatric Program Directors have worked to address gaps in pediatric residency and fellowship training, including includes a focus on infants, children, adolescents, and young adults (hereafter "children") with newly identified or ongoing chronic conditions and their families.

This symposium will share data recently collected from graduating residents, fellows, and subspecialists 1-3 years post training around training gaps in assessing and treating BMH conditions. It will also discuss two current demonstration projects: (1) the EMPOWER project, which is evaluating use of a novel BMH residency training curriculum coupled with faculty development based on the ECHO coaching model, and (2) the Roadmap Project, a combined change package and learning collaborative focused on training for residents, fellows, and faculty to enhance the resilience and emotional health of children with chronic conditions and their families.

This session will begin with an overview of the gaps in pediatric training and practice in the area of BMH identified by recent research, followed by presentations on the EMPOWER and Roadmap projects. Lessons learned about implementation barriers and facilitators for implementing curricular change will be shared. We will end the session with 20 minutes of interactive audience participation in brainstorming critical levers to improve BMH training and, ultimately, practice.

Learning Objectives

- 1. State gaps in pediatric residency and fellowship training and faculty development for behavioral and mental health;
- 2. Describe barriers, facilitators, and strategies to improve pediatric training to support optimal behavioral and mental health practice.
- 3. Identify additional levers for change

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

80

2. Target audience

trainees, faculty, program directors, department chairs, division chiefs

3. Tracks

Children with Chronic Conditions

Core Curriculum for Fellows

General Pediatrics

Medical Education

Mental Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Several of the presenters have submitted other symposia and we would hope to have these offered at different times if accepted.

6. If your session was presented at another conference, please describe the conference and presentation.

We hope to present some of these data at the APPD spring 2023 meeting, but we have

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic is Behavioral Mental Health Training which involves General Pediatrics and the Pediatric Subspecialties.

Presentation Titles and Durations

Overview: The Behavioral Mental Health Training Gap

Laurel K. Leslie, MD, MPH

Duration of Presentation in Minutes

10

Data: Graduating residents self-reported competence in assessing and treating B/MH conditions Cori Green, MD, MS

Duration of Presentation in Minutes

10

Data: Subspecialty fellows self-reported competence in assessing and treating B/MH conditions

JoAnna Leyenaar, MD, PhD, MPH

Duration of Presentation in Minutes

10

Recently Graduated Subspecialty Fellows' Perspectives on Readiness for Practice

Rebecca Sanders, MD, PhD

Duration of Presentation in Minutes

5

The EMPOWER Project: Addressing Curriculum and Faculty Development Sue E. Poynter, MD, MEd

Duration of Presentation in Minutes

15

The Roadmap Project: Improving Resilience and Emotional Health of Children With Chronic Medical Conditions and Their Families Carole Lannon, MD MPH

Duration of Presentation in Minutes

15

Top articles in medical education 2022: Applying the current literature to educational practice and scholarship

Session Type: Hot Topic Symposia

Submitter: Michael Ryan

Participant(s)

1. MR

Michael S. Ryan, MD, MEHP

Position:

Professor of Pediatrics, Associate Dean for Assessment, Evaluation, Research, and Innovation

Organization:

University of Virginia School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APA

2. GM

Gayatri B. Madduri, MD

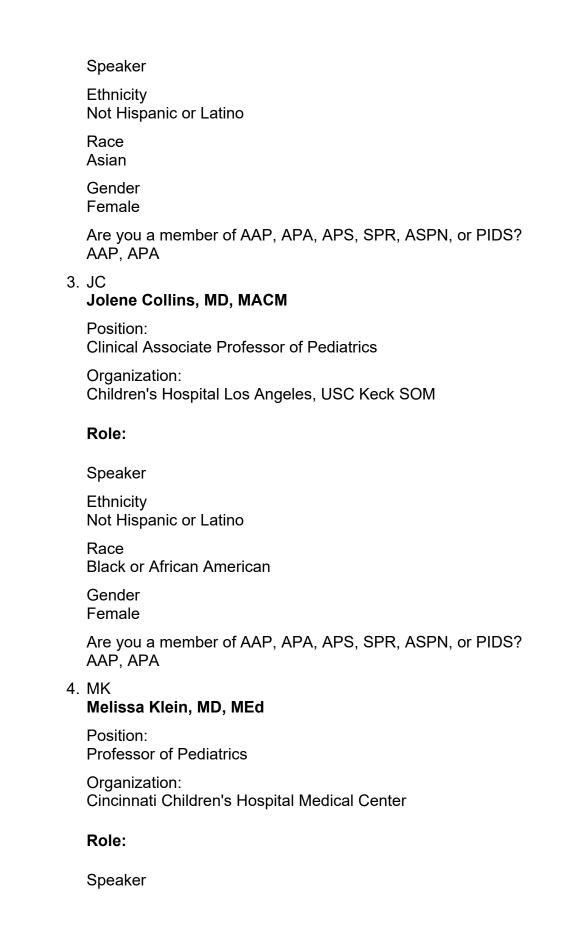
Position:

Assistant Professor

Organization:

Stanford University School of Medicine

Role:



Ethnicity Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS 5. HK Heidi M. Kloster, MD Position: Associate Professor Organization: University of Wisconsin School of Medicine and Public Health Role: Speaker **Ethnicity** Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA 6. UO Uchechi Oddiri, MD, FAAP Position: Clinical Assistant Professor of Pediatrics Organization: Stony Brook Children's Hospital, Stony Brook University Renaissance School of Medicine Role: Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

7. TL

Tai M. Lockspeiser, MD, MHPE

Position:

Assistant Dean of Assessment, Evaluation and Outcomes

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

Session Description

Session Description

Clinician educators are expected to provide high-quality, evidence-based care for their patients. We should expect the same from their educational approach to learners. However, staying up-to-date with educational literature can be daunting due to the massive number of manuscripts and specific educational nomenclature commonly used. For the past six years, members of the APA's education committee have presented an annual synthesis of the most relevant

manuscripts in medical education from the preceding year. The goal of this session is to continue with that tradition, by presenting the top articles in medical education from 2022.

Presenters for this session were selected through formal application within the APA's education committee. This year, we welcomed three new members while three others have rotated off. Consistent with our previous sessions, the group will identify manuscripts using a structured, consensus-based approach. Our team will review and score all medical education manuscripts published in calendar year 2022. Teams will then offer recommendations of manuscripts that warrant consideration for "top articles." A final list will be determined by consensus discussion. Manuscripts will then be organized into thematic categories and presented at PAS. During the presentation, audience members may contribute to the discussion through two question and answer opportunities.

Because this session aims to review all manuscripts from 2022, we cannot provide specific manuscript titles or categories at this time. Through our previous six years of experience, we have developed and refined a timeline for review that will ensure final preparation in time for the session.

Learning Objectives

- 1. Discuss outcomes from the top articles in medical education from 2022.
- 2. Formulate approaches to incorporate medical education innovations into their practice
- 3. Identify areas of scholarly interest for themselves for further reading, curricular development, and innovative scholarship

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

150

2. Target audience

Educators and trainees of all levels; particularly those interested in medical education and educational scholarship

3. Tracks

Academic and Research Skills Core Curriculum for Fellows Medical Education

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

Not Applicable

- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Education committee meeting
- 6. If your session was presented at another conference, please describe the conference and presentation.

This session has been presented annually at PAS for the past 5 years with a large attendance. Each year, the content is different, since the review reflects the most recent year of publications. There has been significant interest and attendance at the session. The work has resulted in successful publication of a peer-reviewed manuscript in Academic Pediatrics for each year to date.

- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic involves medical educators across specialty areas.

Presentation Titles and Durations

Introduction and Methods, Facilitation of Question & Answer Michael S. Ryan, MD, MEHP **Duration of Presentation in Minutes**18

Topic 1 Presentation
Gayatri B. Madduri, MD **Duration of Presentation in Minutes**12

Topic 2 Presentation
Jolene Collins, MD, MACM **Duration of Presentation in Minutes**12

Topic 3 Presentation
Melissa Klein, MD, MEd **Duration of Presentation in Minutes**12

Topic 4 Presentation
Heidi M. Kloster, MD **Duration of Presentation in Minutes**12

Topic 5 Presentation Uchechi Oddiri, MD, FAAP **Duration of Presentation in Minutes** 12

Topic 6 Presentation
Tai M. Lockspeiser, MD, MHPE **Duration of Presentation in Minutes**12

Examining Race and Ethnicity in Clinical Practice Guidelines to Advance Health Equity

Session Type: State of the Art Plenary

Submitter: Robert Rosen

Participant(s)

1. AS

Amy Starmer, MD, MPH

Position:

Associate Medical Director of Quality

Organization:

Boston Children's Hospital

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

2. JW

Joseph L. Wright, MD MPH

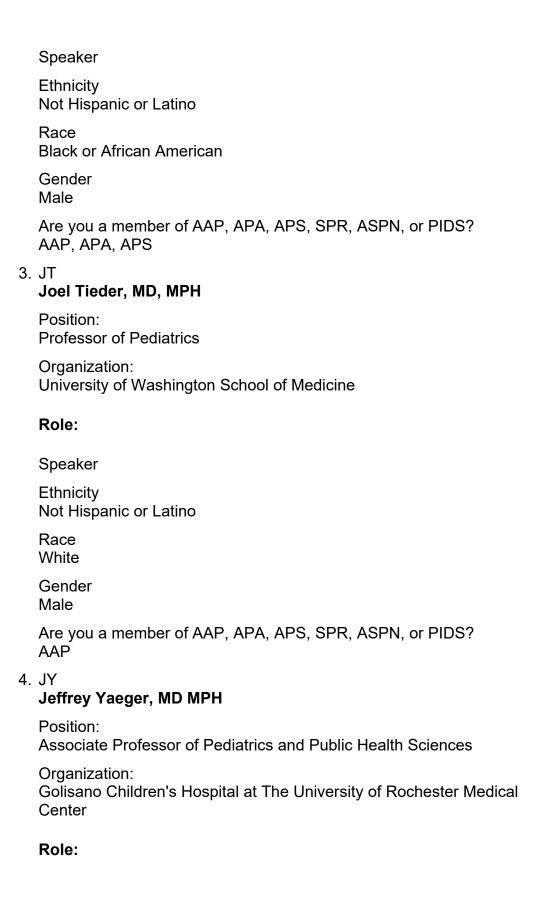
Position:

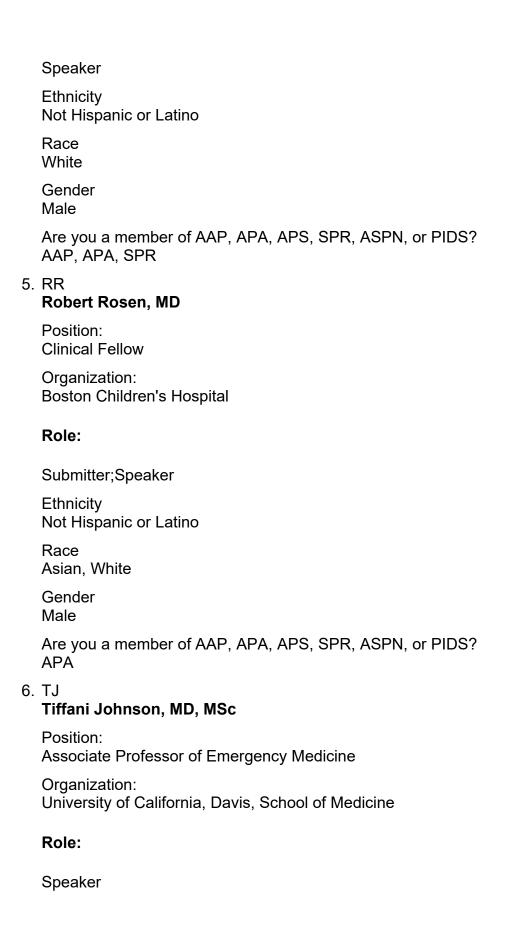
Professor of Pediatrics and Health Policy & Management

Organization:

University of Maryland Schools of Medicine and Public Health

Role:





Ethnicity
Not Hispanic or Latino

Race

Black or African American

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

Session Description

Session Description

Evidence-based clinical guidelines are important tools for providing high quality, standardized care, which is consistent and equitable. The appropriate role of race and/or ethnicity as a variable in medical research and clinical decision-making, including their inclusion in clinical guidelines, is actively debated. A recent systematic review showed that race/ethnicity terms appear in 30 percent of all pediatric clinical guidelines with potentially negative effects in 50% of cases. In response to this reality, national organizations are developing equity-based approaches to the review, development, and implementation of clinical guidelines. However, national efforts may take time, leaving individual clinicians and healthcare organizations to determine how to approach this topic more immediately in local practice. One children's hospital developed a framework to review race/ethnicity terms found in its local institutional library of clinical guidelines ("clinical pathways"), providing a practical roadmap for other clinicians and institutions that may wish to do the same. Finally, measurement will be important to assess the extent to which guidelines mitigate or exacerbate health inequities, as well as to understand whether modifications to race and ethnicity in guidelines have the intended effect of promoting equity over time.

This session will describe the extent to which race/ethnicity are currently included in pediatric clinical guidelines and will review local and national efforts addressing this issue. Participants will be able to apply existing frameworks to interpret, develop, and/or revise clinical guidelines at their own institutions. The session will conclude with a panel discussion to highlight areas of opportunity for next steps and collaboration.

Learning Objectives

- 1. Describe the current prevalence of race/ethnicity terms in pediatric clinical guidelines.
- 2. Apply frameworks to evaluate whether race/ethnicity terms should be included in clinical guidelines considering contextual factors such as setting and local population characteristics.
- 3. Utilize best practices in guideline implementation and measurement to promote health equity.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

175-200

2. Target audience

Academic pediatricians, clinical providers, researchers, nurses, quality improvement leaders, and professional society staff involved in using, developing, and/or implementing clinical guidelines

3. Tracks

Academic and Research Skills

Clinical Research

Core Curriculum for Fellows

Diversity, Equity, and Inclusion

Emergency Medicine

General Pediatrics

Hospital Medicine

Quality Improvement/Patient Safety

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Session chair is leading the Health Care Delivery Committee Meeting and also speaking at the Quality Improvement Special Interest Group.
 Request to also avoid the DEI reception as we expect that there will be interest in this scientific session from many of the reception's attendees.
- 6. If your session was presented at another conference, please describe the conference and presentation.
- Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?
 Addressing & Overcoming Racism in Clinical Care and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic is relevant to all specialties and disciplines given the fact that clinical guidelines, algorithms, and pathways are used across all these settings and types of care.

Presentation Titles and Durations

Towards a Greater Understanding of the Intersection of Race, Ethnicity, and Clinical Guidelines

Amy Starmer, MD, MPH

Duration of Presentation in Minutes

30

Eliminating Race-Based Medicine Joseph L. Wright, MD MPH

Duration of Presentation in Minutes

12

A Systematic Review of the Use of Race and Ethnicity in Pediatric Clinical Guidelines

Joel Tieder, MD, MPH

Duration of Presentation in Minutes

12

An Equity-focused Approach to Develop Pediatric Clinical Practice Guidelines Jeffrey Yaeger, MD MPH

Duration of Presentation in Minutes

12

Outcomes and Best Practices From a Comprehensive Review of Race & Ethnicity in Clinical Pathways

Robert Rosen, MD

Duration of Presentation in Minutes

12

Measuring the Impact of Clinical Guidelines on Health Equity Tiffani Johnson, MD, MSc

Duration of Presentation in Minutes

12

Food Allergy Prevention in Primary Care

Session Type: Hot Topic Symposia

Submitter: Lucy Bilaver

Participant(s)

1. LB

Lucy A. Bilaver, PhD

Position:

Associate Professor

Organization:

Northwestern University

Role:

Submitter; Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. RG

Ruchi S. Gupta, Gupta, MD, MPH

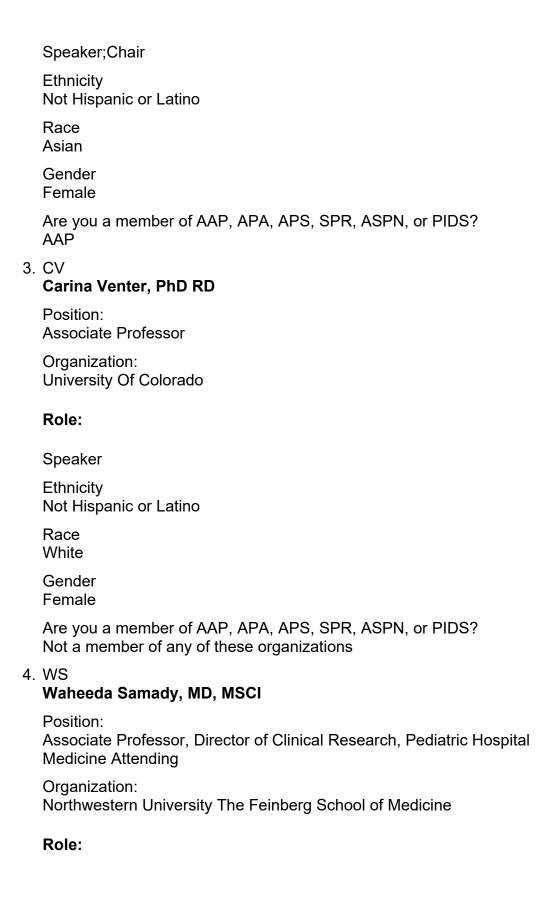
Position:

Professor of Pediatrics & Medicine, Clinical Attending

Organization:

Northwestern University The Feinberg School of Medicine, Ann & Robert H. Lurie Children's Hospital of Chicago

Role:



Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

Session Description

Session Description

This symposium will bring together leaders in the field of food allergy prevention and general pediatric care. Dr. Carina Venter PhD RN will begin the session with the history of allergen avoidance to the evolution of evidencebased recommendations for early allergen introduction within pediatric primary care. Her research highlights the impact of diet on the microbiome its role in allergy prevention. Next, Dr. Waheeda Samady MD, will present data from an educational intervention to train pediatricians to implement the 2017 NIAID Addendum Guidelines for the Prevention of Peanut Allergy (PPA). Key aspects of the educational intervention were training around eczema grading including a score card developed to aid pediatricians identify the degree of eczema in children with diverse skin tones. Finally, Drs. Ruchi Gupta MD MPH and Lucy Bilaver PhD will present results from a practice-based pragmatic randomized control trial entitled the Intervention to Reduce Early (Peanut) Allergy in Children (iREACH). Through a combination of clinician education and clinical decision support, the iREACH study aims to increase pediatrician's adherence to the PPA guidelines and reduce the incidence of peanut allergy. Funded through a cooperative grant by NIAID (U01AI138907), the iREACH trial is the largest effort to test the effectiveness of strategies to promote the implementation of PPA guidelines in the context of 4- and 6-month well child checks.

Learning Objectives

1. To discuss what have we learned from our mistakes regarding allergen avoidance and how can we do better for our patients

- 2. To assess the educational needs of pediatricians when implementing the food allergy prevention recommendations in primary care
- 3. To describe the effectiveness of strategies to increase pediatrician adherence to peanut allergy prevention guidelines

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

General pediatricians and pediatric allergists

3. Tracks

Academic and Research Skills

Allergy, Immunology and Rheumatology

General Pediatrics

Medical Education

Well Newborn

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 None noted
- 6. If your session was presented at another conference, please describe the conference and presentation.

 None
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Yes, this submission involves general pediatrics, allergy, and nutrition.

Presentation Titles and Durations

Supporting peanut allergy prevention guidelines in primary care: Results from the iREACH study

Lucy A. Bilaver, PhD

Duration of Presentation in Minutes

Supporting peanut allergy prevention guidelines in primary care: Result from the iREACH study
Ruchi S. Gupta, Gupta, MD, MPH **Duration of Presentation in Minutes**15

Allergy prevention in 2023 Carina Venter, PhD RD **Duration of Presentation in Minutes** 25

Development and assessment of an educational program for pediatric clinicians around peanut allergy prevention Waheeda Samady, MD, MSCI **Duration of Presentation in Minutes** 20

Improving the Care and Science of BRUE: Learning from a National Research and Quality Improvement Collaboration.

Session Type: Hot Topic Symposia

Submitter: Nassr Nama

Participant(s)

1. JT

Joel Tieder, MD, MPH

Position:

Professor of Pediatrics

Organization:

University of Washington School of Medicine

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. NN

Nassr Nama, MD, MSc, FAAP

Position:

Clinical Assistant Professor

Organization:

Seattle Children's Hospital

Role:

```
Submitter; Speaker; Chair
  Ethnicity
  Not Hispanic or Latino
  Race
  Prefer not to respond
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP
3. AD
  Amy M. DeLaroche, MBBS
  Position:
  Faculty, Pediatric Emergency Department
  Organization:
  Children's Hospital of Michigan
  Role:
  Speaker
  Ethnicity
  Not Hispanic or Latino
  Race
  White
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP
4. JB
  Joshua Bonkowsky, MD PhD
  Position:
  Professor; Chief, Pediatric Neurology
  Organization:
  Primary Children's Hospital; University of Utah
  Role:
  Speaker
```

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. DG

David Gremse, MD

Position:

Prof. & Chair of Pediatrics

Organization:

University of South Alabama

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR

Session Description

Session Description

Brief Resolved Unexplained Events (BRUE) are common among infants. Most often, they are benign and self-limited. Rarely they can be an index presentation of a more serious diagnosis. Risk stratification of these infants and management of those with higher-risk features have been challenging, due to the heterogeneity of identified diagnoses. As such, most diagnostic tests and consultations' yield is low, and a multidisciplinary collaborative approach is

required to manage BRUE. Emergency physicians, hospitalists, and consultants (gastroenterologists and neurologists) are commonly involved in evaluating these patients.

Similarly, a multidisciplinary collaborative framework is needed to improve the clinical care of this population. In this session, we will demonstrate our approach to advancing our understanding of BRUE, through the development of a clinical practice guideline and a multidisciplinary collaboration with research and quality improvement aims. We will present the key findings from this collaboration and how to translate these findings into clinical practice.

Participants will appraise new risk-stratification tools and how to incorporate them into a shared-decision making model. Next, we will review the management of patients with BRUE in the Emergency Department, focusing on the yield of hospital admission, specific diagnostic testing, and consultations. This will include a discussion of which patients may benefit from these measures. Finally, we will examine in more detail two systems most implicated in patients with an underlying disorder (neurology and gastroenterology).

We will then discuss lessons learned from this collaboration and provide recommendations for other disease entities that would benefit from a similar collaborative approach.

Learning Objectives

- 1. Appraise the recent evidence related to the diagnosis and management of BRUE.
- 2. Formulate a shared-decision making approach in the management of BRUE, relying on a new evidence-based framework and incorporating interactive tools for risk assessment.
- 3. Describe key steps in designing multidisciplinary research and quality improvement collaborations.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

Hospitalists, emergency physicians, neurologists, gastroenterologists, respirologists, and community pediatricians.

Researchers interested in establishing a collaborative network targeting a clinical presentation with a broad differential and multiple subspecialty involvement.

3. Tracks

Clinical Research

Community Pediatrics

Emergency Medicine

Gastroenterology/Hepatology

Health Services Research

Hospital Medicine

Neurology

Quality Improvement/Patient Safety

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Friday, April 28
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 APA Pediatric Hospital Medicine SIG Meeting
- If your session was presented at another conference, please describe the conference and presentation. N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Yes. The topic is BRUE involving Hospitalists, Emergency Medicine, Neurology, Gastroenterology, Pulmonology, Child Protection, and General Pediatrics.

Presentation Titles and Durations

Research and Quality Improvement in BRUE: Establishing a Multidisciplinary Collaboration.

Joel Tieder, MD, MPH

Duration of Presentation in Minutes

20

Risk Stratification: The Limits of the AAP Clinical Practice Guideline, and Development of a Shared-Decision Making Tool.

Nassr Nama, MD, MSc, FAAP

Duration of Presentation in Minutes

Reassuring Parents and Identifying Serious Illness: The Yield of Hospital Admission, Diagnostic Testing, and Consultations.

Amy M. DeLaroche, MBBS

Duration of Presentation in Minutes

15

BRUE, Seizures, and Abnormal Movement: Evaluation and Management from the Subspecialists' Perspective.

Joshua Bonkowsky, MD PhD

Duration of Presentation in Minutes

10

BRUE, Aspiration, and Reflux: Evaluation and Management from the Subspecialists' Perspective.

David Gremse, MD

Duration of Presentation in Minutes

10

Ampicillin and Gentamicin for Suspected Early-Onset Sepsis: Improve On or Move On?

Session Type: Hot Topic Symposia

Submitter: **Dustin Flannery**

Participant(s)

1. DF

Dustin D. Flannery, DO, MSCE

Position:

Assistant Professor of Pediatrics

Organization:

Childrens Hospital of Philadelphia

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR, PIDS

2. KP

Karen Puopolo, MD, PhD

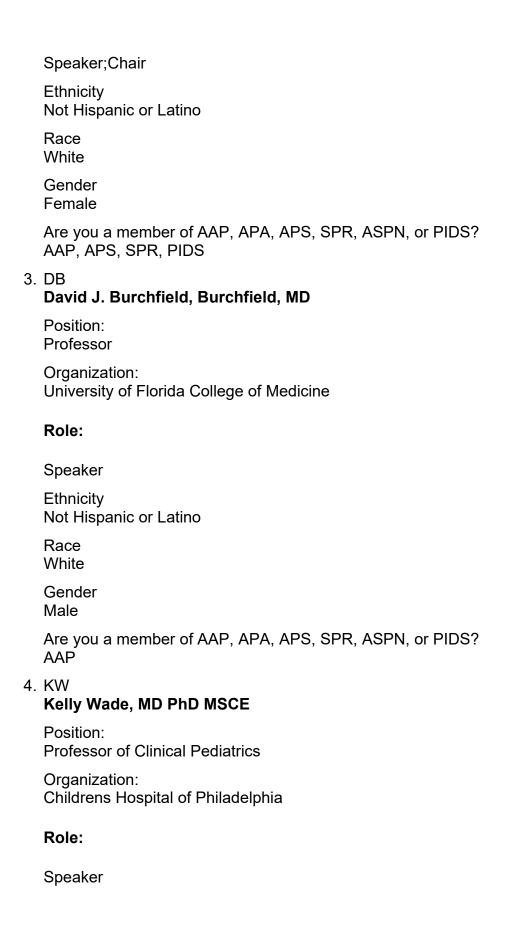
Position:

Professor of Pediatrics

Organization:

Perelman School of Medicine at the University of Pennsylvania

Role:



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

Ampicillin and gentamicin are recommended by the American Academy of Pediatrics (AAP) as the most appropriate primary regimen for both term and preterm infants at risk for early-onset sepsis (EOS). Accordingly, these two drugs are the most common discretionary medications administered to newborns. EOS risk assessment continues to evolve over time, and antibiotic stewardship efforts have targeted early antibiotic use among newborns. Recent evidence suggests that antibiotic resistance, a leading global health threat, is increasing among organisms that cause EOS. In light of this, it is unclear whether ampicillin and gentamicin remain the most appropriate empiric regimen. A broader-spectrum regimen could target more potential infecting organisms, yet could lead to increased resistance and other adverse consequences. This Hot Topic Symposia will discuss the current state of EOS antibiotic use and antibiotic resistance, highlight both the pros and cons of maintaining the currently recommended empiric regimen of ampicillin and gentamicin versus other potential regimens, and review state-of-the-art pharmacologic considerations for empiric treatment. The content will be applicable to attendees who practice general pediatrics, neonatology, infectious diseases, hospital medicine, emergency medicine, and pharmacy.

Learning Objectives

- 1. To describe current state of EOS antibiotic use and antibiotic resistance
- 2. To discuss pros and cons of the currently recommended empiric ampicillin and gentamicin regimen
- 3. To discuss pharmacologic considerations of empiric treatment for EOS

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100-150

2. Target audience

General pediatricians, neonatologists, pediatric hospitalists, pediatric infectious diseases, pediatric pharmacy

3. Tracks

Clinical Research

Emergency Medicine

General Pediatrics

Hospital Medicine

Infectious Diseases

Neonatology

Pharmacology and Therapeutics

Well Newborn

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 - 1) Neonatal Sepsis Club
 - 2) Neonatal Infectious diseases and immunology
- If your session was presented at another conference, please describe the conference and presentation.
 N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

The content will be applicable to attendees who practice general pediatrics, neonatology, infectious diseases, hospital medicine, emergency medicine, and pharmacy.

Presentation Titles and Durations

Dustin D. Flannery, DO, MSCE

¹⁾ Opening and Introductions (5min); 2) Current State of EOS Antibiotic Use and Antibiotic Resistance (20min)

1) Amp and Gent for Suspected EOS: Pros (20min); 2) Closing Remarks (5min)

Karen Puopolo, MD, PhD

Duration of Presentation in Minutes

25

Amp and Gent for Suspected EOS: Cons David J. Burchfield, Burchfield, MD **Duration of Presentation in Minutes** 20

Pharmacologic Considerations of Empiric Treatment for EOS Kelly Wade, MD PhD MSCE **Duration of Presentation in Minutes**20

Enteral Nutrition for Very Preterm Infants

Session Type: Hot Topic Symposia

Submitter: Katsumi Mizuno

Participant(s)

1. KM

Katsumi Mizuno

Position: MD. PhD

Organization:

Showa University School of Medicine, Department of Pediatrics

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR

2. SP

Sanjay Patole, MD, DCH, FRACP, MSc, DrPH

Position:

Enteral nutrition for very preterm infants

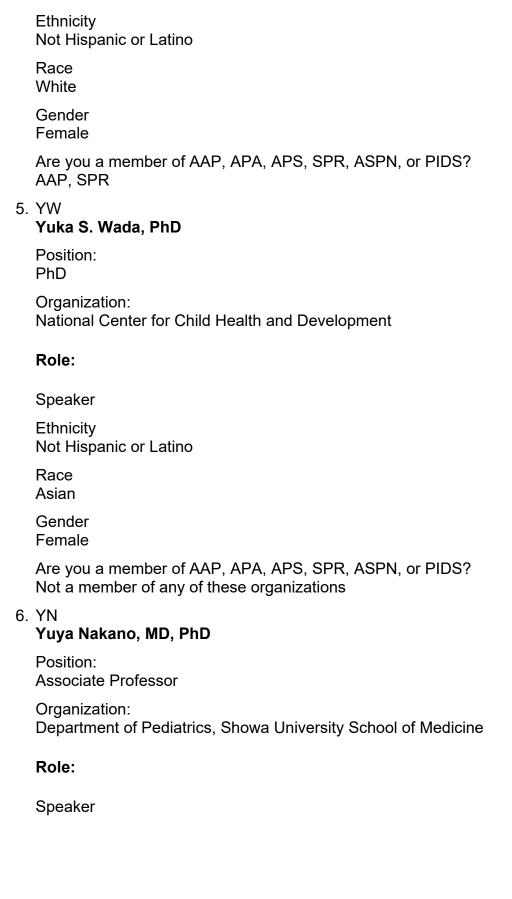
Organization:

KEM Hospital for Women

Role:

Speaker; Chair

	Ethnicity Prefer not to respond
	Race Prefer not to respond
	Gender Prefer not to respond
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
3.	CM Chua Mei Chien, MD
	Position: Clinical Associate Professor
	Organization: Duke-NUS Medical School and KK Women's and Children's Hospital
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
4.	AH Amy Hair, MD
	Position: Associate Professor
	Organization: Baylor College of Medicine
	Role:
	Speaker



Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR

Session Description

Session Description

Currently, enteral feedings for very preterm infant(VPI)s are initiated earlier, i.e. within 12 hours of life, because nutrition, especially enteral nutrition, is recognized as an important factor for short and long-term outcomes of VPIs. In this session, the first half will be focused on the current situation of neonatal nutrition in Japan.

In Japan, JASMINE (JApanese Study of an Exclusive Human MIlk Diet in Premature NEonates) trial has been conducted since Oct. 2021. The interim report will be shared with the audience from Dr. Mizuno. Enteral feeding during early postnatal days often rely on donor human milk (DHM). In Japan, Human Milk Bank (HMB) launched in May, 2017. We continue to have some problems with access to DHM and HMB. Dr. Wada will talk about the questionnaire survey for Japanese neonatologists and registry findings for VPIs who used DHM in Japan. Dr. Nakano will talk about nutrition during early postnatal life and future risks of non-communicable diseases in VPI.

The second half will be focused on the same topics as above from other countries.

Dr. Hair (Texas Children's Hospital) has published the benefits of Exclusive Human Milk-based Diet, such that she would share her results relating to JASMINE.

Dr. Chua (KK Women's and Children's Hospital) launched the first HMB in Singapore in 2017. Therefore, we can share the issues in HMB regarding establishment, accessibility, cost, and so on. Dr. Patole (University of Western Australia will talk about the benefits of the standardization of enteral nutrition for VPIs.

Learning Objectives

- 1. Upon completion, participants will be able to explain how important the standardization of enteral nutrition is important for preterm infants.
- 2. Upon completion, participants will be able to take a better care of preterm infants from the latest nutrition strategy.
- 3. Upon completion, participants will be able to explain how exclusive human milk-based nutrition improves the outcomes of preterm infants.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

250

2. Target audience

neonatologists

3. Tracks

Breastfeeding/Human Milk Neonatology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. NA
- 6. If your session was presented at another conference, please describe the conference and presentation.

No, I have not presented this at another conference.

- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

The Effects of Early Enteral Nutrition and an Exclusive Human Mllk Diet on Very Preterm Infants

Katsumi Mizuno

Duration of Presentation in Minutes

20

Benefits of the standardization of enteral nutrition for VPIs

Sanjay Patole, MD, DCH, FRACP, MSc, DrPH **Duration of Presentation in Minutes** 20

Evidence based practices to reduce necrotizing enterocolitis enterocolitis Chua Mei Chien, MD

Duration of Presentation in Minutes

17

Improving Outcomes of VLBW Infants by Optimizing the Use of Human Milk Amy Hair, MD

Duration of Presentation in Minutes

17

Enteral Feeding of Preterm Infants and the Human Milk Bank in Japan Yuka S. Wada, PhD

Duration of Presentation in Minutes

17

Nutritional strategy during NICU stay and later outcome of very preterm infants Yuya Nakano, MD, PhD

Duration of Presentation in Minutes

17

Air Pollution: What Every Pediatrician Needs to Know

Session Type: State of the Art Plenary

Submitter: Preeti Jaggi

Participant(s)

1. PJ Preeti Jaggi, MD Position: Associate Professor of Pediatrics Organization: **Emory University** Role: Submitter; Chair Ethnicity Not Hispanic or Latino Race Asian Gender **Female** Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? **AAP** 2. AB Aparna Bole, MD Position: Associate Professor, Department of Pediatrics Organization: Case Western Reserve University School of Medicine Role: Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

Aparna Bole, MD, FAAP, is a pediatrician who, in her role as Special Expert in the Office of the Director at the Agency for Healthcare Research and Quality, serves as part of the Health and Human Services Office of Climate Change and Health Equity's leadership team. She is also an Associate Professor of Pediatrics at Case Western Reserve University School of Medicine in Cleveland, OH, and is interested in the intersection between environmental stewardship, environmental justice, and pediatric public health. She is the immediate past chair of the American Academy of Pediatrics Council on Environmental Health and Climate Change, and a former co-chair of the Healthcare Without Harm board of directors. She has previously served in numerous other environmental health leadership roles, including as a member of the State of Ohio's Lead Advisory Council, , the Trust for Public Land's Ohio Advisory Council, and the Ohio Environmental Council's board of directors.

This session will detail the hazards of ambient and indoor air pollution that affect children's health. Air pollution causes and exacerbates climate change, and climate change worsens health effects of air pollution. Infants and children are uniquely sensitive to air pollution, because their organs are developing and they have higher minute ventilation. Health effects linked to air pollution include respiratory disease but also preterm birth, low birth weight, neurodevelopmental disorders, IQ loss, pediatric cancers, and increased risks for adult chronic diseases. We will discuss individual, community, and legislative strategies to mitigate air pollution.

Learning Objectives

1. Describe the health effects of ambient air pollution on infants prior to and after birth.

- 2. Identify individual and policy solutions to decrease ambient air pollution.
- 3. Describe the ways that climate change and ambient air pollution are linked.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

500

2. Target audience

General and hospital based pediatricians, public health advocates, neonatologists.

3. Tracks

Advocacy

Allergy, Immunology and Rheumatology

Asthma

Environmental Health

Health Equity/Social Determinants of Health

Neonatology

Public Health

Pulmonology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

 Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Prefer doing a plenary session as most pediatricians are unaware of how ambient air pollution profoundly affects children's health.

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

Air Pollution and Children's Health: What Every Pediatrician Needs to Know Aparna Bole, MD

Novel Nutrition Strategies to Minimize Postnatal Growth Faltering in VLBW Infants

Session Type: Hot Topic Symposia

Submitter: Amy Hair

Participant(s)

1. CB

Cynthia Blanco, Blanco, MD

Position:

Professor of Pediatrics

Organization: UT Health

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

2. AH

Amy B. Hair, MD

Position:

Associate Professor

Organization:

Baylor College of Medicine

Role:

	Submitter;Speaker;Chair
	Ethnicity Prefer not to respond
	Race Prefer not to respond
	Gender Prefer not to respond
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR
3.	CF Christoph Fusch, MD PhD
	Position: Professor
	Organization: Paracelsus Medical School Nuernberg
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR
4.	NR Niels Rochow, MD, PhD
	Position: PrivDoz.
	Organization: Paracelsus Medical University
	Role:
	Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

This symposium plans to address the various controversies that exist in neonatal nutrition, with focus on novel nutrition strategies to minimize postnatal growth faltering including individualized fortification of human milk for infants at highest risk, with the goal of promoting best strategies to improve long-term health of VLBW infants in the NICU.

Learning Objectives

- 1. To review concepts about postnatal growth trajectories as a tool to provide guidance to clinicians to adjust nutrient intake to minimize postnatal growth faltering.
- 2. To address the various controversies in neonatal nutrition and to present novel fortification strategies including adjusted and individualized fortification to improve growth and outcomes.
- 3. To address early nutritional effects on postnatal growth faltering and longterm health in VLBW infants.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

Neonatologists, Nurse Practitioners, Dietitians

3. Tracks

Breastfeeding/Human Milk Neonatology Pediatric Nutrition

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

NEC sessions, Human Milk sessions

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Neonatology, overlaps with Nutrition and Human Milk

Presentation Titles and Durations

The Challenge of Minimizing Postnatal Growth Faltering in VLBW Infants: Postnatal adaptation and Metabolism Cynthia Blanco, Blanco, MD

Duration of Presentation in Minutes

17

Early Feeding and Early Fortification Strategies to Decrease Growth Faltering Amy B. Hair, MD

Duration of Presentation in Minutes

17

The Future of Human Milk Fortification: Strategies for Individualized Fortification based on Individual Growth Trajectories Christoph Fusch, MD PhD

Duration of Presentation in Minutes

17

Novel Fortification Strategies for VLBW Infants: Neurodevelopment and Longterm outcomes

Niels Rochow, MD, PhD

Duration of Presentation in Minutes

17

Telehealth's Evolving Role in the Post-Pandemic Era: What should stay, what should change, what should go?

Session Type: **Panel Discussion**Submitter: **Christina Olson**

Participant(s)

1. CO

Christina Olson, MD

Position:

Associate Professor, Telehealth Medical Director

Organization:

Children's Hospital Colorado/ University of Colorado School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. DS

Dana A. Schinasi, MD

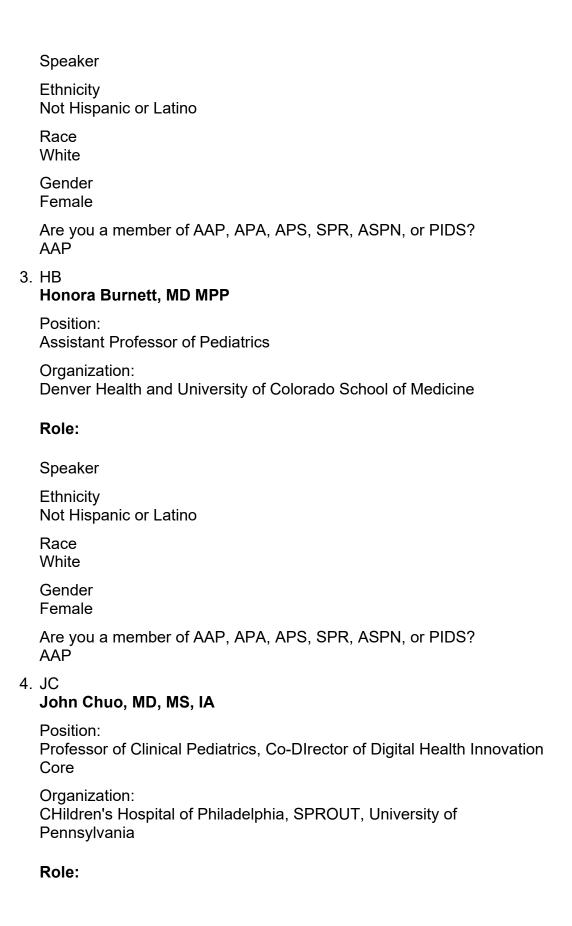
Position:

Associate Professor of Pediatrics; Medical Director of Digital Health

Organization:

Ann & Robert H. Lurie Children's Hospital of Chicago

Role:



Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

5. BY

Brooke Yeager McSwain, MSc, MA

Position:

National Policy Reasearch Analyst, Health IT, Public Health Infrastructure, Systems of Care

Organization:

American Heart Association

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

To achieve the quadruple aim of healthcare – reducing costs, improving population health, improving patient experience, and improving team wellbeing or achieving equity, we must move past the pre-pandemic model of healthcare

delivery. Many limitations in our healthcare system were highlighted by the disruptive forces of the pandemic, leading to clinical, administrative and policy innovation that led us to embrace telehealth modalities of care. We now have a unique opportunity to design a better system for patients and clinicians by blending these innovations with our pre-pandemic practices as we return to steady-state. To do so, it is critical that we evaluate our recent experiences and data to understand which telehealth services should remain, which should be adapted, and which should be retired. In addition, it is imperative that we maintain a lens towards equity through this effort.

This moderated panel discussion brings together four pediatricians representing primary, emergency and inpatient care in a variety of practice environments across the country including schools, FQHCs, community hospitals and academic children's hospitals. Each has experience developing, implementing, delivering and evaluating telehealth services prior to and since the pandemic. Additionally, a policy expert at the American Heart Association who focuses on telehealth and healthcare innovation will provide insight on the intersection of policy and clinical practice as we optimize virtual care. Participants will learn from the panelists' perspectives and have an opportunity to ask questions as they look to the future of telehealth in their own practices.

Learning Objectives

- 1. Describe emerging evidence and lessons learned during the COVID-19 pandemic that can inform future telehealth practice, ranging from video encounters to remote patient monitoring.
- 2. Evaluate telehealth services from multiple stakeholder perspectives based on five rights of health care: right patient, right clinician, right place, right time, and right care.
- 3. Recognize the interplay between policy and clinical practice when technology-based innovation is used to advance pediatric health care.

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

pediatricians (general & subspecialty), pediatric advanced practice providers, health system researchers and innovators, health system clinical administrators

3. Tracks

Advocacy
Community Pediatrics
Health Services Research
Hospital Medicine
Leadership and Business Training
Telemedicine/EHR/Medical Informatics

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. any plenary or other key sessions related to telehealth/ virtual care; telemedicine/ EHR abstract presentation sessions
- If your session was presented at another conference, please describe the conference and presentation. N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? The Impact of Policies on Health and Research
- 8. Additional comments

Based on the submission portal's format that requires assignment of specific presentations and agenda time to individual presenters, this submission divides each panelist's area of expertise into a separate presentation. However, the session will be presented as a moderated panel discussion which blends input from multiple panelists on various topics to provide a nuanced understanding of the topic, rather than discrete/ stand-alone presentations. Additionally, the introduction (10 minutes) and closing Q&A time (20 minutes) are combined under Christina Olson's presentation in the agenda as she will be moderating/ presenting both, but they will be split during the actual session.

9. Does this submission involve one or more specialties or disciplines?

yes - the topic & submission crosses almost all specialties and disciplines (e.g. community pediatrics, general pediatrics, hospital medicine, medical & surgical subspecialties, population health, and health services research)

Presentation Titles and Durations

Pandemic-mediated disruptive innovation of pediatric health care using virtual technology: Introduction and audience Q&A Christina Olson, MD

An academic children's hospital approach to telehealth across the spectrum of care: video visits to remote patient monitoring

Dana A. Schinasi, MD

Duration of Presentation in Minutes

15

Primary care and school-based telehealth best practices, with a focus on historically marginalized pediatric populations
Honora Burnett, MD MPP

Duration of Presentation in Minutes

15

Evaluating past, present and future telehealth services through a multistakeholder (patient, clinician, health system) lens John Chuo, MD, MS, IA

Duration of Presentation in Minutes

15

The intersection of health policy, technology and clinical practice in the pediatric virtual care environment

Brooke Yeager McSwain, MSc, MA

Duration of Presentation in Minutes

15

Opportunities for pediatric economic justice within social programs at the state and federal level

Session Type: Hot Topic Symposi

Submitter: Lucy Marcil

Participant(s)

1. MM

Molly Markowitz, MD

Position:

Instructor in Pediatrics

Organization:

Yale School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. GD

George Dalembert, MD, MSHP

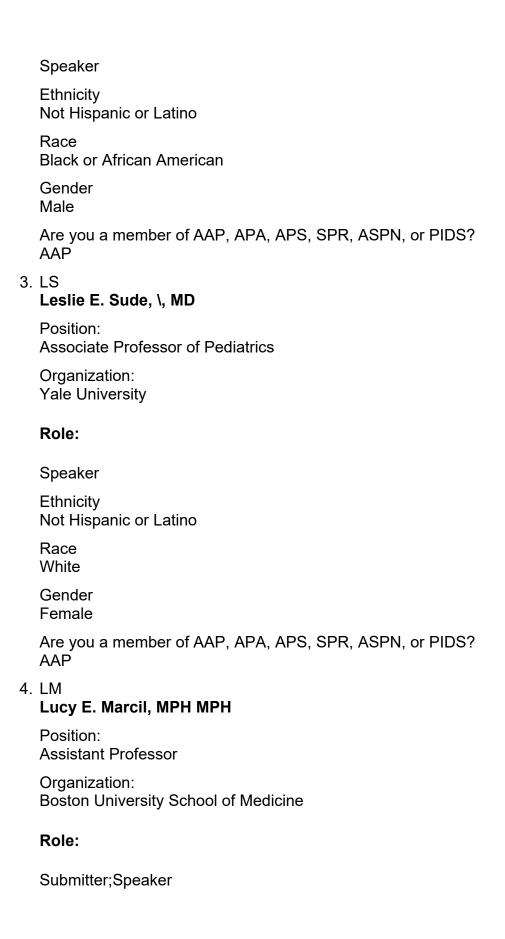
Position:

Asst Prof of Clinical Pediatrics

Organization:

Children's Hospital of Philadelphia

Role:



Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

5. AS

Adam Schickedanz, MD PhD

Position:

Assistant Professor In Residence

Organization:

UCLA Mattel Childrens Hospital

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

Session Description

Session Description

This session will focus on how pediatricians and child health advocates can incorporate social programs specifically focused on financial well-being into their clinic care to help families achieve economic justice and, in turn, health equity. The speakers are all physicians who do this work on the ground at their respective institutions in Boston (Boston Medical Center), New Haven, CT (Yale), Philadelphia (CHOP), and Los Angeles (UCLA). After a brief overview

of the Medical Financial Partnerships (MFPs) they run incorporating social programs into their pediatric settings, speakers will first address the importance of approaching this work with a racial justice lens. Next, they will discuss the power of partnering with community organizations. After that, they will discuss the potential of bundling together social programs to exponentiate their impact. Finally, they will discuss using financial coaching to empower families. Each of these topics highlights a technique that can help practitioners and advocates move from addressing social needs to a more powerful social justice approach. This session will touch on two highlighted PAS 2023 themes: "The Impact of Policies on Health and Research" and "Addressing & Overcoming Racism in Clinical Care and Research."

Learning Objectives

- 1. Describe how practitioners can incorporate social programs and policies into their clinical work "Medical Financial Partnerships") to improve health equity
- 2. Understand the importance of using a racial justice lens to design Medical Financial Partnerships
- Use community partnerships, bundling services, and coaching methodologies to design Medical Financial Partnerships that empower families and improve economic justice

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

25

2. Target audience

Practitioners who work in general or community pediatrics; advocates interested in the intersection of economic well being and health; public health practitioners working to improve economic justice; anyone working to improve health equity

3. Tracks

Academic and Research Skills

Advocacy

Community Pediatrics

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

Health Services Research

Public Health

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable

- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 None
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 The Impact of Policies on Health and Research Addressing & Overcoming Racism in Clinical Care and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

Introduction and Overview of Medical Financial Partnerships Molly Markowitz, MD

Duration of Presentation in Minutes

20

The importance of approaching Medical Financial Partnerships with a racial justice lens

George Dalembert, MD, MSHP

Duration of Presentation in Minutes

15

Partnering with community organizations to strengthen Medical Financial Partnerships

Leslie E. Sude, \, MD

Duration of Presentation in Minutes

15

Bundling economic services to exponentiate impact of Medical Financial Partnerships

Lucy E. Marcil, MPH MPH

Duration of Presentation in Minutes

15

Embedding financial coaching in Medical Financial Partnerships to empower families and Q&A

Adam Schickedanz, MD PhD

Duration of Presentation in Minutes

25

Congenital CMV Infection: Where Are We Now?

Session Type: State of the Art Plenary

Submitter: Pablo Sanchez

Participant(s)

1. PP

Pablo J. Pablo Sanchez, MD

Position:

Professor of Pediatrics

Organization:

Nationwide Children's Hospital -OSU

Role:

Submitter; Speaker; Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR, PIDS

2. MS

Mark R. Schleiss, MD

Position:

American Legion and Auxiliary Heart Research Foundation Professor

Organization:

UMN Medical School

Role:

Speaker; Chair

```
Ethnicity
  Not Hispanic or Latino
  Race
  Prefer not to respond
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  APS, SPR, PIDS
3. AM
  Asuncion Mejias, N/A, MD, PhD, MsCS
  Position:
  Associate Professor, Pediatrics
  Organization:
  Nationwide Children's Hospital
  Role:
  Speaker
  Ethnicity
  Not Hispanic or Latino
  Race
  White
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  APS, SPR, PIDS
4. AP
  Albert Park, MD
  Position:
  Chief Pediatric Otolaryngology
  Organization:
  University of Utah
  Role:
  Speaker
```

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

5. KF

Karen B. Fowler, DrPH

Position:

Professor of Pediatrics, Division of Infectious Diseases

Organization:

University of Alabama School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Congenital CMV (cCMV) infection affects 1 in 200 newborns globally. Because of parental concerns and advocacy, an increasing number of states have mandated targeted CMV screening for newborns who refer on the hearing screen as CMV is the most common nongenetic cause of sensorineural hearing loss. Yet, such targeted screening will not detect 50% of newborns who will develop hearing loss and neurodevelopmental impairment. The pros and

cons of universal screening for cCMV infection continue to be the subject of considerable debate. On one hand, identification of cCMV at birth seems highly desirable, since early identification can allow for optimal long-term audiologic and neurodevelopment assessment, and evaluation for potential use of antiviral therapy. On the other hand, since most children with cCMV have a good prognosis for normal neurologic and audiologic development, critics of universal screening have voiced concerns about the undue anxiety that might arise. Minnesota will be the first and only state to implement universal CMV screening using dried blood spot in 2023. After intense parental legislative advocacy efforts, the state successfully passed in 2021 the "Vivian Act," a bill that directed the state health department to begin a program of universal screening. But what happens after the newborn tests positive for CMV? Recently, studies using molecular techniques (microarray, RNAseq) hold promise for development of a biomarker to predict which infant will develop hearing loss and neurodevelopmental problems. This timely symposium will provide parental as well as specialty perspectives on the current cCMV problem.

Learning Objectives

- Understand the parental perspective of having a child with congenital CMV infection
- 2. Understand the pros and cons of universal screening for congenital CMV
- Know the management and follow-up of infants and children with congenital CMV infection and the potential of blood biomarkers to identify future hearing impairment

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

500

2. Target audience

general pediatrics, neonatologists, pediatric infectious diseases, ENT, audiology, neurology, students, residents, fellows, nurse practitioners, attendings

3. Tracks

Clinical Research
Developmental and Behavioral Pediatrics
General Pediatrics
Infectious Diseases
Neonatology
Neurology

Pharmacology and Therapeutics Public Health Well Newborn

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Sessions on Neonatal Infectious Diseases and Infectious Diseases
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? The Impact of Policies on Health and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

yes: pediatric infectious diseases, neonatology, neurology, ENT, audiology, general and newborn pediatrics

Presentation Titles and Durations

So the Newborn Tests Positive for CMV, What Now? Pablo J. Pablo Sanchez, MD

Duration of Presentation in Minutes

15

Universal Screening for Congenital CMV: Be Careful What You Wish For"! Mark R. Schleiss, MD

Duration of Presentation in Minutes

15

Can We Identify the Infant Who Will Develop Hearing Loss? Asuncion Mejias, N/A, MD, PhD, MsCS

Duration of Presentation in Minutes

15

Congenital CMV Infection and Hearing Loss: The ENT Perspective Albert Park, MD

Duration of Presentation in Minutes

20

Congenital CMV Infection: The Parental Perspective

Karen B. Fowler, DrPH

Duration of Presentation in Minutes

15

Gastroenterology/ Hepatology: All About the Pancreas - The Acute, The Chronic, The Insufficient

Session Type: Hot Topic Symposia

Submitter: maria Perez

Participant(s)

1. MM

Megha S. Mehta, MD

Position:

Assistant Professor

Organization:

University of Texas Southwestern

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. MA

Maisam Abu-El-Haija, MD, MS

Position:

Associate Professor of Pediatrics

Organization:

Cincinnati Children's Hospital Medical Center

Role:

	Speaker
	Ethnicity Prefer not to respond
	Race Prefer not to respond
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
3.	ML Mark Lowe, MD, PhD
	Position: Harvey R. Colten Professor of Pediatric Science
	Organization: Washington University in St. Louis School of Medicine
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APS, SPR
4.	
4.	APS, SPR MP
4.	APS, SPR MP Maria E. Perez Position:
4.	APS, SPR MP Maria E. Perez Position: Assistant Professor of Pediatrics Organization:

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Review the latest up to date information regarding acute pancreatitis, chronic pancreatitis, and pancreatic insufficiency in children and adolescents with some of the world's leading pancreas experts

Learning Objectives

- Gain an improved understanding of the diagnosis, management, and treatment of acute pancreatitis, including use of testing and potential complications
- Gain an improved understanding of the diagnosis, management and treatment of chronic pancreatitis, including use of testing and potential complications
- 3. Gain an improved understanding of exocrine pancreatic insufficiency in children and adolescents, including role of cystic fibrosis testing

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

40-50

2. Target audience

General pediatricians, pediatric subspecialists including gastroenterology and neonatology, pediatric trainees, and other pediatric providers including RNs, APNs, RDs, etc

3. Tracks

Gastroenterology/Hepatology General Pediatrics Pediatric Nutrition

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. please avoid other GI, hepatology, pancreas sessions
- 6. If your session was presented at another conference, please describe the conference and presentation.

 not applicable
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- Does this submission involve one or more specialties or disciplines?
 Gen Peds, GI, Nutrition

Presentation Titles and Durations

Acute Pancreatitis in Children and Adolescents Megha S. Mehta, MD **Duration of Presentation in Minutes** 25

Chronic Pancreatitis in Children and Adolescents Maisam Abu-El-Haija, MD, MS **Duration of Presentation in Minutes** 25

Exocrine Pancreatic Insufficiency in Children and Adolescents Mark Lowe, MD, PhD **Duration of Presentation in Minutes**25

Q&A Session Maria E. Perez **Duration of Presentation in Minutes** 15

An institutional, cross-condition learning network approach to the pursuit of excellent and equitable child health outcomes

Session Type: Hot Topic Symposia

Submitter: Ndidi Unaka

Participant(s)

1. RK

Robert S. Kahn, MD MPH

Position:

Professor of Pediatrics

Organization:

Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APA

2. EM

Emily R. Miller, MD, MS, FAAP

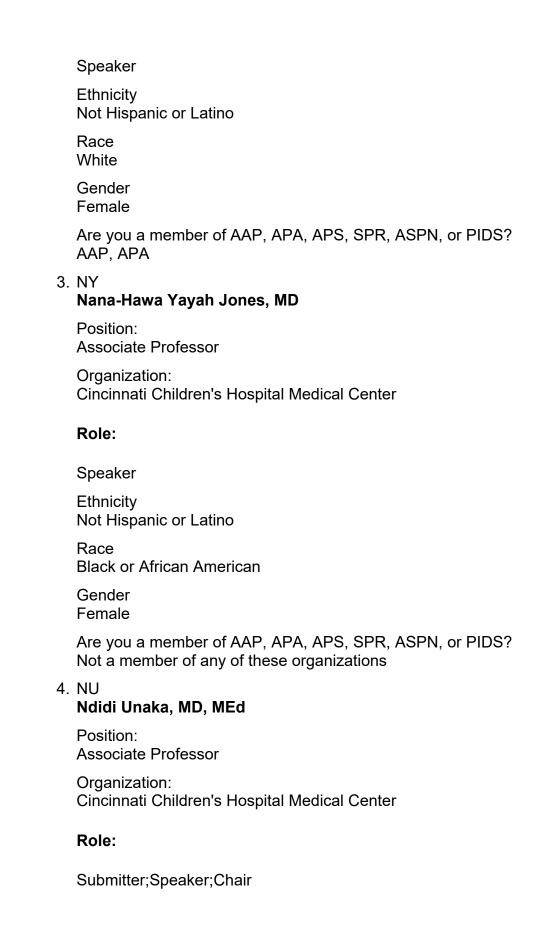
Position:

Attending Neonatologist; Assistant Professor of Pediatrics

Organization:

Cincinnati Children's Hospital Medical Center

Role:



Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

5. AB

Andrew F. Beck, MD MPH

Position:

Associate Professor, Attending Pediatrician

Organization:

Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

Session Description

Session Description

Longstanding societal ills - including racism in all its forms - perpetuate child health inequities. To eliminate these gaps, health systems must pursue equity in partnership with communities and identify ways in which to act and learn quickly. In this session, we will discuss an institutional effort to achieve excellent and equitable health outcomes across pediatric conditions. This effort, called the Health Equity Network (HEN), seeks to identify and act on

upstream key drivers of equity with strategies that generalize across clinical areas and conditions.

Clinical teams (e.g., those addressing asthma, depression, diabetes, neonatal health) commit to measurably close equity gaps on key outcomes that align with our institution's strategic plan. Teams participate in longitudinal cross-condition learning activities with one another and with community partners. SMART aims focus on eliminating disparities in outcomes by race, ethnicity, and/or socioeconomic status.

Together, clinical teams focus on 5 key drivers: 1) accountability for equity; 2) capability to provide the right care at the right time and place and in the right way; 3) enhanced positive and addressed negative social determinants of health; 4) effective connections between medical and social care providers; and 5) trusted relationships between providers, patients, and their families. We will describe our use of quality improvement (QI), advanced analytics, and co-production to create, and grow, a cross-condition learning network within an academic children's hospital. Each core team employs QI support, actionable data, and community engagement specialists to support testing of targeted interventions based on shared theory and drivers.

Learning Objectives

- 1. Consider the role health systems can play in the pursuit of population health equity
- 2. Understand how quality improvement and learning network, advanced analytic, and co-production methods can accelerate health equity
- 3. Delineate tangible next steps supportive of development, scale, and spread of community-connected, networked approaches to population health equity

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

general and subspecialty pediatricians, students and trainees, allied health professionals, operations leaders

3. Tracks

Diversity, Equity, and Inclusion Health Equity/Social Determinants of Health Public Health

Quality Improvement/Patient Safety

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

Not Applicable

5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

May be involved with other workshops and/or symposia

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Addressing & Overcoming Racism in Clinical Care and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Yes the topic is very broad and is relevant to all. Presenters represent the following areas: General pediatrics, Hospital Medicine, Endocrinology, Neonatology

Presentation Titles and Durations

Health equity as an institutional priority: a history

Robert S. Kahn, MD MPH

Duration of Presentation in Minutes

15

Pursuing population health inside the hospital: example efforts from HEN teams

Emily R. Miller, MD, MS, FAAP

Duration of Presentation in Minutes

15

Pursuing population health inside the hospital: example efforts from HEN teams

Nana-Hawa Yayah Jones, MD

Duration of Presentation in Minutes

15

Bridging hospital-based activities with community partners Ndidi Unaka, MD, MEd

Duration of Presentation in Minutes

20

Moving toward scale: building capability for durable, long-term population health

Andrew F. Beck, MD MPH

Duration of Presentation in Minutes

15

The molecular, lifetime and global impact of oxygen for newborn infants

Session Type: State of the Art Plenary

Submitter: **JULEE OEI**

Participant(s)

1. JO Ju-Lee Oei, MD Position: Professor Organization: Royal Hospital for Women Role: Submitter; Speaker; Chair Ethnicity Not Hispanic or Latino Race Asian Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 2. LS Larissa Shimoda, PhD Position: Professor of Medicine Organization: Johns Hopkins University School of Medicine Role: Speaker

	Ethnicity Not Hispanic or Latino
	Race Asian, White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APS
3.	AK Anup Katheria, Katheria, MD
	Position: Associate Professor
	Organization: University of California, San Diego School of Medicine
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR $$
4.	GS Georg Schmoelzer, MD, PhD
	Position: Clinician Scientist
	Organization: University of Alberta Faculty of Medicine and Dentistry
	Role:
	Speaker

	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
5.	JD Juliann Di Fiore
	Position: Research Engineer III
	Organization: Case Western Reserve University
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
6.	SA Steven Abman, MD
	Position: Professor
	Organization: University of Colorado School of Medicine
	Role:
	Speaker

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APS, SPR

7. YN

Yasir Bin Nisar, MMED, MPH, PhD

Position:

Medical Officer

Organization:

World Health Organization

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Oxygen is one of the 479 medicines that the World Health Organization (WHO) considers essential for human health but it is also one of the most underappreciated and least equitably available treatments. Children are the first to suffer from the consequences of both not enough (hypoxia) or too much (hyperoxia) oxygen. Lack of access to appropriate amounts of oxygen and lack of knowledge and ability to recognize inappropriate oxygenation are estimated

to cost >1 million child lives per year.

An understanding of a child's oxygen needs on the backdrop of rapidly changing physiology, is essential to provide safest care. This is especially important for the most vulnerable children, the very preterm and children in lower resourced countries where both oxygen or oxygen monitoring may be unavailable.

This session considers oxygen needs for children as a continuum rather than as a siloed treatment. We offer therapeutic and research solutions and review the impact of oxygen at all life stages. Starting from consideration of oxygen as a molecule, we move on to the infant's oxygen needs before birth (i.e. before the umbilical cord is clamped), to the repercussions of inappropriate oxygenation within the first 5 minutes of life, to the consequences of intermittent hypoxemic spells in the neonatal intensive care unit (NICU) and then to the evolving oxygen requirements in the convalescing infant with bronchopulmonary dysplasia. Finally we consider the tragic plight of children with respiratory infections in lower resourced countries where sufficient oxygen remains, for many, an unattainable goal.

Learning Objectives

- 1. Understand that oxygen is continuously important for all newborn infants, especially the sickest ones who are premature or infected
- 2. Every infant with respiratory problems must have access to the appropriate amount of oxygen and for the amount of oxygen needed to be monitored
- 3. Oxygen is not only important for the NICU but is crucial at the molecular as well as at the global level

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

150-300+

2. Target audience

Neonatologists

Scientists

Policy Makers

Paediatricians

Students

Global Health experts

3. Tracks

Academic and Research Skills

General Pediatrics

Global Neonatal & Children's Health

Neonatology

Pulmonology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Neonatal Clinical trials

Neonatal resuscitation

6. If your session was presented at another conference, please describe the conference and presentation.

European academy of pediatrics and other similar international conferences

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Neonatology

Basic science

Global public health

Presentation Titles and Durations

Introduction

Ju-Lee Oei, MD

Duration of Presentation in Minutes

12

At the molecular level: How do preterm cells respond to oxygen?

Larissa Shimoda, PhD

Duration of Presentation in Minutes

12

Before birth: Does oxygen matter before the umbilical cord is clamped?

Anup Katheria, Katheria, MD

Duration of Presentation in Minutes

12

At birth: How much oxygen does a baby need in the 1st 5 minutes of life? Georg Schmoelzer, MD, PhD

Duration of Presentation in Minutes

12

In the NICU: Are we chasing our tail with intermittent hypoxemia? Juliann Di Fiore

Duration of Presentation in Minutes

12

After birth: How much oxygen does a baby with bronchopulmonary dysplasia need in and outside of the NICU? Steven Abman, MD

Duration of Presentation in Minutes

12

The global picture: Achieving equity for access and monitoring for oxygen for sick infants around the world.

Yasir Bin Nisar, MMED, MPH, PhD

Duration of Presentation in Minutes

12

Addressing the Symptoms of Pediatric Chronic Kidney Disease

Session Type: Hot Topic Symposia

Submitter: Kimberly Reidy

Participant(s)

1. KR

Kimberly J. Reidy, MD

Position:

Associate Professor

Organization:

Children's Hospital at Montefiore

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN

2. KA

Kaushalendra Amatya, PhD

Position:

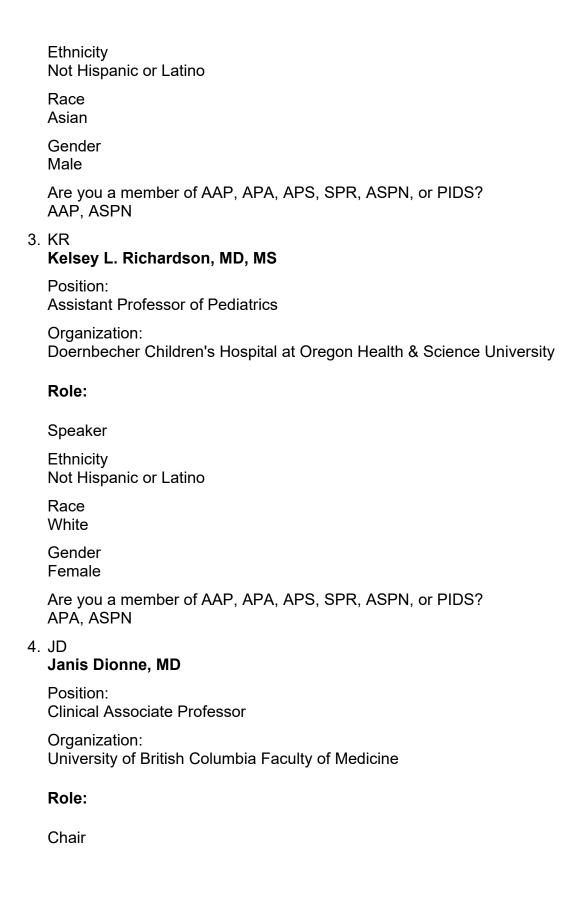
Assistant Professor

Organization:

Children's National Health System

Role:

Speaker



Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN

5. LH

Lyndsay Harshman, MD

Position:

Associate Professor

Organization:

University of Iowa

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR, ASPN

Session Description

Session Description

While care advancements in pediatric nephrology have significantly improved survival of children with kidney disease, renewed focus on what it means to live well is necessary. Physical symptoms are highly prevalent in the experience of chronic kidney disease, and patients and families indicate a desire to have these needs met. Addressing these patient and family-prioritized outcomes can subsequently enable the ability to flourish while living with chronic kidney

disease. This symposium will unite experts to disseminate expertise in identifying, assessing, and managing various symptoms associated with kidney disease. The overall goal of this symposium will be to empower pediatric nephrologists to attend to these myriad symptoms, enabling the flourishing of the patients and families for which they care. Each speaker will provide an overview of methods to identify, assess and manage the symptom of focus.

- 1. Topic/title: Fatigue, Sleep AND Mood Disorders in CKD Objective: The speaker will provide an overview of assessing and managing fatigue and sleep disorders in children with chronic kidney disease
- 2. School and Employment Outcomes in pediatric CKD Objective: The speaker will provide an overview of school and employment outcomes in Pediatric CKD.
- 3. Topic/title: Parental and patient perspective on symptoms in children with CKD

Objective: Family with child with CKD will shares lived experience with CKD symptoms that affect them most and share how well the team did with asking, understanding and providing resources for managing these symptoms.

Learning Objectives

- 1. 1. Recognize effects of pediatric CKD on sleep, mood and behavior.
- 2. Describe effects of pediatric CKD on school and employment outcomes.
- 3. 3. Identify ways to improve symptoms of pediatric CKD.

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

50-100

2. Target audience

trainees, early, mid and late stage career Pediatric nephrologists, palliative care, psychology/mental health clinicians

3. Tracks

Children with Chronic Conditions
Developmental and Behavioral Pediatrics
Mental Health
Nephrology
Palliative Care

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

 other ASPN content
- If your session was presented at another conference, please describe the conference and presentation. n/a
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Palliative care, mental health, pediatric nephrology

Presentation Titles and Durations

Fatigue, Sleep and Mood Disorders in CKD Kaushalendra Amatya, PhD **Duration of Presentation in Minutes** 20

School and Employment Outcomes in Pediatric CKD Kelsey L. Richardson, MD, MS **Duration of Presentation in Minutes** 20

Q and A Lyndsay Harshman, MD **Duration of Presentation in Minutes** 10

Strategies to prevent CLABSI, CAUTI, and VAP in hospitalized children: 2023 update

Session Type: Hot Topic Symposia

Submitter: Gregory Priebe

Participant(s)

1. CW

Charlotte Woods-Hill, MD MSHP

Position:

Assistant Professor

Organization:

Perelman School of Medicine at the University of Pennsylvania

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. CF

Charles B. Foster, MD

Position:

Medical Director of Pediatric Infection Prevention and Professor of Pediatrics

Organization:

Cleveland Clinic Children's

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? PIDS

3. GP

Gregory P. Priebe, MD

Position:

Associate Professor

Organization:

Boston Children's Hospital

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

Despite the existence of guidelines around prevention bundles, hospitalized children continue to suffer from hospital-acquired device-associated infections, including central line associated bloodstream infections (CLABSI), catheter-associated UTI (CAUTI), and ventilator-associated pneumonia. These hospital-

acquired infections lead to increased morbidity and costs and also account for a large proportion of antibiotic use and misuse in hospitalized children. This session will provide an update on established and new prevention strategies for CLABSI, CAUTI, and VAP, focusing on recent evidence.

Learning Objectives

- 1. Understand the latest evidence around CLABSI prevention in hospitalized children.
- 2. Describe the impact of implementation of CAUTI prevention bundles on pediatric CAUTI rates in a multicenter network.
- 3. Understand whether implementation of a proposed prevention bundle is associated with decreased rates of pediatric VAE.

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

100-200

2. Target audience

Physicians, nurses, and respiratory therapists who work in PICUs, CICUs, and NICUs; infectious diseases specialists; infection preventionists

3. Tracks

Basic Science

Critical Care

Infectious Diseases

Neonatology

Quality Improvement/Patient Safety

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Other PIDS sessions, other sessions on hospital-acquired infections

6. If your session was presented at another conference, please describe the conference and presentation.

Not presented at another conference

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

9. Does this submission involve one or more specialties or disciplines?

Yes: critical care, neonatology, infectious diseases, quality improvement

Presentation Titles and Durations

Understanding risk factors for pediatric CLABSI can inform new prevention strategies

Charlotte Woods-Hill, MD MSHP

Duration of Presentation in Minutes

30

Preventing pediatric CAUTI in a multicenter QI network Charles B. Foster, MD

Duration of Presentation in Minutes

30

Old and new strategies for prevention of pediatric ventilator-associated pneumonia and pediatric ventilator-associated events Gregory P. Priebe, MD

Duration of Presentation in Minutes

Perinatal Health Equity Solutions - Changing Hearts and Minds or Action?

Session Type: State of the Art Plenary

Submitter: Jochen Profit

Participant(s)

JP Jochen Profit, MD, MPH Position:

Professor of Pediatrics

Organization: Stanford University

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR

2. SH

Sunah Hwang, MD MPH PhD

Position:

Associate Professor of Pediatrics

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

The COVID-19 pandemic has catapulted health equity to the forefront of the national conscience. In response, the academic community has responded with a variety of diversity, equity, and inclusion efforts. Some have advocated to leverage quality improvement methodology to address disparities. Others have advocated for and introduced educational efforts to raise awareness of personal biases and support an anti-racism agenda. Little evaluation has accompanied these efforts.

This session will review pathways to health inequity and critically appraise various efforts to address disparities. Dr. Profit will provide a review of perinatal health equity and the role of the health care delivery system in addressing disparities. Dr. Hwang will present her research addressing structural racism in Colorado. Dr. Fraiman will summarize what is known about diversity, equity, inclusion education and its effect on patient outcomes. The presentations will be followed by a moderated panel discussion with audience participation.

Learning Objectives

- 1. support health equity action within their home institution
- 2. describe current commonly applied efforts to address clinical disparities
- advocate in their home institutions for health equity interventions to be linked to clinical outcomes

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

Trainees and faculty interested in health equity

3. Tracks

Diversity, Equity, and Inclusion

General Pediatrics

Health Equity/Social Determinants of Health

Health Services Research

Medical Education

Neonatology

Quality Improvement/Patient Safety

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Other health equity sessions
- 6. If your session was presented at another conference, please describe the conference and presentation.

This would be a useful session for the Vermont Oxford Annual Quality Congress where clinical teams convene to optimize care for patients in the NICU setting

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Addressing & Overcoming Racism in Clinical Care and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

General Pediatrics and Neonatology

Presentation Titles and Durations

Perinatal Health Equity - Where Do We Go From Here Jochen Profit, MD, MPH

Duration of Presentation in Minutes

25

Addressing Health Equity In Colorado Using The Tools of Quality Improvement Sunah Hwang, MD MPH PhD

Duration of Presentation in Minutes

Associate Chair for DEI: Setting up for Success or Failure

Session Type: Hot Topic Symposia

Submitter: Gary Freed

Participant(s)

Chair

1. GF Gary L. Freed, MD, MPH Position: Professor Organization: University of Michigan Role: Submitter; Chair Ethnicity Not Hispanic or Latino Race White Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR 2. JR Jean Raphael, MD, MPH Position: **Professor of Pediatrics** Organization: **Baylor College of Medicine** Role:

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Ethnicity
  Not Hispanic or Latino
  Race
  Black or African American
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, APA, APS, SPR
3. MD
  Matthew Davis, MD MAPP
  Position:
  Chair, Department of Pediatrics
  Organization:
  Ann & Robert H. Lurie Children's Hospital of Chicago
  Role:
  Speaker
  Ethnicity
  Not Hispanic or Latino
  Race
  White
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  APA, APS, SPR
4. AE
  Angela Ellison, MD, MSc
  Position:
  Associate Professor of Pediatrics; Vice Chair, Department of Pediatrics
  Organization:
  Childrens Hospital of Philadelphia
  Role:
  Speaker
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Ethnicity Not Hispanic or Latino Race Black or African American Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR 5. KH Karen D. Hendricks-Muñoz, MD, MPH Position: William Tate Graham Professor of Pediatrics & Chair Division of **Neonatal Medicine** Organization: Children's Hospital of Richmond at VCU Role: Speaker Ethnicity Hispanic or Latino Race Black or African American, White Gender **Female** Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS 6. MV Marietta Vazquez, MD Position: **Professor of Pediatrics** Organization: Yale University - Pediatrics

Role:

Speaker

Ethnicity Hispanic or Latino

Race

Prefer not to respond

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR, PIDS

Session Description

Session Description

Many departments of pediatrics have created leadership positions (e.g., Vice or Associate Chair,) centered in Diversity, Equity, and Inclusion (DEI). Great variability exists in the required qualifications, strategic portfolios, duties, scope of authority, reporting structure, mentorship, financial and administrative support, and performance expectations associated with these positions. This variability has led to a wide range of experiences of those holding these leadership positions regarding their success or failure in the role. While the potential for career growth and meaningful impact is great, success may be undermined in how these positions are structured and who is appointed into the role. Experiences range from senior faculty appointees with significant financial and administrative support to junior level faculty with little or no guidance or resources. This Hot Topic Symposium takes on the challenges and opportunities facing DEI leaders. Through the experiences of four speakers who hold, or have held these roles, we share a range of outcomes, success and failures, and lessons learned. Finally, the perspective of a department chair who recently developed such a role, with success in mind, will be shared. Session Chairs: Gary L. Freed MD, MPH and Jean L. Raphael MD, MPH Speakers:

Angela Ellison MD, MPH: DEI Leadership: Aligning Perception with Reality Karen Hendricks-Munoz MD, MPH: Reflections from a Senior Faculty Member: First Year on the Job

Marietta Vazquez MD: Career Advancement and Mission Advancement: Achieving Multiple Goals

Matthew Davis MD, MPP: View from the Chair: Setting up the Position for Success

Learning Objectives

- 1. Determine what is needed to increase the liklihood of a successful appointment into the role of Associate Chair for DEI
- 2. Understand the potential challenges in the role and how to mitigate them
- 3. Develop a successful career in DEI Leadership

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

150

2. Target audience

Academic Pediatricians, Leaders in Academic Pediatrics, Aspiring Leaders in Academic Medicine, Trainees

3. Tracks

Advocacy

Career Development

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

Leadership and Business Training

Wellness and Well-being

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

 Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

DEI Programming

Academic Leadership

6. If your session was presented at another conference, please describe the conference and presentation.

N/A

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

No

Presentation Titles and Durations

View from the Chair: Setting up the Position for Success Matthew Davis, MD MAPP

Duration of Presentation in Minutes

10

DEI Leadership: Aligning Perception with Reality Angela Ellison, MD, MSc

Duration of Presentation in Minutes

10

Reflections from a Senior Faculty Member: First Year on the Job Karen D. Hendricks-Muñoz, MD, MPH **Duration of Presentation in Minutes** 10

Career Advancement and Mission Advancement: Achieving Multiple Goals Marietta Vazquez, MD

Duration of Presentation in Minutes

Implementation of Rapid Genomic Sequencing for Critically III Infants: What's Next?

Session Type: Hot Topic Symposia

Submitter: Monica Wojcik

Participant(s)

1. MW

Monica H. Wojcik, MD MPH FAAP FACMG

Position:

Attending Neonatologist and Geneticist, Assistant Professor of Pediatrics

Organization:

Boston Children's Hospital and Harvard Medical School

Role:

Submitter; Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian, White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

2. TW

Tara L. Wenger, MD, PhD

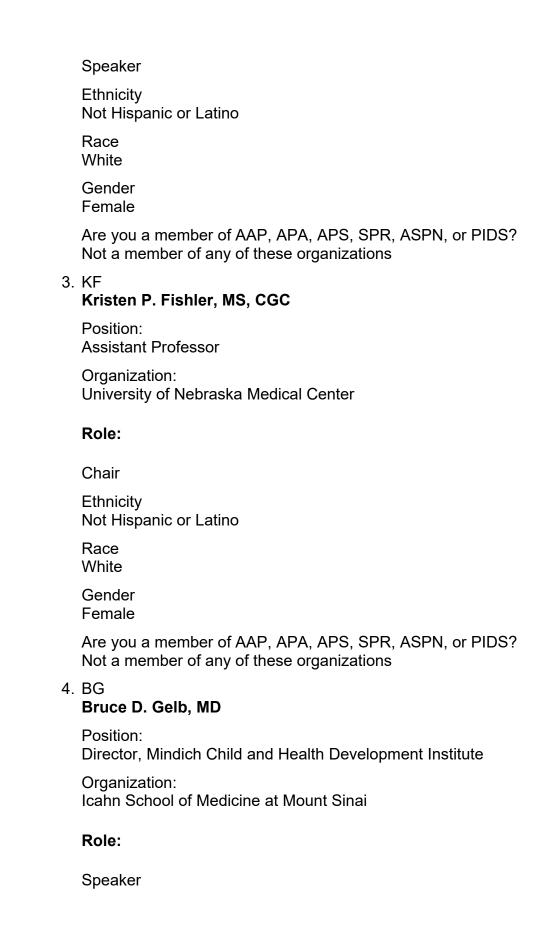
Position:

Associate Professor of Genetic Medicine

Organization:

University of Washington

Role:



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APS, SPR

5. BC

Bimal P. Chaudhari, MD, MPH

Position:

Assistant Professor of Pediatrics

Organization:

Nationwide Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

Description: Rapid genomic sequencing for diagnosis of infants in an intensive care unit has been proven to have high diagnostic and clinical utility. However, optimal implementation remains incompletely understood and is limited by cost, workforce, and other barriers. In this session, presenters with diverse areas of expertise will review key aspects of rapid genomic sequencing implementation to improve outcomes for hospitalized infants.

Rationale for proposal: Although rapid genomic sequencing has been shown to diagnose infants earlier and to have a higher yield than other modalities, it is still not routinely applied across intensive care units and questions remain regarding which patients to select for testing. Understanding the full range of benefits of rapid sequencing, in addition to implementation barriers and possible solutions, will aid in optimal dissemination of this diagnostic approach that has revolutionized neonatal care.

Learning Objectives

- 1. Identify barriers to equitable access to genomic sequencing for critically ill infants and strategies for overcoming these barriers
- 2. Identify stakeholders with differing concepts of turnaround time for rapid genome sequencing of critically ill infants and the impact on clinical practice.
- 3. Describe the benefits of diagnostic genetic testing, explain how rapid genome sequencing for critically ill infants is paid for, and relevant factors for decision makers.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100-200

2. Target audience

clinical geneticists, genetic counselors, trainees, clinical lab managers

3. Tracks

Critical Care

Diversity, Equity, and Inclusion

Genomics/Epigenomics

Health Equity/Social Determinants of Health

Health Services Research

Neonatology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 - Avoid concurrent sessions related to newborn genomic sequencing.
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Yes - involves genetics, neonatology, and health services research.

Presentation Titles and Durations

Discovering What Matters Most: Parent Perceptions of Health Outcomes after Diagnostic Genetic Evaluation in the NICU Monica H. Wojcik, MD MPH FAAP FACMG

Duration of Presentation in Minutes

15

Centering access equity in newborn genome sequencing Tara L. Wenger, MD, PhD

Duration of Presentation in Minutes

15

Bundle of Joy: How Inpatient Genome Sequencing for Critically III Infants Gets Paid For

Bruce D. Gelb, MD

Duration of Presentation in Minutes

15

How Rapid is Rapid? Multiple Stakeholder Perspectives on Turnaround Time in Rapid Genome Sequencing

Bimal P. Chaudhari, MD, MPH

Duration of Presentation in Minutes

Trauma-Informed Primary Care: An Approach for Advancing Health Equity and Workforce Wellness

Session Type: Hot Topic Symposia

Submitter: katherine Baker

Participant(s)

1. KB

Katherine Baker, MD

Position:

Associate Professor of Clinical Pediatrics

Organization:

University of Rochester School of Medicine and Dentistry

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APA

2. DS

Daryl Sharp, Sharp, PhD, RN, FAAN

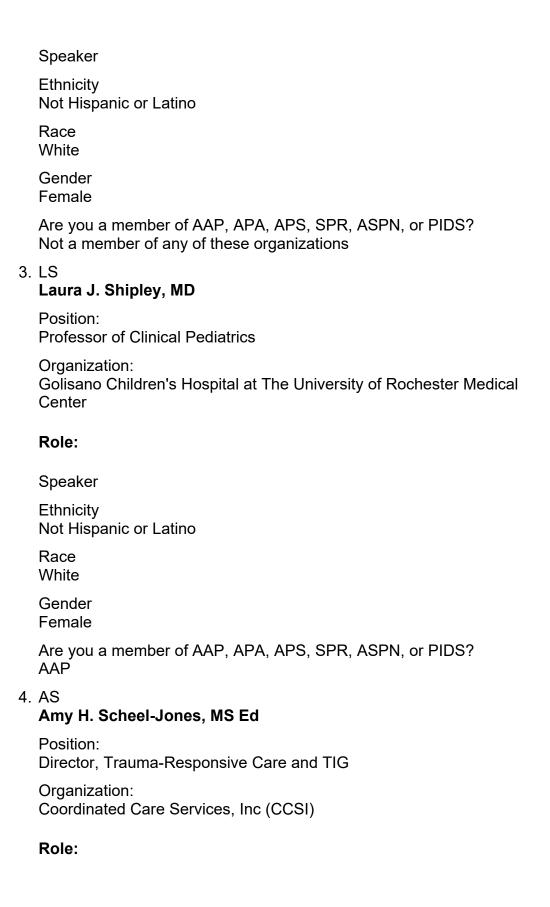
Position:

Senior Advisor

Organization:

Accountable Health Partners/University of Rochester Medical Center

Role:



Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. AC

Andrew Cohen, PhD

Position:

Faculty Psychologist

Organization:

Golisano Children's Hospital at The University of Rochester Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APA

Session Description

Session Description

Trauma-informed care (TIC), which respects the pervasive nature of trauma and promotes environments of healing, is a key dimension of equity-oriented healthcare, an effective tool for addressing social determinants of health

(SDOH), and a critical vector for reducing health disparities. It also provides essential support for distressed healthcare teams overwhelmed by pandemic-related challenges. We will describe an innovative approach guided by the Montefiore measurement model for Trauma-Informed Primary Care (TIPC) that harnesses key relationships between 1) an accountable care organization (Accountable Health Partners; AHP); 2) a community-based organization with expertise in TIC and behavioral health (Coordinated Care Services, Inc; CCSI) and 3) an academic pediatric primary care practice (Golisano Children's Hospital Pediatric Practice; GCHPP). We will highlight a collaborative learning model to develop TIPC best practices and a dissemination approach that adapts TIPC initiatives to practice and patient needs. We will illustrate how TIPC offers an opportunity to advance health equity and workforce wellness through dynamic partnership among key community and healthcare experts.

Dr. Baker will introduce the session, provide an overview of core TIC principles, and facilitate the closing Q&A.

Drs. Sharp and Shipley will discuss the vision and execution for establishing TIPC as a network standard guiding care management, especially for populations disproportionally affected by SDOH.

Ms. Scheel-Jones will offer guidance to organizations in operationalizing trauma-informed, equity-focused systems change; emphasize trauma-responsive leadership; and evaluate impact of organizational change.

Drs. Cohen and Baker will describe practice-level TIPC implementation as an approach to change culture and improve workforce wellness.

Learning Objectives

- Describe how trauma-responsive leadership, enriched peer learning opportunities, and sustainable training models contribute to improved outcomes for patients and staff
- 2. Discuss trauma-informed interventions to support staff who are experiencing current or residual trauma in the workplace
- 3. Explain how a trauma-informed cross-sector collaboration can identify opportunities and challenges, across various practice settings, to advance health equity, patient care, and workforce wellness

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

General pediatricians, sub-specialists, behavioral health providers, advanced practice practitioners, health system administrators, community-based organizations

3. Tracks

Community Pediatrics

Diversity, Equity, and Inclusion

General Pediatrics

Health Equity/Social Determinants of Health

Public Health

Wellness and Well-being

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

State of the Art Plenaries, Behavioral Health SIG, Continuity Clinic SIG

- If your session was presented at another conference, please describe the conference and presentation. n/a
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic is trauma-informed primary care involving general pediatrician and pediatric psychologist from an academic pediatric practice, the director of trauma-informed care from a community based organization, as well as a general pediatrician and senior advisor from an accountable care organization.

Presentation Titles and Durations

Introduction of the session, organizations, and speakers; An overview of TIPC core principles; Q&A

Katherine Baker, MD

Duration of Presentation in Minutes

30

An accountable care organization's approach to advancing health equity through trauma-informed primary care Daryl Sharp, Sharp, PhD, RN, FAAN

Duration of Presentation in Minutes

10

An accountable care organization's approach to advancing health equity through trauma-informed primary care Laura J. Shipley, MD

Duration of Presentation in Minutes

10

Operationalizing trauma-informed equity-focused systems change in healthcare Amy H. Scheel-Jones, MS Ed

Duration of Presentation in Minutes

20

Utilizing trauma-informed care as a vector for culture change and workforce wellness

Andrew Cohen, PhD

Duration of Presentation in Minutes

Defining Long COVID in Children: RECOVER (Researching COVID to Enhance Recovery), an NIH-Funded National Initiative

Session Type: Hot Topic Symposia

Submitter: Rachel Gross

Participant(s)

1. RG

Rachel S. Gross, MD, MS

Position:

Assistant Professor of Pediatrics and Population Health

Organization:

NYU Grossman School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

2. SM

Sindhu Mohandas, MD, MRCPCH

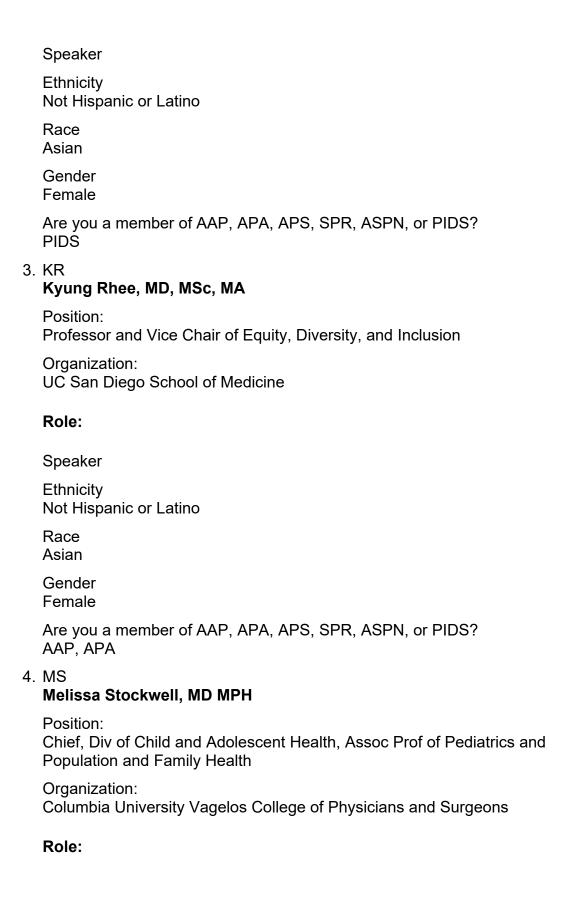
Position:

Assistant Professor of Pediatrics, Divison of Infectious Diseases

Organization:

Children's Hospital Los Angeles

Role:



Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR

5. VF

Valerie J. Flaherman, MD, MPH

Position:

Professor of Pediatrics and Epidemiology and Biostatistics

Organization:

University of California, San Francisco, School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

Session Description

Session Description

This session is a presentation by pediatric RECOVER (Researching COVID to Enhance Recovery) research investigators. RECOVER is an NIH-funded national multi-site observational study to learn about the long-term effects of COVID in children, with >100 sites across the US, actively recruiting ~20,000

caregiver-child dyads between birth and 25 years old, with ~6,000 being followed longitudinally for up to 4 years. RECOVER includes diverse recruitment efforts (e.g., community-based, health care-based, and pregnancy cohorts) and data collection methods (e.g., surveys, direct assessments including neurocognitive and anthropometric, and biospecimen collection), which will foster research in multiple scientific domains across the life course. RECOVER aims to understand recovery from a COVID infection and develop a pediatric definition of Long COVID or PASC (post-acute sequelae of SARS-CoV-2).

This session brings together national experts from RECOVER to describe what is known about Long COVID in children, why it is important, and how RECOVER is addressing the limitations of prior COVID-related studies. The session will describe the RECOVER initiative and will summarize the existing evidence related to: 1) What is the RECOVER initiative?; 2) What are the prevailing characteristics to date of Long COVID in children?; 3) What are the potential risk and resiliency factors associated with developing Long COVID?; 4) What is known about how long COVID affects child physical health, mental health and development and how will RECOVER data help to ultimately elucidate mechanisms of impact?; and 5) What is known about how prenatal exposure to SAR-CoV-2 during pregnancy affects infant health and development?

Learning Objectives

- 1. Describe the evidence related to Long COVID in children, including associated symptoms, risk and resiliency factors, and long-term effects.
- 2. Describe the RECOVER initiative and define how the study will support prevention and treatment of Long COVID in children in the future.
- 3. Describe the evidence of how prenatal exposure to SARS-CoV-2 during pregnancy affects infant health and development.

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

400

2. Target audience

Students, Residents, Fellows, Pediatricians, PNPs, Researchers, Policy makers, and Health care systems leaders

3. Tracks

Academic and Research Skills Advocacy

Children with Chronic Conditions

Clinical Research

Community Pediatrics

COVID-19

Developmental and Behavioral Pediatrics

Diversity, Equity, and Inclusion

Environmental Health

General Pediatrics

Health Equity/Social Determinants of Health

Infectious Diseases

Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Other RECOVER related sessions, other sessions on COVID-19 research and Long COVID.

Other sessions on social determinants of health.

Other session on chronic illness.

6. If your session was presented at another conference, please describe the conference and presentation.

This will be the first national presentation of the RECOVER pediatric observational study.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Science is Real: Research, Misinformation and Trust

8. Additional comments

In addition to the speakers, this session will be on behalf of the RECOVER consortium.

9. Does this submission involve one or more specialties or disciplines?

COVID-19: involving General Pediatrics, Developmental Behavioral Pediatrics, Public Health, Hospital Medicine, Community Medicine, and Infectious Disease Medicine.

Presentation Titles and Durations

What is the RECOVER Study and How Will It Fill Critical Scientific Gaps in Our Knowledge About Long COVID in Children?

Rachel S. Gross. MD. MS

What are the Prevailing Characteristics of Long COVID in Children and How Will RECOVER Enhance This Definition of Long COVID? Sindhu Mohandas, MD, MRCPCH

Duration of Presentation in Minutes

15

What Risk and Resiliency Factors Are Associated with Long COVID in Children and What Will RECOVER Add to This Evidence? Kyung Rhee, MD, MSc, MA

Duration of Presentation in Minutes

15

How Does Long COVID Affect Child Health and Development and How Will RECOVER Ultimately Elucidate Mechanisms of Impact?

Melissa Stockwell, MD MPH

Duration of Presentation in Minutes

15

How Does Exposure to SAR-CoV-2 During Pregnancy Affect Infant Health and Development and How Will RECOVER Study This? Valerie J. Flaherman, MD, MPH

Duration of Presentation in Minutes

This is Not an Asylum: The Use of Behavioral Restraints in Pediatrics and Considerations for Modern Pediatric Training

Session Type: Hot Topic Symposia

Submitter: Andrea Dean

Participant(s)

1. AD

Andrea L. Dean, M.D., FAAP

Position:

Associate Professor

Organization:

Baylor College of Medicine

Role:

Submitter; Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. JL

Jason Lambrese, MD

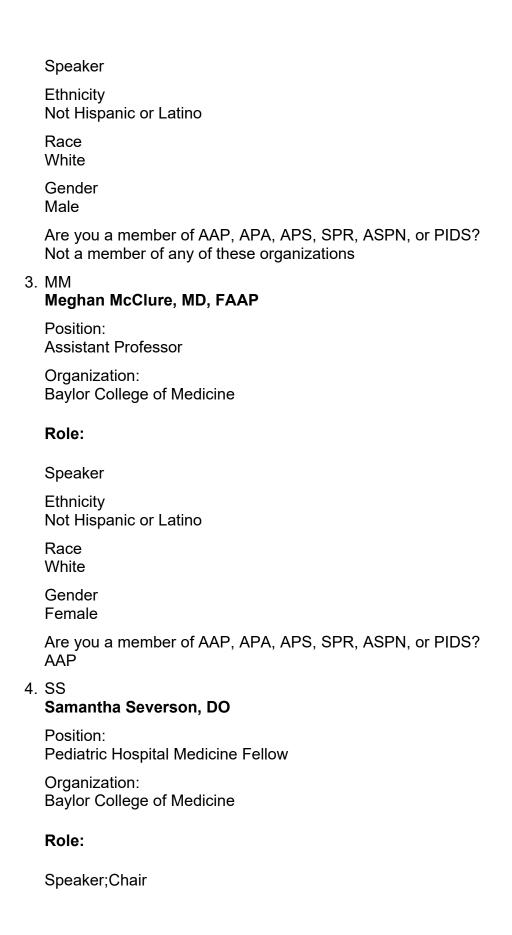
Position:

Child and Adolescent Psychiatrist

Organization:

Cleveland Clinic Children's

Role:



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

In the face of the mental health crisis, academic pediatricians are managing previously unfamiliar psychiatric complaints and supporting trainees simultaneously experiencing this shift in the field. In the inpatient setting, a cornerstone in pediatric curricula, behavioral health hospitalizations have surged. Of the most challenging encounters are children and adolescents with impulsivity and aggression, often complicated by autism spectrum disorder or intellectual disability. When agitated or combative, they can present risk to themselves, family and staff, and application of physical restraint is considered. Trainees are frequently called upon to make final decisions in these matters, a responsibility that requires knowledge of rules and regulations, as well as a balanced consideration of staff wellbeing and the humanity of the patient. Individuals' decisions and reactions to such encounters are loaded with a storied history of abuse under the guise of care and ongoing societal distrust of treatment for mental illness. It is important, therefore, that educators not only teach appropriate clinical procedures for restraint use, but also understand and reflect on how the cultural and historical context impacts trainee perspectives when caring for of these patients.

This session, prepared by hospitalists, a psychiatrist, and a trainee, with input from an ethicist and lawyer, gives participants a historical, clinical, legal and ethical framework for using restraints and supporting trainees in behavioral health encounters. Familiar cases encourage the audience to apply concepts. Slides are compelling, with art, photographs, and factoids. We invite participation through individual and shared reflections as well as time for questions.

Learning Objectives

- Summarize the history of psychiatry that informs societal attitudes towards treatment of the mentally ill and personal reactions to use of restraint for these patients
- 2. Utilize the correct category and type of restraint according to the indication and incorporate this material into teaching and pediatric curricula
- 3. Apply ethical, legal, and regulatory principals and guidelines for physicians and trainees who use restraints in their care of behavioral health patients

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

Pediatric educators, educational leaders, pediatric hospitalists, mentors to trainees

3. Tracks

Adolescent Medicine

Developmental and Behavioral Pediatrics

General Pediatrics

Hospital Medicine

Medical Education

Mental Health

Wellness and Well-being

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 - "The Pink Stuff fights the Germs" Workshop if accepted (Dr Ashira Klein submitting, Dr. Dean co-presenter)
- 6. If your session was presented at another conference, please describe the conference and presentation.

A similar presentation was presented at PHM 2022 in Orlando. However, it was more clinically oriented towards hospitalists where as this presentation is geared toward clinicians AND educators supporting trainees.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Science is Real: Research, Misinformation and Trust

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Hospital Medicine, Psychiatry, Education, Wellness, Ethics.

Presentation Titles and Durations

From chains to chaise: The evolution of psychiatric treatment and perceived morality of restraints leading to modern day use

Andrea L. Dean, M.D., FAAP

Duration of Presentation in Minutes

27

Indications, considerations, and options: Modern restraint use for pediatric patients in the hospital setting and beyond Jason Lambrese, MD

Duration of Presentation in Minutes

23

Hippocrates to Joint Commission: Ethics, laws and rules to guide restraint use in the acute care setting Meghan McClure, MD, FAAP

Duration of Presentation in Minutes

20

Keeping pace with a changing field: How to prepare trainees (while we prepare ourselves) for a new era of pediatrics Samantha Severson, DO

Duration of Presentation in Minutes

Do Results of Randomized Controlled Trials Performed in High-Income Countries Translate to Low-And Middle-Income Countries?

Session Type: Hot Topic Symposia

Submitter: Sudhin Thayyil

Participant(s)

1. SS

Seetha Shankaran, MD

Position:

Professor of Pediatrics

Organization:

Wayne State University School of Medicine

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR

2. ST

Sudhin Thayyil, MD, PhD

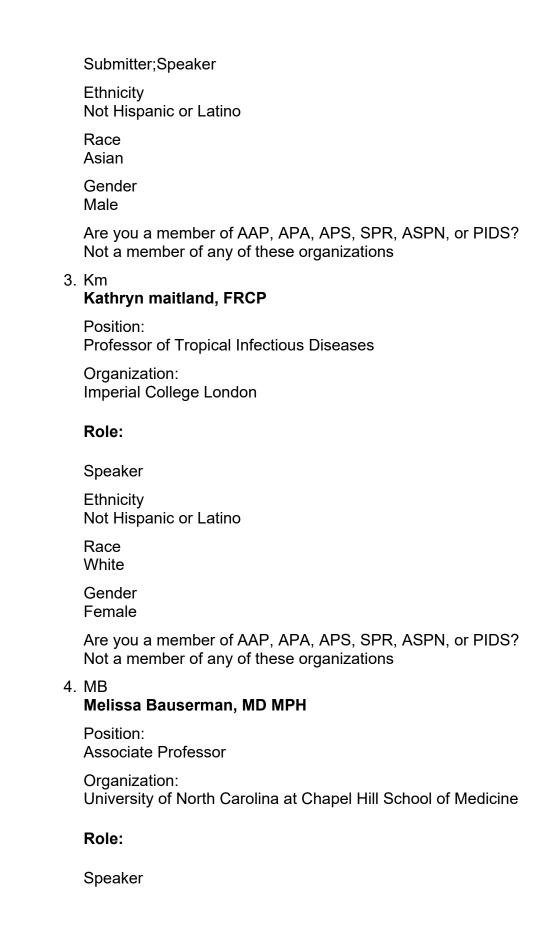
Position:

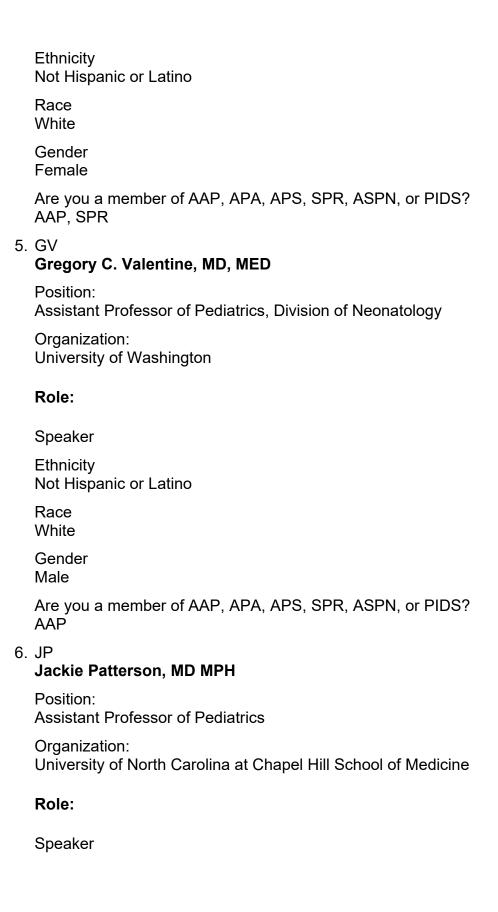
Professor

Organization:

Imperial College London

Role:





Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

7. ZB

Zulfigar A. Bhutta

Position:

Professor and Director

Organization:

The Aga Khan University

Role:

Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

Less than 20% of all clinical trials are conducted in low-and middle-income countries (LMICs) who often shoulder the highest childhood disease burden. This scholarly session will discuss how the design and conduct of investigator-initiated global health trials in LMICs requires a set of skills that are unique from those required to conduct research in high-income countries (HICs). Experienced global health researchers will share their personal experiences

and equip participants with a framework to undertake impactful global health research.

The following global health trials will be discussed: FEAST, HELIX, ASPIRIN and PPaX. Leaders from each of these trials will illustrate best practices for global health trials by examining such topics as asking appropriate research questions, designing trials for the LMIC context, choosing a suitable primary outcome, and maintaining equipoise about results (keeping in mind that HIC randomized controlled trials [RCTs] may not translate to LMICs). Trialists will also address unique issues of executing RCTs in LMICs such as obtaining appropriate administrative/governmental approvals, training, and certifying research teams, conducting a trial protocol, and disseminating results, including the challenge of adopting effective therapies when results differ from established clinical practices. The heterogeneous effects of interventions in different populations and thus importance of studying health interventions within the context in which they will be used will be emphasized. The session will also cover the informed consent process and draw on implementation science methodologies to illustrate opportunities to engage with families, frontline workers, stakeholders, and end-users to ensure interventions are appropriate for the LMIC context.

Learning Objectives

- 1. Frame correct research questions and design for global health trials to achieve the maximum health impact [benefit] for the low- and middle-income countries population.
- 2. Understand why research findings in high-income countries may not always translate to low- and middle-income countries.
- 3. Describe and address the challenges and ethical issues around research governance and informed consent in low- and middle-income countries

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

150

2. Target audience

This session would be of interest to clinicians working in neonatal medicine and pediatrics, researchers undertaking clinical trials in child health both in high income and low and middle-income countries, clinical trialists and methodologists, advocacy groups on racial and social equalities, medical journal editors and peer reviewers, policy makers and funding bodies.

3. Tracks

Academic and Research Skills

Clinical Research

Critical Care

Diversity, Equity, and Inclusion

Emergency Medicine

Global Neonatal & Children's Health

Neonatology

Neurology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Neonatal neurology

Clinical trials

6. If your session was presented at another conference, please describe the conference and presentation.

Not applicable

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

Addressing & Overcoming Racism in Clinical Care and Research Science is Real: Research, Misinformation and Trust

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Neonatology, critical care, global health, community groups

Presentation Titles and Durations

Why do we need Clinical Trials in Low and Middle-income Countries? Seetha Shankaran, MD

Duration of Presentation in Minutes

5

Anatomy of the Hypothermia for Encephalopathy in Low and Middle-income Countries (HELIX) Trial Sudhin Thayyil, MD, PhD

Duration of Presentation in Minutes

12

Anatomy of the Fluid Expansion as Supportive Therapy (FEAST) Trial Kathryn maitland, FRCP

Duration of Presentation in Minutes

12

Anatomy of the Low-dose Aspirin for Prevention of Preterm Delivery (ASPIRIN) Trial

Melissa Bauserman, MD MPH

Duration of Presentation in Minutes

12

Anatomy of the Prevention of Prematurity and Xylitol (PPaX) Trial Gregory C. Valentine, MD, MED

Duration of Presentation in Minutes

12

How do we engage Local Stakeholders in Research in Low and Middle-income Countries?

Jackie Patterson, MD MPH

Duration of Presentation in Minutes

12

Scholarly Session ID: 1360356

Neonatal Dysphagia – Choosing the Right Diagnostic Tool

Session Type: **Hot Topic Symposia** Submitter: **Sreekanth Viswanathan**

Participant(s)

1. SV

Sreekanth Viswanathan, MD, MS

Position:

Interim Division Chief of Neonatology, Associate Professor of Pediatrics

Organization:

Nemours Children's Hospital

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

2. ML

Maureen A. LeftonGreif, PhD

Position:

Professor of Pediatrics, Otolaryngology-Head & Neck Surgery, and Physical Medicine & Rehabilitation

Organization:

Johns Hopkins University School of MedicineJohns Hopkins

University School of MedicineJohns Hopkins University School of MedicineJohns Hopkins University School of MedicineJohns Hopkins University School of MedicineJohns Hopkins University School of MedicineJohns Hopkins University School of MedicineJohns Hopkins University School of MedicineJohns Hopkins University School of MedicineJohns Hopkins University School of MedicineJohns Hopkins University School of MedicineJohns Hopkins University School of MedicineJohns Hopkins University School of MedicineJohns Hopkins University School of MedicineJohns Hopkins University School of Medicine

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

3. RK

Ranjith Kamity, MD

Position:

Associate Professor of Pediatrics

Organization:

New York University Long Island School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

Dysphagia in neonates continues to be under-diagnosed, with few therapeutic options when diagnosed. Videofluoroscopic Swallow Study (VFSS) is a well-established diagnostic tool providing dynamic images of bolus flow throughout the upper aerodigestive tract in real-time. However, it is a time-limited study due to the risk of ionizing radiation. Fiberoptic Endoscopic Evaluation of Swallowing (FEES) has gained prominence in neonates over the past decade, with promising impact. FEES advantages include direct visualization of respiratory- airway coordination before and after swallowing and no risk of radiation. However, FEES does not show bolus movement in the mouth or during the act of swallowing. High Resolution Impedance Manometry (HRIM) is used to analyze the swallow mechanism from a physiological standpoint. Swallowing is a pressure event and HRIM measures these pressure events in response to swallowing, thereby can quantify the biomechanics of milk transit. All three diagnostic modalities require training and expertise to perform and interpret findings.

This session will review three distinct modalities of diagnostic evaluation tools for neonatal dysphagia from radiological, endoscopic, and physiological perspectives. The session with begin with an introduction to neonatal dysphagia, followed by presentation on the pros and cons of VFFS, FEES, and HRIM by subject experts. The presentations will be followed by a panel discussion aimed at consolidating the evidence for each of the three study techniques in the work up of dysphagia in neonates.

Learning Objectives

- To describe the indications of three distinct diagnostic tools available for evaluating neonatal dysphagia- VFSS, FEES, and HRIM
- To appraise the advantages and disadvantages of these diagnostic tools in neonatal dysphagia
- 3. To understand how to leverage the capabilities of different swallowing evaluation tools in neonatal dysphagia work up

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

30

2. Target audience

Neonatologists, Pediatric gastroenterologists, Pulmonologists, Speech Therapists and other neonatal therapists, Neonatology fellows, Pediatric residents, dysphagia researchers

3. Tracks

Gastroenterology/Hepatology

Neonatology

Pediatric Nutrition

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
- 6. If your session was presented at another conference, please describe the conference and presentation.

 n/a
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

n/a

9. Does this submission involve one or more specialties or disciplines?

Neonatology, Gastroenterology, Pulmonology, Nutrition

Presentation Titles and Durations

Introduction: Prevalence and Burden of Neonatal Dysphagia, HRIM in Neonatal Dysphagia

Sreekanth Viswanathan, MD, MS

Duration of Presentation in Minutes

30

VFSS in Neonatal Dysphagia Maureen A. LeftonGreif, PhD **Duration of Presentation in Minutes**

20

FEES in Neonatal Dysphagia Ranjith Kamity, MD

Duration of Presentation in Minutes

20

Scholarly Session ID: 1363421

Recruiting and Retaining Physicians with Disabilities

Session Type: Panel Discussion

Submitter: Daniel Rauch

Participant(s)

1. DR

Daniel Rauch, MD

Position:

Professor of Pediatrics

Organization:

Tufts University School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

2. AR

Amy R. Rule, Rule, MD MPH

Position:

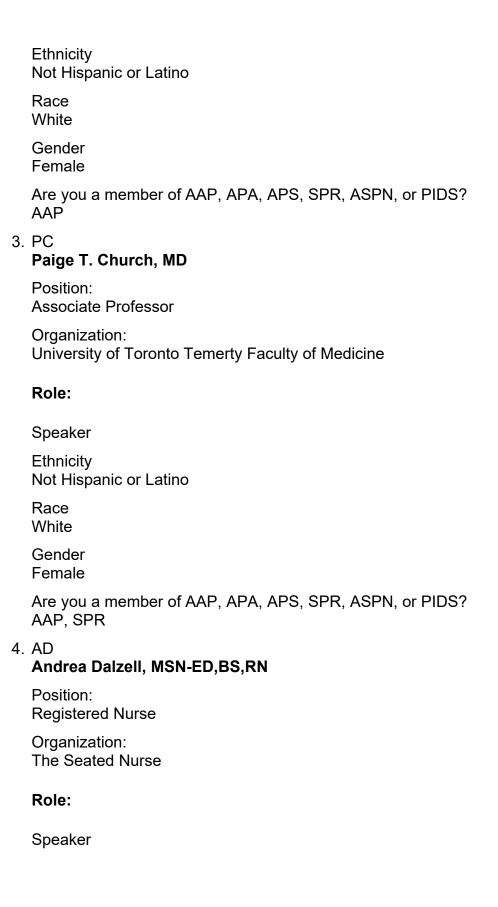
Assistant Professor of Clinical Pediatrics

Organization:

Emory University School of Medicine

Role:

Speaker



Ethnicity

Prefer not to respond

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. jv

joshua vova, MD

Position:

Asst Professor

Organization:

Children's Healthcare of Atlanta

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

Session Description

Session Description

Diversity and inclusion issues have moved to the forefront of discussions about faculty recruitment and retention. A group that needs to be included in these efforts are those with disabilities. The panel will discuss barriers to recruiting individuals with disabilities including identification and accommodations. The presentation will then shift to retention and promotion. Panelists will share their lived experience with lessons learned and suggestions for improvement.

Learning Objectives

- 1. learn the relevant regulatory statues
- 2. appreciate the barriers to the job search
- 3. develop strategies for retention

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

Attendees with a disability, anyone responsible for faculty recruitment and retention

3. Tracks

Advocacy

Career Development

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

Wellness and Well-being

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Other DEI presentations
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

This panel expands the DEI work of PAS into an area previously not addressed.

9. Does this submission involve one or more specialties or disciplines?

The presenter are from multiple specialties and the issue impacts all of pediatrics

Presentation Titles and Durations

Introduction
Daniel Rauch, MD **Duration of Presentation in Minutes**5

My Experience Amy R. Rule, Rule, MD MPH **Duration of Presentation in Minutes** 15

My Experience
Paige T. Church, MD **Duration of Presentation in Minutes**15

My Experience Andrea Dalzell, MSN-ED,BS,RN **Duration of Presentation in Minutes** 15

My experience joshua vova, MD **Duration of Presentation in Minutes** 15

Scholarly Session ID: 1351230

Outpatient Antibiotic Stewardship: Updates on Benchmarks, Allergies, and Equity Considerations

Session Type: Hot Topic Symposia

Submitter: Rana El Feghaly

Participant(s)

1. RE

Rana E. El Feghaly, MD, MSCI

Position:

Associate Professor

Organization:

Children's Mercy Kansas City

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, PIDS

2. MK

Matthew P. Kronman, MD, MSCE

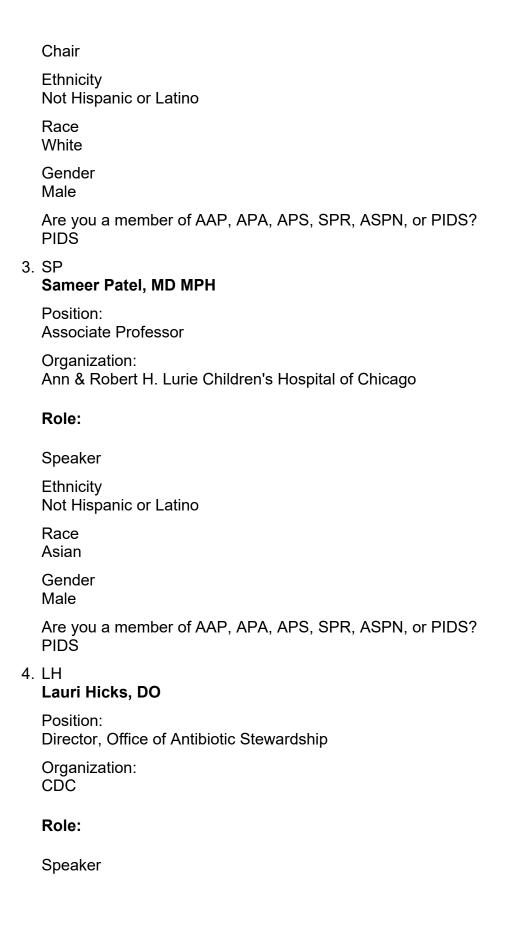
Position:

Professor

Organization:

University of Washington School of Medicine

Role:



	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
5.	TJ Torsten Joerger, MD, MSCE
	Position: Attending Physician
	Organization: Children's Hospital of Philadelphia
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, PIDS
6.	LB Laura Bio, PharmD
	Position: Clinical Pharmacy Specialist
	Organization: Lucile Packard Children's Hospital Stanford
	Role:
	Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? PIDS

7. SK

Sophie Katz, MD, MPH

Position:

Assistant Professor, Pediatric Infectious Diseases

Organization:

Monroe Carell Jr. Children's Hospital at Vanderbilt

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, PIDS

Session Description

Session Description

Antibiotic resistance, primarily driven by antibiotic overuse, is a threat to public health. "Antibiotic stewardship is a practice dedicated to prescribing antibiotics only when necessary and, when antibiotics are considered necessary, promoting use of the appropriate agent(s), dose, duration, and route of therapy to optimize clinical outcomes while minimizing the unintended consequences of antibiotic use." Over 80% of antibiotics given to children are prescribed in the

outpatient setting, and ambulatory stewardship (AS) is increasingly recognized as a target area for focused attention. Despite that, most institutions do not yet have robust outpatient AS programs, and very few have dedicated support for outpatient AS efforts.

During this session, national leaders in the field will highlight novel approaches to outpatient pediatric stewardship and discuss useful and effective outpatient stewardship interventions and techniques. These will include description of new areas of stewardship focus (such as dosing, duration, allergies), new benchmarking metrics used for antibiotic prescribing, identifying key issues that drive disparate antibiotic prescribing based on race and location, and learning ways to provide more equitable antibiotic prescribing.

This session will therefore provide practical tools for participants to improve the quality of their antibiotic prescribing, will address important issues of equity in medicine, and will be relevant to general pediatricians, hospitalists, emergency medicine and infectious diseases specialists, and all those who work in emergency departments, urgent care centers, ambulatory clinics, and ambulatory health care systems.

Learning Objectives

- 1. To highlight the importance of outpatient antimicrobial stewardship for child health
- 2. To implement novel strategies and metrics to improve antibiotic use in children in ambulatory settings.
- 3. To promote antibiotic stewardship and equitable care across various ambulatory settings.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50-100

2. Target audience

General pediatricians, hospitalists, emergency medicine and infectious diseases specialists, and all those who work in emergency departments, urgent care centers, ambulatory clinics, and ambulatory health care systems.

3. Tracks

Advocacy
Clinical Research
Community Pediatrics
Diversity, Equity, and Inclusion
Emergency Medicine

Epidemiology
General Pediatrics
Health Equity/Social Determinants of Health
Health Services Research
Hospital Medicine
Infectious Diseases
Pharmacology and Therapeutics

Quality Improvement/Patient Safety

School and Community Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 PIDS top abstracts
- If your session was presented at another conference, please describe the conference and presentation.

 No
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research
Addressing & Overcoming Racism in Clinical Care and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Infectious diseases, pharmacy, public health (CDC representation)

Presentation Titles and Durations

Outpatient ASP Benchmarking: What's New in Pediatrics?

Rana E. El Feghaly, MD, MSCI

Duration of Presentation in Minutes

12

Drivers of Prolonged Antibiotic Therapy Sameer Patel. MD MPH

Duration of Presentation in Minutes

12

Health Equity in Antimicrobial Prescribing Lauri Hicks, DO

Duration of Presentation in Minutes

12

Penicillin Allergy Labels in Children

Torsten Joerger, MD, MSCE **Duration of Presentation in Minutes**12

Demystifying Amoxicillin and Amoxicillin-clavulanate Dosing Laura Bio, PharmD **Duration of Presentation in Minutes** 12

Low-effort, High-impact Interventions to Improve Outpatient Antibiotic Use Sophie Katz, MD, MPH **Duration of Presentation in Minutes**12

Scholarly Session ID: 1364522

Best Practices for Educational Integrated Mental Health Clinic Models

Session Type: Hot Topic Symposia

Submitter: Elizabeth Chawla

Participant(s)

1. LR

Lisa Rasmussen, MD

Position:

Assistant Clinical Professor, Associate Program Director Pediatric Residency

Organization:

University of California, Davis, School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

2. KW

Katherine Watson, DO

Position:

Assistant Prof, Co-Program Director Pediatric Residency Training Program

Organization:

UPMC Childrens Hospital of Pittsburgh

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

3. EC

Elizabeth M. Chawla, MD

Position:

Associate Professor of Pediatrics

Organization:

Georgetown University School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

Session Description

Session Description

The American Academy of Pediatrics (AAP), the American Academy of Child and Adolescent Psychiatry (AACAP), and the National Academies of Sciences, Engineering, and Medicine (NASEM) have all suggested integrated mental health care as one strategy to combat the current youth mental health crisis in

the United States, as it improves access to mental health services for patients and families. An equally loud cry from the American Board of Pediatrics (ABP), the Association of Pediatric Program Directors (APPD), and the AAP has also called for improved education of pediatric trainees in addressing mental and behavioral health (MBH) concerns in their patients. In an effort to respond to both of these needs, there is a growing trend in pediatric academic institutions to develop integrated MBH clinics within resident continuity clinics. However, many different models exist, with various funding sources, with and without intentional educational components, and no consensus on the role of colocated mental health professionals vs primary care faculty. This session will address these and other challenges of educational integrated MBH clinic models and offer some practical solutions. We will highlight three different academic institutions with established integrated clinic models, and discuss structure, funding, educational components, learner outcome data, and lessons learned. Finally, the panel will give a summary of best practices for educational integrated MBH clinics based on the literature and our combined experiences, with time for open audience discussion.

Learning Objectives

- describe the different models of integrated mental health care in the outpatient clinic setting
- 2. understand the tensions inherent to integrated clinic models between providing mental health care to patients and facilitating pediatric trainee education
- 3. understand best practices for establishing an educational integrated MBH clinic at their home institution

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

general pediatrics faculty at academic institutions, general pediatricians in the community, continuity clinic directors, program directors/associate program directors, mental health providers, pediatric trainees, department chairs, healthcare administrators or those who design (and reimburse) systems of healthcare delivery, healthcare policy makers

3. Tracks

Community Pediatrics
Developmental and Behavioral Pediatrics
General Pediatrics

Medical Education Mental Health Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
- If your session was presented at another conference, please describe the conference and presentation.
 NA
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

8. Additional comments

Unable to add all the pieces of the agenda in the "Presentation and Duration Task", as we have been unable to assign more than one task to a speaker. We are including the full agenda here, as directed when I reached out to tech support:

- **Introduction Elizabeth Chawla (chair/speaker) 5 minutes

 **Mental and Behavioral Health (MBH) Continuity Clinic Integration at
 UC Davis: Resident Comfort with Common MBH Diagnoses Lisa
 Rasmussen (speaker) 20 minutes
- **Integrated Mental and Behavioral Health Clinic at UPMC Children's Primary Care, Assessment to Management Kate Watson (speaker) 20 minutes
- **Six Years of an Integrated Continuity Clinic at Georgetown: What Our Graduates' Practice Habits Tell Us About the Effectiveness of this Educational Model Elizabeth Chawla (speaker/chair) 20 minutes **Putting it all Together: Best Practices for Educational Integrated Mental Health Clinic Models Elizabeth Chawla (speaker/chair) 10 minutes
- **Q&A and discussion 15 minutes all three presenters, will be facilitated by session chair
- 9. Does this submission involve one or more specialties or disciplines?

The content/research to be presented includes work that involved specialists from general pediatrics, child & adolescent psychiatry, DBP, medical education (residency program leaders), and billing/healthcare delivery; although the speakers who will be presenting in person are all general pediatricians from academic institutions, as well as residency program leadership, they are all presenting on behalf of the various multidisciplinary teams at their home institutions.

Presentation Titles and Durations

Mental and Behavioral Health (MBH) Continuity Clinic Integration at UC Davis: Resident Comfort with Common MBH Diagnoses Lisa Rasmussen, MD

Duration of Presentation in Minutes 20

Integrated Mental and Behavioral Health Clinic at UPMC Children's Primary Care, Assessment to Management Katherine Watson, DO

Duration of Presentation in Minutes 20

Six Years of an Integrated Clinic at Georgetown: What Our Graduates Tell Us About the Effectiveness of this Educational Model Elizabeth M. Chawla, MD

Duration of Presentation in Minutes 50

Scholarly Session ID: 1358628

The Children's Health Insurance Program (CHIP) at 25: Where are we now and what does the future hold?

Session Type: Hot Topic Symposia

Submitter: Shetal Shah

Participant(s)

1. SS

Shetal Shah, Shah, MD

Position:

Clinical Professor of Pediatrics

Organization:

New York Medical College

Role:

Submitter; Speaker; Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

2. NW

Nick Wallace, MPP

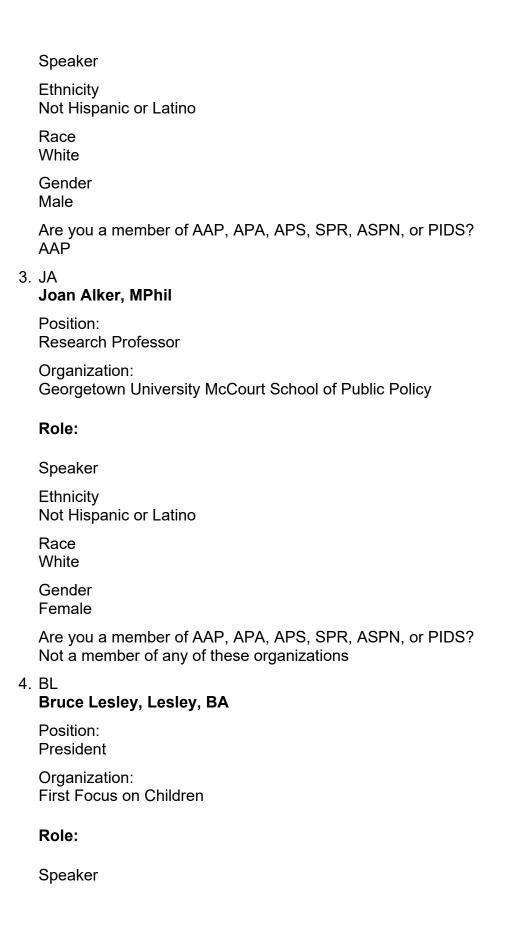
Position:

Policy Associate, Federal Advocacy

Organization:

American Academy of Pediatrics

Role:



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. LC

Lisa M. Costello, MD, MPH

Position:

Assistant Professor Pediatrics

Organization:

West Virginia University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

Session Description

Session Description

Turning 25 years-old this year, the Children's Health Insurance Program (CHIP) is an integral part of the children's health coverage landscape. Nationally, 9.6 million children are covered through the program, with family income eligibility requirements varying by state. As a federal-state partnership, pediatricians have an influential voice regarding eligibility requirements and services. However many pediatricians are not aware of the importance of this

program or potential changes which can impact the number of children covered by CHIP. Further, prohibitions on disenrollment from CHIP created during the pandemic led to 336,000 newly enrolled children. However, how states will treat children covered by CHIP once federal protections are lifted is unknown and will necessitate vigorous advocacy by academic pediatricians.

This symposium will review the history of the CHIP program and provide an introduction to the program. It will further review the increases in enrollment that have occurred as a result of the COVID pandemic. Speakers will discuss how state-based policies may impact enrollment once the federally-declared public health emergency ends. The potential for permanent funding for CHIP, once discussed as part of President Biden's "Build Back Better Program," will also reviewed. The symposium will conclude with practical advocacy advice on how to engage with state and federal officials to strengthen CHIP.

Introduction to the Children's Health Insurance Program

The Relationship of Medicaid and CHIP and Coverage Losses as a Result of the COVID Pandemic

Permanent Funding for CHIP: The Path Ahead

Advocating for Improvements to Your State's CHIP Program: An Insider's View.

Learning Objectives

- 1. Provide historical understanding of the scope and importance of the role CHIP plays in providing health insurance coverage to children.
- 2. Identify the current state of children's health insurance coverage under CHIP immediately prior to, and in the context of the COVID pandemic.
- Describe future means of strengthening the CHIP program, including opportunities for permanent funding and identify potential federal and statebased advocacy opportunities for academic pediatricians.

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

Medical Students, Residents, Fellows and Faculty interested in rates of children's health insurance coverage, federal/state advocacy and health services research

3. Tracks

Advocacy

Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Pediatric Policy Council Topic Symposium and Pediatric Policy Council Legislative Breakfast
- If your session was presented at another conference, please describe the conference and presentation.
 N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? The Impact of Policies on Health and Research
- 8. Additional comments

Session is co-sponsored by: American Academy of Pediatrics, Academic Pediatric Association, American Pediatric Society, Society for Pediatric Research, Association of Medical School Pediatric Department Chairs.

9. Does this submission involve one or more specialties or disciplines?

Topic is health insurance coverage including advocacy, policy and health services research.

Presentation Titles and Durations

Welcome and Speaker Introductions Shetal Shah, Shah, MD

Duration of Presentation in Minutes

15

Introduction to the Children's Health Insurance Program Nick Wallace, MPP

Duration of Presentation in Minutes

15

The Relationship of Medicaid and CHIP and Coverage Losses as a Result of the COVID Pandemic

Joan Alker, MPhil

Duration of Presentation in Minutes

15

Permanent Funding for CHIP: The Path Ahead

Bruce Lesley, Lesley, BA

Duration of Presentation in Minutes

15

Advocating for Improvements to Your State's CHIP Program: An Insider's View Lisa M. Costello, MD, MPH **Duration of Presentation in Minutes**

15

Scholarly Session ID: 1344776

Child Advocacy in Action: Success Stories to Build On

Session Type: Hot Topic Symposia

Submitter: Tina Cheng

Participant(s)

1. DK

David M. Keller, Keller, MD

Position:

Professor of Pediatrics

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS

2. JW

Joseph L. Wright, MD MPH

Position:

Professor of Pediatrics and Health Policy & Management

Organization:

University of Maryland Schools of Medicine and Public Health

Role:

Speaker

```
Ethnicity
  Not Hispanic or Latino
  Race
  Black or African American
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, APA, APS
3. TC
  Tina L. Cheng, MD, MPH
  Position:
  Chair of Pediatrics, CMO, Director of Cincinnati Children's Research
  Foundation
  Organization:
  Cincinnati Children's Hospital, University of Cincinnati
  Role:
  Submitter; Speaker; Chair
  Ethnicity
  Not Hispanic or Latino
  Race
  Asian
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, APA, APS, SPR
4. LL
  Lois K. Lee, MD, MPH
  Position:
  Associate Professor
  Organization:
  Boston Children's Hospital, Harvard Medical School
  Role:
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Speaker

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Ethnicity
  Not Hispanic or Latino
  Race
  Asian
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, APA, APS, SPR
5. JK
  Jonathan D. Klein, MD, MPH
  Position:
  Associate Vice Chancellor for Research and Samuel and Savithri Raj
  Professor of Pediatrics
  Organization:
  University of Illinois at Chicago
  Role:
  Speaker
  Ethnicity
  Not Hispanic or Latino
  Race
  White
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, APS
6. LC
  Lisa Chamberlain, MD MPH
  Position:
  Professor of Pediatrics
  Organization:
  Stanford Univeristy School of Medicine
  Role:
  Speaker
```

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS

Session Description

Session Description

Child health professionals are natural advocates. We recognize the great potential of each child and the importance of investing early for healthy children and the adults they will become. We witness social inequities affecting child health and are advocates in practice and policy on the individual, family, community, state, federal, and global levels. We are a trusted voice for the stories of the children and families we serve.

This session highlights success stories in child advocacy through case studies of child advocacy in action. The session will address timely issues of importance: mental health, racism, firearm safety, alternative healthcare payment models, and tobacco.

A review of successful public health advocacy efforts identified four ingredients of success: 1) Highly credible scientific evidence that persuades policy makers and withstands attack from those whose interests are threatened; 2) Passionate advocates who are committed and unrelenting; 3) Partnership with the media for public awareness and action; and 4) Law and regulation. These areas will be explored and lessons learned discussed. The session will focus on skills and tools for effective advocacy.

To create change it has been said that we need the three "W's": the Wisdom, the Will and the Wallet for effective child advocacy. This session hopes to inspire the wisdom and will and strengthen the voice of children, adolescents, and families.

Learning Objectives

1. Identify opportunities for advocacy on the community, institutional, state, federal and global levels.

- 2. Describe programs and policies needed to advance child, adolescent, and family health.
- 3. Acquire inspiration and advocacy skills for change.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

Trainees, general pediatricians, pediatric subspecialists, educators, health services and policy researchers, policymakers

3. Tracks

Academic and Research Skills

Advocacy

Community Pediatrics

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

Injury Prevention

Public Health

Tobacco Prevention

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Advocacy

Health Policy

Diversity, Equity, Inclusion

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

Addressing & Overcoming Racism in Clinical Care and Research

Science is Real: Research, Misinformation and Trust

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic is Advocacy which involves all groups

Presentation Titles and Durations

Community Advocacy: Addressing the Youth Mental Health Crisis

David M. Keller, Keller, MD

Duration of Presentation in Minutes

12

Institutional Advocacy: Addressing Racism

Joseph L. Wright, MD MPH

Duration of Presentation in Minutes

12

State Advocacy: Making Maternal Child Health a Priority in Maryland

Tina L. Cheng, MD, MPH

Duration of Presentation in Minutes

12

Federal Advocacy: Firearm Safety

Lois K. Lee, MD, MPH

Duration of Presentation in Minutes

12

Global Advocacy: Tobacco Jonathan D. Klein, MD, MPH

Duration of Presentation in Minutes

12

Advocacy in Academics: Programs and Policies Required to Engage

Lisa Chamberlain, MD MPH

Duration of Presentation in Minutes

12

Hot Topic Debates: Antimicrobial Use in Neonates

Session Type: Debate/Pro-Con Discussion

Submitter: Matthew Kronman

Participant(s)

1. MK

Matthew P. Kronman, MD, MSCE

Position:

Professor

Organization:

University of Washington School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? PIDS

2. PJ

Preeti Jaggi, Jaggi, MD

Position:

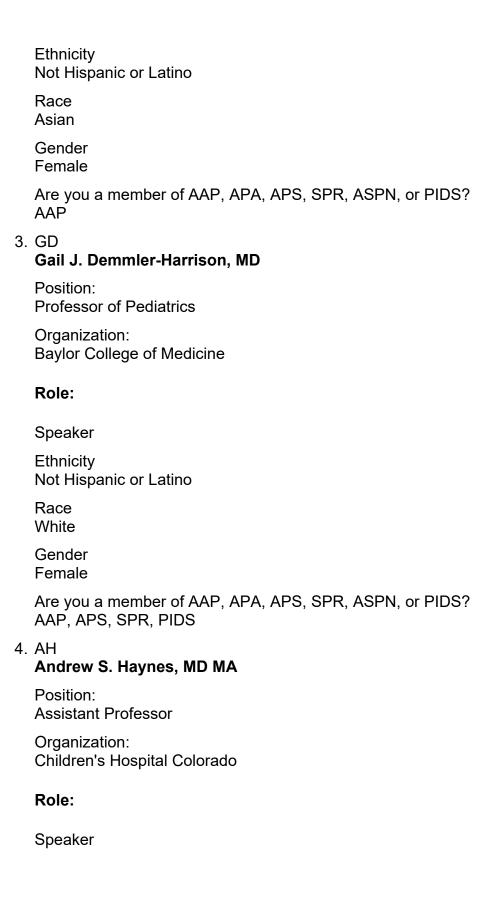
Associate Professor of Pediatrics, Division of Infectious Diseases

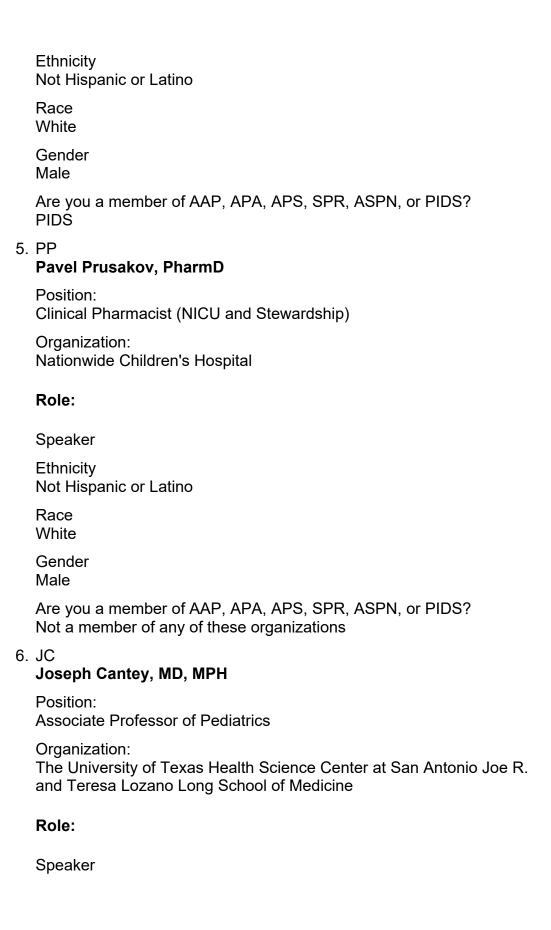
Organization:

Emory University School of Medicine

Role:

Speaker; Chair





	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR, PIDS
7.	AM Asuncion Mejias, N/A, MD, PhD, MsCS
	Position: Associate Professor, Pediatrics
	Organization: Nationwide Children's Hospital
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APS, SPR, PIDS
8.	KD Keerti Dantuluri, MD, MPH
	Position: Assistant Professor of Pediatric Infectious Diseases
	Organization: Levine Children's Hospital at Atrium Health
	Role:
	Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, PIDS

Session Description

Session Description

This session will involve 3 debates on clinically relevant hot topics relating to antimicrobial use for neonates, including whether and when enteral antibiotics are appropriate for the management of hospitalized neonates; whether antibiotic therapy should be provided for neonates with "culture negative sepsis" and for how long; and whether febrile neonates undergoing sepsis evaluation should receive empiric acyclovir. During this session, national leaders in Infectious Diseases will debate these topics. The format will involve three 30 minute debates, in which each speaker will review the scientific evidence for their position for 8-10 minutes (20 minutes total), respond to the other speaker for 2 minutes (4 minutes total), and then garner audience participation through live polling and questions for the remaining 6-10 minutes total. The presentation of the initial position could be pre-recorded if needed, while the rebuttals and Q&A section would ideally be live. The overarching goal of the session is to highlight the evidence for and against the antibiotic management strategies covered for these common situations in hospitalized neonates, and to provide a fun and interactive session reaching a broad multidisciplinary audience.

This engaging session will therefore be relevant to those who care for hospitalized neonates, including medical student and resident trainees, general pediatricians, hospitalists, and specialists in emergency medicine, neonatology, and infectious diseases.

Learning Objectives

1. Describe the data for and against use of enteral antimicrobials in neonates.

- 2. Review situations in which antibiotics should be provided to neonates with culture-negative sepsis, and the risks and benefits associated with that therapy.
- 3. Evaluate the data for, and risks and benefits of, empiric acyclovir use for febrile neonates undergoing sepsis evaluation.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50-100

2. Target audience

Those who care for hospitalized neonates, including medical student and resident trainees, general pediatricians, hospitalists, and specialists in emergency medicine, neonatology, and infectious diseases.

3. Tracks

Emergency Medicine

General Pediatrics

Hospital Medicine

Infectious Diseases

Neonatology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Other PIDS programming (PIDS top abstracts)
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic is antimicrobial use in neonates, involving relevance for General Pediatrics, Hospital Medicine, Emergency Medicine, Neonatology, and Infectious Diseases

Presentation Titles and Durations

Matthew P. Kronman, MD, MSCE

Duration of Presentation in Minutes

2

Hot Topic Debates: Antimicrobial Use in Neonates - Introduction

Preeti Jaggi, Jaggi, MD

Duration of Presentation in Minutes

2

Antibiotic therapy for infections in neonates should only be administered IV - PRO

Gail J. Demmler-Harrison. MD

Duration of Presentation in Minutes

15

Antibiotic therapy for infections in neonates should only be administered IV - CON

Andrew S. Haynes, MD MA

Duration of Presentation in Minutes

15

Culture negative sepsis in the NICU should be treated for 5 days - PRO Pavel Prusakov. PharmD

Duration of Presentation in Minutes

15

Culture negative sepsis in the NICU should be treated for 5 days - CON Joseph Cantey, MD, MPH

Duration of Presentation in Minutes

15

Acyclovir should be used for the empiric management of febrile neonates < 4 weeks undergoing full sepsis evaluation - PRO

Asuncion Mejias, N/A, MD, PhD, MsCS

Duration of Presentation in Minutes

15

Acyclovir should be used for the empiric management of febrile neonates < 4 weeks undergoing full sepsis evaluation - CON

Keerti Dantuluri, MD, MPH

Duration of Presentation in Minutes

15

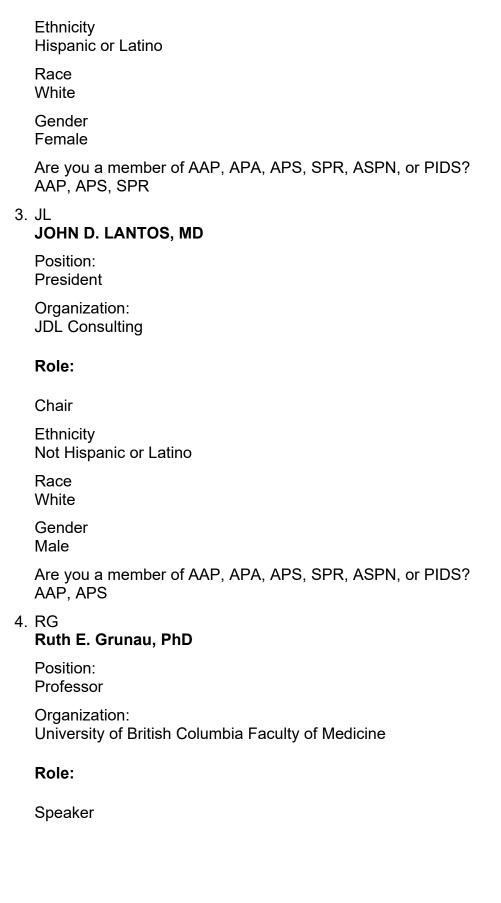
Hurting Babies for Research

Session Type: **Panel Discussion** Submitter: **Keith Barrington**

Participant(s)

Speaker

1. KB Keith Barrington, MB ChB Position: **Professor of Pediatrics** Organization: Universite de Montreal Faculty of Medicine Role: Submitter; Speaker Ethnicity Not Hispanic or Latino Race White Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR 2. SJ Sandra E. Juul, MD, PhD, MD, PhD Position: **Professor** Organization: University of Washington Role:



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APS

Session Description

Session Description

Babies included as subjects in research projects are often subjected to additional pain, over and above that required for their clinical care. This panel will discuss the implications of such additional pain, how to reduce it, and when it may be acceptable. We will present data about the adverse impacts of pain in the neonatal period, give examples of reducing painful interventions in a research project, and address how to improve research design and evaluation so that future babies in research projects will not suffer additional harms. Dr Ruth Grunau will present the evidence regarding the adverse impacts of pain in the newborn on acute physiologic disturbance, brain structure, and long term function. Dr Sandra Juul will present a real-life example of a major multicenter research project which replaced placebo injections with sham procedures. Dr Keith Barrington will describe recent studies that subjected the babies to additional pain, and compae them to other similar projects that were designed to minimize painful procedures. Dr John Lantos will moderate and provide an overview of the ethical issues.

Learning Objectives

- 1. Describe the adverse impacts of pain to the developing human infant
- 2. Describe the ways in which neonatal research projects can lead to additional pain for research subjects.
- 3. Plan neonatal research projects which do not increase painful experiences in newborn infants

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200

2. Target audience

Neonatologists, clinical researchers who perform research with newborn infants, including neurologists, endocrinologists, infectious disease specialists, cardiologists, and pediatric surgeons. Neonatal research assistants, and research nurses. Ethicists. Members of REBs

3. Tracks

Academic and Research Skills

Clinical Bioethics

Clinical Research

Neonatology

Pharmacology and Therapeutics

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 None
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic is pain in neonatal research. Involves General Pediatrics, Neurology, Surgery, Cardiology, Infectious Disease, Ethics

Presentation Titles and Durations

Time to reduce pain in neonatal research Keith Barrington, MB ChB

Duration of Presentation in Minutes

25

Designing research to avoid additional painful procedures Sandra E. Juul. MD. PhD. MD. PhD

Duration of Presentation in Minutes

25

The adverse impacts of pain in the newborn infant, acute, medium and long term harmful effects

Ruth E. Grunau, PhD **Duration of Presentation in Minutes**25

Video Recording: 21st Century Approach to Monitor and Improve Delivery Room Resuscitation

Session Type: Panel Discussion

Submitter: Heidi Herrick

Participant(s)

1. EF

Elizabeth E. Foglia, MD, MSCE

Position:

Associate Professor of Pediatrics

Organization:

Perelman School of Medicine at the University of Pennsylvania

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

2. MR

Mario Rüdiger, Prof Dr

Position:

Director of Center for feto/neonatal Health

Organization:

TU Dresden

Role:

	Speaker;Chair
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
3.	MH Morgan E. Hill, MD
	Position: Attending Neonatologist and Assistant Professor of Clinical Pediatrics
	Organization: Cincinnati Children's Hospital Medical Center
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP
4.	VH Veerle Heesters, BSc
	Position: PhD student
	Organization: Leiden University Medical Center
	Role:
	Speaker

	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
5.	CO Colm O'Donnell, MB PhD
	Position: Professor
	Organization: National Maternity Hospital & University College Dublin
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
6.	HH Heidi M. Herrick, MD MSCE
	Position: Clinical Instructor of Pediatrics
	Organization: Children's Hospital of Philadelphia
	Role:
	Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

7. SR

Siren Rettedal, MD PhD Prof

Position:

Professor

Organization:

Stavanger University Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Although 10% of all newborns require delivery room (DR) resuscitation, limited tools are available to reliably capture and document DR resuscitation interventions and outcomes. This is largely due to the unpredictable nature and timing of DR resuscitation and the varied settings in which newborns are resuscitated (including labor rooms, obstetrical operating rooms, and dedicated resuscitation suites). The available existing literature demonstrate significant

variation in DR practices and outcomes within and across centers, emphasizing the need for improved and consistent care during DR resuscitation.

Video recording (VR) in the DR is an unbiased source of factual data which enables an objective assessment of DR practice and outcomes. VR in the DR has been used successfully for quality improvement, research, and education in many hospitals. Despite these benefits, DR VR is not widely accepted or implemented, given ethical, legal, and logistical considerations.

This panel assembles a group of international experts across various career stages who have successfully implemented and applied VR in the DR. Informed by their own experiences, panelists will present the current state-of-the art for VR in the DR and describe future innovations to support VR in the DR as a standard of care.

Topics in this interactive session will include:

- -Legal and ethical considerations for VR in the DR
- -Technical and Logistical Considerations to implementing VR in the DR
- -Best Practices for using VR for debriefing the clinical team and counseling parents
- -Future applications of VR to improve resuscitation performance and outcomes in the DR and beyond

Learning Objectives

- 1. Recognize the potential role of video recording in the delivery room unit to improve provider performance, support staff education, and counsel families
- 2. Identify the requirements needed to successfully implement video recording in the delivery room
- 3. Describe future developments to support video recording as a standard of care for resuscitation in the delivery room and intensive care

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

Clinicians and scientists in the field of neonatology with a special interest in delivery room management and resuscitation of newborn infants as well as trainers of neonatal resuscitation.

3. Tracks

Clinical Research

Critical Care

Neonatology

Quality Improvement/Patient Safety

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Neonatal Resuscitation, Neonatal ventilation, neonatal cardiology

- If your session was presented at another conference, please describe the conference and presentation.
 N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 Does not apply
- 8. Additional comments

In addition to the five countries represented on this panel, there is also a range of career stages among the panelists which will further add to the diversity of perspectives offered by the panelists.

9. Does this submission involve one or more specialties or disciplines?

No

Presentation Titles and Durations

Introduction to the Panel: Video Recording in the Delivery Room

Elizabeth E. Foglia, MD, MSCE

Duration of Presentation in Minutes

5

Video Recording in the Delivery Room: Gaining New Insight into Provider Performance and Patient Physiology

Mario Rüdiger, Prof Dr

Duration of Presentation in Minutes

10

Video Recording to Support the Clinical Team: Best Practices for Establishing a Video Debriefing Program

Morgan E. Hill, MD

Duration of Presentation in Minutes

10

Video-Reflexivity on Neonatal Resuscitation: Team and Parent's Perspectives Veerle Heesters. BSc

Duration of Presentation in Minutes

Video Recording as Part of the Medical Record: Ethical and Legal Considerations Colm O'Donnell, MB PhD

Duration of Presentation in Minutes

10

Moving Beyond the Delivery Room: Introducing Video Recording to Resuscitation in the Intensive Care Unit Setting Heidi M. Herrick, MD MSCE

Duration of Presentation in Minutes

10

Using Artificial Intelligence to Analyze Delivery Room Videos Siren Rettedal, MD PhD Prof

Duration of Presentation in Minutes

10

Become fluid with fluids: An update on IVF and controversies

Session Type: Hot Topic Symposia

Submitter: Kimberly Reidy

Participant(s)

1. KR Kimberly J. Reidy, MD

Position:

Associate Professor

Organization:

Children's Hospital at Montefiore

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN

2. LW

Laurel Willig, MD, MS

Position:

Associate Professor

Organization:

Children's Mercy Hospitals and Clinics

Role:

Chair

	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, ASPN
3.	TN Tara M. Neumayr, MD
	Position: Assistant Professor
	Organization: Washington University in St. Louis School of Medicine
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN
4.	pB patrick Brophy, MD, MHCDS
	Position: Professor
	Organization: URMC- GCH
	Role:
	Speaker

```
Ethnicity
  Not Hispanic or Latino
  Race
  White
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, APS, SPR, ASPN
5. KB
  Kevin T. Barton, MD
  Position:
  Associate Professor of Pediatrics
  Organization:
  Washington University in St Louis School of Medicine
  Role:
  Speaker; Chair
  Ethnicity
  Not Hispanic or Latino
  Race
  Asian, White
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, ASPN
6. JF
  Jeffrey Fadrowski, MD, MHS
  Position:
  Associate Professor of Pediatrics
  Organization:
  Johns Hopkins University School of Medicine
  Role:
  Speaker
```

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN

Session Description

Session Description

Brief Description of Overall Session:

This session will discuss the evidence and changes in approach to providing intravenous fluids. It will provide latest evidence supporting choice of fluids both during resuscitation and for maintenance. It will discuss potential need to personalize approaches in some scenarios.

1.Topic/title: What a long strange trip it's been. The history and data supporting isotonic fluid for "maintenance" IVF therapy.

Objective: Discuss the history and evidence behind the decisions about IVF choices. Discuss if there are complications such as hypertension, hypernatremia related to NS, isotonic vs. hypotonic solutions. Understand the path that led to the adoption of the American Academy of Pediatrics Clinical Practice Guideline: Maintenance Intravenous Fluids in Children

- 2. Topic/title: There is nothing "normal" about saline. Is it time to transition to balanced electrolyte solutions for "maintenance" IVF?. Objective: Understand the implications and side effects of utilizing normal saline as maintenance IVF. Discuss the potential benefit of utilizing balanced electrolyte solutions as "maintenance" IVF therapy.
- 3. Topic/title: Resuscitation fluid composition and their impact on outcomes Objective: Discuss the controversies about the ideal resuscitation fluid with discussion about the impact of resuscitation IVF choice on outcomes.
- 4. Topic/Title: What are we teaching learners about maintenance? Objective: Understanding the impact of the transition to isotonic fluids for "maintenance" IVF on learners understanding of maintenance IVF including composition, sodium requirements, side effects.

Learning Objectives

- 1. 1. Recognize the evidence supporting choices of IVF for maintenance.
- 2. 2. Understand the complications related to IVF choices.
- 3. 3. Identify clinical scenarios that required modification of IVF choices.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200-250

2. Target audience

trainees, early, mid and late career physicians General pediatricians, hospitalists, intensive care, emergency medicine, pediatric nephrologists

3. Tracks

Emergency Medicine

General Pediatrics

Hospital Medicine

Nephrology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. no ASPN
- If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

n/a

9. Does this submission involve one or more specialties or disciplines?

Hospital medicine, Intensive Care , Emergency medicine and Nephrology

Presentation Titles and Durations

Tara M. Neumayr, MD **Duration of Presentation in Minutes**20

What a long strange trip it's been. The history and data supporting isotonic fluid for maintenance IVF therapy. patrick Brophy, MD, MHCDS

Duration of Presentation in Minutes
20

Q and A Kevin T. Barton, MD **Duration of Presentation in Minutes** 10

What are we teaching learners about maintenance? Jeffrey Fadrowski, MD, MHS **Duration of Presentation in Minutes** 20

The Impact of Workforce Shortages and Increased Operational Cost on The Research & Clinical Missions of Academic Institutions

Session Type: Hot Topic Symposia

Submitter: Abdallah Dalabih

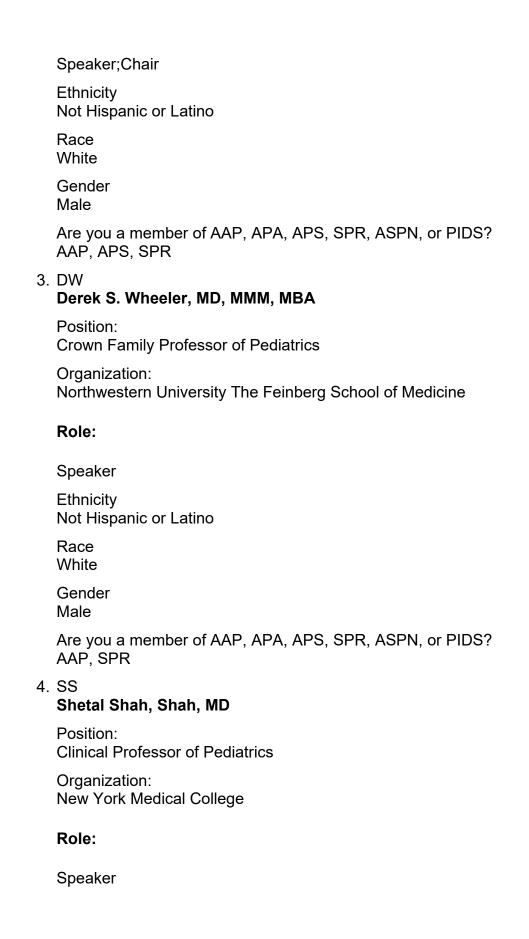
Organization:

Role:

Arkansas Childrens

Participant(s)

1. AD Abdallah Dalabih, MD, MBA Position: Associate Professor Organization: **UAMS** Role: Submitter **Ethnicity** Not Hispanic or Latino Race Asian Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR 2. FB Frederick E. Barr, Barr, MD MBA Position: Chief Clinical and Academic Officer



Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

5. NM

Ndidiamaka Musa, MD

Position:

Professor of Pediatrics

Organization:

Seattle Children's

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Two years after the start of the pandemic, workforce shortages, supply chain disruption, high inflation, and state budget deficits have increased operational costs at academic children's hospitals. These increased expenses have not been met with increased revenue or clinical volume. The American Hospital Association projects >50% of all United States' hospitals will end 2022 in deficit.

The effect on the clinical and research missions of academic institutions from this loss of income has not been fully explored. Also underestimated is the impact poor moral, "quiet quitting," and burnout have on financial productivity in pediatric healthcare. Academic pediatricians must understand the nature of how the pandemic impacted hospital finances and identify opportunities to advocate on behalf of their academic work. This hot topic session will aim to educate pediatric clinicians and researchers about the financial crisis, the dollar-impact of associated effects such as provider moral and burn out and will aim to highlight the importance of advocating for more resources for pediatric care and research.

This symposium will feature five speakers who will discuss the following:

- 1) 0-5minutes: Introduction to current financial crisis facing U.S Hospitals—Abdallah Dalabih
- 2) 5-25minutes: Financial crisis effect on the clinical mission of large academic institutions—Derek Wheeler
- 3) 25-45minutes: Financial crisis effect on the academic mission of large academic institutions–Rick Barr
- 4) 45-60minutes: Financial crisis effect on the moral and burnout of providers in large academic institutions-Ndidiamaka L Musa
- 5) 60-70minutes: Avenues for Advocacy to Support the Mission of Children's Hospitals-Shetal Shah
- 6) 70-90minutes: Q&A

Learning Objectives

- 1. 1) Understand the financial stress facing many hospitals in the U.S.
- 2. 2) Describe the effect of the financial stress on the clinical mission and research mission of large academic pediatric institutions
- 3. 3) Discuss the effect of the current crisis on the providers' moral and burnout.

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

150

2. Target audience

pediatric clinicians (including trainees and all levels of faculty) interested in public health, healthcare financing, advocacy, and health policy

3. Tracks

Advocacy
Clinical Research
Leadership and Business Training

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
- If your session was presented at another conference, please describe the conference and presentation.
 N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

the topic is not related to any specific speciality, it is of great value to all academic pediatricians.

Presentation Titles and Durations

The effect of the financial crisis on the academic mission of large academic institutions

Frederick E. Barr, Barr, MD MBA

Duration of Presentation in Minutes

20

The effect of the financial crisis on the clinical mission of large academic institutions

Derek S. Wheeler, MD, MMM, MBA

Duration of Presentation in Minutes

20

Avenues for Advocacy to Support the Mission of Children's Hospitals Shetal Shah, Shah, MD

Duration of Presentation in Minutes

10

The effect of the financial crisis on the moral and burnout of providers in large academic institutions

Ndidiamaka Musa. MD

Duration of Presentation in Minutes

15

Monkeypox in Children and Adolescents

Session Type: Hot Topic Symposia

Submitter: Pablo Sanchez

Participant(s)

1. PP

Pablo J. Pablo Sanchez, MD

Position:

Professor of Pediatrics

Organization:

Nationwide Children's Hospital -OSU

Role:

Submitter; Speaker; Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR, PIDS

Session Description

Session Description

As of September 28, 2022, a total of 25,341 monkeypox cases have been reported in the United States. Although predominantly affecting men who have sex with men, pediatric cases have occurred. In addition, cases in pregnant women may result in fetal and neonatal infection. This Hot Topic session will

highlight the current epidemiology and the management of exposed and/or infected newborns, infants, children, and adolescents. Monkeypox should be considered when children or adolescents present with a rash that is consistent with the disease, especially if epidemiologic criteria are present. Young children, children with eczema and other skin conditions, and children with immunocompromising conditions may be at increased risk of severe disease. Treatment should be considered on a case-by-case basis for children and adolescents with suspected, probable, or confirmed monkeypox who are at risk of severe disease or who develop complications of monkeypox. Tecovirimat is the first-line medication to treat monkeypox, including in children and adolescents. Children and adolescents with close contact to people with suspected, probable, or confirmed monkeypox may be eligible for post-exposure prophylaxis (PEP) with vaccination, immune globulin, or antiviral medication.

Learning Objectives

- 1. Understand the current epidemiology of monkeypox both globally and in the United States
- 2. Describe the clinical manifestations of monkeypox in newborns, infants, children. and adolescents
- 3. Learn the management of the exposed newborn, children, adolescent with respect to isolation precautions, treatment, and post-exposure prophylaxis with vaccination, immune globulin, or antiviral medication

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

150

2. Target audience

Pediatric infectious diseases specialists, pediatricians, nurse practitioners, newborn medicine practitioners, neonatologists

3. Tracks

Adolescent Medicine
Breastfeeding/Human Milk
Immunizations/Delivery
Infectious Diseases
Neonatology
Pharmacology and Therapeutics
Public Health
Well Newborn

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Pediatric Infectious Diseases and Neonatal Infectious Diseases sessions
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? The Impact of Policies on Health and Research
- 8. Additional comments

This is a timely session as we are working through guidance on management of exposed newborns, infants/children, and especially infected adolescents --as a member of the CDCACIP work group on monkeypox, I plan to contact CDC and other specialists on monkeypox to put together a timely and important session

 Does this submission involve one or more specialties or disciplines?
 yes, public health, neonatology, newborn medicine, lactation specialists, obstetricians, newborn hospitalists, andothers caring for disenfranchised population (homeless, MSM)

Presentation Titles and Durations

1) Epidemiology and 2) Management of Newborns, Children and Adolescents: Prevention, Treatment, and Post-Exposure Prophylaxis Pablo J. Pablo Sanchez, MD

Duration of Presentation in Minutes

90

AAP Clinical Practice Guideline on the Evaluation and Treatment of Pediatric Obesity

Session Type: Hot Topic Symposia

Submitter: Janice Liebhart

Participant(s)

1. JL

Janice Liebhart, MS

Position:

Evaluation Manager, Institute for Healthy Childhood Weight

Organization:

American Academy of Pediatrics

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. SH

Sandra G. Hassink, MD

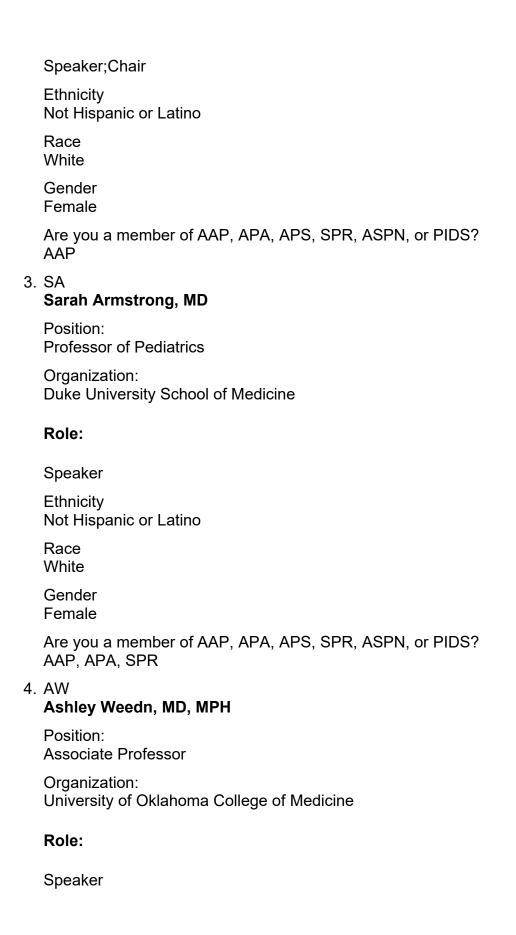
Position:

Medical Director AAP Institute for Healthy Childhood Weight

Organization:

American Academy of Pediatrics

Role:



Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

5. MS

Mona Sharifi, MD, MPH

Position:

Associate Professor

Organization:

Yale School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

Session Description

Session Description

It has been 15 years since the publication of the last comprehensive clinical guidance on pediatric obesity. This session will present a detailed overview of the 2022 AAP Clinical Practice Guideline on the Evaluation and Treatment of Pediatric Obesity by several of the Guideline's authors, including a discussion of its primary focus areas and related clinical recommendations, policy implications, and implementation resources. The introduction will highlight key

updates since the 2007 Expert Committee Recommendations, describe the methods and processes used to develop the 2022 Clinical Practice Guideline, and discuss the whole-child, tailored, non-stigmatizing approach to obesity-related care, described within the Guideline, including assessment of individual, structural, and contextual risk factors for obesity. Three 20-minute presentations will provide additional depth regarding key focus areas within the Guideline and strategies and resources for integrating recommendations into practice. Topics include: evidence-based treatment tools (Motivational Interviewing, Intensive Health Behavior Lifestyle Treatment, pharmacologic treatment, and metabolic & bariatric surgery), obesity comorbidities (comorbid conditions and recommendations for evaluation and follow-up), and incorporating recommendations into practice (Health Information Technology approaches and building capacity through Continuing Medical Education and Maintenance of Certification opportunities). The session will conclude with a 15-minute question and answer period.

Learning Objectives

- 1. Describe the methodology and level of evidence associated with the Clinical Practice Guideline for pediatric obesity
- 2. Explain the four different evidence-based treatment strategies that can be used at the point of care to develop an individualized treatment plan
- Describe the types of resources, including those for electronic health records, to support implementation of the Clinical Practice Guideline recommendations at the point of care

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200

2. Target audience

General and academic pediatricians

Pediatric obesity specialists/tertiary care pediatricians

3. Tracks

General Pediatrics

Obesity

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 Obesity SIG

6. If your session was presented at another conference, please describe the conference and presentation.

A similar, but not identical, 90-minute session, discussing an overview of the Clinical Practice Guideline will be presented at the 2022 ObesityWeek (TOS) conference by another group of 4 authors (only 1 of whom is participating in this panel).

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply

8. Additional comments

Note: Sandra Hassink (chair) will do both the introduction (15 minutes) and the Q & A at the end of the session (15 minutes). This will bring the session to a total of 90 minutes.

9. Does this submission involve one or more specialties or disciplines?

This topic primarily pertains to Obesity and General Pediatrics but is inherently multi-disciplinary and includes a focus on Nutrition, Endocrinology, Social Determinants of Health, and Health Equity.

Presentation Titles and Durations

Background, methodology, and overarching approach (Intro: 15 minutes)

Questions & answer segment (End: 15 minutes)

Sandra G. Hassink, MD

Duration of Presentation in Minutes

30

Evidence-based treatment of childhood obesity Sarah Armstrong, MD **Duration of Presentation in Minutes** 20

Evaluation of obesity-related comorbidities Ashley Weedn, MD, MPH **Duration of Presentation in Minutes** 20

Incorporating recommendations into practice Mona Sharifi, MD, MPH **Duration of Presentation in Minutes** 20

Multidisciplinary Management of Renovascular Hypertension in Children

Session Type: Hot Topic Symposia

Submitter: Daniel Feig

Participant(s)

1. DF

Daniel I. Feig, MD/PhD

Position:

Professor of Pediatrics

Organization:

University of Alabama, Birmingham, School of Medicine

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, ASPN

2. MF

Michael A. Ferguson, MD

Position:

Assistant in Medicine, Assistant Professor of Pediatrics

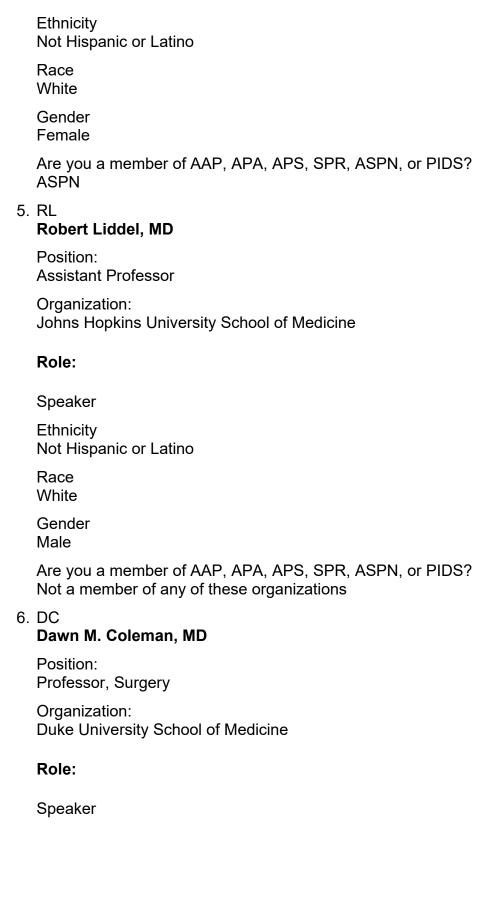
Organization:

Boston Children's Hospital, Harvard Medical School

Role:

Chair

	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN
3.	KM Kevin E. Meyers, MD, FCP(SA), DTM&H, FASN, FAAP
	Position: Pediatric Nephrologist
	Organization: Childrens Hospital of Philadelphia
	Role:
	Speaker;Chair
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, ASPN
4.	DS Deborah Stein, MD
	Position: Assistant Professor
	Organization: Boston Children's Hospital
	Role:
	Speaker



Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

The management of renovascular hypertension in children requires a multidisciplinary team approach. This session will focus on the etiology, diagnosis, and management of renovascular hypertension in children. The session will include management perspectives from pediatric nephrology, interventional radiology, and vascular surgery.

Learning Objectives

- 1. Upon completion, participants will be able diagnose and manage fibromuscular dysplasia in children.
- 2. Upon completion, participants will be able to recognize the causes and complications of mid-aortic syndrome in children.
- Upon completion, participants will be able to plan a treatment strategy for renovascular hypertension including surgical and interventional radiology modalities.

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

200

2. **Target audience**Pediatric Nephrologist, Pediatric Cardiologist, Pediatric Critical Care

3. Tracks

Cardiology Hypertension Nephrology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

The other IPHA session

- If your session was presented at another conference, please describe the conference and presentation.
 N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments N/A
- Does this submission involve one or more specialties or disciplines?

 Nonbrology Cardiology Surgery Hyportonian

Nephrology, Cardiology, Surgery, Hypertension

Presentation Titles and Durations

Fibromuscular dysplasia in children Kevin E. Meyers, MD, FCP(SA), DTM&H, FASN, FAAP **Duration of Presentation in Minutes** 25

Midaortic syndrome in children Deborah Stein, MD

Duration of Presentation in Minutes

25

Interventional radiology approach to the management of renovascular hypertension

Robert Liddel. MD

Duration of Presentation in Minutes

25

Surgical management of renovascular hypertension

Dawn M. Coleman, MD

Duration of Presentation in Minutes

25

The Value Proposition of Pediatric Specialty Status

Session Type: Panel Discussion

Submitter: Daniel Rauch

Participant(s)

1. DR

Daniel Rauch, MD

Position:

Professor of Pediatrics

Organization:

Tufts University School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

2. RQ

Ricardo Quinonez, MD

Position:

Associate Professor - Chief Division of Hospital Medicine

Organization:

Baylor College of Medicine - Texas Children's Hospital

Role:

Speaker

```
Ethnicity
  Hispanic or Latino
  Race
  White
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, APA
3. ML
  Michelle Lyn, MD
  Position:
  Associate Professor of Pediatrics
  Organization:
  Baylor College of Medicine
  Role:
  Speaker
  Ethnicity
  Not Hispanic or Latino
  Race
  Black or African American
  Gender
  Female
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP
4. EA
  Elizabeth Alderman, MD
  Position:
  Professor of Pediatrics; Professor of Obstetrics & Gynecology and
  Women's Health
  Organization:
  Albert Einstein College of Medicine
  Role:
  Speaker
```

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS

Session Description

Session Description

2022 saw the second administration of the board certification exam for Pediatric Hospital Medicine (PHM). With only one more exam left that will allow applicants to be eligible through a practice pathway there has been discussion of limitation of access to eligibility to only fellowship trained providers as well as the questions about the benefits to the field of specialty status and impacts on the workforce. These questions have arisen in the past with other specialties, especially the so-called generalist, non-organ based specialties. This panel discussion will address the pros and cons of specialty status to the provider, the field, and the care of children. Panel discussant will include senior faculty in PHM who helped prepare the application to the American Board of Pediatrics, Pediatric Emergency Medicine, Child Abuse Pediatrics, and Adolescent Medicine.

Learning Objectives

- 1. Learn the definition of a 'specialty'
- 2. Appreciate the costs of fellowship training
- 3. Consider the implications of specialty status on the workforce

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

People considering fellowship training, Generalist specialty thought leaders, fellowship directors

3. Tracks

Adolescent Medicine

Career Development

Child Abuse & Neglect

Critical Care

Emergency Medicine

General Pediatrics

Hospital Medicine

Medical Education

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

PHM SIG

PEM SIG

Child Abuse SIG

6. If your session was presented at another conference, please describe the conference and presentation.

n/a

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Speakers represent PHM, PEM, Child Abuse and Adolescent Medicine

Presentation Titles and Durations

Introduction

Daniel Rauch, MD

Duration of Presentation in Minutes

10

Pediatric Hospital Medicine

Ricardo Quinonez, MD

Duration of Presentation in Minutes

20

Pediatric Emergency Medicine and Child Abuse Michelle Lyn, MD

Duration of Presentation in Minutes 20

Adolescent Medicine Elizabeth Alderman, MD **Duration of Presentation in Minutes** 20

Dr. Dancel, We Don't Do That Anymore

Session Type: Panel Discussion

Submitter: Jennifer Fuchs

Participant(s)

4	
7	 _

Jennifer Fuchs, MD

Position:

Assistant Professor

Organization:

University of North Carolina at Chapel Hill School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

2. EZ

Eric Zwemer, MD

Position:

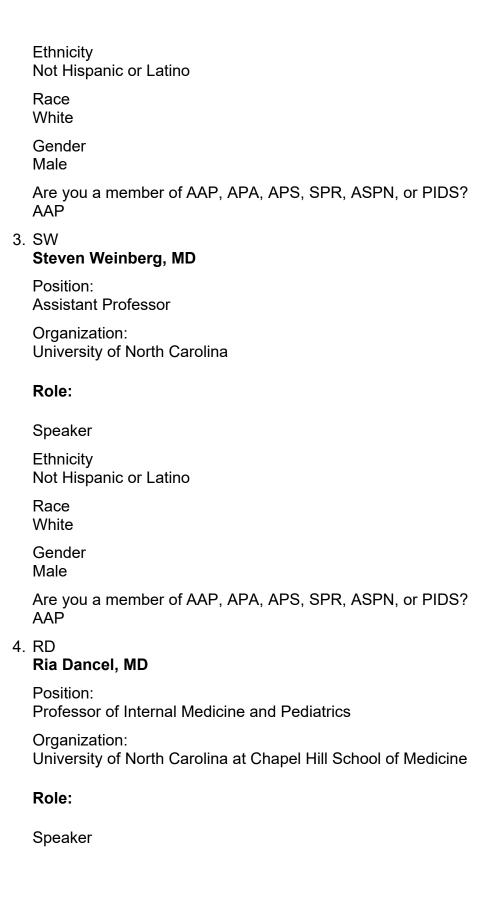
Associate Professor of Pediatrics

Organization:

University of North Carolina at Chapel Hill School of Medicine

Role:

Speaker



Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Session Description

Session Description

A common axiom in medical education states, "half of what you are taught in medical school will eventually be proved wrong. The problem is, we don't know which half." For instance, many of us learned in medical school that a critical part of diverticulitis treatment was avoiding nuts and seeds. In fact, that is likely the only thing most of us remember about diverticulitis. Except this isn't true – a medical student recently informed one of us that that new evidence has shown that there is no association between these foods and complications or bleeding in diverticulitis.

This plenary talk will combine humor and evidence-based medicine to review ten dogmas in pediatric medicine that you learned in medical school that are now outdated or inaccurate according to recent evidence. We will cover shifting nomenclature, formerly incontrovertible facts that are now "controvertible", and review the evidence behind each. Interactive audience polls will illustrate practice variation, and participants will be encouraged to share their own "Um, Dr Dancel, we don't do that anymore" moments. All attendees will leave with a brief summary of each topic and references to support the changing evidence.

Learning Objectives

- 1. List at least 3 terms or nomenclatures that have changed in the past 5-10 years.
- Compare prior newborn dogmas to current literature in discussing appropriate newborn weight loss, the importance of the hip exam, and risk factors for spinal dysraphism.
- 3. Discuss the recent shift in link between RSV and asthma and the management of pancreatitis, Clostridium dificile infection, IV hydration, anaphylaxis, and failure to thrive.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50-80

2. Target audience

All levels of learners and practitioners

3. Tracks

Breastfeeding/Human Milk

Community Pediatrics

Emergency Medicine

Gastroenterology/Hepatology

General Pediatrics

Hospital Medicine

Infectious Diseases

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Friday, April 28
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Some of the speakers overlap with a nursing burnout submission and one on multilevel learning.

6. If your session was presented at another conference, please describe the conference and presentation.

PHM 2022 - the same session was presented

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

Our format will be as follows:

Introduction: Changes in medicine

- Why we did this session [Jen Fuchs 5 minutes]
- Nomenclature bit [Eric Zwemer 8 minutes]

Never trust a newborn...exam:

- Visualizing the base of a sacral dimple alleviates concern for no tethered cord. [Jen Fuchs 7 minutes]
- We worry once a baby loses 10% of his or her birth weight. [Steve Weinberg 8 minutes]
- Hip exam is essential in diagnosing hip dysplasia [Steve Weinberg 8 minutes]

All that wheezes and sneezes:

- Benadryl and steroids are the treatment of choice for hives/allergic reactions. [Jen Fuchs 7 minutes]
- There is no link between wheezing with RSV and future diagnosis of asthma [Ria Dancel 7 minutes]

Debate-orade: Fluids and electrolyte monitoring:

- Quarter NS if they're shorter than your knee, half normal saline if they're up to your waist. [Ria Dancel 8 minutes]
- Otherwise healthy infants admitted for failure to thrive require lab monitoring for refeeding syndrome. [Eric Zwemer 7 minutes]

GI wish I kept up to date:

- Flagyl is the treatment of choice for Clostridium dificile. [Jen Fuchs 8 minutes]
- Patient's with pancreatitis should be NPO (nothing by mouth) as part of the treatment. [Ria Dancel 7 minutes]

An invitation for the audience to share their own "we don't do that anymore" pearls and Q&A [Jen Fuchs - 10 minutes]

9. Does this submission involve one or more specialties or disciplines?

Yes: general pediatrics, hospital medicine, newborn medicine, gastroenterology, infectious diseases, and community pediatrics

Presentation Titles and Durations

Introduction; Never trust a newborn exam; All that wheezes and sneezes; GI wish I kept up to date; Audience participation Jennifer Fuchs, MD

Duration of Presentation in Minutes

37

Changing nomenclature; Debate-orade: Fluids and electrolyte monitoring Eric Zwemer, MD

Duration of Presentation in Minutes

15

Never trust a newborn exam Steven Weinberg, MD Duration of Presentation in Minutes

16

All that wheezes and sneezes; Debate-orade: Fluids and electrolyte monitoring; GI wish I kept up to date

Ria Dancel, MD **Duration of Presentation in Minutes** 22

Predictive Analytics for Precision Nutrition in Preterm Infants

Session Type: Hot Topic Symposia

Submitter: Mohan Pammi

Participant(s)

1. JN

Josef Neu, MD

Position:

Professor

Organization:

University of Florida

Role:

Speaker; Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

2. MP

Mohan Pammi, MD, PhD, MRCPCH

Position:

Professor

Organization:

Baylor College of Medicine

Role:

Submitter; Speaker; Chair

	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR
3.	NA Namasiyayam Ambalayanan MD
	Namasivayam Ambalavanan, MD
	Position: Professor of Pediatrics
	Organization: University of Alabama School of Medicine
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race Asian
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR
4.	NA Nima Aghaeepour, PhD
	Position: Associate Professor
	Organization: Stanford University
	Role:
	Speaker

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. DL

Dominick J. Lemas, Lemas, PhD

Position:

Assistant Professor

Organization:

University of Florida

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

American Indian or Alaska Native

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Current nutritional guidelines in preterm infants are based on population statistics, although helpful may marginalize some preterm infants. Optimal nutrition not only enhances lifelong health but also influences transgenerational outcomes by epigenetic mechanisms. Once growth faltering or malnutrition is noticed using a growth curve or existing indicators (retroactive approach), it may already be too late for meaningful interventions. Optimization of nutrition

via a personalized proactive approach, where malnutrition or faltering growth curve can be predicted before they occur for timely interventions is urgently needed. The NIH recently initiated the 2020-2030 Strategic Plan for NIH Nutrition Research, which emphasizes the urgent need for precision nutrition for preterm infants. The NIH defines precision medicine as 'an innovative approach that takes into account individual differences in patients' genes, environments, and lifestyles'.

Recent advances in high-throughput technologies have provided access to multiomics biological data (including genomics, epigenomics, transcriptomics, proteomics and metabolomics). Biological insights gained from the multi-omics should be integrated with clinical and social data and applied for the best nutritional outcomes possible. The insights gained by integration of multi-omics, clinical and social datasets, with machine learning enables development of predictive models and biomarkers that can predict short- and long-term growth outcomes. Early predictions coupled with timely appropriate interventions, personalized for each preterm infant has the best chance of achieving precision nutrition. In this workshop, we aim to summarize the most recent data on predictive models and strategies to achieve precision nutrition for preterm infants.

Learning Objectives

- 1. Summarize current advances in multi-omics data acquisition and integration.
- 2. Discuss predictive models in perinatology developed by machine learning, clinical and multiomics data.
- 3. Strategize precision nutrition for preterm infants for better nutritional and growth outcomes

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

Researchers in multiomics and machine learning, clinicians interested in predictive models, anyone interested in precision medicine

3. Tracks

Clinical Research

Neonatology

Pediatric Nutrition

Telemedicine/EHR/Medical Informatics

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. Other sessions on Artificial Intelligence or Machine learning
- 6. If your session was presented at another conference, please describe the conference and presentation. N/A
- 7. Should your session be considered for one of the special **Highlighted Theme sessions at PAS 2023?**

Science is Real: Research. Misinformation and Trust

- 8. Additional comments None
- 9. Does this submission involve one or more specialties or disciplines?

Yes, clinical predictive modeling and precision medicine/nutrition involves all pediatric specialties and will be of great interest

Presentation Titles and Durations

Nutritional models and trajectories to identify preterm infants at risk and who will benefit from a personalized approach Josef Neu. MD

Duration of Presentation in Minutes

15

Machine learning, multi-omics and prediction models Mohan Pammi, MD, PhD, MRCPCH

Duration of Presentation in Minutes

15

Multiomics in Neonatal Lung disease Namasivayam Ambalavanan, MD **Duration of Presentation in Minutes**

15

Multi-omic investigation with machine learning in Perinatology Nima Aghaeepour, PhD

Duration of Presentation in Minutes

25

Examples of a personalized nutrition approach Dominick J. Lemas, Lemas, PhD

Duration of Presentation in Minutes

15

Ditch the X-Ray? Top Pediatric POCUS Applications That Could Replace Plain Films

Session Type: Hot Topic Symposia

Submitter: Almaz Dessie

Participant(s)

1. AD

Almaz S. Dessie, MD

Position:

Assistant Professor of Emergency Medicine and Pediatrics

Organization:

The Warren Alpert Medical School of Brown University

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. MK

Matthew P. Kusulas, MD

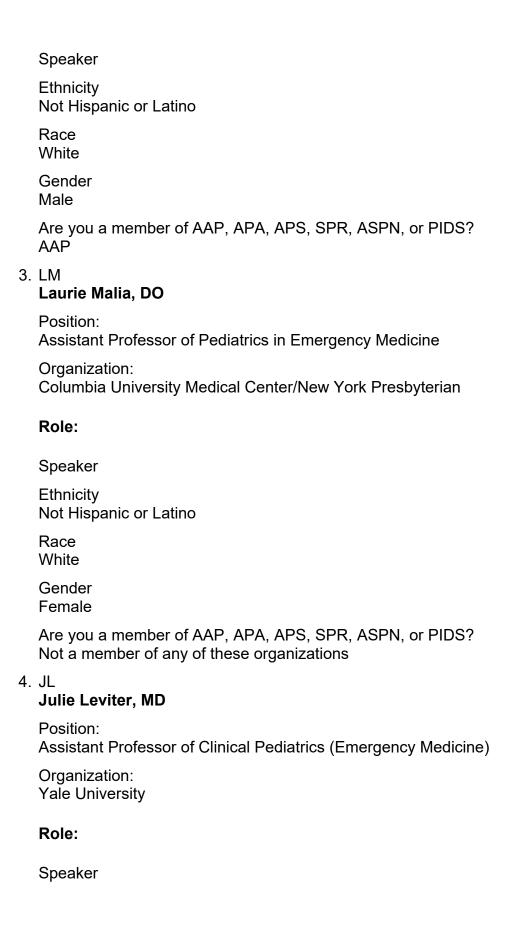
Position:

Assistant Professor, Departments of Pediatrics and Emergency Medicine

Organization:

Donald and Barbara Zucker School of Medicine at Hofstra/Northwell

Role:



Ethnicity Not Hispanic or Latino Race Prefer not to respond Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP 5. MR Munaza Batool Rizvi, MD Position: Assistant Professor of Pediatrics (in Emergency Medicine) Organization: Columbia University, Vagelos College of Physicians and Surgeons Role: Speaker **Ethnicity** Not Hispanic or Latino Race Asian Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP 6. AD **Almaz Dessie, MD** Position: Assistant Professor of Emergency Medicine and Pediatrics Organization: The Warren Alpert Medical School of Brown University Role:

Speaker; Chair

Ethnicity
Not Hispanic or Latino

Race

Black or African American

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Point-of-care ultrasound (POCUS) use in pediatrics is rapidly expanding, especially in the acute care setting (emergency department, urgent care, inpatient medicine, pediatric clinic sick visits) and among sub-specialists. In this Hot Topic Symposium, several POCUS applications that have the potential to reduce or eliminate the clinician's reliance on plain radiographs will be presented. We will present both high acuity and low acuity applications; each are relevant to everyday practice of pediatricians.

Our session will consist of several "lightning" presentations on each application with time for audience participation in image review. These presentations will be followed by a Q&A session with a panel of experts. Our goal is for participants to have a better understanding of the growing list of POCUS applications that may reduce ionizing radiation use in children. Participants will learn the indication of each POCUS application, evidence for its use, basic technique and identification of common findings, as well as considerations for implementation in clinical practice. Audience participation will be encouraged through e-polling quizzes to assess knowledge acquisition and time set aside for participants' questions. Four applications traditionally evaluated by plain radiographs will be discussed: lung (pneumonia, pneumothorax, intubation confirmation), knee and hip (effusions), abdomen (constipation and small bowel obstruction), and foreign body identification (skin/soft tissue, esophageal). Following these presentations, we will conclude with a panel discussion of how to implement these applications into practice, including audience Q&A. Panelists will address pearls and pitfalls of using POCUS in lieu of radiographs.

Learning Objectives

- 1. Upon completion, participants will be able to describe several POCUS applications that can be used in lieu of radiographs to diagnose common conditions in children.
- 2. Upon completion, will be able to identify pneumonia, pneumothorax, endotracheal intubation, knee and hip effusions, constipation, small bowel obstruction, and foreign bodies on POCUS.
- 3. Upon completion, participants will be able to anticipate and address challenges to incorporating these POCUS applications into their practice.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

30

2. Target audience

20-40

3. Tracks

Community Pediatrics

Critical Care

Emergency Medicine

General Pediatrics

Hospital Medicine

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

 Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 - Dr. Dessie also submitted a workshop entitled "Patient-Centered & Destigmatizing Language: How Words Matter in Documentation" with Dr. Anju Wagh (Submitter).
- 6. If your session was presented at another conference, please describe the conference and presentation.

 N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Topic is point-of-care ultrasound involving topics of interest to specialists in emergency medicine, acute care pediatrics, general/community pediatrics, critical care, and hospital medicine.

Presentation Titles and Durations

Introduction
Almaz S. Dessie, MD **Duration of Presentation in Minutes**5

The case for POCUS over chest x-rays Matthew P. Kusulas, MD **Duration of Presentation in Minutes** 20

The case for POCUS over knee & hip x-rays Laurie Malia, DO **Duration of Presentation in Minutes**

The case for POCUS over Abdominal X-rays
Julie Leviter, MD

Puration of Presentation in Minutes

Duration of Presentation in Minutes 15

15

The case for POCUS over x-rays for foreign bodies Munaza Batool Rizvi, MD **Duration of Presentation in Minutes** 15

Q&A with panel Almaz Dessie, MD **Duration of Presentation in Minutes** 20

Applying Equity and Anti-Racism in Academic Pediatrics: A Multipronged Approach

Session Type: Hot Topic Symposia

Submitter: Joseph Wright

Participant(s)

1. JW

Joseph L. Wright, MD MPH

Position:

Professor of Pediatrics and Health Policy & Management

Organization:

University of Maryland Schools of Medicine and Public Health

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS

2. JH

Jessica Hippolyte, MD MPH

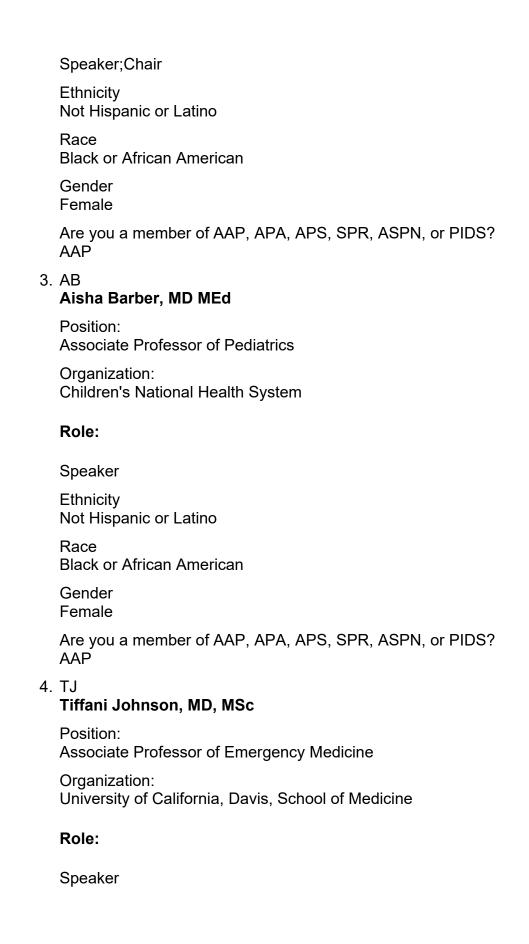
Position:

Pediatric Emergency Medicine Fellow

Organization:

Children's National Health System

Role:



Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

5. MG

Monika Goyal, MD, MSCE

Position:

Associate Professor of Pediatrics

Organization:

Children's National Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

The last several years have seen an emphasis on addressing the systemic challenges that fuel inequities in patient care delivery and that drive disparate and deleterious health outcomes for marginalized and minoritized communities. Leveling the clinical playing field through identifying and dismantling racebased algorithms and practice guidelines is a critically important step towards establishing equitable systems of care. However, a comprehensive approach to

broadly applying an equity and anti-racism lens in academic pediatrics also necessitates implementing reforms across all educational, research and teaching environments. Only through authentic institutional commitment and disruptive resolve can the longstanding structures that undergird and support ongoing bias in all corners of academic medicine be called out, unwound and replaced. This transformational work must be carried out simultaneously on multiple fronts. A concerted, multipronged approach is necessary for the generational horizon of healthy academic relationships, novel transdisciplinary partnerships, and re-envisioned science to be fully realized.

The assembled panel is comprised of trainee, junior, mid-career and senior faculty whose perspectives are representative of the synergistic value of differential lived and professional experiences, and representative of the diverse spectrum of academic leadership required to move ahead. The panel's collective scholarship has contributed foundational research to exploring implicit bias, microaggressions and the experiences of those underrepresented in medicine. They are also providing recognized leadership to the advancement of equity and anti-racism within, and across, all of the Pediatric Academic Societies partner organizations.

Learning Objectives

- Relate experienced microaggressions to allostatic loading and physiologic weathering
- 2. Discuss the concept of race-conscious medicine in the context of medical education
- 3. Describe convergence science and its relevance to measuring social determinants of health

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

250

2. Target audience

Administrators, Advocates, Basic Scientists, Clinical Researchers, Educators, Faculty, Health Services Researchers, Learners, Translational Scientists

3. Tracks

Academic and Research Skills Advocacy Clinical Research Diversity, Equity, and Inclusion Health Equity/Social Determinants of Health Health Services Research Leadership and Business Training Medical Education

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

DEI Reception

Other DEI- Track Scholarly Sessions

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

 Addressing & Overcoming Racism in Clinical Care and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

Introduction: Policy is not enough Joseph L. Wright, MD MPH

Duration of Presentation in Minutes

7

Trainee Perspective: The Impact of Dysfunctional Hierarchy Jessica Hippolyte, MD MPH

Duration of Presentation in Minutes

15

Education leadership perspective: The lens through which we train� Aisha Barber. MD MEd

Duration of Presentation in Minutes

15

Faculty perspective: Your silence will not protect you

Tiffani Johnson, MD, MSc

Duration of Presentation in Minutes

15

Research and development perspective: Re-envisioning science with equity at its core

Monika Goyal, MD, MSCE

Duration of Presentation in Minutes

15

The uses and misuses of moral distress in Pediatrics

Session Type: Hot Topic Symposia

Submitter: ANNIE Janvier

Participant(s)

1. AJ

ANNIE Janvier, MD, PhD

Position:

Professor of Pediarics and Clinical Ethics

Organization:

University of Montreal

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR

2. LW

Lucia d. Wocial, PhD HEC-C

Position:

senior clinical ethicist

Organization:

Medstar Washington Hospital Center

Role:

Speaker

	Ethnicity Prefer not to respond
	Race Prefer not to respond
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
3.	CP
	Christopher S. Parshuram, Parshuram, MB.ChB. D.Phil
	Position: Professor
	Organization: Hospital for Sick Children
	Role:
	Speaker
	Ethnicity Prefer not to respond
	Race Prefer not to respond
	Gender Prefer not to respond
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
4.	TP Trisha Prentice, MBBS BMedSci MBioeth PhD
	Position: Neonatologist
	Organization: The Royal Children's Hospital
	Role:
	Speaker

Ethnicity Not Hispanic or Latino

Race White

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Moral distress is prevalent in Pediatrics. Indeed, many clinicians have at times felt that they were providing burdensome treatment for a patient when it may not have been in the patient's interests (generally "doing too much"), and have felt prevented from acting accordingly due to constraints. Moral distress is more prevalent in physician trainees than in physicians and in several studies experienced more intensely by nurses than physicians. Traditionally, moral distress was associated with physician paternalism when making intensive care decisions. Shared decision-making, where clinicians and parents engage together to make important decisions, has transformed how moral distress is experienced in Pediatrics.

External factors, such as organizational policies, can contribute to moral distress and moral injury. Some of those factors are political, such as public vs. private healthcare or gun laws. Policies may be regional or developed within institutions, such as staff schedules and resolving intractable conflicts. Interventions to address moral distress may encourage empowerment of clinicians to advocate for their preferred treatment plan, sometimes leading to negative consequences for the patient. On the other hand, interventions, both at the individual (eg. building resilience) and institutional level (policies), can decrease the prevalence and impact of moral distress. Evaluating those interventions can be complex. Current conceptualisations of moral distress still largely portray a negative phenomenon that leads to burnout, reduced job satisfaction and poor patient care. On the other hand, while the harmful aspects of moral distress need to be mitigated, moral distress may enhance advocacy efforts for the pediatric population.

Learning Objectives

1. Discuss the concept of moral distress and its transformation in Pediatrics.

- 2. Examine the impact of national and/or institutional policies on moral distress.
- 3. Consider which interventions are more likely to decrease the harms of moral distress in different environments.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200 attendees or more

2. Target audience

This hot topic panel will likely attract clinicians and researchers from many disciplines: neonatology, critical care, pediatrics, clinical ethics, palliative care, etc The prevalence of moral distress in pediatrics is increasingly recognized, as well as the need to address it in constructive ways.

3. Tracks

Academic and Research Skills

Advocacy

Clinical Bioethics

Core Curriculum for Fellows

Critical Care

General Pediatrics

Health Services Research

Palliative Care

Wellness and Well-being

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

 Bioethics platform, palliative care platform, Neonatal panels
- 6. If your session was presented at another conference, please describe the conference and presentation.

Variation of this panel was presented at ASBH (American Society for Bioethcis and humanities), in 6 grand rounds (with TP and AJ as speakers), during critical care conferences (CP and LW as speakers), in nursing conferences (TP and LW as speakers) and palliative care conferences (all speakers).

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

8. Additional comments

This is a unique interdisciplinary panel with exceptionnal speakers.

9. Does this submission involve one or more specialties or disciplines?

This topic involves the following topic: Neonatology, Critical Care, Pediatrics, Pediatric hospitalist medicine, Clinical Ethics, Palliative Care.

Presentation Titles and Durations

Introduction of speakers and plan (5 min) AND Moral distress in neonatology: myths and reality (15 min) AND Q&A (20 min)

ANNIE Janvier, MD, PhD

Duration of Presentation in Minutes

40

The birth and transformation of moral distress in pediatrics Lucia d. Wocial, PhD HEC-C

Duration of Presentation in Minutes

20

The impact of policies on moral distress: gathering the evidence Christopher S. Parshuram, Parshuram, MB.ChB. D.Phil

Duration of Presentation in Minutes

15

Catalog of interventions to decrease moral distress: which one would work best in your unit?

Trisha Prentice, MBBS BMedSci MBioeth PhD

Duration of Presentation in Minutes

15

Some good things to know just in case a Hurricane comes along and you need to evacuate your NICU in 24 hours.

Session Type: Panel Discussion

Submitter: David Kaufman

Participant(s)

1. DK

David Kaufman, MD

Position:

Professor

Organization:

University of Virginia School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

How do you send critically ill patients to multiple hospitals with a hurricane approaching. Where we prepared? How did we divide and conquer to make this happen? Safety, transport teams, hand offs, families. What do the staff do

when all the patients are gone-do we find safety or help the NICUs out where are patients went to? Health departments, the state and government can help, but who do you call? How do you plan for this?

Learning Objectives

- 1. Make a list for potential emergency preparedness events for where your hospital resides
- 2. How to divide and conquer when you have to evacuate in 24 hours or less-within and outside of your city or town.
- 3. Make list of things to do for recovering from an evacuation and how to bring patients back to your hospital and restart your unit.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

250

2. Target audience

NICU, PICU, hospitalists, administrators, medical directors

3. Tracks

Advocacy

Environmental Health

Health Equity/Social Determinants of Health

Immigrant Health

Injury Prevention

Public Health

Quality Improvement/Patient Safety

Social Media & Technology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

NEonatal or NICU topics

6. If your session was presented at another conference, please describe the conference and presentation.

na

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

8. **Additional comments**: Submitted after Hurrian Ian - More speakers will be added.

9. Does this submission involve one or more specialties or disciplines?

Public Health

Presentation Titles and Durations

How do you send 67 NICU patients to 10 different NICUs across Florida David Kaufman, MD

Duration of Presentation in Minutes

45

From 500g to 50 kg: short and long-term cardiovascular impact of prematurity

Session Type: Hot Topic Symposia

Submitter: Audrey Hebert

Participant(s)

1. AH

Audrey Hebert, MD, FRCPC

Position:

Neonatologist

Organization:

Faculty of Medicine Université Laval

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

2. GA

Gabriel Altit, MDCM, MSc, FRCPC, FAAP

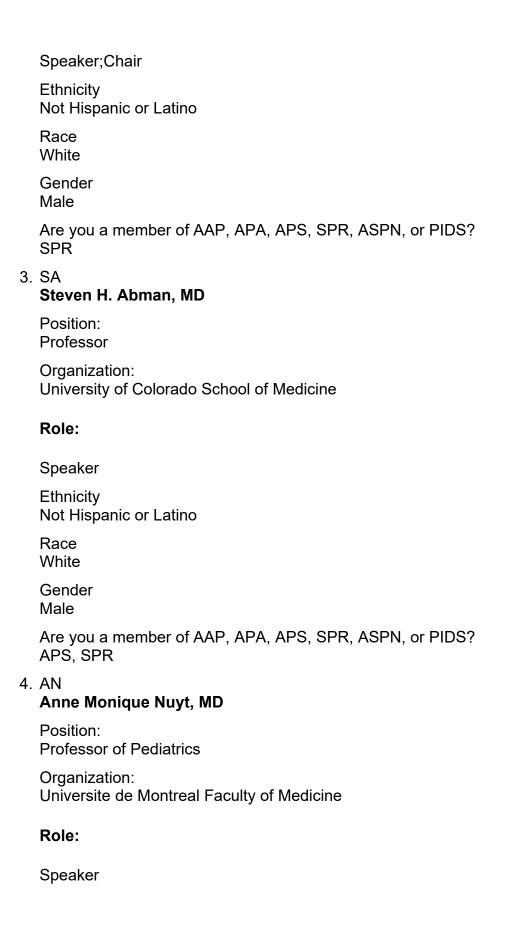
Position:

Neonatologist - Assistant Professor

Organization:

McGill University Faculty of Medicine and Health Sciences

Role:



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR

5. KG

Kara Goss, MD

Position:

Associate Professor of Medicine and Pediatrics

Organization:

University of Texas Southwestern Medical School

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Extremely premature newborns are increasingly surviving with a higher burden of lung-airway-pulmonary vasculature injury via various pre- and post-natal processes. These infants have a spectrum of bronchopulmonary and pulmonary vascular disease that may have a lifelong impact. Recently, there has been an increased awareness for post-natal pulmonary hypertension and the significant impacts of altered pulmonary function and airway anomalies in

infants. Neonatologists, with support from multidisciplinary teams, are frequently managing premature infants with pulmonary vascular disease secondary to prematurity in the neonatal care unit (NICU). Once discharged from the NICU, these patients receive regular neuro-developmental follow-up, however cardiovascular follow-up has yet to become standard of care. Prematurity is a major risk factor for cardiovascular disease during childhood and adolescence, and should be acknowledged by teams involved in their care. This session will explore the short- and long-term impact of prematurity on pulmonary and cardiovascular health with experts in the field. The audience will be taking on a hemodynamic and cardiovascular journey from the NICU to young adulthood, with emphasis on risk factors, physiopathology, clinical presentation, screening guidelines and management of pulmonary vascular disease

Learning Objectives

- 1. To describe the physiopathology, risk factors and presentation of chronic pulmonary hypertension associated with BPD in preterm infants.
- To become familiar with the evolution in time, clinical presentation and potential complications of prematurity on the pulmonary vasculature and heart during childhood.
- 3. To recognize the long-term impact of prematurity on cardiovascular health in the follow-up of adolescents and young adults born preterm.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

Target audience will be physicians and allied health professionals involved in the care of preterm infants during their stay in the neonatal care unit, as well as after discharge until adolescence and young adulthood.

3. Tracks

Cardiology

Neonatology

Pulmonology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Hemodynamic Club

Lung Club

Topic: Pulmonary hypertension

6. If your session was presented at another conference, please describe the conference and presentation.

n/a

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

The Q&A will be lead by the co-chairs Dr Gabriel Altit & Dr Audrey Hébert at the end of the session (15 minutes) and questions will be directed towards all speakers

9. Does this submission involve one or more specialties or disciplines?

Yes. Topic involving Neonatology, pediatric cardiology, pulmonology and general pediatrics

Presentation Titles and Durations

Chronic pulmonary hypertension in BPD in the NICU: should we screen and why do we care?

Audrey Hebert, MD, FRCPC

Duration of Presentation in Minutes

15

Chronic pulmonary hypertension in BPD in the NICU: when the left and right heart become problematic

Gabriel Altit, MDCM, MSc, FRCPC, FAAP

Duration of Presentation in Minutes

15

After NICU discharge: special cardiovascular considerations and when to worry in children born preterm

Steven H. Abman, MD

Duration of Presentation in Minutes

15

The adolescent born preterm - impact on cardiovascular system, pulmonary system and outcomes

Anne Monique Nuyt, MD

Duration of Presentation in Minutes

15

From the NICU to the adult world: Pulmonary vascular disease in young adults born preterm

Kara Goss, MD **Duration of Presentation in Minutes**15

Assembling a Multidisciplinary Team for Implementation of Pharmacogenetic Testing in Pediatrics

Session Type: **Hot Topic Symposia** Submitter: **Sonya Tang Girdwood**

Participant(s)

1. ST

Sonya C. Tang Girdwood, MD, PhD

Position:

Assistant Professor of Pediatrics

Organization:

Cincinnati Children' Hospital Medical Center

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

2. KW

Kristin Wiisanen, PharmD

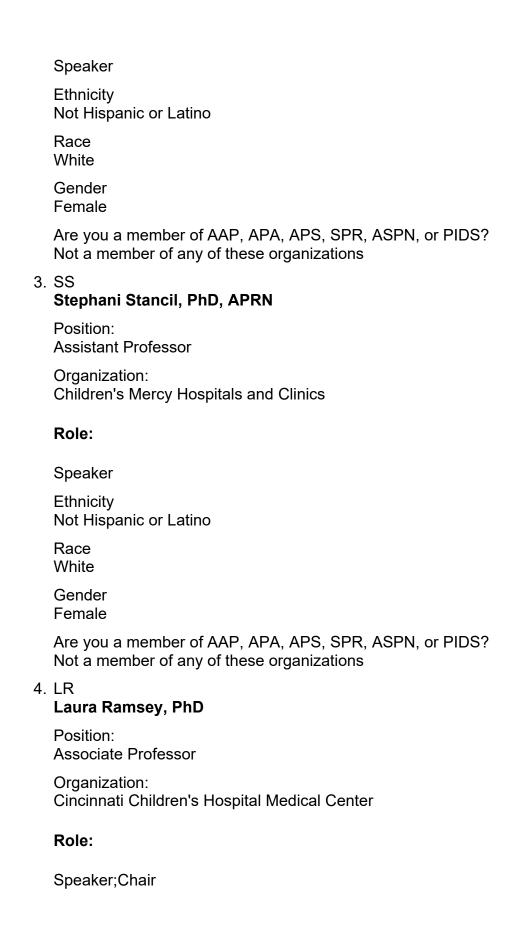
Position:

Clinical Professor and Associate Dean

Organization:

University of Florida College of Pharmacy

Role:



Ethnicity Not Hispanic or Latino

Race White

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Pharmacogenetics is a critical component of precision medicine and evidence for incorporating pharmacogenetics into clinical practice in pediatrics is growing rapidly. Many institutions are interested in the implementation of pharmacogenetic testing but may not know which of the different models of implementation to use or which key stakeholders to include. In this session, we will provide an introduction to pharmacogenetics and the types of available pharmacogenetic tests in pediatrics (e.g. single gene testing, multigene testing, or sequencing-based tests). Then, three different speakers with various training backgrounds will discuss their institutions' models of implementing pharmacogenetic testing and how their roles are critical to the success of their pharmacogenetics services: 1) A pharmacist will discuss her role in outpatient primary care and subspecialty clinics where pharmacogenetic testing is implemented. 2) A clinician will describe her role in the GOLDILOKS inpatient consult service that provides dose individualization and clinical optimization using pharmacogenetic testing and other individual factors in hospitalized children. 3) A clinical pharmacologist will describe her role in a pharmacogenetic service that provides testing for all children admitted to the inpatient psychiatry unit with pre-defined recommendation templates for clinicians. The remaining 20 minutes of the session will be Q&A, moderated by a pediatric hospitalist and clinical pharmacologist, to allow audience members to learn more about the different types of models of pharmacogenetic implementation. By the end of the session, participants should recognize that a multidisciplinary team that includes bedside clinicians, pharmacists, and pharmacologists, is needed for successful implementation of pharmacogenetic testing.

Learning Objectives

- 1. Distinguish among types of available pharmacogenetics testing options
- 2. Differentiate between models of pharmacogenetic testing and interpretation, including testing in outpatient clinics, use of an inpatient consult service, and routine inpatient testing
- 3. Describe the benefits of having multidisciplinary team members, including bedside clinicians, pharmacists, and pharmacologists, in the implementation of pharmacogenetic testing

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

General pediatricians, pediatric subspecialists, pharmacists, clinical pharmacologists - anyone interested in implementing pharmacogenetic testing in their practice

3. Tracks

Adolescent Medicine

Children with Chronic Conditions

Developmental and Behavioral Pediatrics

General Pediatrics

Genomics/Epigenomics

Hospital Medicine

Mental Health

Pharmacology and Therapeutics

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Pharmacology and Therapeutics

Genomics/Epigenomics

Mental Health

6. If your session was presented at another conference, please describe the conference and presentation.

N/A

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

This session builds off of the hot topic symposium presented in 2022 that introduced the audience to the evidence of pharmacogenetic testing

in pediatrics. The session was well received with one audience member recommending that the topic be presented annually. We have decided to change the focus of the symposium from providing the evidence for pharmacogenetic testing to discussing pharmacogenetic implementation, as there is rising interest on how participants can provide testing at their home institutions.

9. Does this submission involve one or more specialties or disciplines?

The speakers in this submission represent hospital medicine, pharmacy, general pediatrics, adolescent medicine and clinical pharmacology. The topic is relevant to all pediatric specialties as pharmacogenetics has an impact on drugs prescribed in all disciplines.

Presentation Titles and Durations

Introduction to Pharmacogenetics and the Different Types of Pharmacogenetic Tests (10 min); Q&A Session (20 min at end) Sonya C. Tang Girdwood, MD, PhD **Duration of Presentation in Minutes**

30

The Role of a Pharmacist in Implementing Pharmacogenetic Testing in **Outpatient Clinics** Kristin Wiisanen, PharmD **Duration of Presentation in Minutes**

20

The Role of a Bedside Clinician in an Inpatient Consult Service Utilizing Pharmacogenetic Testing Stephani Stancil, PhD, APRN **Duration of Presentation in Minutes**

20

The Role of a Clinical Pharmacologist in a Pharmacogenetics Service with Routine Inpatient Testing Laura Ramsey, PhD **Duration of Presentation in Minutes** 20

Milk & Microbes: Optimizing Early Nutrition & Response to Microbial Exposures to Reduce Inequities in Cardiometabolic Disease

Session Type: Hot Topic Symposia

Submitter: Andi Shane

Participant(s)

1. AS

Andi L. Shane, MD, MPH, MSc

Position:

Professor of Pediatrics

Organization:

Emory University School of Medicine and Children's Healthcare of Atlanta

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR, PIDS

2. NM

Nathalie Maitre, MD, PhD

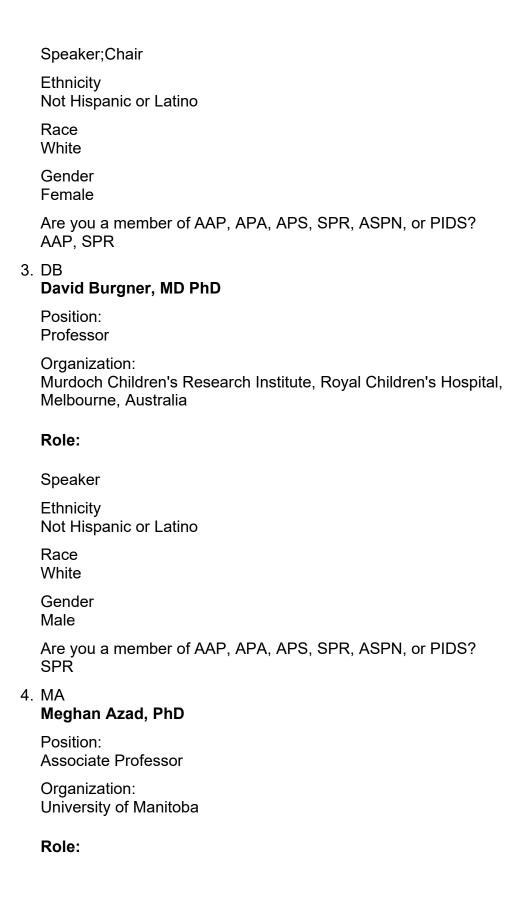
Position:

Professor of Pediatrics

Organization:

Emory + Children's Pediatric Institute

Role:



Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

5. DL

Danielle K. Longmore, B.Med (Hons), MPHTM, FRACP, PhD

Position:

Doctor

Organization:

Murdoch Children's Research Institute

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Early life exposure to colonizing and pathogenic microbes shapes immune and inflammatory responses impacting the risk of cardiovascular and metabolic (cardiometabolic) disease across the life course. Responses and interventions to presumptive and confirmed infections, including antimicrobial therapies and

vaccination, impact inflammatory responses during key phases of childhood development and maturation. These microbial exposures and their short- and long-term effects on cardiometabolic risk are profoundly affected by infant feeding, particularly human milk. Three internationally recognized experts in infection and inflammation, cardiometabolic risk, neonatal nutrition, and endocrinology/obesity will discuss a life course approach to understanding and preventing adverse cardiometabolic disease, emphasizing human milk as a key intervention. Their multidisciplinary perspectives will be applied to develop a framework for positively impacting long term cardiometabolic health. Presenter-panelists will address health inequities associated with exposures and early measures, including access to care and resources that optimize health outcomes. Moderated by a neonatologist and an infectious disease clinical researcher, the presenter-panelists will engage in a discussion that will lead to awareness and strategies that could be adopted into a life course strategy for improved cardiometabolic health.

- 1. Introduction: Andi Shane
- 2. Early life infection and inflammation under-appreciated targets for risk-stratification and prevention: David Burgner
- 3. Mighty Milk: The impact of breastfeeding on microbiome composition, infection, inflammation and cardiometabolic risk: Meghan Azad
- 4. Thinking outside the (lunch) box: earlier and more effective prevention of the adverse effects of obesity from birth: Danielle Longmore
- 5. Panel discussion: Andi Shane and Nathalie Maitre (moderators)
- 6. Conclusions and Summary

Learning Objectives

- Apply a life course framework to understanding the evidence that early life nutrition, infection and inflammation, and access to resources, impact lifelong cardiometabolic risk
- 2. Discuss the role of management of infections and inflammation in supporting healthy microbiome acquisition and retention throughout the life course
- 3. Define and address the modifiable factors related to neonatal and childhood nutrition that impact cardiometabolic health

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

Neonatologists, Endocrinologists, Infectious Disease Physicians, General Pediatricians

3. Tracks

Breastfeeding/Human Milk

Clinical Research

Endocrinology

Health Equity/Social Determinants of Health

Hypertension

Infectious Diseases

Neonatology

Pediatric Nutrition

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 NICU Follow-up Club, NICU Clinical Trials, Milk Club
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?
 - Addressing & Overcoming Racism in Clinical Care and Research
- 8. Additional comments

This symposium will be an unique opportunity for symposium attendees to learn and engage with our internationally based colleagues as they discuss and address the impact of early life nutrition (milk) and microbial exposures on cardiometabolic health. Convened by co-chairs with PIDS, SPR, APA, and AAP memberships, the engagement of the identified speakers will greatly enhance the global perspectives of this important health equity topic.

9. Does this submission involve one or more specialties or disciplines?

This is a multidisciplinary submission involving speakers and chairs with expertise in Infectious Disease, Neonatology, Endocrinology, and Epidemiology that will have broad appeal to PAS 2023 attendees at all career levels.

Presentation Titles and Durations

Overview and background and introduction of speakers and objectives/ Moderate panel discussion

Andi L. Shane, MD, MPH, MSc

Duration of Presentation in Minutes

15

Moderate panel discussion / Conclusions and summary Nathalie Maitre, MD, PhD

Duration of Presentation in Minutes

15

Early life infection and inflammation • under-appreciated targets for risk-stratification and prevention
David Burgner, MD PhD
Duration of Presentation in Minutes
20

Mighty Milk: The impact of breastfeeding on microbiome composition, infection, inflammation and cardiometabolic risk Meghan Azad, PhD **Duration of Presentation in Minutes** 20

Thinking outside the (lunch) box: Earlier and more effective prevention of the adverse effects of obesity from birth Danielle K. Longmore, B.Med (Hons), MPHTM, FRACP, PhD **Duration of Presentation in Minutes**20

The Impact of Firearm Policies and Research Priorities in the United States: Past, Present, and Future

Session Type: Hot Topic Symposia

Submitter: Lois Lee

Participant(s)

1. LL

Lois K. Lee, MD, MPH

Position:

Associate Professor

Organization:

Boston Children's Hospital, Harvard Medical School

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR

2. SC

Sofia Chaudhary, MD

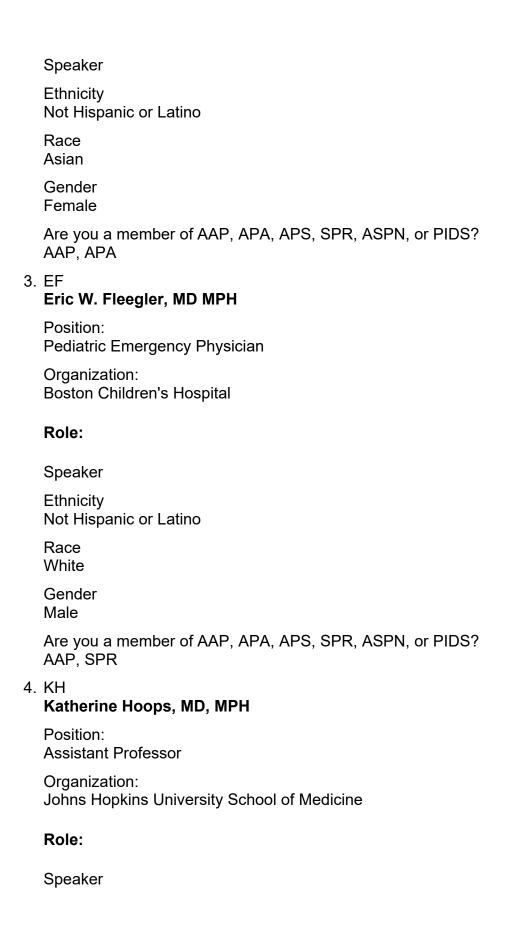
Position:

Assistant Professor in Pediatrics and Emergency Medicine

Organization:

Emory University School of Medicine

Role:



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

5. ZL

Zach Laris, MPH

Position:

Director, Federal Advocacy & Child Welfare Policy

Organization:

American Academy of Pediatrics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

After the horrific back-to-back mass shootings in Buffalo, New York and Robb Elementary School in Uvalde, Texas, Congress passed the Bipartisan Safer Communities Act in 2022. This was the first major Congressional legislation related to firearms in the United States in nearly 30 years, since the Federal Assault Weapons Ban was passed in 1994 then sunset a decade later. Since then over a half-million U.S. residents have been killed and over 1.5 million

injured by firearms. This is in part due to permissive policies facilitating increased accessibility of firearms, including military-style firearms. Federal policies have also greatly impacted the availability of firearm injury prevention research funding, stemming from the 1996 Dickey amendment, which essentially ended federal funding. Continued advocacy will be essential to increase research funding and to promote evidence-based firearm-related legislation to decrease firearm injuries and deaths to children. This hot topic symposium will educate pediatric clinicians about firearm injuries and related health disparities in U.S. children and youth as well as inform about the history, current landscape, and future needs of policies and research priorities.

- 1) 0-10 minutes: Introduction—Lois Lee
- 2) 10-25 minutes: Firearm injuries and deaths and related health disparities in U.S. children and youth—Sofia Chaudhary
- 3) 25-40 minutes: The history and evidence behind firearm policies in the U.S.—Eric Fleegler
- 4) 40-55 minutes: The current landscape of firearm policy and research priorities.--Katherine Hoops
- 5) 55-70 minutes: Emerging policy and advocacy for firearm injury prevention and research funding for children and youth.—Zachary Laris
- 6) 70-90 minutes: Q&A

Learning Objectives

- 1. Understand the health disparities related to firearm epidemiology among children and youth in the U.S.
- 2. Describe the history of firearm policies in the United States and evidence behind their effectiveness in decreasing firearm injuries and deaths to children.
- 3. Discuss priority areas for research and advocacy related to pediatric firearm injury prevention.

Scholarly Session Questions

 Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

pediatric clinicians (including trainees and all levels of faculty) interested in public health, advocacy, and health policy

3. Tracks

Advocacy
Diversity, Equity, and Inclusion
Epidemiology
Injury Prevention
Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 APA Injury Control SIG
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? The Impact of Policies on Health and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Injury Prevention, Public Health

Presentation Titles and Durations

Introduction to Firearm Injuries, Policies and Research Priorities Lois K. Lee, MD, MPH

Duration of Presentation in Minutes

10

Firearm injuries and deaths and related health disparities in U.S. children and youth

Sofia Chaudhary, MD

Duration of Presentation in Minutes

15

The history and evidence behind firearm policies in the U.S Eric W. Fleegler. MD MPH

Duration of Presentation in Minutes

15

The current landscape of firearm policy and research priorities Katherine Hoops, MD, MPH

Duration of Presentation in Minutes

15

Emerging policy and advocacy for firearm injury prevention and research funding for children and youth

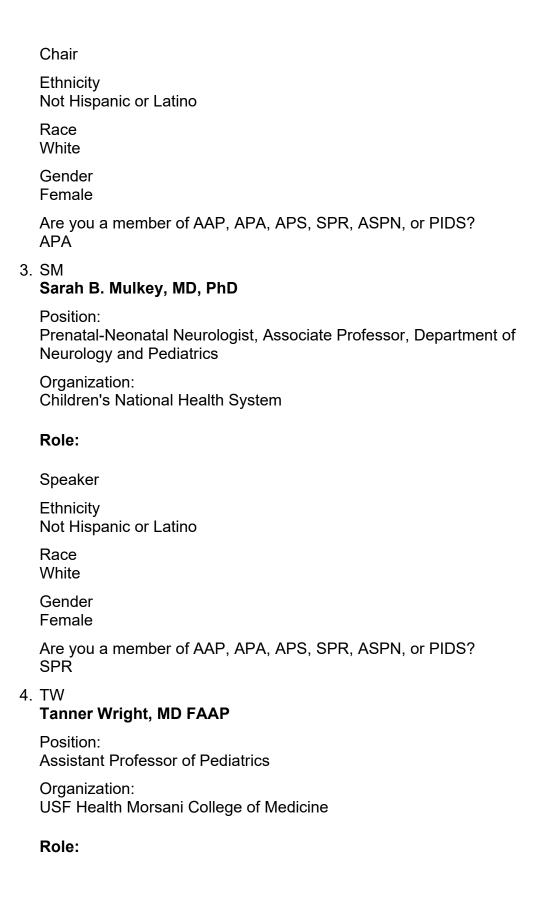
Zach Laris, MPH **Duration of Presentation in Minutes**15

Assessing Neurodevelopmental Outcomes in Surveillance and Research for Prenatal Exposures

Session Type: **Hot Topic Symposia** Submitter: **Kate Woodworth**

Participant(s)

1.	KW Kate Woodworth, MD
	Position: Medical officer
	Organization: CDC
	Role:
	Submitter;Chair
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP
2.	LW Lisa Wiggins, PhD
	Position: Behavioral Scientist
	Organization: CDC
	Role:



Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

5. HL

Henry Lee, MD

Position:

Clinical Professor

Organization:

University of California San Diego

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS, SPR

Session Description

Session Description

Surveillance of neurodevelopmental outcomes following emerging and continued health threats from Zika to CMV to Neonatal Abstinence Syndrome is critical to inform public health action. However, ascertaining, assessing, and coalescing longitudinal data from varied data sources, and sundry

developmental screeners and assessments is challenging for meaningful analysis and interpretation of data on neurodevelopmental outcomes for public health action. This Hot Topics Session will bring experts studying multiple different prenatal exposures to review challenges and best practices for assessing and reporting neurodevelopmental outcomes in longitudinal surveillance, and how that data can be used for public health action.

Learning Objectives

- 1. Review methods for assessing neurodevelopmental outcomes in varied surveillance platforms that assess perinatal exposures
- 2. Share best practices in ascertaining, classifying and reporting neurodevelopmental outcomes across surveillance platforms
- 3. Raise awareness and improve collaboration among academic researchers, and public health partners

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50

2. Target audience

General pediatricians, developmental and behavioral pediatricians, infectious disease providers

3. Tracks

Developmental and Behavioral Pediatrics

Epidemiology

General Pediatrics

Health Services Research

Infectious Diseases

Neonatology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. NAS/NOWS. CMV
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments

9. Does this submission involve one or more specialties or disciplines?

Developmental and behavioral pediatrics, infectious disease, public health

Presentation Titles and Durations

Challenges and Lessons Learned from Surveillance of Congenital Zika Infection

Sarah B. Mulkey, MD, PhD

Duration of Presentation in Minutes

10

Maternal and Infant Network to Understand Outcomes Associated with Medication for Opioid Use Disorder during Pregnancy Tanner Wright, MD FAAP

Duration of Presentation in Minutes

10

Tracking Clinical Outcomes of Infants Identified with Cytomegalovirus Infection in Neonatal Intensive Care Units Henry Lee, MD

Duration of Presentation in Minutes

10

"Let's Talk" about Language Equity: Improving Care and Communication for Patients and Families Preferring Other Languages

Session Type: Hot Topic Symposia

Submitter: Christina Rojas

Participant(s)

1. CR

Christina R. Rojas, MD

Position:

Pediatric Emergency Medicine Fellow

Organization:

Children's National Health System

Role:

Submitter; Speaker; Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

2. AK

Alisa Khan, Khan, MD, MPH

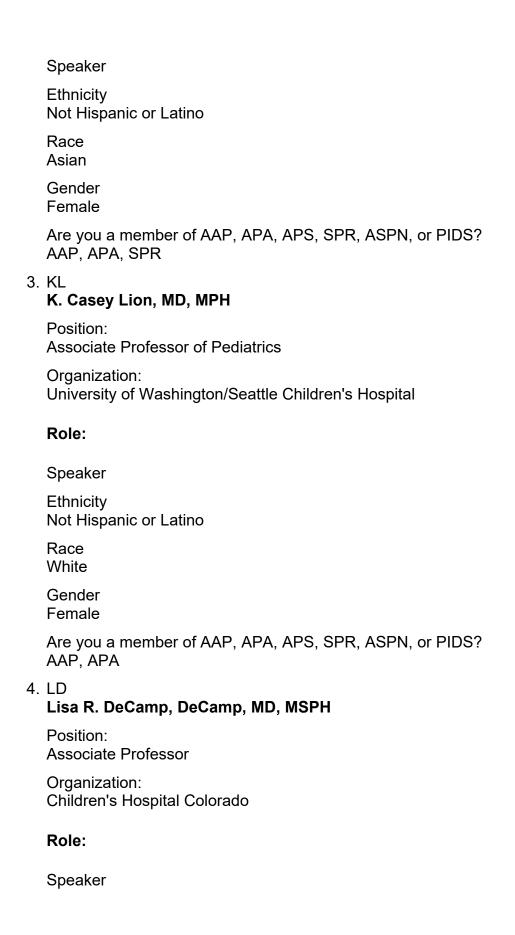
Position:

Pediatric Hospitalist / Assistant Professor of Pediatrics

Organization:

Boston Children's Hospital / Harvard Medical School

Role:



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

5. KY

Katherine Yun, MD MHS

Position:

Associate Professor of Pediarics

Organization:

Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

Session Description

Session Description

Inequities in care and communication for children and families who prefer languages other than English for medical communication are prevalent and extend across various specialties, diagnoses, and care settings. Research in this field has expanded significantly over the past several years, with an increasing number of deleterious outcomes reported, related to initial diagnoses, management of chronic diseases, and interactions with care teams,

among others. Simultaneously, various novel interventions targeted towards mitigating this inequity have been developed and successfully implemented.

Drawing on both recent literature and decades worth of combined experience, this "Hot Topic Symposium" centers on the concept of "language equity," aiming to describe inequities related to patient language preference in pediatrics, as well as strategies for improvement. Attendees will hear from several national experts in this field, with a focus on how we can better care for and communicate with patients and families preferring languages other than English. Specifically, we will (1) highlight best practices for partnering with parents in developing interventions, (2) consider strategies to improve partnership with interpreters in clinical care, (3) discuss the impact of the multilingual workforce in healthcare, and (4) illustrate the importance of including patients and families with diverse language preferences in research. Presentations will be interwoven with interactive components, time for audience questions, and collaborative discussion. Attendees, regardless of specialty, location, or years in practice, will leave with a framework for understanding and promoting language equity at their home institutions.

Learning Objectives

- 1. Explain how patient and family language preference for medical communication can lead to inequity in care and communication
- 2. Discuss interdisciplinary and family-centered approaches to promote language equity
- 3. Develop a strategy to address inequities related to language preference at your home institution

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

Pediatricians interested in promoting health equity, of all specialities, in all levels of training

3. Tracks

Advocacy
Diversity, Equity, and Inclusion
General Pediatrics
Health Equity/Social Determinants of Health
Health Services Research
Hospital Medicine

Immigrant Health Literacy

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 We would like to avoid other sessions related to health equity, particularly in regards to language, when scheduling this session.
- 6. If your session was presented at another conference, please describe the conference and presentation.

 N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Addressing & Overcoming Racism in Clinical Care and Research
- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Yes, this session's topic is language equity, which involves virtually all specialities and disciplines.

Presentation Titles and Durations

Introduction; Q&A moderator

Christina R. Rojas, MD

Duration of Presentation in Minutes

10

Parent/patient partnership in intervention design to promote language equity Alisa Khan, Khan, MD, MPH

Duration of Presentation in Minutes

15

Strategies to improve interpreter use in clinical care

K. Casev Lion, MD, MPH

Duration of Presentation in Minutes

15

Promises and pitfalls of the multilingual workforce in healthcare Lisa R. DeCamp, DeCamp, MD, MSPH

Duration of Presentation in Minutes

15

Making the case: Arguments for inclusion of families who speak languages other than English in pediatric research Katherine Yun. MD MHS

Duration of Presentation in Minutes

15

Let the Data Tell the Story: The Psychosocial Impact of Childhood Firearm Injury

Session Type: Hot Topic Symposia

Submitter: Christian Pulcini

Participant(s)

1. CP

Christian Pulcini, MD, MEd, MPH

Position:

Pediatric Emergency Medicine Physician/Assistant Professor

Organization:

University of Vermont Larner College of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

2. PE

Peter F. Ehrlich, MD MSc

Position:

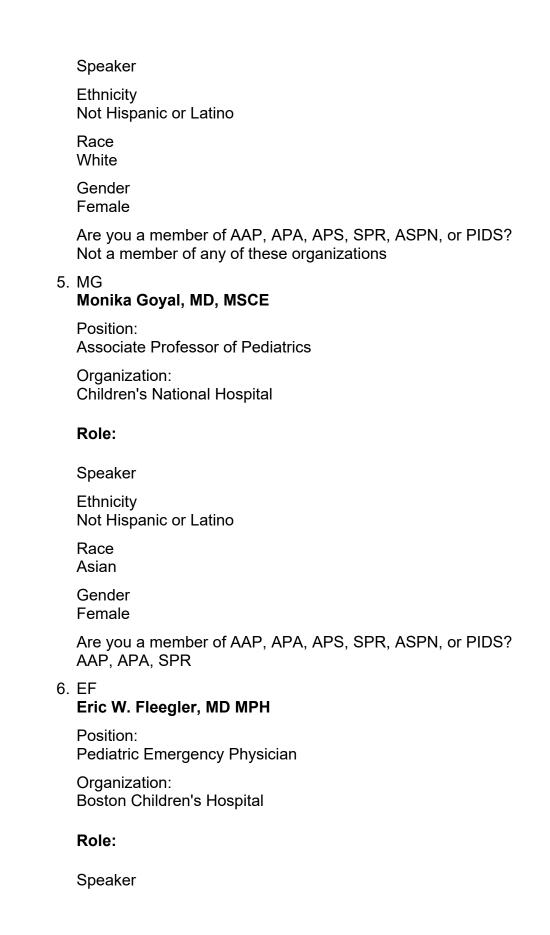
Professor of Surgery

Organization:

University of Michigan Medical School

Role:

Speaker Ethnicity Prefer not to respond Race Prefer not to respond Gender Male Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 3. JH Jennifer A. Hoffmann, MD, MS Position: Assistant Professor of Pediatrics Organization: Ann & Robert H. Lurie Children's Hospital of Chicago, Northwestern University Feinberg School of Medicine Role: Speaker **Ethnicity** Not Hispanic or Latino Race Asian, White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR Rachel K. Myers, PhD, MS Position: Research Assistant Professor Organization: Children's Hospital of Philadelphia & University of Pennsylvania Perelman School of Medicine Role:



Ethnicity
Not Hispanic or Latino

Race White

Gender Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

Session Description

Session Description

In this symposium, we will discuss recent research from our multi-center, multidisciplinary Children's Hospital Association research consortium to address the impact of firearm injury on healthcare utilization and expenditures, with a specific focus on mental health (MH) service use. We will present our research relating to: (a) healthcare utilization and expenditures of children before and after firearm injuries (presenter: Pulcini); (b) prevalence and risk factors for newly detected MH diagnoses among children who receive follow-up care after a firearm injury compared to children injured from a motor vehicle collision (presenter: Ehrlich); (c) how the timing of the first connection to outpatient MH care after a firearm injury among Medicaid-enrolled youth varies by sociodemographic and clinical characteristics, such as whether a new MH diagnosis was made during the injury hospitalization (presenter: Hoffmann); and (d) opportunities for system navigation to reduce barriers to MH care access following firearm injury (presenter: Myers). Our science demonstrates significant and impactful changes occur in children's health following a firearm injury, including increased healthcare and MH expenditures among children who had low prior expenditures, and rises in newly detected substance abuse and trauma-related disorders before and after a firearm injury. Finally, we will discuss areas of needed future research that may mitigate MH consequences following a firearm injury, in order to identify potential solutions and interventions.

Learning Objectives

 To describe children's health service utilization after a firearm injury, including expenditures, mental health diagnoses, and sociodemographic/clinical factors associated with mental health utilization

- 2. To illustrate an exemplar model of community-focused, hospital-based services for children after firearm injury, including integrated mental health services to reduce barriers to care.
- 3. N/A

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

40

2. Target audience

Individuals interested in Health Services, Injury Prevention, Mental Health, Trauma, and Public Policy

3. Tracks

Advocacy

Emergency Medicine

Epidemiology

Health Services Research

Injury Prevention

Mental Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

 Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Emergency Medicine, Mental Health, Trauma/Surgery, Public Health, Epidemiology, General Pediatrics

Presentation Titles and Durations

Longitudinal Healthcare Utilization and Expenditures of Children Before and After Firearm Injury

Christian Pulcini, MD, MEd, MPH **Duration of Presentation in Minutes** 20

Mental Health Consequences Following Firearm and Motor Vehicle Related Injuries: Impacting our Treatment Strategies
Peter F. Ehrlich, MD MSc

Duration of Presentation in Minutes

15

Mental Health Service Use after Pediatric Nonfatal Firearm Injuries Jennifer A. Hoffmann, MD, MS

Duration of Presentation in Minutes

15

Opportunities to Reduce Barriers to Mental Health Care Following Pediatric Firearm Injury

Rachel K. Myers, PhD, MS

Duration of Presentation in Minutes

15

Introduction to the Biopsychosocial Model and How it Applies to Firearm Injury among Children (moderator)

Monika Goyal, MD, MSCE

Duration of Presentation in Minutes

5

Introduction to the Multi-Center Research Consortium and Participants (moderator)

Eric W. Fleegler, MD MPH

Duration of Presentation in Minutes

5

The Changing Medicaid Program: Current Opportunities and Challenges

Session Type: State of the Art Plenary

Submitter: James Perrin

Participant(s)

```
1. JP
  James M. Perrin, MD
  Position:
  Professor of Pediatrics
  Organization:
  MassGeneral Hospital for Children, Harvard Medical School
  Role:
  Submitter; Speaker; Chair
  Ethnicity
  Not Hispanic or Latino
  Race
  White
  Gender
  Male
  Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
  AAP, APA, APS
2. JA
  Joan Alker, MPhil
  Position:
  Research Professor
  Organization:
  Georgetown University McCourt School of Public Policy
  Role:
  Speaker
```

Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations S. S. Stephanie Glier, Glier, MPH Position: Director, Federal Advocacy Organization: American Academy of Pediatrics Role: Speaker Ethnicity Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 4. SR SARA ROSENBAUM, ROSENBAUM, JD Position: Emerita Organization: George Washington University School of Medicine and Health Scient Role: Speaker		Ethnicity Not Hispanic or Latino
Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 3. SG Stephanie Glier, Glier, MPH Position: Director, Federal Advocacy Organization: American Academy of Pediatrics Role: Speaker Ethnicity Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 4. SR SARA ROSENBAUM, ROSENBAUM, JD Position: Emerita Organization: George Washington University School of Medicine and Health Scier Role:		
Not a member of any of these organizations 3. SG Stephanie Glier, Glier, MPH Position: Director, Federal Advocacy Organization: American Academy of Pediatrics Role: Speaker Ethnicity Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 4. SR SARA ROSENBAUM, ROSENBAUM, JD Position: Emerita Organization: George Washington University School of Medicine and Health Scier Role:		
Stephanie Glier, Glier, MPH Position: Director, Federal Advocacy Organization: American Academy of Pediatrics Role: Speaker Ethnicity Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 4. SR SARA ROSENBAUM, ROSENBAUM, JD Position: Emerita Organization: George Washington University School of Medicine and Health Scier Role:		
Director, Federal Advocacy Organization: American Academy of Pediatrics Role: Speaker Ethnicity Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 4. SR SARA ROSENBAUM, ROSENBAUM, JD Position: Emerita Organization: George Washington University School of Medicine and Health Scien	3.	
American Academy of Pediatrics Role: Speaker Ethnicity Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 4. SR SARA ROSENBAUM, ROSENBAUM, JD Position: Emerita Organization: George Washington University School of Medicine and Health Scien		
Speaker Ethnicity Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 4. SR SARA ROSENBAUM, ROSENBAUM, JD Position: Emerita Organization: George Washington University School of Medicine and Health Scien		•
Ethnicity Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 4. SR SARA ROSENBAUM, ROSENBAUM, JD Position: Emerita Organization: George Washington University School of Medicine and Health Scien		Role:
Not Hispanic or Latino Race White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 4. SR SARA ROSENBAUM, ROSENBAUM, JD Position: Emerita Organization: George Washington University School of Medicine and Health Scien		Speaker
White Gender Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 4. SR SARA ROSENBAUM, ROSENBAUM, JD Position: Emerita Organization: George Washington University School of Medicine and Health Scien Role:		
Female Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations 4. SR SARA ROSENBAUM, ROSENBAUM, JD Position: Emerita Organization: George Washington University School of Medicine and Health Scien		
Not a member of any of these organizations 4. SR SARA ROSENBAUM, ROSENBAUM, JD Position: Emerita Organization: George Washington University School of Medicine and Health Scier Role:		
SARA ROSENBAUM, ROSENBAUM, JD Position: Emerita Organization: George Washington University School of Medicine and Health Scien		
Emerita Organization: George Washington University School of Medicine and Health Scier Role:	4.	
George Washington University School of Medicine and Health Scier Role:		
		Organization: George Washington University School of Medicine and Health Sciences
Speaker		Role:
		Speaker

Ethnicity
Not Hispanic or Latino

Race White

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Medicaid and CHIP today insure more than half of US children and youth. No other age group depends so heavily on Medicaid. The programs provide a powerful tool to advance child health equity, yet they also help maintain a segregated system of child health care. Recent Medicaid changes, particularly expanding eligibility for postpartum women and young children, should improve access to care, while other recent efforts may expand services, especially in mental/behavioral health and through the EPSDT benefit. Early evaluation comparing states who expanded Medicaid for pregnancy and the first-year post-partum have indicated improvements in maternal outcomes. At the same time, a major threat to coverage comes with the end of the public health emergency (PHE), with that "unraveling" leading to disenrollment of large numbers of adults and young children. All of these changes also highlight the substantial state-to-state variation in access and benefits. The session begins with an overview of recent Medicaid opportunities and challenges, followed by discussion of the major changes in enrollment associated with the end of the public health emergency (Dr. Alker). The next presentation will describe recent federal government improvements in Medicaid for younger populations, including mental/behavioral health, payment, and eligibility (Ms. Glier). Finally, a leading Medicaid policy analyst will present a vision for a Medicaid program that addresses well the needs of children, youth, and young families (Prof. Rosenbaum).

Learning Objectives

 1. Participants will be able to describe recent state/Federal approaches to covering pregnant and postpartum women, as well as continuous eligibility for young children.

- 2. 2. Participants will be able to explain the impact of the public health emergency on Medicaid coverage and the degree of coverage "unraveling."
- 3. 3. Participants will be able to describe other developing strategies for improving Medicaid services, including major reform.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

Trainees, general pediatricians, pediatric subspecialists, educators, policymakers; health policy researchers; health services researchers

3. Tracks

Advocacy

Community Pediatrics

Developmental and Behavioral Pediatrics

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Health care financing

Medicaid

Health care reform

6. If your session was presented at another conference, please describe the conference and presentation.

NA

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

8. Additional comments

NA

9. Does this submission involve one or more specialties or disciplines?

Topic addresses Medicaid and access to care - involving both general pediatrics and subspecialty care. There is emphasis on equity and mental/behavioral health in the presentation.

Presentation Titles and Durations

Framing the Opportunities and Challenges in Medicaid James M. Perrin, MD

Duration of Presentation in Minutes

10

The Ending of the Public Health Emergency and Medicaid Unwinding Joan Alker, MPhil

Duration of Presentation in Minutes

20

Major Federal Achievements in Medicaid for Children, Youth, and Families Stephanie Glier, Glier, MPH

Duration of Presentation in Minutes

20

A Political and Policy Perspective on Medicaid Reform SARA ROSENBAUM, ROSENBAUM, JD **Duration of Presentation in Minutes** 20

The Blueprint for Youth Suicide Prevention: Identifying and Managing Suicide Risk in Clinical and Community Settings

Session Type: Panel Discussion

Submitter: Alex Kemper

Participant(s)

1. AK

Alex R. Kemper, MD, MPH, MS

Position:

Professor

Organization:

Nationwide Children's Hospital

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR

2. JG

Julie Gorzkowski, MSW

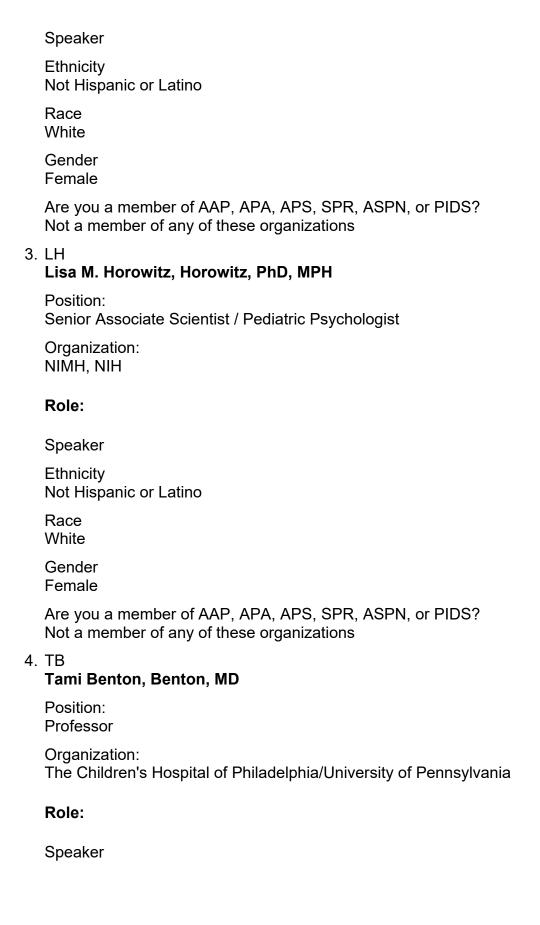
Position:

Director, Adolescent Health Promotion

Organization:

American Academy of Pediatrics

Role:



Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

5. CM

Christine Yu Moutier, Moutier, MD

Position:

Chief Medical Officer

Organization:

American Foundation for Suicide Prevention

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APA

Session Description

Session Description

In 2020, 6,663 youth in the United States aged 5 to 24 years died by suicide, a potentially preventable death. The youth suicide rate continues to rise and is disproportionately spread across race, ethnicity, gender, and sexual orientation. The COVID-19 pandemic has worsened the youth mental health crisis, as emergency departments saw nearly a 40% increase in visits for suspected suicide attempts.

In February 2022, Bright Futures recommended suicide risk screening for all youth aged 12 years and above. Shortly after, the American Academy of Pediatrics (AAP) and American Foundation for Suicide Prevention (AFSP), in collaboration with experts from the National Institute of Mental Health (NIMH), launched the "Blueprint for Youth Suicide Prevention" to guide clinicians and community members in employing proactive preventive strategies in different settings. The Blueprint was created as a roadmap to help pediatric healthcare providers to feasibly embed suicide prevention in their practices.

In this session, panelists will host a discussion on the Blueprint for Youth Suicide Prevention that includes discussing strategies for engaging pediatric healthcare providers and community members in suicide prevention practices, and providing updates on research findings and resources to reach youth of all backgrounds in various settings.

Learning Objectives

- 1. Identify youth suicide as a public health crisis, and the importance of having multiorganizational coordinated efforts to prevent suicide.
- Describe the "Blueprint for Youth Suicide Prevention" and its strategies for implementing proactive suicide prevention strategies in clinical and community settings.
- 3. Discuss the importance of prioritizing equitable suicide prevention in underserved youth (e.g., BIPOC youth, LGBTQ2S+ youth, Child Welfare System, those from under-resourced areas.)

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

Pediatricians, pediatric health providers, mental health clinicians, family physicians

3. Tracks

Clinical Research
Developmental and Behavioral Pediatrics
Diversity, Equity, and Inclusion
Health Services Research
Injury Prevention
Mental Health

Public Health

School and Community Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

 Other sessions that focus on suicide
- 6. If your session was presented at another conference, please describe the conference and presentation.

The original development of the Blueprint was presented at PAS 2022. However, we feel that due to COVID-19 precautions, audience was limited in attendance. This year, we will discuss how the Blueprint has been implemented and give timely updates.

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

8. Additional comments

N/A

9. Does this submission involve one or more specialties or disciplines?

Yes it is multidisciplinary (pediatrics, psychology, psychiatry, public health)

Presentation Titles and Durations

The public health crisis of suicide: Introducing the "Blueprint for Youth Suicide Prevention"

Alex R. Kemper, MD, MPH, MS

Duration of Presentation in Minutes

15

The development of the "Blueprint" and updates on ongoing implementation Julie Gorzkowski, MSW

Duration of Presentation in Minutes

15

Using the Blueprint to guide clinical practice for feasible suicide risk screening and management

Lisa M. Horowitz, Horowitz, PhD, MPH

Duration of Presentation in Minutes

15

Prioritizing underserved youth in suicide prevention efforts Tami Benton, Benton, MD

Duration of Presentation in Minutes

15

Community settings as partners in suicide prevention Christine Yu Moutier, Moutier, MD **Duration of Presentation in Minutes** 15

Novel diagnostics and therapeutics in pediatric chronic kidney disease: What's New In The Toolbox

Session Type: Hot Topic Symposia

Submitter: Kimberly Reidy

Participant(s)

1. KR

Kimberly J. Reidy, MD

Position:

Associate Professor

Organization:

Children's Hospital at Montefiore

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN

2. JG

Jason H. Greenberg, MD, MHS

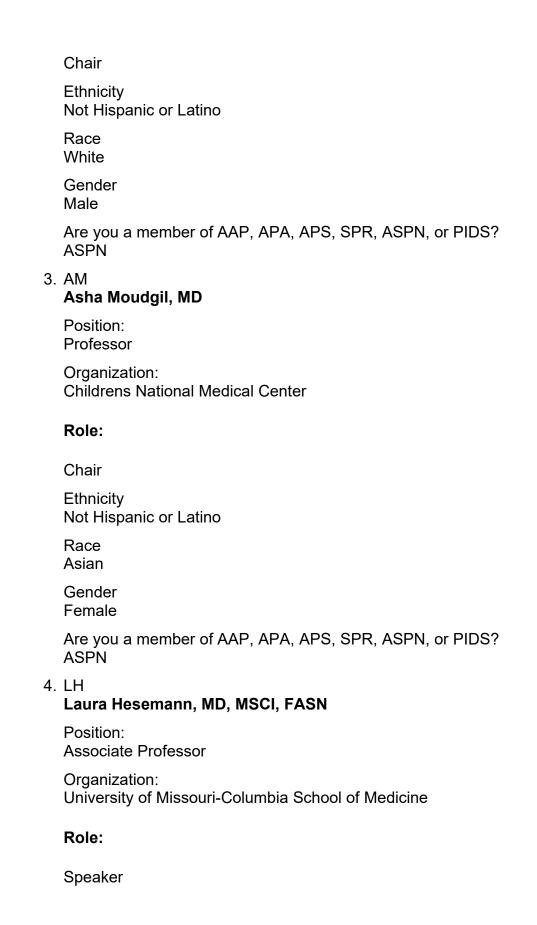
Position:

Assistant Professor of Pediatrics

Organization:

Yale School of Medicine

Role:



Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? ASPN

Session Description

Session Description

Brief Description of Overall Session:

The goal of this session is to review hot topics in pediatric chronic kidney disease, including novel therapeutics and approaches to diagnosis. This session will review new diagnostic techniques and therapeutic agents, and discussion of how these may be applied to children with CKD.

Topic/title: Update on renal function estimation

Objective: Understanding concepts of measuring kidney function by newer methods being researched: such as functional MRI and transdermal GFR measurement.

Topic/title: Computational pathology and nephrology: what can I learn from a 2D picture?

Objective: To understand advances in computational pathology and how such advances are changing pathology-based diagnoses, research, and therapeutics in children with CKD.

Topic/title: SGLT II inhibitor use in children with CKD

Objective: To identify the potential role for SGLT II inhibitor use in children with CKD, with and without diabetes; to review the mechanisms of SGLT II inhibition and hypothesized reasons for therapeutic efficiency and potential barriers to their use in children with CKD.

Topic/title: Endothelin Receptor Antagonists and Mineralocorticoid Receptor Antagonists in Pediatric CKD

Objective: Endothelin receptor and Mineralocorticoid receptor antagonists have been studied in CKD progression, including FSGS and IgA nephropathy. This

session will review the evidence and discuss use of these agents in pediatric CKD.

Learning Objectives

- 1. 1. Understand estimation of glomerular filtration and novel methods of assessing pathology in CKD.
- 2. 2. Describe the use of SGLT2 inhibitors for chronic kidney disease.
- 3. 3. Recognize the role of endothelin and mineralocorticoid receptor antagonists in Pediatric CKD.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

50-100

2. Target audience

Pediatric Nephrologist

3. Tracks

Nephrology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.
 ASPN events
- If your session was presented at another conference, please describe the conference and presentation. n/a
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

8. Additional comments

n/a

9. Does this submission involve one or more specialties or disciplines?

no

Presentation Titles and Durations

Duration of Presentation in Minutes

20

Overcoming barriers to address parenting in pediatric primary care

Session Type: Basic-Translational-Clinical Roundtable

Submitter: **Seth Scholer**

Participant(s)

1. SS

Seth J. Scholer, MD, MPH

Position:

Professor of Pediatrics

Organization:

Vanderbilt University School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA

2. VC

Victoria Carr, MD

Position:

Resident Physician

Organization:

Monroe Carell Jr. Children's Hospital at Vanderbilt

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

3. KC

Kathryn Carlson, MD, MMHC

Position:

Associate Professor of Clinical Pediatrics

Organization:

Monroe Carell Jr. Children's Hospital at Vanderbilt

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP

Session Description

Session Description

Translational research has led to the integration of a validated parenting assessment instrument into pediatric primary care. In theory, many public health problems (e.g., child abuse and its sequelae, mental health problems) could be prevented if parenting were routinely addressed in pediatrics - currently, this does not happen. In a study by Fleckman, pediatricians reported barriers to educating parents about discipline including time constraints (90%),

lack of reimbursement (48%), concerns about cultural sensitivity (44%), lack of resources (43%), lack of knowledge about how to counsel (32%), lack of evidence that counseling is effective (23%), lack of comfort (19%), and the belief that the issue is not a priority (14%). Efforts are needed to overcome these barriers. In this context, participants will learn about the development, preliminary validation, and clinical application of the Quick Parenting Assessment (QPA). The QPA, a 13-item parent-support tool, is associated with a 9-fold increase in childhood behavior problems. Ninety percent of parents report that the QPA review process increases objectivity for providers to offer the right level of parenting support. Speakers will review additional validation and implementation data, including cultural relevance and time and cost estimates. In the Vanderbilt clinic serving at-risk families, the QPA is administered to parents in three languages (English, Spanish, and Arabic) at the 15 month, 30 month, 5 year, and 8 year well child visit. Speakers will describe how to overcome barriers to integrate a parenting assessment into practice and review the implications of this scalable approach to improve public health.

Learning Objectives

- 1. Understand barriers that prevent parenting from being routinely addressed in pediatric primary care.
- 2. Understand the development, validation and clinical application of the Quick Parenting Assessment, a 13 item parent-support instrument.
- 3. Integrate a parenting assessment instrument into pediatric primary care.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

750

2. Target audience

General pediatricians Child abuse pediatricians Health services researchers Policy makers

3. Tracks

Child Abuse & Neglect
Developmental and Behavioral Pediatrics
General Pediatrics
Health Equity/Social Determinants of Health
Health Services Research
Injury Prevention

Mental Health Public Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply.

 Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Parenting

Child abuse prevention

Adverse childhood experiences

- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023? Does not apply
- 8. Additional comments

Many parenting assessment tools have been validated in research settings; however, because of their length, they may not be suitable for use in clinical settings. An exception is the Quick Parenting Assessment (QPA). The QPA is the first parenting assessment instrument, to our knowledge, that has been successfully integrated into pediatric practice. To more fully assess the potential for this proposal to improve child health and to be of interest to attendees at the 2023 PAS, please consider these publications and links:

- 1. O'Connell, L. K., Davis, M. M., & Bauer, N. S. (2015). Assessing parenting behaviors to improve child outcomes. Pediatrics, 135, e286–288. https://doi.org/10.1542/peds.2014-24971.
- 2. Fleckman JM, Scholer SJ, Branco N, Taylor CA. Educating Parents About Corporal Punishment and Effective Discipline: Pediatricians' Preparedness, Motivation, and Barriers. Acad Pediatr. 2021 Jan-Feb;21(1):149-157. doi: 10.1016/j.acap.2020.05.028. Epub 2020 Jun 5. PMID: 32512053; PMCID: PMC7718363.
- 3. Sausen KA, Randolph JW, Casciato AN, Dietrich MS, Scholer SJ. The Development, Preliminary Validation, and Clinical Application of the Quick Parenting Assessment. Prev Sci. 2022 Feb;23(2):306-320. doi: 10.1007/s11121-021-01320-w. Epub 2021 Nov 15. PMID: 34780005.
- 4. Vanderbilt University: The Quick Parenting Assessment. (2020). Retrieved from www.quickparentingassessment.org.
- 5. Splete H. Quick and easy parenting assessment could prevent adverse events. Pediatric News. May 20, 2021. URL:https://www.mdedge.com/pediatrics/article/240397/mental-health/quick-and-easy-parenting-assessment-could-prevent-adverse.
- 9. Does this submission involve one or more specialties or disciplines?

Yes. The topic overlaps with several disciplines including general pediatrics, public health, mental health, and child abuse prevention.

Presentation Titles and Durations

The development and validation of the QPA Seth J. Scholer, MD, MPH **Duration of Presentation in Minutes** 25

QPA implementation and cultural relevance research Victoria Carr, MD **Duration of Presentation in Minutes** 25

Integration of the QPA into pediatric primary care Kathryn Carlson, MD, MMHC **Duration of Presentation in Minutes**25

Optimizing Clinical Trials in Neonatal Hemodynamics Research

Session Type: Hot Topic Symposia

Submitter: Anup Katheria

Participant(s)

1. AK

Anup Katheria, Katheria, MD

Position:

Associate Professor

Organization:

University of California, San Diego School of Medicine

Role:

Submitter; Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR

2. JR

J. Lauren Ruoss, MD

Position:

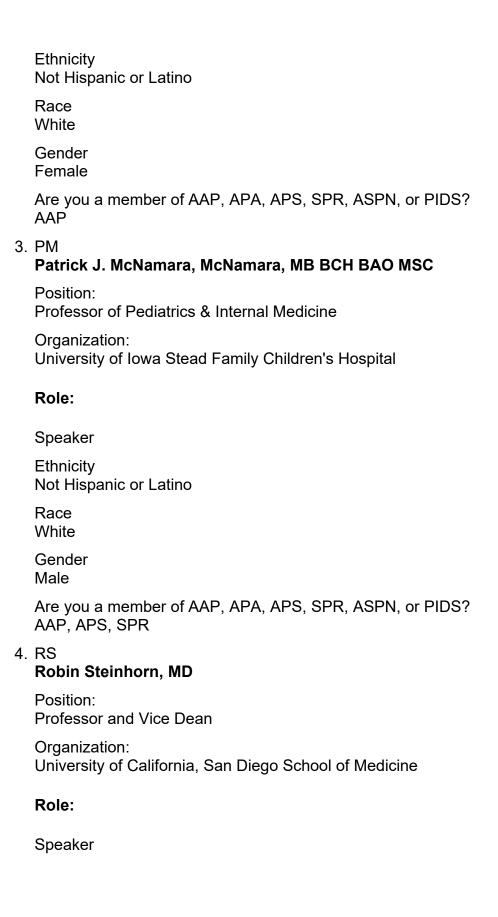
Assistant Professor

Organization:

PediatriX / Orlando Health Regional Hospital

Role:

Chair



	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS
5.	RG Regan E. Giesinger, MD FRCPC FASE
	Position: Associate Professor
	Organization: University of Iowa Stead Family Children's Hospital
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? SPR
6.	SM Souvik Mitra, MD, MSc, PhD, FRCPC
	Position: Associate Professor
	Organization: Dalhousie University & IWK Health
	Role:
	Speaker

Ethnicity
Not Hispanic or Latino

Race Asian

Gender Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations

Session Description

Session Description

Neonatal Hemodynamics research has evolved, from following simple protocols to providing detailed individualized patient directed therapies at the bedside. There is an increased uptake of neonatologists utilizing technologies such as targeted neonatal echocardiography, Near InfraRed Spectroscopy and integrated bedside monitoring to improve neonatal outcomes. However, clinical trials in this area have been challenged by a number of issues such as patient selection, consenting patients, how to standardize the use of user dependent modalities such as echocardiography, and outcome selection. This has led to medical uncertainty, variance in practice and skepticism related to disease relevance, utility of such diagnostic modalities and/or merits of treatment. This session will contain experts in both clinical trials and physiologists who can appropriately comment on both sides of the issue to improve trial design to answer important questions around neonatal hemodynamics.

Moderator: Lauren Ruoss, MD (PediatriX Medical Group / Orlando Health Winnie Palmer Hospital for Women and Babies)

History of Large Randomized Clinical trials in Hemodynamics: Many patients but few answers (Patrick McNamara, University of Iowa)

Enhancing patient selection - interface with physiology and phenotypes (Robin Steinhorn, Rady/UCSD)

Optimizing the randomization process: Use of Waiver, Cluster Crossover and Non-inferiority designs (Anup Katheria, Sharp Mary Birch Hospital for Women & Newborns)

Standardizing echocardiography in clinical trials: Lessons from the APTS trial (Regan Giesinger, University of Iowa)

Selecting the right outcomes in neonatal hemodynamic RCTs: Does one size fit all? (Souvik Mitra, Dalhousie University)

Learning Objectives

- 1. Upon completion, participants will be able to understand the problems of hemodynamic trials to date
- 2. Upon completion, participants will be able to review current hemodynamic guidelines and the science behind these recommendations
- 3. Upon completion, participants will be able to explore the knowledge gaps and identify future avenues for research in neonatal hemodynamics

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

200

2. Target audience

Neonatologists, neonatal fellows and residents, and advance practice providers

3. Tracks

Cardiology

Clinical Research

Neonatology

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

 Hemodynamics Club
- If your session was presented at another conference, please describe the conference and presentation.
 N/A
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

Does not apply

- 8. Additional comments
- 9. Does this submission involve one or more specialties or disciplines?

Neonatology and Cardiology

Presentation Titles and Durations

Optimizing the randomization process: Use of Waiver, Cluster Crossover and Non-inferiority designs Anup Katheria, Katheria, MD

Duration of Presentation in Minutes

15

History of Large Randomized Clinical trials in Hemodynamics: Many patients but few answers

Patrick J. McNamara, McNamara, MB BCH BAO MSC

Duration of Presentation in Minutes

15

Enhancing patient selection - interface with physiology and phenotype Robin Steinhorn, MD

Duration of Presentation in Minutes

15

Standardizing echocardiography in clinical trials: Lessons from the APTS trial Regan E. Giesinger, MD FRCPC FASE

Duration of Presentation in Minutes

15

Selecting the right outcomes in neonatal hemodynamic RCTs: Does one size fit all?

Souvik Mitra, MD, MSc, PhD, FRCPC

Duration of Presentation in Minutes

Scholarly Session ID: 1363851

In pursuit of research equity: Financial challenges to the inclusion of children in immigrant families in research

Session Type: Panel Discussion

Submitter: Sarah Polk

Participant(s)

1. MK

Melissa C. Kay, PhD, MS, MPH, RD

Position:

Assistant Professor

Organization:

Duke University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? APA

2. KM

Keith J. Martin, DO, MS

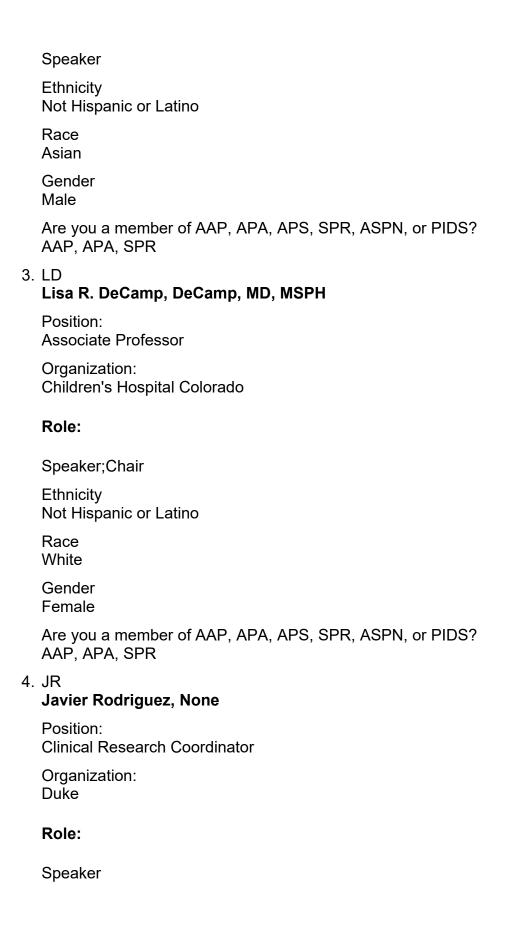
Position:

Assistant Professor of Pediatrics

Organization:

Johns Hopkins University School of Medicine

Role:



	Ethnicity Hispanic or Latino
5.	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? Not a member of any of these organizations
	SP
	Sarah Polk, MD, ScM, MHS
	Position: Associate Professor
	Organization: Johns Hopkins University School of Medicine
	Role:
	Submitter;Speaker;Chair
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA $$
6.	EP Eliana M. Perrin, Perrin, MD MPH
	Position: Bloomberg Distinguished Professor of Primary Care
	Organization: Johns Hopkins University Schools of Medicine and Nursing
	Role:
	Speaker

	Ethnicity Not Hispanic or Latino
	Race White
	Gender Female
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR
7.	CW Charles Wood, MD, MPH
	Position: Assistant Professor of Pediatrics
	Organization: Duke University School of Medicine
	Role:
	Speaker
	Ethnicity Not Hispanic or Latino
	Race White
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA
8.	MW Michelle White, MD, MPH
	Position: Assistant Professor
	Organization: Duke University School of Medicine
	Role:
	Speaker

Ethnicity Not Hispanic or Latino

Race

Black or African American

Gender Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, SPR

Session Description

Session Description

We will review how research inclusive of children in immigrant families costs more to conduct but is essential for equity, particularly when parent preferred language is not English. Parent preference for non-English language is associated with poverty which is associated with research participation obstacles as well as worse child health outcomes. As such it is crucial to engage immigrant families in research. Costs of inclusive research include: 1) translation costs, 2) increased staff time for IRB delays related to translation, explanation of unfamiliar procedures to participants, and oral administration of study questionnaires, 3) staff training, specifically of community health workers who possess essential skills but may lack technical and written communication skills, and 4) bilingualism, a measurable skill that merits increased compensation.

Equity in research, especially given acceleration of health disparities during the COVID-19 pandemic, will not be possible without additional financial investment from research granting institutions and policy changes related to budgets for studies that include participants with preferred language other than English.

Our panel discussion will include examples of research challenges and successes. We will also discuss policy solutions.

20min: How often are children in immigrant families included in research? (Keith Martin & Melissa Kay)

20min: How to successfully include immigrant families in medical research (Lisa DeCamp & Javier Rodriguez)

15min: Fun with spreadsheets: A review of expenses associated with inclusive research (Sarah Polk)

20min: Potential sources of the additional investment needed for research

equity (Eliana Perrin & Charles Wood)

15min: Question & Answer (DeCamp & Polk)

Learning Objectives

- 1. Define excess costs associated with the inclusion of immigrant families in research
- 2. Explain challenges and successes with research inclusive of immigrant families that underly excess costs
- 3. Offer policy solutions that promote equitable inclusion in research

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

150

2. Target audience

health equity advocate; diversity, inclusion & equity experts and leaders; healthcare policy experts; health disparities researchers; health economists; members of the immigrant health SIG

3. Tracks

Academic and Research Skills

Advocacy

Clinical Research

Diversity, Equity, and Inclusion

Epidemiology

Health Equity/Social Determinants of Health

Health Services Research

Immigrant Health

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible. immigrant health SIG; Latino child health research SIG
- 6. If your session was presented at another conference, please describe the conference and presentation.
- 7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

8. Additional comments

9. Does this submission involve one or more specialties or disciplines?

Presentation Titles and Durations

How often are children in immigrant families included in research? Melissa C. Kay, PhD, MS, MPH, RD

Duration of Presentation in Minutes

20

How often are children in immigrant families included in research? Keith J. Martin, DO, MS

Duration of Presentation in Minutes

20

How to successfully include immigrant families in medical research Lisa R. DeCamp, DeCamp, MD, MSPH

Duration of Presentation in Minutes

15

How to successfully include immigrant families in medical research Javier Rodriguez, None

Duration of Presentation in Minutes

20

Fun with spreadsheets: A review of expenses associated with inclusive research

Sarah Polk, MD, ScM, MHS

Duration of Presentation in Minutes

15

Potential sources of the additional investment needed for research equity Eliana M. Perrin, Perrin, MD MPH

Duration of Presentation in Minutes

20

Potential sources of the additional investment needed for research equity Charles Wood, MD, MPH

Duration of Presentation in Minutes

20

Question & Answer Michelle White, MD, MPH

Duration of Presentation in Minutes

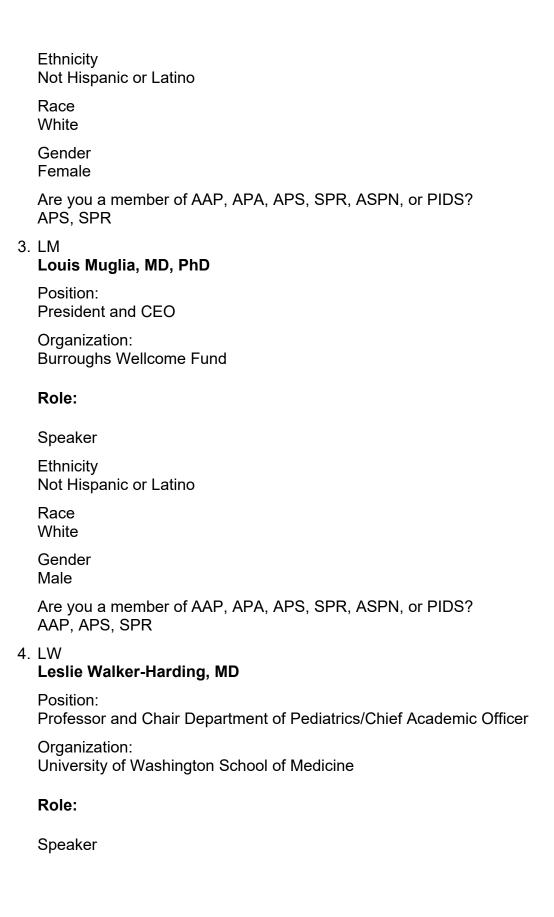
Scholarly Session ID: 1332176

Hot topics: ARPA-H; Funding for Child health research and diversity

Session Type: **Panel Discussion** Submitter: **Conrad Cole**

Participant(s)

1.	CC Conrad R. Cole, MD, MPH, MSc
	Position: Professor
	Organization: CCHMC
	Role:
	Submitter;Speaker;Chair
	Ethnicity Not Hispanic or Latino
	Race Black or African American
	Gender Male
	Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, SPR $$
2.	DB Diana W. Bianchi, MD
	Position: Director
	Organization: National Institute of Child Health and Human Development
	Role:
	Speaker



Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APS

5. TC

Tina L. Cheng, MD, MPH

Position:

Chair of Pediatrics, CMO, Director of Cincinnati Children's Research Foundation

Organization:

Cincinnati Children's Hospital, University of Cincinnati

Role:

Speaker; Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS? AAP, APA, APS, SPR

Session Description

Session Description

Session Chair: Conrad R. Cole MD, Cincinnati Children's

Agenda:

1. Introduction of speakers and Topics: Conrad Cole; Professor and Interim Division Director; Division of Gastroenterology, Hepatology and Nutrition,

Cincinnati Children's Hospital Medical Center, Cincinnati Children's Hospital Medical Center, University of Cincinnati

2 . NIH efforts on diversifying the pediatric research work force Impact of trans-NIH awards on diversifying early-career pediatric work force and pediatric research programs:

Dr. Diana Bianchi

Director, NICHD

3. Philanthropic and Foundation programs for developing the next generation of diverse child health researchers

Dr. Louis Muglia

President, Boroughs Wellcome Foundation

4. The PACT act update and potential impact on pediatric research and child health

Dr. Leslie Walker-Harding, Professor of Pediatrics, Chair, Department of Pediatrics, Seattle Children's Hospital, University of Washington

5. ARPA-H and Pediatrics:

ARPA-H and the potential impact on Pediatric research and child health? Dr. Tina Cheng; Professor and Chair, Department of Pediatrics, University of Cincinnati College of Medicine and Physician in Chief, Cincinnati Children's Hospital Medical Center

6. Q&A session and panel discussion:

Moderators: Conrad R. Cole and Tina Cheng

Learning Objectives

- 1. understand the Impact of trans-NIH and foundation awards on diversifying early-career pediatric work force and pediatric research programs
- 2. know the role of the new agency, The Advanced Research Projects Agency for Health (ARPA-H) and its potential impact on child health
- 3. learn about The PACT act and its potential impact on pediatric research and child health if implemented.

Scholarly Session Questions

1. Audience size – Please enter your best estimate of the expected number of attendees.

100

2. Target audience

Junior faculty and researchers

senior researchers

Department chairs and administrators

Senior fellows

Policy team

3. Tracks

Academic and Research Skills

Career Development

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

Leadership and Business Training

- 4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided. Select Not Applicable if this does not apply. Not Applicable
- 5. Please list up to 3 topics or events to avoid when scheduling this session. PAS will attempt to accommodate if possible.

Career development

Policy initiatives

Research funidng

6. If your session was presented at another conference, please describe the conference and presentation.

N/A

7. Should your session be considered for one of the special Highlighted Theme sessions at PAS 2023?

The Impact of Policies on Health and Research

8. Additional comments

None

9. Does this submission involve one or more specialties or disciplines?

Topic involves all specialties and disciplines that in child health research

Presentation Titles and Durations

Introduction and summary of policy initiatives to increase the next generation of diverse child health researchers

Conrad R. Cole, MD, MPH, MSc

Duration of Presentation in Minutes

10

Trans NIH efforts on diversifying the pediatric research work force Diana W. Bianchi, MD

Duration of Presentation in Minutes

Philanthropic and Foundation programs for developing the next generation of diverse child health researchers

Louis Muglia, MD, PhD

Duration of Presentation in Minutes

15

PACT act update and potential impact on pediatric research and child health Leslie Walker-Harding, MD

Duration of Presentation in Minutes

15

ARPA-H and the potential impact on Pediatric research and child health Tina L. Cheng, MD, MPH

Duration of Presentation in Minutes