

Proposal # : 377371

Session Title :

Individualized Neonatal Care-Sex-Specific Approach Matters!

Contact: pradeep alur

Email: palur@umc.edu

Type: Basic-Translational-Clinical Roundtable

Target Audience: Neonatologists, maternal-fetal medicine specialists, perinatologists, developmental specialists, pediatric pharmacologists, neonatal nurse practitioners

Audience Size: 300

Tracks: Basic Science Pathway | Clinical Research Pathway | Cross-Disciplinary Pathway | Global Neonatal & Children's Health | Neonatology | Public Health

Objectives: 1) Describe the sex-specific differences in fetal growth. 2) Discuss sex-specific fetal growth and the influence of maternal conditions. 3) Discuss sex differences in nutrition and metabolism in preterm infants. 4) Discuss sex-specific pharmacological effects in neonates. 5) Discuss sex differences in neonatal vulnerability to and recovery from neurologic insult.

Description: The biological differences between the sexes manifest quite early during fetal life. The crown-rump length is larger in male fetuses compared to females in the first trimester. Placentae of male and female fetuses have different protein and gene expressions, especially in adverse conditions. Even within the intrauterine milieu, the same extracellular micro RNA may show upregulation in females and downregulation in male fetuses. There appears to be a natural survival advantage for females. Maternal glucocorticoids (GC) play a key role in fetal growth and organ maturation. However, excess glucocorticoids can not only affect growth, but the response may be sex-specific and probably mediated through glucocorticoid receptors (GR) in the placenta. Mild pre-eclampsia and asthma are associated with normal growth patterns in males, but in female fetuses, they are associated with a slowing of growth rate without causing IUGR, probably as an adaptive response for future adverse events. Thus, female fetuses survive while male fetuses exhibit IUGR, preterm delivery, and even death in the face of another adverse event. There is growing evidence that maternal pre-pregnancy overweight or obesity status is directly associated with a higher risk of obesity in a male child, but not in a female child, at one year of age. It is fascinating that male and female fetuses respond differently to the same intrauterine environment, and this suggests a fundamental biological variation most likely at the cellular and molecular level.

It is well-known that weight, length, and head circumferences are greater in male preterm infants at all gestational ages. We have sex-specific growth charts such as Fenton-2013 for the preterm infants starting from 22 weeks of gestation. It is intuitive to wonder if growth rates are different between male and female ELBW infants, then their nutritional requirements would also be different. There is some preliminary clinical evidence suggesting the same. Poindexter et al., in their "early vs. late amino acid initiation study," noted that males in the late amino acid administration group had increased odds of having a suboptimal head circumference at 18 months corrected gestational age.

There are sex-specific differences in the outcomes associated with birth asphyxia. Males have poorer neurodevelopmental outcomes for a similar degree of hypoxic-ischemic encephalopathy. 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 on long-term outcomes.

Yet, many large perinatal studies have not explored if there were any sex-specific differences in the outcomes. Caffeine for Apnea of Prematurity trial showed gross motor functions were not different in those exposed to caffeine versus controls. Though animal studies have shown that neonatal caffeine exposure has sex-specific benefits; However, as the sex-specific analysis is not performed, any specific sex-related benefits of therapy may have been masked.

We, therefore, believe that bringing awareness about sex-specific analysis of the data in all the

neonatal studies may help us all understand the therapeutic options better in the future. This session involves basic science and animal research scientists, as well as perinatal clinical scientists, to discuss the Cross-Disciplinary Spotlight on this hot topic.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: plenary sessions

Additional Comments: The session involves basic science scientists, animal research investigators, neonatal pharmacology researchers, Neonatal nutrition specialists and neonatologists discussing various aspects of sex-differences in newborns. Hence, cross disciplinary pathway maybe suitable.

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: Initially speakers' presentations followed by, Q&A session. Audience will type their questions in the chat room and the speakers will answer.

Previous Session and Conference Experience: N/A

Chairs: pradeep alur (Chair); Norma Ojeda (Discussant); Brenda Poindexter (Moderator); Ted Rosenkrantz (Moderator); R. Holly Fitch (Discussant)

1 Speaker

Name: Norma Ojeda

Phone: 6019841855

Institution: University of Mississippi

Email: nojeda@umc.edu

Title/Topic: Sex Differences in the Developmental Origins of Diseases

Duration: 0

2 Speaker

Name: R. Holly Fitch

Phone: 8604863910

Institution: University of Connecticut

Email: roslyn.h.fitch@uconn.edu

Title/Topic: Sex differences in neonatal vulnerability to and recovery from neurologic insult

Duration: 0

3 Speaker

Name: Ted S. Rosenkrantz

Phone: 860-679-4064

Institution: University of Connecticut School of Medicine

Email: rosenkrant@uchc.edu

Title/Topic: Differences in neonatal response and recovery to therapeutic interventions for hypoxic neurologic injury

Duration: 0

4 Speaker

Name: pradeep alur

Phone: 2176492421

Institution: University of Mississippi Medical Center

Email: palur@umc.edu

Title/Topic: Sex Differences in Neonatal Nutrition-What Evidence Do We have?

Duration: 0

5 Speaker

Name: Brenda Poindexter

Phone: 5136360252

Institution: Cincinnati Children's

Email: brenda.poindexter@cchmc.org

Title/Topic: Impact of Gender in Provision of Nutrition to Optimize Growth Outcomes

Duration: 0

Proposal # : 377977

Session Title : Diagnosis and management of nephromegaly and renal tumor formation in patients with cancer predisposition syndromes

Contact: Jennifer Kalish

Email: kalishj@email.chop.edu

Type: Basic-Translational-Clinical Roundtable

Target Audience: general pediatricians, nephrologists, oncologists

Audience Size: 200

Tracks: Academic and Research Skills | Basic Science Pathway | Children with Chronic Conditions | Clinical Research Pathway | General Pediatrics | Hematology/Oncology | Nephrology

Objectives: -Identification of the common pediatric overgrowth syndromes leading to renal cancer -Discussion of clinical management strategies for diagnosis and treatment of patients with overgrowth syndromes -Understanding of the molecular pathogenesis underlying these overgrowth syndromes and the renal manifestations

Description: There are several overgrowth syndromes that predispose pediatric patients to renal cancer. Most commonly, these include Beckwith-Wiedemann Syndrome, Simpson-Golabi-Behmel syndrome, WAGR syndrome, and Deny-Drash syndrome. The goal of this session is to discuss the overall clinical features, molecular mechanisms, and renal management for patients with these syndromes. This will include discussion of the genetic etiology, clinical presentation to identify patients with these syndromes, current management and screening protocols. Finally, updates on the current understanding of the molecular pathogenesis of tumor formation in these syndromes will be presented. This information will provide pediatricians, nephrologists, and oncologists with a broader means to recognize these syndromes and tailor treatment appropriately.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: Saturday

Conflicting Sessions: nephrology

Additional Comments: The speakers represent a combination of geneticists, nephrologists, surgeons, and oncologists to provide the multiple aspects of clinical care for these patients from diagnosis, through screening, and management.

Financial Sponsor?:

Society Affiliation: ASPN

Participant Engagement: There will be a moderated interactive discussion with all speakers towards the end of the session. Participants will be offered the opportunity to submit questions during the session and the questions will be distributed to the speakers by the moderator. This will also allow speakers to jointly provide answers to questions.

Previous Session and Conference Experience: A version of this session focusing on Beckwith-Wiedemann syndrome (BWS) was presented last year at the national Deciphering Beckwith-Wiedemann Spectrum Conference in July 2019. This conference included an overview of the clinical features, molecular etiology, clinical management including tumor screening, and pathogenesis of BWS. Each session was followed by moderated question and answer period. In addition panel discussions with the speakers together provided an excellent forum to exchange ideas and jointly provide answers to questions.

Chairs: Jennifer Kalish (Chair)

1 Speaker

Name: Jennifer M. Kalish **Phone:** 215-5901278
Institution: Children's Hospital of Philadelphia **Email:** kalishj@email.chop.edu
Title/Topic: Diagnosis and molecular etiology of renal cancer predisposition syndromes
Duration: 0

2 Speaker

Name: Michael F. Walsh **Phone:**
Institution: Memorial Sloan Kettering Cancer Center **Email:** walshm2@mskcc.org
Title/Topic: Consideration of underlying renal cancer predisposition disorders in pediatric oncology patients
Duration: 0

3 Speaker

Name: Erum A. Hartung **Phone:** 267-908-2297
Institution: Children's Hospital of Philadelphia **Email:** HartungE@email.chop.edu
Title/Topic: Management of nephromegaly and renal complications of cancer predisposition syndromes
Duration: 0

4 Speaker

Name: Suzanne MacFarland **Phone:**
Institution: Children's Hospital of Philadelphia **Email:** macfarlands@email.chop.edu
Title/Topic: Cancer screening for patients with syndromes leading to renal cancer
Duration: 0

5 Speaker

Name: Elizabeth Mullen **Phone:**
Institution: Dana-Farber Cancer Institute **Email:** Elizabeth_Mullen@dfci.harvard.edu
Title/Topic: Oncological management of renal tumors in patients with cancer predisposition
Duration: 0

6 Speaker

Name: Andrew J. Murphy **Phone:**
Institution: St. Jude Children's Research Hospital **Email:** andrew.murphy@stjude.org
Title/Topic: Surgical management of renal tumors in cancer predisposition syndromes
Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 378208

Session Title : Chorioamnionitis and the neonate: A placental conspiracy of silence

Contact: Joyce Marie Koenig

Email: joyce.koenig@health.slu.edu

Type: Basic-Translational-Clinical Roundtable

Target Audience: Obstetricians, Neonatologists, Critical Care physicians, Pulmonologists, Infectious Disease specialists, Immunologists, Hematologists and Surgeons

Audience Size: 200

Tracks: Allergy, Immunology and Rheumatology | Basic Science Pathway | Children with Chronic Conditions | Clinical Research Pathway | Critical Care | Cross-Disciplinary Pathway | Developmental and Behavioral Pediatrics | Developmental Biology | General Pediatrics | Hematology/Oncology | Hospital-based Medicine | Infectious Diseases | Mental Health | Neonatology | Neurology | Public Health | Pulmonology | Scholarly Sessions

Objectives: The goal of this Session is to advance understanding of fundamental concepts related to the effects of a common perinatal condition on fetal and neonatal health. To meet this, experts in the study of the placenta, epidemiology, fetal inflammation, neonatal immunology, and epidemiology will provide the audience with new information regarding the following key areas: 1. The placental diagnosis of chorioamnionitis 2. Chorioamnionitis and the placental microbiome 3. Chorioamnionitis and its effects at the maternal-fetal interface 4. Chorioamnionitis and fetal/neonatal immunity 5. Chorioamnionitis and immune priming in the neonatal gut

Description: Chorioamnionitis is a pregnancy inflammation that is diagnosed by histologic analysis of the placenta. In its most severe form, chorioamnionitis can induce a fetal inflammatory response. It typically presents with clinical symptoms in the mother or fetus (clinical chorioamnionitis), particularly in term gestations. Conversely, histologic chorioamnionitis (HCA) is often clinically 'silent' and closely linked to preterm birth. HCA may contribute to the pathogenesis of neonatal complications (sepsis, brain injury, chronic lung disease, necrotizing enterocolitis). Mounting evidence also suggests that fetal exposure to inflammation could contribute to health issues in later life, including cardiovascular disease, asthma, and cognitive dysfunction. The goal of this Scientific Session is to highlight cutting-edge research focused on the pathogenesis of HCA as well as on the mechanisms that contribute to adverse fetal and neonatal outcomes. The target audience includes clinicians and scientists interested in perinatal outcomes, developmental immunology and/or mechanisms of inflammation.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: Saturday

Conflicting Sessions: neonatology, perinatal health, inflammation

Additional Comments: This session incorporates multi-disciplinary discussion of a relatively common perinatal disorder with life-long health implications. These short lectures should appeal to a wide spectrum of clinical and research interests among both clinicians and scientists.

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: I was involved as a moderator for the PAS Summer Neonatology Webinar series, and found the session to go smoothly overall. As part of the proposed session, Dr Molloy and I will provide a short welcome session with participants. We will introduce each speaker prior to each talk, and then moderate the Q&A session.

Previous Session and Conference Experience: N/A

Chairs: Joyce Marie Koenig (Contact Person); Eleanor Molloy (Moderator); Raymond Redline (Presenter); Kjersti Aagaard (Presenter); Suhas Kallapur (Presenter); Dr. Claire Chougnnet (Presenter); Joern-Hendrik Weitkamp (Presenter)

1 Speaker

Name: Eleanor Molloy **Phone:** 00353868093459
Institution: Trinity College, the University of Dublin **Email:** eleanor.molloy@tcd.ie
Title/Topic: Welcome
Duration: 0

2 Speaker

Name: Joyce Marie Koenig **Phone:** 314-489-9269
Institution: Saint Louis University **Email:** joyce.koenig@health.slu.edu
Title/Topic: Overview
Duration: 0

3 Speaker

Name: Raymond Redline **Phone:** 2167894546
Institution: University Hospitals Cleveland Medical Center **Email:** raymond.redline@uhhospitals.org
Title/Topic: Histologic chorioamnionitis: implications for clinical diagnosis, treatment and prognosis
Duration: 0

4 Speaker

Name: Kjersti M. Aagaard **Phone:** 8012307893
Institution: Baylor College of Medicine **Email:** aagaardt@bcm.edu
Title/Topic: Of babies & bugs: Surprising starts
Duration: 0

5 Speaker

Name: Suhas Kallapur **Phone:** 1-310-206-8489
Institution: David Geffen School of Medicine **Email:** SKallapur@mednet.ucla.edu
Title/Topic: Immune changes at the maternal-fetal interface during chorioamnionitis
Duration: 0

6 Speaker

Name: Dr. Claire Chougnnet **Phone:** 5136368847
Institution: CCHMC **Email:** claire.chougnnet@cchmc.org
Title/Topic: Chorioamnionitis and fetal/neonatal immunity
Duration: 0

7 Speaker

Name: Joern-Hendrik Weitkamp **Phone:** 6153223476
Institution: Vanderbilt **Email:** hendrik.weitkamp@vumc.org
Title/Topic: The placenta-gut connection
Duration: 0

Proposal # : 378643

Session Title : Rethinking the Roots, Reality, and Remediation of Environmental Health Disparities

Contact: Norma Kreilein

Email: norma.kreilein@gmail.com

Type: Basic-Translational-Clinical Roundtable

Target Audience: Academic research faculty, clinical providers, physicians in training

Audience Size: unable to estimate audience size

Tracks: Advocacy Pathway | Clinical Bioethics | Clinical Research Pathway | Community Pediatrics | Cross-Disciplinary Pathway | Environmental Health | Epidemiology & Health Services Pathway | General Pediatrics | Global Neonatal & Children's Health | Health Equity/Social Determinants of Health | Public Health | Quality Improvement/Patient Safety

Objectives: 1. Identify the processes and scope of how environmental regulations are circumvented or ineffective. 2. Briefly review relevant existing research on the significance of disproportionate environmental exposure. 3. Explore research and advocacy opportunities to address disproportionate exposure. After this presentation, participants will be more aware of the clinical and research implications of disproportionate environmental exposure and challenged to consider how they might be able to assist in remediating affected communities.

Description: Environmental health disparities are well described within rural and minority communities, particularly regarding infant mortality. The US continues to lag behind developed countries, despite committing massive resources. Why isn't US health care improving infant mortality? Are personal habits to blame, or are we missing something? Are regulations achieving results in the most vulnerable communities? If not, why not? Why are rural areas continuing to welcome dysfunctional policies while communities of color are unable to control their own exposure?

Dr. Norma Kreilein has been involved in regional and national environmental advocacy for over a decade while practicing community pediatrics in a rural setting for 30 years. Her presentation will highlight examples of 1) flawed data collection and official conclusions lacking sampling/statistical validity, 2) deliberate inadequate monitoring of clustered industrial polluters, and 3) conflicts of interest and bureaucratic processes which obstruct and obscure the environmental component to infant mortality and other measures of public health.

Knowledge of how and to what extent environmental regulations are circumvented is critical to directing research, advocacy, and clinical practice toward closing existing loopholes and benefitting disproportionately burdened communities. This presentation seeks to make clinicians and research faculty "environmentally aware" in addition to being "trauma aware."

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: obesity

Additional Comments: It is critical for academic research faculty to appreciate how existing research and legislation translates to actual health morbidity and mortality and the challenges faced by rural and minority communities, as well as for clinical providers to be aware of the clinical implications of disproportionate exposure.

Financial Sponsor?:**Society Affiliation:** Other/No Affiliation**Participant Engagement:** interactive discussion after presentation

Previous Session and Conference Experience: 1. University of Notre Dame Medical Alumni Society Game Day lecture October 30, 2016 (lecture) 2. Catholic Medical Association National Educational Conference (CME) September 7, 2015 (lecture) 3. Bioethics Series, Carle Physician Group (to be presented October 12, 2020) (lecture) 4. Poster Presentation, "Are deficient science and ineffectual bureaucracy killing babies?" Catholic Medical Association National Education Conference 2014 (abstract published <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4434791/>) 5. Poster Presentation, "Flaws in Indiana Air Quality Science," 2016 International Congress of Pediatrics, Vancouver, British Columbia, Canada. 6. Poster Presentation, "A CRITICAL ASSESSMENT OF THE SCIENTIFIC INTEGRITY OF STATE ENVIRONMENTAL AND HEALTH PROCESSES RELATIVE TO A PROPOSED COAL-TO-DIESEL PLANT IN DALE, INDIANA," 2019 International Congress of Pediatrics, Panama City, Panama. 7. "Air Pollution Effects on Human Health - Children and the Inflammation Response," (lecture) presented at Congressional Briefing "Human Health Effects of Biomass Incinerators", Washington DC, September 23, 2012 (slides and citations available at www.saveamericasforests.org)

Chairs: Norma Kreilein (Presenter)

1 Speaker**Name:** Norma J. Kreilein**Phone:** 8126392902**Institution:** Carle Physician Group**Email:** norma.kreilein@gmail.com**Title/Topic:** Rethinking the Roots, Reality, and Remediation of Environmental Health Disparities**Duration:** 0

Proposal # : 378688

Session Title : Under the Influence: Fetal Alcohol Exposure and the Biology of Trauma

Contact: John Stirling

Email: jstirlings@aol.com

Type: Basic-Translational-Clinical Roundtable

Target Audience: Mental health professionals, Physicians, Social Services providers

Audience Size: 30

Tracks: Adolescent Medicine | Child Abuse & Neglect | Children with Chronic Conditions | Cross-Disciplinary Pathway | Developmental and Behavioral Pediatrics | General Pediatrics | Mental Health

Objectives: After attending, participants will be able to: 1) Explain alcohol's teratogenic effects on the developing brain and subsequent behavior 2) Contrast with what are thought to be trauma's effects on brain and behavior 3) Describe how therapeutic approaches to trauma differ between children with or without preexisting neurodevelopmental conditions 4) List possible implications for research

Description: The neurodevelopmental effects of prenatal alcohol exposure (ND-PAE) and childhood toxic stress are often coexistent and interacting impediments to normal child development. Prenatal alcohol acts to potentiate the influence of toxic stress through its neurotoxic effects on the developing structures responsible for coping with stress. As postnatal toxic stress and prenatal ND-PAE often coexist, and symptoms of each share many similarities, it can be easy to ignore one factor or the other. Understanding of trauma's consequences is improved by an appreciation of the neurologic substrates through which toxic stress must be processed. Preexisting brain injury conferred by ND-PAE impairs adaptability (resilience) and should be taken into account during assessment and intervention.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Fetal Alcohol Spectrum Disorders; Trauma (consequences,therapy)

Additional Comments: This is a timely topic, and as such, continues to evolve as new research arrives. I believe it's a good fit for this PAS track, as it considers the multidisciplinary consequences of confusing or conflating two outwardly similar neurodevelopmental conditions, and reminds attendees of the important interactions between the two. Primary audience would be medical and mental health practitioners, though I believe it to be of general interest.

Financial Sponsor?:

Society Affiliation: AAP

Participant Engagement: Q&A session, open to input during talk. I plan to ask questions and solicit input during the presentation.

Previous Session and Conference Experience: An earlier version of this presentation was given at the San Diego Conference on Child and Family Maltreatment last January, and at the National Children's Advocacy Center Symposium in Huntsville AL in March 2019.

Chairs:

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378064

Session Title : Hot Topic Debates: Antibiotic Use in Hospitalized Children

Contact: Matthew Kronman

Email: matthew.kronman@seattlechildrens.org

Type: Debate/Pro-Con Discussion

Target Audience: Medical student and resident trainees; general pediatricians, hospitalists, and specialists in emergency medicine, gastroenterology, and infectious diseases.

Audience Size: 50-100

Tracks: Children with Chronic Conditions | Clinical Research Pathway | Critical Care | Epidemiology & Health Services Pathway | Gastroenterology/Hepatology | General Pediatrics | Health Services Research | Hospital-based Medicine | Infectious Diseases | Quality Improvement/Patient Safety

Objectives: After the session, participants will be able: 1. To describe the data for and against use of antibiotics for non-infectious indications, such as promoting gastric motility. 2. To select infectious conditions in hospitalized children for which oral antibiotic therapy is safe and effective. 3. To review situations in which biomarkers should be used to guide antibiotic management decisions.

Description: Antibiotic use in hospitalized children is now closely scrutinized by antibiotic stewardship programs. This session will involve 3 debates on hot topics relating to how antibiotic use should be managed for hospitalized children, including whether antibiotic use for non-infectious conditions (such as to promote gastric motility) should be regulated and reduced; whether early transition to oral antibiotic therapy for infections in hospitalized children is safe and effective; and whether other diagnostic tests – biomarkers like CRP or procalcitonin – should be used to guide antibiotic therapy in our patients. During this session, national leaders in Gastroenterology, Infectious Diseases, and Critical Care Medicine will debate these topics. The format will involve three 30 minute debates, in which each speaker will review the scientific evidence for her/his position for 8-10 minutes (maximum 20 minutes total), each speaker will have a chance to respond to the other speaker for 2 minutes (4 minutes total), and in which audience participation will be garnered through live polling and questions will be allowed (remaining 6-10 minutes total). The presentation of the initial position could be pre-recorded, while the rebuttals and Q&A section would 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 children, 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 children, including medical student and resident trainees, general pediatricians, hospitalists, and specialists in emergency medicine, gastroenterology, and infectious diseases.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Infectious Diseases track sessions

Additional Comments:

Financial Sponsor?:

Society Affiliation: NASPGHAN

Participant Engagement: Live polling / voting during the debate sessions; live Q&A at the end of each debate session; moderators to monitor chat functions actively

Previous Session and Conference Experience:

Chairs: Rana Hamdy (Moderator); Matthew Kronman (Moderator)

1 Speaker

Name: Rachel Rosen

Phone: 6178381067

Institution: Boston Children's Hospital

Email: Rachel.Rosen@childrens.harvard.edu

Title/Topic: Antibiotic Use for Non-infectious Indications Should Be Unrestricted (Pro)

Duration: 0

2 Speaker

Name: Preeti Jaggi

Phone: 614-353-2588

Institution: Emory University

Email: preeti.jaggi@emory.edu

Title/Topic: Antibiotic Use for Non-infectious Indications Should Be Unrestricted (Con)

Duration: 0

3 Speaker

Name: Kathleen Chiotos

Phone: 7575613578

Institution: Children's Hospital of Philadelphia

Email: CHIOTOSK@email.chop.edu

Title/Topic: Oral Antibiotic Therapy is Safe and Effective for Serious Infections in Hospitalized Children (Pro)

Duration: 0

4 Speaker

Name: Sarah Long

Phone: 484-431-8628

Institution: Drexel U College of Medicine

Email: SL58@drexel.edu

Title/Topic: Oral Antibiotic Therapy is Safe and Effective for Serious Infections in Hospitalized Children (Con)

Duration: 0

5 Speaker

Name: Kevin J. Downes

Phone: 2155904024

Institution: Children's Hospital of Philadelphia

Email: downeskj@email.chop.edu

Title/Topic: Biomarkers Should Be Used to Guide Inpatient Antibiotic Management (Pro)

Duration: 0

6 Speaker

Name: Maya Dewan

Phone: 2157567060

Institution: Cincinnati Children's Hospital Medical Center

Email: maya.dewan@cchmc.org

Title/Topic: Biomarkers Should Be Used to Guide Inpatient Antibiotic Management (Con)

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 378475

Session Title : PRO: Hypoglycemia in critically ill children should make everyone break out into a cold sweat!

CON: Hypoglycemia in critically ill children - much ado about nothing!

Contact: Vijay Srinivasan

Email: srinivasan@email.chop.edu

Type: Debate/Pro-Con Discussion

Target Audience: Pediatric intensivists, pediatric endocrinologists, (pediatric neonatologists)

Audience Size: 50

Tracks: Critical Care | Endocrinology | Neonatology | Quality Improvement/Patient Safety

Objectives: 1. Define hypoglycemia thresholds in critically ill children 2. Discuss various monitoring modalities to detect hypoglycemia in critically ill children 3. Describe impact of hypoglycemia on neuro-cognitive and other clinical outcomes in the critically ill pediatric patient

Description: This pro-con debate will review the problem of hypoglycemia detection and monitoring in critically ill children admitted to the pediatric intensive care unit with impact on neuro-cognition and other outcomes. There is not quite enough evidence for harm, but the data is mounting. While data from neonates is more convincing for harm from hypoglycemia, the evidence is not so clear in older critically ill children. Recent trials of tight glucose control in this population of critically ill children did not observe any convincing benefits from such a strategy, but all trials uniformly observed variable increase in hypoglycemia rates. More concerning, many critically ill children may have hypoglycemia even in the absence of tight glucose control and detection is often difficult due to the inability to discern symptoms. However, it remains unclear if hypoglycemia is transient or sustained due to current intermittent sampling methods with implications for detection and impact on outcomes.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: Saturday

Conflicting Sessions: N/A

Additional Comments: Lively and engaging discussion on a controversial topic

Financial Sponsor?:

Society Affiliation: AAP

Participant Engagement: Chat and Q and A; possible poll

Previous Session and Conference Experience: N/A

Chairs: Vijay Srinivasan (Panelist); Michael Agus (Panelist)

1 Speaker

Name: Vijay Srinivasan

Phone: 2156887377

Institution: The Children's Hospital of Philadelphia **Email:** srinivasan@email.chop.edu

Title/Topic: PRO: Hypoglycemia in critically ill children should make everyone break out into a cold sweat!

Duration: 0

2 Speaker

Name: Michael Agus

Phone: 6173555849

Institution: Boston Children's Hospital

Email: michael.agus@childrens.harvard.edu

Title/Topic: CON: Hypoglycemia in critically ill children - much ado about nothing!

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378584

Session Title : Congenital CMV Infection in 2021: To Screen or Not to Screen?

Contact: Mark Schleiss

Email: schleiss@umn.edu

Type: Debate/Pro-Con Discussion

Target Audience: General pediatricians involved in newborn care; neonatologists; pediatric infectious diseases specialists; public health officials; child health advocacy groups

Audience Size: 500

Tracks: Breastfeeding/Human Milk | Clinical Bioethics | Clinical Research Pathway | Community Pediatrics | Developmental and Behavioral Pediatrics | Epidemiology & Health Services Pathway | General Pediatrics | Hospital-based Medicine | Infectious Diseases | Neonatology | Neurology | Public Health | Quality Improvement/Patient Safety | Well Newborn

Objectives: 1. Recognize the pros and cons of universal CMV screening and the current debate over whether such screening should be added to the Recommended Uniform Screening Panel (RUSP) profile. This will be the position taken by Drs. Sanchez and Dunn during this debate: to advocate for UNIVERSAL CMV screening. Dr. Sanchez will debate the position that even asymptomatic congenitally infected infants stand to benefit from universal screening. He will also take the position that a positive screen should engender an evaluation that will benefit infants. The theme: "So the CMV Screen is Positive, Now What?" Dr. Dunn will share experience from Ontario's universal congenital CMV screening program, and speak to logistic and policy issues arising from Ontario's experience in establishing this program. The theme: screening is beneficial, and can be integrated into a state or province's Early Hearing Detection and Intervention (EHDI) program. 2. Understand the difference between UNIVERSAL CMV screening and TARGETED CMV screening. Dr. Demmler-Harrison will take the viewpoint that although it may be premature to consider adding CMV screening to the RUSP panel, that the time has come for newborn nurseries to adopt targeted CMV screening, with a particular focus on infants that fail the newborn hearing screen. Dr. Demmler-Harrison will also put her position into context by discussing ongoing child advocacy programs and legislative initiatives that have, in several states in the USA, created CMV education and/or screening programs through legislative action. 3. Acknowledge the dissenting opinion of the fourth debater, Dr. Mark Schleiss, who will posit that it is premature to adopt ANY type of screening program for congenital CMV. Dr. Schleiss will weigh in on the necessary prerequisites for adding tests to the RUSP panel and discuss what would be required for CMV to join this list of conditions. He will take the positions that: 1) since newborn screening for congenital CMV will in most instances identifies infants with a completely normal prognosis for a good outcome and; 2) that targeted screening will identify infants likely to be over-treated with antiviral therapy without evidence of benefit and risk of harm (for example, the position of some state chapters of the American Academy of Pediatrics, including the Utah Chapter of the AAP), that we should recognize that neither universal nor targeted screening is "ready for prime time". Dr. Schleiss will also debate the position that positive cCMV screens hold the possibility of creating a "vulnerable child syndrome" and that no good systems yet exist for monitoring these infants. He will share data from Minnesota's current universal congenital CMV screening research study, discussing the challenges arising from identification of cCMV in infants who have normal physical examination, laboratory data, and neuroimaging. He will review the arguments of a pediatric hospitalist group (DOI: <https://doi.org/10.1542/peds.2020-0617>) who have raised concerns, from the hospitalist perspective, regarding newborn cCMV screening.

Description: There is considerable debate about whether congenital CMV (cCMV) screening should be added to the Recommended Uniform Screening Panel (RUSP) profile and, indeed, whether this condition fits the paradigm of a "screenable disorder". Four

internationally recognized experts in congenital CMV screening will engage in a robust debate about newborn screening for congenital CMV. This discussion will cover both the topic of universal screening and so-called "targeted screening", in which infants that have "refer" status on the newborn hearing screen (NHS) have diagnostic studies obtained for cCMV prior to hospital discharge. One opinion holds that universal and targeted screening benefits infants and improves outcomes. The opposing view holds the position that, since most infants with congenital CMV are destined to have normal outcomes, that universal screening may actually put infants at risk, through over-diagnosis and over-treatment with unwarranted nucleoside therapy. This line of debate will make the case that no screening is warranted at this time for congenital CMV infection, based on our lack of knowledge and the risk of harm (over-treatment with antivirals, creation of the "vulnerable child" syndrome, etc.). This opinion has been voiced in a recent paper in Pediatrics (DOI: <https://doi.org/10.1542/peds.2020-0617>, *Ethical and Public Health Implications of Targeted Screening for Congenital Cytomegalovirus*), which argues that newborn cCMV screening is not warranted.

The session will consider all facets of of this debate - *Congenital CMV Infection in 2021: To Screen or Not to Screen?* There is considerable debate about whether congenital CMV screening should be added to the RUSP portfolio and, indeed, whether this condition fits the paradigm of a "screenable disorder". Two internationally recognized experts in congenital CMV screening will argue that screening does fit the RUSP paradigm and is 1) beneficial and 2) can be integrated into current screening programs. Another speaker will opine that even if universal congenital CMV screening may be premature, that "targeted" screenings should become standard-of-care. The final speaker will make the case that neither universal nor targeted screening is warranted at this time for congenital CMV infection.

The debate will consist of short presentations followed by rebuttals. The moderator will coordinate the debate and direct discussion and responses and rebuttals. Audience participation will be encouraged. At the end of the debate, the session moderator will provide a short summary of the discussion, will provide their assessment of who "won" the debate (assisted by an audience response system vote, as feasible in a "virtual" format) and will outline their conclusions, including high-priority areas for future work germane to this important public health topic.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Request that this session not overlap with PIDS programming.

Additional Comments: This will be a vigorous and robust debate among experts that will be broadly relevant and of interest to many constituencies at the PAS meeting. The dynamics of cCMV screening, both universal and targeted screening, are currently a "hot topic" in Pediatrics. In addition to the inclusion of cCMV universal screening in the EHDI program in Ontario, Canada, there are many legislative initiatives on a state-by-state basis across the USA. We believe this is a very topical proposal that will generate considerable discussion.

Financial Sponsor?:

Society Affiliation: MOD

Participant Engagement: Question, comments and personal experience will be embedded in the session; since this is a Pro/Con Debate session, particular emphasis will be placed on enabling and encouraging audience participation, discussion and questions. We would also look to inclusion of a Pediatric Hospitalist in the session, subject to program committee approval, since Hospitalists are key stake-holders in this discussion. Subject to feasibility in the context of a remote session, we hope to include an audience response component, as well as an audience poll as to what positions they favor after hearing the pros and cons (pro-CMV screening and con-CMV screening).

Previous Session and Conference Experience: We have not presented this session previously.

Chairs: Mark Schleiss (Moderator)

1 Speaker

Name: Pablo J. Sanchez

Phone: 614-355-6638

Institution: Nationwide Children's Hospital - The Ohio State University

Email: pablo.sanchez@nationwidechildrens.org

Title/Topic: So the CMV Screen is Positive, Now What?

Duration: 0

2 Speaker

Name: Jessica Dunn

Phone: 613-737-7600

Institution: Children's Hospital of Eastern Ontario **Email:** Jdunn@cheo.on.ca

Title/Topic: Universal Screening for cCMV is Feasible in the Context of an Early Hearing Detection and Intervention Program: The Ontario Experience

Duration: 0

3 Speaker

Name: Gail Demmler-Harrison

Phone:

Institution: Baylor College of Medicine

Email: gdemmler@bcm.edu

Title/Topic: Until the Questions Regarding Universal cCMV Screening are Resolved, We Should Adopt Targeted Screening for Congenital CMV!

Duration: 0

4 Speaker

Name: Mark R. Schleiss

Phone: 612-626-9913

Institution: Center for Infectious Diseases and Microbiology Translational Research

Email: schleiss@umn.edu

Title/Topic: It's Premature to Recommend ANY Newborn Screening Program for Congenital CMV Infection: Addressing the Ethical Concerns Created by Universal and Targeted cCMV Screening

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 377286

Session Title : Top Articles in Medical Education 2020: Applying the Current Literature to Educational Practice and Scholarship

Contact: Barrett Fromme

Email: hfromme@peds.bsd.uchicago.edu

Type: Hot Topic Symposia

Target Audience: Faculty, Fellows, Residents, Medical Educators

Audience Size: 150-200

Tracks: Education Pathway

Objectives: By the end of the session, participants will be able to: - List major thematic areas of investigation and publication in medical education for the year 2020 - Discuss the outcomes of the top articles in medical education in 2020 - Formulate approaches to incorporating medical education

Description: We expect that our clinicians provide evidence-based care for their patients. Similarly, we should expect that our educators provide evidence-based teaching for their learners. However, navigating the educational literature and interpreting the nomenclature can feel daunting. With impactful, high quality publications ranging across the continuum of undergraduate, graduate, and continuing medical education, in addition to educational innovations being described in specialties beyond pediatrics, it would be useful to have a tailored resource for pediatric educators. This session plans to address that need.

Now in our fourth year presenting this Symposium (fifth year accepted), we will present and synthesize the most relevant and practice-changing articles in medical education from the year 2020. An expert panel of pediatric educators from the APA Education Committee will review the medical education literature using a modified Delphi approach to determine the top 15-16 articles in medical education. These articles will have the highest relevance to the teaching of pediatrics and potential to change teaching and curricular development across the continuum of education. The articles will be grouped into thematic areas that develop through the process (not selected a priori), but attention will be paid to providing a diversity of articles covering all points in the education continuum. Members of the expert panel will present the different thematic areas as "Hot Topics" for this presentation, including areas of controversy and areas for further scholarship. Audience members will be invited to engage with the presenters to discuss the issues.

Due to the nature of the review, we cannot provide specific topics/titles at this time. We will complete our review by early 2021, and we will be able to provide more specific titles and topics in time for the final program. This is the fifth year for submitting this session, and the last two years that PAS was held have had standing-room only audiences of more than 150 attendees.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: None at this time

Additional Comments: This session has also inspired the development of an annual submission to Academic Pediatrics, and has been published in 2017,

2018, and 2019. The content from the planned presentation for 2020 has been submitted for review.

Financial Sponsor?:

Society Affiliation: APPD

Participant Engagement: The articles will be divided into six topics, with articles in each topic presented in 12 minutes. During each topic, the audience will be engaged through reflection questions, polling, and chat moderated by the chair. In addition, there will be two dedicated 5 minute Q&A sessions -- each one after half the articles are presented -- to answer further questions from the audience and to facilitate application of what has been learned.

Previous Session and Conference Experience: This session has been presented three other times (at PAS 2017-2019, and accepted at PAS 2020), the format has stayed consistent. All presenters are members of the APA Education Committee, and we recruit two new presenters every year, resulting in a slightly different team each year. We have increased the attendance annually, and the reviews have been very positive.

Chairs: Barrett Fromme (Chair); Donna D'Alessandro (Presenter); Jody Huber (Presenter); Nicholas Potisek (Presenter); Traci Wolbrink (Presenter); Tai Lockspeiser (Presenter); Michael Ryan (Presenter)

1 Speaker

Name: Donna M. D'Alessandro

Phone: 319-353-7762

Institution: University of Iowa

Email: donna-dalessandro@uiowa.edu

Title/Topic: Top Articles in Medical Education: Topic 1

Duration: 0

2 Speaker

Name: Jody Huber

Phone: 6053331000

Institution: University of South Dakota Sanford School of Medicine

Email: Jody.Huber@SanfordHealth.org

Title/Topic: Top Articles in Medical Education: Topic 2

Duration: 0

3 Speaker

Name: Nicholas M. Potisek

Phone: 9193328548

Institution: Prisma Health

Email: nicholas.potisek@prismahealth.org

Title/Topic: Top Articles in Medical Education: Topic 3

Duration: 0

4 Speaker

Name: Traci Wolbrink

Phone: 617-355-7327

Institution: Boston Children's Hospital

Email: traci.wolbrink@childrens.harvard.edu

Title/Topic: Top Articles in Medical Education: Topic 4

Duration: 0

5 Speaker

Name: Tai Lockspeiser

Phone: 7207778211

Institution: University of Colorado, School of Medicine

Email: tai.lockspeiser@childrenscolorado.org

Title/Topic: Top Articles in Medical Education: Topic 5

Duration: 0

6 Speaker

Name: Michael S. Ryan

Phone: 804-828-4589

Institution: Virginia Commonwealth University **Email:** michael.ryan1@vcuhealth.org

Title/Topic: Top Articles in Medical Education: Topic 6

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 377372

Session Title : Meeting Psychotropic Medication Prescribing Needs in Primary Care: Interprofessional Collaboration involving Pediatricians, Psychiatrists, and Psychologists

Contact: Jeffrey Shahidullah

Email: jeff.shahidullah@austin.utexas.edu

Type: Hot Topic Symposia

Target Audience: Pediatric Clinicians, Pediatricians, Nurse Practitioners, Psychologists, Psychiatrists, Healthcare Administrators

Audience Size: 80

Tracks: Clinical Research Pathway | Community Pediatrics | Cross-Disciplinary Pathway | General Pediatrics | Trainee Pathway

Objectives: 1) Improve knowledge and awareness of the current state of training and practice for psychotropic medication prescribing to children in primary care, 2) Learn about innovative collaborative care models using psychiatrists and psychologists to improve the standard of pediatrician prescribing of psychotropic medication, 3) Learn about how this interprofessional consultation and practice around psychotropic prescribing improves pediatrician comfort and confidence in medication management

Description: Primary care clinicians are often tasked with prescribing psychotropic medications for pediatric patients, but training, time, and reimbursement issues hamper best practice. Psychiatrists and psychologists embedded in the medical home can enhance care coordination via collaborative medication-related roles. This presentation aims to present data from innovative medication consultation models involving psychiatrists and psychologists. Mixed-method approaches provide qualitative and quantitative data regarding improved access to psychotropic medication management for patients and families, improved standard of care and adherence to prescribing guidelines and algorithms, and improved training and learning enhancement for prescribing pediatricians. The innovative medication consultation models using interprofessional approaches will be described and incorporate audience feedback and discussion. This cross-disciplinary spotlight presentation targets real-world skills that clinicians can incorporate into their practices. Implications for COVID-19 and telehealth adaptations will be discussed.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Interprofessional Collaboration, Mental Health, Integrated Behavioral Health in Primary Care

Additional Comments: See above for comment re: this exact Hot Topic Symposium being accepted for presentation at PAS 2020 (Philadelphia) - Session ID # 344550, but never presented due to COVID-19.

Financial Sponsor?:

Society Affiliation: SDBP

Participant Engagement: Polling, Break-out Rooms, Chat Function

Previous Session and Conference Experience: This exact Hot Topic Symposium was accepted for presentation at PAS 2020 (Philadelphia) - Session ID # 344550, but was never presented due to COVID-19. Thus, we are

resubmitting for PAS 2021. We have added telehealth/COVID-19 implications into our presentation.

Chairs: Jeffrey Shahidullah (Chair); Cody Hostutler (Presenter); Stephen Hersey (Presenter); Jagadish Urs (Presenter); Elizabeth Wallis (Presenter); Kathryn DeHart (Presenter); Paul Kettlewell (Presenter); Lisa Ramirez (Presenter); Terry Stancin (Presenter); Cori Green (Discussant)

1 Speaker

Name: Jeffrey D. Shahidullah

Phone: 214-755-2215

Institution: University of Texas-Austin Dell Medical School

Email: jeff.shahidullah@austin.utexas.edu

Title/Topic: INTRODUCTION - Background, State of Affairs, and Rationale for Interprofessional Collaboration

Duration: 0

2 Speaker

Name: Cody Hostutler

Phone: 330-692-3245

Institution: Nationwide Children's Hospital

Email: cody.hostutler@nationwidechildrens.org

Title/Topic: PRESENTATION 1 - Collaborative Psychotropic Medication Management in Urban Pediatric Primary Care: Nationwide Children's Hospital's Model and Outcomes

Duration: 0

3 Speaker

Name: Elizabeth Wallis

Phone: 8438768454

Institution: Medical University of South Carolina

Email: wallis@musc.edu

Title/Topic: PRESENTATION 2 - Changes in Psychotropic Medication Prescribing in a Pediatric Resident Clinic Following Implementation of a Behavioral Health Curriculum

Duration: 0

4 Speaker

Name: Kathryn A. DeHart

Phone: 570-271-5603

Institution: Geisinger Medical Center

Email: kadehart@geisinger.edu

Title/Topic: PRESENTATION 3 - Embedding Psychologists in a Rural Primary Care Clinic to Enhance Pediatrician Management of Behavioral Conditions

Duration: 0

5 Speaker

Name: Lisa Ramirez

Phone: 216-778-4917

Institution: MetroHealth System

Email: lramirez@metrohealth.org

Title/Topic: PRESENTATION 4 - Psychopharmacology Consultation Facilitated by Integrated Psychology Residents in a Pediatric Continuity Care Clinic: A Feasibility Study

Duration: 0

6 Speaker

Name: Cori Green

Phone: 312-305-1309

Institution: Weill Cornell Medical College

Email: cmg9004@med.cornell.edu

Title/Topic: DISCUSSION

Duration: 0

Proposal # : 377438

Session Title : Hormonal therapy for Neonatal Brain Injury—Recent Advances and Limitations

Contact: PRAVEEN BALLABH

Email: pballabh@msn.com

Type: Hot Topic Symposia

Target Audience: 500

Audience Size: 1000

Tracks: Neonatology

Objectives: 1. Discuss recent advances in understanding of prenatal and postnatal steroid on brain injury in premature infants and address related controversies. 2. Review novel mechanisms of neuroprotection with estrogen replacement in premature newborns and identify the need of its clinical evaluation. 3. Critically discuss the controversies on use of postnatal thyroxine treatment and developmental outcome

Description: Hormones are powerful modulators of cell lineage and differentiation. Whereas appropriate exposure can serve as an accelerant to mature organ function in the human fetus and premature infant, they can harm if used inappropriately. Prenatal *glucocorticoids* differentiate epithelial cell functions of the lung, skin, gut, kidney, eye and CNS and thereby help ensure normal *ex utero* multiorgan adaptive capacity. While absence of glucocorticoid signals can be detrimental, excessive exposure can induce injury such as brain and hippocampal atrophy. The ubiquitous organ level effects of *thyroxine* during development are well established and its robust role in brain development is absolute. Yet, animal results did not always translate successfully into effective thyroxine interventions in clinical trials (THOP trial NS045109-01). Although, beneficial results of thyroxine are encouraging in animal models of neonatal brain ischemia and hemorrhage, no neonatal clinical trials exist. The promise of high does *erythropoietin* on improving neurologic outcomes was unfulfilled (PENUT Trial (NS077953). *Estrogen* therapy reverses the lost maternal *in utero* hormonal exposure as evident by its role in neuroprotection during hypoxia. Might these well-defined animal models someday contribute to improving neurodevelopmental outcome of premature infants? This symposium will highlight recent advances from basic, translational, and clinical research to provide a comprehensive update on the risks and benefits of hormonal therapy in premature infants at risk for hypoxia and neurological delays.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: Sunday

Conflicting Sessions: None

Additional Comments: none

Financial Sponsor?:

Society Affiliation: PAS

Participant Engagement: The proposed topic is of immense interest to both clinicians and basis scientists. The speakers have made significant contribution to science in related field and are known internationally. The presentation will start with an introduction, which will be followed by 20 minutes of talk by each speaker. At the end, we will have 15 minutes of time for discussion in which questions from audience will be discussed.

Previous Session and Conference Experience: I have organized several topic symposia at PAS meeting in the past related to neonatal brain injury. The proposed symposium was approved by PAS meeting last year.

Chairs: PRAVEEN BALLABH (Chair); Terrie Inder (Chair); Barbara Stonestreet (Presenter); Sandra Juul (Presenter); Edmund LaGamma (Presenter)

1 Speaker

Name: PRAVEEN BALLABH **Phone:** 914-953-1936
Institution: Children Hospital at Montefiore **Email:** pballabh@msn.com
Title/Topic: INTRODUCTION
Duration: 0

2 Speaker

Name: Barbara S. Stonestreet **Phone:** (401) 274-1122, x 47429
Institution: Women & Infants Hospital of Rhode Island **Email:** bstonestreet@wihri.org
Title/Topic: What's new on the use of prenatal glucocorticoids and brain development?
Duration: 0

3 Speaker

Name: Terrie Inder **Phone:** 617-278-0770
Institution: Harvard Medical School **Email:** tinder@bwh.harvard.edu
Title/Topic: Postnatal glucocorticoids: good, bad or ugly.
Duration: 0

4 Speaker

Name: PRAVEEN BALLABH **Phone:** 914-953-1936
Institution: Children Hospital at Montefiore **Email:** pballabh@msn.com
Title/Topic: Estrogen treatment reverses prematurity-induced disruption in cortical interneuron population.
Duration: 0

5 Speaker

Name: Sandra E. Juul **Phone:** 2062216814
Institution: University of Washington **Email:** sjuul@uw.edu
Title/Topic: Erythropoietin: Trial Strategies.
Duration: 0

6 Speaker

Name: Edmund F. LaGamma **Phone:** 19144938558
Institution: NYMC - Maria Fareri Children's Hospital **Email:** edmund_lagamma@nymc.edu
Title/Topic: Can thyroxine treatment benefit premature infants?
Duration: 0

7 Speaker

Name: Terrie Inder **Phone:** 617-278-0770
Institution: Harvard Medical School **Email:** tinder@bwh.harvard.edu
Title/Topic: Discussion
Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 377562

Session Title : Adherence to treatment: Barriers to making it stick

Contact: Maury Pinsk

Email: mpinsk@hsc.mb.ca

Type: Hot Topic Symposia

Target Audience: Nephrologists, nephrology trainees, psychologists, psychiatrists, social workers, general pediatricians, allied healthcare workers

Audience Size: 150

Tracks: Adolescent Medicine | Children with Chronic Conditions | Community Pediatrics | Core Curriculum for Fellows | Cross-Disciplinary Pathway | General Pediatrics | Health Equity/Social Determinants of Health | Nephrology | Telemedicine/EHR/Medical Informatics

Objectives: 1. Describe the factors that modify adherence including health literacy, racial, geographic and economic factors. 2. Review electronic tools aimed at improving adherence. 3. Discuss adherence strategies specifically targeted at adolescents transitioning to adult programs. 4. Review clinical trials aimed at behavior modifications to improve adherence.

Description:

Pediatric patients with kidney disease are often inundated with medical interventions including medications, dietary and fluid restrictions, dialysis regimens, and blood pressure monitoring. Realistically, it is rare that patients and their families can adhere to every aspect of a complex care plan, even in the best of circumstances. However, medication adherence remains a major predictor of clinical outcomes over time has care evolved. This sessions will cover the factors that can modify adherence and interventions to improve adherence adaptable to all aspects of pediatric kidney health management.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: adolescent transition, adherence, health literacy

Additional Comments:

Financial Sponsor?:

Society Affiliation: ASPN

Participant Engagement: Q+A sessions

Previous Session and Conference Experience:

Chairs: Tray Hunley (Moderator); Jun Oh (Moderator)

1 Speaker

Name: Cozumel Pruette

Phone: 410-955-2467

Institution: Johns Hopkins University

Email: csouthe1@jhmi.edu

Title/Topic: Health literacy, racial, geographic and economic modifiers of adherence

Duration: 0

2 Speaker

Name: Chia-shi Wang

Phone: 404-727-5728

Institution: Emory University School of Medicine

Email: chia-shi.wang@emory.edu

Title/Topic: eHealth tools : Helping doctors and patients connect

Duration: 0

3 Speaker

Name: Mina Matsuda-Abedini

Phone:

Institution: University of Toronto

Email: mina.matsuda-abedini@sickkids.ca

Title/Topic: Strategies for adherence in adolescence transition

Duration: 0

4 Speaker

Name: Sandi Amaral

Phone: 2674255804

Institution: CHOP

Email: amarals@email.chop.edu

Title/Topic: Trials in behavior modification

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 377563

Session Title : Onco-Nephrology: surviving the cancer and protecting the beans

Contact: Maury Pinsk

Email: mpinsk@hsc.mb.ca

Type: Hot Topic Symposia

Target Audience: nephrologists, nephrology trainees, oncologists, intensivists, pharmacists, bone marrow transplanters, hospitalists, general pediatricians

Audience Size: 200

Tracks: Children with Chronic Conditions | Community Pediatrics | Critical Care | Cross-Disciplinary Pathway | General Pediatrics | Hematology/Oncology | Hospital-based Medicine | Nephrology

Objectives: 1. Discuss acute complications of cancer therapy including hypertension, electrolyte disturbances, AKI, and TMA, their mechanisms and management 2. Review the epidemiology of post transplant lymphoproliferative disorder PTL and malignancy complicating renal transplantation. 3. Review the long-term effects of chemotherapy, radiation and bone marrow transplantation and the importance of follow-up nephrology care for survivors of childhood cancer. 4. Examine renal complications of novel chemotherapeutic agents including tyrosine kinase inhibitors, check point inhibitors and CAR-T therapies.

Description: This session will discuss the interface between nephrology and oncology in pediatrics. Topics will include acute complications and late effects of treatments for childhood cancer, including chemotherapy, radiation, bone marrow transplant as well as targeted and immune-therapies. This session will also address malignancy complicating pediatric kidney transplant. Emphasis will be on recent evidence.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: poster sessions for critical care and oncology,

Additional Comments:

Financial Sponsor?:

Society Affiliation: ASPN

Participant Engagement: Q and A sessions at the end of each talk

Previous Session and Conference Experience:

Chairs: Rulan Parekh (Moderator); Michelle Denburg (Moderator)

1 Speaker

Name: Sangeeta Hingorani

Phone: 206-987-3120

Institution: university of WA/Seattle Childrens

Email: sangeeta.hingorani@seattlechildrens.org

Title/Topic: Acute renal complications during treatment for childhood cancer

Duration: 0

2 Speaker

Name: Vikas R. Dharnidharka

Phone: 3147474589

Institution: Washington University School of Medicine

Email: vikasD@wustl.edu

Title/Topic: Post-transplant lymphoproliferative disease and other malignancies following kidney transplant in childhood

Duration: 0

3 Speaker

Name: Benjamin Laskin

Phone: 2155902449

Institution: The Children's Hospital of Philadelphia **Email:** laskinb@email.chop.edu

Title/Topic: Late effects of treatment for childhood cancer

Duration: 0

4 Speaker

Name: Rod Rassekh

Phone:

Institution: BC Children's Hospital

Email: rrassekh@cw.bc.ca

Title/Topic: Advances in targeted and immune- therapies for cancer and their renal complications

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 377564

Session Title : An update on cutting edge critical care nephrology

Contact: Maury Pinsk

Email: mpinsk@hsc.mb.ca

Type: Hot Topic Symposia

Target Audience: Critical care medicine, nephrologists

Audience Size: 100

Tracks: Critical Care | Nephrology

Objectives: 1. Describe who, when and how to use urinary biomarkers in the critical care unit. 2. Discuss antimicrobial stewardship and dosing in AKI, including during RRT 2. Discuss the role of plasma exchange in sepsis. 4. Describe a systems based approach to AKI prevention.

Description: This critical care nephrology session will focus on a potpourri of current topics with a focus on incorporating these practices and techniques into clinical care.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: critical care poster sessions, critical care clinical sessions

Additional Comments:

Financial Sponsor?:

Society Affiliation: ASPN

Participant Engagement: Q+A after each session

Previous Session and Conference Experience:

Chairs: David Selewski (Moderator); Shina Menon (Moderator)

1 Speaker

Name: Katja Gist

Phone: 7207773614

Institution: University of Colorado

Email: katja.gist@childrenscolorado.org

Title/Topic: Using urine in the unit: the practical and responsible use of urinary biomarkers in critical care nephrology

Duration: 0

2 Speaker

Name: Daniel Pak

Phone:

Institution: Seattle Children's Hospital

Email: daniel.pak@seattlechildrens.org

Title/Topic: Clinical Pharmacology in AKI: Antimicrobial Stewardship and dosing in AKI & during renal support therapy

Duration: 0

3 Speaker

Name: Shina Menon

Phone: 2069872524

Institution: University of Washington

Email: shina.menon@seattlechildrens.org

Title/Topic: TAMOF revisited: Utilizing therapeutic plasma exchange in sepsis

Duration: 0

4 Speaker

Name: Scott Sutherland

Phone:

Institution: Stanford University

Email: suthersm@stanford.edu

Title/Topic: Intoxicating substances: Extracorporeal therapies to treat life-threatening intoxications

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 377565

Session Title : Integrating palliative care into pediatric nephrology practice

Contact: Maury Pinsk

Email: mpinsk@hsc.mb.ca

Type: Hot Topic Symposia

Target Audience: nephrologists, nephrology trainees, ethicists, palliative care specialists, adolescent medicine, neonatology

Audience Size: 100

Tracks: Adolescent Medicine | Clinical Bioethics | Neonatology | Nephrology

Objectives: 1. Provide an overview of conservative management of ESKD including guidance on the decision-making process, language and ethicolegal considerations. 2. Review symptom management in ESKD 3. Review existing and emerging research on caregiver experience in pediatric dialysis and if/how nephrologists should incorporate psychosocial burdens into medical decision-making 4. Review adolescent decision-making, ethical arguments for and against acquiescing to a request for withdrawal of life-sustaining dialysis, the role of palliative care, and for the nephrologist to serve as a patient advocate

Description: Advanced chronic kidney disease is a treatable, but life-limiting and incurable process characterized by significant burdens for the patient, family, and even clinicians. Recognition of the importance of palliative interventions to minimize these burdens has increased dramatically in recent years in adult dialysis patients and other pediatric populations, and palliative care consultation is now included in standard recommendations such as the RPA guideline on shared decision-making in dialysis. Despite this, pediatric nephrology has had a relative dearth of scholarship in palliative care. This symposium will unite experts in palliative medicine and nephrology to disseminate expertise in symptom management, communication, compassionate conservative care, and provider moral distress and burnout in order to empower pediatric nephrologists to take an increased role providing primary palliative care to their patients and propose new avenues of collaboration and scholarship between pediatric nephrology and palliative care.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Bioethics sessions or posters

Additional Comments:

Financial Sponsor?:

Society Affiliation: ASPN

Participant Engagement: will have QA session with each discussion.

Previous Session and Conference Experience:

Chairs: Sarah Swartz (Moderator); Aaron Wightman (Moderator)

1 Speaker

Name: Aviva Goldberg

Phone: 204 787 4947

Institution: University of Manitoba

Email: agoldberg@hsc.mb.ca

Title/Topic: An overview of compassionate care and its application to ESKD.

Duration: 0

2 Speaker

Name: Ami Doshi

Phone: 8589665841

Institution: UC San Diego and Rady Children's Hospital

Email: adoshi@rchsd.org

Title/Topic: Primary palliative care in pediatric nephrology: Symptom management in CKD

Duration: 0

3 Speaker

Name: Aaron Wightman

Phone: 206 9872524

Institution: University Of Washington School of Medicine

Email: aaron.wightman@seattlechildrens.org

Title/Topic: Caregiver burden and its incorporation into medical decision making

Duration: 0

4 Speaker

Name: Tyler Tate

Phone:

Institution: Oregon Health and Sciences University

Email: tylertate85@gmail.com

Title/Topic: Requests for withdrawal of dialysis, the roles for ethics, palliative care and physician advocacy

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 377574

Session Title : Newborn Microbiome, Perinatal Antibiotics and Childhood Health

Contact: Sagori Mukhopadhyay

Email: mukhopadhs@email.chop.edu

Type: Hot Topic Symposia

Target Audience: Neonatal care providers, Obstetric care providers, microbiome scientists, antibiotic stewards and infectious disease specialists

Audience Size: 30-50

Tracks: Basic Science Pathway | Cross-Disciplinary Pathway | Epidemiology & Health Services Pathway | Infectious Diseases | Neonatology | Well Newborn

Objectives: 1. To review currently known factors that contribute to neonatal microbiome origin and development 2. To discuss the evidence for perinatal antibiotics effect on the neonatal microbiota and childhood health 3. To discuss the need for and the potential approaches to minimizing neonatal microbiota perturbation

Description: Maternal microbiota at the time of delivery has a multi-faceted role in determining the neonatal outcome: it may be a driver in the premature onset of labor, it may lead to life-threatening infection of the fetus/newborn and, in the vast majority of pregnancies, it will provide the pioneer colonizers for the newborn's microbiome. This early microbiome plays an active part in interacting with the neonatal immune system and establishing the path for future health outcomes. While interventions that alter maternal microbiota such as perinatal antibiotics have significantly reduced adverse outcomes for mothers and neonates, this health gain has required widespread use. Half of women delivering in United States will be administered antibiotics prior to delivery either as surgical prophylaxis or for prevention of neonatal infection from pathogens such as group B streptococcus. What, if any, are the unintended consequences of interrupting the mother to child microbiota transmission? This Hot topic symposia will discuss determinants of neonatal microbiome, specifically, maternal microbiome in pregnancy and effect of perinatal antibiotics, and review the evidence for association of early life antibiotics with altered microbiota and adverse health outcomes. We will end with a discussion on emerging thoughts on alternate solutions and mitigation of potential risks

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Neonatal Sepsis Club

Additional Comments: This session proposal was accepted as a hot topic symposia for the 2020 PAS session that was canceled due to COVID 19

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: using the chat box and QA session

Previous Session and Conference Experience: NA

Chairs: Heather Burris (Chair); Sagori Mukhopadhyay (Chair)

1 Speaker

Name: Heather H. Burris

Phone: 617-910-7973

Institution: Children's Hospital of Philadelphia,
Perelman School of Medicine, University of
Pennsylvania

Email: burrish@email.chop.edu

Title/Topic: Maternal microbiome: Role in neonatal health and disease

Duration: 0

2 Speaker

Name: Kyle Bittinger

Phone: 2674251641

Institution: Children's Hospital of Philadelphia

Email: BITTINGERK@EMAIL.CHOP.EDU

Title/Topic: Influencers of the neonatal microbiome

Duration: 0

3 Speaker

Name: Mark A. Underwood

Phone: 916-734-8672

Institution: University of California Davis

Email: munderwood@ucdavis.edu

Title/Topic: Why early-life antibiotics matter: The age-dependent effects of microbiome disruption

Duration: 0

4 Speaker

Name: Sagori Mukhopadhyay

Phone: 2155107916

Institution: CHOP

Email: mukhopadhs@email.chop.edu

Title/Topic: Association of perinatal antibiotics and childhood outcomes

Duration: 0

5 Speaker

Name: Noel Mueller

Phone:

Institution: Johns Hopkins Bloomberg School of
Public Health

Email: noelmueller@jhu.edu

Title/Topic: Emerging concepts to mitigate altered mother-to-child microbiome transmission

Duration: 0

6 Speaker

Name: Karen M. Puopolo

Phone: 6179620122

Institution: Children's Hospital of Philadelphia

Email: puopolok@email.chop.edu

Title/Topic: Perinatal Antibiotics: Where we are and where we want to be

Duration: 0

PAS 21 Meeting Scholarly Session Proposals

October 9, 2020

Proposal # : 377575

Session Title : Bringing stem cell therapy into neonatology – Experience from early phase clinical trials

Contact: Bernard Thebaud

Email: bthebaud@toh.ca

Type: Hot Topic Symposia

Target Audience: Health care providers and scientists in the field of neonatology and pediatrics with a special interest in regenerative medicine.

Audience Size: 500

Tracks: Basic Science Pathway | Clinical Bioethics | Critical Care | Developmental and Behavioral Pediatrics | Developmental Biology | Neonatology | Neurology | Pulmonology | Scholarly Sessions

Objectives: Participants are invited to provide their input into the process of translating bench data of cell-based interventions into clinical practice. Based on short state of the art presentation, discussions will focus on answering the above-mentioned questions. As a result, a road map will be provided to help clarify how cell-based therapies can be safely introduced into clinical care.

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, the feasibility and safety of human amnion epithelial cells or cord blood derived mononuclear cells are also being explored to prevent lung and brain injury. These are early days for cell-based therapies in neonatology and much remains to be learned about the biology of repair cells, their manufacturing, safe and practical delivery and clinical trial design to optimize their efficacy.

To improve the efficacy of clinical translation of this disruptive technology, principal investigators of trials on cell-based therapies will share their experience to answer the following questions:

How to choose the optimal cell or cell-derived 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?

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: 1- Neonatal clinical trials; 2- Neonatal Lung; 3- Neonatal Brain

Additional Comments: The timing for a session on early phase clinical trials with cell therapy in neonatology is excellent for this 2021 edition.

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: The plan is to have 15 min presentations by faculty back to back without question period. After all presentations, we will have a panel discussion and Q&A. Because of the excitement around cell-based therapies, we anticipate a lot of questions during the Q&A. Ideally, we would like to gather questions as the speakers are presenting to prepare for the Q&A period. A useful tool would be for the participants to be able to see these questions in order to score them so that the moderators can select those questions that garnered the most interest. Another advantage of this system will be to prompt new questions. Because we planned for a 40 min Q&A period, there will be ample time to go through most of the questions and to adjust on short notice to select the most pertinent questions.

Previous Session and Conference Experience: We have presented a previous session on cell-based therapies at the PAS 2019 and it was a great success with approx 500 attendees and numerous discussions. This session focused on how to bring cell therapies into the clinic with basic science, regulatory and clinical trial design presentations. The herein proposed session is a follow-up that now focuses on the results of the first clinical trials. This session proposal was accepted for the PAS 2020 meeting. We are thankful to the organizers for allowing us to resubmit this session topic. It will be even more impactful in 2021 as many investigators have completed their trials and are embarking into their next trial. Their early lessons learned will be helpful for the community.

Chairs: Bernard Thebaud (Chair); Mario Rüdiger (Discussant)

1 Speaker

Name: Bernard Thebaud **Phone:** 613-737-8899
Institution: Ottawa Hospital Research Institute **Email:** bthebaud@toh.ca
Title/Topic: Introduction to cell-based therapies for complications of prematurity
Duration: 0

2 Speaker

Name: Maria Jesus del Cerro Marin **Phone:** +0034 629239978
Institution: RAMON Y CAJAL UNIVERSITY **Email:** majecerro@yahoo.es
HOSPITAL
Title/Topic: Umbilical cord tissue-derived mesenchymal stromal cells for treating BPD
Duration: 0

3 Speaker

Name: Rebecca Lim **Phone:** 0433021151
Institution: Monash University **Email:** rebecca.lim@monash.edu
Title/Topic: Human Amnion Epithelial cells for BPD – better than Mesenchymal Stromal Cells?
Duration: 0

4 Speaker

Name: Won Soon Park **Phone:** + 82 10 9933 3523
Institution: Samsung Medical Center, **Email:** ws123.park@samsung.com
Sungkyunkwan University
Title/Topic: Umbilical cord blood-derived Mesenchymal Stromal Cell for intraventricular hemorrhage (IVH)
Duration: 0

5 Speaker

Name: Charles M. Cotten **Phone:** 9196816024
Institution: Duke University **Email:** michael.cotten@duke.edu
Title/Topic: Umbilical cord blood-derived mononuclear cells and cooling for HIE
Duration: 0

6 Speaker

Name: Stella Kourembanas **Phone:** 6179192355
Institution: Boston Children's Hospital **Email:** stella.kourembanas@childrens.harvard.edu
Title/Topic: Mesenchymal Stromal Cell-derived Exosomes for BPD – Cell therapy without the cell
Duration: 0

7 Speaker

Name: Mario Rüdiger **Phone:** +49-3514583640
Institution: Technical University Dresden **Email:** mario.ruediger@uniklinikum-dresden.de
Title/Topic: Panel Discussion
Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 377579

Session Title : Management of CAKUT: from genetics to optimizing nephron function

Contact: Maury Pinsk

Email: mpinsk@hsc.mb.ca

Type: Hot Topic Symposia

Target Audience: nephrologists, geneticists, general pediatricians, neonatologists, trainees

Audience Size: 150

Tracks: Basic Science Pathway | Children with Chronic Conditions | Developmental Biology | General Pediatrics | Genomics | Neonatology | Nephrology

Objectives: 1. Discuss the indications for genetic testing in Congenital anomalies of the kidney and urinary tract (CAKUT). 2. Discuss how modelling can be used to contextualize genetic findings in kidney disease. 3. Discuss clinical management of preterm kidneys to optimize kidney health and potential future treatments. 4. Discuss advances in biomarkers and technologies for assessing kidney function and nephron number to predict those at highest risk for future disease

Description: This session will review clinical, translational and basic science advances in development nephrology and urology. It will identify current and future methods to optimize kidney outcomes.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: basic science discussions on genomics or genetic testing, poster sessions on the same topic

Additional Comments:

Financial Sponsor?:

Society Affiliation: ASPN

Participant Engagement: Q+A session will be incorporated into the session

Previous Session and Conference Experience:

Chairs: Keri Drake (Moderator); Jacqueline Ho (Moderator)

1 Speaker

Name: Indra Gupta

Phone:

Institution: McGill University

Email: indra.gupta@muhc.mcgill.ca

Title/Topic: When does gene testing matter?

Duration: 0

2 Speaker

Name: Andrew (Andy) McMahon

Phone:

Institution: University of Southern California

Email: amcmahon@med.usc.edu

Title/Topic: ADRIAN SPITZER MD LECTURESHIP: Model-based insights into genetic links to kidney disease.

Duration: 0

3 Speaker

Name: Marissa DeFreitas

Phone: 305-585-6726

Institution: University of Miami/Holtz Children's Hospital **Email:** mdefreitas@med.miami.edu

Title/Topic: Optimizing postnatal health of the preterm kidney: What tools can we use today and what may we do in the future?

Duration: 0

4 Speaker

Name: Jennifer R. Charlton

Phone: 4349242096

Institution: University of Virginia

Email: jrc6n@virginia.edu

Title/Topic: Predicting the future: using new biomarkers and technologies to identify those at risk for future kidney disease

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 377580

Session Title : Improving Access and Outcomes in Pediatric Renal Transplant Recipients

Contact: Maury Pinsk

Email: mpinsk@hsc.mb.ca

Type: Hot Topic Symposia

Target Audience: pediatric nephrologists, transplant physicians, scientists

Audience Size: 100

Tracks: Adolescent Medicine | Basic Science Pathway | Cardiology | Children with Chronic Conditions | Health Equity/Social Determinants of Health | Hospital-based Medicine | Nephrology | Obesity

Objectives: 1. To describe the current data relating degree of HLA match to outcomes in pediatric kidney transplant, and to present and evaluate possible strategies for addressing this challenging issue. 2. To identify current biomarker panels available for monitoring of acute kidney dysfunction in transplantation. 3. To describe the prevalence and pathophysiology of CVD risk factors in pediatric patients with a history of CKD/kidney transplant, and to present available evidence on the benefit of strategies to address those that are modifiable. 4. To discuss existing and possible multidisciplinary strategies and programs that promote and teach healthy lifestyle choices (dietary, physical activity), and eventual self-sufficiency—both in navigating and managing healthcare, and in managing life. 5. To discuss methods to increase access to pediatric transplantation. CDC high risk donors, ABOi donors, desensitization, donor exchange programs, organ allocation policy and more.

Description: The goal of this session is to address specific issues that contribute to shortened lifespan, even after successful pediatric kidney transplantation. The leading cause of late mortality is premature cardiovascular disease, and this risk of death is much greater after graft failure and return to dialysis. Therefore, strategies to improve immunologic outcomes and prolong the life of a child's first graft are paramount, and will be addressed in the first 2 talks. The second 2 talks will focus reducing mortality in our patients who are already successfully transplanted per our current protocols. First we will discuss the current data on CVD outcomes in this population, and the relative roles of both modifiable and non-modifiable risk factors. The final talk will address multidisciplinary ideas for practical, programmatic ways to teach and encourage healthy lifestyle choices, and to empower transplant recipients toward self-sufficiency and self-care as they mature.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: poster sessions with nephrology/transplantation

Additional Comments:

Financial Sponsor?:

Society Affiliation: ASPN

Participant Engagement: Q+A session incorporated into the session

Previous Session and Conference Experience:

Chairs: Amy Bobrowski (Moderator); Scott McEwan (Moderator)

1 Speaker

Name: Rachel Engen

Phone:

Institution: Northwestern University Feinberg School of Medicine

Email: rengen@luriechildrens.orgEngen

Title/Topic: Implications of degree of HLA Match/Strategies to Improve HLA matching in Pediatric Kidney Transplantation

Duration: 0

2 Speaker

Name: Tom Blydt-Hansen

Phone:

Institution: University of British Columbia

Email: tom.blydthansen@cw.bc.ca

Title/Topic: Biomarkers of acute rejection, under and over- immunosuppression

Duration: 0

3 Speaker

Name: Elaine Ku

Phone: 6267800106

Institution: UCSF

Email: elaine.ku@ucsf.edu

Title/Topic: Cardiovascular Disease Risk Factors and lifestyle modification strategies after Pediatric Kidney Transplantation: What are We Dealing With, and What Can We Target?

Duration: 0

4 Speaker

Name: Stephen D. Marks

Phone:

Institution: University College of London / Great Ormand Street Hospital

Email: s.marks@ucl.ac.uk

Title/Topic: H. William Schnaper, MD lecture: Increasing the donor pool for pediatric kidney transplant recipients

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 377581

Session Title : Update on Systemic Vasculitis

Contact: Maury Pinsk

Email: mpinsk@hsc.mb.ca

Type: Hot Topic Symposia

Target Audience: Nephrologists, Rheumatologists, general pediatricians

Audience Size: 50

Tracks: Adolescent Medicine | Allergy, Immunology and Rheumatology | Children with Chronic Conditions | Cross-Disciplinary Pathway | General Pediatrics | Hospital-based Medicine | Nephrology | Pulmonology

Objectives: 1. Discuss the latest research updates and the new research questions arising in the treatment of systemic vasculitides. 2. Discuss new CanVasc recommendations including the role of TPE as a therapy in ANCA vasculitis 3. Discuss PAN and Takayasu's arteritis and provide an update on the new diagnoses and therapeutics. 4. Discuss the implications of new classification and treatment guidelines for SLE(CARA,KDIGO)

Description: An update on Systemic Vasculitis, particularly ANCA-associated vasculitis, but also on CNS vasculitis, PAN and Takayasu's arteritis. The focus for AAV would be around the new Canadian Vasculitis guidelines, the latest trials (including PEXIVAS), treatment controversies and uncertainties. The focus on the other vasculitides would include an update on the new diagnoses (DADA2 for example), the role of genetics in discovery and the treatment of these rarer vasculitides, including updates on SLE

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: poster sessions including glomerulonephritis/general nephrology or rheumatology topics

Additional Comments:

Financial Sponsor?:

Society Affiliation: ASPN

Participant Engagement: Q+A session embedded in this session

Previous Session and Conference Experience:

Chairs: Stephanie Jernigan (Moderator); Shaun Jackson (Moderator)

1 Speaker

Name: Shaun Jackson

Phone:

Institution: University of Washington

Email: shaun.jackson@seattlechildrens.org

Title/Topic: New trials in Systemic Vasculitis

Duration: 0

2 Speaker

Name: Damien G. Noone

Phone: 416-813-7654 ext. 203533

Institution: The Hospital for Sick Children

Email: damien.noone@sickkids.ca

Title/Topic: Current guidelines for ANCA - What's clear and what's still muddy?

Duration: 0

3 Speaker

Name: Rae Yeung

Institution: The Hospital for Sick Children

Title/Topic: Frying PAN and Fire

Duration: 0

Phone:

Email: rae.yeung@sickkids.ca

4 Speaker

Name: Keisha L. Gibson

Institution: University of NC at Chapel Hill

Title/Topic: How do I treat Lupus?

Duration: 0

Phone: 9194452638

Email: keisha_gibson@med.unc.edu

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 377620

Session Title : Taking the Next Steps in Transgender Care: Clinical Challenges and Research Gaps

Contact: David Weber

Email: davidweber118@gmail.com

Type: Hot Topic Symposia

Target Audience: Providers interested in the care of transgender youth and young adults including trainees, pediatricians, adolescent med, endocrinologists, gynecologists, and mental health providers

Audience Size: 200

Tracks: Adolescent Medicine | Cardiology | Clinical Research Pathway | Cross-Disciplinary Pathway | Endocrinology | Mental Health | Trainee Pathway

Objectives: (1) Discuss research gaps in diagnosing gender dysphoria in pre-pubertal children and mental health needs for children and adolescents undergoing gender affirming therapy. (2) Review the implications of gender transition and gender affirming therapy on statural growth and final height (3) Understand the effects of gender affirming hormonal therapy on fertility (4) Become familiar with the potential long-term cardiometabolic consequences of gender affirming therapy initiated in adolescence.

Description: This multi-disciplinary session will focus on clinical and research gaps in caring for transgender youth undergoing gender affirming therapy. Specific topics will include mental health, statural growth, fertility, and cardiometabolic health. Presenters will summarize the current gaps in knowledge, provide practical considerations for clinical care, and identify critical areas for future research.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Please try to avoid scheduling against other transgender content

Additional Comments: N/A

Financial Sponsor?:

Society Affiliation: SAHM

Participant Engagement: Moderators will be primarily responsible for engaging virtual audience. Depending on platform, we envision a live chat option where audience members can pose questions both to speakers and other attendees. There will also be a live Q and A at the end of the session where the moderators select questions submitted by virtual attendees or that emerged from the live chat

Previous Session and Conference Experience: N/A

Chairs: Katherine Greenberg (Chair); David Weber (Chair)

1 Speaker

Name: Jamie E. Mehringer

Phone:

Institution: University of Rochester

Email: Jamie_Mehringer@URMC.Rochester.edu

Title/Topic: Diagnostic and Mental Health Considerations for Transgender Youth Receiving Gender Affirming Medical Treatments

Duration: 0

2 Speaker

Name: Stephanie Roberts

Phone: 6173557476

Institution: Boston Children's Hospital

Email: stephanie.roberts@childrens.harvard.edu

Title/Topic: Impact of Medical Transition on Growth in Youth with Gender Dysphoria

Duration: 0

3 Speaker

Name: Diane Chen

Phone: 312-227-2939

Institution: Ann & Robert H. Lurie Children's
Hospital of Chicago/Northwestern University
Feinberg School of Medicine

Email: DiChen@luriechildrens.org

Title/Topic: Fertility Considerations in Transgender Youth Receiving Gender Affirming Medical Treatments.

Duration: 0

4 Speaker

Name: Nicole Mihalopoulos

Phone: 8015856334

Institution: University of Utah

Email: nicole.mihalopoulos@hsc.utah.edu

Title/Topic: Cardiovascular Risk Considerations in Transgender Youth Receiving Gender Affirming Medical Treatments

Duration: 0

PAS 21 Meeting Scholarly Session Proposals

October 9, 2020

Proposal # : 377800

Session Title : Leveraging the Power of Relationships to Advance Workforce Diversity in Academic Pediatrics: Mentorship, Sponsorship, and Coaching

Contact: Jean Raphael

Email: raphael@bcm.edu

Type: Hot Topic Symposia

Target Audience: URiM fellows, junior and mid-level faculty seeking professional and career guidance; senior faculty and institutional leaders committed to the career advancement of URiM.

Audience Size: 150

Tracks: Career Development Pathway | Diversity and Inclusion | Leadership and Business Training

Objectives: - Differentiate the Roles of Mentorship, Sponsorship, and Coaching in the Career Advancement of URiM - Identify the Skills and Attributes Necessary to be an Impactful Mentor, Sponsor, or Coach to URiM - Illustrate the Requisite Skills and Attributes of a URiM Recipient in Mentorship, Sponsorship, and Coaching Relationships - Describe the Roles and Responsibilities of Academic Leadership in Establishing Best Practices and Outcome Measures for Career Advancement of URiM

Description: Despite large-scale initiatives to promote workforce diversity in academic pediatrics, the current state of underrepresented in medicine (URiM) reflects marginal improvements in some areas and clear regression in others. The proportion of URiM faculty in US academic institutions has essentially remained flat over the past two decades while the number of African-American males in medical school is presently lower than it was in 1978. These data demonstrate that workforce diversity in medicine is not only stagnating but failing to keep pace with population trends toward a more diverse country. For URiM who do pursue a career in academic pediatrics, they must overcome the "diversity tax", defined as the burden of extra responsibilities placed on URiM faculty to achieve diversity. Guidance from, and relationships with, senior leadership have been promoted as evidence-based strategies to foster URiM professional development and scholarly advancement. Historically, efforts have primarily focused on mentorship. However sponsorship and coaching also offer powerful relationships that can be leveraged to support URiM. This Hot Topics session will begin with a brief overview of diversity trends in academic pediatrics and differentiation of mentorship, sponsorship, and coaching. Subsequent presentations will focus on the ideal characteristics of junior and senior individuals in each of these relationships. We will conclude with discussion of the roles and responsibilities of academic leadership in developing best practices and outcome measures for career advancement of URiM.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: N/A

Additional Comments:

Financial Sponsor?:

Society Affiliation: APS

Participant Engagement: We will engage with participants in multiple ways. First, we will present brief case studies throughout the presentations reflective of different challenges that may occur in mentorship, sponsorship, and coaching of URiM. These include navigation of cross-cultural relationships; inadvertent exacerbation of the expectations to focus on diversity, equity, and inclusion opportunities only; and bi-directional learning.

Second, we will have Q&A. As the details of how to conduct Q&A in the virtual format are still being determined by PAS organizers, we will await further details and adopt whatever format is selected.

Previous Session and Conference Experience: N/A

Chairs: Jean Raphael (Presenter); Tamera Coyne-Beasley (Presenter); Joseph Wright (Presenter); Gary Freed (Presenter)

1 Speaker

Name: Jean L. Raphael

Phone: (832) 822-1791

Institution: Baylor College of Medicine

Email: raphael@bcm.edu

Title/Topic: Career Advancement of Underrepresented in Medicine in Academic Pediatrics: History, Trends, and the Importance of Nurturing Relationships

Duration: 0

2 Speaker

Name: Tamera Coyne-Beasley

Phone: 2056389345

Institution: University of Alabama Birmingham

Email: coybea@peds.uab.edu

Title/Topic: Keys to Being a Successful Mentor, Sponsor, and Coach to Those Underrepresented in Medicine

Duration: 0

3 Speaker

Name: Joseph Wright

Phone: 3016182141

Institution: University of Maryland School of Medicine

Email: Joseph.Wright@umm.edu

Title/Topic: Effective URiM Participation as Recipient of Mentorship, Sponsorship and Coaching: A Two-Way Street

Duration: 0

4 Speaker

Name: Gary Freed

Phone: 734-615-0616

Institution: University of MI

Email: gfreed@umich.edu

Title/Topic: The Role and Responsibility of Academic Leadership in Advancing Best Practices and Performance Measures for Career Advancement of Underrepresented in Medicine

Duration: 0

PAS 21 Meeting Scholarly Session Proposals

October 9, 2020

Proposal # : 377856

Session Title : Using Innovations in Medical Education to Advance Anti-racism and Social Justice in Medicine

Contact: Marsha Anderson

Email: marsha.anderson@childrenscolorado.org

Type: Hot Topic Symposia

Target Audience: This session will appeal to many attendees including those in medical education, advocacy, population health, community or academic pediatricians, subspecialists, department chairs and those interested in anti-racism and social justice.

Audience Size: 200

Tracks: Adolescent Medicine | Advocacy Pathway | Allergy, Immunology and Rheumatology | Asthma | Basic Science Pathway | Breastfeeding/Human Milk | Cardiology | Career Development Pathway | Child Abuse & Neglect | Children with Chronic Conditions | Clinical Bioethics | Clinical Research Pathway | Community Pediatrics | Core Curriculum for Fellows | Critical Care | Cross-Disciplinary Pathway | Developmental and Behavioral Pediatrics | Diversity and Inclusion | Education Pathway | Emergency Medicine | Endocrinology | Environmental Health | Epidemiology & Health Services Pathway | Gastroenterology/Hepatology | General Pediatrics | Global Neonatal & Children's Health | Health Equity/Social Determinants of Health | Health Services Research | Hematology/Oncology | Hospital-based Medicine | Immigrant Health | Infectious Diseases | Literacy | Mental Health | Neonatology | Nephrology | Neurology | Obesity | Public Health | Pulmonology | Quality Improvement/Patient Safety | Scholarly Sessions | School and Community Health | Trainee Pathway | Well Newborn

Objectives: 1. Describe the role of social justice and anti-racism curricula in academic pediatrics and medical education 2. Discuss ways social justice and anti-racism curricula can be integrated into medical education 3. Identify the benefits of implementing education on racism, anti-racism, and social justice for faculty and trainees.

Description: The events of the past few months have propelled extensive discussions of racism and social justice. Education in these topics has emerged as one of many necessary mechanisms to promote real change. Therefore, this session will focus on innovative approaches to educating residents and faculty through development of anti-racism and social justice curriculum. Although the three examples target faculty and residents, these are broadly applicable to educating medical students, residents, fellows, and faculty.

After a brief introduction, the session will be opened by Dr. Elena Fuentes-Afflick to frame the topics that will be discussed in this session and to establish the importance of educating faculty and learners across the educational continuum on racism, anti-racism, and social justice. This will be followed by 3 very innovative examples of anti-racism and social justice curriculum that have been successfully implemented. These projects are inspirational and highly effective. After the speakers conclude, the session will end with 20 minutes for audience interaction with speakers in a moderated discussion and question/answer session. We anticipate

there will be great interest and vigorous discussion of both the topics presented and the individual speakers' curricula.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Medical Education, Diversity and Inclusion

Additional Comments: This is currently an important and hot topic.

Financial Sponsor?:

Society Affiliation: APPD

Participant Engagement: After presentations there will be a 20 minute moderated discussion with the audience and speakers. We anticipate having the audience post questions or comments in chat. Two moderators will monitor the chat and during the discussion period will pose the comments and questions to the speakers for comments and discussion.

Previous Session and Conference Experience: N/A

Chairs: Marsha Anderson (Moderator); Elena Fuentes-Afflick (Presenter); Jyothi Marbin (Presenter); Sarah Hilgenberg (Presenter); Caroline Rassbach (Presenter); Destiny Tolliver (Presenter); Tyler Rainer (Presenter); Linda Waggoner-Fountain (Moderator)

1 Speaker

Name: Marsha Anderson

Phone: 7207776877

Institution: University of Colorado School of Medicine

Email: marsha.anderson@childrenscolorado.org

Title/Topic: Opening Remarks

Duration: 0

2 Speaker

Name: Elena Fuentes-Afflick

Phone: 415 215 3749

Institution: Zuckerberg San Francisco General Hospital and the University of California San Francisco

Email: elena.fuentes-afflick@ucsf.edu

Title/Topic: Social Justice, Anti-racism, and Pediatric Medical Education

Duration: 0

3 Speaker

Name: Jyothi Marbin

Phone:

Institution: University of California San Francisco

Email: Jyothi.Marbin@ucsf.edu

Title/Topic: Bending the Arc Towards Justice: Teaching Structural Racism in Pediatric GME

Duration: 0

4 Speaker

Name: Sarah Hilgenberg

Phone: 6503877996

Institution: Stanford University School of Medicine

Email: shilgenb@stanford.edu

Title/Topic: Longitudinal Pediatric Residency Anti-racism and Social Justice Curriculum

Duration: 0

5 Speaker

Name: Caroline Rassbach

Phone: 6504978979

Institution: Stanford University

Email: crassbac@stanford.edu

Title/Topic: Harnessing Trainee and Faculty Input in Curricular Development

Duration: 0

6 Speaker

Name: Destiny Tolliver

Phone: 229-483-4117

Institution: Yale National Clinician Scholars Program

Email: destinytolliver@yale.edu

Title/Topic: An Anti-Racism Approach to Didactic Education: Health Equity Rounds - Part 1

Duration: 0

7 Speaker

Name: Tyler Rainer

Phone: 5089322715

Institution: Boston Children's Hospital and Boston Medical Center

Email: Tyler.Rainer@childrens.harvard.edu

Title/Topic: An Anti-Racism Approach to Didactic Education: Health Equity Rounds - Part 2

Duration: 0

8 Speaker

Name: Linda A. Waggoner-Fountain

Phone: 434-982-1925

Institution: University of Virginia

Email: law4q@virginia.edu

Title/Topic: Closing Remarks

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 377860

Session Title : A Multidisciplinary Approach to the Treatment of Pediatric Feeding Disorders

Contact: Sarah Fleet

Email: sarah.fleet@childrens.harvard.edu

Type: Hot Topic Symposia

Target Audience: Providers caring for children with feeding disorders - pediatricians, pediatric subspecialists, nurses, dietitians, feeding therapists, occupational therapists, psychologists, social workers

Audience Size: 100

Tracks: Cross-Disciplinary Pathway | Gastroenterology/Hepatology | General Pediatrics | Mental Health | Pediatric Nutrition

Objectives: --Define pediatric feeding disorders and understand their spectrum of disease --Develop an age-specific differential diagnosis for children presenting with feeding difficulties and "picky eating" --Identify developmental norms for feeding skills and recognize deficits in feeding development --Develop a basic, but holistic, approach to management of pediatric feeding disorders --Understand the role of a multidisciplinary team in the treatment of pediatric feeding disorders

Description: A pediatric feeding disorder (PFD) is defined as "impaired oral intake that is not age-appropriate and is associated with medical, nutritional, feeding skill, and/or psychosocial dysfunction" (Goday et al 2019). These disorders often coexist in children with developmental disabilities or complex medical conditions, and can result in malnutrition, nutrient deficiency and risk of cognitive impairment. There is increasing recognition of these disorders, but limited treatment options across the United States. In this session, a panel of experts from the Boston Children's Hospital Growth and Nutrition Program will discuss how their team uses an interdisciplinary, evidence-based approach to assess and treat infants and children with feeding disorders. The panel will be comprised of a gastroenterologist, registered dietitian, behavioral psychologist, speech language pathologist, social worker, and nurse practitioner. Each team member will describe their distinct role in the evaluation of pediatric feeding disorders, and provide a paradigm for treatment in the primary care setting, using community based resources and local experts to help meet the increasing need for families and children with these disorders.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: None.

Additional Comments: We would be open to making this a panel discussion rather than a Hot Topic Symposia if that is preferred. We are flexible with presentation style.

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: We will use audience polls - multiple choice, word clouds, etc - to anonymously poll the group throughout the presentation. We will also use case examples with pauses for discussion regarding differential diagnosis and next steps of treatment.

Previous Session and Conference Experience: We presented a similar (not identical) session at the American Speech and Hearing Association (ASHA) in 2018. It was a 2-hour case-based presentation in that setting. The audience of that presentation was speech and language pathologists, however, the focus of this session will be directed toward a wider and multidisciplinary audience.

Chairs: Sarah Fleet (Chair)

1 Speaker

Name: Sarah Fleet

Phone: 6173557713

Institution: Boston Children's Hospital Department of Pediatrics

Email: sarah.fleet@childrens.harvard.edu

Title/Topic: A Multidisciplinary Approach to the Treatment of Pediatric Feeding Disorders

Duration: 0

2 Speaker

Name: Katherine Truscott

Phone:

Institution: Boston Children's Hospital

Email: katherine.truscott@childrens.harvard.edu

Title/Topic: A Multidisciplinary Approach to the Treatment of Pediatric Feeding Disorders - Nutrition

Duration: 0

3 Speaker

Name: Carolyn Lubenow

Phone: 6173557713

Institution: Boston Children's Hospital

Email: carolyn.lubenow@childrens.harvard.edu

Title/Topic: A Multidisciplinary Approach to the Treatment of Pediatric Feeding Disorders - Feeding Therapy

Duration: 0

4 Speaker

Name: Ryan Davidson

Phone: 6173557713

Institution: Boston Children's Hospital

Email: ryan.davidson@childrens.harvard.edu

Title/Topic: A Multidisciplinary Approach to the Treatment of Pediatric Feeding Disorders - Psychology

Duration: 0

5 Speaker

Name: Kathleen Carr

Phone:

Institution: Boston Children's Hospital

Email: kathleen.carr@childrens.harvard.edu

Title/Topic: A Multidisciplinary Approach to the Treatment of Pediatric Feeding Disorders - Nursing Support

Duration: 0

6 Speaker

Name: Anna Rouse

Phone:

Institution: Boston Children's Hospital

Email: anna.rouse@childrens.harvard.edu

Title/Topic: A Multidisciplinary Approach to the Treatment of Pediatric Feeding Disorders - Social Considerations

Duration: 0

7 Speaker

Name: Sarah Fleet

Phone: 6173557713

Institution: Boston Children's Hospital Department of Pediatrics

Email: sarah.fleet@childrens.harvard.edu

Title/Topic: A Multidisciplinary Approach to the Treatment of Pediatric Feeding Disorders - Cases

Duration: 0

Proposal # : 377903

Session Title : Adolescent HIV: Addressing the Epidemic in the Pediatric Emergency Department

Contact: Colleen Gutman

Email: ckays21@ufl.edu

Type: Hot Topic Symposia

Target Audience: Emergency medicine, infectious disease, adolescent medicine, general pediatrics, public health

Audience Size: 50

Tracks: Adolescent Medicine | Cross-Disciplinary Pathway | Emergency Medicine | Infectious Diseases | Public Health

Objectives: 1) Describe the epidemic of adolescent HIV in the United States 2) Analyze and compare the barriers, challenges, and successes faced by a pediatric and adult institution in implementing universal HIV screening in the ED 3) Summarize strategies for identifying adolescents with high HIV risk and potential models for PrEP initiation in this population

Description: Although rates of HIV infection declined in the United States for many years, recently the number of annual infections have plateaued since 2013, likely due to disparities in the delivery of effective treatment and prevention efforts. Adolescents and young adults continue to have high rates of HIV, comprising 21% of new HIV infections in 2017, and are often diagnosed late in their disease course. Additionally, youth are the least likely of any age group to be linked and retained in HIV care. Since 2006, the Center for Disease Control and Prevention has recommended opt-out HIV screening to be part of routine clinical care in all health-care settings starting at age 13, in order to increase early diagnosis and antiretroviral initiation and to decrease HIV transmission, morbidity, and mortality. More recently, the federal government has proposed *Ending the HIV Epidemic: A Plan for America*, which aims to achieve early HIV diagnosis and treatment and to utilize pre-exposure prophylaxis (PrEP) to prevent HIV transmission. Universal HIV screening has been successfully implemented in general emergency departments (EDs) and the pediatric ED has the potential to play a similar role in diagnosing HIV in adolescents. This session will focus on institutional successes and barriers in implementing universal HIV adolescent screening in the pediatric ED and will explore the role of the ED in identifying adolescent patients eligible for PrEP initiation services.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Emergency Medicine, Infectious Disease

Additional Comments:

Financial Sponsor?:

Society Affiliation: PIDS

Participant Engagement: Throughout our session, we will build in opportunities for remote participants to test their own knowledge and engage in active reflection and assessment of their own experiences regarding adolescent HIV testing and local barriers and opportunities for universal screening. We will be available for live Q&A if that is an option, or will solicit Q&A in advance and incorporate throughout our session.

Previous Session and Conference Experience: This session was accepted to PAS 2020.

Chairs: Colleen Gutman (Moderator)

1 Speaker

Name: Andres F. Camacho-Gonzalez

Phone: 4047275642

Institution: Emory University School of Medicine **Email:** acamac2@emory.edu
Title/Topic: Ending the HIV Epidemic in the US: Adolescents are at the forefront of this effort
Duration: 0

2 Speaker

Name: Bijal Shah **Phone:** 4045475861
Institution: Emory School of Medicine **Email:** bijal.shah@emory.edu
Title/Topic: Successes in universal opt-out ED HIV Screening in Adults
Duration: 0

3 Speaker

Name: Colleen K. Gutman **Phone:** 3522835757
Institution: University of Florida **Email:** ckays21@ufl.edu
Title/Topic: Barriers and challenges to HIV screening in the pediatric emergency department
Duration: 0

4 Speaker

Name: Andres F. Camacho-Gonzalez **Phone:** 4047275642
Institution: Emory University School of Medicine **Email:** acamac2@emory.edu
Title/Topic: The Pediatric ED as a Gateway for PrEP Services in Adolescents
Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 377910

Session Title : Mental Health Inequities in Children and Youth

Contact: Lois Lee

Email: lois.lee@childrens.harvard.edu

Type: Hot Topic Symposia

Target Audience: Pediatric clinicians, researchers, and health advocates who are interested in issues related to health disparities and pediatric mental health

Audience Size: 40

Tracks: Adolescent Medicine | Advocacy Pathway | Cross-Disciplinary Pathway | Emergency Medicine | General Pediatrics | Health Equity/Social Determinants of Health | Mental Health

Objectives: 1) Recognize inequities in mental health care (access and provision) and outcomes for minority children and youth 2) Understand the mechanisms behind inequities in care and outcomes for pediatric mental health conditions 3) Discuss strategies to decrease these mental health inequities in children and youth

Description: Mental and behavioral health disorders are a growing health issue among U.S. children and youth. Youth suicides increased 56% between 2007 and 2017. Emergency department visits and hospitalizations for mental health conditions in youth have also been rising. Racial and ethnic minority youth face inequities impacting their access to and utilization of mental health care services, the quality of care received, and mental health outcomes.

In this hot topic symposium we will begin by describing some important inequities in mental health outcomes in children and youth. Then we will outline some proposed mechanisms behind these inequities in mental health care access, quality of care, and outcomes. Finally, we will discuss strategies to address these mental health care and outcome inequities at the institutional, community, and state/federal levels.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Emergency Medicine, adolescent medicine, health equity/social determinants of health

Additional Comments:

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: Moderated Q&A discussion with speaker panel

Previous Session and Conference Experience: Some of this content was presented as part of Psychiatry Grand Rounds at Boston Children's Hospital.

Chairs: Lois Lee (Contact Person)

1 Speaker

Name: Gretchen Cutler

Phone: 612-813-7665

Institution: Children's Minnesota

Email: gretchen.cutler@childrensmn.org

Title/Topic: Inequities in pediatric mental health outcomes

Duration: 0

2 Speaker**Name:** Lois Lee**Phone:** 617-355-5089**Institution:** Boston Children's Hospital**Email:** lois.lee@childrens.harvard.edu**Title/Topic:** Mechanisms behind inequities in mental health outcomes**Duration:** 0**3 Speaker****Name:** Jennifer A. Hoffmann**Phone:** 609-560-5612**Institution:** Ann & Robert H. Lurie Children's
Hospital of Chicago**Email:** jhoffmann@luriechildrens.org**Title/Topic:** Mechanisms behind inequities in mental health care**Duration:** 0**4 Speaker****Name:** Ashley Butler**Phone:** 832-822-4899**Institution:** Texas Children's Hospital**Email:** ambutler@texaschildrens.org**Title/Topic:** Strategies to decrease inequities in pediatric mental health**Duration:** 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 377913

Session Title : A Multipronged Approach to Addressing Childhood Adversity and Promoting Resilience

Contact: Binny Chokshi

Email: bchokshi@cnmc.org

Type: Hot Topic Symposia

Target Audience: All providers of pediatric health care, ranging from trainees to attendings. We hope to attract a multidisciplinary audience including primary care pediatricians and subspecialists, mental health professionals, and allied health professionals

Audience Size: 50-100

Tracks: Advocacy Pathway | Community Pediatrics | Cross-Disciplinary Pathway | General Pediatrics | Health Equity/Social Determinants of Health | Mental Health | Scholarly Sessions

Objectives: By the end of this session, audience members will: 1.) Recognize the central role of pediatric practitioners in mitigating the relationship between childhood adversity and poor health outcomes 2.) Appreciate a multipronged framework to address childhood adversity 3.) Navigate how to create trauma-informed, interdisciplinary systems to address childhood adversity 4.) Review a model to train a workforce of physicians to address adversity and build resilience

Description: The effect of adverse childhood experiences (ACEs) on health outcomes across the lifespan is well recognized among pediatric practitioners. Increasing the ability of healthcare providers to recognize and respond to ACEs can buffer the long-term negative physical and mental health impacts of adversity and also increase patient-centered care.

For pediatric practitioners, there are multiple ways to address ACEs. This symposium will review approaches at the patient, systems (clinic/hospital), community, and education level. It will also highlight the importance of interdisciplinary collaborations in moving this work forward.

At the patient level, the symposia will review the experience of Atrium Health Levine's Children's Hospital, as a pilot site for the National Pediatric Practice Community of the Center for Youth Wellness. Dr. Shivani Mehta will discuss the facilitators and barriers to ACE screening implementation in both the academic and community primary care pediatric settings and review the use of resource referrals as a key intervention in promoting wellbeing and resilience.

At the clinic and hospital level, the Substance Abuse and Mental Health Services Administration delineates a framework to guide the creation of trauma-informed systems. Dr. Anita Shah, will review the experience of Cincinnati Children's Hospital Medical Center in developing a trauma-informed strategic plan with multidisciplinary partners.

Community partnerships can be critical in securing resources to build resilience and preventing childhood adversity. Dr. Nia Bodrick will highlight two exemplary community partnerships, the Early Childhood Innovation Network and the Building Communities Resilience National Coalition.

Lastly, education on ACEs and trauma-informed care is essential in assuring the sustainability and integration of approaches to confront adversity. Dr. Heather Forkey, will describe the Pediatric Approach to Trauma, Treatment, and Resilience (PATTeR) program, supported by the American Academy of Pediatrics. The PATTeR program has trained over 400 pediatricians and clinic team members about childhood adversity and trauma-informed

care.

The session will begin with a 10-minute introduction on the sciences of adversity and trauma-informed care delivered by Dr. Chokshi. Each of the four speakers will then give a 10-minute talk, followed by 5 minutes of moderated question and answer. This will leave 20 minutes for a interactive group discussion.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: n/a

Additional Comments: The speakers represent a diverse group of national experts in addressing childhood adversity and trauma-informed care. We would be grateful for this opportunity to share our varied experiences to inspire our pediatrician colleagues to join us in our work to creating healthier communities and sustaining wellness for our pediatric patients.

Financial Sponsor?:

Society Affiliation: APA

Participant Engagement: Our approach to engagement will be dependent on the virtual interface used. The speakers have all led sessions on adverse childhood experiences and trauma-informed care virtually, utilizing multiple modalities. We hope to be able to utilize Poll Everywhere, specifically the word cloud and short answer activity options to allow for participants to list questions and key takeaways of each presentation. In addition, depending on the size of the audience, we can utilize breakout rooms for the interactive discussion at the end of the symposia, to allow for more robust discussion and participation. Lastly, we hope for participants to be able to use a "chat" function, as Dr. Chokshi can moderate the chat in real time.

Previous Session and Conference Experience: n/a

Chairs: Binny Chokshi (Moderator); Shivani Mehta (Presenter); Anita Shah (Presenter); Nia Bodrick (Presenter); Heather Forkey (Presenter)

1 Speaker

Name: Binny Chokshi

Phone: 5163754588

Institution: Childrens National Health System

Email: bchokshi@cnmc.org

Title/Topic: The Science of Adverse Childhood Experiences and Critical Need for Pediatricians to Respond

Duration: 0

2 Speaker

Name: Shivani P. Mehta

Phone: 7044461422

Institution: Atrium Health

Email: Shivani.Mehta@atriumhealth.org

Title/Topic: Lessons Learned Implementing ACEs Screening in Academic and Community Pediatric Primary Care Settings

Duration: 0

3 Speaker

Name: Anita N. Shah

Phone: 5138037485

Institution: Cincinnati Children's Hospital Medical Center

Email: anita.shah@cchmc.org

Title/Topic: Creating Trauma-Informed Systems to Address Adverse Childhood Experiences

Duration: 0

4 Speaker

Name: Nia Bodrick

Phone:

Institution: Children's National Hospital

Email: nbodrick@childrensnational.org

Title/Topic: The Central Role of Community Partnerships in Preventing Childhood Adversity

Duration: 0

5 Speaker

Name: Heather Forkey

Phone: 774-443-2048

Institution: University of Massachusetts Medical School

Email: heather.forkey@umassmemorial.org

Title/Topic: The Pediatric Approach to Trauma, Treatment, and Resilience (PATTeR) Program

Duration: 0

Proposal # : 377970

Session Title : Microbial Metabolites Associated with Immunity and Central Nervous System Health in Early Life: Opportunities for Biomarker Discovery and Therapeutics

Contact: Mohan Pammi

Email: mohanv@bcm.edu

Type: Hot Topic Symposia

Target Audience: Researchers on microbiome, metabolome, multi-omics; clinicians interested in microbial metabolites, CNS Immunology, biomarker discovery

Audience Size: 50 attendees

Tracks: Clinical Research Pathway | Cross-Disciplinary Pathway | Developmental Biology | Infectious Diseases | Neonatology

Objectives: 1. Highlight current advances in detecting and identifying microbial metabolites and products. 2. Discuss the effects of gut microbial metabolites on CNS health and disease (gut-brain axis) 3. Delineate the role of microbial metabolites in mucosal and systemic immunity. 4. Discuss the role of microbial metabolites and products as biomarkers and therapeutics

Description: The human microbiome and their metabolic processes play a vital role in human pathophysiology. Advancing technology including metabolomics and next generation sequencing have provided a better and holistic understanding of disease pathophysiology as it relates to the human microbiome. In this proposed symposium, we will discuss the influence of microbial metabolites and products on mucosal immunology and health of the central nervous system. We will also explore the role of microbial metabolites as opportunities for discovery of biomarkers and novel therapeutics.

The Microbiome in Early Life: The fetus and newborn undergoes major transitions in relation to microbial exposures before, during and shortly after the birthing process. The relatively naïve neonatal microbiome along with the interaction between microbial components and metabolites and the hosts' responses mature and evolve rapidly. Prior to birth, emerging evidence supports that the maternal and fetal ecosystems play a role in timing of delivery. At birth, vaginal versus cesarean delivery and the events surrounding these processes, as well as feeding and feeding composition, antibiotic exposure and the environment influence the developing neonatal microbiome. During the neonatal period, microbial dysbiosis has been implicated in neonatal diseases such as necrotizing enterocolitis (NEC), and bronchopulmonary dysplasia. Dysbiosis of the intestinal microbiome has been implicated in immune dysregulation (allergic and autoimmune disorders). A genetic predisposition, along with an altered microbiome and environmental triggers have been associated with a "perfect storm" for the pathogenesis of Type 1 diabetes and other autoimmune diseases.

Metabolomics is the latest of the 'omics' technology and identifies distinct patterns of small molecules generated during both host and microbial cellular metabolism. These biomarkers may help in disease diagnosis, prediction or prognostication. Microbial metabolite pattern may be useful in diseases associated with dysbiosis. Metabolite patterns are dynamic, changing with gestational age, chronological age or disease process and gives us a snapshot of the metabolic milieu of the organism. Nuclear magnetic resonance spectroscopy and mass spectrometry are the ones most common techniques employed. The metabolites produced by microbes and/or the host may regulate transcriptional and translational events that can be evaluated using transcriptomics and proteomics.

Microbiota, metabolites and CNS health: The intestinal microbiota and the brain communicate in many ways via the immune system, metabolites, the vagus nerve and the

enteric nervous system (ENS). Microbial metabolites including those of tryptophan metabolism, short-chain fatty acids, branched chain amino acids, and peptidoglycans may act as signaling molecules that have direct or indirect effects on the CNS and the ENS. Gut microbiota have been shown to influence developmental processes including neurogenesis, myelination, glial cell function, synaptic pruning and blood-brain barrier permeability and in adult animals, microglial activation and neuroinflammation. It is possible that there may be a critical period or window in early life when the gut microbial composition is crucial and perturbation of the gut microbiota during this period causes long-lasting effects on the development of the CNS and the ENS. The intestinal microbiome **(gut)-brain axis** has been implicated in neurodevelopmental disorders such as autism spectrum disorders, anxiety, obesity, schizophrenia, Parkinson's disease, and Alzheimer's disease. Most of the studies have shown associations without strong support for causality. Although animal and cell culture models can be helpful to better delineate mechanisms and causality, translational research with multi-omic approaches can provide evidence of causality.

Microbiota, metabolites and mucosal immunology: The commensal microbiome in the intestine regulates the maturation of the mucosal immune system, while the pathogenic microbiome causes immune dysfunction, resulting in inflammation and disease. The gut mucosal immune system, which consists of lymph nodes, lamina propria and epithelial cells, constitutes a protective barrier for the integrity of the intestinal tract. The composition of the gut microbiota is under the surveillance of the normal mucosal immune system. Inflammation, which is caused by abnormal immune responses, influences the balance of the gut microbiome, resulting in intestinal diseases. Microbiota as well as their cell components and their metabolites act as environmental triggers that influence mammalian gene expression as well as innate and adaptive immune responses. Recognition of commensal-derived PAMPs, such as lipopolysaccharides (LPS) by the intestinal epithelial cells (IEC) induce secretion of the antimicrobial peptide RegIIIg, which mediates colonization resistance in the gut. **Microbiota-derived signals**, butyrate, propionate and acetate (short chain fatty acids, SCFAs), induce IL-18 production from the IEC through activation of NOD-like family, receptors (NLRs). Acetate produced by Bifidobacteria promotes epithelial cell barrier function by inducing an anti-apoptotic response in the IEC. The tryptophan/serotonin metabolic pathway, crucial in regulation of numerous neural responses rely on microbial production.

Microbial metabolites for diagnostics and therapeutics: Since presence of microbial dysbiosis may represent a disease phenotype, the intestinal microbiota and their metabolites have become effective targets for the development of new diagnostic methods. These diagnostic method may target markers of intestinal inflammation/ injury or those of systemic inflammation. Biomarkers include testing the blood (e.g. cytokines, CRP, procalcitonin, intestinal fatty acid binding protein, I-FABP) or non-invasive from stools (e.g. calprotectin, volatile organic acids) or from urine (I-FABP in urine, serum amyloid A in the urine). If dysbiosis is associated with disease, then optimizing the gut microbiome will likely represent an effective treatment for intestinal or other inflammatory diseases (fecal microbial transplant therapy).

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Microbiome, biomarker discovery,

Additional Comments: The Gut-CNS axis of the human microbiome in the perinatal period is a hot topic that is widely debated and researched. The mechanisms of microbiota and their metabolites influencing CNS development and immunology are yet to be delineated. We strongly believe that the role of microbial metabolites in the critical window of perinatal life has a wide range of clinical and behavior implications for neonates.

Financial Sponsor?:

Society Affiliation: AAP SoNPM

Participant Engagement: We will use zoom poll to increase audience interactions for learning their perspectives, prior knowledge and future research Mohan Pammi will monitor

chat function during zoom session, to bring questions and perspectives of the audience to the speaker for discussion We have also scheduled a Q & A session at the end for discussion.

Previous Session and Conference Experience: 1. Dr. Joe Neu and I (Mohan Pammi) were co-chairs for a session on multi-omic strategies on the perinatal microbiome, hot topic symposia in PAS 2019 2. This hot topic scientific session was accepted to be presented at PAS 2020 but cancelled due to the pandemic

Chairs: Mohan Pammi (Chair); Josef Neu (Chair); Barbara Warner (Discussant); Emily Hollister (Discussant)

1 Speaker

Name: Josef Neu

Phone: 352-273-8985

Institution: University of Florida

Email: neuj@peds.ufl.edu

Title/Topic: Introduction and objectives

Duration: 0

2 Speaker

Name: Mohan Pammi

Phone: 832-824-3206

Institution: Baylor College of Medicine

Email: mohanv@bcm.edu

Title/Topic: Microbiome and metabolites

Duration: 0

3 Speaker

Name: Barbara Warner

Phone: 3144542683

Institution: Washington University in St Louis

Email: Warner_b@kids.wustl.edu

Title/Topic: Microbial metabolites in CNS health and disease

Duration: 0

4 Speaker

Name: Emily Hollister

Phone: 713-798-3755

Institution: Diversigen, Inc

Email: ehollister@diversigen.com

Title/Topic: Microbial metabolites in mucosal immunology and immunity

Duration: 0

5 Speaker

Name: Josef Neu

Phone: 352-273-8985

Institution: University of Florida

Email: neuj@peds.ufl.edu

Title/Topic: Microbial metabolites as diagnostics, therapeutics, implications for the future

Duration: 0

6 Speaker

Name: Josef Neu

Phone: 352-273-8985

Institution: University of Florida

Email: neuj@peds.ufl.edu

Title/Topic: Question and Answer session

Duration: 0

Proposal # : 377976

Session Title : Clinical Videorecording During Resuscitative Care: Applications for Quality Improvement, Care Optimization, and Education and Skill Maintenance

Contact: Aaron Donoghue

Email: donoghue@email.chop.edu

Type: Hot Topic Symposia

Target Audience: Physicians, trainees, quality improvement officers, nurses, advanced practitioners

Audience Size: 50

Tracks: Critical Care | Education Pathway | Emergency Medicine | Hospital-based Medicine | Neonatology | Quality Improvement/Patient Safety

Objectives: At the conclusion of this presentation, participants will have learned some of the basic components of clinical video review programs, basic issues related to privacy and risk management, and several state of the art applications of video review in the care of critically ill children with regard to care improvement and skill maintenance.

Description:

Resuscitation of critically ill children presents unique challenges to both pediatric and general acute care providers. Resuscitation team members are drawn from a large pool of health care providers (HCP) with highly variable skill and experience levels. These teams are often required to perform resuscitations with limited information on underlying patient morbidity or physiologic risk factors, at any time of day or night, and with minimal advanced warning. Such fundamental procedures as cardiopulmonary resuscitation (CPR) and tracheal intubation (TI) are universally required but infrequently performed. The high acuity, low frequency nature of these events make it difficult for the individual health care provider, and by extension, the resuscitation team, to maintain clinical competency and to provide optimal resuscitation to those children who are critically ill.

The use of videorecording during clinical care has robust history in trauma resuscitation and care of the newly born infant in the delivery room. Over the past decade, a growing body of literature has demonstrated the usefulness of video review as a needs assessment, a quality improvement tool, and a data source for research in pediatric resuscitation. Video review provides clear, unbiased data on these uncommon and highly dynamic patient encounters and can yield elusive information about clinical care, teamwork, communication, and provider interactions.

In this presentation, we explore the use of clinical videorecording and several applications to assessing and improving resuscitative care. All presenting authors work in academic pediatric centers and have independently, and jointly, led efforts to improve both the care of critically ill patients in the PED and PICU and the training and education of the HCPs who provide this care. Topics covered in this presentation will include: 1) the use of video review as a novel methodology for teaching both CPR performance and ETI skills, 2) application of Crew Resource Management methods for improving resuscitation team leadership and communication, 3) development and implementation of high frequency, on-shift, in-situ simulation programs, and 4) the use of safety checklists to decrease systems variability and cognitive workload during resuscitations.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: critical care oral abstract sessions; emergency medicine oral abstract sessions; neonatology oral abstract sessions

Additional Comments:

Financial Sponsor?:

Society Affiliation: PAS

Participant Engagement: Combination of Q&A by mic/speaker combination; chat room monitoring by presenters; white board if needed

Previous Session and Conference Experience: This submission was accepted at PAS 2020, but ultimately (obviously) did not occur

Chairs: Aaron Donoghue (Contact Person)

1 Speaker

Name: Sage Myers

Phone: 267-426-7939

Institution: Children's Hospital of Philadelphia

Email: myerss@email.chop.edu

Title/Topic: Primer on Clinical Videorecording and Quality Improvement

Duration: 0

2 Speaker

Name: Aaron J. Donoghue

Phone: 2158723620

Institution: CHOP

Email: donoghue@email.chop.edu

Title/Topic: Quantifying and Improving CPR Performance at the Individual Provider Level

Duration: 0

3 Speaker

Name: Benjamin Kerrey

Phone: 5137202616

Institution: Cincinnati Children's Hospital Medical Center, University of Cincinnati College of Medicine

Email: Benjamin.Kerrey@cchmc.org

Title/Topic: Ad Hoc Video Review and Purposeful Practice to Improve Pediatric Emergency Provider Airway Skills

Duration: 0

4 Speaker

Name: Karen O'Connell

Phone: 202-476-4177

Institution: Children's National Health System

Email: koconnel@childrensnational.org

Title/Topic: The effects of checklist use on teamwork and workload during pediatric trauma resuscitations

Duration: 0

5 Speaker

Name: Tara L. Neubrand

Phone: 214-587-3433

Institution: University of Colorado/Children's Hospital Colorado

Email: tara.neubrand@childrenscolorado.org

Title/Topic: Development and Implementation of an On-Shift, Low Cost, High Frequency Code Simulation Program in the Pediatric Emergency Department

Duration: 0

6 Speaker

Name: David Kessler

Phone: 5167693777

Institution: Columbia University Medical School

Email: drkessler@gmail.com

Title/Topic: Sim practice as part of routine work, implementation of a weekly in situ inter-professional team training program with an emphasis on Crew Resource Management

Duration: 0

Proposal # : 377984

Session Title : Moving from Prediction Towards Prevention: Neonatal Brain Structure, Function, and Outcomes

Contact: Julie Hofheimer

Email: julie_hofheimer@med.unc.edu

Type: Hot Topic Symposia

Target Audience: Clinicians and researchers concerned with development from preconception through early childhood: neonatologists, general/developmental pediatricians and nurse practitioners, allied health therapists, psychologists.

Audience Size: 200

Tracks: Developmental and Behavioral Pediatrics | General Pediatrics | Health Services Research | Neonatology | Public Health

Objectives: 1. To identify specific neonatal characteristics associated with impaired outcomes at 2-5 years that could be addressed as prevention and intervention targets in the NICU, and in post-discharge community care contexts. 2. To identify strategies to support and engage parents from birth onward in the behavioral observation process and developmental scaffolding activities in order to build on their infant's strengths and address observed challenges. 3. Discuss integrated findings and implications for practices, programs, and policies to identify potential prevention and intervention targets to improve specific cognitive, language, motor, and behavioral regulation outcomes for vulnerable newborns.

Description: Neonatal brain abnormalities and severe illnesses are well documented predictors of neurodevelopmental impairments (NDI) throughout childhood (1-3). However, medical complications alone cannot identify early and potentially treatable indicators of the specific types of cognitive, language, motor, and behavioral impairments prevalent in premature and other high risk newborns. Recent evidence has demonstrated that neonatal neurobehavioral assessments in the NICU are useful for identifying observable correlates of structural brain abnormalities (4-6), as well as identifying independent neurobehavioral characteristics that are salient indicators of long term NDI risk. For example, neonatal attention, tone, movement, and arousal regulation have been associated with similar constructs measured from 2 through 7 years (7, 8). Further, many of these early childhood outcomes are correlated with persisting problems throughout adolescence and adulthood (9, 10). Given the plasticity in the development of brain structures, circuits, and associated functions, identifying early strengths to build on to address observable challenges has the potential to improve outcomes.

To build on the evidence basis for assessing individual needs and developing targeted interventions, this symposium will present data from large, medically and socioenvironmentally diverse cohorts (Ns=220-641) studied by 3 well-published research teams (4-6). We include 2 discussants expert in neonatal neuroimaging and neurodevelopmental follow-up (11, 12), who will integrate findings and offer insights for practices and policies based on new findings presented, and the collective body of evidence to date.

Our focus is on neonatal neuroimaging and neurobehavioral assessments and their unique and combined associations with specific neurodevelopmental (e.g., cognitive, language, motor) and behavioral (e.g., affective, sensory, and social regulation) outcomes in early childhood for full term infants, and for early, moderate, and late preterm infants. Each study will examine (1) interrelationships between neonatal abnormalities on CUS, aEEG, or varied MRI measurements and neurobehavior assessed using the NICU Network Neurobehavioral Scale (NNNS) and/or Hammersmith Neonatal Neurological Exam, as well as (2) longitudinal

associations with specific outcomes at 2-5 years on the Bayley Scales of Infant and Toddler Development (BSID-III), the Child Behavior Checklist (CBCL), Modified Checklist for Autism in Toddlers (M-CHAT), Gross Motor Function Classification Scales (GMFCS), and/or General Movement Assessment (GMA). Implications for clinical care and future research will be presented. Discussants will integrate new findings with the collective work to date, and with a focus on relevance to the design of evidence-based best practices for both routine care, as well as preventive and targeted interventions for vulnerable newborns through early childhood.

Overview of the Neonatal Neurobehavior and Outcomes in Very Preterm Infants (NOVI) Study (6, 13). Our sample includes 641 infants born before 30 weeks post-menstrual age (PMA) and their families, all of whom were enrolled in 9 Level IV NICUs affiliated with 6 US universities. Standardized multicenter procedures for maternal interviews and medical record reviews were implemented to collect maternal and neonatal medical and socioenvironmental data. Central readers employed consensus diagnostic criteria to document CUS abnormalities at DOL 7-14 and 36 weeks PMA or NICU discharge. NNNS exams were administered during the NICU discharge week by trained, certified examiners, as were examiners who administered the BSID, CBCL, M-CHAT, and GMFCS at 2 years AGA (N=587). We will present findings concerning (1) interrelationships between early and late CUS abnormalities and NNNS Summary Scores and Risk Profiles at NICU discharge, and (2) longitudinal associations between these neonatal assessments and outcomes at 2 years AGA. Latent profile analysis was used to calculate 2 year outcome profiles that reflect 4 distinct patterns in BSID-III cognitive, language, and motor scores, CBCL subscores in the clinical range, GMFCS-based CP diagnoses, and M-CHAT R/F scores indicative of ASD risk. Children in classes 3 and 4 (n=158, 27% of the sample) exhibited the poorest BSID-III scores (≤ 1 SD), elevated CBCL attention deficits and pervasive developmental disorders, as well as the highest rates of both ASD risk (48%) and CP (37%). After adjusting for covariates, increased neonatal medical risk and the most poorly regulated NNNS profile at NICU discharge were independently associated with increased odds of being in outcome classes 3 or 4 at 2 years AGA. Based on these longitudinal relationships, we will include a discussion of implications for clinical care in the NICU and community, as well as strategies for involving parents as partners in care from birth onward.

Overview of Victoria Infant Brain Studies Early, Moderate, and Late Preterm and Full Term Studies (4): We propose to present on the neonatal factors that are predictive of neurodevelopmental outcomes in children born preterm. The Melbourne Victorian Infant Brain Studies (VIBeS-2 and LaPrem cohorts) have a wealth of data on neonatal neuroimaging, neonatal neurobehaviour, and childhood neurodevelopment. Participants reflect the breadth of gestational ages [very preterm (<30 weeks, n=92), moderately preterm (32-33 weeks, n=69), late preterm (34-36 weeks, n=120) and full-term (≥ 37 weeks, n=80)]. We have recently generated data on novel quantitative MRI markers of global and regional brain volumes, thickness and microstructure derived from structural and diffusion MRI at term-equivalent age. We will present on the relationships between these advanced quantitative brain MRI markers, specific neonatal neurobehavioural constructs, and motor, cognitive and behavioural outcomes up to 5 years of age. We will include a discussion of the predictive ability of neonatal neurobehavioural assessments and neuroimaging for long-term outcomes, and implications for clinical care and development of interventions.

Overview of Washington University and University of Southern California NICU Therapy Lab Studies (5): Over the past decade, we have conducted concurrent neonatal neurobehavioral and brain imaging assessments in longitudinal studies of outcomes for preterm infants born <32 weeks gestation (Ns=88-220), with measures that include the NNNS, HNNE, Premie-Neuro Exam (PNE), and General Movements Assessment. Varied studies included measures

that were repeated at multiple postmenstrual ages, and often included early childhood outcomes. We will present new findings regarding aEEG in the first three days of life and associations with neurobehavior at term and early childhood outcomes. In addition, we will compare early neurobehavior of preterm vs. full term infants, demonstrating evidence of early neurobehavioral indicators of impairment risk present by NICU discharge that identify specific areas of challenges that can inform targeted interventions. Additional studies demonstrated that (1) neurobehavior as early as 30 weeks postmenstrual age measured with the PNE were related to specific NNNS neurobehavioral summaries at term, and (2) NNNS neurobehavioral summaries at term are related to early childhood outcomes. We will present preliminary findings on changes in cortical structure and connectivity in response to early and intensive therapy intervention. Longitudinal DWI and cortical volume were used to describe changes between routine care, intervention starting in the NICU, and intervention starting at 4 months post NICU discharge. Corresponding neurobehavioral outcomes highlight the value of combining measures to assess intervention efficacy. We will also discuss the sensitivity of early neurobehavioral measures in detecting early functional impairments, and how they can be used to guide parental engagement and support, as well as early therapies during the neonatal period.

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2. Stephens BE, Vohr BR. Neurodevelopmental outcome of the premature infant. *Pediatr Clin North Am*. 2009;56(3):631-46.
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4. Kelly CE, Thompson DK, Cheong JL, Chen J, Olsen JE, Eeles AL, et al. Brain structure and neurological and behavioural functioning in infants born preterm. *Dev Med Child Neurol*. 2018.
5. Pineda RG, Tjoeng TH, Vavasseur C, Kidokoro H, Neil JJ, Inder T. Patterns of altered neurobehavior in preterm infants within the neonatal intensive care unit. *J Pediatr*. 2013;162(3):470-6.e1.
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7. Liu J, Bann C, Lester B, Tronick E, Das A, Lagasse L, et al. Neonatal Neurobehavior Predicts Medical and Behavioral Outcome. *Pediatrics*. 2010;125(1):e90-e8.
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13. Everson TM, Marsit CJ, Michael O'Shea T, Burt A, Hermetz K, Carter BS, et al. Epigenome-wide Analysis Identifies Genes and Pathways Linked to Neurobehavioral Variation in Preterm Infants. *Scientific Reports*. 2019;9(1):6322.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Please avoid overlap with sessions concerning neonatal brain studies, neurobehavior and outcomes, and NICU follow-up

Additional Comments: 1. All co-authors who collaborated on the three research team efforts included in this symposium are listed as "presenters". The leading authors are listed as "Speakers". 2. Our timing for speakers and discussants was based on phone consultation with the PAS program specialist. We can be flexible with our time if needed to facilitate program scheduling. 3. The website limited the number of participants/presenters to 12, and the following individuals have PAS accounts and are co-authors on the NOVI Study presentation by Elisabeth McGowan, MD and Jennifer Check, MD. The PAS program consultant with whom I spoke indicated all authors should be listed and need an account with disclosures completed. Please let me know how to include the following as coauthors who will not have a speaking role: Howard Kilbride, MD (Children's Mercy), T. Michael O'Shea, MD, MPH (UNC-CH), Brian S. Carter, MD (Children's Mercy), Jennifer B. Helderman, MD, MS (WFU), Charles R. Neal (UHawaii), Steve Pastyrnak, PhD (DeVos Children's), Lynne M. Smith, MD (UCLA), Lynne M. Dansereau, MSPH (Women and Infants), Sheri DellaGrotta, MPH (Women and Infants), Barry M. Lester (Brown; Women and Infants)

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: Invite questions, discussion regarding observable neonatal neurobehavioral and neuroimaging assessments associated with outcomes, and clinical care implications.

Previous Session and Conference Experience: NA

Chairs: Julie Hofheimer (Chair); Elisabeth McGowan (Presenter); Jennifer Check (Presenter); Roberta Pineda (Presenter); Stacey Dusing (Presenter); Claire Kelly (Presenter); Alicia Spittle (Presenter); Betty Vohr (Discussant); Terrie Inder (Discussant); Abbie Eeles (Presenter); Zachary Vesoulis (Presenter); Marie Camerota (Presenter)

1 Speaker

Name: Julie A. Hofheimer

Phone: 919.225.1365

Institution: University of North Carolina at Chapel Hill

Email: julie_hofheimer@med.unc.edu

Title/Topic: Introduction to Symposium

Duration: 0

2 Speaker

Name: Elisabeth C. McGowan

Phone: 401-274-1122 ext 47497

Institution: Women and Infants Hospital

Email: emcgowan@wihri.org

Title/Topic: Neonatal Neurobehavior, Severe Illness, and Outcomes in Very Preterm Infants

Duration: 0

3 Speaker

Name: Jennifer Check

Phone: 336-716-6214

Institution: Wake Forest University

Email: jcheck@wakehealth.edu

Title/Topic: Neonatal Neurobehavior, Severe Illness, and Outcomes in Very Preterm Infants

Duration: 0

4 Speaker

Name: Claire Kelly **Phone:** +61 3 9936 6136
Institution: Murdoch Children's Research Institute **Email:** claire.kelly@mcri.edu.au
Title/Topic: Early, Moderate, Late Preterm, and Full term Newborns: Neurobehavior, MRI and Outcomes
Duration: 0

5 Speaker

Name: Alicia Spittle **Phone:** +61 3 90355390
Institution: University of Melbourne **Email:** aspittle@unimelb.edu.au
Title/Topic: Early, Moderate, Late Preterm, and Full term Newborns: Neurobehavior, MRI and Outcomes
Duration: 0

6 Speaker

Name: Roberta Pineda **Phone:** 314.610.2739
Institution: University of Southern California **Email:** bobbi.pineda@chan.usc.edu
Title/Topic: Neonatal Neurobehavior, aEEG, and MRI Measures Associated with Outcomes in Term and Very Preterm Infants
Duration: 0

7 Speaker

Name: Stacey C. Dusing **Phone:** 3234421022
Institution: University of Southern California **Email:** stacey.dusing@pt.usc.edu
Title/Topic: Neonatal Neurobehavior, aEEG, and MRI Measures Associated with Outcomes in Term and Very Preterm Infants
Duration: 0

8 Speaker

Name: Terrie Inder **Phone:** 617-278-0770
Institution: Harvard Medical School **Email:** tinder@bwh.harvard.edu
Title/Topic: Discussion
Duration: 0

9 Speaker

Name: Betty R. Vohr **Phone:** 4012741122
Institution: Women & Infants Hospital **Email:** Bvohr@wihri.org
Title/Topic: Discussion
Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 377988

Session Title : Cell therapy & regenerative medicine from fetus to childhood

Contact: Masahiro Hayakawa

Email: masahaya@med.nagoya-u.ac.jp

Type: Hot Topic Symposia

Target Audience: Scientists, neonatologists and clinicians involved in care of neonates, of great interest not only to neonatologists but also general pediatricians.

Audience Size: 150-200

Tracks: Neonatology

Objectives: Introduction of cell therapy and regenerative therapy in neonatal medicine. Discuss the basic research, translational research and clinical application. Target diseases/organs are hypoxic-ischemic encephalopathy, bronchopulmonary dysplasia and urologic diseases.

Description: Despite recent advances in neonatal intensive care medicine, several neonatal disorders remain major causes of mortality and morbidities. Few effective therapies are currently available to ameliorate the injuries resulting from these disorders. Therefore, developing new safe and effective therapies to improve the outcomes of these disorders is an urgent and considerable issue. Recently, various preclinical studies have shown that stem cell therapy significantly attenuates injuries in newborn animal models of neonatal complications. These findings suggest that stem cell therapy/regenerative therapy might represent the next breakthrough in therapy of these currently intractable and devastating neonatal disorders. In this session, we focus on the results of preclinical/clinical research in several neonatal complications.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: All sessions of neonatology, especially sessions related to BPD and HIE

Additional Comments: We have no comments about this session.

Financial Sponsor?:

Society Affiliation: JPS

Participant Engagement: All the speakers will present online or pre-recording. Questions from audiences will be accepted using chat (text).

Previous Session and Conference Experience: Our session was not presented at another conference.

Chairs: Masahiro Hayakawa (Chair); Charles Cotten (Chair)

1 Speaker

Name: Bernard Thebaud

Phone: 613-737-8899

Institution: Ottawa Hospital Research Institute

Email: bthebaud@toh.ca

Title/Topic: All stem cells are not equal. Considerations for clinical translation for complications of extreme prematurity

Duration: 0

2 Speaker

Name: Yoshiaki Sato

Phone: 81527442294

Institution: Nagoya University Hospital

Email: yoshiaki@med.nagoya-u.ac.jp

Title/Topic: Development of novel therapies for bronchopulmonary dysplasia and perinatal brain injury using multilineage-differentiating stress-enduring cells, as regenerative treatments

Duration: 0

3 Speaker

Name: Dezhi Mu

Phone: +86-28-85559065

Institution: West China Second University
Hospital

Email: mudz@scu.edu.cn

Title/Topic: Progress in stem cell therapy for neonatal brain damage

Duration: 0

4 Speaker

Name: Roger De Filippo

Phone: 323-361-2247

Institution: Children's Hospital Los Angeles

Email: RDeFilippo@chla.usc.edu

Title/Topic: Regenerative Medicine Applications for Pediatric Urology and Beyond. Are there therapies on the horizon?

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020 Proposals

Proposal # : 378000

Session Title : The Next 4 Years: Forecasting Child Health Policy Issues

Contact: Shetal Shah

Email: shetaldoc@hotmail.com

Type: Hot Topic Symposia

Target Audience: Advocates, Academic Pediatricians, Pediatric Researchers

Audience Size: 50 (Based on past in-person sessions)

Tracks: Advocacy Pathway | Epidemiology & Health Services Pathway | Health Equity/Social Determinants of Health | Public Health

Objectives: To understand the federal legislative, regulatory issues expected to occur over the next four years and their impact on child health insurance rates and access. To understand expected federal actions and implications for drug pricing, particularly for medications aimed at treating rare disease. To predict changes in funding level and federal priorities for NIH related to pediatric research. to increase awareness of how expected policy changes will impact vulnerable child populations, including immigrant children and children in poverty.

Description: The outcome of the Presidential election has significant impact on the child health policy agenda. The aim of this session is to provide a forum for policy and physician experts to predict major legislative and policy changes which will occur over the next four years. The session will focus on 5 major areas of concern to pediatricians/researchers. The goal is to prepare academic pediatricians so they can be ideally positioned to promote or impede specific policies which are not evidenced-based to improve child health.

Introduction: Dr. Shetal Shah, MD (Pediatric Policy Council, Society for Pediatric Research)

- 1) Health Insurance Coverage for Kids (Stephanie Glier, MPH- American Academy of Pediatrics)
- 2) Drug Pricing for Children (Dr. Jonathan Davis, MD- American Pediatric Society, Society for Pediatric Research)
- 3) The Pediatric Research Funding Environment (James Baumberger, MPP - American Academy of Pediatrics)
- 4) Healthcare Disparities/Poverty (Dr. Benard Dreyer MD- Academic Pediatric Association)
- 5) Immigrant Issues (Dr. Julie Linton MD- American Academy of Pediatrics)

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Pediatric Policy Council Session and Legislative Breakfast

Additional Comments: This session is jointly sponsored by the Pediatric Policy Council and the Society for Pediatric Research Advocacy Committee. It will feature experts from PPC-member organizations, and all speakers have agreed to participate.

Financial Sponsor?:

Society Affiliation: PPC

Participant Engagement: Question and Answer session at end of session

Previous Session and Conference Experience: N/A

Chairs: Shetal Shah (Chair); Stephanie Glier (Presenter); Jonathan Davis (Presenter); James Baumberger (Presenter); Benard Dreyer (Presenter); Julie Linton (Presenter)

1 Speaker**Name:** Shetal Shah**Phone:** 9179402262**Institution:** Maria Fareri Children's Hospital/ New York Medical College**Email:** shetaldoc@hotmail.com**Title/Topic:** Introduction and Welcome**Duration:** 0**2 Speaker****Name:** Stephanie Glier**Phone:****Institution:** American Academy of Pediatrics**Email:** sglier@aap.org**Title/Topic:** Health Insurance Coverage for Kids**Duration:** 0**3 Speaker****Name:** Jonathan M. Davis**Phone:****Institution:** Tufts University School of Medicine**Email:** jdavis@tuftsmedicalcenter.org**Title/Topic:** Drug Pricing for Children**Duration:** 0**4 Speaker****Name:** James Baumberger**Phone:** 2023478600**Institution:** American Academy of Pediatrics**Email:** jbaumberger@aap.org**Title/Topic:** The Pediatric Research Funding Environment**Duration:** 0**5 Speaker****Name:** Benard Dreyer**Phone:** 9176582583**Institution:** NYU School of Medicine**Email:** Benard.Dreyer@nyumc.org**Title/Topic:** Healthcare Disparities/Poverty**Duration:** 0**6 Speaker****Name:** Julie M. Linton**Phone:** 8643992127**Institution:** University of SC School of Medicine- Greenville**Email:** julie.linton@prismahealth.org**Title/Topic:** Immigrant Issues**Duration:** 0

PAS 21 Meeting Scholarly Session Proposals

October 9, 2020

Proposal # : 378004

Session Title : The neurological implications of abnormal glycemia in neonatal encephalopathy and prematurity

Contact: Emily Tam

Email: emily.tam@utoronto.ca

Type: Hot Topic Symposia

Target Audience: Scientists and clinicians at all career stages interested in neonatal brain injury and improving developmental outcomes.

Audience Size: 150-300

Tracks: Neonatology | Neurology

Objectives: - Understand normal glucose metabolism during postnatal transition - Identify special circumstances leading to disturbed glycemic homeostasis in newborns with neonatal encephalopathy and prematurity - Understand the impact of hypoglycemia in the well newborn - Identify the distinct relationships of hypoglycemia and hyperglycemia with brain injury and adverse outcomes after neonatal encephalopathy - Identify the impact of abnormal glycemia on brain injury and adverse outcomes after preterm birth

Description: Hypoglycemia and hyperglycemia have important implications to the developing brain, especially in newborns with neonatal encephalopathy or born preterm. This Symposium will discuss neonatal glucose homeostasis and brain metabolism with special emphasis on the newborns with high risk of neurologic injury. We will discuss the lessons learned from hypoglycemia in asymptomatic infants which can guide management of other cohorts of at-risk newborns. We will review the emerging evidence for distinct neuroimaging and electrographic phenotypes of brain injury and adverse outcomes in relation with early glycemic status in newborns with hypoxic ischemic encephalopathy. We will also review the current understanding and management recommendations for disturbed glycemic status in preterm newborns with emphasis on neurodevelopmental outcomes.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Neonatal hypoglycemia, neonatal hyperglycemia

Additional Comments: If possible, would suggest affiliation with the Newborn Brain Society as well.

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: After the lectures, there will be a panel discussion soliciting discussion between the audience and the speakers.

Previous Session and Conference Experience: N/A

Chairs: Emily Tam (Chair); Sudeepta Basu (Chair); Elana Pinchevsky (Chair)

1 Speaker

Name: Jeffrey R. Kaiser

Phone: 501-920-1807

Institution: Hershey Penn State Children's Hospital

Email: jrkaiser0102@yahoo.com

Title/Topic: Perturbation of neonatal glucose metabolism and homeostasis in neonatal encephalopathy and prematurity

Duration: 0

2 Speaker

Name: Jane E. Harding

Phone: +64 9 923 6439 Ext 86439

Institution: University of Auckland

Email: j.harding@auckland.ac.nz

Title/Topic: Lessons from asymptomatic neonatal hypoglycemia

Duration: 0

3 Speaker

Name: Emily Tam

Phone: 416-813-7857

Institution: Hospital for Sick Children

Email: emily.tam@utoronto.ca

Title/Topic: Abnormal glycemia and neonatal encephalopathy: neuroimaging and neurophysiology

Duration: 0

4 Speaker

Name: Sudeepta K. Basu

Phone: 2024765818

Institution: Children's National Medical Center

Email: skbasu1@cnmc.org

Title/Topic: Abnormal glycemia and neonatal encephalopathy: outcomes

Duration: 0

5 Speaker

Name: Elana Pinchevsky

Phone:

Institution: Centre Hospitalier Universitaire
Sainte-Justine

Email: Elana.Pinchevsky.hsj@ssss.gouv.qc.ca

Title/Topic: Abnormal glycemia after preterm birth

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378013

Session Title : Pediatric Telemedicine Across the Spectrum: Case Studies in Critical Care, Hospital Medicine and Infectious Disease

Contact: Vandana Madhavan

Email: vmadhavan@partners.org

Type: Hot Topic Symposia

Target Audience: Pediatric clinicians and leaders, in any specialty

Audience Size: 50-100

Tracks: Critical Care | Cross-Disciplinary Pathway | Education Pathway | Hospital-based Medicine | Infectious Diseases | Quality Improvement/Patient Safety | Telemedicine/EHR/Medical Informatics

Objectives: Participants will: - Learn about multiple telemedicine programs in different clinical settings at one institution and their impacts on patient care and quality - Identify strategies to implement, study, and improve new or existing telemedicine programs at their own institutions - Share their own experiences and learn about specific challenges

Description: Telemedicine use has grown in recent years, exponentially so during the current COVID-19 pandemic, with pediatric providers rapidly adopting various telehealth platforms for delivery of care in a number of settings. The combination of increased availability of and familiarity with necessary technology offers the opportunity for more systematic implementation and study of telemedicine initiatives to improve quality of care.

We will have a brief 5-minute introduction of the current state of pediatric telemedicine including different formats, goals, and licensing and reimbursement considerations. The core of the session will consist of a series of three 20-minute presentations in which departmental leaders will review their experiences in needs assessments; program development and implementation; ongoing program review and improvement, with discussion of both published and unpublished data; and future directions of several divisional initiatives in telemedicine. We will have interspersed 5-minute (maximum) Q&A sessions to allow participants to learn more about presenters' work and conclude with a 10+-minute interactive Q&A session to delve further into desired topics (e.g., reimbursement), and share details of their own established or developing programs.

Introduction (5 minutes)

Case Symposia

- Critical Care (20 minutes)
- Acute care consultation regarding pre-transport patient stabilization at referring hospitals - program implementation and lessons learned
- Virtual parent participation in bedside patient rounds
- Remote simulation-based education
- Critical Care Q&A (3-5 minutes)
- Hospital Medicine (20 minutes)
- Patient/family and PCP needs assessments, development and implementation of post-discharge virtual visit program
- Data from in-depth chart review demonstrating significant clinical impacts; provider and family satisfaction
- Discussion of program improvement and expansion, with specific focus on patient with limited English proficiency
- Hospital Medicine Q&A (3-5 minutes)
- Infectious Disease (20 minutes)

- Initiation of virtual follow-up visits and expansion to virtual outpatient consultations during pandemic
- Implementation of asynchronous eConsult program to provide subspecialty advice to outpatient providers
- Data from chart review demonstrating benefits to patient care and education, as well as provider satisfaction survey
- Discussion of ongoing program evaluation and improvement
- Infectious Disease Q&A (3-5 minutes)

Wrap-up/Q&A (10-16 minutes)

- Interactive poll to determine specific needs of audience
- Potential topics for Q&A:
- Sharing of specific materials from needs assessments, chart review, additional data
- Deeper discussion of hospital stakeholder engagement; licensure and malpractice considerations; privacy and confidentiality; reimbursement
- Brief highlights of telemedicine work in other divisions (e.g., pediatric primary care, Down Syndrome clinic)
- Participants' experiences with their own hospitals' telemedicine programs

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: N/A

Additional Comments:

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: There will be brief Q&A intervals after each short symposium by three different presenters and the last section will be reserved for an interactive Q&A session with topics selected by polling, as well as questions submitted verbally or via chat function. Nearly 1/3 of the virtual session will be Q&A.

Previous Session and Conference Experience: This particular multi-specialty session has not been presented before. In addition to local/regional presentations, the pediatric hospital medicine project has been presented in interactive workshops at PAS (2019) and PHM (2019) in addition to posters at AAP NCE (2018, 2019). Pediatric ID eConsult data would have been presented at an oral platform at PAS (2020) and was presented as a poster at AAP NCE (2020). Pediatric critical care work has been published in several articles.

Chairs: Vandana Madhavan (Presenter); Phoebe Yager (Presenter); Chadi El Saleeby (Presenter)

1 Speaker

Name: Vandana L. Madhavan

Phone: 617-875-9061

Institution: Massachusetts General Hospital

Email: vmadhavan@partners.org

Title/Topic: Introduction

Duration: 0

2 Speaker

Name: Phoebe Yager

Phone:

Institution: Massachusetts General Hospital

Email: pyager@mgh.harvard.edu

Title/Topic: Case Symposia - Critical Care; Q&A

Duration: 0

3 Speaker

Name: Chadi M. El Saleeby

Phone: 6176430722

Institution: Massachusetts General Hospital **Email:** celsaleeby@mgh.harvard.edu
Title/Topic: Case Symposia - Hospital Medicine; Q&A
Duration: 0

4 Speaker

Name: Vandana L. Madhavan **Phone:** 617-875-9061
Institution: Massachusetts General Hospital **Email:** vmadhavan@partners.org
Title/Topic: Case Symposia - Infectious Disease; Q&A
Duration: 0

5 Speaker

Name: Vandana L. Madhavan **Phone:** 617-875-9061
Institution: Massachusetts General Hospital **Email:** vmadhavan@partners.org
Title/Topic: Interactive Q&A
Duration: 0

Proposal # : 378022

Session Title : Tackling the Penicillin Allergy Label: A Multidisciplinary Perspective of Allergy De-labeling

Contact: James Antoon

Email: james.antoon@vumc.org

Type: Hot Topic Symposia

Target Audience: Trainees, Faculty of all levels, General Pediatricians, specialists in Hospital Medicine, Emergency Medicine, Infectious Diseases, Critical Care, Allergy & Immunology, Pharmacy and Directors of Antimicrobial Stewardship Programs.

Audience Size: 100

Tracks: Allergy, Immunology and Rheumatology | Clinical Research Pathway | Cross-Disciplinary Pathway | Health Services Research | Hospital-based Medicine | Infectious Diseases | Pharmacology | Scholarly Sessions

Objectives: 1) Identify barriers to safe de-labeling to optimize antibiotic use 2) Provide risk stratification tools to classify patients who are capable of being de-labeled 3) Discuss best practice protocols for de-labeling 4) Engage the audience on setting specific de-labeling management. PIDS

Description: Ten percent of the U.S. population is labeled penicillin (PCN) allergic. Recent studies have demonstrated that the majority of symptoms reported as an allergy by parents are often low-risk non-IgE mediated adverse reactions. The majority of these are cutaneous reactions that are frequently interpreted as PCN-induced but are often viral or viral-drug mediated and are not a contraindication for future PCN use. Studies have shown that the presence of a PCN allergy label results in the avoidance of the entire antibiotic class with subsequent use of broader spectrum, and more expensive suboptimal antibiotics. Appropriately de-labeling PCN allergy has been shown to improve patient safe care through antimicrobial stewardship and lowering health care costs. Recent studies have highlighted approaches for de-labeling children with PCN allergy, however rates of de-labeling remain low and a more systematic approach is needed. Furthermore, there is significant variation among institutions, clinical settings and individuals concerning which patients can be de-labeled, and how to de-label and in the different settings.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: None

Additional Comments: Time allocation: TOTAL 2 hours =120 minutes Introduction: 10 mins Speakers 20 mins x 4 = 80 mins (will use total 5-10 min in between speakers to allow for transition of speaker in online format as well as short intro of each speaker) 80 + 10 mins = 90 mins Panel discussion with audience participation = 20 mins

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: We have planned for a 20 min Q&A period at the end of the session. The moderator (Dr. Antoon) or a PAS support staff member (if available) will field questions privately throughout the initial presentations. During the Q&A session, the moderator will present the audience questions and direct them toward the appropriate presenter. This format of presenting questions was successful during the PAS science workshops this past summer and we anticipate we will be able to answer most of the audience questions in this way.

Previous Session and Conference Experience: This session was accepted to PAS2020 but not performed due to conference cancellation. This session has not been presented at any other conferences.

Chairs: James Antoon (Moderator); Allison Norton (Presenter); Amol Purandare (Presenter); David Vyles (Presenter); Jennifer Goldman (Presenter)

1 Speaker

Name: James W. Antoon

Phone: 615-936-0257

Institution: Vanderbilt University School of Medicine

Email: james.antoon@vumc.org

Title/Topic: Introduction to Allergy De-labeling

Duration: 0

2 Speaker

Name: Allison E. Norton

Phone: 6154287551

Institution: Vanderbilt University

Email: Allison.norton@vumc.org

Title/Topic: Who Can be Safely De-labeled in Primary Care Clinic? Screen for Success

Duration: 0

3 Speaker

Name: Amol Purandare

Phone: 8162343061

Institution: Children's Mercy Hospital

Email: avpurandare@cmh.edu

Title/Topic: The Nuts & Bolts of Delabeling: Who to Challenge and How?

Duration: 0

4 Speaker

Name: David Vyles

Phone: 4803265031

Institution: Medical College of Wisconsin

Email: dvyles@mcw.edu

Title/Topic: The Challenge of Oral Challenges: Barriers to Delabeling

Duration: 0

5 Speaker

Name: Jennifer L. Goldman

Phone: 9137062902

Institution: Children's Mercy Hospital

Email: jlgoldman@cmh.edu

Title/Topic: Where Do We Go From Here? Impact, Metrics and Future Directions

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378024

Session Title : Optimizing Pediatric Perioperative Care

Contact: Cheryl Chow

Email: chtchow@gmail.com

Type: Hot Topic Symposia

Target Audience: pediatricians, pediatric anesthesiologists, and pediatric anesthesiology fellows

Audience Size: 45

Tracks: Children with Chronic Conditions | Cross-Disciplinary Pathway | Developmental and Behavioral Pediatrics | Scholarly Sessions

Objectives: 1) To understand the current knowledge on pediatric perioperative anxiety and its associated postoperative outcomes. 2) To examine the epidemiology, risk factors and outcomes of pediatric chronic postsurgical pain. 3) To discuss potential strategies in managing pediatric postsurgical pain and future research directions for optimizing pediatric perioperative care.

Description: Approximately 6 million children and adolescents undergo surgery in the United States each year; among those undergoing major surgery, up to 20% experience moderate-severe postsurgical pain 3 months after surgery. Studies have shown that up to 30% of youth with chronic postsurgical pain reported reduced functional ability up to 1 year after surgery, with interference in daily functioning, resulting in poorer short and long-term outcomes. There is growing evidence implicating psychological factors in the development of pediatric postsurgical pain. Thus, knowledge of propensity to these factors in pediatric patients may help to guide the design of prevention and intervention strategies.

This session will provide an update on current research findings and unpublished results suggesting that anxiety and its related states may help identify pediatric patients at risk of postsurgical pain and guide the design of future detection, prevention, and/or individualized management strategies aimed at reducing the adverse effects of postoperative outcomes.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: Both

Conflicting Sessions: N/A

Additional Comments: This symposia is an international effort involving experts from multidisciplinary backgrounds- Pediatric Anesthesiologists, Neuroscientist and Clinical Psychologist in US and Canada.

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: Participants will be invited to submit questions to the chair via chat option and individual speaker will address them at the end of each session. A general FAQ segment will also be held at the end of the session.

Previous Session and Conference Experience: N/A

Chairs: Zeev Kain (Chair); Cheryl Chow (Contact Person)

1 Speaker

Name: Cheryl Chow

Phone: 647-523-8222

Institution: York University

Email: chtchow@gmail.com

Title/Topic: Optimizing Pediatric Perioperative Care

Duration: 0

2 Speaker

Name: Joel Katz

Phone: 416 736 2100 Ext. 40557

Institution: York University

Email: jkatz@yorku.ca

Title/Topic: Optimizing Pediatric Perioperative Care

Duration: 0

3 Speaker

Name: Buckley D. Buckley

Phone: 905-525-9140, Ext 22413

Institution: McMaster University

Email: buckleyn@mcmaster.ca

Title/Topic: Optimizing Pediatric Perioperative Care

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378025

Session Title : Interdisciplinary Care of Infants and Children with Bronchopulmonary Dysplasia

Contact: Michael Tracy

Email: mtracy@stanford.edu

Type: Hot Topic Symposia

Target Audience: Trainees, Junior Faculty, Mid-Level Faculty, Senior Faculty across Neonatology, critical care, pulmonology, cardiology, and general pediatrics

Audience Size: 75

Tracks: Cardiology | Children with Chronic Conditions | Clinical Research Pathway | Critical Care | Cross-Disciplinary Pathway | Neonatology | Pulmonology

Objectives: 1. Characterize the phenotype and outcomes of infants with severe BPD 2. Discuss strategies for transitioning from prevention to management of severe BPD 3. Emphasize the importance of interdisciplinary longitudinal care for infants and children with severe BPD 4. Describe current interdisciplinary BPD programs and recommend best practices

Description: Bronchopulmonary dysplasia (BPD) remains the most common late morbidity for extremely premature infants. Infants with severe BPD (sBPD) are a particularly vulnerable population at increased risk for long-term sequelae and late mortality. The majority of care for infants with sBPD has traditionally occurred in the intensive care setting. Infants with sBPD require chronic respiratory support and longitudinal subspecialty involvement, all of which can be a challenge in the acute care environment. In response, inpatient interdisciplinary programs for infants with BPD are now in place in many large programs across the country and have shown that they can improve survival, decrease length of stay and cost. Care coordination continues to be a necessity for children with sBPD in the outpatient clinic, given the complexity of their medical needs, multiple subspecialty appointments, high rates of readmissions, and a growing understanding of the long term cardiopulmonary outcomes. In the absence of high quality evidence, there is a great deal of variation in care for infants with sBPD both within and between centers. This symposium is designed to describe the unique phenotypes and physiology of infants and children with sBPD, and to develop best practices for longitudinal interdisciplinary care.

Dr. Cristea will begin the session by presenting the scope and impact of this symposium on the interdisciplinary care of infants with sBPD. Dr Abman will then describe the unique distinction of sBPD, and highlight the distinctive airway, parenchymal and vascular phenotypes in infants with sBPD. Dr Nelin will discuss the underlying physiology of sBPD that mandates a different approach to respiratory support than the traditional strategies employed in preterm infants to prevent BPD or to treat acute lung disease. Dr Tracy will emphasize the importance of interdisciplinary BPD care for the management of comorbidities in both the inpatient and the outpatient setting. Dr Cristea will report results of a nationwide survey of 18 sBPD programs that comprise the BPD Collaborative. The BPD collaborative is an interdisciplinary group from major pediatric medical centers including neonatologists, pulmonologists, critical care physicians, nurse specialists and others that was created to promote research and to optimize outcomes of infants and children with sBPD. She will recommend consensus best practices for creating interdisciplinary programs for sBPD infants and children. Lastly, the symposium attendees will be allowed time to engage in discussion with the panelists about the challenges to providing care for this population, the directions of future research, and opportunities for collaboration.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: N/A

Additional Comments: N/A

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: Q&A session with the panel of speakers at the conclusion of the prerecorded talks, moderated by the symposium chairs

Previous Session and Conference Experience: N/A

Chairs: Ioana Cristea (Chair); Michael Tracy (Chair)

1 Speaker

Name: Ioana Cristea

Phone: 3172747208

Institution: Riley Hospital for Children

Email: aicriste@iu.edu

Title/Topic: Introdution to Interdisciplinary Care of Infants and Children with Severe Bronchopulmonary Dysplasia

Duration: 0

2 Speaker

Name: Steven Abman

Phone: 303-881-9765

Institution: University of Colorado

Email: Steven.Abman@ucdenver.edu

Title/Topic: Severe BPD: Phenotypes and Outcomes

Duration: 0

3 Speaker

Name: Leif D. Nelin

Phone: +1 614 355 6719

Institution: Nationwide Children's Hospital

Email: Leif.Nelin@nationwidechildrens.org

Title/Topic: Transitioning from Prevention to Management of Severe BPD: A Physiologic Approach

Duration: 0

4 Speaker

Name: Michael Tracy

Phone: 6507238325

Institution: Stanford University School of Medicine

Email: mtracy@stanford.edu

Title/Topic: Approaches to Longitudinal Interdisciplinary Care of Infants with Severe BPD

Duration: 0

5 Speaker

Name: Ioana Cristea

Phone: 3172747208

Institution: Riley Hospital for Children

Email: aicriste@iu.edu

Title/Topic: Lessons from the BPD Collaborative Program Survey: Consensus Best Practices for Interdisciplinary Care of Infants and Children with Severe BPD

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 378047

Session Title : Bronchopulmonary Dysplasia-Associated Pulmonary Hypertension: Novel Mechanisms and Approaches for Disease Prevention and Treatment

Contact: Binoy Shivanna

Email: shivanna@bcm.edu

Type: Hot Topic Symposia

Target Audience: Basic researchers, Neonatologists, Pulmonologists, Cardiologists, Pathologists, Nutritionists, Microbiologists, and Trainees

Audience Size: 250

Tracks: Academic and Research Skills | Basic Science Pathway | Cardiology | Children with Chronic Conditions | Cross-Disciplinary Pathway | Developmental Biology | Neonatology | Pulmonology

Objectives: 1. Analyze the evidence behind the preclinical models of BPD-PH and provide future directions to improve the rigor and transparency of phenotyping BPD-PH in these models 2. Identify how malnutrition, dysbiosis, and deregulated signaling of blood vessels, mitochondria, exosomes, and stem cells contribute to BPD-PH pathogenesis 3. Illustrate how to target lung vasculature, mitochondria, exosomes, stem cells, nutrition, and microbiome to prevent and treat BPD-PH in infants 4. Discuss the nature and implications of our panelists' research with symposium attendees

Description: Bronchopulmonary dysplasia (BPD) is a developmental lung disorder of preterm infants primarily caused by immature host defense mechanisms that prevent tissue injury and facilitate repair. This disorder is the most common complication of premature birth, and its incidence remains unchanged over the past few decades. Additionally, BPD increases long-term cardiopulmonary and neurodevelopmental morbidities of preterm infants. Pulmonary hypertension (PH) is a common morbidity of BPD. The pooled prevalence of PH in mild, moderate, and severe BPD is 6%, 12%, and 39%, respectively. Importantly, the presence of PH increases both short- and long-term morbidities and mortality in BPD infants. Further, there are no curative therapies for this disease complex. Not surprisingly, BPD is the second most expensive childhood disease after asthma. Thus, the need of the hour is to understand the pathogenic mechanisms of BPD-associated PH (BPD-PH) and develop meaningful strategies to prevent and treat this devastating disease of preterm infants. This symposium is designed to fulfill this timely need. Dr. Abman will begin the session by presenting the overview and impact of this symposium on the cardiopulmonary health of preterm infants. Dr. Shivanna will then emphasize the importance of rigor and transparency in phenotyping experimental BPD-PH, discuss the need for several models of this disease complex to avoid a "one-size-fits-all" approach, and build a case for endotype- and phenotype-targeted clinical trials. Later on, Dr. Abman, Dr. Ambalavanan, Dr. Young, Dr. Bhandari, and Dr. Wedgwood will present the new and novel pathogenic mechanisms of BPD-PH learned from the state-of-art animal studies. A primary emphasis of all the panelists will be on how this new knowledge can be translated from bench to bedside to impact the well-being of infants with this disease. Finally, the symposium participants will be allowed sufficient time to have a robust discussion with the panelists about the roadblocks to the clinical translation, directions of future research, and opportunities for collaboration.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Bronchopulmonary dysplasia, pulmonary hypertension, pulmonary vascular biology

Additional Comments:**Financial Sponsor?:****Society Affiliation:** SPR

Participant Engagement: We will have a lead facilitator to lead the Q and A session in a smooth and organized fashion, mainly by using the virtual platform's chat function. We will also incorporate the Poll Everywhere app in our presentations and obtain the participants' responses. Additionally, we will use a QR code to obtain feedback and respond to any unanswered questions from the participants. Finally, we will adapt to the latest technology available to us during the 2021 meeting and use it efficiently to engage and interact with our participants.

Previous Session and Conference Experience: This proposal was selected for presentation at the 2020 PAS meeting, but was unfortunately cancelled due to the COVID pandemic.

Chairs: Binoy Shivanna (Chair); Karen Young (Chair); Steven Abman (Chair); Binoy Shivanna (Contact Person)

1 Speaker**Name:** Steven Abman**Phone:** 303-881-9765**Institution:** University of Colorado**Email:** Steven.Abman@ucdenver.edu**Title/Topic:** Pulmonary Vascular Disease in Preterm Infants**Duration:** 0**2 Speaker****Name:** Binoy Shivanna**Phone:** 8328246474**Institution:** Baylor College of Medicine**Email:** shivanna@bcm.edu**Title/Topic:** Animal models of BPD-PH: Needs and Rigorous Phenotyping Tools**Duration:** 0**3 Speaker****Name:** Steven Abman**Phone:** 303-881-9765**Institution:** University of Colorado**Email:** Steven.Abman@ucdenver.edu**Title/Topic:** Angiogenic targets for the prevention of BPD-PH**Duration:** 0**4 Speaker****Name:** Namasivayam Ambalavanan**Phone:** 205-934-4680**Institution:** University of Alabama at Birmingham**Email:** ambal@sprynet.com**Title/Topic:** Exosomes in BPD-PH**Duration:** 0**5 Speaker****Name:** Karen Young**Phone:** 3055422538**Institution:** University Of Miami Miller School Of Medicine**Email:** kyoung3@miami.edu**Title/Topic:** Regenerative therapy in BPD-PH: Role of Stem Cells**Duration:** 0**6 Speaker****Name:** Vineet Bhandari**Phone:** 203-645-2123**Institution:** Children's Regional Hospital at Cooper/CMSRU**Email:** bhandari-vineet@cooperhealth.edu**Title/Topic:** Targeting mitochondrial dysfunction in BPD-PH: Emerging Evidence**Duration:** 0

7 Speaker

Name: Stephen Wedgwood

Phone: 9167341518

Institution: UC Davis Medical Center

Email: swedgwood@ucdavis.edu

Title/Topic: Growth, Bugs, and BPD-PH: Effects of Nutrition and Microbiome

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378139

Session Title : X+Y Scheduling in Pediatric Residency: What Is It and How Can I Make It Work?

Contact: Joanna Lewis

Email: joanna.lewis@advocatehealth.com

Type: Hot Topic Symposia

Target Audience: Residency Program Directors, Faculty educators, Chief Residents, Residents

Audience Size: 30-50

Tracks: Education Pathway | General Pediatrics | Hospital-based Medicine | Scholarly Sessions | Trainee Pathway

Objectives: (1) Summarize the background of resident scheduling and the effects on education, wellness, and outpatient continuity. (2) Describe the implementation of an X+Y schedule in a pediatrics residency program and compare X+Y scheduling to a traditional block schedule. (3) Explore current outcomes data related to X+Y schedule implementation.

Description: Residency scheduling is a complex topic that affects education, wellness and patient continuity. Through the Advancing Innovation in Residency Education (AIRE) pilot of the ACGME, a cohort of programs from around the country have implemented X+Y scheduling in pediatrics. Speakers from three of the initial pilot programs will introduce the concept of X+Y scheduling and its history in resident education. They will then describe implementation methods and barriers to change for programs involved in the study. Finally, current outcomes data will be shared with the group to allow analysis of benefits and challenges to this innovative model. The presenters are program leaders from three institutions that will guide faculty and trainees from all types of programs, large to small and community-based to academic, to understand how X+Y scheduling may work for their programs.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: None

Additional Comments:

Financial Sponsor?:

Society Affiliation: PHM

Participant Engagement: Speakers will engage participants during a Q&A session that will allow questions via the Chat function and also through virtual conversation.

Previous Session and Conference Experience: Previously accepted for PAS 2020 but not presented due to COVID

Chairs: Joanna Lewis (Presenter); Ross Myers (Presenter); Lynn Thoreson (Presenter)

1 Speaker

Name: Lynn Thoreson

Phone: 512-324-0165

Institution: UT Austin

Email: lmthoreson@ascension.org

Title/Topic: Resident Scheduling: background and innovative ideas

Duration: 0

2 Speaker

Name: Joanna Lewis

Phone: 4128059882

Institution: Advocate Children's Hospital - Park Ridge

Email: joanna.lewis@advocatehealth.com

Title/Topic: X+Y In Depth: Implementation strategies and outcomes

Duration: 0

3 Speaker

Name: Ross E. Myers

Phone: 216-544-2544

Institution: Case Western Reserve University /
Rainbow Babies and Children's Hospital

Email: ross.myers@uhhospitals.org

Title/Topic: Preliminary Data from the Pediatric X+Y Scheduling Collaborative

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020 Proposals

Proposal # : 378144

Session Title : Probiotics in pediatrics: risks vs. potential benefits in 2021 – what you need to know

Contact: Gregory Priebe

Email: gregory.priebe@childrens.harvard.edu

Type: Hot Topic Symposium

Target Audience: General pediatricians as well as specialists in pediatric infectious diseases, pediatric hospital medicine, neonatologists, and pediatric critical care

Audience Size: 200

Tracks: Critical Care | Emergency Medicine | Hospital-based Medicine | Infectious Diseases | Neonatology

Objectives: Objectives 1. Explain the differences between probiotics, prebiotics, and synbiotics 2. List conditions for which probiotics are “recommended” by expert groups and why these recommendations might be problematic 3. Review literature around what is known and what is not known regarding the use of probiotics for prevention or treatment of COVID-19 4. Describe how probiotics are regulated in the US and why this matters to children (and everyone else) 5. Describe what is known about the impact of probiotics on the microbiome and understand the mechanisms and challenges of gut microbiome manipulation 6. Review the potential benefits of probiotic administration in the neonatal intensive care unit (NICU) including decreased risk of necrotizing enterocolitis, sepsis, and death 7. Review the risks of probiotic administration in the NICU and PICU, including contamination of commercial probiotics with pathogens, probiotic sepsis, and cross contamination between patients. 8. List risk factors for developing invasive infections from probiotics. 9. Understand the evolution of the evidence related to the use of probiotics to treat gastroenteritis in children and its implications to the larger field of probiotic research

Description: Probiotics are increasingly used in pediatrics, spanning outpatient general pediatric practice, the emergency department, and hospitalized patients, including those in intensive care units. Although some studies have shown efficacy in acute infectious diarrhea, antibiotic-associated diarrhea, viral respiratory tract infections, and inflammatory bowel disease, reported benefits are typically probiotic-formulation-specific, and recent clinical trials have raised questions about the potential benefits. Recent data also highlight the risks of bacteremia and sepsis related to probiotics as well as the impact of probiotics on the microbiome. This session will provide an overview of probiotic use and clinical trials in pediatrics, including what is known about probiotics in COVID-19.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Probiotics

Additional Comments:

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: Audience response questions before each talk (if possible) and Q&A sessions after each talk

Previous Session and Conference Experience: N/A

Chairs: Gregory Priebe (Chair); Patricia Hibberd (Chair)

1 Speaker

Name: Patricia Hibberd

Phone: 6173582046

Institution: Boston University School of Public Health

Email: patricia.hibberd@gmail.com

Title/Topic: Why are probiotics becoming more controversial? Implications for pediatrics

Duration: 0

2 Speaker

Name: Mark A. Underwood

Phone: 916-734-8672

Institution: University of California Davis

Email: munderwood@ucdavis.edu

Title/Topic: Risks and benefits of probiotics in the neonatal intensive care unit

Duration: 0

3 Speaker

Name: Gregory P. Priebe

Phone: 617-355-7327

Institution: Boston Children's Hospital

Email: gregory.priebe@childrens.harvard.edu

Title/Topic: Genomic evidence of probiotic bacteremia in pediatric ICU patients

Duration: 0

4 Speaker

Name: David Schnadower

Phone: 3147808378

Institution: Cincinnati Children's Hospital Medical Center - University of Cincinnati College of Medicine

Email: david.schnadower@cchmc.org

Title/Topic: The unfulfilled promise of probiotics and the complexities of manipulating the gut microbiome

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 378154

Session Title : A Multi-Disciplinary Collaborative Approach to Asthma Patient Education Across Outpatient and Inpatient Settings

Contact: Devon Hahn

Email: devon-hahn@ouhsc.edu

Type: Hot Topic Symposia

Target Audience: Emergency Medicine, Hospital Medicine, General Pediatrics
Outpatient Medicine

Audience Size: 200

Tracks: Academic and Research Skills | Asthma | Community Pediatrics | Cross-Disciplinary Pathway | Emergency Medicine | General Pediatrics | Hospital-based Medicine | Literacy | Quality Improvement/Patient Safety

Objectives: To demonstrate the need for collaboration across specialties when approaching the management of a common chronic disease To highlight the effectiveness of team-building across disciplines for transformative improvement in patient care

Description: Asthma continues to be one of the most common chronic diseases of childhood. Patient education is critical to how patients manage asthma at home, and directly influences how they seek and require medical care. At our Children's Hospital, we have developed a program of patient education for asthma that spans across the different care delivery areas including the Emergency Department, the Inpatient Hospital stay, and the Outpatient Clinic, to provide consistent information and materials for all patients. We will highlight the collaboration between all disciplines that are critical to implementing this multi-level program.

Speakers:

Stephanie DeLeon, Pediatric Hospital Medicine, Associate Pediatric Residency Program Director - Introduction of the scope of patient asthma education at The Children's Hospital of Oklahoma. Discussion of recent developments for compliance with national standards of care for asthma, including a multi-disciplinary approach utilizing physicians, nurses, and respiratory therapists, as well as hospital administration. Presentation of the medical education curriculum for pediatric residents. – 20 minutes

Jill Lyman, Registered Respiratory Therapist, Asthma Educator - Discussion of Asthma Educator role for the delivery of consistent asthma education prior to discharge for patients admitted for asthma exacerbations. – 15 minutes

Devon Hahn, Pediatric Hospital Medicine, General Pediatrics - Discussion of a Quality Improvement project to improve patient asthma education in the Emergency Department. Discussion of the adaptation of electronic medical records for providing Asthma Action Plans both for outpatients and for inpatients, and the role of Respiratory Therapists and Nurses in delivering patient education in the Emergency Department. Introduction of the liason with the Brendan McLarty Foundation, a non-profit organization aimed at providing asthma education to patients. – 20 minutes

Jennifer Blair, Co-Founder and Executive Director, Brendon McLarty Memorial Foundation - Presentation of the mission and activities of the Brendan McLarty Foundation and their contributions to The Children's Hospital of Oklahoma through donations of asthma education materials for patient distribution. – 15 minutes

Cheryl Bryant, General Pediatrics Outpatient Clinics - Discussion of asthma education

materials for use in clinic, distribution of educational materials to patients, and asthma education documentation. – 15 minutes

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Asthma, patient health literacy, patient education

Additional Comments:

Financial Sponsor?:

Society Affiliation: PHM

Participant Engagement:

Previous Session and Conference Experience:

Chairs: Stephanie DeLeon (Chair); Devon Hahn (Chair); Devon Hahn (Contact Person)

1 Speaker

Name: Stephanie DeLeon

Phone: 4052002505

Institution: The University of Oklahoma Health Sciences Center

Email: Stephanie-DeLeon@ouhsc.edu

Title/Topic: Asthma Care: Providing Patient Education Across Disciplines, Care Settings, and Administrations

Duration: 0

2 Speaker

Name: Jill Lyman

Phone:

Institution: The University of Oklahoma Health Sciences Center

Email: jill.lyman@oumedicine.com

Title/Topic: The Role of the Asthma Educator

Duration: 0

3 Speaker

Name: Devon Hahn

Phone: 4052714407

Institution: The University of Oklahoma Health Sciences Center

Email: devon-hahn@ouhsc.edu

Title/Topic: A Quality Improvement Project to Improve Patient Asthma Education in the Emergency Department

Duration: 0

4 Speaker

Name: Jennifer Blair

Phone: 4053141722

Institution: The University of Oklahoma Health Sciences Center

Email: jenmblair@yahoo.com

Title/Topic: The Brendon McLarty Memorial Foundation

Duration: 0

5 Speaker

Name: Cheryl L. Bryant

Phone: 4052714407

Institution: The University of Oklahoma Health Sciences Center

Email: cheryl-bryant@ouhsc.edu

Title/Topic: Outpatient Asthma Patient Education

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 378170

Session Title : Management of Post-hemorrhagic Ventricular Dilatation in the Preterm Infant

Contact: Mohamed El-Dib

Email: mel-dib@bwh.harvard.edu

Type: Hot Topic Symposia

Target Audience: Neonatologists, Pediatric Neurologists, Pediatric Neurosurgeons, Neonatal Nurses, Advanced Practitioners, and Neuroscientists,

Audience Size: 1000

Tracks: Neonatology | Neurology

Objectives: - Understand the pathophysiology and neuropathology of PHVD - Describe intervention studies published for PHVD - Discuss surgical interventions for PHVD - Explore future directions and other neuroprotectors in preterm infants - Discuss consensus approach for evaluating and managing PHVD

Description: Progressive post-hemorrhagic ventricular dilatation (PHVD) affects more than half of extremely premature infants with severe intraventricular hemorrhage and contributes to their high risk for adverse motor and cognitive neurodevelopmental outcomes. Despite being investigated for many decades, there is no agreement among neonatologists, pediatric neurologists, and neurosurgeons as to the best management approach to PHVD. Very recently, the ELVIS study (Randomized Controlled Early versus Late Ventricular Intervention Study) demonstrated improved 2- year outcome in the early intervention group.

This hot topic symposium will be led by experts in the field who will elaborate on the following aspects:

- Pathophysiology and neuropathology of PHVD- Terrie Inder
- Intervention studies for PHVD- Linda de Vries
- Surgical interventions for PHVD- David Limbrick
- Future directions and other neuroprotectors- Praveen Ballabh
- Consensus approach for evaluating and managing PHVD- Mohamed El-Dib

This will be followed by panel Q&A allowing for audience interaction.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Perinatal Brain Club- Other Neonatal Neurology Sessions

Additional Comments: Most of the presenters have recently participated in a Medical Progress article published in Journal of pediatrics: El-Dib M, Limbrick DD, Inder T, Whitelaw A, Kulkarni A, Warf B, Volpe JJ, Linda S. de Vries LS. Management of Post-hemorrhagic Ventricular Dilatation in the Preterm Infant. J Pediat. 2020 Jul 30. [Epub ahead of print]

Financial Sponsor?:

Society Affiliation: NBS

Participant Engagement: Will have vivid short sessions led by experts in the field with a lot of visual slides and passionate presentations. Moreover we will provide 30 min at the end for Q& A Session.

Previous Session and Conference Experience:

Chairs: Terrie Inder (Panelist); Linda de Vries (Panelist); David Limbrick (Panelist); PRAVEEN BALLABH (Panelist); Mohamed El-Dib (Panelist)

1 Speaker

Name: Terrie Inder **Phone:** 617-278-0770
Institution: Harvard Medical School **Email:** tinder@bwh.harvard.edu
Title/Topic: Pathophysiology and neuropathology of Post-Hemorrhagic Ventricular Dilation
Duration: 0

2 Speaker

Name: Linda S. de Vries **Phone:** +31887554545
Institution: UMCU **Email:** l.s.devries@umcutrecht.nl
Title/Topic: Intervention studies for Post-hemorrhagic Ventricular Dilatation
Duration: 0

3 Speaker

Name: David Limbrick **Phone:**
Institution: St. Louis Children's Hospital **Email:** limbrickd@wustl.edu
Title/Topic: Surgical interventions for Post-hemorrhagic Ventricular Dilatation
Duration: 0

4 Speaker

Name: PRAVEEN BALLABH **Phone:** 914-953-1936
Institution: Children Hospital at Montefiore **Email:** pballabh@msn.com
Title/Topic: Future directions and other neuroprotectors in the preterm infant
Duration: 0

5 Speaker

Name: Mohamed El-Dib **Phone:** 6177326902
Institution: Brigham and Women's Hospital **Email:** mel-dib@bwh.harvard.edu
Title/Topic: Consensus approach for evaluating and managing Post-hemorrhagic Ventricular Dilatation
Duration: 0

Proposal # : 378172

Session Title : Using Moneyball Approaches to Address Equity in Child Health

Contact: Jeffrey Yaeger

Email: jeffrey_yaeger@urmc.rochester.edu

Type: Hot Topic Symposia

Target Audience: General pediatricians, sub-specialists, advanced practice practitioners, researchers, health system administrators, community-based organizations

Audience Size: 75

Tracks: Academic and Research Skills | Advocacy Pathway | Clinical Research Pathway | Community Pediatrics | Critical Care | Cross-Disciplinary Pathway | Digital Therapeutics Pathway | Emergency Medicine | Epidemiology & Health Services Pathway | General Pediatrics | Health Equity/Social Determinants of Health | Health Services Research | Hospital-based Medicine | Infectious Diseases | Public Health | Telemedicine/EHR/Medical Informatics

Objectives: 1. Discuss the use of three innovative analytic methods to more completely harness both clinical and non-clinical data to improve child health outcomes. 2. Illustrate the implications that each method could have across disciplines and sub-specialties to improve child and population health outcomes, specifically as related to equity. 3. Identify steps to implement these methods in other settings and disciplines, including how to overcome challenges encountered.

Description: Seasoned baseball scouts are experts at identifying talented prospects just as experienced clinicians are experts at diagnosing and managing patients' medical conditions. Although both scouts and clinicians may be correct most of the time, mistakes can be costly, leading to millions of dollars of losses for baseball franchises, and potentially preventable morbidity in the health care setting. Over the last 15 years, baseball executives have sought to guard against such mistakes by largely embracing the use of advanced analytic tools to identify those baseball prospects with the most potential for success. Termed "Moneyball," and immortalized in a film of the same name, advanced analytics have revolutionized the sport as athletes are now throwing harder and hitting more home runs than ever before.

Health care, on the other hand, has lagged behind. Although we know that health outcomes are largely influenced by behaviors, social circumstances, and physical surroundings, this information is rarely collected and used in diagnosis or medical decision-making. Tools to collect and methods to analyze this important information have not yet been robustly developed, nor adequately applied in healthcare settings to improve outcomes. These skills are needed now more than ever, as pediatricians strive to provide care that is equitable and support patients and families affected by systemic racism, other social injustices, and the COVID-19 pandemic.

But this is about to change. With the use of advanced technologies such as **geospatial analysis, machine learning, and natural language processing**, we are now developing tools to not only improve the identification of clinical, but also social and environmental risk factors, and to incorporate this information into clinical decision-making at the point-of-care. Such methods are simultaneously helping to build situational awareness capabilities, critical in the midst of the COVID-19 pandemic. These methods, when fully implemented, represent important strategies of enhancing delivery of high-value, equity-driven care. Indeed, clinicians, researchers, communities, and health systems that can harness the vast quantities of clinical, community, education, and

government data will be well-positioned to improve child health outcomes, mitigate disparities, optimize decisions, and enhance the value of care. With its **focus on utilizing cutting-edge technologies to develop data-driven improvement in outcomes across multiple disciplines**, this presentation aligns well with the **PAS Meeting's Strategic Plan**.

The speakers will describe examples of research programs and quality improvement initiatives that have capitalized on each of these three advanced analytic methods. They will discuss how such approaches can be applied across disciplines and sub-specialties, using the fields of public health, general pediatrics, emergency medicine, and hospital medicine as examples. PAS attendees across a multitude of disciplines will be interested in this presentation as it is relevant for those interested in the **Digital Therapeutics, Clinical Research, and Advocacy Pathways**.

Using the revolution of baseball analytics as an analogy, the first speaker will set the stage, describing the gap between current analytic capabilities and how pediatricians currently make clinical decisions. All speakers will then focus their discussion on a description of a particular methodology (geospatial analysis, machine learning, and natural language processing), their specific motivation, challenges encountered, how barriers were overcome, and outcomes achieved. They will also discuss how principles can be applied across disciplines and future implications of their work, including challenges and opportunities, specifically as related to equity in care and development of population health situational awareness capabilities. If able, the speakers plan to use a polling system throughout the presentations to more fully inform the depth of each presentation and engage participants. A 20-minute Q&A session will follow the three presentations, allowing audience members to interact with the speakers. Audience members will leave the session with a clear understanding of the capabilities of these technologies and how they might be able to implement them with their own work at their institution.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: None

Additional Comments: Because we intend to actively engage participants during our session, we kindly request to present our content live, if possible.

Financial Sponsor?:

Society Affiliation: PHM

Participant Engagement: We plan to use an audience response system throughout each presentation. And we plan to have 20-25 minutes of Q&A time at the end of the presentations.

Previous Session and Conference Experience: Dr. Yaeger presented a similar session at the Pediatric Hospital Medicine Conference in 2020. This session was oriented toward an introduction to the concepts of some of the advanced analytic techniques (geospatial analysis, machine learning, and natural language processing). This proposal is different in that the group consists of 2 other colleagues (Drs. Beck and Ramgopal) who have expertise in these techniques and have applied them in novel and innovative ways. Therefore, we expect the content of this session to appeal to a broader audience. In addition, presenters will also focus their content toward how each of these analytic techniques can be used to address equity in child health.

Chairs: Jeffrey Yaeger (Chair); Andrew Beck (Presenter); Sriram Ramgopal (Presenter)

1 Speaker

Name: Jeffrey P. Yaeger

Phone: 585-276-3477

Institution: University of Rochester School of
Medicine and Dentistry

Email: jeffrey_yaeger@urmc.rochester.edu

Title/Topic: What is Moneyball and What Does It Have To Do With Kids?

Duration: 0

2 Speaker

Name: Andrew F. Beck

Phone: 5136363170

Institution: Cincinnati Children's Hospital Medical
Center

Email: andrew.beck1@cchmc.org

Title/Topic: Using Geospatial Analytics to Inform Equity-Oriented Community Health Initiatives and Build
Population Situational Awareness

Duration: 0

3 Speaker

Name: Sriram Ramgopal

Phone:

Institution: Northwestern University

Email: sramgopal@luriechildrens.org

Title/Topic: Use of Machine Learning Techniques to Identify Low-Risk Patients in the Emergency Department

Duration: 0

4 Speaker

Name: Jeffrey P. Yaeger

Phone: 585-276-3477

Institution: University of Rochester School of
Medicine and Dentistry

Email: jeffrey_yaeger@urmc.rochester.edu

Title/Topic: Use of Natural Language Processing to Enhance Child Health Research

Duration: 0

Proposal # : 378174

Session Title : Pain in Hospitalized Neonates: Latest Innovations in Clinical Practice - Biological, Behavioural, and Applied Perspectives

Contact: Rebecca Pillai Riddell

Email: rpr@yorku.ca

Type: Hot Topic Symposia

Target Audience: Neonatal clinicians and researchers

Audience Size: 100

Tracks: Neonatology

Objectives: 1) Participants will be able to understand and critically evaluate the promise and the pitfalls related to the newest way of measuring pain in the NICU - cortical measurements. 2) Participants will recognize the significant limitations of current 'validated' infant pain assessment tools from a social-developmental neuroscience perspective 3) Participants will learn more nuanced multi-modal strategies relating to the pain management of hospitalized neonates.

Description: The increasing rates of prematurity and the slowly decreasing age of viability means that more infants will be exposed to repetitive lifesaving painful procedures for longer periods of time. Research has clearly articulated the longer-term biological, cognitive, and social challenges associated with higher numbers of skin-breaking procedures in a Neonatal Intensive Care Unit. The importance of accurately assessing and adequately managing the pain of hospitalized infants is a critical challenge to the ultimate well-being of these children who require intensive medical intervention after birth. However, state of the art neonatal practice requires collaboratively transcending disciplinary silos to address the enigma of pain in neonatal patients who cannot self-report their pain.

Neuroscientist Dr Lorenzo Fabrizi (University College London, UK) will discuss the latest understanding of and measurement techniques for infant cortical pain responses. Based on new research in the field of neonatal neuroscience, he will explain the advantages and disadvantages of various approaches for researchers and clinicians alike.

Basic Behavioural Scientist and Clinical Psychologist Dr. Rebecca Pillai Riddell (York University, Canada) will challenge current 'validated' measures in neonatal pain assessment. She will present validity challenges to current assessment measures relating to the caregiving context, the divergence of scores on core indicators embedded in common bedside pain scales, and the lack of discrimination for any known pain assessment tool to distinguish pain-related distress from non pain-related distress.

Neonatologist Dr. Ricardo Carbajal (Sorbonne University, France) will present an updated review of reliable and practical strategies to manage pain in the neonatal unit integrating recent advances building on a biopsychosocial understanding of pain.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: n/a

Additional Comments:

Financial Sponsor?:

Society Affiliation: SDBP

Participant Engagement: Engage a colleague to help moderate a Q&A, before and after Quiz

Previous Session and Conference Experience:

Chairs: Rebecca Pillai Riddell (Presenter); Lorenzo Fabrizi (Presenter); Ricardo Carbajal (Presenter)

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 378194

Session Title : Food allergy: from breastfeeding issues in infancy to novel treatments in childhood.

Contact: Casey Rosen-Carole

Email: casey_rosen-carole@urmc.rochester.edu

Type: Hot Topic Symposia

Target Audience: This session will educate the general pediatricians, allergists and other subspecialists as well as physician scientists.

Audience Size: 50

Tracks: Allergy, Immunology and Rheumatology | Breastfeeding/Human Milk | General Pediatrics

Objectives: 1. Discuss commonly seen breastfeeding issues that are concerning for or confused with food allergies 2. Describe the current evidence for presence of food allergy in a breastfed infant and passage of maternal antigens to mother's milk 3. Understand the management of food allergy in a breastfed and it's nutritional hazards for the mother and infant 4. Describe the current guidelines of early peanut introduction, risks and benefits involved 5. Discuss novel treatments for peanut allergy in the horizon

Description: Food allergies, especially peanut allergy, are on the rise. They can present in breastfed infants, and several IgE- and non-IgE-mediated presentations have been described. Often, the symptoms are nonspecific and commonly seen in other disorders. Too often breastfeeding is discontinued in order to manage the symptoms, when maternal diet manipulations could result in favorable outcomes allowing continuation of breastfeeding. This seminar will discuss feeding difficulties and presentation of food allergy in breastfed infants. In addition, we will discuss latest advancements in our understanding of the role of prophylactic interventions such as early peanut introduction and novel treatment options such as immunotherapy. Lastly the management of food allergies in breastfed infants and the nutritional implications of maternal elimination diets will be discussed.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: allergens in human milk, food allergy

Additional Comments: This was accepted for 2020 as a combined peanut allergy and food allergies in breastfeeding patients with moderator Dr. Kirsi Jarvinen-Seppo.

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: We include multiple presenters who are experts in their respective and diverse fields. Each presenter will limit their lecture-based format and allow for multiple opportunities for discussion and interaction including: case-based discussions, breakout rooms for small-group discussion, video and interactive resource review.

Previous Session and Conference Experience: no

Chairs: Casey Rosen-Carole (Contact Person); Kirsi Jarvinen-Seppo (Moderator)

1 Speaker

Name: Casey B. Rosen-Carole

Phone: 2038438802

Institution: University of Rochester **Email:** casey_rosen-carole@urmc.rochester.edu
Title/Topic: Breastfeeding difficulties – what's the problem?
Duration: 0

2 Speaker

Name: Anne M. Singh **Phone:** 608-265-2206
Institution: University of Wisconsin-Madison **Email:** amsingh@wisc.edu
Title/Topic: Food allergies in breastfed infants– what's the evidence?
Duration: 0

3 Speaker

Name: Kirsi Jarvinen-Seppo **Phone:** 585-2767295
Institution: University of Rochester **Email:** kirsi_jarvinen-seppo@URMC.Rochester.edu
Title/Topic: Food allergies in breastfed infants - what's the evidence? Continued...
Duration: 0

4 Speaker

Name: Brianne Schmidt **Phone:** 6073427403
Institution: University of Rochester **Email:** brianne_schmidt@urmc.rochester.edu
Title/Topic: Maternal elimination diets – what are the risks?
Duration: 0

5 Speaker

Name: Jeanne M. Lomas **Phone:** 7166046928
Institution: University at Rochester **Email:** jeanne_lomas@URMC.Rochester.edu
Title/Topic: Early peanut introduction - what are the benefits?
Duration: 0

6 Speaker

Name: John A. Bird **Phone:** 9722597025
Institution: UT Southwestern **Email:** Drew.Bird@UTSouthwestern.edu
Title/Topic: Peanut immunotherapy in 2020 – are we ready?
Duration: 0

Proposal # : 378200

Session Title : A National Perspective on Addressing Social Determinants of Health During and After the COVID-19 Pandemic to Make a Real Difference in Children's Lives

Contact: Benard Dreyer

Email: Benard.Dreyer@nyumc.org

Type: Hot Topic Symposia

Target Audience: students, residents, fellows, pediatricians, PNP's, researchers, policy makers, health care systems leaders

Audience Size: 300

Tracks: Advocacy Pathway | Child Abuse & Neglect | Children with Chronic Conditions | Clinical Research Pathway | Community Pediatrics | Core Curriculum for Fellows | COVID-19 | Cross-Disciplinary Pathway | Developmental and Behavioral Pediatrics | Diversity and Inclusion | Epidemiology & Health Services Pathway | General Pediatrics | Health Equity/Social Determinants of Health | Health Services Research | Immigrant Health | Quality Improvement/Patient Safety

Objectives: 1. Describe links between social, economic and environmental conditions and child health outcomes as well as impact of the COVID-19 Pandemic on vulnerable populations. 2. Analyze the facilitators and barriers in pediatric health care for successful implementation of SDOH screening, referral and collaboration with community partners. 3. Reflect on how to disseminate such programs throughout pediatric care settings around the US.

Description: In 2016, the American Academy of Pediatrics published a policy entitled "Poverty and Child Health" recommending screening families for the social determinants of health (SDOH) and connecting families with resources in their community to help them with basic needs and benefits. Many pediatricians and pediatric programs have worked on setting up systems to make this happen. We know from research performed by the faculty of this session that while most pediatricians think that screening for addressing health-related social needs is important, many fewer report that screening is feasible or feel prepared to address families' social needs. This symposium brings together national experts in SDOH and implementation science as well as members of a large collaborative that worked with 11 health care institutions over several years to integrate SDOH screening and referral at the primary care level with community-based organizations to improve the health and welfare of children. We will start with an overview of the evidence for both the need for these activities as well as the evidence for effective implementation and positive effects on child outcomes. We will next describe the design and results of the collaborative effort, including modifications during the COVID Pandemic with real-life details from one of the health care sites. This will allow attendees to get into the nuts and bolts of such efforts. Faculty will then reflect on what was presented and re-connect these efforts to the national scene, highlighting the degree to which the Pandemic has magnified the importance of addressing the SDOH.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Social Determinants of Health, AAP Presidential Plenary, APA Presidential Plenary

Additional Comments:

Financial Sponsor?:

Society Affiliation: SDBP

Participant Engagement: We will have a series of questions which involve those seeing the presentation to reflect on what is being presented. If there is a Q&A session after the presentation, the presenters will participate with the audience.

Previous Session and Conference Experience: We submitted this last year to the PAS and it was accepted for presentation, although the meeting was cancelled.

Chairs: Benard Dreyer (Chair); Arvin Garg (Presenter); Suzanne Brundage (Presenter); Marion Billings (Presenter); Andrew Beck (Presenter)

1 Speaker

Name: Benard Dreyer

Phone: 9176582583

Institution: NYU School of Medicine

Email: Benard.Dreyer@nyumc.org

Title/Topic: Introduction and context

Duration: 0

2 Speaker

Name: Arvin Garg

Phone: 410-336-3261

Institution: Boston Medical Center

Email: arvin.garg@bmc.org

Title/Topic: National overview of screening and referral for SDOH, including rationale, evidence for effective screening tools and implementations, attitudes of pediatricians, and barriers to success.

Duration: 0

3 Speaker

Name: Suzanne Brundage

Phone: 2124940729

Institution: United Hospital Fund

Email: sbrundage@uhfnyc.org

Title/Topic: Description of the Partnerships for Early Childhood Development (PECD), a learning collaborative to create and strengthen clinical-community partnerships that address the SDOH in early childhood, involving 11 hospital-based primary care practices and 17 community-based human service organizations. This will also address modifications due to COVID pandemic.

Duration: 0

4 Speaker

Name: Marion Billings

Phone:

Institution: NYU School of Medicine

Email: marion.billings@nyulangone.org

Title/Topic: The experiences of one of the 11 hospital-based primary care clinics and its community partners: success, challenges, and system change (including modifications due to the COVID pandemic).

Duration: 0

5 Speaker

Name: Andrew F. Beck

Phone: 5136363170

Institution: Cincinnati Children's Hospital Medical Center

Email: andrew.beck1@cchmc.org

Title/Topic: Reflections on presentations concerning initiatives around the nation: thoughts on dissemination

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378205

Session Title : International Stakeholder Collaboration to Develop Neonatal Therapeutics: How to Play Well in the Global Sandbox

Contact: Jonathan Davis

Email: jdavis@tuftsmedicalcenter.org

Type: Hot Topic Symposia

Target Audience: Neonatologists, neonatal nurses, NICU hospitalists, pharmacists/pharmacologists, research staff, pediatric and neonatal-perinatal medicine trainees, patient advocates/parents, regulators

Audience Size: 100

Tracks: Academic and Research Skills | Cross-Disciplinary Pathway | Global Neonatal & Children's Health | Neonatology

Objectives: 1. To highlight the cross-disciplinary collaborations that have changed the way neonatal clinical trials are conducted 2. To describe the processes associated with workstream development for several key projects, from conception and aims to final product, describing challenges and successes 3. To facilitate discussion of lessons learned and future directions with the panelists and the participants

Description: Although the field of neonatology has evolved significantly since patients were routinely administered chloramphenicol and 100% oxygen, major knowledge gaps and unmet therapeutic needs persist. The majority of drugs used to treat critically ill neonates are used off-label, with incomplete information on dosing, safety, and/or efficacy. Despite efforts to design and perform high-quality neonatal clinical trials, optimal treatments for the unique conditions related to preterm birth remain elusive. To begin addressing these unmet needs, the Food and Drug Administration (FDA) and the Critical Path Institute (C-Path) launched the International Neonatal Consortium (INC) in May of 2015. The Consortium convenes academic experts, regulators, nurses, industry sponsors, and patient/parent advocates from across the globe to "forge a predictable regulatory path for evaluating the safety and effectiveness of therapies for neonates." In its first 5 years, INC has achieved notable successes through interdisciplinary collaboration, including:

Publication of: "Safety, Dosing, and Pharmaceutical Quality for Studies that Evaluate Medicinal Products (Including Biological Products) in Neonates" to assist investigators and sponsors in designing clinical trials (used in FDA Guidance)

Development of standardized definitions, outcome measures, and master protocols for clinical trials of treatments of retinopathy of prematurity (ROP), bronchopulmonary dysplasia, and seizures in order to obtain consistent, robust, and discriminatory data

Development of a neonatal adverse event severity scale to harmonize adverse event reporting for neonatal clinical trials

Publication of a paper optimizing long-term neurodevelopmental follow-up assessments following trials of medicinal products in neonates

Our Cross-Disciplinary approach will highlight the interaction and collaborative efforts needed by key stakeholders to create tools to streamline research on neonatal therapies.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Neonatal Clinical Trials and associated topics

Additional Comments: Was accepted last year, but not presented due to COVID. Panel discussions will include: Ronald Portman - Novartis, Thomas Miller - Bayer, Ralph Bax - EMA, Jennifer Degl - parent and INC Communications Group, Mark Turner - Connect for Children in Europe

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: Panel discussion with multiple key stakeholders will allow participants to ask questions and make comments

Previous Session and Conference Experience:

Chairs: Susan McCune (Presenter); Janet Soul (Presenter); Thomas Salaets (Presenter); Jonathan Davis (Presenter); Lois Smith (Presenter); Gerri Baer (Moderator)

Proposal # : 378223

Session Title : Expanding Outpatient Antibiotic Stewardship: Practical Strategies, Novel Settings, and Sociobehavioral Influences

Contact: Michael Smith

Email: michael.j.smith@duke.edu

Type: Hot Topic Symposia

Target Audience: Primary care providers , pediatric infectious diseases providers, urgent care providers, emergency medicine providers

Audience Size: 50-100 attended the session at PAS 2019. More may attend virtually

Tracks: Community Pediatrics | Diversity and Inclusion | Emergency Medicine | Epidemiology & Health Services Pathway | General Pediatrics | Health Services Research | Infectious Diseases | Public Health

Objectives: After the session, participants will be able: 1. To highlight the importance of outpatient antimicrobial stewardship for child health. 2. To discuss sociobehavioral influences on antibiotic prescribing for ambulatory children. 3. To describe practical and implementable activities that promote stewardship across various outpatient and emergency care settings.

Description: Antibiotic stewardship has been defined as "coordinated interventions designed to improve and measure the appropriate use of antibiotic agents." More than 80% of all antibiotics given to children are prescribed in the outpatient setting, yet there remain few formalized activities to promote antibiotic stewardship in this setting. During this session, national leaders will highlight novel settings for outpatient pediatric stewardship and discuss useful and effective outpatient stewardship interventions and techniques. These will include best practices in communicating about antibiotics with parents, description of behavioral nudges to improve antibiotic prescribing, harnessing electronic tools to drive improvement, identifying best practices in use of ambulatory diagnostic tests to guide antibiotic management, and data demonstrating ways in which antibiotic prescribing for children is racially biased. 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 those who work in emergency departments, urgent care centers, ambulatory clinics, and ambulatory health care systems.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: 1) Pediatric Infectious diseases abstract presentations

Additional Comments:

Financial Sponsor?:

Society Affiliation: PIDS

Participant Engagement: Our understanding based on the information on the PAS website is that the presentations will be pre-recorded. This will make it difficult to keep the audience engaged. For this reason we suggest our panel of 6 speakers who will provide short presentations to keep audience engaged. As moderators, we will also encourage use of the chat box and do our best to streamline the questions for the speakers. We anticipate 10 minutes of didactics with 5 minutes for questions.

Previous Session and Conference Experience: This session was presented at PAS in Baltimore in 2019. The session was also planned for 2020 in Philadelphia. There have been a few minor changes (in moderators and one of the proposed speakers) but otherwise this is the same submission as for PAS 2020.

1 Speaker

Name: Tiffani Johnson **Phone:** 9736262067
Institution: University of California, Davis **Email:** tjo@ucdavis.edu
Title/Topic: Racial Bias In Pediatric Antibiotic Prescribing in Outpatient Settings
Duration: 0

2 Speaker

Name: Julia E. Szymczak **Phone:** (215) 898-1793
Institution: University of Pennsylvania **Email:** jszymcza@mail.med.upenn.edu
Title/Topic: Coaxing Commitment: Sociobehavioral Interventions to Improve the Use of Antibiotics in the Outpatient Setting
Duration: 0

3 Speaker

Name: Sameer J. Patel **Phone:** 9174998294
Institution: Ann & Robert H. Lurie Children's Hospital of Chicago **Email:** SJPatel@luriechildrens.org
Title/Topic: Less is More--Reducing Duration of Therapy in Outpatient Settings
Duration: 0

4 Speaker

Name: Jeffrey S. Gerber **Phone:** 215-870-4750
Institution: Children's Hospital of Philadelphia **Email:** jeffreysgerber@gmail.com
Title/Topic: Diagnostic Stewardship in Outpatient Pediatric Settings
Duration: 0

5 Speaker

Name: Nicole Poole **Phone:** 832-428-4430
Institution: Children's Hospital Colorado **Email:** Nicole.Poole@ChildrensColorado.org
Title/Topic: Children Are Not 'Little Adults': Pediatric Antibiotic Stewardship in Non-Pediatric Outpatient Settings
Duration: 0

6 Speaker

Name: Rana F. Hamdy **Phone:** 202-476-5051
Institution: Children's National Medical Center **Email:** RHAMDY2@childrensnational.org
Title/Topic: Implementing Antibiotic Stewardship in Telemedicine and Urgent Care Settings
Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378224

Session Title : Coming Ashore: Early Results From the SHIP-AHOY Study

Contact: Donald Batisky

Email: dbatisk@emory.edu

Type: Hot Topic Symposia

Target Audience: General pediatricians, pediatric nephrologists, pediatric cardiologists and anyone else interested in children and adolescents with risks for cardiovascular disease

Audience Size: 200

Tracks: Adolescent Medicine | Cardiology | Children with Chronic Conditions | Clinical Research Pathway | Community Pediatrics | Cross-Disciplinary Pathway | Endocrinology | Epidemiology & Health Services Pathway | General Pediatrics | Nephrology | Obesity | Public Health | Scholarly Sessions | School and Community Health

Objectives: 1. Review results from the SHIP AHOY study. 2. Review the study rationale and design of SHIP-AHOY. 3. Understand the relationships between casual BP and ABPM to TOD. 4. Recognize the impact that elevated BP has on neurocognition.

Description: Although hypertension is identifiable in children and adolescents, there are many knowledge gaps on how to best define and manage high blood pressure in the young. SHIP-AHOY (Study of High Blood Pressure in Pediatrics: Adult Hypertension Onset in Youth) is being conducted to address these knowledge gaps. With a goal to recruit five hundred adolescents who will undergo ambulatory blood pressure monitoring, echocardiographic, vascular, and cognitive assessments, as well as epigenetic studies to identify mechanisms that underlie the development of hypertensive target organ damage, we expect to be able to fill some of these gaps. The primary aim of the study is to develop a risk-based definition of hypertension in the young that will result in better understanding of the transition from blood pressure in youth to adult cardiovascular disease. Details of the rationale for and design of this study will be discussed, and early results of outcomes of SHIP-AHOY will be presented here.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Nephrology

Additional Comments:

Financial Sponsor?:

Society Affiliation: IPHA

Participant Engagement: There will be an opportunity for Q&A.

Previous Session and Conference Experience: NA

Chairs: Daniel Feig (Moderator); Donald Batisky (Moderator - Alternate); Bonita Falkner (Panelist); Elaine Urbina (Panelist); Joseph Flynn (Panelist); Marc Lande (Panelist)

1 Speaker

Name: Daniel I. Feig

Phone: 2056389781

Institution: University of Alabama, Birmingham,
School of Medicine

Email: dfeig@peds.uab.edu

Title/Topic: Introduction and Overview

Duration: 0

2 Speaker

Name: Bonita Falkner
Institution: Thomas Jefferson University
Title/Topic: Study rationale and design
Duration: 0

Phone: 2152052857
Email: bonita.falkner@jefferson.edu

3 Speaker

Name: Elaine Urbina
Institution: Cincinnati Children's Hospital
Title/Topic: Casual BP and Target Organ Effects
Duration: 0

Phone: 5136368265
Email: elaine.urbina@cchmc.org

4 Speaker

Name: Joseph T. Flynn
Institution: Seattle Children's Hospital
Title/Topic: ABPM and Target Organ Effects
Duration: 0

Phone: 206-987-2524
Email: joseph.flynn@seattlechildrens.org

5 Speaker

Name: Marc Lande
Institution: University of Rochester
Title/Topic: Effects on neurocognition
Duration: 0

Phone: 585-275-9784
Email: Marc_Lande@URMC.Rochester.edu

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378225

Session Title : Secondary Hypertension: It's Essential to know causes of secondary hypertension

Contact: Donald Batisky

Email: dbatisk@emory.edu

Type: Hot Topic Symposia

Target Audience: General pediatricians, pediatric nephrologists, pediatric cardiologists and anyone else interested in children and adolescents with risks for cardiovascular disease

Audience Size: 200

Tracks: Adolescent Medicine | Cardiology | Children with Chronic Conditions | Critical Care | Emergency Medicine | Endocrinology | General Pediatrics | Hematology/Oncology | Hospital-based Medicine | Nephrology | Obesity | Pharmacology | Public Health

Objectives: 1. To understand of the epidemiology, presentation, diagnosis, and treatment of secondary causes of hypertension. 2. To recognize signs and symptoms of pheochromocytoma. 3. To assess for obstructive sleep apnea. 4. To review hereditary causes of hypertension 5. To understand the medical management of renovascular hypertension.

Description: This session will focus on secondary causes of hypertension. There will be an overview of testing and evaluation for secondary hypertension with a focus on who should be tested, when this assessment should occur, and how patients should be evaluated. The session will then shift to provide an overview of the epidemiology, presentation, diagnosis, and treatment of secondary causes of hypertension. Topics to be covered will include: pheochromocytoma, obstructive sleep apnea, hereditary causes of hypertension, and renovascular hypertension.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Nephrology

Additional Comments:

Financial Sponsor?:

Society Affiliation: IPHA

Participant Engagement: There will be a Q&A session so that audience can interact with the panelists.

Previous Session and Conference Experience: NA

Chairs: Donald Batisky (Moderator); Daniel Feig (Moderator - Alternate); Zubin Modi (Panelist); Gaurav Kapur (Panelist); Ian Macumber (Panelist); Jillian Warejko (Panelist); Michael Ferguson (Panelist)

1 Speaker

Name: Donald L. Batisky

Phone: (404) 227-1266

Institution: Emory University

Email: dbatisk@emory.edu

Title/Topic: Introduction and Overview

Duration: 0

2 Speaker

Name: Zubin J. Modi

Phone: 517-980-0007

Institution: University of Michigan Health System **Email:** modiz@med.umich.edu
Title/Topic: Evaluating for secondary hypertension: The who, the when, and the how?
Duration: 0

3 Speaker

Name: Gaurav Kapur **Phone:** 3137455604
Institution: Childrens Hospital of Michigan **Email:** gkapur@dmc.org
Title/Topic: An update on pheochromocytoma and paraganglioma: Presentation, diagnosis, and management
Duration: 0

4 Speaker

Name: Ian Macumber **Phone:** 978 846 1443
Institution: Children's Hospital of Los Angeles **Email:** ianmacumber@gmail.com
Title/Topic: Obstructive sleep apnea and its effect on blood pressure
Duration: 0

5 Speaker

Name: Jillian K. Warejko **Phone:** 2036409685
Institution: Yale University **Email:** jillian.warejko@yale.edu
Title/Topic: Rare genetic causes of secondary hypertension
Duration: 0

6 Speaker

Name: Michael Ferguson **Phone:** 802-233-4445
Institution: Boston Childrens Hospital **Email:** Michael.Ferguson@childrens.harvard.edu
Title/Topic: Medical management of renovascular hypertension
Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378329

Session Title : Vaccine Hesitancy - a Communicable Condition Spreading around the World

Contact: Hiroyuki Moriuchi

Email: hiromori@nagasaki-u.ac.jp

Type: Hot Topic Symposia

Target Audience: all pediatricians

Audience Size: 200

Tracks: General Pediatrics | Global Neonatal & Children's Health | Immunizations/Delivery | Infectious Diseases | Public Health

Objectives: To learn the situation of anti-vax movement around the world and to consider what we should do in the face of vaccine hesitancy.

Description: In 2019, the WHO has named vaccine hesitancy as one of the top 10 threats to global health. Vaccine hesitancy is complex and context specific across time, place and vaccines; however, it is a communicable condition spreading around the world through the internet. This session takes up three representative problems: MMR vaccine in the Western countries, HPV vaccine in Japan, and dengue virus vaccine in the Philippines. Understanding why there is a tendency to hesitate those vaccines may lead to the solutions of problems. Moreover, the session introduces some enlightening activities, including a joint project of AAP and Japan Pediatric Society.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Vaccines/Immunization

Additional Comments: We have no additional comments on this session.

Financial Sponsor?:

Society Affiliation: JPS

Participant Engagement: All the speakers will present online or pre-recording. Questions from audiences will be accepted using chat (text).

Previous Session and Conference Experience: Our session has not been presented at any conference.

Chairs: Paul Offit (Chair); Nobuhiko Okabe (Chair); Hiroyuki Moriuchi (Contact Person)

1 Speaker

Name: Paul Offit

Phone: 2155902020

Institution: The Children's Hospital of Philadelphia **Email:** OFFIT@email.chop.edu

Title/Topic: MMR Vaccine Hesitancy in the Western Countries

Duration: 0

2 Speaker

Name: Hiroyuki Moriuchi

Phone: +81-95-819-7297

Institution: Nagasaki University Graduate School of Biomedical Sciences **Email:** hiromori@nagasaki-u.ac.jp

Title/Topic: HPV Vaccine Hesitancy in Japan

Duration: 0

3 Speaker

Name: Lulu C. Bravo

Phone: +639189215997

Institution: University of the Philippines Manila

Email: lulubravo@ymail.com

Title/Topic: Dengue Vaccine Hesitancy in the Philippines

Duration: 0

4 Speaker

Name: Akihiko Saitoh

Phone: 252272222

Institution: Niigata University Graduate School of
Medical and Dental Sciences

Email: asaitoh@med.niigata-u.ac.jp

Title/Topic: AAP-JPS Joint Project for Vaccine Awareness

Duration: 0

5 Speaker

Name: Patrick Zuber

Phone: +41227911521

Institution: WHO

Email: zuberp@who.int

Title/Topic: WHO Initiatives to Fight against Vaccine
Hesitancy

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378351

Session Title : Defining Severe BPD in 2021: Lessons from the Last 20 Years

Contact: Leif Nelin

Email: Leif.Nelin@nationwidechildrens.org

Type: Hot Topic Symposia

Target Audience: neonatologists, pulmonologists, critical care physicians, cardiologists, pediatricians, psychologists, advanced practice nurses

Audience Size: 100

Tracks: Clinical Research Pathway | Critical Care | Cross-Disciplinary Pathway | Developmental Biology | Epidemiology & Health Services Pathway | Genomics | Health Services Research | Neonatology | Pulmonology

Objectives: 1) Identify the challenges in developing clinically relevant definitions for sBPD 2) Describe the post-NICU outcomes that are clinically relevant for identifying phenotypes/endotypes 3) Define how to use large datasets to phenotype sBPD 4) Describe how to apply genetic data to identify clinically relevant sBPD patient clusters

Description: Bronchopulmonary dysplasia (BPD), the most common and consequential chronic complication of preterm birth, is associated with high mortality and severe morbidities including prolonged need for chronic respiratory support, recurrent hospitalizations, and life-long pulmonary and neurodevelopmental disabilities. First described in 1967 by Northway, modern definitions of BPD are based on respiratory support and/or supplemental oxygen to treat hypoxemia in preterm infants at 36 weeks post-menstrual age (PMA). The most advanced form of disease is severe BPD (sBPD), which is currently defined as the persistent need for supplemental oxygen $\geq 30\%$ and/or the need for positive pressure respiratory support at 36 weeks PMA. Although, sBPD accounts for ~20% of all BPD cases, nearly all of the mortality and severe co-morbidities occur in infants with sBPD. Many past and ongoing clinical studies have explored issues related to milder forms of BPD, yet despite the importance of sBPD, little is known about mechanisms underlying the pathogenesis, natural history, and optimal care strategies to improve short and long term outcomes. Furthermore, sBPD represents a very heterogeneous lung disease, which can include infants who require low flow nasal canula oxygen therapy at 36 weeks PMA all the way to infants who remain dependent on invasive ventilation at 36 weeks PMA; yet the sustained need for ventilator support has been most strongly associated with adverse outcomes in sBPD. Despite recent efforts to better define and characterize the severity of chronic lung disease in preterm infants (such as the NRN definition or the 2016 NIH workshop definition), currently proposed definitions of sBPD remain insufficient to identify distinct disease phenotypes and endotypes. The development of distinct phenotypes and endotypes in adult heterogeneous lung diseases like COPD, asthma and ARDS have been very effective in improving the understanding of disease susceptibility, pathobiology, and outcomes such that precision therapies can be applied. A more nuanced approach based on objective disease phenotyping for sBPD carries significant promise for improving evidence-based care in sBPD. In this session, 4 speakers will address aspects of sBPD phenotyping/genotyping that are needed to understand disease progression to develop targeted therapies to improve outcomes including: 1) defining BPD to identify the highest risk patients; 2) identifying the post-NICU discharge outcomes/progression that are most relevant in defining the severest forms of BPD; 3) discussing the use of large data sets to classify phenotypic clusters in sBPD; and 4) proposing genotypic approaches for developing clinically relevant clusters using lessons from the COPDgene project.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Not applicable

Additional Comments:

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: We plan to have a virtual panel discussion at the end, where the moderators will monitor the chat space for questions, furthermore participants can type their questions any time during the presentations and address them to the group as a whole or to an individual moderator. We would also like to know about the potential for using virtual breakout sessions, where we could divide up the presenters with smaller groups to discuss particular aspects of the presented topics.

Previous Session and Conference Experience: This session has not been presented at any other conferences.

Chairs: Leif Nelin (Contact Person); Milenka Cuevas Guaman (Chair); Laurie Eldredge (Chair)

1 Speaker

Name: Laurie Eldredge

Phone:

Institution: Seattle Children's Hospital

Email: Laurie.Eldredge@seattlechildrens.org

Title/Topic: Introduction

Duration: 0

2 Speaker

Name: Erik A. Jensen

Phone: 267-648-2720

Institution: The University of Pennsylvania/Children's Hospital of Philadelphia

Email: jensene@email.chop.edu

Title/Topic: Defining BPD to identify the severe forms of disease

Duration: 0

3 Speaker

Name: Lawrence Rhein

Phone: 617 833 7334

Institution: University of Massachusetts

Email: Lawrence.Rhein@umassmemorial.org

Title/Topic: Which post-NICU outcomes identify severe forms of disease?

Duration: 0

4 Speaker

Name: Matthew J. Kielt

Phone: 203-645-6050

Institution: Nationwide Children's Hospital

Email: matthew.kielt@nationwidechildrens.org

Title/Topic: Using large data sets to identify phenotypic clustering within severe BPD

Duration: 0

5 Speaker

Name: Iystra Hayden

Phone:

Institution: Boston Children's Hospital

Email: Iystra.hayden@childrens.harvard.edu

Title/Topic: Identifying genotypic clustering within severe BPD: lessons from the COPDgene project

Duration: 0

6 Speaker

Name: Milenka Cuevas Guaman

Phone:

Institution: Texas Children's Hospital

Email: mile_cuevas@yahoo.com

Title/Topic: Wrap-up

Duration: 0

7 Speaker

Name: Milenka Cuevas Guaman

Phone:

Institution: Texas Children's Hospital

Email: mile_cuevas@yahoo.com

Title/Topic: Panel Discussion (Q&A)

Duration: 0

Proposal # : 378353

Session Title : Red Light, Yellow Light, Green Light, Go: Maximizing Behavioral Health Care with Limited Resources

Contact: Stephanie DeLeon

Email: Stephanie-DeLeon@ouhsc.edu

Type: Hot Topic Symposia

Target Audience: ED physicians, hospitalists, psychiatrists, and psychologists

Audience Size: 100

Tracks: Cross-Disciplinary Pathway | Hospital-based Medicine | Mental Health

Objectives: 1. Present data around current emergency room presentations and medical admissions for patients either in a mental health crisis OR having underlying behavioral health diagnoses which make inpatient admissions more challenging. 2. Discuss how to compassionately and ethically provide care for patients holding in the emergency room for extended periods of time while awaiting inpatient psychiatric placement. 3. Share our experience and strategies at Children's Hospital at OU Medicine with identifying and implementing initiatives for behavioral health patients who would benefit from more intensive multi-disciplinary team involvement, when no formal behavioral health unit and only limited support services were available.

Description: Over the past decade, there has been an exponential increase in the evaluation and admission of pediatric patients with mental health crises in both the emergency and general medical health setting. Concurrently, pediatric patients with more chronic behavioral health diagnoses, such as sensory integration disorder or autism spectrum disorder, are also increasingly needing hospital admission for medical indications. In both situations, these underlying conditions require creative thinking and flexibility on the part of the medical team to provide effective, patient-centered care. This session will describe the background of behavioral health challenges facing pediatric emergency rooms and hospitals today and include how our institution, The Children's Hospital at OU Medicine, has evolved in our approach to these patients over the last 18 months. We will include the limitations of our facility: no behavioral health unit, no community psychiatric partners, limited psychiatry and psychology coverage, and limited access to specialized training for faculty and staff. This situation is not unique to OU Medicine; therefore, other healthcare workers are likely to benefit from learning how our institution has maximized behavioral health care with limited resources.

Stephanie DeLeon, MD will speak on the current state of healthcare as relates to pediatric patients accessing care at medical facilities for mental health crises and admissions requiring some behavioral healthcare component to care. She will develop the 'background' for the challenge many hospital systems and physicians, including our own, are facing with limited mental health resources.

Katherine Grant, MD will speak on our institution's current approach of holding non-medical behavioral health patients in the emergency department setting. She will discuss how this impacts ED flow, the ethics of holding ED patients, and how to provide compassionate care in this setting.

Rebecca Wallace, PsyD, will discuss caring for admitted patients from a psychologist's perspective. She will highlight the evolving role of psychology and psychiatry in our approach to behavioral care, as well as the necessity of individualizing the team approach to care for each patient and increasing staff education and comfort in caring for behavioral health patients.

Erin Bailey, MA, CCLS, will highlight the various program initiatives at Children's Hospital, including the important role Child Life can play in a multi-disciplinary approach to care.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Dr. DeLeon is also part of submission for "A Multi-Disciplinary Collaborative Approach to Asthma Patient Education Across Outpatient and Inpatient Settings"

Additional Comments:

Financial Sponsor?:

Society Affiliation: PHM

Participant Engagement: If allowed by the virtual format for Hot Topics, we will allow for a Q&A session.

Previous Session and Conference Experience: n/a. This information has been presented on a local level within our own institution however not in national conference format.

Chairs: Stephanie DeLeon (Presenter); Katherine Grant (Presenter); Rebecca Wallace (Presenter); Erin Bailey (Presenter)

1 Speaker

Name: Stephanie DeLeon

Phone: 4052002505

Institution: The University of Oklahoma Health Sciences Center

Email: Stephanie-DeLeon@ouhsc.edu

Title/Topic: Stopped at the Red Light: Current State of the Pediatric Mental Healthcare Crisis

Duration: 0

2 Speaker

Name: Katherine L. Grant

Phone:

Institution: The University of Oklahoma Health Sciences Center

Email: katherine-grant@ouhsc.edu

Title/Topic: Yellow Light: Considerations of Prolonged Emergency Department holds for pediatric mental health patients

Duration: 0

3 Speaker

Name: Rebecca Wallace

Phone:

Institution: Children's Hospital

Email: rebecca.wallace@lcmchealth.org

Title/Topic: Green Light: A Psychologist's Perspective on Successful Behavior Health Management in a Medical Setting

Duration: 0

4 Speaker

Name: Erin Bailey

Phone:

Institution: The Children's Hospital at OU Medicine

Email: erin.bailey@oumedicine.com

Title/Topic: GO: Utilizing Child Life to Provide the Best Outcomes for Behavioral Health Patients

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378372

Session Title : *Covid19 gender disparities in emergency medicine: do they exist?*

Contact: Corrie Chumpitazi

Email: corriec@bcm.edu

Type: Hot Topic Symposia

Target Audience: Residents, Fellows, Faculty, Administrators

Audience Size: 50-200

Tracks: Academic and Research Skills | Career Development Pathway | Core Curriculum for Fellows | Diversity and Inclusion | Emergency Medicine | Health Equity/Social Determinants of Health

Objectives: 1) To describe the state of gender disparities during the 2020 COVID pandemic 2) To review innovative implementation strategies to mitigate widening inequities 3) To brainstorm action items to bring awareness and potentially implement in your department or section

Description: This workshop will provide a brief review of the data on academic productivity during the pandemic of COVID19. We will review journal publication, federal grant and institutional statistics. We will review the strategies that may have unintended consequences (delaying the tenure clock, etc.).

We will then review the findings of our study to evaluate the state of academics at the largest Department of Pediatrics in the country and how COVID19 has made an impact. We will identify strategies to mitigate widening inequity among Departments of Pediatrics with successful examples of innovative processes. We will end with small group discussions, allowing participants to identify the 1 or 2 areas that they can work on to improve equity in their ED, as well as strategize how to build these metrics into your section scorecard and show value to your Department.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: None

Additional Comments:

Financial Sponsor?:

Society Affiliation: AAP

Participant Engagement: Chat box and polling features, use panel to answer the various questions that are posed.

Previous Session and Conference Experience: This session will use the research presented and discussion from a variety of perspectives, bench researcher, clinical researcher, clinicians to explore the scope of challenges presented by the Pandemic on academic productivity. The EM data and publications will be used in a similar format to open conversation in a didactic at the Society for Academic Emergency Medicine May 2021

Chairs: Corrie Chumpitazi (Organizer); Cara Doughty (Panelist); Teresia O'connor (Panelist); Kristy Murray (Panelist)

1 Speaker

Name: Corrie E. Chumpitazi

Phone: 8328241353

Institution: Baylor College of Medicine
Department of Pediatrics

Email: corriec@bcm.edu

Title/Topic: COVID19: has it provided an opportunity to widen inequities for compensation, leadership and promotion?

Duration: 0

2 Speaker

Name: teresia o'connor

Phone:

Institution: Baylor College of Medicine

Email: teresiao@bcm.edu

Title/Topic: Gender Equity - Where are we and has the Covid-19 Pandemic changed this?

Duration: 0

3 Speaker

Name: Cara Doughty

Phone: 8328245557

Institution: Baylor College of Medicine

Email: cbdought@texaschildrens.org

Title/Topic: Has more of the burden been carried by clinical faculty or research faculty?

Duration: 0

4 Speaker

Name: Kristy Murry

Phone: 832 824-1000

Institution: Baylor College of Medicine

Email: kmurray@bcm.edu

Title/Topic: Demographics and perspectives from the largest pediatric hospital in the country.

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378389

Session Title : All You Wanted to Know About Cardiac Arrest but Were Unsure to Ask

Contact: David Cooper

Email: David.Cooper@cchmc.org

Type: Hot Topic Symposia

Target Audience: Neonatologists, Cardiologists, Emergency medicine and Critical care specialists involved in the care of critically ill patients

Audience Size: 200

Tracks: Cardiology | Critical Care | Neonatology | Scholarly Sessions

Objectives: 1. To describe arrest prediction paradigms in the clinical management of critically ill patients 2. To delineate how high-reliability team characteristics and situational awareness can be utilized to prevent cardiac arrest 3. To describe the use of extracorporeal technology in patients refractory to conventional resuscitation 4. To understand the role of secondary injury in the outcomes of cardiac arrest

Description: The science and sophistication of resuscitation continues to evolve. As our understanding has evolved the potential to employ methods to predict and prevent arrest have become a reality. Likewise, methods to improve resuscitation and recovery are being implemented with great success. This symposium will bring together experts in Cardiology, Critical Care and Extracorporeal support to discuss advances in resuscitation related to cardiac arrest prediction, prevention, intervention and recovery.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Resuscitation

Additional Comments:

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: Questions will be fielded by the speakers during the Q&A session

Previous Session and Conference Experience: N/A

Chairs: David Cooper (Chair); Bereketiab Haileselassie (Chair)

1 Speaker

Name: Maya Dewan

Phone: 2157567060

Institution: Cincinnati Children's Hospital Medical Center

Email: maya.dewan@cchmc.org

Title/Topic: Cardiac arrest prediction - How to have 20/20 vision without hindsight.

Duration: 0

2 Speaker

Name: Darren Klugman

Phone:

Institution: Johns Hopkins

Email: dklugman@jhu.edu

Title/Topic: Arrest prevention - No CPR is better than good CPR

Duration: 0

3 Speaker

Name: Matthew W. Zackoff

Phone: 908-447-1625

Institution: Cincinnati Children's Hospital Medical Center

Email: matthew.zackoff@cchmc.org

Title/Topic: CPR Training - Optimizing physics and chemistry

Duration: 0

4 Speaker

Name: Javier J. Lasa

Phone: 832-826-0160

Institution: Texas Children's Hospital

Email: jjlasa@texaschildrens.org

Title/Topic: When all else fails - Putting the E(CMO) in CPR

Duration: 0

5 Speaker

Name: Sapna Kudchadkar

Phone: 410-814-1218

Institution: Johns Hopkins University

Email: sapna@jhmi.edu

Title/Topic: ROSC is just the beginning - preventing secondary injury after successful CPR

Duration: 0

6 Speaker

Name: David S. Cooper

Phone: 513-803-5448

Institution: Cincinnati Children's Hospital

Email: David.Cooper@cchmc.org

Title/Topic: Panel Discussion

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378391

Session Title : “Current progress on pathogenesis and etiology of Kawasaki Disease”

Contact: Mark Hicar

Email: markhicar@gmail.com

Type: Hot Topic Symposia

Target Audience: Pediatric Infectious Diseases, Rheumatologists, Cardiologists and Generalists.

Audience Size: 100

Tracks: Allergy, Immunology and Rheumatology | Basic Science Pathway | Cardiology | Infectious Diseases

Objectives: To review current research efforts focused on the latest knowledge of possible etiologies and methods of diagnosis.

Description: Current research efforts focused on the latest knowledge of possible etiologies and methods of diagnosis will be discussed.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: MISC, COVID19, Aneurysms/Cardiology

Additional Comments: was proposed last year but cancelled with conference

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: planned lectures

Previous Session and Conference Experience:

Chairs: Mark Hicar (Chair); Mark Hicar (Presenter); Anne Rowley (Presenter); Stephanie Menikou (Presenter); Cedric Manlhiot (Presenter)

1 Speaker

Name: Mark Hicar

Phone: 6155095620

Institution: University at Buffalo

Email: markhicar@gmail.com

Title/Topic: B cell and plasmablast responses in KD

Duration: 0

2 Speaker

Name: Anne H. Rowley

Phone: 312-503-0821

Institution: Northwestern University Feinberg School of Medicine, Ann & Robert H. Lurie Children's Hospital of Chicago

Email: a-rowley@northwestern.edu

Title/Topic: A Protein Epitope Targeted by the Antibody Response to Kawasaki Disease

Duration: 0

3 Speaker

Name: Stephanie Menikou

Phone: 0044 2075943990

Institution: Imperial College London

Email: s.menikou@imperial.ac.uk

Title/Topic: Immune complexes and transcriptome in Kawasaki Disease.

Duration: 0

4 Speaker

Name: Cedric Manlhiot

Phone: 4106148481

Institution: Johns Hopkins University

Email: cmanlhi1@jhmi.edu

Title/Topic: Linking disease etiology, pathogenesis and global distribution.

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020 Proposals

Proposal # : 378403

Session Title : Pediatric Policy Council Legislative Breakfast: The Impact of the 2020 Election on Child Health

Contact: Shetal Shah

Email: shetaldoc@hotmail.com

Type: Hot Topic Symposia

Target Audience: Pediatric researchers, Academic Pediatricians, Child-Health Advocates.

Audience Size: 100-150

Tracks: Advocacy Pathway | Public Health

Objectives: 1. Learn about opportunities to advance a child health agenda. 2. Learn about the dynamics shaping congressional policymaking.

Description: In November 2020, voters cast their ballots for president and public officials up and down the ballot. Their choices have significant ramifications for the future of pediatric research and child health policy in the United States. With the COVID-19 pandemic continuing to dominate the nation's attention, health care policy has never been more relevant to the national policy debate. The pandemic has highlighted both longstanding inequities and the strengths and weaknesses of American public health and biomedical research infrastructure. Elected leaders are taking the mandate given to them by voters and crafting policies to address this public health emergency and those to come. At this critical moment, it is critical to engage elected officials on child health policy to strengthen the pediatric research enterprise and improve the health and well-being of America's young people. This session will focus on opportunities to advance a child health agenda in the current political environment. It will review the child health and economic policies being debated and analyze their potential impact on child health outcomes. The session will discuss how the current political environment and public opinion may offer opportunities and challenges to advance a child health agenda. Mark Del Monte, JD, chief executive officer and executive vice president at the American Academy of Pediatrics, and Shetal Shah, MD, chair of the Pediatric Policy Council will be joined by a political expert to offer commentary and engage the audience in dialogue on these critical public policy issues.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Joint PPC/SPR Proposal on Child Health Policy Issues, PPC Session on GunViolence Prevention

Additional Comments: This session is sponsored by the PPC and its organizations, including the Society for Pediatric Research, American Pediatric Society, Association of Medical School Pediatric Department Chairs, American Academy of Pediatrics and the Academic Pediatric Association. Following introductory remarks from Mr. Del Monte and Dr. Shah, the remainder of the hour-long session will be devoted to a presentation from an invited speaker and Q&A.

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: Question and Answer session via a "Chat" Box in which moderator will pose questions asked by attendees.

Previous Session and Conference Experience: N/A

Chairs: Shetal Shah (Moderator); Mark Del Monte (Workshop Speaker)

1 Speaker

Name: Shetal Shah

Phone: 9179402262

Institution: Maria Fareri Children's Hospital/ New York Medical College

Email: shetaldoc@hotmail.com

Title/Topic: Introduction and Welcome

Duration: 0

2 Speaker

Name: Mark Del Monte

Phone: 2023478600

Institution: American Academy of Pediatrics

Email: mdelmonte@aap.org

Title/Topic: The Impact of the 2020 Election on Child Health

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 378522

Session Title : Optimizing Cardiopulmonary Care of Critically ill Neonates: Use of longitudinal bedside and advanced imaging techniques.

Contact: J Lauren Ruoss

Email: lruoss@ufl.edu

Type: Hot Topic Symposia

Target Audience: Neonatology, Pediatric Pulmonology, Pediatric Critical Care, Pediatric Cardiology

Audience Size: 300

Tracks: Cardiology | Critical Care | Cross-Disciplinary Pathway | Neonatology | Pulmonology | Scholarly Sessions

Objectives: 1. Understand how neonatal imaging has evolved and the broad applications of different imaging modalities. 2. Recognize the clinical utility of lung ultrasound for diagnostic assessment and risk stratification of neonates with respiratory pathology. 3. Know how advanced imaging techniques with CT and MRI are being used in the evaluation and management of infants with bronchopulmonary dysplasia and tracheomalacia. 4. Learn how to utilize target neonatal echocardiography markers for dynamic assessment of pulmonary hypertension and response to therapy.

Description: The use of various imaging modalities in the management of critically ill neonates with cardiopulmonary disturbances have evolved overtime. Point-of-care ultrasound of the lung provides non-invasive, real-time evaluations, that can be performed longitudinally at the bedside. This modality can be used as a biomarker for disease pathology and can be implemented for assessment and management of multiple respiratory pathologies. Targeted neonatal echocardiography allows for an in-depth hemodynamic assessment of cardiopulmonary disturbances including evaluation and management of acute and chronic pulmonary hypertension. While longitudinal bedside evaluation is vital, state of the art-techniques in pulmonary MRI and CT are also demonstrating great promise for providing identification of pulmonary and airway pathology. This session will provide an in-depth discussion on the evolution of neonatal imaging in the assessment and management of the critically ill neonate. The session will focus on the utility of various novel imaging modalities in the evaluation for neonatal respiratory pathologies including development of bronchopulmonary dysplasia, acute and chronic pulmonary hypertension, and tracheomalacia.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: None

Additional Comments:

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: Three minutes of the presenters allotted time will be for questions specific to that presenter. Given the virtual format, the chairs of the session will read out the questions from the "chat" box for the presenter to answer. Any question that is not answered due to time constraints will be recorded and answered via email. A 10-minute panel discussion will also be done at the end of the session where questions from the audience can be answered. The chairs of the session will read out the questions from the "chat" box for the panel to answer. If possible, the audience will be queried prior to the presentation regarding questions about the topics being discussed. This will allow for the presenters to incorporate some questions to their presentations prior to the virtual presentation.

Previous Session and Conference Experience: N/A

Chairs: Catalina Bazaciu (Chair); Rita Ryan (Chair); J Lauren Ruoss (Contact Person)

1 Speaker

Name: Patrick J. McNamara

Phone: 4169881560

Institution: University of Iowa

Email: Patrick-mcnamara@uiowa.edu

Title/Topic:

Lessons learned in the Evolution of Neonatologist Performed Imaging in the NICU

Duration: 0

2 Speaker

Name: J Lauren Ruoss

Phone: 8502949492

Institution: University of Florida

Email: lruoss@ufl.edu

Title/Topic: Lung ultrasound in the neonatal period - can it really make a difference?

Duration: 0

3 Speaker

Name: Jason Woods

Phone: 5136364200

Institution: Cincinnati Children's Hospital

Email: jason.woods@cchmc.org

Title/Topic: Can high-tech lung imaging help us manage lung and airway abnormalities?

Duration: 0

4 Speaker

Name: Regan E. Giesinger

Phone: 3193567314

Institution: University of Iowa

Email: regan-giesinger@uiowa.edu

Title/Topic: Utilization of targeted neonatal echocardiography for management of pulmonary hypertension in the critically ill neonate.

Duration: 0

Proposal # : 378523

Session Title : How to Evaluate an Infant in the Delivery Room

Contact: Henry Rozycki

Email: henry.rozycki@vcuhealth.org

Type: Hot Topic Symposia

Target Audience: Neonatologists and pediatricians who attend deliveries, developmental pediatricians, epidemiologists, outcomes researchers

Audience Size: 100

Tracks: Developmental and Behavioral Pediatrics | Epidemiology & Health Services Pathway | General Pediatrics | Global Neonatal & Children's Health | Neonatology | Well Newborn

Objectives: - To describe the current status of newborn evaluation/scoring - To define the parameters of a newborn evaluation system - To assess the status of video recording of newborn resuscitation - To encourage discussion on the purpose, use, requirements and assessment of newborn evaluation systems

Description: After almost 70 years, there are increasing calls for a re-evaluation of the Apgar Score. While some studies continue to demonstrate associations between lower scores and long term outcomes in large populations, others have demonstrated problems with variable predictive value, inter-rater reliability, geographic variability, inconsistent definitions and applications and, most importantly, irrelevance - the Apgar score is not used in the Neonatal Resuscitation Program. That it is still being almost universally applied indicates that there is still a general need for a method to evaluate the status of a newborn infant immediately after delivery, to assess the status during the transition to extra-uterine life, to measure the results of delivery room interventions, to facilitate accurate hand-off of the care of the newborn and to help identify infants at risk for short- and long-term complications. If that is true, what form should it take?

To facilitate some answers, we ask if the current system is adequate? What should an ideal system do? Has video recording become the new standard? More critically, because many constituencies currently use newborn scoring, including neonatologists, pediatricians, epidemiologists, developmentalists, outcomes researchers, and others, we solicit input and discussion to help decide what to do for the next 70 years.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: General Neonatology, Newborn SIG, Resuscitation

Additional Comments:

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: After three presentations to outline the topic, we will ask a series of questions to the general audience and facilitate a discussion. The questions will be in descending order of importance to permit everyone to participate in each one. The moderators will ensure wide participation.

Previous Session and Conference Experience:

Chairs: Henry Rozycki (Moderator); Mario Rüdiger (Moderator); Elizabeth Foglia (Moderator)

1 Speaker**Name:** Henry Rozycki**Phone:** 804-828-9965**Institution:** Children's Hospital of Richmond at VCU**Email:** henry.rozycki@vcuhealth.org**Title/Topic:** Virginia Apgar's Idea and Its Current Practice**Duration:** 0**2 Speaker****Name:** Mario Rüdiger**Phone:** +49-3514583640**Institution:** Technical University Dresden**Email:** mario.ruediger@uniklinikum-dresden.de**Title/Topic:** What Should Be Evaluated in the Delivery Room**Duration:** 0**3 Speaker****Name:** Elizabeth Foglia**Phone:** 2156623228**Institution:** Children's Hospital of Philadelphia**Email:** foglia@email.chop.edu**Title/Topic:** Video Recording - An Essential Tool or Optional Practice?**Duration:** 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378526

Session Title : Addressing the Persistent Controversies and Questions in Preterm Infant Nutrition: Translating the Pre-B Project into Clinical Practice and a Research Agenda

Contact: Sarah Taylor

Email: sarah.n.taylor@yale.edu

Type: Hot Topic Symposia

Target Audience: neonatologist, trainees, academic faculty, general practitioners, clinical researchers, advocacy leaders

Audience Size: 500

Tracks: Breastfeeding/Human Milk | Clinical Research Pathway | Gastroenterology/Hepatology | Neonatology | Pediatric Nutrition | Public Health | Quality Improvement/Patient Safety | Scholarly Sessions

Objectives: To determine how the evidence regarding preterm infant enteral nutrition is best integrated into clinical care. To highlight areas where data is lacking and identify appropriate research methods to address these deficiencies.

Description: After six years of interdisciplinary expert discussion and critical evidence review, the 2014 vision to develop evidence-informed guidance for the nutritional care of preterm infants has come to fruition. The Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) and the Academy of Nutrition and Dietetics (AND) initiated this multiphase process involving expert physician, dietitian, and pharmacology scientists. The first phase, Pre-B, addressed the existing evidence and research needs for clinical questions within four themes 1) nutrient specifications for preterm infants, 2) clinical and practical issues in enteral feeding of preterm infants, 3) gastrointestinal and surgical issues, and 4) current standards of infant feeding. This first phase was published in 2016 by Raiten *et al* as "Working group reports: evaluation of the evidence to support practice guidelines for nutritional care of preterm infants—the Pre-B Project". The second phase of this process is a systematic review of the literature led by the AND Evidence Analysis Center and includes an international workgroup of clinical and research experts who will now share the results of this extraordinary multi-disciplinary effort in this Hot Topic Symposium. Specifically, the presentations will focus on clinical questions where the existing evidence conflicts with current clinical nutrition recommendations and where the expert work group experienced more difficulty reaching a consensus. Each presentation also will describe areas where existing data is lacking and therefore research should be prioritized. The audience will participate throughout the presentation with polling and with a 15-minute question and answer with the expert work group.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: neonatology, nutrition, breastfeeding/human milk

Additional Comments: We were excited to be chosen for presentation in 2020 and disappointed to not present. However, we are even more thrilled to have additional results to share in 2021.

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: We will use an audience response system to have audience participation throughout the symposium. Audience members will have the opportunity to

demonstrate their knowledge and their opinions throughout the talks. Additionally, we will have a moderated Q&A portion.

Previous Session and Conference Experience: A similar presentation was presented at the Academy of Nutrition and Dietetics Food & Nutrition Conference & Expo 2019. It was very well received by the dietitian and clinical nutritional experts at that conference. We have more results to present since this 2019 presentation.

Chairs: Sharon Groh-Wargo (Presenter); Sarah Taylor (Chair); Camilia Martin (Presenter); Ian Griffin (Presenter); Tanis Fenton (Presenter)

1 Speaker

Name: Sharon Groh-Wargo

Phone: (216) 778-5902

Institution: MetroHealth Medical Center

Email: sgrohwargo@metrohealth.org

Title/Topic: The accomplishments and process of the NICHD PreB and the Academy of Nutrition and Dietetics Evidence Analysis Center

Duration: 0

2 Speaker

Name: Sarah Taylor

Phone: (843) 437-1831

Institution: Yale School of Medicine

Email: sarah.n.taylor@yale.edu

Title/Topic: Very low birthweight infant protein needs: Recognizing how the evidence differs from experience

Duration: 0

3 Speaker

Name: Camilia R. Martin

Phone: 617-667-3276

Institution: Beth Israel Deaconess Medical Center **Email:** cmartin1@bidmc.harvard.edu

Title/Topic: Energy and specifically fat sources for preterm infants: How is a seemingly basic question so complicated?

Duration: 0

4 Speaker

Name: Ian Griffin

Phone: 9167995974

Institution: Biomedical Research Institute of NJ

Email: igriffin@brinj.org

Title/Topic: The complex relationship between milk type and very low birthweight preterm infant outcomes

Duration: 0

5 Speaker

Name: Tanis R. Fenton

Phone: 4036808595

Institution: University of Calgary

Email: tfenton@ucalgary.ca

Title/Topic: Does the evidence support the current clinical definitions of “extrauterine growth restriction” and “postnatal growth failure”?

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020 Proposals

Proposal # : 378534

Session Title : Re-examine Race-"ism" in Pediatrics

Contact: Sadia Ansari

Email: drsadiaansari@gmail.com

Type: Hot Topic Symposia

Target Audience: All providers - general, urgent care, emergency medicine, hospitalist

Audience Size: 50-80

Tracks: Academic and Research Skills | Community Pediatrics | Emergency Medicine | General Pediatrics | Health Equity/Social Determinants of Health

Objectives: 1. Discuss and review terms race/ethnicity, racial disparity and explicit/implicit bias. 2. Review how race and ethnicity are utilized in commonly seen pediatric conditions. 3. Recognize role of implicit bias in leading to disparate health outcomes. 4. Explain the tools validated and utilized in literature to measure bias. 5. Review and analyze evidence of disparities in pediatric literature for UTI diagnosis and medical management. 6. Use retrospective urgent care data to help move discussion and research forward.

Description: The American Academy of Pediatrics (AAP) guideline for the diagnosis and management of initial urinary tract infections (UTI) in febrile children 2-24 months of age outlines race as an individual risk factor for both girls and boys. Specifically, white race for girls and nonblack race for boys are considered an additional risk factor for a UTI. This guidance is largely based on a study published in 1998 by Shaw et al. In January 2020, JAMA Pediatrics published a viewpoint advocating for the removal of race as a factor in determining the probability of a UTI from the AAP clinical practice guideline, arguing that race cannot be dichotomized.

In July 2020, Shaw et al responded to JAMA stating that "absence of evidence does not imply evidence of absence" and that additional study is needed to substantiate or refute the original hypothesis put forth. Also, AAP responded in the same month re-iterating their goal "to apply an equity lens to all core activities and functions, including education, programs, policy, and research."

The goal of this Hot Topic Symposium is to review what is known about disparities in management of UTI and provide a path forward. The first speaker, Heather Paradis whose career focus has been on reducing disparities by improving health systems of care at-risk children, will focus on terms race, racial disparity and bias and their role in pediatrics. The second speaker will provide a deep dive into these terms and focus on the specific topic of UTI diagnosis and management. The speaker will also focus on the current clinical research so far done to help answer these questions as well future projects. The symposium will end with 20 minutes of question/answer and discussion time with the audience and all the presenters.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: APA Research Scholars Program

Additional Comments: This discussion takes an abstract topic of racism/racial disparities and applies it to pediatricians (general, urgent care, emergency medicine, hospitalists) in a relevant and pertinent manner. The question of how pediatricians contribute to the disparity in health care to previously existing biases

Financial Sponsor?:

Society Affiliation: APA

Participant Engagement: Poll audience for their knowledge of the following: 1. Independent risk factors for diagnosis of UTI. 2. Evidence for AAP UTI Clinical Pathway Guideline 3. Hospital Guidelines for UTI diagnosis and management across the US.

Previous Session and Conference Experience: This topic was presented as a power point on weekly webinars for Society of Pediatric Urgent Care (SPUC) in June 2020 with a live audience on zoom of 45 participants as well as on Facebook live on SPUC page. It was 75 minute session including Q&A in the end. It was also presented as a poster/abstract podium to the Society of Pediatric Urgent Care October 2020: including a pre-recorded video and live Q&A session.

Chairs: Sadia Ansari (Chair)

1 Speaker

Name: Heather Paradis

Phone:

Institution: Chief Medical Officer

Email: hparadis@chw.org

Title/Topic: Is it Racism? Racial Disparity and Implicit Bias in Pediatrics

Duration: 0

2 Speaker

Name: Sadia T. Ansari

Phone: 7033093882

Institution: Children's Hospital of Wisconsin

Email: drsadiaansari@gmail.com

Title/Topic: What Does Race Have to do with it? Race as an Independent Risk Factor for Clinical Management of UTI in Pediatrics

Duration: 0

Proposal # : 378538

Session Title : Changing Approaches to Decision Making for Ethically Complex Cases in Children's Hospitals

Contact: John Lantos

Email: jlantos@cmh.edu

Type: Hot Topic Symposia

Target Audience: Practicing clinicians (including residents and fellows)

Audience Size: 50

Tracks: Children with Chronic Conditions | Clinical Bioethics | Critical Care | Hospital-based Medicine | Neonatology | Scholarly Sessions

Objectives: 1. Review research on process of decision making in the zone of parental discretion, and the best interests and harm principle standards 2. Present and analyze complex cases and the real-world process by which the ethically challenging aspects are managed 3. Propose techniques and strategies to prevent dilemmas from becoming intractable and for managing those that do 4. Discuss the various roles and functions of ethics consultation in these cases

Description: The field of bioethics is thriving while clinical care for children with complex problems has gotten more ethically complex than ever. (Antiel et al. 2017; Strong 2003; Janvier et al. 2017; Racine and Shevell 2009) Our ways of addressing the ethical complexities that arise in clinical care have adapted. In the 1980s, many children's hospitals created ethics committees. These evolved, in many centers, to a model of individual ethics consultation. Today, there are very few formal ethics consultations in most children's hospitals (Kesselheim et al. 2010; Thomas et al. 2015; Carter 2018). Instead, ethical dilemmas are managed through searching discussions among the many clinicians who work together to provide care for children with complex illnesses. The shift reflects the rise of pediatric palliative care (Sisk, 2020), the incorporation of ethics education in residency and fellowship training (Kesselheim 2008), and the clarification of legal issues through both case law and statute. (Diekema 2009) The ethicist has a new role – to facilitate a robust process of acceptable decision making, respecting the moral convictions of doctors and nurses while defining and recognizing a zone of parental discretion. In this workshop, we will review recent scholarly work on the process of decision making in complex situations. We will analyze how clinicians and parents define their roles and work towards mutually acceptable decisions. We will present – and invite audience discussion about - two cases in which doctors and parents faced difficult and complex choices. We will review research showing physicians' biases may lead them to frame issues in ways that subtly sway parents' decisions and how awareness of those biases may lead to a better decision-making process. Finally, we will talk about disagreements that seem intractable and propose strategies to improve communication, avoid impasses, and manage the moral distress that often arises in such cases.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: ethics; palliative care; legal issues

Additional Comments:

Financial Sponsor?:

Society Affiliation: APS

Participant Engagement: We have designed this session to be a mix of didactic/lecture and small group discussion. For the small groups, we will put people into "virtual" small rooms where they can discuss a case amongst themselves (with faculty mentors in each group.) The small groups will then report their conclusions back to the larger group. We will

also have a general discussion at the end. All of the faculty have experience leading small group discussions, both virtually and in-person. We are familiar with the pedagogic methods and with the technology.

Previous Session and Conference Experience: This exact session has not been presented at other conferences. But each of the faculty has experience in discussing ethics case. All have published peer-reviewed papers about clinical ethics and ethics consultation. They represent an international group of leaders in general pediatrics, pediatric oncology, pediatric palliative care, neonatology, and pediatric bioethics.

Chairs: John Lantos (Moderator); Dominic Wilkinson (Discussant); Chris Feudtner (Discussant); Annie Janvier (Discussant); Liza Johnson (Discussant)

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378572

Session Title : Lessons from the pandemic: How a children's hospital responded to the challenges of COVID-19

Contact: John Lantos

Email: jlantos@cmh.edu

Type: Hot Topic Symposia

Target Audience: Institutional leaders, policy makers, public health officials

Audience Size: 100

Tracks: Advocacy Pathway | Clinical Bioethics | Community Pediatrics | COVID-19 | Cross-Disciplinary Pathway | Epidemiology & Health Services Pathway | Public Health

Objectives: 1. Describe the mechanisms that were put in place to respond to the emergent demands of the pandemic 2. Analyze options that were available to decision makers regarding specific choices, the reasons for the choices that they made, and downstream implications of those choices 3. Speculate about preparedness for the next phase of this pandemic, or the next major crisis.

Description: The COVID-19 pandemic challenged doctors and hospital administrators as did no other event in our lifetimes. Leaders needed to develop a pandemic command structure with the agility to respond to rapidly evolving situations. They had to deal with drastic financial implications, develop new methods of delivering health care, and collaborate regionally. They learned the importance of communication with staff, policy makers, the local medical community, and the public. They had to allocate of scarce resources internally and externally, and balancing rational policy making against irrational fears. For children's hospitals, some specific challenges included determining our role in a pandemic that predominately affected adults, doing research on the unique pediatric manifestations of disease, and dealing with questions about schools and daycare. In this workshop, leaders from hospital administration, infectious disease, and disaster preparedness will review and analyze some of our experiences and responses at a large quaternary care children's hospital. We will use specific events and decisions to illustrate the unique challenges and our retrospective analysis of whether we could have done better. The goal of the interactive workshop is to learn together from our collective experience in order to be better prepared for future events.

10 mins: Introduction and Overview: Pandemic response as an existential challenge (Lantos)

12 mins: Establishing a pandemic command structure – Jodi Coombs, EVP and Chief Operating Officer, Children's Mercy

5 mins: questions/discussion

12 mins: Dealing with financial implications of the pandemic – Paul Kempinski, CEO

5 mins: questions/discussion

12 mins: Controversies in using emerging scientific data to shape hospital policy (Angie Myers, Chief of Pediatric Infectious Disease)

5 mins: questions/discussion

12 mins: Coordinating regional responses with hospitals, doctors, and schools (Jennifer Watts, Medical Director of Emergency Preparedness)

5 mins: questions/discussion

12 mins: Communicating with the public, with local physicians, and with the media (Laurie Ellison, Chief Communications and Marketing Officer)

30 mins: Audience Discussion/questions/audience response

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: public health, health policy, COVID

Additional Comments: This is an unusual presentation. Our hospital leaders are willing to reflect upon the lessons that they've learned in guiding our children's hospital and health system through the pandemic. We have chosen certain topics as our focus but recognize that a) there are many other important topics that we could have chosen instead; and b) things will change between now and May. Still, this will be a nice opportunity to hear from administrative leaders who faced unpredictable, unprecedented, and rapidly changing facts on the ground. We think this will be a useful session for others to compare notes and prepare for future events.

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: Each of the speakers is a hospital leader who has been conducting virtual sessions with faculty and staff throughout the pandemic. They are practiced and polished in delivering a message in a concise way and then seeking feedback.

Previous Session and Conference Experience: Each of the speakers has led sessions and spoken to various professional and community groups about the challenges faced by children's hospitals throughout the pandemic.

Chairs: John Lantos (Moderator); Jodi Coombs (Workshop Speaker); Angela Myers (Workshop Speaker); Paul Kempinski (Workshop Speaker); Jennifer Watts (Workshop Speaker); Laurie Ellison (Workshop Speaker)

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378577

Session Title : Utilizing a Shared Decision Model to Change the Conversation Regarding Genital Surgery for Individuals with Differences of Sex Development

Contact: Kristen Moryan-Blanchard

Email: kristenmoryan@gmail.com

Type: Hot Topic Symposia

Target Audience: Physicians- endocrinology, urology, gynecology, ethics, psychology

Audience Size: 30-50

Tracks: Advocacy Pathway | Clinical Bioethics | Cross-Disciplinary Pathway | Education Pathway | Endocrinology | General Pediatrics | Health Equity/Social Determinants of Health | Scholarly Sessions | Trainee Pathway

Objectives: Educational Objectives 1. Explore historical context for ethical controversy within management of Differences of Sex Development (DSD) 2. Understand Shared Decision-Making as a framework for ethical care and decision-making within DSD management 3. Explore and develop proficiency in a new proposed Shared Decision-Making Tool developed at Texas Children's Gender Medicine Clinic that addresses surgical management of infants and toddlers with Differences of Sex Development (DSD) 3. Present the effectiveness of a formal educational program to train physicians in the use of a shared decision-making model in areas of controversial or ethically ambiguous practice. 4. Address barriers to implementing shared decision-making in the DSD population, specifically regarding implicit biases and healthcare disparities.

Description: Managing gender in pediatrics remains a controversial and challenging topic as the desire to protect children against potential harm may directly conflict with the ability to preserve self-determination and autonomy. This session will discuss a shared decision-making model for DSD surgeries that can be used by parents, surgeons, and endocrinologists to improve parental education regarding a child's condition and the ethical implications of medical and surgical decision-making. Gender development and management will be explored through a patient-centered ethical framework, dismantling the implicit biases that are carried by both parents and physicians in the counseling and consent process. We will additionally illustrate the effectiveness of a physician training program designed for the utilization of this shared decision-making tool.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Session in gender, DSD, endocrinology

Additional Comments:

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement:

Previous Session and Conference Experience:

Chairs: Kristen Moryan-Blanchard (Chair)

1 Speaker

Name: David Mann

Phone:

Institution: Baylor College of Medicine

Email: dxmann@texaschildrens.org

Title/Topic: Creating an Ethical Framework for the Management of DSDs

Duration: 0

2 Speaker

Name: Jean L. Raphael

Phone: (832) 822-1791

Institution: Baylor College of Medicine

Email: raphael@bcm.edu

Title/Topic: Implicit Bias in Medical Decision-Making

Duration: 0

3 Speaker

Name: Kristen Moryan-Blanchard

Phone: 9402067982

Institution: Baylor College of Medicine/Texas
Children's Hospital

Email: kristenmoryan@gmail.com

Title/Topic: Utilization of a Shared Decision-Making Model in Individuals with Differences of Sex Development

Duration: 0

4 Speaker

Name: Lefkothea Karaviti

Phone:

Institution: Baylor College of Medicine

Email: karaviti@bcm.edu

Title/Topic: Future Directions in Ethical Management of individuals with DSDs

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378605

Session Title : Aerodigestive Connection in Infants and Children

Contact: Deborah Neigut

Email: deborah.neigut@childrenscolorado.org

Type: Hot Topic Symposia

Target Audience: Pediatricians, pulmonologists, gastroenterologists, neonatologists

Audience Size: 150

Tracks: Children with Chronic Conditions | Cross-Disciplinary Pathway | Gastroenterology/Hepatology | General Pediatrics | Neonatology | Pulmonology | Scholarly Sessions

Objectives: 1) to understand the development and physiology of esophageal function in infants 2) to understand the role of testing in the evaluation of aspiration and reflux 3) to recognize the presentation of chronic aspiration and understand its impact on the lungs 4) to understand that aspiration can be caused by anatomic and functional abnormalities 5) to understand the role of surgery in addressing the problem of chronic aspiration

Description: Aspiration and reflux cross several disciplines in pediatric care. An understanding of the physiology of swallow and the causes of reflux are important in the care of these children who often present with challenging problems. A multidisciplinary approach has become more important in evaluating and planning treatment strategies for children with chronic health problems related to aspiration and reflux.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: chronic cough

Additional Comments:

Financial Sponsor?:

Society Affiliation: NASPGHAN

Participant Engagement: It would be best to have a panel discussion period after all of the four speakers have presented their talks.

Previous Session and Conference Experience:

Chairs: Deborah Neigut (Moderator)

1 Speaker

Name: Sudarshan R. Jadcherla

Phone: 6143556643

Institution: NATIONWIDE CHILDREN'S HOSPITAL

Email: Sudarshan.Jadcherla@Nationwidechildrens.org

Title/Topic: Unraveling Aerodigestive Conundrums in the High Risk Neonate

Duration: 0

2 Speaker

Name: Hayat Mousa

Phone:

Institution: CHOP

Email: mousah@email.CHOP.edu

Title/Topic: Gastroenterologist's Role in Evaluating for Aspiration and Reflux

Duration: 0

3 Speaker

Name: Mikhail Kazachkov

Phone: 6465010536

Institution: NYU Langone Health

Email: mikhail.kazachkov@nyulangone.org

Title/Topic: Chronic Lung Disease in Aspiration and Reflux

Duration: 0

4 Speaker

Name: Matthew Brigger

Phone:

Institution: Rady Children's Hospital

Email: mbrigger@rchsd.ort

Title/Topic: The Role of ENT Anatomy and Function in Aspiration and Surgical Options

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378609

Session Title : Novel nutrition strategies to minimize postnatal growth failure in VLBW infants

Contact: Amy Hair

Email: abhair@texaschildrens.org

Type: Hot Topic Symposia

Target Audience: Neonatologists, Neonatal Fellows, Pediatric Residents, Nutrition Scientists, Dietitians, Researchers

Audience Size: 200

Tracks: Breastfeeding/Human Milk | Clinical Research Pathway | Neonatology | Pediatric Nutrition

Objectives: Objectives: 1. To review concepts about postnatal growth trajectories as a tool to provide guidance to NICU clinicians to adjust nutrient intake to minimize postnatal growth failure of VLBW. 2. To discuss perinatal metabolic transition and adaptation to extra-uterine life with respect to body composition 3. To address the various controversies that exist in neonatal nutrition, specifically the source and composition of human milk fortifiers for infants at highest risk, with the goal of promoting best strategies to reduce sepsis/NEC rates and to improve growth and neurodevelopmental outcome of these infants 4. To present novel fortification strategies including adjusted and targeted fortification.

Description: It is well recognized that human milk is the choice for enteral nutrition of very low birth weight (VLBW) infants in the Neonatal Intensive Care Unit (NICU). However, with the rise of new types of fortifiers, controversy exists among Neonatologists as to which fortifier and which fortification strategy is best for VLBW infants. Outcomes vary for rates of sepsis/NEC, for postnatal growth and for neurodevelopmental outcome. Actually, nutrition strategies in the NICU focus on maximizing the use of mother's own milk while minimizing the introduction of formula. How early, how fast and what volume to introduce according to gestational age and severity of illness remains controversial. Many NICUs have adopted human milk-derived fortifiers, concerns about cost-benefit remain when adopting this strategy. Recent studies highlight the different types of fortifiers (bovine-milk based fortifier and donor human milk-derived fortifier as well as lyophilized products) however they are not uniformly used and guidelines on how to use them remain scarce.

To make matters more complex, the advent of newer technology has translated into introduction of infrared human milk analyzers in the NICU which measure the macronutrients and energy density of 1-2 mL of human milk in real time. However, the use of individualized fortification - either adjusted or targeted - has not been widely adopted. Postnatal growth failure remains a major challenge in the care of the VLBW infant. This symposium plans to address the various controversies that exist in neonatal nutrition, with focus on novel nutrition strategies to minimize postnatal growth failure including targeted fortification of human milk for infants at highest risk, with the goal of promoting best strategies to improve early nutrition of VLBW infants in the NICU.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: fetal nutrition and metabolism platform sessions and symposiums, breastfeeding/human milk platform sessions and symposiums

Additional Comments:

Financial Sponsor?:**Society Affiliation:** AAP SoNPM

Participant Engagement: Our proposal is on hot topics in Neonatology, specifically neonatal nutrition and human milk, and new innovative strategies to improve postnatal growth failure. If conducted virtually, we will have a moderator that can be collecting questions while we speak. Attendees will enter their questions into a "Q&A" box like on zoom. We will reserve dedicated time at the end of the session for a Q&A session. I have participated in several webinars and this seems to work well. In addition, speakers can answer questions in the chat box in real time. Our team is also open to other suggestions from the PAS programming committee to make our session more engaging for participants.

Previous Session and Conference Experience: Our session was approved for presentation at PAS 2020. We are re-submitting for PAS 2021.

Chairs: Amy Hair (Chair)

1 Speaker**Name:** Cynthia L. Blanco**Phone:** 2103855040**Institution:** UT Health San Antonio**Email:** Blanco@uthscsa.edu

Title/Topic: The challenge of minimizing postnatal growth failure in VLBW infants: Postnatal adaptation and metabolism

Duration: 0

2 Speaker**Name:** Amy B. Hair**Phone:** 8328263719

Institution: Baylor College of Medicine, Texas
Children's Hospital

Email: abhair@texaschildrens.org

Title/Topic: Early fortification and novel strategies for fortification of human milk

Duration: 0

3 Speaker**Name:** Christoph Fusch**Phone:** +49 911 398 2276**Institution:** PARACELSUS Medical School**Email:** christoph.fusch@klinikum-nuernberg.de

Title/Topic: The future of human milk fortification: practical strategies for targeted fortification in relationship to individual growth trajectories of preterm infants

Duration: 0

4 Speaker**Name:** Niels Rochow**Phone:** +491624710763**Institution:** McMaster University**Email:** nielsrochow@gmail.com

Title/Topic: Neurodevelopment and body composition of VLBW infants who received targeted fortification

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378621

Session Title : Intestinal Failure: The Short and Long of It

Contact: Deborah Neigut

Email: deborah.neigut@childrenscolorado.org

Type: Hot Topic Symposia

Target Audience: Neonatologists, general pediatricians, pediatric surgeons, pediatric gastroenterologists, pediatric hepatologists

Audience Size: 150

Tracks: Children with Chronic Conditions | Cross-Disciplinary Pathway | Gastroenterology/Hepatology | General Pediatrics | Hospital-based Medicine | Neonatology | Scholarly Sessions

Objectives: 1) to understand the causes and impact of intestinal failure in children 2) to be aware of the current and future medical and surgical approaches 3) to understand the impact of IF on the liver and the current recommendations 4) to understand the role of transplantation in the care of children with intestinal failure

Description: Intestinal failure continues to be a significant problem affecting neonates and children. A multi-disciplinary approach to care is essential, as long term survival is dependent on successful nutritional support with optimal growth, anticipation of and avoidance of complications, and advancing techniques for improving gut function. The team is complex and requires ongoing involvement of neonatologists, gastroenterologists, hepatologists, surgeons, nutritionists, and social workers.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: NEC, liver disease in neonates

Additional Comments:

Financial Sponsor?:

Society Affiliation: NASPGHAN

Participant Engagement: Ideally would have four talks given, then an interactive discussion period with the four presenters

Previous Session and Conference Experience:

Chairs: Deborah Neigut (Moderator)

1 Speaker

Name: Christopher Duggan

Phone: 617-355-7612

Institution: Boston Children's Hospital

Email: christopher.duggan@childrens.harvard.edu

Title/Topic: How We Got Here and Where We're Headed

Duration: 0

2 Speaker

Name: Lindsey Gumer

Phone: 9146293902

Institution: Children's Hospital of Colorado

Email: lindsey.gumer@childrenscolorado.org

Title/Topic: Medical Care and Concerns in Intestinal Failure

Duration: 0

3 Speaker

Name: Mercedes Martinez

Phone: 212-305-5458

Institution: Columbia University College of
Physicians and Surgeons

Email: mm2479@cumc.columbia.edu

Title/Topic: The Liver in IF - Innocent Bystander or Driving Force

Duration: 0

4 Speaker

Name: Kyle Soltys

Phone: 412-692-7123

Institution: UPMC Children's Hospital

Email: kyle.soltys@chp.edu

Title/Topic: The Surgical Role in Intestinal Failure

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 378630

Session Title : Assessment of safety of bioactive components for infant formula that may affect the developing immune system: Recommendations of an expert panel

Contact: Richard Deckelbaum

Email: rjd20@columbia.edu

Type: Hot Topic Symposia

Target Audience: Fellows and faculty interested in the identification of bioactive substances in pediatric nutrition and/or the response of the developing immune system to food components.

Audience Size: 100+

Tracks: Academic and Research Skills | Advocacy Pathway | Allergy, Immunology and Rheumatology | Asthma | Basic Science Pathway | Breastfeeding/Human Milk | Developmental and Behavioral Pediatrics | General Pediatrics | Global Neonatal & Children's Health | Pediatric Nutrition

Objectives: - Identify key developmental markers of the infant immune system during the first 6 months of life. - List new food ingredients that have been developed for use in infant formulas—typically to mimic the composition of human milk—that may have bioactivity on immune system outcomes. - Describe food safety assessment methods and regulatory approval processes. - Compare the developing immune system of normal healthy infants with that of infants who have atopic disease, including those with primary atopic disease.

Description: In 2004 the Institute of Medicine published a report, "Infant Formula: Evaluating the Safety of New Ingredients." Given the expansion of the evidence base describing infant immune system development as well as the proliferation of new ingredients designed to replicate the composition of human milk, the U.S. Food and Drug Administration has recently raised questions about which immune system endpoints to measure in order to demonstrate safety of bioactive substances proposed for addition to infant formula.

A panel of experts in pediatric nutrition and developmental immunology was convened to assess candidate endpoints and advise measurements to assess safety of new ingredients. Panel members reviewed background research and participated in several meetings to develop recommendations, highlighted by a 2-day summit that included an overview of nutritional substances investigated for immune system effects and a review of research examining the effects of nutritional substances on vaccine response and other immune system outcomes. Systems biology approaches helped determine primary markers, and safety measures used in vaccine development and for monitoring the developing immune system of preterm and/or atopic infants provided useful comparisons for healthy term infants.

During this session, members of the expert panel will present the panel's recommendations and collect feedback during a discussion with session participants.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: not yet known

Additional Comments:

Financial Sponsor?:

Society Affiliation: NASPGHAN

Participant Engagement:

Previous Session and Conference Experience:

Chairs: Richard Deckelbaum (Organizer); John Wallingford (Organizer)

1 Speaker

Name: Richard J. Deckelbaum

Phone: 9143093066

Institution: Columbi University

Email: rjd20@columbia.edu

Title/Topic: Opening remarks and introductions for Assessment of safety of bioactive components for infant formula that may affect the developing immune system: Recommendations of an expert panel

Duration: 0

2 Speaker

Name: John Wallingford

Phone: (484) 919-4782

Institution: Nutrispectives LLC

Email: jcwallingford@gmail.com

Title/Topic: Purpose, background, regulatory content

Duration: 0

3 Speaker

Name: Kirsi Jarvinen-Seppo

Phone: 585-2767295

Institution: University of Rochester

Email: kirsi_jarvinen-seppo@URMC.Rochester.edu

Title/Topic: Using allergy to define abnormal; development of IgE, humoral immunity and tolerance using human milk modulators as a guide

Duration: 0

4 Speaker

Name: Joshua Milner

Phone:

Institution: Columbia University/NY Presbyterian

Email: jdm2249@cumc.columbia.edu

Title/Topic: Abnormal clinical and serological immune system markers in disease states; How disease states help define normal

Duration: 0

5 Speaker

Name: Frank Greer

Phone:

Institution: University of Wisconsin-Madison

Email: FRANK R GREER <frgreer@pediatrics.wisc.edu>

Title/Topic: What are the reported nutrition interventions that modify infant immune system status?

Duration: 0

6 Speaker

Name: Ronald Kleinman

Phone:

Institution: Harvard/Massachusetts General Hospital

Email: rkleinman@mgh.harvard.edu

Title/Topic: Evaluating the safety of new food ingredients: current federal regulatory process and other considerations

Duration: 0

7 Speaker

Name: Talal Chatila

Phone:

Institution: Harvard/Boston Children's Hospital

Email: Talal.Chatila@childrens.harvard.edu

Title/Topic: Infant immune system development. T cell programming, tolerance and evidence for long term consequences

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020 Proposals

Proposal # : 378636

Session Title : Newborn Brain Society Hot Topic Symposium

Contact: Mohamed El-Dib

Email: mel-dib@bwh.harvard.edu

Type: Hot Topic Symposia

Target Audience: Neonatologists, Pediatric Neurologists, Pediatric Neurosurgeons, Neonatal Nurses and Advanced Practitioners

Audience Size: 1000

Tracks: Neonatology | Neurology

Objectives: To discuss a hot topic in the field of newborn brain care and understand its pathophysiology, current evidence of management and future directions.

Description: The Newborn Society has been established in 2019

Vision: A world in which all newborns have access to and receive the optimal brain care

Mission: To advance newborn brain care through international multidisciplinary collaboration, education, and innovation among clinicians, scientists, and parents

Leadership:

1- Steering Committee:

Donna Ferriero, MD MS- UCSF Benioff Children's Hospital, University of California San Francisco

Geraldine Boylan, MD- University College Cork, Ireland

Linda de Vries, MD- Wilhelmina Children's Hospital, University Medical Center, The Netherlands

Pierre Gressens, MD- Robert Debré Hospital, Paris Diderot Medical School, France

Terrie Inder, MBChB, MD- Brigham and Women's Hospital, Harvard Medical School

Steve Miller, MDCM, MAS, FRCPC- Sickkids hospital, University of Toronto

Joseph J. Volpe, MD- Boston Children's Hospital, Harvard Medical School

2- Board of Directors

Mohamed El-Dib, MD- Brigham and Women's Hospital, Harvard Medical School

Laura Ment, MD- Yale Medical School

Sonia Bonifacio, MD, Stanford University School of Medicine

Hannah Glass, MD- UCSF Benioff Children's Hospital, University of California San Francisco

An Massaro, MD- Children's National Health Systems (CNHS), George Washington University/ FDA

Khorshid Mohammad, MD, MSc, FABP, FRCP(Edin), Alberta Health Services, University of Calgary

Betsy Pilon, BSc- Hope for HIE

Christopher Smyser, MD, M.S.C.I- St. Louis Children's Hospital, Washington University

Janet Soul, MD- Boston Children's Hospital, Harvard Medical School

The Newborn Brain Society will lead an invited science session. The Steering Committee and Board of Directors will plan a 90 min hour session which will have 4-5 invited science topics led by experts in the field to discuss a hot topic in the field of neonatal brain care.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Neonatal Neurology Scientific Sessions- Perinatal Brain Club

Additional Comments:

Financial Sponsor?:

Society Affiliation: NBS

Participant Engagement: We will plan interactive sessions with speakers and plenty of Q&A time.

Previous Session and Conference Experience: The Neonatal Neurocritical Care Special Interest Group (NNCC-SIG), the ancestor of NBS has been holding its annual meeting during PAS since 2016. Last year, NBS was accepted to lead one of the newly developed PAS-SIG sessions.

Chairs: Mohamed El-Dib (Chair); Laura Ment (Chair); Sonia Bonifacio (Chair); Hannah Glass (Chair); An Massaro (Chair); Khorshid Mohammad (Chair); Betsy Pilon (Chair); Christopher Smyser (Chair); Janet Soul (Chair)

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378638

Session Title : Vaping and E-Cigarettes 2021: The Ongoing Health Risks During an EVALI Epidemic and Global Pandemic

Contact: Susan Walley

Email: swalley@peds.uab.edu

Type: Hot Topic Symposia

Target Audience: Adolescent medicine, Hospital medicine, critical care physicians, public health, Pulmonary

Audience Size: 150

Tracks: Adolescent Medicine | Critical Care | Environmental Health | Hospital-based Medicine | Public Health | Pulmonology | Tobacco Prevention

Objectives: 1. Discuss electronic cigarette products and the epidemiology of youth use 2. Review scientific evidence on EVALI (e-cigarette or vaping related lung injury) and other health effects of e-cigarette use 3. Discuss the public health impact of electronic cigarettes in the context of the COVID-19 pandemic. 4. Review current recommendations for addressing youth electronic cigarette use and exposure in clinical practice

Description: E-cigarette or vaping-associated lung injury (EVALI) has focused significant attention on the short-term health harms of electronic cigarettes and vaping devices (collectively referred to as e-cigarettes). E-cigarettes are battery-operated devices which produce an aerosolized mixture from a solution of solvents, flavoring chemicals, concentrated nicotine and other substances to be inhaled by the user. Specific additional health harms associated with e-cigarette use include nicotine addiction, transition to cigarette and marijuana use, increased cough, wheeze and asthma exacerbations (for those with asthma), seizures, increased risk for cardiovascular disease, relapse to tobacco use among former quitters and renormalization and glamorization of smoking and tobacco use. New products, emerging research, clinical recommendations and policy updates are developing at an extremely rapid pace – making it difficult for the practicing pediatrician to keep up.

Youth use of e-cigarettes is a public health crisis: In 2019, one in four high school students is a current e-cigarette user and the effect of the COVID-19 pandemic on youth use is unknown. Many factors may account for the rapid rise in popularity of new tobacco products, including aggressive youth-focused marketing and advertising, particularly by newer e-cigarette companies such as JUUL and Suorin. JUUL, the e-cigarette brand with the highest market share in the US (>70%), contains a very high (59 mg/mL) nicotine concentration. Longitudinal data shows a concerning trajectory of youth transitioning from e-cigarettes to use of conventional cigarettes one year later, and more recent anecdotal reports of youth turning to combusted tobacco to help them quit vaping high nicotine devices. E-cigarette emissions (i.e. secondhand aerosol) contain harmful constituents such as volatile organic compounds, heavy metals and ultrafine particles, posing risks to non-users.

The panel of pediatricians presenting this session have been at the forefront of the American Academy of Pediatrics' tobacco control efforts to craft clinician-facing policy statements, educate and inform government policies regarding all aspects of e-cigarettes. This symposium will highlight the most updated current scientific evidence on electronic cigarettes and their impact on youth tobacco use, potential youth health and public health effects. In addition, this presentation will address how the global pandemic may affect rates of youth e-cigarette use and on how vaping may affect COVID outcomes. Current recommendation for helping youth with e-cigarette cessation will be reviewed, along with resources for prevention, refusal skills,

opportunities for youth engagement, and currently available resources for teens and parents. Up to date information on regulations and legislation (and anticipated impact) will be reviewed, providing participants with information necessary for advocacy at local, state and federal levels. This session will have broad appeal given the importance of this topic to our adolescent populations and their families.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: Saturday

Conflicting Sessions: SIG Pediatric Tobacco Issues

Additional Comments:

Financial Sponsor?:

Society Affiliation: APA

Participant Engagement: if this is available, using the chat box and poll feature (zoom). We will be taking questions after each section.

Previous Session and Conference Experience: We have presented prior similar presentations at PAS but not with this same objectives as EVALI is such a new diagnosis.

Chairs: Susan Walley (Presenter); Rachel Boykan (Presenter); Susanne Tanski (Presenter); Judith Groner (Presenter)

1 Speaker

Name: Susan Walley

Phone: 205-422-8522

Institution: University of Alabama at Birmingham

Email: swalley@peds.uab.edu

Title/Topic: Overview of Session and Background of E-cigarettes

Duration: 0

2 Speaker

Name: Rachel Boykan

Phone: 631 444 7884

Institution: Stony Brook University

Email: rachel.boykan@stonybrookmedicine.edu

Title/Topic: EVALI (e-cigarette or vaping associated) lung injury case and other health effects

Duration: 0

3 Speaker

Name: Susanne Tanski

Phone: 603-653-9030

Institution: Geisel School of Medicine at
Dartmouth

Email: susanne.e.tanski@dartmouth.edu

Title/Topic: The Nicotine-Addicted Teen and Treatment Recommendations

Duration: 0

4 Speaker

Name: Judith Groner

Phone: 614-572-5646

Institution: Nationwide Children's Hospital

Email: judith.groner@nationwidechildrens.org

Title/Topic: The Public Health Impact and the COVID-19 Pandemic

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**

Proposals

Proposal # : 378640

Session Title : Dangerous Drug Epidemic: Opioids, Vaping and Cannabis

Contact: Janelle Vaughns

Email: jvaughns@childrensnational.org

Type: Hot Topic Symposia

Target Audience : Academia, Clinicians, Trainees/Fellows, Faculty, Pharmacology, General Pediatricians, Subspecialists

Audience Size: 50-100

Tracks: Academic and Research Skills | Adolescent Medicine | Clinical Research Pathway | Developmental and Behavioral Pediatrics | General Pediatrics | Pharmacology | Public Health | Scholarly Sessions

Objectives: By the end of this symposium participants will: 1. Have an understanding of current trending regarding opioid, cannabis and vaping use among pediatric populations 2. Learn about new methodology and technology regarding pain and analgesic drug effect measurement 3. Gain insight into the factors impacting cannabis drug disposition in pediatric patients 4. Understand vaping as an evolving epidemic with regulatory considerations regarding Electronic Nicotine Delivery Systems (ENDS) including vaporizers and e-cigarettes.

Description:

The dangers of opioid, vaping and cannabis consumption are ever present within the pediatric community. Current U.S. trends related to these substances reveal an alarming dependence and abuse potential for these drugs with lethal consequences. This session will consider and present: 1) the current status of the opioid crisis across pediatric population groups specifically focusing upon new and innovative technology that is able to detect drug withdrawal in neonatal abstinence syndrome (NAS) and analgesia, diversion or recreational use in children and adolescents; 2) describe the natural history of current use and disposition of medical cannabis products and understand the pharmacokinetic and pharmacodynamics of these products in pediatrics; 3) provide up-to-date regulatory data and information from the Food and Drug Administrative (FDA) concerning the agency's actions and recommendations for the public regarding Electronic Nicotine Delivery Systems (ENDS) including vaporizers and e-cigarettes and 4) describe the health risks associated with the use of vaping, an evolving epidemic in children and adolescents. Session speakers are recognized experts in their respective fields, including academia and the FDA. The session will include an interactive panel discussion, designed to facilitate discussion of high-impact clinical questions and strategies with potential for multi-institutional collaboration. At the conclusion of this session, learners may participate in a discussion of research priorities, collaborative opportunities, and strategies for clinical implementation of the information presented in the symposium

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Other pharmacology sessions

Additional Comments:

Financial Sponsor?:

Society Affiliation: AAP

Participant Engagement: will use zoom capabilities

Previous Session and Conference Experience: N/A

Chairs: Julia Finkel (Panelist); Athena Zuppa (Panelist); Lisa Faulcon (Panelist); Paul Moore (Panelist)

1 Speaker

Name: Janelle Vaughns

Phone: 202-4764165

Institution: Childrens National Health System

Email: jvaughns@childrensnational.org

Title/Topic: Chair and Submitter-Overview

Duration: 0

2 Speaker

Name: Julia Finkel

Phone: 202-476-4867

Institution: Childrens National Hospital

Email: jfinkel@childrensnational.com

Title/Topic: Development of a Non-invasive PD Biomarker of Opioids and Cannabis in Infants, Children and Adolescents

Duration: 0

3 Speaker

Name: Athena Zuppa

Phone: 2155905505

Institution: Children's Hospital of Philadelphia

Email: ZUPPA@email.chop.edu

Title/Topic: Cannabis Use in Pediatric Patients

Duration: 0

4 Speaker

Name: Lisa M. Faulcon

Phone: 240- 402-8286

Institution: Food and Drug Administration

Email: Lisa.Faulcon@fda.hhs.gov

Title/Topic: FDA's Efforts to Address Tobacco Use in Youth

Duration: 0

5 Speaker

Name: Paul Moore

Phone: 615-936-5864

Institution: Vanderbilt University Medical Center

Email: paul.moore@vumc.org

Title/Topic: Vaping: An Evolving Epidemic

Duration: 0

6 Speaker

Name: Sonya Girwood

Phone: 646-642-8672

Institution: Cincinnati Childrens Medical Center

Email: janelle867@msn.com

Title/Topic: Co-chair : Concluding Remarks

Duration: 0

PAS 21 Meeting Scholarly Session Proposals

October 9, 2020

Proposal # : 378650

Session Title : Knowledge Translation in the 21st century: what can the EMS for Children Innovation and Improvement Center (EIIC) do for you?

Contact: Corrie Chumpitazi

Email: corriec@bcm.edu

Type: Hot Topic Symposia

Target Audience: Residents, fellows, faculty, subspecialists

Audience Size: 20-100

Tracks: Academic and Research Skills | Adolescent Medicine | Advocacy Pathway | Community Pediatrics | Emergency Medicine | General Pediatrics | Health Services Research | Hospital-based Medicine | Injury Prevention | Mental Health | Neurology | Public Health | Quality Improvement/Patient Safety | School and Community Health | Trainee Pathway

Objectives: 1) Become familiar with the activities and priority areas of Emergency Medical Services for Children (EMSC) and the EMSC Innovation and Improvement Center (EIIC) 2) To review the process of knowledge management content creation, scientific merit review, and dissemination methodologies and provide interactive feedback 3) Understand ways to be involved with EIIC locally and nationally to make an impact on improving the care of acutely ill or injured children

Description: More than 80% of all acutely ill or injured children are treated in general and community emergency departments. These facilities may lack pediatric readiness (proper guidelines, procedures, training, and pediatric-specific equipment), as the majority of their practice involves adult patients. This results in delayed or inadequate care of pediatric patients, which ultimately increases morbidity, mortality and adversely affects health outcomes. The Emergency Medical Services for Children (EMSC) program funded by the Health Resource and Services Administration (HRSA), was established to ensure appropriate care for all acutely ill or injured children. It aims to integrate pediatric needs into the overarching emergency care system.

In 2016, with a focus on quality improvement, the EMSC Innovation and Improvement Center (EIIC) was formed. The EIIC leverages partnerships and collaborations with federal entities and national professional societies to drive high quality pediatric emergency care, with a specific focus on rural and resource poor environments. The EIIC also support EMSC grantees (State Partnership programs, Targeted Issues Grantees, and Pediatric Emergency Care Applied Research Network [PECARN]). To this end, the EIIC mission is to reduce pediatric morbidity and mortality from critical illness and injury. In 2020, with renewed funding, the EIIC 2.0 added an area of emphasis in knowledge management.

In this interactive, didactic session, participants will learn about the mission and goals of the EIIC within the EMSC space. Also, priority areas for EIIC (toolkits, quality collaboratives, feedback through early adopter program, telehealth collaborative and the pediatric readiness) are discussed. An interactive and hands on discussion and feedback session is included in this didactic session. Participant will become familiar with core efforts led by the EIIC and discover ways to collaborate and engage in these activities both within their individual institutions, as well as via local and regional approaches.

Next, a focused discussion on the knowledge management (KM) domain of the EIIC 2.0 is presented (discussion group). The KM domain focuses on reducing knowledge gaps across multiple stakeholder types by expediting evidence transfer from the pediatric experts and research community to front line providers of pediatric emergency care. This involves the development of educational resources (toolkits), that are disease specific and are designed

for various end users (personas) including public (patients and families), scientific community (pre-hospital, physicians, nurses, researchers), EMSC stakeholders, and advocacy networks. Each toolkit's content is reviewed for scientific merit and is disseminated through the EIIC web portal.

Each year the EIIC will focus on developing 2 toolkits. The current year 2020-2021 focuses on status epilepticus and mental health topics. Examples of resources already curated or created for status epilepticus and mental health are demonstrated, as well as a review of process for evaluation and feedback. The early adopter program, designed to provide early access to a pilot group of potential end users to provide feedback prior to the content being posted for public consumption is also discussed. The KM domain aims to bring best practices and evidence supported guidelines to all pediatric emergency care providers, advocates, and consumers.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: None

Additional Comments:

Financial Sponsor?:

Society Affiliation: AAP

Participant Engagement: Poll, questions, chat

Previous Session and Conference Experience: N/a this is the new grant cycle for EIIC

Chairs: Marc Auerbach (Panelist); Corrie Chumpitazi (Panelist); Katherine Remick (Panelist); Mohsen Saidinejad (Panelist); Charles Macias (Panelist)

1 Speaker

Name: Marc Auerbach

Phone:

Institution: Yale University

Email: Marc.auerbach@yale.edu

Title/Topic: Innovation and knowledge translation

Duration: 0

2 Speaker

Name: Katherine Remick

Phone:

Institution: University of Texas at Austin

Email: Kate.remick@austin.utexas.edu

Title/Topic: EMSC innovation and Improvement Center a history of EMSC

Duration: 0

3 Speaker

Name: Mohsen Saidinejad

Phone: 617-680-4706

Institution: Harbor UCLA Medical Center

Email: moh@emedharbor.edu

Title/Topic: Educational resources to meet the various needs: from prehospital to nurses to physicians to families

Duration: 0

4 Speaker

Name: Charles Macias

Phone:

Institution: Rainbow Babies and Childrens' Hospital

Email: Charles.macias@uhhospitals.org

Title/Topic: Reducing the evidence to practice gap: how to get the QI tools to the masses to transform care.

Duration: 0

5 Speaker

Name: Corrie E. Chumpitazi
Institution: Baylor College of Medicine
Department of Pediatrics
Title/Topic: Moderator
Duration: 0

Phone: 8328241353
Email: corriec@bcm.edu

PAS 21 Meeting Scholarly Session October 9, 2020 Proposals

Proposal # : 378655

Session Title : Neonatology Basic Scientists Symposium

Contact: Amy O'Connell

Email: amy.oconnell@childrens.harvard.edu

Type: Hot Topic Symposia

Target Audience: Neonatology basic scientists, including residents, fellows, junior and senior investigators.

Audience Size: 50

Tracks: Basic Science Pathway | Cross-Disciplinary Pathway | Developmental Biology | Neonatology | Scholarly Sessions

Objectives: The objectives of this Hot Topics symposium are: 1. To create a network of basic scientists in neonatology in order to overcome the academic silo that happens when investigators are grouped by disease or organ-specific focus. 2. To generate an interdisciplinary scientific discourse around the fetus and neonate, so that advances in knowledge in one organ system might be considered or applied in other systems. 3. To enhance current research efforts by combining resources and current initiatives around the fetus and neonate. 4. To improve the benefits of the PAS conference for neonatal basic scientists by highlighting basic science in a dedicated symposium.

Description: Because basic scientists tend to focus on one disease or one organ system, neonatologists who do basic science can become siloed from other researchers in our field. This platform aims to be the first of a recurring annual gathering at PAS focusing on bringing together and highlighting basic science work in neonatology. While the efforts of translational researchers and clinical researchers cannot be understated, the ability to create a community and network of interdisciplinary basic scientists in neonatology will enhance cross-pollination of ideas and help in strategizing research organization and collaboration.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Should avoid combining with another basic science symposium or scientific session focused on neurology, gastroenterology, or pulmonology.

Additional Comments: Basic researchers often don't attend PAS or find it to be not very helpful because we are presenting highly specialized material to a wide group within pediatrics. For neonatologists, we often have primary research in another domain, such as the brain, lung, gastrointestinal tract, etc, which means we tend to present our work at those organ specific meetings rather than a format like PAS. However, this can be detrimental because the leaders in our fields and prominent neonatologists aren't often at those select meetings, but they do come to PAS. We hope that starting a session or group like this will benefit us by making PAS more engaging, giving us the greater visibility within our field that comes from attending PAS, and finally we think it will enrich the PAS conference itself by getting more basic scientists invested in attending. We are open to presenting this session in another format if a HotTopic Symposium is not the best fit, it was hard to figure out which type of session this proposal would best fit within.

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: Plan to request oral questions rather than chat questions so people speak up. Also plan to hold an open discussion at the conclusion of the talks regarding creation of a specific network for neonatal basic researchers. We would like to eventually create a club around this group for future PAS conferences.

Previous Session and Conference Experience: N/A

Chairs: Amy O'Connell (Organizer)

1 Speaker

Name: Cicely Fadel

Phone:

Institution: Beth Israel Deaconess Medical Center **Email:** Cicely.fadel@gmail.com

Title/Topic: Organ Chip Modeling for Neonatal Intestinal Disease

Duration: 0

2 Speaker

Name: Danielle G. Barber

Phone: 2672538630

Institution: Children's Hospital of Philadelphia **Email:** danielle.g.barber@gmail.com

Title/Topic: Sex-based Differences in Hippocampal Injury due to Hypoxic Ischemic Encephalopathy

Duration: 0

3 Speaker

Name: Kent A. Willis

Phone: (901) 287-5265

Institution: Univ. of Alabama at Birmingham **Email:** kentawillis@gmail.com

Title/Topic: Gut-Lung Axis in the Development of Bronchopulmonary Dysplasia

Duration: 0

4 Speaker

Name: Amy E. O'Connell

Phone: 6179191807

Institution: Boston Children's Hospital **Email:** amy.oconnell@childrens.harvard.edu

Title/Topic: A Developmental Framework for Neonatal Intestinal Disease

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020 Proposals

Proposal # : 378675

Session Title : Too Busy to Read? The Top Business Articles of 2020 that Will Change the Way You Lead, Do Your Job and Practice Medicine.

Contact: Christopher Russo

Email: christopher@russofamily.org

Type: Hot Topic Symposia

Target Audience: hospital executives; hospital leaders; system leaders; practice leaders; early career clinicians; pediatricians and pediatric advanced practice providers; all audience levels

Audience Size: 200

Tracks: Career Development Pathway | Leadership and Business Training

Objectives: 1) Upon participating in this session, attendees will have the knowledge and skills to identify three emerging trends from the world of business and organizational research. 2) Upon participating in this session, attendees will have the knowledge and skills to describe three ways to improve their management skills. 3) Upon participating in this session, attendees will have the knowledge and skills to describe three ways to improve their clinical practice and/or administrative functioning.

Description: While good clinical practice requires keeping up to date on relevant medical literature, it is difficult for pediatricians wearing dual hats as clinicians and administrators, as well as for younger pediatricians aspiring to be leaders, to find the time to keep abreast of current trends in business and organizational research. This fast-paced, interactive didactic will present attendees with the best business articles of 2020, with a focus on leadership, strategy and decision-making, communication, organizational culture, and productivity. For the busy physician leader, this session will provide an opportunity to obtain key takeaways for enhancing management skills and improving practice.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: none

Additional Comments: Christopher Russo MD FAAP is Medical Director for Quality and Innovation and the Director of Pediatrics for WellSpan Health, a large integrated health care system located in Pennsylvania. Prior to becoming a physician, he was a management consultant. A frequent workshop presenter at national conferences, Dr. Russo also competed at the World Public Speaking and Debating Championships in Stellenbosch, South Africa. Laura Nell Hodo MD FAAFP FAAP is a pediatric hospitalist at the Kravis Children's Hospital at Mount Sinai. She has given talks and lectures on a variety of topics, for both medical and lay audiences, and has experience in theatre, radio, and television as well as legislative advocacy. Drs. Hodo and Russo have presented together over a dozen times at the Pediatric Academic Societies, the Society for Hospital Medicine, and the Pediatric Hospital Medicine annual conferences over the past five years. They have combined over 40 years of speaking experience.

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: 1) This session is structured as an interactive didactic that presents the top articles with time for brief discussion and reflection after each. 2) The symposium is tightly structured to be fast-moving and engaging, with no section longer than 15 minutes. 3) Online polling will be used throughout to gauge participant

reactions and opportunities for improvement. 4) Time is dedicated at the end of the workshop for audience questions.

Previous Session and Conference Experience: A version of this was presented at the Society for Hospital Medicine 2019 Annual Conference to a group of over 250 participants, and at the Pediatric Hospital Medicine 2020 Annual Conference (virtually).

Chairs: Christopher Russo (Presenter); Laura Hodo (Presenter)

1 Speaker

Name: Christopher J. Russo

Phone: 6172163052

Institution: WellSpan Health

Email: christopher@russofamily.org

Title/Topic: Too Busy to Read? The Top Business Articles of 2019 that Will Change the Way You Lead, Do Your Job and Practice Medicine.

Duration: 0

2 Speaker

Name: Laura Hodo

Phone:

Institution: Mount Sinai Medical Center

Email: laura_nell_hodo@hotmail.com

Title/Topic: Too Busy to Read? The Top Business Articles of 2019 that Will Change the Way You Lead, Do Your Job and Practice Medicine.

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378691

Session Title : Sepsis and Inflammation: New Insights in the Era of COVID

Contact: Cynthia Bearer

Email: cynthia.bearer@UHhospitals.org

Type: Hot Topic Symposia

Target Audience: Trainees, Fellows, early career faculty, mid career faculty, senior faculty, anyone interested in sepsis & inflammation

Audience Size: 30

Tracks: Adolescent Medicine | Allergy, Immunology and Rheumatology | Basic Science Pathway | Clinical Research Pathway | COVID-19 | Epidemiology & Health Services Pathway | General Pediatrics | Global Neonatal & Children's Health | Infectious Diseases | Neonatology | Public Health

Objectives: Objectives: When this session is over, learners will • Recognize an immune disorder • Be able to name three biomarkers of sepsis and inflammation • List three causes of neonatal brain injury and inflammation • Discuss three new interventions targeting inflammation

Description: "Ring around the rosie. A pocket full of posies. Ashes, ashes, we all fall down" – nursery rhyme.

Sepsis and its accompanying inflammation remain a major cause of morbidity and mortality in children from the fetus to adolescents. Our understanding of sepsis and inflammation has been piqued by the COVID 19 pandemic, often with the thought that the critical part of an illness is not the infection, but the body's reaction to the infection. This statement may be especially true when considering the impact of developmental processes during childhood. In this scholarly session, we will explore basic mechanisms, diagnostic techniques, and interventions of this disorder. The presentations will range from basic science to epidemiology and be interdisciplinary in character.

Speakers:

Neonatal sepsis and susceptibility: immune function: Ofer Levy-

ofer.levy@childrens.harvard.edu

Paediatric sepsis Biomarkers of inflammation and early recognition: Hector

Wong- wonghr@cchmc.org

Neonates and the COVID-19 Pandemic: Eleanor Molloy- elesean@hotmail.com

New therapies targeting inflammation: Tobias Strunk- tobiasstrunk@yahoo.de

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: N/A

Additional Comments: Is based in the issue of the year for Pediatric Research

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: Question & answer after each presentation, 10 min Q&A at end

Previous Session and Conference Experience: N/A

Chairs: Cynthia Bearer (Moderator); Eleanor Molloy (Presenter); Ofer Levy (Presenter); Hector Wong (Presenter); Tobias Strunk (Presenter)

Proposal # : 377339

Session Title : Controversies in the Diagnosis and Management of Urinary Tract Infection in infants < 2 months old

Contact: Marie Wang

Email: marie.wang@stanford.edu

Type: Panel Discussion

Target Audience: General pediatricians, hospitalists, emergency medicine physicians, infectious diseases physicians, neonatologists, pediatrics residents and fellows

Audience Size: 200

Tracks: Emergency Medicine | General Pediatrics | Hospital-based Medicine | Infectious Diseases | Neonatology

Objectives: This session will provide an evidence-based multidisciplinary discussion regarding the controversies in UTI diagnosis and management in the <2 month old population. Our objectives are to: 1. Examine various definitions of UTI, including the role of colony count, urinalysis and collection method. 2. Evaluate the evidence surrounding routine vs. targeted lumbar puncture in infants with a positive urinalysis. 3. Discuss the evidence regarding duration of parenteral therapy for UTI with and without bacteremia. 4. Review evidence-based approaches to routine imaging following first febrile UTI.

Description: Urinary tract infection (UTI) is one of the most common bacterial infections in infants, and occurs in up to 10% of febrile infants <2 months old. Young febrile infants with UTI are commonly encountered in outpatient and inpatient settings and across specialties such as general pediatrics, emergency medicine, hospital medicine, neonatology, and infectious diseases. Current AAP UTI Guidelines address diagnosis and management for 2-24 month olds but do not provide guidance for infants younger than 2 months of age. Consequently, there is uncertainty and variability in diagnosis and management of UTI in the <2 month age group. This session will use case vignettes to provide an engaging review of the latest evidence and multidisciplinary discussion of the following topics: 1) Different definitions of UTI and the role of colony count, urinalysis results and collection method, 2) Routine vs. targeted lumbar puncture in infants with a positive urinalysis, 3) Duration of parenteral therapy for UTI with and without bacteremia, and 4) Imaging following first febrile UTI.

A panel of experts on urinary tract infection in febrile young infants representing diverse fields (general pediatrics, hospital medicine, emergency medicine, and infectious diseases) will discuss these topics in a moderated format. The session will begin with a brief review of the AAP UTI Guidelines and reasons for special considerations in the <2 month age group. Each topic will begin with a case vignette with audience response polling to assess current practice related to that topic. A focused review of relevant pediatric literature will be provided, followed by a moderated panel discussion to discuss various perspectives. There will be 19 minutes allotted for each topic (12 min presentation followed by 7 minutes of discussion and audience question-and-answer session). Audience members will be able to submit questions through the PAS virtual presentation platform. The moderator will select from the audience questions and facilitate the question-and-answer session per topic, allowing for a total of 28 minutes of attendee-driven discussion to promote in-depth conversations about current controversies. The session will conclude with an overview of future directions for research. Attendees will gain a strong evidence base from which to manage UTI in the <2 month population.

Outline:

1. Overview of AAP UTI Guidelines and Special Considerations for <2 month old infants (10 min)

2. Defining a “Gold Standard” for UTI Diagnosis: Role of the Urinalysis, Urine Culture, and Method of Collection (19 min)
3. Routine vs. Selective Lumbar Puncture in Infants with a Positive Urinalysis (19 min)
4. Duration of Parenteral Antibiotic Therapy and Outcomes (19 min)
5. Routine Imaging Following First Febrile UTI (19 min)
6. Future Directions (4 min)

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Hospital medicine research abstract sessions, APA PHM SIG and PHM Club

Additional Comments: We are happy to work with conference organizers to adapt the proposed format I to meet the needs of the virtual presentation format, which could include lengthening the prerecorded presentations or moving the question and answer session to the end of the session, if desired.

Financial Sponsor?:

Society Affiliation: PIDS

Participant Engagement: If the session is presented live, we plan to have clinical scenarios presented within each talk with an opportunity for audience response, either through the PAS platform or a response system such as Poll Everywhere. If this capability is not available, we will still present the clinical scenarios to allow the audience to consider applicability to real world practice. In addition, the audience will be able submit questions through the PAS virtual presentation platform. Following review of each of the 4 topics, the moderator will select from the audience questions and facilitate a 7-minute question and answer session per topic. This will allow for a total of 28 minutes of attendee-driven discussion and promote conversations about current controversies. If conference organizers feel that the virtual format is more amenable to having a single question and answer session being held at the end of the entire session, we can do that as well.

Previous Session and Conference Experience: This session was previously accepted for PAS 2020 and has not been presented elsewhere.

Chairs: Marie Wang (Chair); Thomas Newman (Panelist); Paul Aronson (Panelist); Alan Schroeder (Panelist); Pearl Chang (Panelist)

1 Speaker

Name: Marie E. Wang

Phone: 7144781924

Institution: Stanford University

Email: marie.wang@stanford.edu

Title/Topic: Overview of AAP UTI Guidelines and Special Considerations for <2 month old infants

Duration: 0

2 Speaker

Name: Thomas Newman

Phone: 4155148007

Institution: UCSF

Email: newman@epi.ucsf.edu

Title/Topic: Defining a “Gold Standard” for UTI Diagnosis: Role of the Urinalysis, Urine Culture, and Method of Collection

Duration: 0

3 Speaker

Name: Paul L. Aronson

Phone: 9178068237

Institution: Yale School of Medicine

Email: paul.aronson@yale.edu

Title/Topic: Routine vs. Selective Lumbar Puncture in Infants with a Positive Urinalysis

Duration: 0

4 Speaker**Name:** Alan Schroeder**Phone:** 650 725-0551**Institution:** Stanford**Email:** aschroe@stanford.edu**Title/Topic:** Duration of Parenteral Antibiotic Therapy and Outcomes**Duration:** 0**5 Speaker****Name:** Pearl W. Chang**Phone:** 408-569-8948**Institution:** Seattle Children's Hospital**Email:** pearl313@gmail.com**Title/Topic:** Routine Imaging Following First Febrile UTI**Duration:** 0

Proposal # : 377502

Session Title : Cardiopulmonary Issues in the Down Syndrome Population

Contact: Clifford Cua

Email: clcua@hotmail.com

Type: Panel Discussion

Target Audience: General pediatricians, neonatologists, cardiologists, and intensivists

Audience Size: 100

Tracks: Cardiology | Children with Chronic Conditions | Community Pediatrics | Critical Care | Cross-Disciplinary Pathway | Developmental and Behavioral Pediatrics | General Pediatrics | Neonatology

Objectives: 1. Review the cardiogenetic and phenotypic characteristics in the DS population 2. Review etiology, pathophysiology, morbidity, and mortality of pulmonary hypertension in the DS population. 3. Review the short, mid, and long-term cardiopulmonary outcomes of patients with DS.

Description: This would be a panel presentation of experts discussing the various cardiopulmonary issues that patients with Down syndrome (DS) may encounter during their lifetime.

-Topic 1 - Genetics involved in the development of congenital heart disease (CHD) in the DS population

-Topic 2 - Possible changing CHD phenotype in the DS population.

-Topic 3 - Pulmonary hypertension issue in the DS population

-Topic 4 - Cardiac morbidity and mortality in the DS population

-Topic 5 - Longterm/adult cardiopulmonary outcomes in the DS population

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: N/A

Additional Comments:

Financial Sponsor?:

Society Affiliation: PAS

Participant Engagement: Would make the slides available to those that are interested in the topic. Would also make it possible that participants could chat/email questions to the presenters after the talk if there are any follow up questions that were not addressed during the talks.

Previous Session and Conference Experience: N/A

Chairs: Dunbar Ivy (Moderator); Clifford Cua (Moderator)

1 Speaker

Name: Cheryl Maslen

Phone:

Institution: Oregon Health and Science University **Email:** Maslenc@ohsu.edu

Title/Topic: Genetics of Congenital Heart Disease in the Down Syndrome Population

Duration: 0

2 Speaker

Name: Stephanie Santoro

Phone:

Institution: Massachusetts General Hospital **Email:** ssantoro3@mgh.harvard.edu

Title/Topic: Congenital Heart Disease Phenotype in the Down Syndrome Population, Is it Changing

Duration: 0

3 Speaker

Name: Douglas Bush

Phone:

Institution: Mount Sinai Medical School

Email: douglas.bush@mssm.edu

Title/Topic: Pulmonary Hypertension in the Down Syndrome Population

Duration: 0

4 Speaker

Name: John M. Costello

Phone:

Institution: Medical University of South Carolina

Email: costello@musc.edu

Title/Topic: Morbidity and Mortality for Congenital Heart Disease in Down Syndrome Population

Duration: 0

5 Speaker

Name: May Ling Mah

Phone: 6147225622

Institution: Nationwide Children's Hospital

Email: MayLing.Mah@nationwidechildrens.org

Title/Topic: Longterm Cardiopulmonary Outcomes in the Down Syndrome Population

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 377509

Session Title : Bots for Tots: Artificial Intelligence and Machine Learning in Pediatric Biomedical Research

Contact: Judith Dexheimer

Email: judith.dexheimer@cchmc.org

Type: Panel Discussion

Target Audience: General pediatricians and all those interested in machine learning research and applications. Trainees, general and community pediatricians, academic researchers, and all people who are interested in medical informatics and machine learning research as a

Audience Size: 150

Tracks: Academic and Research Skills | Clinical Research Pathway | Telemedicine/EHR/Medical Informatics

Objectives: To educate the general pediatric audience about machine learning, artificial intelligences, and state-of-the-art advances in informatics research in pediatric institutions. The attendees will learn about a primer in machine learning to provide a basic overview and understanding and then highlights of important informatics projects at three major pediatric institutions.

Description: Applied machine learning and artificial intelligence continue to invade modern life, driving everything from advertising to automobiles. Big Data are increasingly being used for both research and clinical care. Despite the increase of machine learning applications in both these fields, there remains minimal work being done specifically in pediatrics, which presents a unique environment compared to adult care. Thankfully, pediatricians hold a unique understanding of brain development, which helps provide a baseline for understanding the machine learning concepts modeled after the human brain. At this critical point in informatics research and application, pediatricians must develop a conceptual model of machine learning techniques, identify acceptable use of artificial intelligence methods in medicine, and provide examples of state-of-the-art projects being done to help provide the best possible care for their patients.

Dr. Dufendach is a neonatologist, assistant professor, and informaticist at Cincinnati Children's Hospital Medical Center. He will provide a complete primer on machine learning and artificial intelligence from the pediatrics perspective, leveraging the clinician's conceptual model of brain development to help explain how a neural network works. He will introduce and illustrate the seven steps for developing machine learning algorithms using tangible examples.

Dr. Dexheimer is a biomedical informaticist with a focus in machine learning and decision support, and associate professor at Cincinnati Children's Hospital Medical Center. She will highlight research being performed at Cincinnati Children's. She will discuss the role and impact of AI and ML in research with the electronic health records, explore unique aspects of conducting work in pediatrics with biomedical informatics, and discuss the integration of ML into clinical care.

Dr. Kirkendall is the Deputy Director, Center for Healthcare Innovation & Director of Digital Health Innovation at Wake Forest Baptist Health. He will discuss the integration of ML and Natural Language Processing into clinical care and the challenges associated with doing so. He will also highlight research using artificial intelligence being performed at both Cincinnati Children's Hospital and Wake Forest Medical Center.

Dr. Grundmeier is a pediatrician and the Director of Clinical Informatics at the Children's Hospital of Philadelphia. He is a national expert in the repurposing of clinical data for secondary use in clinical and genomics research. He will provide a broad review of the pediatric-related machine-learning literature and put it into context for the pediatric provider and will highlight state of the art work currently being performed at the Children's Hospital of Philadelphia.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: N/A

Additional Comments:

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: We will primarily provide a didactic environment but open participation and questions from the audience.

Previous Session and Conference Experience: This session has not been presented previously.

Chairs: Judith Dexheimer (Contact Person)

1 Speaker

Name: Kevin R. Dufendach

Phone: 616.481.5089

Institution: University of Cincinnati and Cincinnati Children's

Email: kevin.dufendach@cchmc.org

Title/Topic: Peeking into Machine Learning's Black Box: Essentials for the Clinician

Duration: 0

2 Speaker

Name: Judith Dexheimer

Phone: 513-803-2962

Institution: Cincinnati Children's Medical Center

Email: judith.dexheimer@cchmc.org

Title/Topic: Big Data for Tiny Patients: Applications and Integration of Machine Learning

Duration: 0

3 Speaker

Name: Eric S. Kirkendall

Phone: 336.716.0462

Institution: Wake Forest Baptist Medical Center

Email: ekirkend@wakehealth.edu

Title/Topic: Innovating in Pediatrics using Artificial Intelligence: The Hope, The Hype, and the Realities...and How to Tell Them Apart

Duration: 0

4 Speaker

Name: Robert W. Grundmeier

Phone: 267-242-5347

Institution: Children's Hospital of Philadelphia

Email: grundmeier@email.chop.edu

Title/Topic: The Promises and Challenges of Using Machine Learning to Improve Child Health

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 377774

Session Title : Medical Education Dogmas: Things Educators Do For No Reason

Contact: Jimmy Beck

Email: jimmy.beck@seattlechildrens.org

Type: Panel Discussion

Target Audience: Educators, but also trainees who were interested in medical education

Audience Size: 150

Tracks: Education Pathway | Hospital-based Medicine

Objectives: 1) Describe five medical education dogmas 2) Incorporate proven educational alternatives to above non-evidenced-based dogmas 3) Identify an approach to investigating dogmas in medical education

Description: Webster's Dictionary defines a "dogma" as a settled opinion, principle, or maxim. When concepts become rigid dogmas, creative thinking is obstructed. This further impedes the development and incorporation of innovative approaches and ideas. Increasingly, attention has been given to clinical practices or "dogmas" that may not be evidence-based. This investigative approach to widely held clinical practices has been promoted through the lauded Choosing Wisely campaign and the "Things We Do For No Reason" series in the Journal of Hospital Medicine. Yet, within education, much like the clinical realm, we have adopted certain widely accepted educational strategies and practices that are potentially futile, or even harmful, for educators and learners rather than being evidence-based or even "best practice".

During our session, we will review well-known educational approaches that have become common parts of educators' teaching toolboxes but that have little evidence to support them and provide little educational value to our learners. These topics, which will be relevant to educators who work with learners of varying levels and in a variety of settings will include: millennial learners, cognitive biases, learning styles, time-based training and simulation based training.

The session will begin with a brief history of dogmas in general. Then, each panelist will present one medical education dogma that lacks robust evidence for 15 minutes which will include at least 5 minutes of audience participation (Q/A, reflection questions, polling questions) Panelists will also share alternative evidence-based teaching practices that audience members can use in place of the dogma. Finally, we will solicit from audience members other widespread teaching practices that are difficult to justify based on current evidence. Our goal is for this session to assist educators in realizing that not all educational approaches, including "best practices," have evidence. We hope this session will serve as a starting place for increased research, further investigation into the suggested dogmas and active discussions amongst educators.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Top Articles in Medical Education: ID 377286

Additional Comments: Thank you for considering our proposal. We have made some minor tweaks to our proposal, which was accepted as a panel discussions at last year's PAS in Vancouver. We are submitting this as a 90 minute live session.

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: Each panelist will present one medical education dogma that lacks robust evidence for 15 minutes which will include at least 5 minutes of audience participation (Q/A, reflection questions, polling questions). In addition, at the end of the session, we will solicit from audience members other widespread teaching practices that are difficult to justify based on current evidence.

Previous Session and Conference Experience: N/A

Chairs: Jimmy Beck (Presenter); Barrett Fromme (Presenter); Whitney Browning (Presenter); Eric Zwemer (Presenter); Benjamin Kinnear (Presenter); Natalie McKnight (Presenter)

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 377857

Session Title : Addressing Resident Burnout by Normalizing Mental Health Support

Contact: Anastasia Schied

Email: aschied@health.ucsd.edu

Type: Panel Discussion

Target Audience: Residency Program Directors; Chief Residents; General Pediatrics; Resident Physicians; Mental Health Providers

Audience Size: 20-40

Tracks: Mental Health

Objectives: This panel will propel forward the conversation on mental health and burnout in training physicians. Our program has developed and implemented a novel opt-out mental health service with data to support its efficacy as a tool to decrease burnout in residents. We hope to present this program as a model for other institutions to adopt and expand upon. Our department's well-being director will discuss what is known about resident well-being nationally, and at our institution, as drivers for the initiative. Our program director will expand upon lessons learned and comment on motivation and challenges to implementing an intervention like ours from a program leadership perspective. A mental health provider will speak to her experience working with physicians, and a senior resident will discuss her personal motivation for developing an infrastructure to connect residents with mental health services. In addition, we plan to present qualitative data on perceived barriers to seeking mental health services as a resident. The question and answer session will be a forum to hear from other Program Directors about what wellness initiatives have been successful at their institutions. This discussion will create a space to share ideas and discuss barriers and solutions for further improving resident wellness and combating burnout in medical training.

Description: The prevalence and impact of burnout in resident physicians is a well-documented problem that has prompted efforts to promote wellness in training programs across the country^[1-4]. The overlap between burnout and depression makes targeting mental health a viable method to decrease the level of burnout in trainees^[5-6]. Time constraints of a resident schedule and the stigma surrounding mental health diagnosis continue to prove as barriers to trainees accessing care. In an effort to circumvent these and other challenges, we developed an opt-out mental health program for the interns at UC San Diego Rady Children's Hospital Pediatric Residency Program. With an automatically pre-scheduled appointment and excusal from clinical duties, our aim was to normalize mental health support and establish an open channel for residents to seek additional mental health care throughout their time in residency.

A research study to evaluate the program's impact through rates of utilization and level of burnout is ongoing. Preliminary data show a trend towards increased utilization of mental health services in residents participating in the opt-out intervention. This panel will make the case for initiatives like this in supporting resident well-being and describe the structure, development, and implementation of our mental-health initiative. We will present our preliminary data collected through a resident survey. Through a description of this specific initiative, we will dive deep into the role of mental health in resident burnout, and create a platform for discussion of systemic efforts training programs can make to promote wellness.

1. Kuhn C; Flanagan E. "Self-care as a professional imperative: physician burnout, depression, and suicide." *Can J Anaesth*, 64(2):158-168, Feb 2017. doi:

10.1007/s12630-016-0781-0.

2. Busireddy, K R, et al. "Efficacy of Interventions to Reduce Resident Physician Burnout: A Systematic Review." J Grad Med Educ, 9(3): 294-301, June 2017. doi:10.4300/JGME-D-16-00372.1.

3. Waguhi, I et al. "Burnout During Residency Training: A Literature Review." J Grad Med Educ, 1(2): 236–242. Dec 2009. doi: 10.4300/JGME-D-09-00054.1

4. Grace, M; VanHeuvelen J. "Occupational variation in burnout among medical staff: Evidence for the stress of higher status." Soc Sci Med, 232:199-208, Jul 2019. doi: 10.1016/j.socscimed.2019.05.007.

5. Bianchi, R et al. "Burnout-depression overlap: a review." Clin Psychol Rev, 36:28-41, March 2015. doi: 10.1016/j.cpr.2015.01.004.

6. Schonfeld, I S; Bianchi R. "Burnout and Depression: Two Entities or One?" J Clin Psychol, 72(1):22-37, Jan 2016. doi: 10.1002/jclp.22229

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: None

Additional Comments:

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: Panelists will discuss their perspectives largely using a conversational format. There will be recorded testimonials from residents speaking to the value of the program for their personal wellness. We will poll the audience regarding services offered at other programs, and for brainstorming during the question and answer session. The question and answer session will be an opportunity for audience members to speak to anti-burnout efforts at other institutions, and to inquire further about the program implemented at the University of California San Diego. We will also use a power-point presentation to display our data and program outline.

Previous Session and Conference Experience:

Chairs: Anastasia Schied (Contact Person); Ami Doshi (Moderator)

1 Speaker

Name: Ami Doshi

Phone: 8589665841

Institution: UC San Diego and Rady Children's Hospital

Email: adoshi@rchsd.org

Title/Topic: Dr. Ami Doshi - Director of Wellness for Department of Pediatrics UCSD

Duration: 0

2 Speaker

Name: Courtney Sanchez

Phone: 6507999253

Institution: University of California San Diego

Email: cos006@health.ucsd.edu

Title/Topic: Courtney Sanchez - Mental Health Provider

Duration: 0

3 Speaker

Name: Anastasia Schied

Phone: 708-528-0296

Institution: University of San Diego

Email: aschied@health.ucsd.edu

Title/Topic: Dr. Annie Schied - Resident Physician; Department of Pediatrics UCSD

Duration: 0

4 Speaker

Name: Mark Sawyer

Phone: 8589667406

Institution: UC San Diego School of Medicine

Email: mhsawyer@ucsd.edu

Title/Topic: Dr. Mark Sawyer - Pediatric Residency Program Director; UCSD Rady Children's Hospital

Duration: 0

Proposal # : 377884

Session Title : Flipping the Script on Emergency Care of Children with Medical Complexity: Challenges & Opportunities

Contact: Christian Pulcini

Email: christian.pulcini@uvmhealth.org

Type: Panel Discussion

Target Audience: General pediatricians, hospitalists, pediatric sub-specialists

Audience Size: 250

Tracks: Children with Chronic Conditions | Cross-Disciplinary Pathway |
Emergency Medicine | Hospital-based Medicine

Objectives: - To describe challenges associated with emergency care of children with medical complexity - To discuss current research and initiatives designed to improve emergency care of children with medical complexity - To propose innovative solutions to promote interdisciplinary collaboration designed to improve emergency care of children with medical complexity

Description: The panel discussion will feature an interdisciplinary group of pediatricians including a general pediatrician, pediatric complex care hospitalist, pediatric emergency medicine physician, and pediatric pulmonologist to discuss the challenges faced in caring for the emergent needs of children with medical complexity across all medical settings. Children with medical complexity represent a medically and socially vulnerable group of children who require extraordinary resources to address their emergent needs. As such, collaboration and innovation across disciplines in pediatrics is essential to address the inherent challenges. The panel will briefly discuss current challenges, research, and initiatives designed to improve urgent and emergency care of children with medical complexity. As experts in the field, they will then discuss opportunities for improvement, including proposed innovative solutions that are yet to be implemented and tested. The session then will be opened for questions from the audience.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: N/A

Additional Comments: We will include 4 panelists here to achieve a truly interdisciplinary group. If this is best converted to a hot topic symposia or other forum to allow each individual to speak adequately on the topic that certainly would be welcome.

Financial Sponsor?:

Society Affiliation: APA

Participant Engagement: We will utilize the chat box to follow questions. There will be a moderator for this session who can monitor questions and pose them to the panel.

Previous Session and Conference Experience: N/A

Chairs: Jay Berry (Panelist); Ryan Collier (Moderator - Alternate); Christian Pulcini (Panelist); Ricardo Mosquera (Panelist); Dennis Kuo (Panelist); Paul Chung (Moderator - Alternate); Tamara Simon (Panelist); Rita Mangione-Smith (Moderator)

PAS 21 Meeting Scholarly Session Proposals

Proposal # : 377943

Session Title : Ventilatory Strategies on Infants with Severe Bronchopulmonary Dysplasia (sBPD)

Contact: Milenka Cuevas Guaman

Email: mile_cuevas@yahoo.com

Type: Panel Discussion

Target Audience: Clinicians and researchers interested in the ventilator management of severe BPD.

Audience Size: 40

Tracks: Children with Chronic Conditions | Cross-Disciplinary Pathway

Objectives: Describe the different invasive ventilatory strategies in infants with established severe BPD. Discuss ventilatory strategies in the outpatient setting: home ventilation.

Description: Interactive discussion with experts in the field to understand the processes and strategies for respiratory management of the infant with established severe BPD: from the inpatient to the outpatient setting. All presenters are part of the Bronchopulmonary Dysplasia (BPD) Collaborative. The BPD collaborative is made up of Institutions with multidisciplinary teams dedicated to optimizing the outcomes of infants and children with severe BPD. 3 Panelist from 3 different pediatric subspecialties and institutions.

First Dr. Kielt (Neonatology) will present a case scenario of an infant with severe BPD and the decision to place tracheostomy. Then Dr. Baker (Pulmonary) will follow with a case of infant going home with invasive ventilation and timeline follow up until decannulation to 3 years of age. Last presentation by Dr. McKinney (PICU) will review the data on ventilatory management strategies in infant with established BPD in the centers that belong to the BPD Collaborative. (Total 30 min). Then the moderator will start with reading questions that happen during the presentation and also will let the audience participate by voicing their questions, too.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: NA

Additional Comments:

Financial Sponsor?:

Society Affiliation: PAS

Participant Engagement: 3 Panelist: 2 will present a case scenario to engage the audience in the subject no more than 10 minutes each and last panelist will present the relevant data and then we will address the audience questions. The moderator will be prepare with questions and help direct the audience. The questions can be made by typing or preferred by raising hands and moderator will let participants interact and discussed with panelist. To engage audience we will use screen share, annotate shared content, send out a quick poll at the beginning of the presentation and send a summary at the end.

Previous Session and Conference Experience: NA

Chairs: Milenka Cuevas Guaman (Moderator); Matthew Kielt (Panelist); Robin McKinney (Panelist); Christopher Baker (Panelist); Leif Nelin (Moderator)

1 Speaker

Name: Matthew J. Kielt

Phone: 203-645-6050

Institution: Nationwide Children's Hospital

Email: matthew.kielt@nationwidechildrens.org

Title/Topic: Case scenario of an infant with severe BPD and the decision to place tracheostomy.

Duration: 0

2 Speaker

Name: Christopher D. Baker

Phone: 7207776181

Institution: University of Colorado School of
Medicine

Email: christopher.baker@cuanschutz.edu

Title/Topic: Case scenario of infant going home with invasive ventilation and timeline follow up until decannulation to 3 years of age.

Duration: 0

3 Speaker

Name: Robin McKinney

Phone: 9176641839

Institution: Brown University

Email: robin.mckinney@gmail.com

Title/Topic: Presentation of the data on ventilatory management strategies in infant with established BPD in the centers that belong to the BPD Collaborative.

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 377945

Session Title : Micro-management: using diagnostic stewardship to improve pediatric care

Contact: Katy Goggin

Email: kathryn.pearl.goggin@emory.edu

Type: Panel Discussion

Target Audience: Pediatric infectious disease clinicians, pediatric hospitalists, neonatologists, pediatric oncologists, pediatric ED providers

Audience Size: unknown

Tracks: COVID-19 | General Pediatrics | Hematology/Oncology | Hospital-based Medicine | Infectious Diseases | Neonatology | Scholarly Sessions

Objectives: 1. To describe a framework for appropriate use and interpretation of plasma metagenomics and pulmonary molecular assays in immunocompromised children. 2. To provide an update on the utility of various biomarkers in the evaluation of possible neonatal sepsis and possible MIS-C.

Description: This session will provide guidance on judicious utilization and accurate interpretation of infectious disease diagnostics (both novel and familiar) in a variety of different pediatric hosts.

Speakers:

1. Not as simple as a "positive Karius test": interpreting results on a continuum in immunocompromised children (Katy Goggin, Emory)
2. Biomarkers, Babies, and Bayes: Diagnosing Neonatal Sepsis (J.B. Cantey, UT San Antonio)
3. The new Biofire pneumonia panel for BAL and the immunocompromised host (Jack Schneider, Riley/Indiana)
4. Diagnostic Stewardship in Microbiology: Because you can't do everything for everyone, all the time (Christopher Doern, VCU)
5. Choosing Tests Wisely in the Era of Rule-Out MIS-C (Preeti Jaggi, Emory)

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: no anticipated conflicts

Additional Comments:

Financial Sponsor?:

Society Affiliation: PIDS

Participant Engagement: As recommended by PAS conference organizers, will arrange for live Q&A after the pre-recorded panel sessions.

Previous Session and Conference Experience: "Biomarkers, Babies, and Bayes: Diagnosing Neonatal Sepsis" will be presented at UTSA pediatric grand rounds by J.B. Cantey prior to May 2021.

Chairs: Katy Goggin (Contact Person)

1 Speaker

Name: Katy Goggin

Phone: 5054536906

Institution: Emory University School of Medicine

Email: kathryn.pearl.goggin@emory.edu

Title/Topic: Not as simple as a "positive Karius test": interpreting results on a continuum in immunocompromised children

Duration: 0

2 Speaker

Name: JOSEPH B. CANTEY

Phone: 8438141277

Institution: University of Texas Health Science
Center San Antonio

Email: cantey@uthscsa.edu

Title/Topic: Biomarkers, Babies, and Bayes: Diagnosing Neonatal Sepsis

Duration: 0

3 Speaker

Name: Jack Schneider

Phone:

Institution: Indiana University

Email: jgschnei@iupui.edu

Title/Topic: The new Biofire pneumonia panel for BAL and the immunocompromised host

Duration: 0

4 Speaker

Name: Christopher Doern

Phone:

Institution: Virginia Commonwealth University

Email: cdoern@mcvh-vcu.edu

Title/Topic: Diagnostic Stewardship in Microbiology: Because you can't do everything for everyone, all the time

Duration: 0

5 Speaker

Name: Preeti Jaggi

Phone: 614-353-2588

Institution: Emory University

Email: preeti.jaggi@emory.edu

Title/Topic: Choosing Tests Wisely in the Era of Rule-Out MIS-C

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 377971

Session Title : Leading the way: Diversity, child health, and leadership

Contact: Norman Rosenblum

Email: norman.rosenblum@sickkids.ca

Type: Panel Discussion

Target Audience: Deans (deans, vice, associate, assistant), department chairs, division directors, institute directors, faculty members, medical educators, academic clinicians and researchers

Audience Size: 100-200

Tracks: Academic and Research Skills | Advocacy Pathway | Career Development Pathway | Diversity and Inclusion

Objectives: 1. To review temporal trends in gender and racial/ethnic diversity among leaders in academic medicine and academic pediatrics. 2. To highlight strategic and programmatic efforts to increase diversity among leaders in academic medicine and analyze the impact of such efforts. 3. To identify new strategies to increase diversity among leaders in academic medicine.

Description: Over the last forty years, the diversity of medical school matriculants has increased dramatically. In the US, women represent half of medical students and the ethnic diversity of medical students has increased, but much more slowly. However, women are underrepresented among leaders who hold leadership roles such as Professor, Department Chair, and Dean. The relative lack of women and underrepresented people in leadership roles may be related to factors including lack of opportunity, lack of mentoring, discrimination, and personal preference. During this session, influential leaders in academic pediatrics and academic medicine will share insights and lessons learned, including review of the most recent data on the representation of women and diverse individuals in leadership roles and highlight programs and efforts to increase diversity among leaders. Building on institutional examples shared by the panelists, we will engage in a discussion to identify new strategies to increase diversity among leaders in academic pediatrics.

Speakers - ALL CONFIRMED

Acosta, David – AAMC

Spector, Nancy – Director, ELAM (Executive Leadership in Academic Medicine)

Walker-Harding, Leslie – University of Washington, Department of Pediatrics

Introduction and welcome, 5 minutes, Elena Fuentes-Afflick

Framing the discussion, 10 minutes, Elena Fuentes-Afflick

Diversity in academic medicine and academic pediatrics, 15 minutes, David Acosta

AAMC data on the % of female and URM leaders in academic medicine
Effective strategies to increase diversity among leaders

Strategies to increase diversity among leaders in academic medicine, 15 minutes, Nancy Spector

Leadership training options – highlight the range, give examples, particularly academic organizations

Fix the system, not the women
New organizational approaches to increase diversity

New approaches to increase diversity in academic pediatric departments, 15 minutes, Leslie Walker-Harding

Pathways to leadership: summarize pipeline and mentoring programs at the University of Washington

Questions and discussion, 25 minutes

Summary and thanks, 5 minutes, Elena Fuentes-Afflick

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: APS and SPR Plenary; Other sessions and workshops focusing on diversity and engagement.

Additional Comments: This session is sponsored by the APS' Committee on Career Support.

Financial Sponsor?:

Society Affiliation: APS

Participant Engagement: The moderator will introduce the session followed by 15 minute presentations by each of three speakers. During this time, attendees can submit their comments and questions in the chat box - these will be catalogued by the session organizer (N Rosenblum) and handed over to the moderator. After the presentations, the moderator, equipped with questions/comments submitted will moderate a discussion among the presenters. During this discussion, the session organizer will continue to track questions and comments for inclusion in the latter part of the Q&A. After an extended moderated discussion, the session will be summarized and concluded.

Previous Session and Conference Experience: This session was accepted for inclusion in the 2020 PAS.

Chairs: Elena Fuentes-Afflick (Moderator); David Acosta (Discussant); Nancy Spector (Discussant); Leslie Walker-Harding (Discussant); Norman Rosenblum (Contact Person)

1 Speaker

Name: Elena Fuentes-Afflick

Phone: 415 215 3749

Institution: UCSF

Email: elena.fuentes-afflick@ucsf.edu

Title/Topic: Framing the Discussion

Duration: 0

2 Speaker

Name: David Acosta

Phone: 2028280519

Institution: Association of American Medical Colleges

Email: dacosta@aamc.org

Title/Topic: Diversity in academic medicine and academic pediatrics

Duration: 0

3 Speaker

Name: Nancy D. Spector

Phone: 6106455636

Institution: Drexel University College of Medicine and Executive Leadership in Academic Medicine **Email:** nds24@drexel.edu

Title/Topic: Strategies to increase diversity among leaders in academic medicine

Duration: 0

4 Speaker

Name: Leslie Walker-Harding

Phone: 202-285-0030

Institution: Seattle Children's Hospital

Email: leslie.walker-harding@seattlechildrens.org

Title/Topic: New approaches to increase diversity in academic pediatric departments

Duration: 0

Proposal # : 378142

Session Title : Perfecting the Art of Extubation in Extremely Preterm Infants

Contact: Wissam Shalish

Email: wissam.shalish@mail.mcgill.ca

Type: Panel Discussion

Target Audience: Neonatologists

Audience Size: 500

Tracks: Clinical Research Pathway | Critical Care | Neonatology

Objectives: 1- To highlight the current challenges associated with extubation in extremely preterm infants 2- To review the optimal methods for weaning from mechanical ventilation in extremely preterm infants 3- To critically appraise current predictors of extubation readiness in extremely preterm infants 4- To review the optimal strategies for maximizing chances of successful extubation in extremely preterm infants

Description: In the modern era of neonatology, an increasingly smaller and more immature population is exposed to mechanical ventilation. With the known complications associated with mechanical ventilation, every effort is made to extubate extremely preterm infants as early as possible. However, a large proportion of these infants fail their extubation attempt and require reintubation, which in itself may increase morbidities. Currently, the extubation process in extremely preterm infants remains primarily guided by clinical judgment. Decisions related to weaning, assessment of extubation readiness and post-extubation respiratory support are highly variable and devoid of strong evidence to guide practices. Nevertheless, recent work in the field has shed some light into this challenging process. In this panel discussion, we will review the latest evidence regarding the optimal methods for weaning from mechanical ventilation, assessment of extubation readiness, and maximizing the chances of success.

Speaker 1: Dr. Guilherme Sant'Anna

Title: The Dilemmas Surrounding Extubation

Content: Introduce the challenges surrounding the extubation process in extremely preterm infants and presenting an overview of the objectives of this session

Duration: 15 minutes

Speaker 2: Dr. Martin Keszler

Title: Weaning from Mechanical Ventilation

Content: Review the best-available evidence for weaning from mechanical ventilation, with a focus on the optimal ventilation modalities and practical methods for effective and prompt weaning from the ventilator.

Duration: 20 minutes

Speaker 3: Dr. Wissam Shalish

Title: Assessment of Extubation Readiness

Content: Review the limitations of clinical judgment for the assessment of extubation readiness and critically appraise the accuracy of currently used predictors of extubation readiness (including spontaneous breathing trials).

Duration: 20 minutes

Speaker 4: Dr. Peter Davis

Title: Interventions to Improve Extubation Success

Content: Critical appraisal of evidence-based interventions to improve the

likelihood of successful extubation (including non-invasive respiratory support modalities, caffeine, and postnatal steroids).

Duration: 20 minutes

Speaker 5: Dr. Eduardo Bancalari

Title: Perfecting the Extubation Process in the Modern Era

Content: Wrap-up of the session with an expert-based summary of when to extubate, how to assess extubation readiness, and future directions.

Duration: 15 minutes

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: None

Additional Comments:

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: The presentations in this session will contain material that is very clinically-oriented and highly relatable to the entire neonatal community. This will hopefully allow the audience to more readily stay engaged throughout this virtual session. Furthermore, following the speakers' presentations, we look forward to a Q&A session in which we can interact with the audience, hear their thoughts and answer their questions. This may be done through questions sent via the chat function or via live stream, as determined by the PAS organizing committee. We are aware that our topic will raise a lot of interesting and at times highly divergent viewpoints, which will hopefully make the virtual session even more lively and stimulating.

Previous Session and Conference Experience: This session was not presented at another conference.

Chairs: Guilherme Sant Anna (Chair); Wissam Shalish (Chair)

1 Speaker

Name: Guilherme Sant Anna

Phone: 15144124400 x23489

Institution: McGill University Health Center

Email: guilherme.santanna@mcgill.ca

Title/Topic: The Dilemmas Surrounding Extubation

Duration: 0

2 Speaker

Name: Martin Keszler

Phone: 4012741122

Institution: Brown University

Email: MKeszler@Wihri.org

Title/Topic: Weaning from Mechanical Ventilation

Duration: 0

3 Speaker

Name: Wissam Shalish

Phone: 5149269477

Institution: McGill University Health Center

Email: wissam.shalish@mcgill.ca

Title/Topic: Assessment of Extubation Readiness

Duration: 0

4 Speaker

Name: Peter G. Davis

Phone: 61 3 83453763

Institution: Royal Women's Hospital

Email: pgd@unimelb.edu.au

Title/Topic: Interventions to Improve Chances of Successful Extubation

Duration: 0

5 Speaker

Name: Eduardo Bancalari

Phone: 3055852328

Institution: University of Miami

Email: ebancalari@miami.edu

Title/Topic: Perfecting the Extubation Process in the Modern Era

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378178

Session Title : Don't Panic! How to Incorporate Pharmacogenetic Testing into the Care of Pediatric Mental Health Disorders

Contact: Sonya Tang Girdwood

Email: sonya.tanggirdwood@cchmc.org

Type: Panel Discussion

Target Audience: Clinicians, Trainees, Faculty, General Pediatricians, Subspecialists

Audience Size: 30-50

Tracks: Adolescent Medicine | Community Pediatrics | Developmental and Behavioral Pediatrics | General Pediatrics | Genomics | Hospital-based Medicine | Mental Health | Pharmacology | Scholarly Sessions

Objectives: By the end of the session, attendees will be able to: 1. Gain familiarity in the common types of pharmacogenetic testing available in various pediatric mental health disorders and their benefits and pitfalls, and know the resources they can use to personalize therapy based on testing results 2.

Recognize the broad scope of research, from basic science to translational to clinical implementation, being conducted in the field of pharmacogenetics in pediatric mental disorders and the knowledge gaps that still remain 3.

Appreciate the need for a multidisciplinary team, including physicians, pharmacists and basic scientists, to implement pharmacogenetic testing, interpret results, and recommend individualization of personalized therapy in the management of pediatric mental health disorders

Description: Personalized medicine is a National Institutes of Health major initiative and focuses on delivering the right treatment to the right patient at the right time instead of a one-size-fits-all approach. Although pediatricians excel at patient-centered care and weight-based dosing, few other data are incorporated into dosing decisions for children. Pharmacogenetics is the study of how the genetic makeup of a person influences the response to drugs and is an essential pillar to advancing personalized medicine. Advances in pharmacogenetic testing have been made in the field of pediatric psychiatry to provide individualized management of common mental health disorders. As the number of children and adolescents who require treatment for mental health is on the rise, general pediatricians are expected to initiate and titrate psychotropic medications. However, many pediatricians have not received formal training on pharmacogenetic testing, and are unaware of the tests available, the indications for testing, the limitations to test interpretation, and how to adjust therapy based on findings. In this panel discussion, attendees will hear from experts on the current state of pharmacogenetic testing in drugs commonly used in pediatric mental health disorders and how to implement testing clinically in their practice. This session will include discussion of each specific topic throughout, as well as broad discussion based on audience questions and/or sample cases from the presentation team.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: Sunday

Conflicting Sessions: Pharmacology sessions

Additional Comments:

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: We would like to use polls to assess the audience's level of knowledge of pharmacogenetics when prescribing medications for mental health disorders. We would also to have a Q&A session.

Previous Session and Conference Experience: N/A

Chairs: Sara Van Driest (Chair); Sonya Tang Girdwood (Chair); Erika Nurmi (Panelist); Jacob Brown (Panelist); Laura Ramsey (Panelist); Katelyn Rossow (Panelist)

1 Speaker

Name: Sara Van Driest **Phone:** 6159362425
Institution: Vanderbilt University Medical Center **Email:** sara.van.driest@vanderbilt.edu
Title/Topic: Pharmacogenetic testing: a general pediatrician's perspective
Duration: 0

2 Speaker

Name: Erika Nurmi **Phone:** 3102065471
Institution: UCLA **Email:** enurmi@g.ucla.edu
Title/Topic: Pearls and pitfalls for pharmacogenomic testing in the treatment of autism, ADHD, anxiety, and depression
Duration: 0

3 Speaker

Name: Jacob T. Brown **Phone:** 218-726-6028
Institution: University of Minnesota **Email:** jtbrown@d.umn.edu
Title/Topic: Is it time to pay attention to genetic testing results when prescribing stimulants?
Duration: 0

4 Speaker

Name: Laura Ramsey **Phone:** 5138038963
Institution: Cincinnati Children's Hospital Medical Center **Email:** laura.ramsey@cchmc.org
Title/Topic: Can a genetic test result make me less anxious about prescribing this SSRI?
Duration: 0

5 Speaker

Name: Katelyn Rossow **Phone:**
Institution: Vanderbilt University Medical Center **Email:** kataelyn.rossow@vumc.org
Title/Topic: Antipsychotics, Genes, and Drug Response – finding the useful data among the crazy contradictions
Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020 Proposals

Proposal # : 378179

Session Title : An Immature Science: Caring for Infants Born at ≤ 23 Weeks' Gestation

Contact: Matthew Rysavy

Email: matthew-rysavy@uiowa.edu

Type: Panel Discussion

Target Audience: Clinicians, clinical researchers, basic scientists, and policy makers interested in the care and outcomes of extremely premature infants. The exploration of international similarities and differences in care makes PAS an ideal setting.

Audience Size: 200+

Tracks: Clinical Bioethics | Clinical Research Pathway | Epidemiology & Health Services Pathway | Global Neonatal & Children's Health | Neonatology | Scholarly Sessions

Objectives: 1. Describe the changing clinical landscape for the care and outcomes of infants born ≤ 23 weeks' gestation 2. Highlight research supporting approaches to care for these infants from around the world, including data from centers in Sweden, Germany, Japan, and the United States 3. Identify important areas of uncertainty in the care of infants born ≤ 23 weeks' gestation that require further research

Description: Since 2014, active treatment of infants born at 22 weeks' gestation in the U.S. has doubled (from 26% to 58% of livebirths). The clinical landscape continues to change around the world, with growing interest in lay media and debates about the benefits, costs, and ethics of providing intensive care for these patients. Less frequently discussed is *how* to provide care. In many areas of clinical management, including cardiorespiratory support, skin care, fluid maintenance, and nutrition, infants born at ≤ 23 weeks' gestation are unlike more mature infants. Concerns have been raised that increasing rates of intensive care without recognition of the unique characteristics of this patient group may result in substantial harm.

In this interactive setting, clinicians from four groups with among the highest published rates of survival at 22 weeks ($>50\%$ of inborn live births) will present the science of caring for pediatrics' youngest patients. Discussants will describe approaches from Sweden, Germany, Japan, and the United States and the clinical, translational, and basic science that supports them -- both what is known and what requires further study.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Neonatal Clinical Trials

Additional Comments: This session was accepted for presentation at PAS 2020 (course number 1100) but was cancelled due to the COVID-19 pandemic.

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: Propose to use audience polling feature, if available, for questions about management at beginning of each of 4 sections. Will have 5 minutes discussion after each presentation, which is built into requested durations.

Presentations will be followed with a panel Q&A of 15 minutes facilitated by Drs. Erik Normann and Edward Bell.

Previous Session and Conference Experience: N/A

Chairs: Edward Bell (Chair); Erik Normann (Chair); Matthew Rysavy (Contact Person)

1 Speaker

Name: Matthew A. Rysavy

Phone: (319) 384-1571

Institution: University of Iowa

Email: matthew-rysavy@uiowa.edu

Title/Topic: Introduction: The Changing Landscape of Care, Survival, and Neurodevelopmental Outcomes at ≤ 23 Weeks' Gestation

Duration: 0

2 Speaker

Name: Johan Agren

Phone: +46186115987

Institution: Uppsala University

Email: johan.agren@kbh.uu.se

Title/Topic: Skin Immaturity, Fluids and the Care Environment

Duration: 0

3 Speaker

Name: Andre Oberthuer

Phone: 004922147898086

Institution: University of Cologne, Children's Hospital

Email: andre.oberthuer@uk-koeln.de

Title/Topic: Delivery Room Management of Infants ≤ 23 Weeks' Gestation

Duration: 0

4 Speaker

Name: Satoshi Kusuda

Phone: +819030351871

Institution: Kyorin University

Email: kusuda-satoshi@umin.ac.jp

Title/Topic: Extremely Premature Cardiac Adaptation

Duration: 0

5 Speaker

Name: Jonathan M. Klein

Phone:

Institution: University of Iowa

Email: jonathan-klein@uiowa.edu

Title/Topic: Caring for the Most Immature Lungs

Duration: 0

6 Speaker

Name: Carl Backes

Phone: 614-264-6374

Institution: Nationwide Childrens Hospital

Email: carl.backesjr@nationwidechildrens.org

Title/Topic: Summary: Critical Unanswered Questions

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378190

Session Title : Neonatal Cardiac Surgery: Little Details that make a Big Difference

Contact: John Costello

Email: costello@muscc.edu

Type: Panel Discussion

Target Audience: Clinicians, including but not limited to obstetricians, neonatologists, intensivists, cardiologists, anesthesiologists, cardiac surgeons, palliative care/ethics, and general pediatricians.

Audience Size: 300

Tracks: Cardiology | Clinical Research Pathway | Critical Care | Neonatology | Palliative Care

Objectives: - To summarize new data regarding the impact of the maternal and fetal environment on neonatal cardiac surgical outcome - To inform clinicians about the important association between gestational age at birth and outcomes following neonatal cardiac surgery, particularly for babies born at early term. - To discuss new data regarding birth weight and outcomes after neonatal cardiac surgery - To provide an ethical context for shared-decision making for babies with a major cardiac defect as well as noncardiac anomalies & genetic syndromes. - To summarize evolving data regarding timing of neonatal cardiac surgery and outcomes - To provide a senior surgeon's perspective when faced with a neonate who needs cardiac surgery and has noncardiac risk factors.

Description: Although outcomes are improved compared to prior eras, neonates with critical congenital heart disease continue to experience substantial morbidity and mortality. Emerging data indicate that several noncardiac and at times subtle patient characteristics have a major impact on outcomes. How we accurately quantify the impact of these characteristics and share that information with parents is an important avenue of continuing research. With a team of clinical investigators from leading cardiac programs in the United States whose research is focused on these issues, we propose a series of brief presentations by each speaker, followed by a few complex case discussions with audience response Q&A.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Other pediatric cardiology sessions

Additional Comments: None.

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: Following the speaker presentations, complex cases will be presented and commented on by the speakers. Participants will have the opportunity to submit comments, questions, and utilize an audience response system to gauge participants' opinions regarding patient management.

Previous Session and Conference Experience: n/a

Chairs: Andrew Atz (Moderator)

1 Speaker

Name: Jill J. Savla

Phone:

Institution: University of Pennsylvania

Email: jjsavla515@gmail.com

Title/Topic: Impact of an Adverse Maternal Fetal Environment on Neonates with Critical Congenital Heart Disease

Duration: 0

2 Speaker

Name: John M. Costello

Phone: (843) 792-9570

Institution: Medical University of South Carolina

Email: costello@musc.edu

Title/Topic: Gestational Age at Birth and Outcomes following Neonatal Cardiac Surgery: Every Week Matters

Duration: 0

3 Speaker

Name: Martina A. Steurer

Phone:

Institution: UCSF

Email: steurermullerm@peds.ucsf.edu

Title/Topic: Almost Average Doesn't Cut It: New Data on Birthweight & Outcomes Following Neonatal Cardiac Surgery

Duration: 0

4 Speaker

Name: Angira Patel

Phone:

Institution: Northwestern Feinberg School of Medicine

Email: AnPatel@luriechildrens.org

Title/Topic: My Baby has a Major Heart Defect....and Another Problem?!?! Counseling Parents when there are Unknowns

Duration: 0

5 Speaker

Name: Andrew Smith

Phone:

Institution: Vanderbilt University School of Medicine

Email: andrew.h.smith.1@vumc.org

Title/Topic: Wait til next week? Timing of Surgery for Neonates with Critical Congenital Heart Disease

Duration: 0

6 Speaker

Name: Minoo N. Kavarana

Phone:

Institution: Medical University of South Carolina

Email: kavarana@musc.edu

Title/Topic: Putting it All Together: Surgical Decision-making for Babies with Noncardiac Risk Factors

Duration: 0

Proposal # : 378195

Session Title : Bringing Clarity to the Grey Zone: Decision Making and Treatment Options in Necrotizing Enterocolitis Totalis

Contact: Abigail Martin

Email: abigail.martin@nemours.org

Type: Panel Discussion

Target Audience: Neonatologists, Neonatal Nurse Practitioners, Pediatric Palliative Care Physicians, Pediatric Surgeons, Pediatric Gastroenterologists, Ethicists

Audience Size: 150

Tracks: Clinical Bioethics | Cross-Disciplinary Pathway | Gastroenterology/Hepatology | Neonatology | Palliative Care

Objectives: At the end of this presentation learners should be able to: 1. Describe the problems associated with using the term "NEC Totalis" 2. Present accurate information about the prognosis of babies with NEC Totalis to parents 3. Discuss how the ethical spectrum of "impermissible-permissible-obligatory" treatment options applies to cases of NEC Totalis 4. Understand how "Palliative Paternalism" can be used to help parents make appropriate decisions in cases of NEC Totalis.

Description: Fulminant necrotizing enterocolitis that leads to NEC totalis presents unique challenges for medical teams caring for neonates due to the rapid deterioration of these infants and the profound implications the diagnosis has for the babies and families. In the worst case scenario, a baby with NEC totalis experiences irreversible sepsis and multisystem organ failure leading to death. In the best case scenario, the baby survives but is then dependent on long-term TPN, with all of the repercussions this has for the family caring for this baby. We present a case study of NEC totalis and attempt to provide guidance from a multidisciplinary perspective of what therapeutic and palliative options are appropriate to offer families in the era of the possibility of long term TPN as a means for these babies to survive but remain technology dependent. In the moment that parents are faced with the possible impending death of their baby from NEC totalis, they can often only concentrate on whether their child will live or die, unable to comprehend the consequences that accompany survival with resulting short bowel syndrome. This manifests in requests to "do everything" or "just save my baby." In the absence of other significant comorbidities, we propose that at the time of initial operative exploration in which NEC totalis is confirmed, surgeons and neonatologists consider whether it is possible to delay a definitive decision about resection versus comfort care only by 12-48 hours by closing the abdomen but continuing full medical care. Giving the parents 12-48 hours to reflect on the true implications of short bowel syndrome and long term TPN may allow them to more fully reflect on what their true goals of care are in regards to quality of life for their baby, rather than focusing solely on the question of life versus death. Furthermore, should the family decide to proceed with resection at the time of a second operation, ongoing discussions regarding quality of life on long term TPN are appropriate and should be encouraged. We propose that it is ethically permissible for parents to revisit their decision and later withdraw TPN if on further reflection they determine that long term TPN is not compatible with what they believe to be in the best interests of their baby. Our panel consists of specialists from Neonatology, Pediatric Surgery, Intestinal Failure and Transplantation, Ethics, and Palliative Care. Each speaker will approach the problem of how to assist families make such a complicated decision from the perspective of their specialty. We plan to close with a question and answer session to allow for open discussion of this topic.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Ethics, Neonatology, Palliative Care

Additional Comments: Although we have previously presented this to an audience of general pediatric surgeons, we believe that this topic has equal applicability for neonatologists, gastroenterologists, ethicists, and palliative care specialists. We hope that PAS will allow us to reach a more multidisciplinary audience for this important topic.

Financial Sponsor?:

Society Affiliation: NASPGHAN

Participant Engagement: During our presentation we plan to include a "Poll Everywhere" option that participants can access using their smart phones in order to gauge audience opinions at different points during the presentation. We also hope to have a chat option on the presentation platform so that audience members can submit questions that will then be discussed by the panel members on the live feed.

Previous Session and Conference Experience: We previously presented this symposia at the AAP NCE Section on Surgery November 4, 2018. The The presentation used a similar outline as the one proposed here. The audience was mostly general pediatric surgeons, and overall the session was very well received.

Chairs: Abigail Martin (Organizer)

1 Speaker

Name: Charles Vinocur

Phone: 302-651-5888

Institution: Nemours/A.I. duPont Hospital for Children

Email: charles.vinocur@nemours.org

Title/Topic: Moderator

Duration: 0

2 Speaker

Name: Kevin M. Sullivan

Phone: 302-377-0718

Institution: Al duPont Hospital for Children/Thomas Jefferson University

Email: kevin.m.sullivan@nemours.org

Title/Topic: Case Presentation

Duration: 0

3 Speaker

Name: Katerina Dukleska

Phone: 2013497917

Institution: Connecticut Children's

Email: kdukleska@connecticutchildrens.org

Title/Topic: NEC-Totalis Literature Review

Duration: 0

4 Speaker

Name: Abigail E. Martin

Phone: 302-651-4889

Institution: Nemours/A.I. duPont Hospital for Children

Email: abigail.martin@nemours.org

Title/Topic: The Intestinal Rehabilitation Perspective

Duration: 0

5 Speaker

Name: Jonathan M. Miller

Phone: 3026507698

Institution: Nemours

Email: jonathan.miller@nemours.org

Title/Topic: NEC-Totalis: Ethical Perspective

Duration: 0

6 Speaker

Name: Carly Levy

Phone: 302-494-5239

Institution: Nemours

Email: clevy@nemours.org

Title/Topic: The Palliative Care Perspective

Duration: 0

7 Speaker

Name: Loren Berman

Phone: 302-651-5888

Institution: Nemours/A.I. duPont Hospital for Children

Email: loren.berman@nemours.org

Title/Topic: Discussant

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020 Proposals

Proposal # : 378254

Session Title : Hospitalists Scope of Practice: What They Do and What They Shouldn't Do (and what they are doing during COVID)

Contact: Daniel Rauch

Email: darauch@aap.net

Type: Panel Discussion

Target Audience: All providers of hospital based care.

Audience Size: 100

Tracks: Community Pediatrics | COVID-19 | Emergency Medicine | General Pediatrics | Hospital-based Medicine | Well Newborn

Objectives: Discuss current scope of care Discuss how current care falls within the PHM certification Discuss potential implications of PHM certification on scope of care

Description: In November 2019 the first PHM certification exam was administered, minting the first group of ABP certified Pediatric Hospitalists. Much is known about the current clinical roles served by hospitalists. However, the scope of clinical practice varies tremendously from general inpatient pediatric floor care to the intensive care units (neonatal and pediatric), newborn nursery, subspecialty inpatient care, surgical co-management, delivery room, sedation, complex care, and the emergency department. Prior to formal recognition of PHM by the ABP, the term hospitalist seemed to apply to everyone who worked in a hospital who did not have another certification beyond general pediatrics. The purpose of this session is to discuss the current scope of PHM practice and where, if at all, the edges of that practice should be. Absent delineation of scope and as several pediatric subspecialties workforce and trainees numbers decline, pediatric hospitalists have been and maybe further pushed into filling those gaps. Pediatric hospitalists have been at the forefront in providing value based care and have taken the lead in many quality improvement initiatives at hospitals around the country. These qualities and more make pediatric hospitalists a valued commodity as they fill these varied roles within the hospital. The presenters represent division leaders of groups with broad scopes of practice, a community hospitalist who covers the DR to ER, and the co-chair of the AAP Section on Hospital Medicine Neonatal Hospitalists sub-committee. Additionally all presenters can comment on even wider expansion of practice during the COVID surge.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: PHM SIGs, PHM plenaries

Additional Comments:

Financial Sponsor?:

Society Affiliation: PHM

Participant Engagement: All presenters are experienced giving talks to national audiences. They are skilled in making their presentations concise and interesting. The significant interaction will be during the Q&A. Again, all the presenters are experienced panelists and Dr. Rauch has moderated many times.

Previous Session and Conference Experience: This session was accepted for presentation at PAS 2020

Chairs: Daniel Rauch (Contact Person); Ricardo Quinonez (Panelist); Michael Bryant (Panelist); Melissa Mauro-Small (Panelist); Arun Gupta (Panelist)

1 Speaker

Name: Daniel A. Rauch
Institution: Tufts Children's Hospital
Title/Topic: Introduction and background
Duration: 0
Phone: 617-636-7243
Email: darauch@aap.net

2 Speaker

Name: Ricardo Quinonez
Institution: Baylor College of Medicine
Title/Topic: Roles of the hospitalist in a tertiary care center 1
Duration: 0
Phone: 713-240-7908
Email: raquinon@texaschildrens.org

3 Speaker

Name: Michael Bryant
Institution: Children's Hospital of Los Angeles
Title/Topic: Roles of the hospitalist in a tertiary care center 2
Duration: 0
Phone: (323) 361-6265
Email: mbryant@chla.usc.edu

4 Speaker

Name: Melissa Mauro-Small
Institution: Tufts Children's Hospital
Title/Topic: Roles of the hospitalist in a community hospital
Duration: 0
Phone: 617-774-9965
Email: melissa.maurosmall@gmail.com

5 Speaker

Name: Arun Gupta
Institution: Stanford University
Title/Topic: Roles of the hospitalist in newborn care
Duration: 0
Phone: 650-961-7574
Email: agup@stanford.edu

6 Speaker

Name: Daniel A. Rauch
Institution: Tufts Children's Hospital
Title/Topic: Discussion/Q&A
Duration: 0
Phone: 617-636-7243
Email: darauch@aap.net

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 378316

Session Title : Global Health State-Of-The-Art Update PART 2: International Partnerships during the COVID-19 pandemic - Innovations and Outcomes for Child and Adolescent Health

Contact: Suzinne Pak-Gorstein

Email: spakgor@uw.edu

Type: Panel Discussion

Target Audience: Physicians, Fellows, Residents, Students interested in global health and response to COVID-19

Audience Size: 500

Tracks: Academic and Research Skills | Adolescent Medicine | Community Pediatrics | COVID-19 | Cross-Disciplinary Pathway | Education Pathway | Global Neonatal & Children's Health | Health Equity/Social Determinants of Health | Immigrant Health | Public Health | Scholarly Sessions

Objectives: The learning objectives for this session are: 1. Review the types approaches that international partnerships have implemented to protect child and adolescent health during COVID-19 pandemic 2. Describe specific international partnerships that build resilience and capacity among communities in LMICs to protect child health 3. Identify pitfalls to avoid and innovations to explore when partnering to support child health in LMICs during the COVID-19 pandemic 4. Outline research and educational priorities for protecting child health in LMICs during the COVID-19 pandemic

Description: As the COVID-19 pandemic expands in low and middle-income countries (LMICs) governments and communities have mobilized to protect the health of infants, children and adolescents. While initially weakened by the shut-down of the flow of goods, services, and international travel, pre-existing international coalitions have responded by strengthening local capacity, supporting COVID research, and providing on-line educational opportunities. International experts in this session will describe how international partnerships have adapted to challenges posed by the COVID pandemic to innovate and support child and adolescent health in LMICs.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Global health, Immigrant health, Telehealth Health Equity

Additional Comments:

Financial Sponsor?:

Society Affiliation: FOPO

Participant Engagement: This facilitator will invite participants to ask questions using the Q/A feature directed to each speaker that will be summarized for the speakers to respond. A Chat box will also allow participants to engage real time with each other, and will be monitored by the facilitators. The chat box would also allow speakers and facilitators to share links to more resources and share contacts as needed. Slides will be presented by each speaker. If available, the polling feature would allow the facilitator to poll questions such as the proportion of participants who are international (Africa/Asia, etc), and how many are from North American sites (US, Canadian).

Previous Session and Conference Experience: As representatives of GH at PAS (currently through CCGCH) we have been presenting GH sessions at the PAS for over a decade.

Chairs: Suzinne Pak-Gorstein (Chair); Zulfiqar Bhutta (Chair); Rajiv Bahl (Panelist); Meghan Azad (Panelist); Maneesh Batra (Panelist); Ruth Nduati (Panelist); James Callahan (Panelist); Lumaan Sheikh (Panelist)

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 378326

Session Title : Global Health State-Of-The-Art Update Part 1: Direct and Indirect Impact of COVID-19 Pandemic on the Health of Children and Adolescents in Low and Middle-Income Countries – Solutions and Research Priorities

Contact: Suzinne Pak-Gorstein

Email: spakgor@uw.edu

Type: Panel Discussion

Target Audience: Residents, fellows, and faculty

Audience Size: 500

Tracks: Adolescent Medicine | COVID-19 | Cross-Disciplinary Pathway | Global Neonatal & Children's Health | Health Equity/Social Determinants of Health | Immigrant Health | Public Health

Objectives: 1. Describe the epidemiology of key direct and indirect impacts of COVID-19 pandemic on the health of children in low and middle income countries 2. Highlight key interventions and innovative approaches to mitigate the direct and indirect impact of COVID-19 on child health 3. Outline the evidence for effective interventions and technologies to reduce the burden of disease on children and adolescents during the COVID pandemic 4. Highlight research priorities to protect the health of children during the COVID pandemic

Description: The coronavirus pandemic threatens low and middle-income countries (LMICs) raising great concern about the direct as well as indirect impact of the coronavirus disease (COVID-19) on the health and well-being of children and adolescents. Children in LMICs constitute a high proportion of the population and may have a high prevalence of risk factors for severe lower respiratory infection such as HIV or malnutrition. Not only is their physical health impacted by COVID-19, but their countries' economies and capacity of existing health systems to manage the additional burden are compromised. Further challenges in LMICs include the inability to implement effective public health measures such as social distancing, hand hygiene, timely identification of infected people with self-isolation, and universal use of masks. Finally, significant indirect effects of the pandemic on child health are of considerable concern, including increasing poverty levels, disrupted schooling, lack of access to school feeding schemes, reduced access to health facilities, and interruptions in vaccination and other child health programs.

In this panel, international experts will describe global, country, and local responses to these challenges including community partnerships, stakeholder coalitions, and innovations. Speakers will also outline research priorities and key calls to action for the international community.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Global health, Immigrant health, Telehealth Health Equity

Additional Comments:

Financial Sponsor?:

Society Affiliation: SAHM

Participant Engagement: This facilitator will invite participants to ask questions using the Q/A feature directed to each speaker that will be summarized for the speakers to respond. A Chat box will also allow participants to engage real time with each other, and will be monitored by the facilitators. The chat box would also allow speakers and facilitators to

share links to more resources and share contacts as needed. Slides will be presented by each speaker. If available, the polling feature would allow the facilitator to poll basic questions such as the proportion of participants who are international (Africa/Asia, etc), and how many are from North American sites (US, Canadian).

Previous Session and Conference Experience: Our global health group (currently named CCGCH) has presented scientific sessions at PAS for over a decade.

Chairs: Zulfiqar Bhutta (Chair); Suzinne Pak-Gorstein (Chair); Luwei Pearson (Panelist); Anuradha Gupta (Panelist); Michael Levin (Panelist); Quarraisha Abdool Karim (Panelist)

PAS 21 Meeting Scholarly Session October 9, 2020 Proposals

Proposal # : 378368

Session Title : *Improving care in the emergency department for children with sickle cell disease: current recommendations and innovative processes to overcome barriers*

Contact: Corrie Chumpitazi

Email: corriec@bcm.edu

Type: Panel Discussion

Target Audience: Residents, Fellows, Faculty, Administrators

Audience Size: 50-200

Tracks: Academic and Research Skills | Advocacy Pathway | Emergency Medicine | General Pediatrics | Health Equity/Social Determinants of Health | Hematology/Oncology | Hospital-based Medicine | Public Health | Quality Improvement/Patient Safety

Objectives: 1) To describe the state of sickle cell care and current gaps in emergency management 2) To disseminate published recommendations on the care of sickle cell disease in the acute care setting 3) To review innovative interventions used to improve ED care delivery for SCD 4) To describe how to harness quality improvement methods and local resources to identify areas to improve care and monitor care metrics to measure impact of quality improvement.

Description: This didactic will begin with a brief overview of sickle cell disease, specifically the impact that sickle cell disease has on expected lifespan and the importance of our as pediatricians. We will review the recommendations that pertain to the acute management of sickle cell disease, published by ASH in 2020 and NHLBI in 2014. Proposed presenters will describe some successful quality interventions that have been implemented in their EDs that positively impacted the delivery of care to patients with SCD. The initiatives included early administration of pain medication, use of ED-Heme partnerships to facilitate conversation between the emergency department, acute setting and following discharge, development of multidisciplinary care team meetings, low dose ketamine for pain and more. Attendees will then hear the perspective of a patient and highlight the fact that the metrics we measure and deem important do not always align with those important to patients and their families. Small group discussions, each led by one of the presenters, will identify potential interventions that can be implemented at the participants' home institutions. In the final five minutes, the team will present resources that may assist in the quality improvement process and ultimately care delivery, including the Emergency Department Sickle Cell Care Coalition, a national organization dedicated to improving the ED care for SCD. Participants will be encouraged to share contact information with each other and presenters will provide theirs as well to aid in communication and collaboration.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: None

Additional Comments:

Financial Sponsor?:

Society Affiliation: AAP

Participant Engagement: We with you the chat box, and polling feature if available.

Previous Session and Conference Experience: We hope to cover the continuum of care provided for patients with pediatric sickle cell disease.

Chairs: Corrie Chumpitazi (Organizer); David Brousseau (Panelist); Patricia Kavanagh (Panelist); Titilope fasipe (Panelist)

1 Speaker

Name: David C. Brousseau **Phone:** 414-266-2625
Institution: Medical College of Wisconsin **Email:** dbrousse@mcw.edu
Title/Topic: Harnessing quality initiatives to improve care in patient with sickle cell disease
Duration: 0

2 Speaker

Name: Patricia Kavanagh **Phone:** 617-414-3573
Institution: Boston University/Boston Medical Center **Email:** Patricia.Kavanagh@bmc.org
Title/Topic: NHLBI guidelines, how do we get to adherence?
Duration: 0

3 Speaker

Name: Titilope fasipe **Phone:** 832 824 1000
Institution: Baylor College of Medicine **Email:** taishola@texaschildrens.org
Title/Topic: Optimizing communication with Hematology
Duration: 0

4 Speaker

Name: Corrie E. Chumpitazi **Phone:** 8328241353
Institution: Baylor College of Medicine **Email:** corriec@bcm.edu
Department of Pediatrics
Title/Topic: Harnessing Private-Organizational Partnerships to improve care in Sickle Cell Disease
Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 378402

Session Title : Deprescribing Psychotropic Medications for Youth: A Transdisciplinary Perspective

Contact: Deborah Davis

Email: deborah.davis@louisville.edu

Type: Panel Discussion

Target Audience: primary care physicians, advanced practice nurses, trainees, psychologists, developmental and behavioral pediatricians

Audience Size: 25

Tracks: Community Pediatrics | Cross-Disciplinary Pathway | Developmental and Behavioral Pediatrics | Mental Health | Quality Improvement/Patient Safety

Objectives: 1. Participants will be able to identify reasons to consider deprescribing of psychotropic medications in children and adolescents. 2. Participants will be able to design a deprescribing plan to systematically evaluate regimens of psychotropic medications. 3. Participants will describe how to access toolkits and resources to guide deprescribing activities.

Description: Rates of pediatric psychotropic polypharmacy have increased over the last 20 years despite little evidence on efficacy and safety in this population. Deprescribing is a systematic process of evaluating each medication an individual takes by considering indications, level of evidence, risks, benefits, and patient/family voice. The idea originated in the geriatric literature. The concept can be applied to the rational use of psychotropic medications for children and youth with a goal of finding the minimum dose and number of medications to appropriately and safely treat mental health conditions. This panel discussion will introduce and define the process of deprescribing psychotropic medications in youth to pediatricians by cross-disciplinary professionals including general pediatrics, child psychiatry, pediatric pharmacy, nursing, and research. After an introduction of the background and need for deprescribing, the panelists will provide discipline-specific input into the development, implementation, and dissemination of the methods including a systematic process of evaluating each medication for indications, levels of evidence, risks, and benefits. The panelists will identify particular environments and periods when deprescribing can occur and describe barriers and facilitators to implementing the process in different groups such as children in foster care, adolescents, and younger children as well as from different professionals' viewpoints. Specific steps in implementing the plan to deprescribe individual medications will be reviewed along with the clinical follow-up necessary to monitor safety and adherence. Participants will be provided resources that they can apply in their own practices.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: behavioral/mental health, DBP

Additional Comments: Our research team is developing a deprescribing psychotropic medication program for pediatricians in our state and have developed tool kits and outreach materials to share with PCPs. Two members of our team are board certified child psychiatrists the Department of Pediatrics with extensive experience with and enthusiasm for integration of mental health in primary care offices. We have given many lectures and training session to pediatricians and trainees in our University on effective treatment of mental health disorders. Finally, our research team will be presenting multiple training

sessions throughout the region on this topic. This work is part of a current State-University Partnership contract for which the panel Chair person is the PI. All members of the panel are on the current contract and most have participated for the last five years. Our team has published on the epidemiology of and factors associated with psychotropic medication use, including polypharmacy, in children. We have worked on a variety of quality improvement initiatives around safeguarding multiple classes of medications during our multiple contract periods. The Discussant, who will also serve on the panel, is the Medical Director for our state's Child Welfare System and has been developing and implementing programs to monitor and oversee the use of psychotropic medications in youth in foster care. He has led the psychotropic medication team for the contracts. In addition, we will have a primary care pediatrician, another child and adolescent psychiatrist, a pediatric clinical pharmacist, and a research nurse and executive who has developed our research and quality improvement processes.

Financial Sponsor?:

Society Affiliation: SDBP

Participant Engagement: Participant will be able to submit questions in the chat, which will be monitored during the session.

Previous Session and Conference Experience: N/A

Chairs: Deborah Davis (Chair); William Lohr (Discussant)

1 Speaker

Name: William D. Lohr

Phone: 5020-588-0800

Institution: University of Louisville

Email: wdlohr01@louisville.edu

Title/Topic: Deprescribing for children in foster care

Duration: 0

2 Speaker

Name: Jennifer F. Le

Phone: 502-588-0800

Institution: University of Louisville

Email: jennifer.le@louisville.edu

Title/Topic: Deprescribing for child and adolescent psychiatry

Duration: 0

3 Speaker

Name: Dan Arnold

Phone:

Institution: University of Louisville

Email: dan.arnold@louisville.edu

Title/Topic: Deprescribing in primary care pediatrics

Duration: 0

4 Speaker

Name: Bethany A. Wattles

Phone: 6185583390

Institution: University of Louisville

Email: bethany.wattles@louisville.edu

Title/Topic: Deprescribing from a pharmacists perspective

Duration: 0

5 Speaker

Name: Natalie Pasquenza

Phone: 502-588-3477

Institution: University of Louisville

Email: natalie.pasquenza@louisville.edu

Title/Topic: Dissemination of deprescribing information and resources

Duration: 0

Proposal # : 378424

Session Title : Innovative Models of Care Delivery for Children and Youth in Out-of-Home Care

Contact: James Kaferly

Email: James.KaferlyIII@dhha.org

Type: Panel Discussion

Target Audience: Clinicians, Researchers, and Policy Makers

Audience Size: 100

Tracks: Adolescent Medicine | Advocacy Pathway | Child Abuse & Neglect | Children with Chronic Conditions | Community Pediatrics | General Pediatrics | Health Equity/Social Determinants of Health | Mental Health | Scholarly Sessions

Objectives: At the completion of the panel discussion, participants will be able to: 1. Identify standards of health care for children in foster care; 2. Describe successful models of health care delivery to children in foster care including funding strategies and service sustainability; and, 3. Describe challenges to and strategies for innovative and collaborative health care delivery for children in foster care including care delivery responses to counteract the impact of the COVID-19 pandemic.

Description: Reducing health disparities of foster care and its consequences is essential to promoting the health of America's children. More than 440,000 US children and youth are in foster care (YFC) with the population increasing annually since 2012¹. The majority of YFC are placed in foster care due to child maltreatment, encompassing both abuse and neglect. YFC have more physical, mental and developmental conditions compared to non-foster peers² and are less likely to have received preventive care prior to placement³. Further, YFC have unmet health needs and lack access to health care during their foster care stay⁴. Resultant health disparities for the YFC population are significant: greater risk for chronic physical and mental health conditions, unintended pregnancy, substance abuse, homelessness, incarceration, poverty and all-cause mortality.⁵⁻¹⁰ Child maltreatment sequelae, including foster care, are persistent¹¹ and costly with an annual \$2 trillion economic burden¹².

The abrupt escalation of stress during the Covid-19 pandemic disproportionately impacted YFC, exacerbating the cumulative and synergistic barriers for the YFC population to receive appropriate care; yet, innovative strategies for continued healthcare delivery can ameliorate risk. For YFC, school closure, physical distancing strategies, public health pandemic messaging, and service interruption may compound pre-existing stressors such as maltreatment, trauma, separation from parents, placement stability, in utero exposure and genetic vulnerabilities¹³. Economic instability and caregiver pressures¹⁴, compounded by health concerns during the pandemic, imposed added stressors for YFC health. Telehealth, telepsychiatry, and the use of virtual technology within child welfare and family courts, have grown during the pandemic, addressing barriers to care and facilitating innovative care delivery for this vulnerable population.

The American Academy of Pediatrics (AAP) defines foster-specific health care standards^{15,16} and distinct models of care delivery exist to achieve these standards. The AAP asserts standards for YFC health care must include: 1). care coordination; 2). comprehensive health with mental health, dental, developmental and educational assessments; and, 3). early and frequent health visits. However, receipt of health services occurs within a variety of care delivery models, including evaluation, consultation and medical home designs in order to best serve the needs of children and families. Meeting these standards during the COVID-19

pandemic required health delivery systems to adapt and innovate to meet the needs of YFC.

This panel discussion will include pediatric leaders from five communities across the US discussing their approach to providing health care to the YFC population. Panelists will describe their distinct care delivery models serving YFC, the status of services prior to implementation of their new service and resources, deficits, and strategies utilized to move forward. Discussion of these diverse models will provide attendees with a cross section of current approaches to care delivery for children in foster care, common challenges, unique hurdles, and innovative strategies to adapt to the provision of essential healthcare services to YFC during a pandemic.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: none

Additional Comments: Children and youth in foster care are a vulnerable and an underserved population; however, the population has not been a focus of prior PAS meetings. We are a group of academic pediatricians committed to foster health who seek to engage the PAS audience in rich conversation not only of care delivery but also health advocacy, disparity, equity and quality.

Financial Sponsor?:

Society Affiliation: PAS

Participant Engagement: In addition to several question and answer opportunities, we will have audience interaction and engagement through real-time polling software (i.e. Poll Everywhere, Mentimeter)

Previous Session and Conference Experience: The panelists presented before the Council on Foster Care, Adoption and Kinship Care (COFCAKC) during the 2020 AAP NCE; however, this proposal expands from the COFCAKC approach to address the COVID-19 pandemic's impact on foster health.

Chairs: James Kaferly (Contact Person)

1 Speaker

Name: Steven Blatt

Phone: 3154645831

Institution: Upstate Medical University

Email: blatts@upstate.edu

Title/Topic: Director ENHANCE Services for Children in Foster Care

Duration: 0

2 Speaker

Name: Stacy Barron

Phone: 7472103233

Institution: Olive View-UCLA Medical Center

Email: sbarron3@dhs.lacounty.gov

Title/Topic: Acting Medical Director, Department of Children and Family Services.

Duration: 0

3 Speaker

Name: Molly Berkoff

Phone:

Institution: University of North Carolina

Email: molly_berkoff@med.unc.edu

Title/Topic: Children's Health and Development Program Director

Duration: 0

4 Speaker

Name: Rachael Keefe

Phone: 832-824-7484

Institution: Baylor/Texas Children's Hospital

Email: keefe@bcm.edu

Title/Topic: Assistant Professor of Pediatrics

Duration: 0

5 Speaker

Name: James G. Kaferly

Phone: 720-280-3934

Institution: University of Colorado School of Medicine

Email: James.KaferlyIII@dhha.org

Title/Topic: Director Connections for Kids Clinic

Duration: 0

6 Speaker

Name: Hilda Loria

Phone: 8323329060

Institution: University of Texas - Southwestern Medical Center

Email: hilda.loria@gmail.com

Title/Topic: Interim Medical Director, Rees-Jones Center for Foster Care Excellence

Duration: 0

Proposal # : 378425

Session Title : Mitigating Gender Inequity in Academic Pediatrics

Contact: Erin Shaughnessy

Email: eshaughnessy@peds.uab.edu

Type: Panel Discussion

Target Audience: Faculty and trainees across the spectrum of pediatric practice

Audience Size: 200

Tracks: Diversity and Inclusion | General Pediatrics | Health Equity/Social Determinants of Health | Hospital-based Medicine | Leadership and Business Training

Objectives: 1. Describe inequities women face in academic pediatrics, including gaps in compensation, professional opportunities, and academic promotion 2. Discuss current exacerbating factors including the COVID-19 pandemic, and specific barriers facing women of color 3. Propose solutions to mitigate these inequities at the institutional, journal, and societal levels, including the role of male allies.

Description: This diverse panel will summarize known inequities facing women in academic pediatrics, including gaps in compensation, professional opportunities, and academic promotion. Panelists will explore how the current COVID-19 pandemic is exacerbating inequities, and discuss additional barriers faced by women of color. With the problem thus framed, panelists will propose strategies to mitigate gender inequities at the institutional, journal, and societal level. The essential role of male allies will be explored. Audience members will have an opportunity to interact and ask questions via live chat. Participants should leave this session armed with knowledge about the structural and social causes of gender inequity, as well as strategies to address it in their own professional environments.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Hospital Medicine platform session (if possible)

Additional Comments:

Financial Sponsor?:

Society Affiliation: PHM

Participant Engagement: Participants will be able to submit comments and questions via chat, to be reviewed and posed by the moderator.

Previous Session and Conference Experience: A similar session was presented at Pediatric Hospital Medicine 2020 Virtual, with a slightly different group of presenters. In contrast to that panel, this one aims to be more broadly applicable across all pediatric specialties.

Chairs: Erin Shaughnessy (Moderator)

1 Speaker

Name: Jennifer K. O'Toole

Phone: 513-349-1488

Institution: Cincinnati Children's Hospital Medical Center

Email: jennifer.otoole@cchmc.org

Title/Topic: Founder, Advance PHM; Program Director, Medicine-Pediatrics Residency Training Program at University of Cincinnati

Duration: 0

2 Speaker

Name: Yemisi Jones

Phone:

Institution: Cincinnati Children's Hospital Medical Center **Email:** yemisi.jones@cchmc.org

Title/Topic: Author, "Collateral Damage: How COVID-19 is Adversely Impacting Women Physicians"

Duration: 0

3 Speaker

Name: Nancy Spector

Phone:

Institution: Drexel University

Email: Nancy.Spector@drexelmed.edu

Title/Topic: Executive Director, Executive Leadership in Academic Medicine; Associate Dean for Faculty Development, Drexel University College of Medicine

Duration: 0

4 Speaker

Name: Jorge Ganem

Phone:

Institution: Dell Children's

Email: jganem@ascension.org

Title/Topic: Chair-Elect, AAP Section of Hospital Medicine Taskforce on Diversity and Inclusion

Duration: 0

5 Speaker

Name: Samir S. Shah

Phone: 5136366222

Institution: Cincinnati Children's Hospital Medical Center **Email:** Samir.shah@cchmc.org

Title/Topic: Editor-in-Chief, Journal of Hospital Medicine

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020 Proposals

Proposal # : 378432

Session Title : Creating and evaluating efforts to create an anti-racist culture at a children's hospital

Contact: John Lantos

Email: jlantos@cmh.edu

Type: Panel Discussion

Target Audience: Faculty at academic institutions who are developing, or want to develop, programs to address racism, diversity and inclusion.

Audience Size: 100

Tracks: Academic and Research Skills | Advocacy Pathway | Career Development Pathway | Cross-Disciplinary Pathway | Health Equity/Social Determinants of Health | Mental Health

Objectives: • Analyze the ways in which education and common understanding are a key starting point for success. • Describe techniques used to help people get comfortable with uncomfortable conversations • Assess the pros and cons of various methods to develop an active group of stakeholders. • Recognize the challenges of changing a deeply ingrained institutional culture.

Description: This spring, our hospital CEO responded to national events in a letter encouraging all members of the Children's Mercy family "to learn meaningful and peaceful ways to show solidarity and stand against racism and hate in all its forms." He pledged to "put the weight of our institution behind the effort to eradicate racism in our community and in our nation." The statement reflected the fact that years of commitment to equity, diversity, and inclusion in our hospital had not included effective engagement with racism. To address this problem, we enhanced existing efforts and started new programs to identify and counter racism. In this workshop, we will describe these programs and invite discussion about similar programs at other institutions. The programs include:

- Efforts to increase the racial and ethnic diversity of incoming resident cohorts;
- Quarterly monthly journal club with sessions related directly to race and racism
- Formation of an institution-wide Anti-Racism Task Force to recommend and coordinate activities
- Creating a new EVP position for Equity and Inclusion
- Reading and study groups examining the concept of Whiteness
- Hospital-wide book groups to read emerging literature on race, racism, and white fragility
- Promotion Committee project on equity, diversity, and inclusion.

Faculty who have participated in these programs, along with partnering faculty from our Office of Equity and Diversity will discuss some of the lessons that we've learned as we've developed these institutional efforts. We will also review some elements of our hospital's history that illustrate often overlooked examples of institutional racism and discuss that impact of having these events "in our DNA" as we try to change the current culture. Through interactive exercises, participants will be able to analyze the strengths, weaknesses, promises, and pitfalls of different approaches to changing institutional culture.

Agenda:

- 2 minutes: Introduction (Lantos)
- 10 minutes/5minutes discussion: Overview, History, Current Initiatives (Flores/Wimes/Cowden)
- 10 minutes/5minutes discussion: Efforts to Increase diversity among incoming residents, including ways in which we recognize that CMH is a place in which some practices could be harmful/traumatic/triggering for residents of color? We will discuss the process of self-examination that led us to recognize things that need to change before we can be a place where a more diverse group of residents would want to come? (Lewis/Smith)

- 10 minutes: Building a Pipeline: Health Science Interns and the STAR Summer Science Program at the Children's Mercy Research Institute (Chow/Foye-Fletcher Jones)
- 5 minutes: Faculty Development: The Not-So-Journal Club (Foye-Fletcher/Jones)
- 15 minutes (Audience interaction): Analysis of an Article: "Ethics Rounds - When a Patient Requests a White Doctor "(Lewis/Smith/Lantos)
- 10 minutes/5 minutes discussion: Book Clubs for Faculty and Administrators (Myers/Cowden/Lantos)
- 15 minutes: Experiences of institutional racism (Wimes/Jones/Lewis)
- 10 minutes: Standard work guidance to incorporate equity and diversity within faculty searches (Jones/ Flores)
- 20 minutes: Audience responses/ Q&A Discussion

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: diversity; policy; racism

Additional Comments: We understand that we have an unusual number of speakers and that the session could get unruly or disorganized. We will pay meticulous attention to the timeline in the agenda. The presentations will be brief and polished, and we will allow time for discussion/interaction. We believe that the "virtual" format will facilitate such programming, since brief presentations from many people are better at keeping a virtual audience engaged than are long lectures from one person. Our speakers include a Michelle Wimes, who was recently hired as EVP for Equity and Diversity. We also have many faculty who are leaders of hospital-wide initiatives. The collective experience of this group will allow participants to pick up practical tips that our faculty have learned from years of experience.

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: Many of the faculty for this session have been leading virtual discussions on these topics through the COVID-19 pandemic. We are used to engaging virtual audience. Techniques include: 1. Have faculty who are not speaking monitor the "virtual chat room" and call on participants who have left comments 2. Virtual breakout sessions in small groups to discuss journal article and books. 3. Invitation to audience members to talk about initiatives at their own hospitals, the responses to those initiatives, and lessons learned. Overall, the goal of the session is to allow participants to hear about our efforts, to tell the audience about their own efforts, and to develop best practices to address this complex and universal problem.

Previous Session and Conference Experience: Each of the faculty for this session has extensive experience leading virtual discussions of equity, inclusion, diversity and racism. We will also draw on our experiences in developing programs at our own institution. We understand that we have an unusual number of speakers and that the session could get unruly or disorganized. We will pay meticulous attention to the timeline in the agenda. The presentations will be brief and polished, and we will allow time for discussion/interaction. We believe that the "virtual" format will facilitate such programming, since brief presentations from many people are better at keeping a virtual audience engaged than are long lectures from one person. Our speakers include a EVP for Equity and Diversity and leaders of a number of hospital-wide initiatives.

Chairs: John Lantos (Discussant); Tamorah Lewis (Discussant); Chow Tiffany (Discussant); Michelle Wimes (Workshop Speaker); Angelique Foye-Fletcher (Panelist); Bridgette Jones (Panelist); Tyler Smith (Panelist); Doug Myers (Presenter); John Cowden (Discussant); Gabriela Flores (Discussant)

Proposal # : 378499

Session Title : Ethical Decisions at the Intersection of Health Care Disparities and Disaster Management

Contact: Amyna Husain

Email: ahusain5@jhmi.edu

Type: Panel Discussion

Target Audience: Pediatric Health Care Provider, Emergency Management roles, Population Health Epidemiologist and Physicians

Audience Size: 50-75

Tracks: Clinical Bioethics | Community Pediatrics | COVID-19 | Cross-Disciplinary Pathway | Emergency Medicine | General Pediatrics | Health Equity/Social Determinants of Health | Public Health

Objectives: 1. Understand the guiding principles in emergency management. 2. Examine how each social determinants of health is impacted by disasters. 3. Understand the ethical principles in conflict with emergency management. 4. Discover solutions for equitable emergency planning.

Description: Incident command systems, under emergency management are utilized during circumstances when the local systems are overwhelmed and are not sufficient to manage the event or disaster. A hallmark of a disaster is the scarcity of resources. Health resources include but are not limited to medical equipment, medications, areas available to care for victims, transport vehicles to get victims to timely care, personnel to help victims at the scene in a coordinated manor, health care providers to care for injuries or medical problems, and other support staff to provide communication, leadership, and reunification when families are disrupted. For this delicate dance to occur, protocols are built to treat everyone equally at baseline and then prioritizes basic medical needs and resource availability. The COVID-19 Pandemic has underscored a problem that has plagued disaster recovery, the asymmetric impact of disasters on a population. In this panel discussion, emergency management will be examined through a lens of social and physical determinants of the local population. Scenarios in disaster care will be presented addressing a conflict with one of each determinant. The panel will include a specialist in bioethics, disparities in health, and emergency management. Each case will be discussed by each panel expert to gain a full understanding of how the victims and population are impacted. Each panelist will be prompted with questions to gain insight into their reflections on the scenarios. The audience will be polled with each case before and after each panel discussion. A question and answer period will be available at the end of the session for audience inquires not addressed in the discussion.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: Both

Conflicting Sessions: None

Additional Comments:

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: The moderator will present scenarios to the audience and panel. Before each panel discussion, the audience will be polled with anonymous multiple choice or binary questions about their opinions on the case. The poll results will be shared with the audience. After the cases are presented and discussed, there will be time for questions for the panel on inquires that were not addressed.

Previous Session and Conference Experience: This session has not been presented previously. The cases will be presented at this submission author's interactive session in a disaster management elective for physician trainees.

Chairs: Amyna Husain (Moderator); Deanna Dahl (Panelist); Joelle Simpson (Moderator); Marie Lozon (Panelist); Nathaniel Jones (Panelist); Rachel Thorton (Moderator - Alternate)

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378587

Session Title : Creating and Sustaining Faculty Developmental Networks: Mentoring Models that Work

Contact: Elaine Schulte

Email: elschult@montefiore.org

Type: Panel Discussion

Target Audience: This panel discussion is targeted at any faculty member who is interested in learning about innovative models of mentorship programs

Audience Size: 100

Tracks: Career Development Pathway | Education Pathway | Leadership and Business Training

Objectives: 1. Describe different models of mentorship programs for faculty at every level of the continuum 2. Understand critical success factors in mentorship program design 3. Explore mentorship program outcomes and consider which model(s) may be most impactful at their own institutions

Description: Given the current epidemic of faculty burnout, many academic health centers are looking for ways to enhance engagement and provide faculty development. Fostering interpersonal relationships is one individual factor that has been suggested. Developing support networks allow for a sense of collegiality and connection that is increasingly lacking for many faculty. One model of connection that has been used successfully in the past is the traditional mentor-mentee relationship. In this setting, an older, wiser faculty mentor tells the junior mentee what to do based on his or her own interpretations and expertise. Although beneficial, traditional mentoring has its potential limitations including bias and having the mentee feel unheard. To address these limitations and emphasize the value of a support network as more effective than a singular construct, innovative models of peer mentoring have been designed.

During this panel discussion, physician directors of five faculty professional development programs will each describe their program. The first program, established in 1995, is a national/international year long, part-time national fellowship program for women across all disciplines of medicine, as well as dentistry, public health, and pharmacy, who are well established in their scholarship, have a leadership position, and are designated by their dean and other institutional leaders as someone with great leadership potential. The second program began in 2009, and is a health system-wide initiative and incorporates the role of a peer coach blended with multiple mentors across domains of interest. The third program housed in a pediatric department began in 2011 and is a blended model that utilizes a skill development curriculum, along with senior faculty facilitation and small group peer mentorship. The next department-wide program was launched in 2014, and is a mixed peer-and-senior multidisciplinary model that emphasizes group discussion on practical concepts. The final program was established inside a pediatric department in 2017, and uses a peer group model where each group consists of 3 mentees, who receive domain-specific mentorship from one mentor and oversight by one coach. All five programs have had sustained success and their various program outcomes will be presented. Audience members will have an opportunity to comment and ask questions following each presentation.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: APS Submission

Additional Comments:

Financial Sponsor?:

Society Affiliation: APS

Participant Engagement: Participants will be able to ask questions following each panelist's presentation using the chat function.

Previous Session and Conference Experience:

Chairs: Elaine Schulte (Panelist); Nancy Spector (Panelist); Andrea Sikon (Panelist); Joseph Gigante (Panelist); Corrie McDaniel (Panelist)

PAS 21 Meeting Scholarly Session Proposals

October 9, 2020

Proposal # : 378629

Session Title : Countering the "hidden curriculum" to improve the pipeline: A panel discussion on an anti-racist, pro-equity best practices in medical education and academic promotion

Contact: Umbereen Nehal

Email: usnehal@gmail.com

Type: Panel Discussion

Target Audience: students, trainees, junior faculty, senior faculty, program directors, department chairs

Audience Size: 30-200

Tracks: Career Development Pathway | Cross-Disciplinary Pathway | Diversity and Inclusion | Education Pathway | General Pediatrics | Health Equity/Social Determinants of Health | Public Health

Objectives: In this session attendees will learn how to: 1. Identify patterns that match the "hidden curriculum" in academic medicine 2. Understand best practices on improving the diversity pipeline and career success of Black, under-represented minority, LGBTQ, or disabled physicians 3. Develop personalized strategies to be anti-racist and pro-equity in order to practice respectful, effective allyship in their own settings

Description: Racism has been declared a public health crisis. Further, during, COVID-19, existing disparities have widened. Recent literature reveals that Black babies are three times more likely to die when cared for by a white pediatrician as compared to a Black pediatrician, underscoring the need for an effective pipeline for a diverse workforce. Additionally all under-represented minorities, women, LGBTQ, or those with disabilities experience bias and barriers in medical education and professional advancement. The "hidden curriculum" - where professionalism standards have an unintended consequence of disproportionately penalizing or otherizing certain students, trainees, and faculty - is known to disrupt the pipeline for much needed diversity in the physician workforce and promotion to leadership roles. In this multi-disciplinary panel with panelists ranging from medical student, to trainee, to associate dean, examples of these barriers will be elucidated to identify needed cross-cutting solutions for promoting diversity, inclusion, and equity. Best practices for both policy and individual level actions will be offered to be anti-racist, for effective allyship, and for pro-equity practices. Actionable suggestions will be made for audience members to be equipped to develop a personalized plan of action and advocacy. Audience participation will be through word clouds and polls via texting. Pre-submitted audience questions will be incorporated into the Q&A.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: N/A

Additional Comments: Two panelists are Black Americans who have lived experience of being URM in academic and healthcare settings. One panelist is openly gay. The moderator is a Muslim-American woman. Victor Ekuta is a Doximity Research Review Fellow and an MD Candidate at UC San Diego School of Medicine. He holds a B.A. in Biology and Philosophy-Neuroscience-Psychology (PNP) with a minor in Chemistry from Washington University in St. Louis. Victor is passionate about research and medical innovation and has completed several projects, including a Doris Duke Clinical Research Fellowship in Alzheimer's Disease, and competed in several medical hackathons. He is also an advocate for diversity in STEM and serves as an Academic Mentoring Seminar

Instructor for the Saturday Engineering Enrichment and Discovery (SEED) Academy program at MIT. Dr. Francis is currently an Associate Professor in the Pediatric Otolaryngology Division of the Department of Otolaryngology-Head and Neck Surgery at Kansas University Medical Center (KUMC). In addition to a busy surgical practice, Dr. Francis has a passion for educating the next generation of future physicians. Nationally, Dr. Francis is an active member of the national Otolaryngology governing body, the American Academy of Otolaryngology, Head and Neck Surgery (AAO-HNS) and Society of University Otolaryngologists (SUO), American Society of Pediatric Otolaryngology (ASPO), American Academy of Pediatrics (AAP). She has held multiple leadership roles and is the past chair of the SUO Diversity Committee and now serves on the Executive Board of SUO. With SUO, she is leading the effort to reimagine the medical student pipeline to Otolaryngology. She is an active member of both the Diversity and General Otolaryngology Education committees (AAO-HNS). On both committees, she has had an active role in the development and roll out of Cultural Competency Survey, multiple CME modules on Leadership and Cultural Competency. Patrick McLendon is a resident in critical care who is openly gay. His blogs and writing on LGBTQ issues has a following of over 25,000. He offers peer support to those who experience discrimination or harassment. He is an active leader within the BLM (Black Lives Matter) movement as well as gay pride. Umbereen S. Nehal, MD, MPH served as the Chief Medical Officer of a 14-center FQHC in NYC. She was a member of the PCORI Advisory Panel on Addressing Disparities and a co-chair of the Advisory Panel on Healthcare Delivery and Disparities Research. In addition, Dr. Nehal led a nationwide campaign as chair of the Task Force of American Muslims for Affordable Health Care and was honored by an invitation from President Barack Obama to the White House for this work. Dr. Nehal wrote the transgender surgery guidelines for the Commonwealth of Massachusetts. She has advised the Connecticut Department of Public Health on development of curriculum on medical homes for children with special needs and has co-authored national curriculum on medical homes for pediatric residents. Dr. Nehal was invited to moderate a panel discussion with then Surgeon General Regina Benjamin on the National Prevention Strategy, a multi-agency initiative designed to promote health and wellness in all policies. She was named Health Advocate of the Year and 4x named a "Top Voice" on LinkedIn including a "Top 15 Female Voices in the World."

Financial Sponsor?:

Society Affiliation: APA

Participant Engagement: Participants will be engaged through asking to text to a word cloud or polls that can be displayed onto displayed slides in real-time. Additionally, participants may submit questions ahead that can be incorporated into the Q&A. The moderator is a current MIT Sloan Fellow and has been doing online MBA education in a STEM/tech space since May 2020 so is skilled with engaging audiences via virtual platforms. The moderator also has >230K followers on LinkedIn and >5K followers on Twitter so can drive wider engagement with the session and conference.

Previous Session and Conference Experience: This exact format has not been presented previously but each of the speakers has experience in being a panelist or speaker on similar topics.

Chairs: C Francis (Panelist); Victor Ekuta (Panelist); Patrick McLendon (Panelist); Umbereen Nehal (Moderator)

Proposal # : 378635

**Session Title : Identifying Critical Social Threats in Critically Ill Children –
Considerations for Social Determinants of Health Screening in the PICU**

Contact: Erin Paquette

Email: erin.talati@northwestern.edu

Type: Panel Discussion

Target Audience: Multidisciplinary providers in the acute and critical illness settings, although content and approaches should be generalizable to less acute settings.

Audience Size: 50

Tracks: Advocacy Pathway | Critical Care | Health Equity/Social Determinants of Health | Public Health | Scholarly Sessions

Objectives: 1. Understand the impact of social determinants of health along the spectrum of critical illness. 2. Appreciate the justification for universal screening for social determinants of health in the critically ill population. 3. Identify barriers to screening for social determinants of health in the PICU and other acute care settings with increased vulnerability of patients and families. 4. Recognize the need for and methods to address appropriate screening tools for this vulnerable population.

Description: Critically ill children may be particularly vulnerable to social determinants of health (SDOH) across the continuum of illness. Substandard living conditions may predispose children to higher risk of critical disease; long-standing toxic stress may worsen illness severity; limited family and community infrastructure could hinder recovery and potentiate post-PICU morbidity. The full impact on critical illness and outcomes is poorly understood, as screening has not been widely implemented.

Universal screening for SDOH in the acute care setting is recommended by the American Academy of Pediatrics. Routine screening for social conditions impacting health and disease can be justified under Wilson and Jungner's criteria including: recognized need, clear screening objectives, a target population, evidence of effectiveness, ability to test, quality assurance, ability to minimize risks, and informed choice. Identifying socially disadvantaged children and families may improve outcomes by 1) mitigating parental stress through resource provision; 2) preventing hospital readmission and 3) decreasing morbidity after discharge by improving access to post-hospital care that meets needs of limited-resource families. Despite potential benefits, screening is not routinely done.

Several barriers to screening exist. Screening can uncover psychosocial trauma and requires training in trauma informed approaches. Time to screen can be challenging in the busy PICU setting. Clinic and community resources may vary between institutions, and identification of unmet needs with inability to provide resources could lead to unnecessary "labeling" of families. To reduce risk of and improve outcomes from critical illness, these concerns must be balanced against the need to describe the scope of the problem to generate additional resources. Identifying appropriate ways to screen is of critical importance. Using existing tools in emergent settings may be challenging, creating an opportunity for development of additional tools.

We argue a strengths-based screening approach may be an effective means of identifying needs while also increasing willingness to participate. Strengths-based tools, however, do not exist. This panel will discuss creation, validation and

implementation of a strengths-based, resilience-oriented and stakeholder-informed social history screening tool for use in the acute care setting, through multidisciplinary collaboration, including patient and family engagement.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Other Social Determinants of Health, Critical Care, Public Health sessions

Additional Comments: This panel discussion will introduce the idea of strengths based screening but will also create an interactive opportunity for the audience to help guide active development of the planned screening tool. The work presented her will continue as part of a multi-site multidisciplinary collaboration that aims to move the field of screening forward for implementable tools to provide universal screening in both clinical and research settings. The moderator/panelist for this session co-chairs a health equity task force, works on a collaborative federally supported grant to address education on social determinants of health, conducts federally supported research related to the intersection of social determinants of health and research participation, and is working collaboratively with the other members of this panel on a SDOH working group, each of whom conducts research related to SDOH within their institutions. The group is well positioned to discuss this topic in a scholarly session and to engage the audience meaningfully on what is also a cross-disciplinary spotlight topic that may be of interest to a wide variety of attendees.

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: To ensure early engagement and participation, after a brief introduction, we will use interactive audience polling to identify their chosen topics for discussion in a few domains of interest. Topics will include: 1) current knowledge and attitudes surrounding SDOH screening in an intensive care setting; 2) resource variability at participants' institutions; and 3) suggestions for methods to engage diverse stakeholders around strengths-based SDOH screening. We will utilize the following methods to engage participants virtually. After the audience selects the discussion topics, we will have the audience divide into breakout rooms for 7-10 minutes, and return to discuss their findings. A self-selected group leader will ask report out findings from breakout sessions. We will also encourage participants to use the "chat" function to disseminate interesting discussion points from breakout group sessions, as anonymous contributions may generate more discussion. If the group size does not favor breakout sessions (we would prefer groups of 4-6 for discussion), we will utilize the same methods in a large group. A panelist will moderate the chat function continuously to encourage group-wide discussion.

Previous Session and Conference Experience: The expert panelists have not presented this session at a previous conference. However, this group of individuals is comprised of pediatric intensivists and clinical researchers from different institutions working together to coordinate efforts around SDOH screening tool development and screening for a large research network, Pediatric Acute Lung Injury and Sepsis Investigators (PALISI). Additionally, two of the members of the panel (Dr. Erin Paquette and Dr. Manzi Akande) recently presented on a panel centered on their individual research related to SDOH at the PALISI 2020 Fall Conference. At that conference, Dr. Paquette and Dr. Akande were able to successfully virtually engage the audience in a lengthy discussion around SDOH, and anticipate this session will generate similar interest and discussion.

Chairs: Manzi Akande (Panelist); Erin Paquette (Moderator); Ericka Fink (Panelist); Katherine Slain (Panelist)

1 Speaker**Name:** Manzi Akande**Phone:****Institution:** University of Oklahoma Health
Sciences Center**Email:** manzi-akande@ouhsc.edu**Title/Topic:** The impact of social determinants of health across the spectrum of critical illness**Duration:** 0**2 Speaker****Name:** Erin Paquette**Phone:** 312-227-1201**Institution:** Northwestern University Feinberg
School of Medicine/Ann & Robert H Lurie Children's
Hospital of Chicago**Email:** erin.talati@northwestern.edu**Title/Topic:** A justice based argument for screening for social determinants of health across the continuum of critical illness**Duration:** 0**3 Speaker****Name:** Ericka L. Fink**Phone:****Institution:** UPMC Children's Hospital of
Pittsburgh**Email:** finkel@ccm.upmc.edu**Title/Topic:** Barriers to traditional screening tools for social determinants of health**Duration:** 0**4 Speaker****Name:** Katherine N. Slain**Phone:****Institution:** UH Rainbow Babies and Children's
Hospital**Email:** katherine.slain@uhhospitals.org**Title/Topic:** A proposal for developing a strength based screening tool for social determinants of health**Duration:** 0

PAS 21 Meeting Scholarly Session October 9, 2020 Proposals

Proposal # : 378665

Session Title : The 2021 American Academy of Pediatrics Clinical Practice Guideline for Febrile Infants 8-60days

Contact: Robert Pantell

Email: robert.pantell@ucsf.edu

Type: Panel Discussion

Target Audience: Clinicians caring for febrile infants

Audience Size: >>200

Tracks: Community Pediatrics | Epidemiology & Health Services Pathway | General Pediatrics | Health Services Research | Hospital-based Medicine | Infectious Diseases

Objectives: 1. To understand the process of guideline development 2. To become familiar with factors influencing recommendations including risk threshold, numbers needed to treat and to test, and shared decision making 3. To be able to use the guideline wisely

Description: Members of the multidisciplinary guideline committee (general pediatrics, hospital pediatrics, pediatrics emergency medicine, pediatrics infectious diseases, epidemiology, practice management, family medicine, informatics) will discuss:

1. Foundational Evidence
2. Understanding context and risk (Primary care, ED, Hospital, ID)
3. Building consensus through shared decision making
4. How recommendations should and should not be used
5. How recommendations will be evaluated
6. What is on the horizon

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: APA Plenary, Peds ID, Peds ED

Additional Comments:

Financial Sponsor?:

Society Affiliation: APA

Participant Engagement: Advance questions and questions from participants

Previous Session and Conference Experience: No

Chairs: Robert Pantell (Panelist); Kenneth Roberts (Panelist); Nathan Kuppermann (Panelist); Sean OLeary (Panelist); Charles Woods (Panelist); William Adams (Panelist)

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378670

Session Title : Interdisciplinary Insights on Burnout in Pediatrics in the Time of Covid-19

Contact: Eliana Perrin

Email: eliana.perrin@duke.edu

Type: Panel Discussion

Target Audience: junior faculty; mid-level faculty; and senior faculty.

Audience Size: 200

Tracks: Academic and Research Skills | Advocacy Pathway | Career Development Pathway | Child Abuse & Neglect | Children with Chronic Conditions | Clinical Bioethics | Clinical Research Pathway | Community Pediatrics | Core Curriculum for Fellows | COVID-19 | Cross-Disciplinary Pathway | Developmental and Behavioral Pediatrics | Diversity and Inclusion | Education Pathway | Epidemiology & Health Services Pathway | General Pediatrics | Health Equity/Social Determinants of Health | Health Services Research | Mental Health | Public Health | Quality Improvement/Patient Safety | Scholarly Sessions

Objectives: 1. Identify new stressors facing pediatricians during COVID-19 and how these overlay on prior well-documented stressors for the field 2. Trace the relationship between the pandemic, changes in workload, and stressors affecting pediatricians 3. Consider ways of improving physician wellbeing that address the root cause of stressors 4. Share how sociological frameworks can help us understand the contributions of role-strain, societal conceptions of heroism, and social networks toward burnout 5. Bring to light the different and similar types of COVID-burnout experienced by clinicians, educators, and researchers

Description: The COVID-19 pandemic has presented a kind of “double whammy” (Saleh, 2020) for pediatricians, of acute problems on top of longstanding chronic stress. Prior to the pandemic, nearly 1 in 2 general pediatricians was already burned out (Shanafelt et al., 2015). Now, pediatricians are having to balance old challenges with new ones, such as widespread office closures and reduced volume, with some clinics facing drops in patient visits by 60% or more (Gold, 2020). They are also contending with constantly changing work protocols, increased isolation and ostracization from colleagues, peers, and friends, role-juggling and competing work-family demands. Furthermore, earlier shortages of PPE, combined with societal demands for heroism have caused some physicians to feel more like martyrs than heroes, requiring them to make difficult decisions about their safety, and that of loved ones. Academic researchers have also contended with a changing landscape of what studies are allowed to continue vs. be deferred and many academic pediatricians have pivoted their work to answer key questions of the day rather than the ones they worked so hard to write grants to answer. This panel will explore these and other ways that COVID-19 is affecting pediatrician clinician attendings, residents, and researchers' health and wellbeing during the global pandemic. It will combine a range of perspectives from clinician educators, to private practice, to academic pediatrics, to sociology to consider how practicing pediatricians are experiencing the crisis—and what might be done to help improve that experience.

Works cited:

Gold, J. (2020). Pediatric Practices Struggle To Adapt And Survive Amid COVID-19. Retrieved from <https://khn.org/news/pediatric-practices-struggle-to-adapt-and-survive-amid-covid-19/>

Saleh, M. (2020). A Double Whammy: The COVID-19 Pandemic and Burnout in Medical Professionals. Retrieved from <https://leanforward.hms.harvard.edu/2020/04/09/a-double-whammy-the-covid-19->

pandemic-and-burnout-in-medical-professionals/
Shanafelt, T. D., Hasan, O., Dyrbye, L. N., Sinsky, C., Satele, D., Sloan, J., & West, C. P. (2015). Changes in Burnout and Satisfaction With Work-Life Balance in Physicians and the General US Working Population Between 2011 and 2014. *Mayo Clinic Proceedings*, 90(12), 1600-1613. doi:10.1016/j.mayocp.2015.08.023

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: burnout and covid

Additional Comments: This session includes academic pediatricians, clinical educators, a residency director who studies burnout, and a medical sociologist who studies burnout.

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: We will include "poll everywhere" type of questions to engage the audience Will allow the chat function to provide questions in real time We will have a brief Q and A session to address questions from the chat session along two-three themes

Previous Session and Conference Experience: No

Chairs: Eliana Perrin (Chair)

1 Speaker

Name: Tania M. Jenkins

Phone: 401-528-7201

Institution: University of North Carolina at Chapel Hill

Email: tania.jenkins@unc.edu

Title/Topic: Banging Pots and Pans for Healthcare Heroes: A Sociologist's Look at How Heightened Societal Expectations May be Exacerbating Burnout During COVID-19

Duration: 0

2 Speaker

Name: Jennifer DeCoste-Lopez

Phone: 919-620-5333

Institution: Duke University School of Medicine

Email: jennifer.decostelopez@duke.edu

Title/Topic: Rapid Changes in Process and Finding Meaning in the Midst of Crisis: Burnout, Resilience and Adaptation for the Primary Care Pediatrician

Duration: 0

3 Speaker

Name: M. Eichner

Phone: 919-620-5333

Institution: Duke University School of Medicine

Email: brian.eichner@duke.edu

Title/Topic: No Escape: Intersection of Family and Work Stress in a Pandemic

Duration: 0

4 Speaker

Name: Betty B. Staples

Phone: 9196842356

Institution: Duke University Medical Center

Email: betty.staples@duke.edu

Title/Topic: Alone Together: Resident Isolation During COVID-19

Duration: 0

5 Speaker

Name: Elizabeth Erickson

Phone: 9172146697

Institution: Duke University School of Medicine

Email: elizabeth.erickson@duke.edu

Title/Topic: Alone Together: Attending Isolation During COVID-19

Duration: 0

6 Speaker

Name: Eliana M. Perrin

Phone: 919-593-2100

Institution: Duke University

Email: eliana.perrin@duke.edu

Title/Topic: All Roads Lead Toward Research, Just Not the Research You Worked Hard to Get Funded, and Other Challenges for the Academic Pediatrician in a Time of Covid-19

Duration: 0

Proposal # : 377375

Session Title : Impact of the Vulnerable Preterm Heart and Circulation on Adult Cardiovascular Disease

Contact: Philip Levy

Email: philip.levy@childrens.harvard.edu

Type: State of the Art Plenary

Target Audience: All providers that care for preterm-born individuals throughout their life course (Neonatologist, General practitioners, pulmonologist, cardiologist, etc.)

Audience Size: 250

Tracks: Cardiology | General Pediatrics | Neonatology | Pulmonology

Objectives: Review the developmental vulnerabilities of the premature infants
Discuss the impact of prematurity of cardiac function and vascular performance
Highlight areas for innovation and future research that may provide mechanistic insight and guide prevention and treatment approaches.

Description: Survival rates for extremely low birth weight infants have improved dramatically over the past 10-15 years. These advances are likely to be multifactorial and relate to increased appreciation of developmental organ vulnerability, improved understanding of disease mechanisms and contributing factors, enhanced diagnostic precision and therapeutic options. Unfortunately, enhanced survival does not guarantee avoidance of neonatal morbidity or adverse long-term health care outcomes. The traditional focus of outcomes research relates to neurodevelopment and cognitive functioning. Recent evidence highlights the relationship between prematurity and increased risk of adverse cardiopulmonary health during early adulthood, even in healthy and more mature premature infants. Unfortunately, data are limited regarding the relationship of heart function or other cardiovascular illness during the perinatal period and these outcomes. There is a critical need to increase awareness of these adverse health care outcomes and establish research teams to investigate risk factors and develop preventative approaches. In this symposium, we will review the developmental vulnerability of the premature infant; discuss the impact of prematurity of right/left ventricular function and vascular performance in the pulmonary/systemic beds and highlight areas for innovation and future research that may provide mechanistic insight and guide prevention and treatment approaches.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: Saturday

Conflicting Sessions: None

Additional Comments: This proposal was accepted as a session at PAS 2020, but due to the cancellation of the in-person meeting, the session did not take place. We are hopeful that it will be accepted for PAS 2021 and feel that the topic is still extremely timely and relevant.

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: We have identified a moderator (Patrick McNamara) for this unique session. He will utilize the chat/Q&A feature on the PAS platform to identify thought-provoking/stimulating questions and topics to guide the Q&A session.

Previous Session and Conference Experience:

Chairs: Patrick McNamara (Moderator)

1 Speaker

Name: Patrick J. McNamara **Phone:** 4169881560
Institution: University of Iowa **Email:** Patrick-mcnamara@uiowa.edu
Title/Topic: Developmental Vulnerability of the extremely low Birth Weight Infant
Duration: 0

2 Speaker

Name: Philip T. Levy **Phone:** 9084200342
Institution: Boston Childrens Hospital **Email:** philip.levy@childrens.harvard.edu
Title/Topic: Moving Beyond Bronchopulmonary Dysplasia: Cardiac phenotyping in premature infants over the first year of age
Duration: 0

3 Speaker

Name: Kara Goss **Phone:**
Institution: University of Texas Southwestern **Email:** Kara.Goss@UTSouthwestern.edu
Title/Topic: Pulmonary Vascular and Right Ventricular Dysfunction in Adults Born Preterm
Duration: 0

4 Speaker

Name: Anne Monique Nuyt **Phone:**
Institution: CHU SAINTE-JUSTINE **Email:** anne.monique.nuyt@umontreal.ca
Title/Topic: Mechanisms of left ventricular changes after preterm birth: Translational experimental studies
Duration: 0

5 Speaker

Name: Adam Lewandowski **Phone:** +441865223680
Institution: University of Oxford **Email:** adam.lewandowski@cardiov.ox.ac.uk
Title/Topic: Altered preterm LV phenotype: A look across developmental stages
Duration: 0

6 Speaker

Name: Melissa Bates **Phone:** 3193359792
Institution: University of Iowa **Email:** melissa-bates@uiowa.edu
Title/Topic: Premature systemic vascular aging in survivors of preterm birth
Duration: 0

Proposal # : 377785

Session Title : Therapeutic drift in the neonatal intensive care unit – practice without evidence

Contact: Ju Lee Oei

Email: j.oei@unsw.edu.au

Type: State of the Art Plenary

Target Audience: Neonatologists, Healthcare Finance experts, Intensivists, Pediatricians, Policy makers

Audience Size: 500

Tracks: Clinical Research Pathway | Neonatology

Objectives: 1. To discuss the impact of important contemporary newborn care practices that have been adopted into everyday practice and which have lost equipoise despite lack of evidence 2. To question current practice and propose research directions to answer knowledge gaps in neonatology

Description: No area of medicine has had as much success as newborn care. Fifty years ago, more than 75% of preterm infants died soon after birth. Those that survived were left with serious complications. Now, more than 75% of preterm infants survive, including those at the limits of viability. Such astounding achievements would not have been possible without research and the rapid implementation of research findings into clinical practice. Indeed, neonatal care is now one of the most active and cost-effective fields of research in medicine.

However, therapeutic drift has crept into many areas of our practice. Based on incomplete or little substantive evidence, our current treatment of sick infants and their mothers may actually do more harm than good and there are multiple areas where equipoise has been lost, which obstructs future research and evaluation of these missing pieces of information.

In this session, we look at some of the most important practices in neonatology that are now almost universally accepted despite little evidence of benefit or harm. Collectively, the topics discussed in this session have the potential to affect every single birth in the world (>130 million each year), including ~15 million of the sickest infants affected by prematurity and hypoxia, the two single most important causes of infant mortality and disability in the world.

Specifically, our speakers will address:

Antenatal steroids: used to promote lung maturation, steroids are now given to even early term infants and sometimes, in repeated doses with questionable benefit and possible harm to neurodevelopment.

Delayed Cord Clamping (DCC) is routinely used in extremely preterm infants to promote cardiovascular stabilization thereby aiming to reduce brain injury and mortality. DCC is routinely practiced in more mature infants as well as healthy term infants with potential adverse sequelae including hyperviscosity and jaundice.

Oxygen for newborn resuscitation. Studies on hypoxic full-term infants demonstrated significantly decreased mortality when the infants were resuscitated with air compared to pure oxygen. Over the years, clinicians have moved towards using lower oxygen strategies based on these studies and others which demonstrated oxidative stress and injury with high oxygen administration. Whether lower oxygen strategies are sufficient to prevent hypoxia, especially in preterm infants with lung immaturity is uncertain.

Apnoea affects almost every premature infant. It can be successfully treated with respiratory support and caffeine. However, there remains significant variability in the timing of discontinuation of caffeine, and convalescent preterm infants continue to have episodes of intermittent hypoxemia beyond the postmenstrual age when most clinicians

stop caffeine therapy. Apnoea and intermittent hypoxemia is associated with poor neurodevelopmental outcomes but conversely, monitoring and prolonging supports like caffeine and oxygen supplementation beyond what the infant requires can do more harm than good, as well as being extremely costly.

Therapeutic hypothermia (TH) at 33.5°C for 72 hours is the only proven therapy that reduces the risk of death or disability in infants with moderate or severe encephalopathy. Today, there is an increased use of TH in infants with mild encephalopathy, following cardiac arrest and other indications that do not reflect evidence from robust randomised controlled studies.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: NIL

Additional Comments:

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: Questions and comments will be invited by chat. Discussion will be held, moderated by the chairs at the end of the presentations. Each speaker will present a 15 min talk with a 5 min discussion session after this

Previous Session and Conference Experience: Nil

Chairs: Ju Lee Oei (Contact Person); Richard Martin (Chair)

1 Speaker

Name: Alan H. Jobe

Phone: 5136368563

Institution: Cincinnati Childrens

Email: alan.jobe@cchmc.org

Title/Topic: Before birth: Can antenatal steroids do more harm than good?

Duration: 0

2 Speaker

Name: Georg Schmolzer

Phone: +17807354660

Institution: University of Alberta

Email: georg.schmoelzer@me.com

Title/Topic: At birth: Delayed cord clamping: one size fits all?

Duration: 0

3 Speaker

Name: Ola D. Saugstad

Phone:

Institution: University of Oslo

Email: o.d.saugstad@medisin.uio.no

Title/Topic: After birth: Air for newborn resuscitation: when is a little not enough.

Duration: 0

4 Speaker

Name: Eric Eichenwald

Phone: 215-590-1633

Institution: Children's Hospital of Philadelphia

Email: eichenwald@email.chop.edu

Title/Topic: In the NICU: Enough already: when can we stop caffeine and preterm cardiorespiratory monitoring.

Duration: 0

5 Speaker

Name: Seetha Shankaran

Phone: 3135804452

Institution: Wayne State University

Email: sshankar@med.wayne.edu

Title/Topic: Not only in an NICU: Therapeutic Hypothermia---Beyond Evidenced Based Medicine.

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 377803

Session Title : Racism, Police Violence, Reproductive Injustice: Ongoing Negative Effects on Child Health and Development and the Role Pediatric Clinicians Can Play

Contact: Tamorah Lewis

Email: trlewis@cmh.edu

Type: State of the Art Plenary

Target Audience: all attendees of PAS can benefit from this session

Audience Size: 300

Tracks: Advocacy Pathway | Career Development Pathway | Clinical Bioethics | Community Pediatrics | Core Curriculum for Fellows | Cross-Disciplinary Pathway | Developmental and Behavioral Pediatrics | Diversity and Inclusion | Epidemiology & Health Services Pathway | General Pediatrics | Health Equity/Social Determinants of Health | Health Services Research | Mental Health | Public Health | School and Community Health | Trainee Pathway

Objectives: At the end of the session, participants will have improved ability to: 1. Explain how racism, not race, affects child health and development 2. Summarize the negative impact of police presence, police violence and the carceral state on the health and wellbeing of children 3. Describe how a reproductive justice framework can help overcome racial and ethnic disparities in sexual/reproductive health care

Description: The dual plagues of COVID-19 and systemic racism have called into stark view the disadvantages that minoritized families and children face in daily life. As health does not occur in a vacuum, racism and its impact on the social determinants of health (SDOH) contribute to poor health outcomes. The urgent need to address and improve societal inequities is challenging the professional identity of pediatric clinicians, who must seek the knowledge and skill to bring about change. Although academic medicine has not traditionally fought against structural and systemic racism explicitly, there is no longer doubt that pediatricians and other pediatric providers must join in the fight for social justice, racial equity, and resultant health equity. Racism is a public health crisis and medicine must respond accordingly. This session will support Pediatric clinicians who wish to engage in these efforts by sharing the work of three nationally known experts in social injustice, racism and pediatric health.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: pharmacology

Additional Comments: The three speakers are not available on the weekend days Saturday, Sunday, so the session would need to take place on May 3rd or May 4th.

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: The moderator and three speakers will be available to accept / answer questions at the end of each talk, and there will be a 20 minute panel discussion, prompted by audience questions, after the three talks.

Previous Session and Conference Experience: This session has not been presented before.

Chairs: Tamorah Lewis (Chair)

1 Speaker

Name: Maria Trent

Phone: 4432878945

Institution: Johns Hopkins Medicin

Email: mtrent2@jhmi.edu

Title/Topic: Why National Medical Societies Must Speak out Against Racism to Promote Child Health

Duration: 0

2 Speaker

Name: Rhea Boyd

Phone: 3307152945

Institution: Palo Alto Medical Foundation

Email: rheaboydmd@gmail.com

Title/Topic: Racism, Police Presence, Police Violence and Child Health

Duration: 0

3 Speaker

Name: Rachel Hardeman

Phone:

Institution: University of Minnesota School of
Public Health

Email: hard0222@umn.edu

Title/Topic: "Momma!" : An exploration of the intersections of reproductive justice and police violence

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 377854

**Session Title : Prenatal Environmental Contaminants and Childhood Disease.
Latest Evidence for Epigenetic Mechanisms Associated with Transgenerational
Disease, and Public Policy Implications**

Contact: Paul Winchester

Email: paul.winchester@franciscanalliance.org

Type: State of the Art Plenary

Target Audience: Obstetrical and Pediatric practitioners, Behavioral Practitioners, Government and Industrial Representatives, Public Health Advocates and Future Mothers and Fathers

Audience Size: 200

Tracks: Academic and Research Skills | Adolescent Medicine | Advocacy Pathway | Asthma | Basic Science Pathway | Breastfeeding/Human Milk | Cardiology | Career Development Pathway | Child Abuse & Neglect | Children with Chronic Conditions | Clinical Research Pathway | Community Pediatrics | Core Curriculum for Fellows | Cross-Disciplinary Pathway | Developmental and Behavioral Pediatrics | Developmental Biology | Endocrinology | Environmental Health | Epidemiology & Health Services Pathway | Gastroenterology/Hepatology | General Pediatrics | Genomics | Global Neonatal & Children's Health | Health Equity/Social Determinants of Health | Health Services Research | Hematology/Oncology | Immigrant Health | Mental Health | Neonatology | Nephrology | Neurology | Obesity | Pediatric Nutrition | Pharmacology | Public Health | Pulmonology | Tobacco Prevention

Objectives: 1) Review epigenetic transgenerational inheritance of disease in animal data including DNA methylation, Histone retention and non-coding RNA expression after fetal exposures. 2) Review how toxicant-induced transgenerational disease may be transmitted to non-exposed third generation descendants. 3) Review human data suggestive of adverse outcomes linked to fetal exposure to pesticides and other toxicants. 4) Pathways to discovering biomolecular mechanisms of disease and to mitigation measures available now and in the future. 5) Review how practitioners basic scientists, government regulators and industry might cooperate to achieve health and wealth in this unusual moment in history.

Description: Three generational animal models now conclusively demonstrate that fetal exposure to the same environmental chemicals now found in virtually every human pregnancy is linked to multigenerational disease. The diseases range from onset of puberty abnormalities, obesity, immune disorders, cancer, polycystic ovaries, abnormal sperm, behavioral abnormalities and perinatal complications. The mechanism of transmission of disease across generations appears to be non-genetic and correlates with epigenetic changes seen in exposed offspring and their descendants. This symposium will present the latest animal data after fetal exposure to: pesticides (DDT, permethrin, vinclozolin, atrazine, glyphosate, DEET), dioxins, jet fuel, plastics, BPA, (M Skinner), The latest data on human pesticide exposures and outcomes of pregnancy: glyphosate (P. Winchester) and long term outcomes after organophosphate exposures in pregnancy (B. Eskenazi). Diseases which have been induced in third generation descendants in rodents will be compared with human disease trends and latest funded research will be reviewed. Environmental contaminants are pervasive in pregnant women, and diseases which they cause in animals are increasing in humans. Can we begin to apply what

has been learned in animals to human health (while we wait the 100 years it might take to follow a three generational human study)? Finally, we will discuss the state of governmental agencies whose mandate to protect our pregnant mothers and our children from environmental contamination. (R. Etzel).

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: No

Additional Comments: Pediatric practitioners are witness to a major change in disease prevalence ranging from preterm births, maternal mortality, obesity and metabolic syndrome, onset of puberty, childhood cancer, allergies and immune mediated diseases, reduced cognitive abilities, anxiety, depression, autism, ADHD, risk taking, infertility, and more. Are all of these increases simply the product of improved surveillance or are we witnessing higher rates of disease? Evidence is mounting that environmental contaminants may have invaded our bodies at critical times in development, altered our epigenome and reduced our great grandchildren's health. How to we build a basic science foundation for multigenerational disease? We have been able to query the genome for disease origins. Soon the epigenome will be queried as well. Are we ready? Are we even looking? Are our institutions ready?

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: Each presenter will use Power Point slides with speak-over to present their core points.

Previous Session and Conference Experience:

Chairs: Paul Winchester (Moderator); Michael Skinner (Presenter); Brenda Eskenazi (Presenter); Ruth Etzel (Presenter)

PAS 21 Meeting Scholarly Session Proposals

October 9, 2020

Proposal # : 377960

Session Title : Protecting Children from Firearm Injuries: A Continuum of Legislative Advocacy

Contact: Alexander Hogan

Email: Alexander.H.Hogan@gmail.com

Type: State of the Art Plenary

Target Audience: Broadest possible number of attendees: pediatric researchers, health services researchers, health-policy experts, clinicians, leaders of children's hospitals and health systems, and trainees interested in firearm injury prevention.

Audience Size: 500

Tracks: Advocacy Pathway | Cross-Disciplinary Pathway | Injury Prevention | Public Health

Objectives: To explore the continuum of local to federal legislative policy and how it is informed by research and grassroots advocacy.

Description: One third of United States children live in a home with a gun. Easy access to firearms leads to hundreds of intentional and unintentional pediatric deaths annually and has resulted in the United States being the world leader in pediatric firearm mortality. As the death toll mounts, and mass shootings become sadly commonplace, a groundswell of activism to change gun laws led by grassroots groups has erupted. Unfortunately, policies advocated for rarely have a strong evidence base as research into the causes and solutions to gun violence have been hamstrung by federal policy. Gun violence is a public health crisis finally beginning to get the attention it deserves.

The response to this crisis has been multifaceted. Parents and children directly affected by mass shootings have founded and championed grassroots movements to change gun culture and legislative policy. Physician scientists have begun to determine the efficacy of legislative policy reducing firearm morbidity and mortality to inform the legislators on Capitol Hill to reduce pediatric mortality. This cross-disciplinary plenary will address how patient advocates, researchers, and legislators can work together to enact evidenced based legislation to keep children out of the line of fire.

The plenary speakers will consist of 1) a gun violence survivor 2) a health services researcher expert in firearm legislation efficacy, 3) a leader of a grassroots firearm violence reduction group, and 4) a US Senator expert in firearm legislation.

Timing: 90 minutes total

5 min: Drs. Hogan and Silver--Introduction

15 min: Julvonnia McDowell--Mother of child killed by an unsecured firearm

20 min: Rebecca Cunningham, MD--Vice President of Research at the University of Michigan, Principle Investigator of the Firearm Safety Among Children and Teens Consortium.

20 min: Shannon Watts (Invited)--Founder of Moms Demand Action the largest grassroots organization in the United States dedicated to reducing gun violence.

20 min: The Honorable Christopher Murphy, United States Senate (Invited)--Senator Murphy is leading voice in the United States Senate for firearm legislation. He has sponsored numerous bills supporting gun violence reduction strategies, increasing funding for the CDC and NIH, and this year published a new book on the gun violence epidemic: The Violence Inside Us: A Brief History

of an Ongoing American Tragedy.

10 min: Drs. Hogan and Silver moderating--Question and answer session

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: "Protect Children, Not Guns" workshop if accepted

Additional Comments: Senator Murphy is listed as "invited" due to the nature of the senate schedule he cannot give a firm commitment at this time, though will likely be able to participate. If Senator Murphy is unable to participate, our alternate will be Senator Blumenthal of Connecticut who also has a long history of sponsoring firearm legislation and advocating for children.

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: In addition to the question and answer session at the conclusion of the talk, we have a plan for engaging learners watching the broadcast live and asynchronous learners watching later. During the initial broadcast of the lectures, Dr. Silver will engage with learners in the chat window. Dr. Hogan will engage viewers via Twitter both during the live session and after for those learners who are watching the plenary at a later date.

Previous Session and Conference Experience: This presentation was accepted for presentation at PAS 2020; however, it was canceled due to the pandemic. The moderators (Drs. Hogan and Silver) have presented together on gun violence prevention workshops for pediatricians for at PAS in 2018, 2019. This plenary grew out of those workshops, but is a unique session.

Chairs: Alexander Hogan (Chair); Alyssa Silver (Chair)

1 Speaker

Name: Alexander H. Hogan

Phone: 3476689842

Institution: Connecticut Children's Medical Center **Email:** Alexander.H.Hogan@gmail.com

Title/Topic: Introduction to the Plenary

Duration: 0

2 Speaker

Name: Julvonnia McDowell

Phone:

Institution: None

Email: julvonniamcdowell@gmail.com

Title/Topic: A Mother's Perspective on Firearms

Duration: 0

3 Speaker

Name: Rebecca Cunningham

Phone:

Institution: University of Michigan Michigan

Email: stroh@med.umich.edu

Title/Topic: The Association of Firearm Laws with Firearm Outcomes Among Children and Adolescents

Duration: 0

4 Speaker

Name: Shannon Watts

Phone:

Institution: Moms Demand Action

Email: zsheppard@everytown.org

Title/Topic: The Impact of Grassroots Advocacy

Duration: 0

5 Speaker

Name: Christopher Murphy

Phone:

Institution: The United States Senate

Email: Jbaird@connecticutchildrens.org

Title/Topic: The Firearm Legislative Outlook

Duration: 0

6 Speaker

Name: Alyssa H. Silver

Phone: 7187412304

Institution: Children's Hospital at Montefiore,
Albert Einstein College of Medicine

Email: alysilve@montefiore.org

Title/Topic: Question and Answer

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378147

**Session Title : NON-INVASIVE RESPIRATORY SUPPORT IN NEONATES:
CURRENT RECOMMENDATIONS**

Contact: Vineet Bhandari

Email: bhandari-vineet@cooperhealth.edu

Type: State of the Art Plenary

Target Audience: Neonatologists, Pediatric Pulmonologists, Fellows,
Residents, Respiratory Therapists

Audience Size: 500

Tracks: Academic and Research Skills | Clinical Research Pathway |
Critical Care | Neonatology | Pulmonology

Objectives: 1. To synthesize the latest information about NIPPV, NIV-NAVA, NCPAP and HFNC use in neonates. 2. To provide information about the various methods of providing NCPAP. 3. To recommend the use of the various non-invasive respiratory support in specific clinical scenarios in the NICU.

Description: This will be a state-of-the-art symposium with 4 experts discussing the 4 common modalities of non-invasive respiratory support in neonates. The speakers will summarize the latest information about each of the modalities of non-invasive respiratory support in neonates, and provide practical recommendations for its use in this population.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Neonatology Clinical Trials; any clinical sessions on BPD; any clinical session on ventilation in neonates.

Additional Comments:

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: With the Q&A session

Previous Session and Conference Experience: N/A

Chairs: Vineet Bhandari (Chair); Hany Aly (Chair)

1 Speaker

Name: Vineet Bhandari

Phone: 203-645-2123

Institution: Children's Regional Hospital at
Cooper/CMSRU

Email: bhandari-vineet@cooperhealth.edu

Title/Topic: NIPPVing AT THE HEELS OF SUCCESSFUL EXTUBATIONS

Duration: 0

2 Speaker

Name: Howard M. Stein

Phone: (419) 291-4225

Institution: Promedica Toledo Children's Hospital

Email: howardstein@bex.net

Title/Topic: NIV-NAVA: EVIDENCE-BASED CLINICAL GUIDELINES

Duration: 0

3 Speaker**Name:** Hany Aly**Phone:** 2164428808**Institution:** Cleveland Clinic Children's Hospital**Email:** alyh@ccf.org**Title/Topic:** NCPAP: WHICH, WHEN and HOW to USE IT**Duration:** 0**4 Speaker****Name:** Brett J. Manley**Phone:** +61412701730**Institution:** The Royal Women's Hospital**Email:** brett.manley@thewomens.org.au**Title/Topic:** EBB and FLOW: RECOMMENDATIONS ON NASAL CANNULA USE IN THE NICU**Duration:** 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378153

Session Title : Therapeutic Advances against Mendelian Disorders in Children

Contact: Pankaj Agrawal

Email: pagrawal@enders.tch.harvard.edu

Type: State of the Art Plenary

Target Audience: Neonatologists, geneticists, translational researchers, genetic counselors and proactive families.

Audience Size: 100-150

Tracks: Digital Therapeutics Pathway | Genomics

Objectives: 1. How to navigate diagnostic odysseys when dealing with a rare disease of unknown etiology. 2. Advances in personalized therapeutic approaches for patients with a genetic disorder. The options include antisense oligonucleotides, gene therapy or CRISPR-based editing. 3. Advocacy efforts in the diagnosis and treatment of genetic disorders.

Description: Over 30 million patients in the US live with a rare disease; 80% of them have an underlying genetic cause and a majority affect children. Exome/Genome sequencing is helping accelerate the diagnosis of these patients, although many cases remain undiagnosed despite these technologies. The Undiagnosed Disease Network (UDN), The Manton Center for Orphan Disease Research and several other centers are dedicated to helping those patients reach a diagnosis. Sadly, treatment options are nonexistent most of those patients, and the rarity of their conditions leaves many individuals effectively orphaned. New and creative tools and frameworks will be necessary to address these challenges. The approaches may include antisense oligonucleotides (ASO)/siRNAs, gene therapy, and CRISPR-CAS9 based gene editing. The therapeutic promise of ASOs has been seen especially in the CNS with the remarkable success of nusinersen for spinal muscular atrophy (SMA) as well as promising early phase investigations of oligonucleotides for ALS and Huntington's Disease. We have recently shown that it is possible to effectively deploy a custom-designed ASO in less than a year for an eight-year-old girl with *CLN7*-related Batten disease, a rare, fatal disorder of neuronal lysosomal storage. Similarly, the recent approval of zolgensma in SMA has shown the potential of gene therapy in the near future. Hundreds of clinical trials are currently ongoing to use gene therapy approach in rare diseases. Lastly, the promise of CRISPR-based therapies where gene editing can fix the defect in the gene itself is rapidly progressing with many ongoing clinical trials.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Genomics, Rare diseases

Additional Comments: This is a very timely session as the field of genetics is moving towards personalized treatments. Having world experts talking about their own research in this field will energize participants in helping treat their patients.

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: After each presentation there will 5 minutes of discussion and at the end of the four presentations, all presenters will be available for 20 minutes of Q&A session.

Previous Session and Conference Experience:

Chairs: Pankaj Agrawal (Chair)

1 Speaker

Name: Pankaj Agrawal

Phone: 6177212262

Institution: Boston Children's Hospital and
Harvard Medical School

Email: pagrawal@enders.tch.harvard.edu

Title/Topic: Navigating diagnostic challenges in patients with Mendelian disorders

Duration: 0

2 Speaker

Name: Timothy Yu

Phone:

Institution: Boston Children's Hospital

Email: timothy.yu@childrens.harvard.edu

Title/Topic: Antisense oligonucleotide approach as a therapeutic modality

Duration: 0

3 Speaker

Name: Guangping Gao

Phone:

Institution: UMass Medical School

Email: Guangping.Gao@umassmed.edu

Title/Topic: Advances in gene replacement approaches

Duration: 0

4 Speaker

Name: Monkol Lek

Phone:

Institution: Yale University

Email: monkol.lek@yale.edu

Title/Topic: CRISPR-based applications in Mendelian diseases

Duration: 0

Proposal # : 378233

Session Title : The Intersection of Child Poverty with Race, Immigrant Status, and Environmental Threats in the Age of COVID-19

Contact: Benard Dreyer

Email: Benard.Dreyer@nyumc.org

Type: State of the Art Plenary

Target Audience: students, residents, fellows, pediatricians, PNP's, researchers, policy makers, health care systems leaders

Audience Size: 400

Tracks: Advocacy Pathway | Clinical Research Pathway | Community Pediatrics | Core Curriculum for Fellows | COVID-19 | Developmental and Behavioral Pediatrics | Diversity and Inclusion | Environmental Health | Epidemiology & Health Services Pathway | Health Equity/Social Determinants of Health | Health Services Research

Objectives: 1. Describe the intersection of poverty with racism, immigrant status, environmental threats, and the COVID pandemic and its impact on health disparities for children. 2. Review the research and evidence base for the causes of inequitable child health outcomes. 3. Analyze the role of governmental policies and actions. 4. Understand the implications for the health care system and effective solutions to address these inequities.

Description: This State of the Art Plenary will bring together national experts on child poverty, racism and racial inequities, immigrant health, Native American culture, and environmental threats to discuss the intersectionality of child poverty. Poor children don't just suffer from "double jeopardy", but frequently "multiple jeopardy" from many overlapping threats to their health and development. The COVID-19 pandemic has further unearthed as well as intensified these threats to children including loss of financial resources, loss of nutritional supports, loss of family members, and loss of educational opportunity. Our speakers will be able to elucidate and contextualize the living "venn diagram" of these intersections for children and families. All of the speakers will also address the specific impact of the COVID-19 pandemic on these families who are vulnerable because of being under-resourced and often are marginalized, and will leave the attendees with what is a call for action to all of us.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Social Determinants of Health, Child Poverty, Racism, Immigrant Health, AAP Presidential Plenary, APA Presidential Plenary

Additional Comments:

Financial Sponsor?:

Society Affiliation: SDBP

Participant Engagement: We will have a series of questions which involve those seeing the presentation to reflect on what is being presented. If there is a Q&A session after the presentation, the presenters will participate with the audience.

Previous Session and Conference Experience: This is a new presentation this year.

Chairs: Benard Dreyer (Chair); Adam Schickedanz (Chair); Tumaini Coker (Presenter); Nia Heard-Garris (Presenter); Shaquita Bell (Presenter); Dolores Acevedo-Garcia (Presenter); Mona Hanna-Attisha (Presenter)

1 Speaker

Name: Benard Dreyer

Phone: 9176582583

Institution: NYU School of Medicine

Email: Benard.Dreyer@nyumc.org

Title/Topic: Introduction of Speakers

Duration: 0

2 Speaker

Name: Adam Schickedanz

Phone: 314-303-3309

Institution: UCLA

Email: aschickedanz@mednet.ucla.edu

Title/Topic: Setting the Stage for the Discussants

Duration: 0

3 Speaker

Name: Tumaini Coker

Phone: 3106636721

Institution: Seattle Children's

Email: tumaini.coker@seattlechildrens.org

Title/Topic: The Intersection of Race and Poverty: Addressing Health Care Inequities in Children. The session will include an overview of disparities in income and wealth and how bias in healthcare has shaped racial inequities in health outcomes for children. There will also be the role of COVID-19 pandemic in exacerbating these inequities and effective solutions that can be recommended.

Duration: 0

4 Speaker

Name: Nia J. Heard-Garris

Phone: 2022132437

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

Email: nheardgarris@luriechildrens.org

Title/Topic: Structural Racism in Medicine, Poverty, and Child Population Health: This session will use the evidence to highlight the relationship between structural racism, poverty, and child health. There will be a focus on education, employment, recreation, and policies.

Duration: 0

5 Speaker

Name: Dolores Acevedo-Garcia

Phone:

Institution: Brandeis University

Email: dacevedo@brandeis.edu

Title/Topic: The Intersection of Child Poverty and Inequity Based on Immigration and Acculturation: This session will review the effects on children of immigrants of the restrictions on immigrant eligibility and access to anti-poverty programs. It will elucidate how the social policy response to COVID-19 maintained or deepened existing immigrant restrictions. Finally, there will be a review of policy principles that should guide immigrant eligibility and participation in anti-poverty programs going forward.

Duration: 0

6 Speaker

Name: Shaquita Bell

Phone: 206-987-6984

Institution: University of Washington

Email: shaqbell@uw.edu

Title/Topic: Native American Communities, Poverty, and Child Health: The session will review the historical trauma that the Native American community has experienced and has led to increased poverty for Native American families and children. The session will also focus on interventions and strategies that will help improve the health of these children as well as address the added economic impact of the COVID-19 pandemic.

Duration: 0

7 Speaker

Name: Mona Hanna-Attisha

Phone:

Institution: Michigan State University

Email: hannamon@msu.edu

Title/Topic: Environmental Threats to Poor Children and the Triple Threat of Environmental Toxins, Poverty, and Racism. The speaker has been at the epicenter of these issues and has become one of our pediatric heroes for

her work in Flint Michigan. She will also make concluding remarks touching on the points made by the other speakers.

Duration: 0

Proposal # : 378315

Session Title : *Not all NAS is NOWS: The Global Dilemma of Newborn Drug and Alcohol Exposure and Pandemics*

Contact: Ju Lee Oei

Email: j.oei@unsw.edu.au

Type: State of the Art Plenary

Target Audience: Neonatologists, Healthcare Finance experts, Intensivists, Pediatricians, Policy makers

Audience Size: 500-1000

Tracks: Adolescent Medicine | Advocacy Pathway | Community Pediatrics | Epidemiology & Health Services Pathway | Neonatology | Public Health

Objectives: To review: 1. The global epidemiology of newborn drug and alcohol exposure 2. The impact of the current COVID-19 global pandemic on mothers with drug-use disorders and their infants 3. The impact of prenatal use of legal agents on the child including alcohol, nicotine, marijuana, and prescription drugs 4. Potential mechanisms of harm to the newborn and older children from exposure to drugs of addiction and alcohol including impact on neurodevelopment, epigenetic changes, and social outcomes 5. International collaborative efforts and trials to mitigate harm and to treat children affected by prenatal drug and alcohol exposure

Description: The scope of maternal drug use is staggering. In Western societies, at least 1 in 3 children under the age of 14 are estimated to live with a parent or caregiver using some form of drug of dependency. This accounts for more than 9 million children in the USA alone. Enormous attention has been placed on the consequences of maternal opioid use which can result in the Neonatal Opioid Withdrawal Syndrome (NOWS) or Neonatal Abstinence Syndrome (NAS), one of the fastest growing and costly public health epidemics in the world.

Mothers, however, use many other drugs besides opioids and their newborns can be affected by all of them. These drugs can be illegal (e.g. cocaine, methamphetamines), some are essential for maternal health (e.g. prescription medications), and others are an almost ubiquitous element of society (e.g. alcohol, tobacco, marijuana). The adverse consequences of these drugs are extensive, pervasive, and enduring. Not only is the individual child affected, but the family, society and even subsequent generations can be impacted by maternal drug use. At a societal level, maternal drug use is inextricably intertwined with profound economic, intergenerational, and perpetuating burden and harm. On an individual level, the drug-exposed infant is not only at risk of withdrawal but also of teratogenicity, epigenetic change, neurocognitive impairment, and poor adult outcomes (dependent on both prenatal exposures and postnatal environmental influences).

Efforts to minimize harm from parental drug use requires global, coordinated, and continuing efforts. This is especially true with regard to the impact of the current COVID-19 pandemic on maternal use of addictive substances and its relation to translation of research and practice to policies that have considerable potential to influence individuals, families, and whole communities around the globe. In this session, international clinical, research and policy experts will discuss the latest evidence and knowledge gaps in this area. We will discuss contemporary evidence from randomized controlled studies and observational and cohort studies, particularly focusing on NOWS and other drugs of addiction that may not cause classical signs of abstinence such as cannabis, cocaine and methamphetamines. We will also examine the rationale behind decision-making at clinical and policy levels for the care of children affected by parental drug use in the USA and around the world. We will discuss the long-term and including epigenetic and non-

withdrawal implications of prenatal drug exposure and also the legal, societal and health implications of legal drugs of addiction such as alcohol, nicotine and prescription medications.

This session will emphasize the necessity of international collaboration and the consideration of other drugs besides opioids in the quest for improving the lives of children affected by maternal drug use especially in the current crisis of the COVID-19 pandemic

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: NIL

Additional Comments:

Financial Sponsor?:

Society Affiliation: APA

Participant Engagement: Questions on the chat pane, round up after end of sessions with a 10 minute Q&A

Previous Session and Conference Experience: Previously accepted in PAS 2020 but not presented

Chairs: Ju Lee Oei (Chair)

1 Speaker

Name: Susan McCune

Phone: 301-796-1709

Institution: FDA

Email: Susan.McCune@fda.hhs.gov

Title/Topic: Openinhg remarks

Duration: 0

2 Speaker

Name: Jonathan M. Davis

Phone: 617-636-5322

Institution: Tufts Children's Hospital

Email: jdavis@tuftsmedicalcenter.org

Title/Topic: Clinical pharmacotherapy trials: is all NOWS the same?

Duration: 0

3 Speaker

Name: Stephen W. Patrick

Phone: 6158755891

Institution: Vanderbilt University

Email: stephen.patrick@vanderbilt.edu

Title/Topic: COVID-19 and the opioid crisis: a worrisome combination

Duration: 0

4 Speaker

Name: Elizabeth J. Elliott

Phone: +61 409 253 390

Institution: University of Sydney

Email: elizabeth.elliott@health.nsw.gov.au

Title/Topic: Alcohol is still a major problem affecting newborns and children

Duration: 0

5 Speaker

Name: Emmalee S. Bandstra

Phone: 305-987-9177

Institution: University of Miami Miller School of Medicine

Email: ebandstr@med.miami.edu

Title/Topic: Marijuana, cocaine, methamphetamines: enduring drugs of abuse

Duration: 0

6 Speaker**Name:** Gerri Baer**Phone:** 240-753-8257**Institution:** Food and Drug Administration**Email:** gerri.baer@fda.hhs.gov**Title/Topic:** FDA and other global regulatory policies impacting pregnant women and newborns**Duration:** 0**7 Speaker****Name:** Ju Lee Oei**Phone:** +61409228005**Institution:** Royal Hospital for Women**Email:** j.oei@unsw.edu.au**Title/Topic:** Panel and Closing**Duration:** 0

PAS 21 Meeting Scholarly Session October 9, 2020
Proposals

Proposal # : 378344

Session Title : Developing a Culture of Wellbeing across Generations in Pediatrics: Priorities for Institutions and Practitioners

Contact: Paria Wilson

Email: paria.wilson@cchmc.org

Type: State of the Art Plenary

Target Audience: Pediatricians, trainees, residency program directors, department chairs, and pediatric administrators

Audience Size: 50-75

Tracks: COVID-19 | Education Pathway | Trainee Pathway

Objectives: 1) Review individual-level evidence on factors that impact physician wellbeing and lead to burnout, with a focus on generational differences. 2) Describe how practitioner wellbeing can improve patient outcomes, learning, and physician longevity. 3) Define evidence-based methods for developing systems and local environments that promote wellbeing and mitigate burnout in trainees and practitioners, with emphasis on the global pandemic. 4) Describe evidence for methods that can help individual physicians develop personal skills and practices to promote their own wellbeing and detail how resilience training can help promote personal wellbeing in physicians.

Description: Better understanding of wellbeing across generations in pediatric trainees and practitioners is necessary to develop optimal approaches to promote wellness and resilience and mitigate stress and burnout. Data from longitudinal studies and cross-sectional assessments have provided new insights into factors that promote wellness and resilience in physicians and aid in creation of new models of interventions. Such models are important to inform future efforts to design supportive health-care environments and even more critical given the impact from the current pandemic. Evidence has also accumulated for the level at which interventions should be based, including at the level of the organization, local work environment, or directed at the individual physician. A review of the evidence for how resilience and wellbeing can be developed and how stress and burnout can be mitigated in pediatric trainees and practitioners can help inform and prioritize future efforts locally and nationally. In this session, available high-quality evidence and gaps in evidence will be presented to discuss the direction of future research and program development. Evidence-based studies on interventions to promote wellbeing and mitigate stress and burnout will be reviewed, with a specific emphasis on strategies based on generational differences. Throughout the presentations, we will propose a list of high-value priorities for addressing these factors in pediatric trainees and providers in the future. We will also review the impact of the current pandemic on trainees and lessons learned from individual institutions.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: trainee burnout

Additional Comments:

Financial Sponsor?:

Society Affiliation: APPD

Participant Engagement: Given that the session will be pre-recorded, we would really like a round table like live session after the 90minutes to allow us to engage with

the audience and answer questions. We could also use social media like twitter to initiate conversations and introduce individuals/programs with ideas to each other.

Previous Session and Conference Experience: This exact session was not presented at previous conference, but it was invited for 2020 PAS and we had another invited session in 2019 that was very well attended.

Chairs: Paria Wilson (Chair); Janet Serwint (Presenter); Betty Staples (Presenter); Suzanne Reed (Presenter)

1 Speaker

Name: Janet R. Serwint

Phone: 410-955-2727

Institution: Johns Hopkins University School of Medicine

Email: jserwint@jhmi.edu

Title/Topic: Why wellness should matter to our generation.

Duration: 0

2 Speaker

Name: Betty B. Staples

Phone: 9196842356

Institution: Duke University Medical Center

Email: betty.staples@duke.edu

Title/Topic: Why physician wellbeing should matter to our patients.

Duration: 0

3 Speaker

Name: Paria M. Wilson

Phone: 5027775787

Institution: Cincinnati Children's Hospital Medical Center

Email: paria.wilson@cchmc.org

Title/Topic: What can we do about it?- Designing systems and local environments to promote wellbeing and mitigate burnout in trainees and practitioners.

Duration: 0

4 Speaker

Name: Suzanne Reed

Phone: 6143277489

Institution: Nationwide Childrens Hospital

Email: suzanne.reed@nationwidechildrens.org

Title/Topic: Evidence-based methods for promoting resilience and wellbeing in trainees and practitioners.

Duration: 0

Proposal # : 378394

Session Title : Is Congenital Cytomegalovirus (CMV) Infection a Vaccine-Preventable Disease? Candidate Vaccines Enter Clinical Trials Even as Uncertainties about the Protective Role of Maternal Immunity Emerge

Contact: Mark Schleiss

Email: schleiss@umn.edu

Type: State of the Art Plenary

Target Audience: General pediatricians; neonatologists; public health officials; immunologists; molecular biologists; adolescent medicine specialists; infectious diseases specialists.

Audience Size: 500

Tracks: Adolescent Medicine | Allergy, Immunology and Rheumatology | Basic Science Pathway | Breastfeeding/Human Milk | Children with Chronic Conditions | Clinical Research Pathway | Community Pediatrics | COVID-19 | Epidemiology & Health Services Pathway | General Pediatrics | Immunizations/Delivery | Infectious Diseases | Neonatology | Neurology | Public Health | Scholarly Sessions | Well Newborn

Objectives: 1. Review the epidemiology and impact of CMV infection on child health, with an emphasis on congenital CMV infection, the most common infectious cause of disabilities in children. 2. Understand the rationale for pre-pregnancy immunization against CMV to prevent congenital infection. Discuss the various vaccine platforms in clinical trials and articulate the rationale and pros/cons of subunit versus live attenuated vaccines for CMV. Acknowledge the limitations and theoretical challenges attendant to designing a vaccine for an infectious disease where natural immunity itself is potentially only modestly effective at preventing vertical transmission; acknowledge the controversy regarding the protective potential of preconception immunity and be aware of evidence that supports and refutes this hypothesis. 3. Understand how emerging knowledge of viral glycoprotein biology, including an improved basic science understanding of the pre-fusion and post-fusion conformation of fusogenic proteins, impacts vaccine design. Recognize the role of non-neutralizing functions of antibodies to these proteins (including functions such as ADCP) in potential protection against congenital CMV infection. Extend knowledge of emerging concepts of antiviral immunity for CMV to prospects for novel vaccines against other enveloped viruses, including SARS-CoV-2 and other enveloped viruses. Consider how the emerging knowledge of CMV molecular biology and immunobiology might impact "next generation" CMV vaccines. 4. Participate in the public policy discussion about congenital CMV as a disease of health disparities disproportionately affecting African-American infants. Be aware of controversies about how a CMV vaccine would be integrated into clinical practice and recognize the potential target populations. Discuss ongoing controversies in maternal CMV screening during pregnancy, the role of ACOG in these discussions, how universal newborn screening for congenital CMV would inform the vaccine discussion, and how a successful CMV vaccine would profoundly impact the financial, social and personal burdens that congenital CMV imposes on society.

Description: The most important congenital viral infection in the developed world, and probably globally, is congenital cytomegalovirus (CMV). Congenital CMV is the most common infectious disease responsible for neurocognitive deficits in children, and is the leading infectious cause of sensorineural hearing loss. Although development of a vaccine has been a major public health goal for decades, development of a vaccine has been limited by emerging knowledge about the potential for re-infection of immune women during pregnancy with resultant transmission of new strains of viral to the fetus, leading to injury and long-term disability. Thus, there are unresolved questions about the protective role of pre-existing maternal immunity and the viral and host correlates of such immunity. Indeed, some experts suggest that the bulk of disability caused by congenital CMV occurs in the context of infections that occur in the face of preconception immunity. If natural immunity

does not protect, then how can a vaccine - which would need to induce immune responses superior to "natural immunity" - succeed?

To address these controversies, advances in molecular virology and viral immunology research that explore these topics will be presented at this symposium, along with a summary of the CMV vaccines that are currently in clinical trials. A major emphasis will be placed on how this new knowledge is likely to have an impact on the health of children, particularly with respect to long-term disabilities, but other topics, including health policy issues (CMV as a disease of health disparities) and adolescent vaccination questions (how to incorporate another vaccine into the routine schedule) will be reviewed. Policy issues and translational approaches in clinical trials will be integrated with basic science data (the virology and molecular immunology of CMV) to ensure an eclectic, but accessible and informative, program. This state-of-the-art plenary will be of broad appeal to a large number of academic pediatricians. The session will consist of invited lectures from internationally recognized, NIH-funded leaders engaged in study of this topic.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Request that this session not overlap with PIDS programming.

Additional Comments: A vaccine against congenital CMV infection is a major public health priority but substantial scientific barriers remain. This session will integrate clinical information about the impact of CMV on child health with translationally relevant summaries of trials in progress and basic science data about molecular correlates of protection. We believe this interdisciplinary approach will be of broad appeal to the PAS membership and will draw attendees from many disciplines.

Financial Sponsor?:

Society Affiliation: MOD

Participant Engagement: Graphics, virtual Q and A and, if feasible in a virtual session format, audience response questions. We will aim to provide engaging examples, accessible graphics to integrate basic science content with practical, "take-home" information for practitioners, and examples from well-known and much-discussed vaccine experiences (impact of rubella vaccine on public health; controversies and uncertainties about correlates of protective immunity with COVID-19 vaccines and how these relate to CMV vaccines; balancing urgency of protecting newborns against cCMV with need for rigorous safety and efficacy data).

Previous Session and Conference Experience: This session was proposed for the 2020 PAS in Philadelphia but the meeting was, unfortunately, canceled because of COVID-19.

Chairs: Mark Schleiss (Chair); Sallie Permar (Chair)

1 Speaker

Name: Mark R. Schleiss

Phone: 612-626-9913

Institution: University of Minnesota Medical School

Email: schleiss@umn.edu

Title/Topic: Vaccines for Congenital CMV: The Search for a Correlate of Protective Immunity for the Developing Fetus

Duration: 0

2 Speaker

Name: William Britt

Phone: 2059967751

Institution: Univ of Alabama School of Medicine

Email: wbritt@peds.uab.edu

Title/Topic: Insights into CMV Re-Infection: Are Most Disabling Congenital CMV Infections Caused by Non-Primary Maternal CMV Infections During Pregnancy?

Duration: 0

3 Speaker

Name: Sallie Permar

Phone: 9194514604

Institution: Duke University Medical Center

Email: sallie.permar@duke.edu

Title/Topic: Modeling Congenital CMV Infection to Examine the Protective Benefit of Preconception Maternal Immunity

Duration: 0

4 Speaker

Name: Stanley A. Plotkin

Phone: 2152979321

Institution: University of Pennsylvania

Email: stanley.plotkin@vaxconsult.com

Title/Topic: CMV Vaccines in Clinical Trials: Where Do We Stand in 2021?

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378447

Session Title : Building a Critical Bridge Between Pediatrics and Early Education During the Time of Covid-19 and Beyond

Contact: Anda Kuo

Email: anda.kuo@ucsf.edu

Type: State of the Art Plenary

Target Audience: academic faculty, health care providers, health service researchers, policy researchers and advocates, cross-disciplinary collaborators, early education advocates and partners, learners

Audience Size: 80

Tracks: Advocacy Pathway | Community Pediatrics | Cross-Disciplinary Pathway | Developmental and Behavioral Pediatrics | Health Equity/Social Determinants of Health | Literacy | School and Community Health | Social Media & Technology

Objectives: 1. Describe lessons learned from emerging technological innovations and pandemic adaptations to engage families in early childhood education that leverages the pediatric office to reduce educational disparities. 2. Recognize how pediatricians can collaborate with new models of early child education. 3. Incorporate perspectives from philanthropic leaders who are seeding rapid change before and during the pandemic to improve educational outcomes at scale.

Description: School readiness has impact on academic, health and economic outcomes across a child's lifespan. The pandemic undermines traditional health and early education settings and threatens to worsen child outcomes. In face of a rapidly changing landscape to deliver care to young children and their families, unique collaborations between pediatrics and education are driving innovative solutions that will have impact beyond the pandemic.

Early childhood is a critical period of brain and socio-emotional development for establishing a strong foundation for learning and is highly vulnerable during this disruptive, traumatic time. Children living in poverty and in communities of color are burdened with the greatest educational disparities compounded by the multi-pronged impacts of the pandemic. Child health providers have unparalleled, systematic access to children ages zero to five years with multiple touchpoints a year. In particular, child health providers may serve as the most consistent service sector for young children living in poverty, especially during the pandemic. Early child educators have a wealth of expertise and innovation in preparing young minds for a lifetime of learning. Unfortunately, the fields of early childhood education (ECE) and child health largely work in parallel to support the development of children ages 0-5. The pandemic highlights the powerful impact of bridging these fields to transform outcomes for children who face disparities in educational readiness and achievement. How might pediatrics best partner with ECE to eliminate disparities in kindergarten readiness? What innovations in early education can bridge child health and ECE? How might philanthropy drive momentum to harness child health and ECE? What lessons have we gained during the pandemic about collaboration and innovations across our fields? In this session we bring together thought leaders from across disciplines to spark creative solutions and partnerships that will support early minds to be ready to learn during and beyond COVID-19.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: APA and AAP plenary, Early education/school health

Additional Comments:

Financial Sponsor?:**Society Affiliation:** PAS

Participant Engagement: The leads and speakers have all led large capacity virtual sessions and workshops. Engagement techniques we will utilize include: participant polling; if registration required for the session, ask for questions at registration; facilitated q+a; potentially use break out rooms. In addition, the virtual format will allow us to include more of our community partners and diverse perspectives and lived experience.

Previous Session and Conference Experience: n/a

Chairs: Anda Kuo (Organizer); Lisa Chamberlain (Organizer); Janet Froetscher (Panelist); Henry Wilde (Panelist); Matt Glickman (Panelist)

1 Speaker**Name:** Anda Kuo**Phone:** 415-713-0477**Institution:** UCSF**Email:** anda.kuo@ucsf.edu**Title/Topic:** A Powerful Collaboration to Support the Whole Child: Early Child Education and Child Health**Duration:** 0**2 Speaker****Name:** Lisa J. Chamberlain**Phone:** 650-725-8314**Institution:** Stanford**Email:** lchamberlain@stanford.edu**Title/Topic:** Clinic-based Innovations to Promote Readiness to Learn**Duration:** 0**3 Speaker****Name:** Matt Glickman**Phone:** 4156090353**Institution:** Promise Venture Studio**Email:** matt@promisestudio.org**Title/Topic:** Emerging Technological Innovations in Education to Accelerate Progress in Reducing Educational Disparities During and Beyond the Pandemic**Duration:** 0**4 Speaker****Name:** Henry Wilde**Phone:** 917-903-6152**Institution:** Acelero Learning / Shine Early Learning**Email:** henry@acelero.net**Title/Topic:** Child Health Collaborations with New Models of Early Child Education: Lessons Learned Before and During the Pandemic**Duration:** 0**5 Speaker****Name:** Janet Froetscher**Phone:** 312-447-6061**Institution:** JB and MK Pritzker Family Foundation **Email:** jfroetscher@pritzkerfoundation.org**Title/Topic:** Philanthropic Leaders Seeding Change to Improve Educational Outcomes at Scale**Duration:** 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378552

Session Title : Breastfeeding, Baseball and COVID-19: t's all about the delivery

Contact: Lawrence Noble

Email: lnoble613@yahoo.com

Type: State of the Art Plenary

Target Audience: Neonatologists, general pediatricians, well newborn specialists, hospitalists

Audience Size: 300

Tracks: Breastfeeding/Human Milk | COVID-19 | General Pediatrics | Neonatology | Pediatric Nutrition | Well Newborn

Objectives: To present outcomes of infants breastfed or fed human milk from mothers infected with COVID-19. To educate participants on the viability of SARS-CoV-2 in human milk. To inform participants on antibodies and other protective factors in human milk.

Description: There is still much not know about the safety of breastfeeding and human milk from a mother with COVID-19. Several studies have detected SARS-CoV-2 nucleic acid in human milk. However, viable infectious virus has not been detected and no study has documented that an infant became infected from human milk. In addition, preliminary evidence suggest that protective antibodies against SARS-CoV-2 are found in breast milk. There may be something different about the virility of this virus when delivered in human milk. Given these findings and uncertainties, a scientific session exploring this topic is important and should be well attended.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: Saturday

Conflicting Sessions: Breastfeeding, COVID-19

Additional Comments:

Financial Sponsor?:

Society Affiliation: PAS

Participant Engagement: Questions received through chats will be answered by speakers, as time allows, and through chats.

Previous Session and Conference Experience: A similar virtual session on Breastfeeding and COVID-19 was held at the AAP NCE conference and was received by over 200 participants.

Chairs: Lawrence Noble (Chair); Ivan Hand (Moderator)

1 Speaker

Name: Ivan L. Hand

Phone: 7182454753

Institution: SUNY Downstate

Email: ivan.hand@nychhc.org

Title/Topic: Breastfeeding and COVID-19: What's the evidence

Duration: 0

2 Speaker

Name: Lawrence Noble

Phone: 9144412316

Institution: Icahn School of Medicine at Mount Sinai

Email: lnoble613@yahoo.com

Title/Topic: Breastfeeding and COVID-19: What's the conclusion

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378581

Session Title : On the Basis of Race: Moving Towards Anti-Racism in Pediatrics.

Contact: Benard Dreyer

Email: Benard.Dreyer@nyumc.org

Type: State of the Art Plenary

Target Audience: students, residents, fellows, pediatricians, PNPs, researchers, policy makers, health care systems leaders

Audience Size: 400

Tracks: Advocacy Pathway | Career Development Pathway | Clinical Bioethics | Clinical Research Pathway | Community Pediatrics | Core Curriculum for Fellows | Diversity and Inclusion | Education Pathway | Epidemiology & Health Services Pathway | General Pediatrics | Health Equity/Social Determinants of Health | Health Services Research | Public Health | Trainee Pathway

Objectives: 1. Describe how bias leads to differences in the care of Black children and mothers 2. Explore the ways race is used in clinical algorithms and as a risk factor that lead to potential inequities in care. 3. Analyze the various aspects of experience of URiM students and trainees leading to disadvantage.

Description: This session is a presentation by Pediatricians Against Racism and Trauma (PART), a group of more than 80 pediatricians from across the United States trying to fight racism, bias, discrimination and hatred as it impacts children and families. While structural racism and bias exist throughout society, racism is also "baked into" medicine itself, including pediatrics. This session will bring national leaders and experts together to bring the various aspects of racism in medicine and medical education into focus and suggest ways we can move towards being anti-racists in clinical care and medical education. The session will have the following topics: 1. The norm of whiteness in medicine and medical education; 2. Racial-ethnic inequities in clinical care due to implicit and explicit bias; 3. The inappropriate use of race in clinical algorithms or as a risk factor for outcomes, with the implication that race is a genetic biological trait rather than a social construct; 4. The problematic experiences of URiM students and trainees, including bias in grading, low social capital/belonging (isolation), exposure to microaggressions, and having to deal with cultural differences in performance expectations. Finally speakers will bring these issues together with possible solutions to move pediatrics and pediatricians into being anti-racist.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Social Determinants of Health, Child Poverty, Racism, Immigrant Health, AAP Presidential Plenary, APA Presidential Plenary

Additional Comments:

Financial Sponsor?:

Society Affiliation: APS

Participant Engagement: We will have a series of questions which involve those seeing the presentation to reflect on what is being presented. If there is a Q&A session after the presentation, the presenters will participate with the audience.

Previous Session and Conference Experience: This is a new presentation for this year's PAS meeting

Chairs: Benard Dreyer (Chair); Ashaunta Anderson (Presenter); Tiffani Johnson (Presenter); Leslie Walker-Harding (Presenter); Patricia Poitevien (Presenter); Joseph Wright (Presenter)

1 Speaker

Name: Benard Dreyer

Phone: 9176582583

Institution: NYU School of Medicine

Email: Benard.Dreyer@nyumc.org

Title/Topic: The Norm of Whiteness in Medicine and Medical Education. This speaker will also moderate and introduce the other speakers.

Duration: 0

2 Speaker

Name: Ashaunta T. Anderson

Phone: 617.512.9388

Institution: Keck School of Medicine of the University of Southern California

Email: asanderson@chla.usc.edu

Title/Topic: Racial-ethnic inequities in clinical care due to implicit and explicit bias. Examples include pain management for African American children and adolescents, and increased reporting to child welfare of African American mothers in the newborn nursery.

Duration: 0

3 Speaker

Name: Tiffani Johnson

Phone: 9736262067

Institution: University of California, Davis

Email: tjo@ucdavis.edu

Title/Topic: This speaker will be jointly presenting on racial-ethnic inequities with Dr. Anderson above.

Duration: 0

4 Speaker

Name: Leslie Walker-Harding

Phone: 202-285-0030

Institution: Seattle Children's Hospital

Email: leslie.walker-harding@seattlechildrens.org

Title/Topic: The inappropriate use of race in clinical algorithms or as a risk factor for outcomes, with the implication that race is a genetic biological trait rather than a social construct. These may lead to inequities in care and outcomes.

Duration: 0

5 Speaker

Name: Patricia Poitevien

Phone: 4014446072

Institution: Brown University / Hasbro Children's Hospital

Email: patricia_poitevien@brown.edu

Title/Topic: The problematic experiences of URiM students and trainees, including bias in grading, low social capital/belonging (isolation), exposure to microaggressions, and having to deal with cultural differences in performance expectations

Duration: 0

6 Speaker

Name: Joseph Wright

Phone: 3016182141

Institution: University of Maryland School of Medicine

Email: Joseph.Wright@umm.edu

Title/Topic: Summing up and possible solutions to move pediatrics and pediatricians to be anti-racist

Duration: 0

Proposal # : 378624

Session Title : Young Brains; Old Consequences: *San Teeth, San Eyes, Sans Taste, Sans Everything; as Shakespeare Anticipated, Brain Aging is not that Simple*

Contact: Frances Northington

Email: frances@jhmi.edu

Type: State of the Art Plenary

Target Audience: Neuroscientists, Developmental Pediatricians, Neurologists, Neonatologists, Behavioral specialists, Psychologists

Audience Size: 300

Tracks: Basic Science Pathway | Children with Chronic Conditions | Clinical Research Pathway | Critical Care | Developmental and Behavioral Pediatrics | Developmental Biology | Mental Health | Neonatology | Neurology | Scholarly Sessions

Objectives: 1. To understand the bench, translational and human data linking early brain injury and late neurodegeneration in genetically predisposed subjects. 2. To review the putative role of preterm birth, nutrient deprivation in utero, and persistent basal forebrain cholinergic disturbances produced by early life brain injury reframes brain growth and function for life. 3. To explore potential common mechanisms, questions of lifelong monitoring of neonatal brain injuries and exposures and what these data mean for future therapies.

Description: In the years to come, many disorders of brain aging will reach epidemic proportions. Currently, there is greater appreciation of how fetal and early life exposures, lifestyles, and injuries are determinants of adult health in many domains of medicine. Astonishingly, the fields of neonatal brain injury and adult brain disease have been viewed historically as distinct non-overlapping entities, despite the existence of disorders like Down's syndrome and leukodystrophy. Currently in neurology and neuropathology, repetitive and chronic traumatic encephalopathy and the recognition that diseases like Alzheimer's disease and even ALS might have very long prodromal states are focusing more light on the relationships of brain events in early and later life. In this seminar we will focus on consequences of early life brain injury when superimposed on genetic predisposition to adult neurodegeneration, long term structural alterations in the brain and attention deficits as a consequence of intrauterine growth restriction, potential reprogramming of brain growth after preterm birth, and consequences of preterm birth on the cholinergic forebrain and potential mechanisms of cholinergic systems injury and recovery after neonatal hypoxia-ischemia.

Session Content

Overview: A problem without known scope Dr. Raul Chavez- Valdez

The intersection of early life brain development and injury and genetic susceptibility to adult neurodegeneration

Dr. Lee J. Martin

Does preterm birth reprogram brain growth and function: What does it mean for the future adult?

Dr. Terrie E. Inder

Brain changes in adults born preterm: The cholinergic basal forebrain

Dr. Christian Sorg

The Cholinergic system after neonatal HI; A possible new therapeutic target?

Dr. Frances J Northington

Multiple structural and functional alterations of the CNS in adults due to SGA at birth.

Dr. Gregory A. Lodygensky

Wrap up and Discussion Dr. Raul Chavez-Valdez

Adult consequences exist for every alteration or injury to the developing brain and examining multiple models of early injury and the multitude of long term consequences will reveal mechanisms that can inform recovery, appropriately timed interventions, need for

lifelong monitoring of outcomes, and options for “late” therapeutics. The public health import of a link of common early life brain alterations and injuries, to later in life brain function and neurodegeneration cannot be overstated.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Brain club, Other Neuro focused Plenary sessions.

Additional Comments: The life-time neurologic consequences of preterm birth, early life brain injury, IUGR, with or without genetic susceptibility to adult neurodegeneration and possible brain targets for novel therapies is of enormous consequence to care givers from birth to old age. Patients, families, and society all share in the burden associated with these consequences and the need for new insights, development of new therapeutic targets remains and urgent and unmet need in Pediatric Science.

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: The speakers will monitor the chat room, responding briefly to questions during the session. Dr. Chavez-Valdez will develop main themes from the questions and present those to the full group of speakers during the Q&A at the end of the session.

Previous Session and Conference Experience: Not presented previously.

Chairs: Frances Northington (Chair); Frances Northington (Contact Person); Raul Chavez-Valdez (Discussant)

1 Speaker

Name: Raul Chavez-Valdez

Phone: 3126400969

Institution: Johns Hopkins University

Email: rchavez2@jhmi.edu

Title/Topic: Overview: A problem without known scope

Duration: 0

2 Speaker

Name: Lee J. Martin

Phone: 410-502-5170

Institution: Johns Hopkins

Email: martinl@jhmi.edu

Title/Topic: The intersection of early life brain development and injury and genetic susceptibility to adult neurodegeneration

Duration: 0

3 Speaker

Name: Terrie Inder

Phone: 617-278-0770

Institution: Harvard Medical School

Email: tinder@bwh.harvard.edu

Title/Topic: Does preterm birth reprogram brain growth and function: What does it mean for the future adult?

Duration: 0

4 Speaker

Name: Christian Sorg

Phone:

Institution: Technical University Munich

Email: christian.sorg@tum.de

Title/Topic: Brain changes in adults born preterm: The cholinergic basal forebrain

Duration: 0

5 Speaker

Name: Frances J. Northington

Phone: 4109554576

Institution: Johns Hopkins University

Email: frances@jhmi.edu

Title/Topic: The Cholinergic system after neonatal HI; A possible new therapeutic target?

Duration: 0

6 Speaker

Name: Gregory A. Lodygensky

Phone: 5143454931

Institution: University of Montreal

Email: ga.lodygensky@umontreal.ca

Title/Topic: Multiple structural and functional alterations of the CNS in adults due to SGA at birth.

Duration: 0

7 Speaker

Name: Raul Chavez-Valdez

Phone: 3126400969

Institution: Johns Hopkins University

Email: rchavez2@jhmi.edu

Title/Topic: Wrap up and Discussion

Duration: 0

PAS 21 Meeting Scholarly Session October 9, 2020

Proposals

Proposal # : 378649

Session Title : The Role of Research in Reducing Gun Violence: A Pediatric Policy Council State of the Art Plenary

Contact: Shale Wong

Email: shale.wong@cuanschutz.edu

Type: State of the Art Plenary

Target Audience: Participants of all levels interested in public policy, public health and associated research and advocacy

Audience Size: 100-150

Tracks: Advocacy Pathway | Injury Prevention | Public Health | School and Community Health

Objectives: 1. To inform pediatric academicians about the impact of gun violence on child health and development 2. To explore the role of public health research in preventing gun violence. 3. To engage pediatric academicians in dialogue about current and future science and policy regarding gun violence prevention.

Description: The toll of gun violence on young people represents one of the most significant public health challenges facing contemporary America. In recent years, firearm-related injury and death has made headlines routinely, including mass shootings at schools, public festivals, and places of worship, while daily occurrences of gun violence affect local communities. Gun violence touches young people directly, impacting them, their family members, and friends. Additionally, the ongoing threat of gun violence, reinforced through regular active shooter drills in schools and media reports, extends the detrimental effects of gun violence further through biological stress mechanisms. Despite the frequency of these tragic events, too little research into interventions and public policies to reduce gun violence has been conducted in over two decades due in large part to a reticence on the part of the federal government to fund such work. In 2019, the Pediatric Policy Council engaged in successful advocacy efforts that helped to appropriate \$25 million to the Centers for Disease Control and Prevention and the National Institutes of Health to administer grants for firearm research. Still, the United States has lagged behind its peers in identifying and implementing policies to address this problem. This session will explore the role of public health research in iterative policymaking to reduce gun violence in America. The goal will be to introduce key concepts to pediatric academicians, setting the stage for a moderated panel discussion.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Advocacy SIG, Pediatric Policy Council legislative breakfast

Additional Comments: We intend to include a young person who can speak to advocacy from the youth voice and discuss the impact of school drills on sense of well being and safety in school.

Financial Sponsor?:

Society Affiliation: PPC

Participant Engagement: We will use a chat or similar mechanism to collect questions for a panel response. Specific polling or questions for the audience may be posed via mentimeter to assess trends regarding policy or advocacy interests.

Previous Session and Conference Experience: N/A

Chairs: Shetal Shah (Chair); Shale Wong (Chair)

1 Speaker

Name: Joshua M. Sharfstein

Phone: 4434248490

Institution: Johns Hopkins Bloomberg School of Public Health

Email: joshua.sharfstein@jhu.edu

Title/Topic: Policies that work to reduce gun violence

Duration: 0

2 Speaker

Name: Lois Lee

Phone: 617-355-5089

Institution: Boston Children's Hospital

Email: lois.lee@childrens.harvard.edu

Title/Topic: Research and evidence to reduce firearm injuries

Duration: 0

3 Speaker

Name: Benjamin Hoffman

Phone: 5052396814

Institution: OHSU

Email: hoffmanb@ohsu.edu

Title/Topic: Role of physician advocacy for gun violence prevention

Duration: 0

PAS 21 Meeting Scholarly Session **October 9, 2020**
Proposals

Proposal # : 378683

Session Title : Early Childhood Respiratory Morbidity Associated with Preterm Birth

Contact: Paul Moore

Email: paul.moore@vumc.org

Type: State of the Art Plenary

Target Audience: Clinicians and translational researchers with interest in respiratory complications due to preterm birth

Audience Size: 500

Tracks: Allergy, Immunology and Rheumatology | Asthma | Children with Chronic Conditions | Clinical Research Pathway | Cross-Disciplinary Pathway | General Pediatrics | Neonatology | Pulmonology

Objectives: 1- To discuss limitations of the predictive value of BPD on early childhood respiratory morbidity and explore alternative predictors of respiratory morbidity in preterm infants. 2- To identify novel genetic and immune-mediated pathways associated with respiratory morbidity in preterm infants. 3- To review the association of preterm birth and more long-term outcomes of persistent wheezing and asthma.

Description: Bronchopulmonary dysplasia (BPD) has been used for over 30 years as a predictor of early respiratory morbidity, but increased survival of extremely low gestational age newborns (ELGANs) and changes in NICU practice have resulted in limitations to BPD as a predictive value. The Premature Respiratory Outcomes Program (PROP) and Trial of Late Surfactant for Prevention of BPD (TOLSURF) Study are NIH-funded longitudinal birth cohorts of ELGANs that have provided a wealth of clinical, biochemical, and genetic data to study the association of preterm birth with respiratory morbidity. This session hopes to provide clinicians from Neonatology, General Pediatrics, and Pulmonology with an update on predictors of respiratory morbidity in preterm children.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: BPD, Asthma

Additional Comments:

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: We will work with PAS to identify tools for Q&A as live stream during the session or after the session.

Previous Session and Conference Experience: N/A

Chairs: Paul Moore (Moderator); Rita Ryan (Moderator)

1 Speaker

Name: Judy L. Aschner

Phone: 6158187276

Institution: Joseph M Sanzari Children's Hospital at Hackensack Meridian Health

Email: judy.aschner@hackensackmeridian.org

Title/Topic: Premature Infant Respiratory Status (PIRS): A new classification system to predict early childhood respiratory morbidity associated with preterm birth

Duration: 0

2 Speaker**Name:** Andrew M. Dylag**Phone:** 585-275-5822**Institution:** University of Rochester**Email:** andrew_dylag@urmc.rochester.edu**Title/Topic:** Early Neonatal Oxygen Exposure Predicts Pulmonary Morbidity and Functional Deficits at One Year**Duration:** 0**3 Speaker****Name:** James Kemp**Phone:** 314-747-5173**Institution:** Washington University**Email:** kemp_j@wustl.edu**Title/Topic:** Intermittent hypoxia exposure likely predisposes to ventilatory pattern instability**Duration:** 0**4 Speaker****Name:** Dara Torgerson**Phone:** 514-894-8263**Institution:** McGill University and Genome Quebec Innovation Center**Email:** dara.torgerson@me.com**Title/Topic:** Genetics of Chronic Lung Disease in Preterm Infants**Duration:** 0**5 Speaker****Name:** Kristin Scheible**Phone:** 585-478-2438**Institution:** University of Rochester**Email:** kristin_scheible@urmc.rochester.edu**Title/Topic:** A systems biology approach to understanding immune-mediated respiratory morbidity in the first year of life**Duration:** 0**6 Speaker****Name:** Roberta Keller**Phone:** 415-514-3192**Institution:** University of California San Francisco**Email:** Roberta.Keller@ucsf.edu**Title/Topic:** Wheezing in Children Born Prematurely**Duration:** 0

Proposal # : 379499**Session Title : Demystifying Immune Dysregulation****Contact:** Jay Mehta**Email:** mehtaj@email.chop.edu**Type:** State of the Art Plenary**Target Audience:** Pediatricians, trainees, immunologists, rheumatologists, infectious disease, oncologists**Audience Size:** 50-75**Tracks:** Allergy, Immunology and Rheumatology | Cross-Disciplinary Pathway | General Pediatrics | Genomics | Hematology/Oncology**Objectives:** 1. Define autoinflammation and recognize the ways it manifests in your clinic 2. Classify the basic arms of the immune system and understand how imbalance can lead to immune dysregulation syndromes 3. Identify how immune dysregulation syndromes may be inherited 4. Develop a rational approach to the diagnosis and treatment of immune dysregulation syndromes**Description:** In recent years, immune dysregulation syndromes have been increasingly recognized as a source of human disease requiring a multi-disciplinary approach to diagnosis and management. These children may present to a variety of pediatric sub-specialists for care, for example for early-onset diabetes, inflammatory bowel disease, rheumatic disease, and autoimmune cytopenias. This session will highlight a number of aspects of immune dysregulation of interest to the non-rheumatologist and to pediatric trainees in order to provide a shared mental model of what these conditions look like. The first presentation will introduce the concept of autoinflammation, discuss how to make some sense of a truly dizzying number of single-gene diseases, and show how instructive these rare diseases have been in understanding more common symptoms. The second presentation will use a stepwise, case-based approach to give a few examples of how immune dysregulation can hide in numerous pediatric clinics. The third presentation will describe how immune dysregulation syndromes may be inherited and explain how alternative mechanisms of disease, including somatic mosaicism, may lead to immune dysregulation. Finally, the fourth presentation will provide a practical, multi-disciplinary, and replicable approach to the diagnosis and management of these syndromes.**Time Block:****Q and A:****Audience Polling:****Sabbath Conflicts:** N/A**Conflicting Sessions:** None**Additional Comments:****Financial Sponsor?:****Society Affiliation:** Other/No Affiliation**Participant Engagement:** Session will be case-based, will review basic immunology in an interactive fashion**Previous Session and Conference Experience:****Chairs:** Jay Mehta (Chair); Laura Ballenger (Moderator)

1 Speaker**Name:** Eric Allenspach**Phone:****Institution:** Seattle Children's Hospital**Email:** Eric.Allenspach@seattlechildrens.org**Title/Topic:** Finding the immune dysregulation needle in your pediatric clinic haystack**Duration:** 0**2 Speaker****Name:** Scott Canna**Phone:****Institution:** Children's Hospital of Pittsburgh**Email:** scott.canna@chp.edu

Title/Topic: Autoinflammation: What is it and what does it tell us about human disease?

Duration: 0

3 Speaker

Name: Megan A. Cooper

Phone:

Institution: Washington University School of
Medicine

Email: cooper_m@wustl.edu

Title/Topic: Genomic discovery of primary immune dysregulation syndromes

Duration: 0

4 Speaker

Name: Edward M. Behrens

Phone: 215-590-7180

Institution: The Children's Hospital of Philadelphia

Email: BEHRENS@email.chop.edu

Title/Topic: Assembling your team: the multi-disciplinary approach to diagnosis and treatment of immune
dysregulation syndromes

Duration: 0

Proposal # : 379484

Session Title : Childhood-Onset Lupus: A Global and Multisystem Disease

Contact: Laura Ballenger

Email: laura.ballenger@nationwidechildrens.org

Type: Basic-Translational-Clinical Roundtable

Target Audience: Pediatricians, Subspecialists, Trainees

Audience Size: 100

Tracks: Allergy, Immunology and Rheumatology | Children with Chronic Conditions | Global Neonatal & Children's Health | Mental Health | Nephrology

Objectives: 1. Understand the genetic architecture of cSLE including common variants, associations with subtypes like lupus nephritis, and monogenic forms of the disease. 2. Describe the current epidemiology of cSLE in global populations to highlight gaps in access to care and research. 3. Describe the prevalence, risk factors, impact, and treatment of psychiatric comorbidity in patients with cSLE. 4. Explain approaches to blood pressure and fluid management in the cSLE patient, including approach to hypertension, adverse effects from corticosteroids, and cardiovascular disease.

Description: This session will highlight aspects of childhood-onset systemic lupus erythematosus (cSLE) beyond the clinical diagnosis and immunosuppressive treatment. The first presentation will discuss genetic associations in cSLE and implications for treatment of sub-phenotypes and monogenic forms of the disease. The second presentation will continue the discussion of the genetic landscape of cSLE from a global population perspective and include review of global disparities in access to care and gaps in research. The third presentation will address psychiatric comorbidity in patients with cSLE and strategies for mental health intervention. Lastly, the fourth presentation will review treatment of hypertension and edema from nephritis, sodium and fluid retention from steroids, BP control of extra-renal vasculitis, and cardiovascular disease in patients with cSLE.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: None

Additional Comments: None.

Financial Sponsor?:

Society Affiliation: Other/No Affiliation

Participant Engagement: We will receive Q&A through available chat box features and have speakers/moderators answer while they are not virtually presenting in addition to verbal question session at end of presentation.

Previous Session and Conference Experience: N/A

Chairs: Laura Ballenger (Moderator); Jay Mehta (Moderator)

1 Speaker

Name: Linda Hiraki

Phone:

Institution: The Hospital for Sick Children

Email: linda.hiraki@sickkids.ca

Title/Topic: Genetics of childhood-onset SLE

Duration: 0

2 Speaker

Name: Laura Lewandowski

Phone:

Institution: National Institute of Arthritis and
Musculoskeletal and Skin Diseases

Email: laura.lewandowski@nih.gov

Title/Topic: Global Disparities in childhood-onset SLE: Access to care and research

Duration: 0

3 Speaker

Name: Andrea Knight

Phone: 647-809-8132

Institution: Hospital for Sick Children

Email: andrea.knight@sickkids.ca

Title/Topic: Addressing Mental Health in childhood-onset SLE

Duration: 0

4 Speaker

Name: Scott E. Wenderfer

Phone: 832-824-3800

Institution: Baylor College of Medicine

Email: wenderfe@bcm.edu

Title/Topic: Lupus nephritis: blood pressure, fluid management and cardiovascular risks

Duration: 0

Proposal # : 379488

Session Title : A Tribute to Dr. Maria Delivoria-Papadopoulos: From Basic Science to Clinical Trials - Physician-Researcher Journeys and Collaborations in Hypoxic Ischemic Encephalopathy

Contact: Nathalie Maitre

Email: nathalie.maitre@nationwidechildrens.org

Type: Panel Discussion

Target Audience: Neonatologists, Neurologists, Clinicians, Researchers, Trainees

Audience Size: 200

Tracks: Academic and Research Skills | Clinical Research Pathway | Cross-Disciplinary Pathway | Neonatology | Neurology | Scholarly Sessions | Trainee Pathway

Objectives: 1- Gain a longitudinal perspective on neuroprotection therapy development, including obstacles to new pharmacological advancements in neonatal care 2- Contrast and compare the translation process of erythropoietin to that of other new treatments for HIE 3- Develop a new understanding of partnerships in developing HIE treatments, between epidemiology and patient-based neuroscience, or between industry and large NIH-funded clinical trials

Description: Through the topic of development of HIE therapeutics and trials, we want the audience to gain an understanding of the continuum between basic science, epidemiological, patient-oriented and clinical research, all while keeping in mind the driving reasons behind neonatal research: patient care. During decades of an incredible career, Dr. Delivoria-Papadopoulos contributed immensely to our understanding of the cellular mechanisms of cerebral injury following hypoxia. We dedicate this session to Dr. Delivoria-Papadopoulos, in recognition of her many contributions and mentoring to advance the field of basic-translational HIE research. In honor of her vision, each researcher across the continuum will show how collaboration with others has contributed to either a critical finding or overcoming a major obstacle. Dr Donna Ferriero will introduce the tribute and Dr Nathalie Maitre will moderate the Q and A session.

Presenters will explain the evolution of their science through their career, with one key finding and challenging time and the collaborations and partnerships they have leveraged along the way. The following four researchers across the continuum of career trajectories (mix of senior, mid and early career investigators) will discuss both scientific and career lessons learned from working in the field of neonatal neuroprotection.

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partnerships they have leveraged along the way. The following four researchers across the continuum of career trajectories (mix of senior, mid and early career investigators) will discuss both scientific and career lessons learned from working in the field of neonatal neuroprotection.

From the first preclinical work on Erythropoietin to current large clinical trials, Dr Juul's research trajectory gives us an overview of what it is to bring a treatment for HIE from the bench to the bedside. She will discuss a few key findings, transitions and challenges that led to large scale research on one of the first new neuroprotective agents in neonatal care.

Dr Tai Wu, an early career investigator and newly elected SPR member, will describe how MRI areas of higher brain temperature correlate with energy failure and excitotoxicity, and describe the challenges of translating fundamental in vivo findings to the bedside.

Dr. Chalak will illustrate the importance of developing novel assessments in patient-based research for HIE. She will demonstrate how an array of rigorous measurement of treatment effect, spanning serum biomarkers to a novel brain-based pattern of classification, can offer mechanistic insights to clinical HIE trials. She will talk about the challenges of using traditional clinical trials models in current HIE research.

Dr Yvonne Wu, a senior investigator will finish by commenting on a combined approach using clinical trials and epidemiologic studies to develop new strategies for treating and preventing HIE. She will discuss her work on developing novel strategies during labor and delivery that will better predict HIE and related birth outcomes so that treatments and biomarkers have a greater impact in the long-term.

Time Block:

Q and A:

Audience Polling:

Sabbath Conflicts: N/A

Conflicting Sessions: Brain Club, Follow-up Club, Neonatal Neurology Clinical trials

Additional Comments:

Financial Sponsor?:

Society Affiliation: SPR

Participant Engagement: The polling response are to query the audience during the Q and A on their thoughts on 3 topics, to help the Panelists understand the perspective of their audience as they answer the questions. For example: The audience will be asked: If you had an challenge in translating bench to bedside research/investigating safety concerns/creating a pragmatic design/using meaningful outcomes in HIE, what do you think the main problems would be- Multiple choice answers. The moderator would then query the panelists how they may be concerned about this and how to overcome it (or not).

Previous Session and Conference Experience:

Chairs: Donna Ferriero (Chair); Nathalie Maitre (Chair)

1 Speaker

Name: Donna M. Ferriero

Phone: 4155027319

Institution: UCSF

Email: donna.ferriero@ucsf.edu

Title/Topic: A tribute to the science and humanism of Dr Maria Delivoria-Papadopoulos

Duration: 0

2 Speaker

Name: Sandra E. Juul

Phone: 2062216814

Institution: University of Washington

Email: sjuul@uw.edu

Title/Topic: Erythropoietin for HIE - a journey from bench to bedside

Duration: 0

3 Speaker

Name: Tai-Wei Wu

Phone: 6264297866

Institution: Children's Hospital Los Angeles

Email: twu@chla.usc.edu

Title/Topic: Optimizing efficacy of hypothermia for HIE: opportunities and challenges derived from in vivo metabolite research

Duration: 0

4 Speaker

Name: Lina F. Chalak

Phone: 2143344340

Institution: ut southwestern medical center

Email: lina.chalak@utsouthwestern.edu

Title/Topic: Novel multimodal biomarkers for response to treatment in HIE - from research to clinical trials

Duration: 0

5 Speaker

Name: Yvonne Wu

Phone: 415-290-3260

Institution: UCSF

Email: Yvonne.Wu@UCSF.edu

Title/Topic: Developing new strategies for treating and preventing HIE: from perinatal to prenatal clinical research.

Duration: 0