

(1) Proposal ID: 1931326

Reducing the Burden of Bronchopulmonary Dysplasia-associated Pulmonary Hypertension in Extremely Preterm Neonates: A Physiologic Guided Approach

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Bonny Jasani**

Score: **0**

Participant(s)

Bonny Jasani, MBBS, MD, DM (he/him/his)

Position:

Staff Neonatologist and Assistant Professor of Pediatrics

Organization:

The Hospital for Sick Children

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

Not a member of any of these organizations

Satyan Lakshminrusimha, MD (he/him/his)

Position:

Professor and Chair

Organization:

University of California Davis Children's Hospital

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

AAP, APS, SPR

Dany Weisz, MD, MSc

Position:

Associate Professor of Pediatrics

Organization:

University of Toronto Temerty Faculty of Medicine

Role:

Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

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

SPR

Steven H. Abman, MD (he/him/his)

Position:

Professor

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Gabriel Altit, MDCM, MSc, FRCPC, FASE (he/him/his)

Position:
Neonatologist - Assistant Professor

Organization:
McGill University Faculty of Medicine and Health Sciences

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Prefer not to respond

Gender
Male

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

Audrey Hebert, MD, MHSc, FRCPC

Position:
Assistant professor

Organization:
CHU de Quebec - Universite Laval

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Amish Jain, MBBS, MRCPCH, PhD (he/him/his)

Position:
Professor in Pediatrics

Organization:
University of Toronto Temerty Faculty of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Session Description

Session Description

Bronchopulmonary dysplasia-associated pulmonary hypertension has a high burden of mortality and morbidities in extremely preterm neonates that extends to early childhood. Lack of consensus with regards to risk factors, timing of echocardiographic screening and management approaches has resulted in significant variability amongst neonatologists. The relative lack of invasive monitoring tools and non-specific clinical signs makes it challenging for clinicians to delineate underlying circulatory pathophysiology. An understanding of principles of cardiopulmonary physiology and integration with clinical signs and application of the novel echocardiographic markers for early detection and

phenotypic based individualized management can help lower the cumulative burden of this disease in this vulnerable population. This session will provide attendees a physiologic approach to the assessment and management of bronchopulmonary dysplasia-associated pulmonary hypertension in extremely preterm neonates, focusing on translating applied hemodynamic physiologic principles to bedside clinical care.

Learning Objectives

1. Describe the foundational principles in cardio-pulmonary physiology, their clinical application in assessment of pulmonary vascular resistance and interaction with right heart
2. Assess the incidence, risk factors and outcomes of bronchopulmonary dysplasia-associated pulmonary hypertension and delineate the different phenotypes of this disease in extremely preterm infants
3. Appraise the traditional and newer echocardiographic markers for early detection of bronchopulmonary dysplasia-associated pulmonary hypertension and their application in the individualized, phenotypic management

Scholarly Session Questions

1. **Audience Size**
500
2. **Target audience**
Neonatologists, Cardiologists, Intensivists, Respiratory Therapists, NICU/PICU Nurse Practitioners, Paediatric Residents, Neonatal-Perinatal Medicine Fellows
3. **Tracks**
Cardiology
Developmental Biology
Neonatology
Pulmonology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Saturday, April 26
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Hemodynamics club
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Bonny Jasani, early career neonatologist who is slowly gaining prominence in the field of neonatal hemodynamics will be a future SPR member.

8. **Does this submission involve one or more specialties or disciplines?**

Yes: Topic is BPD-associated pulmonary hypertension involving Neonatology, Cardiology, Paediatric/Cardiac Intensive Care

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

N/A

10. **Additional comments**

Presentation Titles and Durations

The **Who**, **What**, **When**, **Why** and **How** of Bronchopulmonary dysplasia associated-pulmonary hypertension

Bonny Jasani, MBBS, MD, DM

Duration of Presentation in Minutes

15

Introduction

Satyan Lakshminrusimha, MD

Duration of Presentation in Minutes

5

Key physiologic concepts in BPD-PH: Deconstructing the complex maze of BPD and PH

Steven H. Abman, MD

Duration of Presentation in Minutes

10

Right or left heart: Phenotypic characterization of pulmonary hypertension in Bronchopulmonary dysplasia

Gabriel Altit, MDCM, MSc, FRCPC, FASE

Duration of Presentation in Minutes

15

Individualized precision-based management strategies for BPD-PH: Can we change the trajectory of this disease?

Audrey Hebert, MD, MHSc, FRCPC

Duration of Presentation in Minutes

15

Novel echocardiographic markers for early detection of BPD-PH: Are we there yet?

Amish Jain, MBBS, MRCPCH, PhD

Duration of Presentation in Minutes

15

(2) Proposal ID: 1925209

Unexplained Deaths in Infants and Children: a Multidisciplinary Pediatric Approach

Session Type: **Basic-Translational-Clinical Roundtable**

Proposal Status: **Complete / Locked**

Submitter: **Monica Wojcik**

Score: **0**

Participant(s)

Richard D. Goldstein, MD (he/him/his)

Position:

Associate Professor of Pediatrics

Organization:

Harvard Medical School

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Sanda Alexandrescu, MD

Position:

Neuropathologist, Boston Children's Hospital; Associate Professor of Pathology

Organization:

Boston Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Ingrid A. Holm, MD, MPH

Position:

Professor of Pediatrics, Harvard Medical School

Organization:

Boston Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Monica Wojcik, MD, MPH (she/her/hers)

Position:

Assistant Professor

Organization:

Boston Children's Hospital

Role:

Submitter;Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian, White

Gender
Female

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

Session Description

Session Description

Nearly all pediatric care providers will at some point encounter the sudden and unexpected death of an infant or child. The medical assessment after sudden unexpected pediatric deaths generally occurs in public forensic settings and consequently is removed from pediatric medicine, from many details of the child and family, and from usual psychosocial support. As research for potential causes beyond sleep accidents has advanced, the potential exists to investigate these deaths for rare and undiagnosed diseases. In this session, we will review the approach developed in Robert's Program on Sudden Unexpected Death in Pediatrics (SUDP) outlining the program's methods, insights, impact on a family, and potential for ongoing novel research. Robert's Program combines advanced investigation in SUDP with direct family engagement, taking an "undiagnosed diseases" approach to SUDP as a heterogeneous group of conditions that may have identifiable genetic contributions that went unrecognized. After enrolling families with a child who has died of SUDP, we perform a multidisciplinary evaluation of clinical data, general pathology slides, and neuropathological slides; conduct trio genomic sequencing of the deceased child and their parents; return any potentially explanatory and/or clinically meaningful results from our evaluation to the parents along with genetic counseling; and provide bereavement support. This research roundtable presents the state-of-the-art in SUDP, including research in basic science (neuropathology), clinicians (genetics/neonatology/general pediatrics), and translational researchers (neuroscience, genetics/genomics). This program may serve as a model for other research programs leveraging basic, clinical, and translational research towards a shared vision and goal.

Learning Objectives

1. Identify possible mechanisms for sudden, unexpected death in pediatrics aside from sleep accidents
2. List the possible benefits of a postmortem diagnosis for bereaved parents/caregivers
3. Connect families to resources for thorough postmortem investigation following the sudden, unexpected death of a child

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
pediatric care providers, pediatric basic science, clinical, and translational researchers, trainees and clinicians with all levels of experience
3. **Tracks**
Advocacy
Basic Science
Clinical Research
Community Pediatrics
General Pediatrics
Genomics/Epigenomics
Palliative Care
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Drs. Wojcik and Goldstein are members of a scholarly session being submitted (Hot Topics Symposium)
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Sanda Alexandrescu is not a member of one of these organization. Her inclusion is valued for her expertise in pediatric neuropathology, a critical component of the multidisciplinary research group discussing the topic of SIDS research.

8. **Does this submission involve one or more specialties or disciplines?**

Topic is Sudden Infant Death Syndrome/Sudden Unexpected Death in Pediatrics, involving general pediatrics, neonatology, genetics/genomics, pathology, public health, community groups, emergency medicine, critical care.

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

N/A

10. **Additional comments**

Presentation Titles and Durations

Robert's Program overview: Assumptions and accomplishments in research on Sudden Unexpected Death in Pediatrics (SUDP)

Richard D. Goldstein, MD

Duration of Presentation in Minutes

15

the Brain in Sudden Unexpected Pediatric Deaths: Novel insights and impacts

Sanda Alexandrescu, MD

Duration of Presentation in Minutes

15

Phenotyping in SUDP: Subgroupings and hypotheses about subtypes that inform phenotypes and guide analysis

Ingrid A. Holm, MD, MPH

Duration of Presentation in Minutes

15

Integrating genomic data into postmortem investigation of SUDP

Monica Wojcik, MD, MPH

Duration of Presentation in Minutes

15

(3) Proposal ID: 1931893

From Failure to thrive to Faltering Weight: A New name with New recommendations

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Hans Kersten**

Score: **0**

Participant(s)

Hans B. Kersten, MD (he/him/his)

Position:
Professor of Pediatrics

Organization:
St. Christopher's Hospital for Children/Drexel University College of
Medicine

Role:

Submitter;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Praveen S. Goday, MBBS, FAAP

Position:
Professor

Organization:
N

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

AAP

Session Description

Session Description

Failure to Thrive (FTT) is a common reason for visits to the pediatrician and for hospital admission, occurring in >5% in various settings. The term “failure to thrive” also has negative connotations for parents and caregivers. In addition, the condition lacks a precise definition, standards of care are unclear, and there are currently no evidence-based Clinical Practice Guidelines on this important subject.

The AAP FTT CPG Committee has developed new CPG for Faltering Weight (FW), the new term for FTT with a multidisciplinary approach. This session will highlight the new evidence-based Clinical Practice Guidelines (CPGs) to help guide clinical evaluation and management by pediatric practitioners of children with FW.

Learning Objectives

1. Identify the new criteria for Faltering Weight.
2. Discuss the clinical workup for children with faltering weight
3. Recommend a basic management strategy for children with faltering weight

Scholarly Session Questions

1. **Audience Size**

25

2. **Target audience**

General Pediatricians. The AAP FTT CPG Committee has developed new CPG for Faltering Weight (FW), the new term for FTT with a multidisciplinary approach. This session will highlight the new evidence-based Clinical Practice Guidelines (CPGs) to help guide clinical evaluation and management by pediatric practitioners of children with FW. CPG a collaboration with NASPGHAN, so relevant for GI physicians.

3. **Tracks**

General Pediatrics
Health Equity/Social Determinants of Health
Pediatric Nutrition

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

None.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

Section of Gastroenterology, Hepatology and Nutrition, Committee on Nutrition

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

No.

10. **Additional comments**

An AAP multidisciplinary team developed evidence-based guidelines on faltering weight (formerly FTT). This session will use a multi-modal presentation to highlight the prioritized clinical questions, the GRADE process used to develop the 8 Key Action Statements, and recommendations to help guide pediatricians with decisions on children with faltering weight.

Presentation Titles and Durations

From Failure to thrive to Faltering Weight: A New name with New
recommendations

Praveen S. Goday, MBBS, FAAP

Duration of Presentation in Minutes

30

(4) Proposal ID: 1919718

Clinician Advocacy at the Bedside - a Pro-Con Discussion

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Kelly Michelson**

Score: **0**

Participant(s)

Kelly N. Michelson, MD MPH (she/her/hers)

Position:

Professor of Pediatrics

Organization:

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

Role:

Submitter;Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

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

AAP

Douglas S. Diekema, MD, MPH (he/him/his)

Position:

Professor of Pediatrics

Organization:

University of Washington School of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APA

Douglas J. Opel, MD, MPH (he/him/his)

Position:

Professor

Organization:

UW/Seattle Children's

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APS, SPR

Session Description

Session Description

Public health and social issues can impact health outcomes as much or more than the provision of clinical care. The United States Healthy People 2030 initiative describes key social influencers of health including economic stability, access to and quality of education and healthcare, and contextual and social issues in neighborhoods and communities. Some argue that clinicians' (e.g.,

physicians, nurses, therapists, etc.) obligation to advocate for matters that impact their patients' health extends to advocating for the health of populations. Such advocacy could include providing expertise outside the clinical setting on social and public health issues like abortion access, school vaccination requirements, efforts to curb gun violence, or protecting the environment.

In recent years, clinicians have sought to advocate for public and societal health issues through actions within the clinical encounter. One common way clinicians do this is by wearing stickers or pins on their badges (e.g., a 'WhiteCoats4BlackLives' sticker). Some contend that advocacy related to societal health within a clinical encounter is appropriate. Others argue that such advocacy is not; though well-intended, such advocacy can negatively impact patient care and the creation of a medical home for some families, particularly when clinicians and patients have divergent views. In this pro/con discussion we will consider the question of whether advocacy for public health and societal issues thought to impact health outcomes should extend to the "bedside" or clinic where clinicians interact with patients and their families. Specifically, we will ask "Is advocacy by clinicians at the 'bedside' appropriate?"

Learning Objectives

1. Upon completion, participants will be able to describe public health and social issues that impact patient health outcomes.
2. Upon completion, participants will be able to list reasons why clinician advocacy at the "bedside" may be appropriate.
3. Upon completion, participants will be able to list reasons why clinician advocacy at the "bedside" may not be appropriate.

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

Trainees

Clinicians

3. **Tracks**

Advocacy

Clinical Bioethics

Community Pediatrics

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

Medical Education

Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Friday, April 25
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Bioethics Interest Group
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
This topic is relevant for all specialties in all settings.
9. **If your session was presented at another conference, please describe the conference and presentation.**
NA
10. **Additional comments**

Presentation Titles and Durations

Con: Clinician advocacy on issues related to societal health at the "bedside" is not appropriate

Kelly N. Michelson, MD MPH

Duration of Presentation in Minutes

30

Introduction: Background and issues that arise when clinicians bring advocacy to the "bedside"

Douglas S. Diekema, MD, MPH

Duration of Presentation in Minutes

10

Pro: Clinician advocacy on issues related to societal health at the "bedside" is appropriate

Douglas J. Opel, MD, MPH

Duration of Presentation in Minutes

30

(5) Proposal ID: 1927433

One size does not fit all: Variations to pediatric mental healthcare access programs over time and place

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Jeanne Van Cleave**

Score: **0**

Participant(s)

David Keller, MD (he/him/his)

Position:

Professor of Pediatrics and Vice Chair of Clinical Strategy and Transformation

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APA, APS

Sandra Fritsch, MD, MEd, DFAACAP

Position:

Medical Director of PMHI, Professor of Psychiatry

Organization:

Children's Hospital Colorado

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Renzmeir Baloran, MPH (she/her/hers)

Position:

Pediatric Mental Health Care Access Coordinator

Organization:

Hawaii State Department of Health

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

Not a member of any of these organizations

Jeanne Van Cleave, MD (she/her/hers)

Position:

Associate Professor

Organization:

University of Colorado School of Medicine

Role:

Submitter;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Twenty years ago, the Massachusetts Child Psychiatry Access Program was created to address a looming pediatric mental health crisis by providing expertise and referral assistance to primary care clinicians managing psychiatric conditions in children and youth. Since then, the model has expanded to 54 states, D.C., and US territories, with the goal of supporting access to high-quality pediatric mental health care in primary care settings. We will review the history of the pediatric mental healthcare access programs (PMHCAs) and discuss how the model has evolved, with a focus on differences in implementation in states and territories with vastly different pediatric mental health landscapes. David Keller, MD, will present a recorded interview with John Straus, MD, President of the National Network of Child Psychiatry Access Programs (NNCPAP). They will discuss the history of implementation of this model across the US. Sandra Fritch, MD, the medical director of CoPPCAP (Colorado Pediatric Psychiatry Consultation and Access Program) and former medical director of the PMHCA in Maine, will present an in-depth look at adaptations made to Colorado's program since it launched in 2019. Renzymeir Baloran, MPH, coordinator for Hawaii's PMHCA, will present an examination of adaptations and challenges to implementation of the model in Hawaii, and how the differences in the healthcare system, geography and culture drive modifications to the model while still adhering to its key components. The speakers will then take questions. Jeanne Van Cleave, MD, a clinician investigator with end-user and research experience with PMHCAs, will chair.

Learning Objectives

1. Appreciate the gap in access to mental healthcare for children and youth, and how the PMHCA model was designed to address this need

2. Identify the drivers of and rationale behind adaptations to the model over time and across various geographic regions
3. Understand future opportunities for PMHCAs in their mission to support primary care clinicians in providing high-quality, effective mental health conditions in US children and youth

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Primary care clinicians, general pediatric health services researchers, mental health clinicians/researchers, policymakers/advocates in child mental health
3. **Tracks**
General Pediatrics
Mental Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Not at the moment
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Renzymeir Baloran is the coordinator for the PMHCA in Hawaii and is uniquely qualified to speak on this program. No one is more qualified than she to speak on this topic. Dr. Fritsch is a child psychiatrist and member of AACAP (the American Academy of Child and Adolescent Psychiatry). She is the most qualified person to speak about the Colorado and Maine programs.
8. **Does this submission involve one or more specialties or disciplines?**
Topic is state-level programs to mental health in primary care, involving mental health professions, public health, and general pediatrics

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

NA

10. **Additional comments**

Presentation Titles and Durations

An Interview with John Straus, President of the National Network of Child Psychiatry Access Programs

David Keller, MD

Duration of Presentation in Minutes

20

One size does not fit all: The PMHCA model from Massachusetts to Maine to Colorado

Sandra Fritsch, MD, MEd, DFAACAP

Duration of Presentation in Minutes

20

One size does not fit all: The Hawaii Pediatric Mental Healthcare Access Program

Renzymeir Baloran, MPH

Duration of Presentation in Minutes

20

(6) Proposal ID: 1932294

Innovations in Advancing Care and Research with Families Using Languages Other than English

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Christina Rojas**

Score: **0**

Participant(s)

Christina Rojas, MD

Position:

Assistant Professor of Pediatrics

Organization:

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

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Alisa Khan, MD, MPH

Position:

Pediatric Hospitalist, Assistant Professor of Pediatrics, Director of Program for Language Equity

Organization:
Boston Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Lisa R. DeCamp, MD MSPH (she/her/hers)

Position:
Associate Professor

Organization:
Childrens Hospital Colorado| University of Colorado

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

K. Casey Lion, MD, MPH (she/her/hers)

Position:
Associate Professor of Pediatrics

Organization:
University of Washington/ Seattle Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA, APS

Priscilla M. Ortiz, PhD, CMI (she/her/hers)

Position:

Applied Linguist / Language Services Manager

Organization:

CHOP

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

American Indian or Alaska Native, Black or African American, White

Gender

Female

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

Not a member of any of these organizations

Session Description

Session Description

Inequities in care and communication for children and families who use languages other than English for medical communication are prevalent and extend across various specialties, diagnoses, and care settings. Research in

this field has expanded significantly over the past several years, with an increasing number of adverse outcomes reported, related to initial diagnoses, management of chronic diseases, and interactions with care teams, among others. Simultaneously, various novel interventions targeted towards mitigating this inequity—many incorporating the use of technology—have been developed and successfully implemented.

Drawing on both recent literature and decades worth of combined experience, this “Hot Topic Symposium” centers on recent advances in promoting language justice for patients and families who use languages other than English, with a focus on the influence of technology. Specifically, we will (1) provide an overview of the intersection between language justice and technology, (2) highlight the utility of technology in conducting pragmatic multilingual research, (3) consider some of the limitations of technology and successful “low-tech” approaches to language justice, including patient navigation, (4) discuss the intersection of artificial intelligence and language justice, and (5) explore future directions in the intersection of high- and low-tech language justice work. Presentations will be interwoven with interactive components, time for audience questions, and collaborative discussion. Attendees, regardless of specialty, location, or years in practice, will leave with a framework for understanding and promoting language justice innovations at their home institutions.

Learning Objectives

1. Discuss how technology can be leveraged to promote language justice in healthcare and research
2. Identify potential drawbacks and limitations to technology solutions and how to consider them in the context of language justice
3. Develop a strategy to incorporate innovation in order to foster a culture of language justice at your home institution

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Pediatricians interested in promoting health equity, of all specialties, of all levels of training
3. **Tracks**
Advocacy
Artificial Intelligence
Diversity, Equity, and Inclusion
General Pediatrics

Health Equity/Social Determinants of Health
Health Services Research
Immigrant Health
Social Media & Technology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Scheduling Conflict: Workshop titled "Multilingual Research Methods: Including Families Who Speak Languages Other than English (LOE) in Research. All speakers will be helping to facilitate this workshop.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes, this topic is centered on language justice, which involves virtually all specialties and disciplines.
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Promoting language justice via technology: A new era
Christina Rojas, MD

Duration of Presentation in Minutes

10

Technology successes in conducting pragmatic multilingual research
Alisa Khan, MD, MPH

Duration of Presentation in Minutes

20

Making a case for (keeping) humans: Using patient navigation to promote language justice

Lisa R. DeCamp, MD MSPH

Duration of Presentation in Minutes

20

Advancing language justice using artificial intelligence: Pearls and pitfalls

K. Casey Lion, MD, MPH

Duration of Presentation in Minutes

20

Future directions: The intersections of low-tech and high-tech language justice work

Priscilla M. Ortiz, PhD, CMI

Duration of Presentation in Minutes

20

(7) Proposal ID: 1932083

Toward the North Star: Recalibrating DEI To Stay on Track

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Daniel Rauch**

Score: **0**

Participant(s)

Daniel A. Rauch, MD

Position:
Professor of Pediatrics

Organization:
Hackensack Meridian School of Medicine

Role:

Submitter;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Joy D. Howell, MD (she/her/hers)

Position:
Vice Chair for Diversity

Organization:
Weill Cornell Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

Not a member of any of these organizations

Karen D. Hendricks-Muñoz, MD, MPH (she/her/hers)

Position:

William Tate Graham Professor, Chair Division of Neonatal Medicine

Organization:

Virginia Commonwealth University School of Medicine, Children's Hospital of Richmond at VCU

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

Black or African American, White

Gender

Female

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

AAP, APA, APS

Madeline Joseph, MD (she/her/hers)

Position:

Professor/Associate Dean for Faculty Advancement and Engagement

Organization:

University of Florida College of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Elena Fuentes-Afflick, MD, MPH (she/her/hers)

Position:
Chief Scientific Officer

Organization:
Association of American Medical Colleges

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Jean L. Raphael, MD, MPH (he/him/his)

Position:
Professor of Pediatrics

Organization:
Baylor College of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Male

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

Session Description

Session Description

The most compelling case for DEI in healthcare is that of workforce diversity as part of the solution to healthcare disparities that have been characterized as extensive, persistent, and pervasive. Over the past several decades, there have been numerous attacks on DEI initiatives (formerly affirmative action), both inside and outside of academic medicine. In the aftermath of the SCOTUS decision in June 2023, the events on college campuses in the Spring of 2024 in response to the crisis in the Middle East spotlighted DEI implementation. The SCOTUS decision as well as public scrutiny of academic leadership led to curtailing DEI offices in many areas and, in some states, intervention of state governments to eliminate official DEI activities altogether. This panel will consist of DEI leaders from institutions across the country (CA, FL, NY, TX, VA) who will share their experiences and plans to move forward.

Learning Objectives

1. Appreciate the different responses to the protests of 2024
2. Understand the impact of restrictions on DEI activities
3. Create a path forward for DEI that incorporates lessons learned.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Everyone interested in sustaining DEI initiatives
3. **Tracks**
Advocacy
Diversity, Equity, and Inclusion

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Partner society Presidential sessions
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
n/a
8. **Does this submission involve one or more specialties or disciplines?**
The speakers do represent several specialties, but more importantly different regions of the country that have been affected in different ways.
9. **If your session was presented at another conference, please describe the conference and presentation.**
n/a
10. **Additional comments**

Presentation Titles and Durations

Live from NY

Joy D. Howell, MD

Duration of Presentation in Minutes

10

Virginia Is For Lovers

Karen D. Hendricks-Muñoz, MD, MPH

Duration of Presentation in Minutes

10

The Rules Are Different Here

Madeline Joseph, MD

Duration of Presentation in Minutes

10

Dream Big

Elena Fuentes-Afflick, MD, MPH

Duration of Presentation in Minutes

10

It's Like A Whole Other Country

Jean L. Raphael, MD, MPH

Duration of Presentation in Minutes

10

(8) Proposal ID: 1911305

Managing hypothermic young infants in the hospital - what's new and what's coming?

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Nathan Money**

Score: **0**

Participant(s)

Alexander Rogers, MD (he/him/his)

Position:

Clinical Professor of Emergency Medicine and Pediatrics

Organization:

University of Michigan Medical School

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Nathan Money, DO (he/him/his)

Position:

Assistant professor

Organization:

University of Utah

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APA

Kathryn Westphal, MD (she/her/hers)

Position:

Pediatric Hospitalist

Organization:

Nationwide Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Julie K. Wood, DO (she/her/hers)

Position:

Clinical Associate Professor

Organization:

Wake Forest School of Medicine of Wake Forest Baptist Medical Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

John Morrison, MD, PhD (he/him/his)

Position:
Assistant Professor

Organization:
Johns Hopkins All Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Sriram Ramgopal, MD (he/him/his)

Position:
Assistant Professor

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

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Session Description

Session Description

Hypothermic young infants present a diagnostic challenge for clinicians. While most of these infants have a benign condition such as environmental exposure, others have life-threatening pathologies, including serious bacterial infections or invasive herpes simplex viral infection. Hypothermia may also occur due to a variety of other infectious and non-infectious conditions. There are no evidence-based guidelines to direct the management of infants with hypothermia, resulting in substantial variation in care for important management decisions such as invasive testing, administration of antibiotics and hospitalization.

Over the past decade, several studies have enhanced our understanding of the management of infants with hypothermia, though challenges persist due to lack of standardized definitions and comprehensive guidelines. In this hot topic symposium, six experts in hypothermic infant research and management will synthesize available evidence on the following topics to help attendees incorporate the most recent literature into their practice: 1) definition, prevalence and variation in current management of hypothermia in young infants, 2) prevalence and risk factors for serious and invasive bacterial infections, 3) prevalence and risk factors for herpes simplex virus, 4) other infectious and noninfectious causes in hypothermic young infants, 5) evidence-based management of hypothermia in young infants, and 6) future directions of hypothermic young infant research to promote guideline development.

Learning Objectives

1. describe common infectious and noninfectious conditions that occur in young infants with hypothermia.
2. interpret recent literature related to the prevalence and risk factors for serious bacterial infections and herpes simplex virus among young infants with hypothermia.

3. synthesize and incorporate recent literature to guide management of young infants with hypothermia.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
outpatient pediatricians, emergency medicine pediatricians, hospital pediatricians
3. **Tracks**
Emergency Medicine
General Pediatrics
Hospital Medicine
Infectious Diseases
Well Newborn
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
none
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
hypothermic young infant management includes management by 1) emergency medicine, 2) hospital medicine, and 3) outpatient pediatricians.
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

The definition, prevalence, and variation in current management of hypothermia in young infants.

Alexander Rogers, MD

Duration of Presentation in Minutes

15

The prevalence and risk factors for serious and invasive bacterial infections in hypothermic young infants.

Nathan Money, DO

Duration of Presentation in Minutes

15

The prevalence and risk factors for herpes simplex virus in hypothermic young infants.

Kathryn Westphal, MD

Duration of Presentation in Minutes

15

Other infectious and noninfectious causes in hypothermic young infants.

Julie K. Wood, DO

Duration of Presentation in Minutes

15

Evidence-based management of hypothermia in young infants.

John Morrison, MD, PhD

Duration of Presentation in Minutes

15

Future directions of hypothermic young infant research to promote guideline development.

Sriram Ramgopal, MD

Duration of Presentation in Minutes

15

(9) Proposal ID: 1904199

It's Getting Hot in Here: The Impact of Climate Change on Children's Health

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Stephanie Kwon**

Score: **0**

Participant(s)

Michael F. Perry, MD

Position:

Assistant Professor of Pediatrics

Organization:

Nationwide Children's Hospital

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Hilary Lin, MD (she/her/hers)

Position:

Pediatric Hospitalist

Organization:

CHOC Children's Hospital of Orange County

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Stephanie Kwon, DO (she/her/hers)

Position:

Assistant Professor

Organization:

Medical University of South Carolina College of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Session Description

Session Description

Hurricanes, wildfires in the west, record drought, extreme heat - these are unfortunately increasingly common scenarios that we find ourselves facing as the climate changes. The AAP stresses that children are particularly vulnerable and the WHO reports that the morbidity and mortality of climate change fall disproportionately on children. However, these threats can feel ambiguous to

the health care provider and solutions can feel out of reach. This symposium will outline how the effects of a changing climate directly affects children. We will do so by addressing some of the key disasters we are increasingly facing - heat waves, flooding, drought, the impact of increasing air pollutants and aeroallergens, and the link between climate change and mental health. We aim to focus on specific changes providers can expect to see no matter where or what setting they practice. We will end with concrete steps pediatricians can take to counsel families on measures of prevention and treating the health effects of climate change and advocate at multiple levels (local, state, and federal) for change. As our climate changes, it is essential that we change with it.

The symposium will be 3 parts including:

Introduction on the Impact of Climate Change: future probability of increasing events, disproportionate impact on children, exacerbation of social inequalities, impacts on hospitalization.

Discussion of Specific Climate Events and their Child Health Implications: Heat, Flooding, Fire, Earthquake, Vector borne illness

Advocacy and Mitigation Techniques to Address Climate Change

Learning Objectives

1. Understand the widespread impact climate change has across the US and its disproportionate impact on children.
2. Recognize health conditions that providers will encounter in relation to increasing impacts of climate change on pediatric health.
3. Review the resources that are available to pediatricians to counsel families about climate change and advocate for change.

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

All attendees of the conference including faculty, trainees would benefit from learning the info in this talk

3. **Tracks**

Advocacy

Environmental Health

General Pediatrics

Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

N/A

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

Topic is Climate Change involving General Pediatrics, Public Health, Environmental Health and Advocacy

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

This session was presented at the 2023 Pediatric Hospital Medicine Conference in Philadelphia for a clinical quick hit session: 35-minute "rapid fire" talks on a clinical entity, focused on clinical knowledge, "latest and greatest" updates or evolution in clinical practice in one area. Given duration of the the Quick Hit presentation, we were limited in depth and breadth of topics we wanted to cover and would love the opportunity to expand on our presentation to provide an even more comprehensive review of the topic provided by the Hot Topic Symposia.

10. **Additional comments**

Presentation Titles and Durations

Introduction on the Impact of Climate Change

Michael F. Perry, MD

Duration of Presentation in Minutes

25

Discussion of Specific Climate Events and their Child Health Implications

Hilary Lin, MD

Duration of Presentation in Minutes

25

Advocacy and Mitigation Techniques to Address Climate Change

Stephanie Kwon, DO

Duration of Presentation in Minutes

25

(10) Proposal ID: 1920545

Tackling a Crisis: The Development of a Pediatric Med/Psych Unit

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Cristin McDermott**

Score: **0**

Participant(s)

Cristin McDermott, MD

Position:

Division Head, Child & Adolescent Psychiatry; Assistant Professor of Pediatrics & Psychiatry

Organization:

Connecticut Children's

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Catherine Sullivan, MD MHL (she/her/hers)

Position:

Clinical Professor of Pediatrics, Division Chief of Hospital Medicine

Organization:

Brown University

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Christine Skurkis, MD (she/her/hers)

Position:

Co-Medical Director Integrated Care Medical Psychiatric Unit

Organization:

UConn CT Children's

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Matthew Johnson, MD (he/him/his)

Position:

Assistant Professor

Organization:

Connecticut Children's Medical Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Connie Grant, MHA, MSN, RN, NE-BC

Position:
Senior Director Emergency Department and Mental Health Services

Organization:
Connecticut Children's Hospital

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Female

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

Session Description

Session Description

Connecticut Children's opened a 12 bed combined Med/Psych unit in January of 2024 to address an unmet need for patients with inpatient psychiatric needs and medical co-morbidity. The massive scope of the project required interdisciplinary coordination from a wide range of professionals. Existing hospital space was repurposed to access the breadth of medical specialists and expertise available. We will describe developmental aspects including funding, certifications, psychiatric and DPH compliance measures, ligature

resistant facility design, project management, business considerations, leadership structure, workforce development, and clinical care development. We will report data from our opening year including patient demographics, dispositions, symptom screening, rates of obesity, autism, learning challenges, restraint usage and reimbursement. Examples of medical diagnoses include Long QTc syndrome with wearable defibrillator, chronic kidney failure with dialysis, diabetes, obesity, paraplegia from a prior suicide attempt, medical PTSD after emergency colostomy, functional neurologic and pain disorders, POTS, acute and chronic pain of sickle cell. We will then describe our novel multidisciplinary approach to clinical care of these children, utilizing integrated subspecialty care, rehab services and school. Significant efforts have been made to reduce polypharmacy, prescribe aerobic exercise in an onsite gym, improve diabetes management, treat functional disorders and manage obesity with metformin to reduce medication associated weight gain. Additional complex care can be highlighted, such as our experience with gender affirming care, unique accommodations for autism spectrum disorders, psychogenic urinary retention, the challenges of treating complex eating disorders in a general milieu setting, and most importantly, lessons learned.

Learning Objectives

1. Understand the scope of multidisciplinary involvement necessary to create an integrated medical-psychiatric unit within a medical hospital.
2. Describe our first year of experience including demographics, dispositions, range of diagnoses, and reimbursement complexity.
3. Explore unique clinical strategies and challenges of caring for patients with complex medical and psychiatric comorbidities, in an inpatient milieu setting.

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

Pediatric hospitalists, pediatricians, hospital administrators/leadership, pediatric psychiatrists and psychologists.

3. **Tracks**

Adolescent Medicine

Children with Chronic Conditions

Diversity, Equity, and Inclusion

General Pediatrics

Hospital Medicine

Mental Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Dr. Catherine Sullivan is also submitting a workshop on INFORM: A Communication Framework to disclose functional diagnoses with team from Seattle Children's.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Constance Grant, Senior Director of ED and Mental Health Operations played an integral role in the planning and development of the unit, and can speak to the foundational elements that set the project in motion, as well as discuss the wins and challenges that Connecticut Children's experienced from an operational standpoint.

8. **Does this submission involve one or more specialties or disciplines?**

Yes - the topic is the development of a Med/Psych unit, and the team includes Child Psychiatry, Pediatric Hospital Medicine, and Operational Leadership

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

N/A

10. **Additional comments**

Novel content - The Connecticut Children's Medical/Psychiatric Integrated Care Unit opened in January 2024 to fill the unmet need for psychiatric care for medically complex patients. Support for its importance include that we have already been contacted by and hosted multiple teams from institutions across the country looking for insights into how we developed this unit, and we have been receiving patient referrals from near and far since before we opened. We believe this is a true hot topic as institutions struggle to find mental health care for medically complex children. We will use both polling, and alot time for Q and A to engage the audience. The addition of Constance Grant will add value to the presentation as she adds practical operational expertise, and some of our novel approaches to treatment, including exercise, and school will be of interest to the audience.

Presentation Titles and Durations

Tackling a Crisis: The build out - building a unit and a team

Cristin McDermott, MD

Duration of Presentation in Minutes

15

Tackling a Crisis: How optimizing physical health can improve mental health outcomes

Catherine Sullivan, MD MHL

Duration of Presentation in Minutes

20

Tackling a Crisis: How optimizing physical health can improve mental health outcomes

Christine Skurkis, MD

Duration of Presentation in Minutes

15

Tackling a Crisis: Demographics, dispositions and treatment

Matthew Johnson, MD

Duration of Presentation in Minutes

30

Tackling a Crisis: Tackling a Crisis: The build out - building a unit and a team

Connie Grant, MHA, MSN, RN, NE-BC

Duration of Presentation in Minutes

15

(11) Proposal ID: 1895924

Methods of Surfactant Delivery - who, when, where, what?

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Anup Katheria**

Score: **0**

Participant(s)

Anup Katheria, M.D.

Position:

Associate Professor of Pediatrics

Organization:

University of California, San Diego School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

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

AAP, SPR

Christoph Härtel, MD (he/him/his)

Position:

Professor

Organization:

University Hospital Würzburg, Pediatrics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Joyce O'Shea, MD (she/her/hers)

Position:

Doctor

Organization:

Royal Hospital for Children, Glasow, Scotland

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Calum T. Roberts, PhD (he/him/his)

Position:

Neonatologist

Organization:

Monash University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Male

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

Charles Christoph Christoph ROEHR, MD, PhD (he/him/his)

Position:
Professor of Neonatal and Perinatal Medicine

Organization:
University of Bristol

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Roger F. Soll, MD (he/him/his)

Position:
H. Wallace Professor of Neonatology

Organization:
Robert Larner, M.D., College of Medicine at the University of Vermont

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

There is a large body of evidence that has now demonstrated that non-invasive surfactant administration has benefits for term and preterm infants. These benefits include reductions in morbidities such as bronchopulmonary dysplasia. Less invasive methods may have benefits not seen with traditional administration of surfactant such as rescue vs prophylactic administration in the delivery room. Conversely, other methods may be only used on larger and less preterm infants due to size and logistical constraints. This session will review the evidence for such approaches from large cohort studies to randomized controlled trials, as well as experience from centers having developed these techniques. We have assembled international experts on surfactant administration including the director for Cochrane Neonatal, expert trialists for surfactant administration, and guideline experts from the European consensus statements on the management of respiratory distress syndrome.

Learning Objectives

1. At the end of the session the audience will be able to understand how methods of less invasive surfactant administration became standard practice
2. At the end of the session the audience will be able to review the different methods of surfactant delivery
3. At the end of the session the audience will be able to explore the knowledge gaps and future directions for surfactant research.

Scholarly Session Questions

1. **Audience Size**
500
2. **Target audience**
Neonatologists, neonatal fellows and residents, and advance practice providers
3. **Tracks**

Clinical Research
Neonatology
Pulmonology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Topic is Surfactant administration involving Neonatology, Pulmonary and General Pediatrics
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Methods for Less Invasive Surfactant Administration
Anup Katheria, M.D.

Duration of Presentation in Minutes
12

The German Story - Reflections on the German LISA trials and current practice
Christoph Härtel, MD

Duration of Presentation in Minutes
12

Do we need a SALSA trial? Reporting the uncertainty in previous evidence and reflecting West of Scotland experience.

Joyce O'Shea, MD
Duration of Presentation in Minutes
6

Do we need a SALSA trial? Reporting the uncertainty in previous evidence and reflecting on SURFUP protocol

Calum T. Roberts, PhD

Duration of Presentation in Minutes

6

What am I supposed to do? Guidance from ILCOR and Consensus Statements.

Charles Christoph Christoph ROEHR, MD, PhD

Duration of Presentation in Minutes

12

Where to next? An evidence review and outlook on the future of surfactant delivery.

Roger F. Soll, MD

Duration of Presentation in Minutes

12

(12) Proposal ID: 1932341

A Whirlwind Tour of the Blood Bank for Neonates: What's New and Relevant for the Bedside Clinician

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Ravi Patel**

Score: **0**

Participant(s)

Ravi M. Patel, MD, MSc (he/him/his)

Position:

Professor of Pediatrics

Organization:

Children's Healthcare of Atlanta and Emory University

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

AAP, APS, SPR

Rida A. Hasan, MD (she/her/hers)

Position:

Assistant Professor

Organization:

University of Washington

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

Not a member of any of these organizations

Cassandra Josephson, MD (she/her/hers)

Position:

Director, Cancer and Blood Disorders Institute and Director, Blood Bank, Transfusion, and Apheresis

Organization:

Johns Hopkins University School of Medicine and Johns Hopkins All Childrens Hospital

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

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

Not a member of any of these organizations

Nabiha Saifee, MD, PhD (she/her/hers)

Position:

Assistant Professor and Transfusion Service Medical Director

Organization:

Seattle Childrens and University of Washington

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

Not a member of any of these organizations

Session Description

Session Description

Ever wonder what goes on in the blood bank? We're going to take you on a tour in this exciting symposium that covers recent and upcoming changes in cord blood testing, blood supply and blood attributes that can impact neonates.

You will take a virtual tour of the blood bank. We start at the testing bench and review cord blood direct antiglobulin testing (DAT) and how it can be applied to the Clinical Practice Guideline Revision: Management of Hyperbilirubinemia in the Newborn Infant 35 or More Weeks of Gestation. The discussion will review complexities of cord blood DAT interpretations with real cases.

Then we stop at the allocation bench and review an order for red blood cells and platelets. We discuss the evidence for use of CMV seronegative tested units, leukoreduction and irradiation and variations in practice for preterm and term infants.

To select our products, we will stop at the RBC storage refrigerator and discuss controversies of DEHP-containing plastics and mannitol-containing additive solutions.

Then a quick stop at the platelet agitator to review the implications of psoralen-treated or platelet additive solution. Finally, at the modification bench we discuss aliquoting, age of red cells and limiting donor exposure before sending the final product through the tube station to the NICU.

Each presentation will have a robust discussion about the current state of evidence in neonatal transfusion, research gaps that need to be addressed,

and how to advocate with your hospital and blood suppliers for the safest blood products for neonates.

Learning Objectives

1. Describe the methods and limitations of cord blood DAT testing and the applicability to new hyperbilirubinemia guidelines
2. Explain which patients may benefit from different blood attributes such as cytomegalovirus seronegative, irradiated, or fresh red blood cell units
3. Evaluate the effects of mannitol-containing RBC products in neonates and the risks and benefits of platelets that are psoralen-treated or stored in platelet additive solution.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
neonatologists, critical care physicians, hospitalists, cardiologists, hematologists, pediatricians, surgeons, advanced practice providers and trainees at all levels.
3. **Tracks**
Cardiology
Critical Care
Hematology/Oncology
Hospital Medicine
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Ravi Patel is part of other proposed workshops/sessions.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

We are bringing transfusion medicine physicians to PAS. Each of the speakers are internationally and nationally recognized experts in transfusion medicine and leaders in national organizations such as AABB. To break down siloes, we have invited these experts to PAS to speak on blood banking practice that are important for pediatric clinicians and subspecialists.

8. **Does this submission involve one or more specialties or disciplines?**

Transfusion Medicine, Pediatrics, Neonatology, Critical Care

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

Not previously presented.

10. **Additional comments**

Each of the topics selected involve changes in transfusion medicine that pediatric clinicians may not be aware of and need to know. These talks have important implications for not only transfusions to neonatal and pediatric patients, but also in the role of the blood bank in risk stratification of newborns for hyperbilirubinemia.

Presentation Titles and Durations

Cord blood DAT testing: how do new hyperbilirubinemia guidelines alter practices

Rida A. Hasan, MD

Duration of Presentation in Minutes

30

Understanding and advocating for quality blood products for neonatal RBC transfusions

Cassandra Josephson, MD

Duration of Presentation in Minutes

30

Less is more: platelet transfusions in neonates □ implication of psoralen-treatment and platelet additive solution

Nabiha Saifee, MD, PhD

Duration of Presentation in Minutes

30

(13) Proposal ID: 1915880

Pediatric kidney transplantation: Tackling challenges from start to end

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Katherine Dell**

Score: **0**

Participant(s)

Katherine M. Dell, MD (she/her/hers)

Position:

Professor of Pediatrics and Director of Clinical and Translational Research

Organization:

Cleveland Clinic Children's

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

Black or African American, White

Gender

Female

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

AAP, APS, SPR, ASPN

Amy Bobrowski, MD MS (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Cleveland Clinic Children's

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

ASPN

Carlos Cesar Becerril-Romero, MD

Position:

Assistant Professor

Organization:

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

Role:

Chair

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Male

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

ASPN

Nancy M. Rodig, MD (she/her/hers)

Position:

Medical Director, Kidney Transplant Program

Organization:

Boston Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Meghan H. Pearl, MD, MS (she/her/hers)

Position:
Assistant Professor

Organization:
Children's Hospital Los Angeles

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Juhi Kumar, MD MPH (she/her/hers)

Position:
Associate Professor of Pediatrics

Organization:
Children's Hospital of Pittsburgh

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Session Description

Session Description

This session will address challenges across the spectrum of pediatric kidney transplantation from pre-transplantation evaluation to allograft loss. Three particularly challenging areas will be discussed, including the role of emerging genetic testing in the pre-transplantation evaluation, management of antibody-mediated rejection post-transplantation and management of evolving renal failure and immunosuppressants in the failing allograft.

Learning Objectives

1. Delineate the indications for genetic screening in preparation for transplant
2. Discuss the management of antibody mediated rejection, including newer therapies
3. Describe the challenges in management of the failing allograft, including recommendations for immunosuppression management, indications for allograft nephrectomy and preparation for dialysis and/or re-transplantation

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Pediatric nephrology faculty and trainees
3. **Tracks**
Nephrology
Pharmacology and Therapeutics
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
n/a
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
no
9. **If your session was presented at another conference, please describe the conference and presentation.**
n/a
10. **Additional comments**

Presentation Titles and Durations

Choosing wisely: when to use genetic testing in transplant decision-making

Nancy M. Rodig, MD

Duration of Presentation in Minutes

30

Antibody-mediated rejection: first-line therapies and beyond

Meghan H. Pearl, MD, MS

Duration of Presentation in Minutes

30

The failing kidney allograft: Challenges and recommendations for management

Juhi Kumar, MD MPH

Duration of Presentation in Minutes

30

(14) Proposal ID: 1930388

Ethical Considerations for Community Engaged Research working with American Indian and Alaska Native Communities

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **ALLISON EMPEY**

Score: **0**

Participant(s)

ALLISON CATHERINE EMPEY, MD

Position:

Associate Professor

Organization:

Oregon Health & Science University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

American Indian or Alaska Native

Gender

Female

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

AAP, APA

Ashley Weedn, MD, PhD (she/her/hers)

Position:

Associate Professor

Organization:

University of Oklahoma Health Sciences Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Jason Deen, MD, FAAP, FACC (he/him/his)

Position:

Associate Professor

Organization:

University of Washington, Department of Pediatrics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

American Indian or Alaska Native

Gender

Male

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

AAP

Jim Jarvis, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

University of Washington School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
American Indian or Alaska Native, White

Gender
Male

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

Session Description

Session Description

American Indian and Alaska Native (AIAN) children and adolescents face significant health inequities. Strong cultural traditions, practices and self-determination within AIAN communities can be leveraged to address and mitigate chronic medical and mental health inequities. Community Based Participatory Research (CBPR) partnerships that honor and incorporate these cultural strengths is vital to addressing these health inequities. However, due to tribal sovereignty, data sovereignty and the regulatory tribal institutional research boards (IRB), CBPR and community engaged research looks different than with other communities. The American Academy of Pediatrics will be releasing a policy statement guiding researchers and pediatricians in ethical considerations in research with AIAN communities; thus this session will be aptly timed to learn how to apply the policy statement.

This session will discuss CBPR in tribal communities, touching on historical trauma and research misconduct with AIAN tribes, respecting tribal sovereignty, data sovereignty and independent tribal IRB. Finally a panel discussion with researchers from academic-tribal partnerships will share their real experiences navigating CBPR within tribal communities. Two Indigenous academic pediatricians will be on the panel and share lessons learned from their vast research in partnership with AIAN communities.

Learning Objectives

1. Apply community based participatory research methods (CBPR) in tribal communities
2. Understand some of the unique aspects of research with tribes, including tribal and data sovereignty and tribal IRB
3. Explore ethical dilemmas in CBPR

Scholarly Session Questions

1. **Audience Size**
30
2. **Target audience**
Pediatric researchers who are interested in community engaged research with American Indian and Alaska Native populations.
3. **Tracks**
Academic and Research Skills
Advocacy
Diversity, Equity, and Inclusion
Health Equity/Social Determinants of Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
A few of the panelists have also submitted a workshop on Academic Partnerships with Indian Health Services, Tribal Run clinic and Urban Indian clinics.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes, community engaged research may include numerous disciplines
9. **If your session was presented at another conference, please describe the conference and presentation.**
No
10. **Additional comments**

Presentation Titles and Durations

Historical trauma and research misconduct in AIAN communities
ALLISON CATHERINE EMPEY, MD

Duration of Presentation in Minutes

15

Applying CBPR in AIAN communities

Ashley Weedn, MD, PhD

Duration of Presentation in Minutes

30

Lessons learned from Strong Heart

Jason Deen, MD, FAAP, FACC

Duration of Presentation in Minutes

15

Genetic research with American Indian and Alaska Native children and youth

Jim Jarvis, MD

Duration of Presentation in Minutes

15

(15) Proposal ID: 1922476

The Dual Diagnosis of Down syndrome and Autism - Evidence-Based Approaches to Care

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Noemi Spinazzi**

Score: **0**

Participant(s)

Noemi Spinazzi, MD (she/her/hers)

Position:

Associate Professor

Organization:

University of California, San Francisco, School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Prefer not to respond

Gender

Female

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

AAP

Rudaina Banihani, MD, MEd (she/her/hers)

Position:

Associate Professor, Staff Neonatologist and Developmental Paediatrician

Organization:

University of Toronto Temerty Faculty of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

Not a member of any of these organizations

Lina Patel, PsyD (she/her/hers)

Position:

Clinical Psychologist

Organization:

Children's Hospital Colorado

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

Not a member of any of these organizations

Darren Olsen, PhD (he/him/his)

Position:

Psychologist

Organization:

Children's Mercy Hospitals and Clinics

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Deborah J. Fidler, PhD (she/her/hers)

Position:
Professor

Organization:
Colorado State University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Individuals with Down syndrome have a significantly higher prevalence of co-occurring autism compared to the general population. Despite this, this population remains under-studied, and the prevalence of co-occurring autism in Down syndrome is likely underestimated. Growing evidence highlights its prevalence, common presenting features, co-occurring medical conditions, and the screening and diagnostic assessment tools used in this population, as well as beneficial interventions for children with Down syndrome and Autism

(DS+ASD). This session will review existing evidence and ongoing research, offering evidence-based recommendations for managing this unique patient population.

Dr. Noemi Spinazzi will discuss the common presenting features of DS+ASD and associated medical conditions. Dr. Rudaina Banihani will present findings from the latest systematic review on DS+ASD prevalence and introduce an evidence-based screening and assessment algorithm aimed at enhancing early identification. Dr. Lina Patel will focus on effective interventions for this patient group. Dr. Darren Olsen will review caregiver-based interventions, including original research on RUBI, IMPACT, and JASPER, and discuss caregiver experiences raising loved ones with DS+ASD. Dr. Deborah Fidler will discuss an ongoing prospective trial evaluating developmental skills, adaptive functioning, executive functioning, and social communication in young children with Down syndrome to identify early predictors of later ASD or other neurodevelopmental diagnoses.

Learning Objectives

1. list common presenting symptoms of co-occurring autism in children with Down syndrome
2. describe assessment tools for autism that have been studied in the Down syndrome population
3. identify interventions that can help children with DS+ASD with communication and behavioral challenges

Scholarly Session Questions

1. **Audience Size**
60
2. **Target audience**
Primary care providers, developmental pediatricians, child neurologists, child psychiatrists, psychologists, researchers in the field of Down syndrome and/or autism
3. **Tracks**
Children with Chronic Conditions
Community Pediatrics
Developmental and Behavioral Pediatrics
General Pediatrics
Mental Health
Pharmacology and Therapeutics
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Monday, April 28

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

No conflicts related to co-occurring events

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr Fiddler has applied to become an AAP member

Dr Banihani is a member of SDBP (Society for Developmental and Behavioral Pediatrics), AACPD (American Academy for Cerebral Palsy and Developmental Medicine) and the CPS (Canadian Pediatric Society). She has applied for AAP membership

Dr Patel is a member of Division 33 (Intellectual and Developmental Disabilities/Autism Spectrum Disorder) for the American Psychological Association (APA). She is also a member of SDBP and T21 Research Society.

8. **Does this submission involve one or more specialties or disciplines?**

Dr. Noemi Spinazzi is a general pediatrician specializing in developmental disabilities. Dr. Darren Olsen holds a PhD and provides clinical care in a Down syndrome and autism clinic while conducting research. Dr. Rudaina Banihani is a neonatologist and developmental pediatrician, combining advanced expertise in both specialties with a focus on high-risk infant follow-up, and holds a master's in education.

Dr. Lina Patel has a doctorate in psychology and works as a psychology and behavioral specialist in a Down syndrome clinic. Dr. Deborah Fidler has a PhD in psychological studies in education and primarily focuses on research in Down syndrome and developmental outcomes.

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

This will be the first time this will be presented

10. **Additional comments**

All presenters have authored peer reviewed articles, book chapters and other original work on the topic that is being proposed for this presentation

Presentation Titles and Durations

Autism in Down Syndrome: Common Symptoms and Co-Morbidities
Noemi Spinazzi, MD

Duration of Presentation in Minutes

15

Assessing for Co-Occurring Autism in Children with Down Syndrome -
Evidence-Based Tools

Rudaina Banihani, MD, MMEd

Duration of Presentation in Minutes

15

Communication, Self-Help and Behavior - Interventions for Individuals with
Down Syndrome and Autism

Lina Patel, PsyD

Duration of Presentation in Minutes

15

Partnering with Caregivers - Parent Training and Caregiver Experiences

Darren Olsen, PhD

Duration of Presentation in Minutes

15

The Future is Bright - CAPEabilities, a Prospective Trial of Development in
Children with DS, and Q&A

Deborah J. Fidler, PhD

Duration of Presentation in Minutes

30

(16) Proposal ID: 1906623

Bridging Communities and Clinics: Implementation of a Community Health Worker Intervention Across Nationwide Children's Primary Care Network

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Teah Hoopes**

Score: **0**

Participant(s)

Teah Hoopes, MPH (she/her/hers)

Position:

Research Manager

Organization:

Seattle Children's Research Institute

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

Not a member of any of these organizations

Tumaini Rucker Coker, MD, MBA (she/her/hers)

Position:

Professor of Pediatrics

Organization:

University of Washington/Seattle Children's

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, APA, APS, SPR

Akua Amponsah, MD (she/her/hers)

Position:

Associate Professor

Organization:

Nationwide Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP

Dane Snyder, MD

Position:

Section Chief, Primary Care Pediatrics

Organization:

Nationwide Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Peace Gboney, MPH BSN CLC CHW CPST (she/her/hers)

Position:
N/A

Organization:
Nationwide Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Jessica D. Newland, MBA, MSN, CPEN, SANE-P (she/her/hers)

Position:
Program Manager, Primary Care Network

Organization:
Nationwide Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Alex R. Kemper, MD, MPH, MS (he/him/his)

Position:
Professor

Organization:
Nationwide Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Gain insight into the implementation of a clinic-based intervention within a large primary care network. The intervention, Parent-focused Redesign, Newborn to Toddlers (PARENT), integrates a community health worker in the role of a “PARENT Coach” into well-child care visits. In this 90-minute panel session, we will discuss facilitators and barriers to conducting research within clinical settings, strategies for engaging diverse community partners—including parents, pediatricians, and clinic staff—and methods for ensuring clinic-level adaptations meet local site needs.

Learn about key outcomes, data collection techniques, and organizational

strategies for promoting sustainability and spread across a large primary care network. The panel of experts will share practical approaches to navigating the complexities of implementing the PARENT intervention across multiple clinics, followed by an interactive Q&A to discuss real-world applications of these insights. Panelists include Dr. Dane Snyder, Section Chief of Primary Care Pediatrics at Nationwide Children's Hospital and Project Co-Investigator, Dr. Akua Amponsah, Attending Pediatrician at Nationwide Children's Hospital, and Project Parent Engagement Lead and Co-Investigator, Ms. Jessica Newland, PARENT Coach Manager at Nationwide Children's Hospital, and Ms. Peace Gboney, PARENT Coach Coordinator at Nationwide Children's Hospital. Dr. Tumaini Coker, Division Head of General Pediatrics at Seattle Children's Hospital and the Project Principal Investigator, and Dr. Alex Kemper, Division Chief of Primary Care Pediatrics at Nationwide Children's Hospital and Site Principal Investigator, will co-moderate the discussion. This session is designed for researchers, clinicians, trainees, and other healthcare system change agents interested in community-engaged implementation of innovative models of care within large healthcare systems.

Learning Objectives

1. Upon completion, participants will be able to identify key strategies for engaging community partners in clinic-based interventions.
2. Upon completion, participants will be able to apply best practices for adapting interventions across diverse clinical settings within large healthcare networks.
3. Upon completion, participants will be able to evaluate organizational strategies for sustaining and scaling community health worker-based interventions in pediatric care.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Researchers, clinicians, trainees, and other healthcare system change agents
3. **Tracks**
Academic and Research Skills
Clinical Research
Community Pediatrics
General Pediatrics
Health Equity/Social Determinants of Health

Health Services Research
Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Not applicable
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Peace Gboney and Jessica Newland are both responsible for the oversight of the clinic team members instrumental in implementing this novel clinic-based intervention within the clinic sites at Nationwide Children's. Their participation will enrich the discussion, provide a perspective that is not often heard at the PAS conference, and elucidate actionable strategies that attendees can share with their own institutions.
8. **Does this submission involve one or more specialties or disciplines?**
Yes: General Pediatrics and Public Health and Health Equity.
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Introduction: Background on the Clinic-based Intervention, the PARENT Model of Care, and Current and Past PARENT Studies.

Tumaini Rucker Coker, MD, MBA

Duration of Presentation in Minutes

15

Effectively Engaging Parents with Clinic Teams in Research on Clinic-based Interventions

Akua Amponsah, MD

Duration of Presentation in Minutes

11

Organizational Perspectives in Incorporating Research into Clinic-based
Intervention Implementation

Dane Snyder, MD

Duration of Presentation in Minutes

11

The Devil is in the Details: Clinic-level adaptations for successful intervention
implementation

Peace Gboney, MPH BSN CLC CHW CPST

Duration of Presentation in Minutes

11

Creating Organizational Strategies for Intervention Spread and Sustainability

Jessica D. Newland, MBA, MSN, CPEN, SANE-P

Duration of Presentation in Minutes

11

Interactive Q&A

Alex R. Kemper, MD, MPH, MS

Duration of Presentation in Minutes

30

(17) Proposal ID: 1932213

Promoting Health Equity and Advancing Child Health Through Cash Transfers

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Zoe Bouchelle**

Score: **0**

Participant(s)

Zoe Bouchelle, MD, MSHP

Position:
Pediatric Hospitalist

Organization:
Denver Health

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Aditi Vasan, MD, MSHP (she/her/hers)

Position:
Assistant Professor

Organization:
Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APA

Benard P. Dreyer, MD

Position:

Professor

Organization:

NYU School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APA, APS

Gabriela Cordova Ramos, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Boston University School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

In the U.S., nearly 1 in 6 children live in families with incomes below the poverty line, and a disproportionate number of Black, American Indian, and Latinx kids grow up in poverty. While current safety net programs succeed in reducing the burden of child poverty, the U.S. continues to have one of the highest child poverty rates among industrialized nations. Unconditional cash transfers have emerged as a key strategy to reduce child poverty and improve child health outcomes. In contrast to directed income support programs like the Supplemental Nutrition Assistance Program (SNAP), these non-directed cash transfer programs not only provide families with financial support but also give them the autonomy and agency to choose to spend this income on their most pressing needs.

In this interactive Hot Topic Symposium, expert panelists from a diverse set of institutions will discuss the pathways through which cash transfer programs may promote child health and well-being. They will also highlight emerging evidence on the impact of boosts in income on child health and discuss the future of research and health policy as it relates to use of cash transfers as a tool to advance child health and promote health equity. Participants will hear about innovative approaches to measuring the health impacts of cash transfer programs, including studies conducted in health care settings. Participants will have the opportunity to submit and vote on questions for the panelists throughout the symposium and will participate in an interactive question-and-answer session at the end of the symposium.

Learning Objectives

1. Understand the pathways through which cash transfers can promote child health.
2. Evaluate emerging experimental and quasi-experimental evidence on the impact of boosts in income on child health.

3. Examine where we go next in the research and policy landscape for cash transfers as a tool to advance child health and promote health equity.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Pediatric researchers, clinicians, and learners with an interest in health equity, social determinants of health, and family-centered approaches to assess and address structural social and racial inequality and the unmet social and financial needs of families.
3. **Tracks**
Advocacy
Clinical Research
Diversity, Equity, and Inclusion
Health Equity/Social Determinants of Health
Health Services Research
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
APA SDOH SIG Session
PAS Workshop: Addressing Food and Nutrition Insecurity through Clinical-Community Partnerships
PAS Workshop: A Practical Approach to Improving Neonatal Demographics
PAS Workshop: Is Our Social Needs Screening Program Working?
Approaches to Monitoring & Evaluation of Social Needs Interventions
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
General Pediatrics

9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Emerging Evidence Linking Cash Transfers to Improved Child Health
Zoe Bouchelle, MD, MSHP

Duration of Presentation in Minutes

15

Pathways Through Which Cash Transfers Promote Child Health & Why
Economic Interventions Deserve More Study
Aditi Vasani, MD, MSHP

Duration of Presentation in Minutes

15

Where Do We Go Now with Research and Policy?
Bernard P. Dreyer, MD

Duration of Presentation in Minutes

15

Program Spotlight: Cash Transfers to Improve Perinatal Health
Gabriela Cordova Ramos, MD

Duration of Presentation in Minutes

15

(18) Proposal ID: 1921240

Are you ready to get down? Preparing your team for an extended hospital downtime.

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Lynsey Vaughan**

Score: **0**

Participant(s)

Lynsey Vaughan, MD, MSHS

Position:

Assistant Professor of Pediatrics

Organization:

University of Texas at Austin Dell Medical School

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Sanyukta Desai, MD, MSc (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

University of Texas at Austin Dell Medical School

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Meena Iyer, MD.MBA (she/her/hers)

Position:

Assistant Professor

Organization:

Dell Children's Medical Center of Central Texas

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Melissa Cossey, MD (she/her/hers)

Position:

Associate Professor

Organization:

Dell Medical School at the University of Texas at Austin

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Cynthia Castiglioni, MD

Position:
Assistant Professor

Organization:
Dell Children's Medical Center of Central Texas

Role:

Speaker

Ethnicity
Prefer not to respond

Race
White

Gender
Female

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

Jacqueline Corboy, MD, MS (she/her/hers)

Position:
Assistant Professor of Pediatrics

Organization:
Northwestern University Feinberg School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Lisa Earp, MSN (she/her/hers)

Position:
Director

Organization:
Dell Children's Medical Center of Central Texas

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Cyberattacks against healthcare systems are becoming more common around the world. Clinicians play an important role in developing and implementing downtime workflows; therefore, they should be knowledgeable about preparing for and responding to system downtimes. When clinical teams are unprepared for these and other extended downtime events, patient harm and staff dissatisfaction could result. Based on recent prolonged downtime experiences at their respective organizations, physician and nurse leaders from Dell Children's Medical Center and Lurie Children's Hospital will host a panel discussion to provide downtime learnings and share best practices. Panel

members will include senior leadership, hospitalists, an emergency physician, and a director of nursing. The discussion will focus on how to prepare your clinical areas for an extended downtime, navigate the challenging aspects of a downtime experience, and safely come back online. Attendees will leave with actionable resources, including a toolkit that can help them prepare their own organization.

Each panel member will answer a series of question from the moderator, aimed at identifying high yield interventions and necessities for a prolonged downtime from their individual perspectives. We will then open it up to the audience for further questions.

Learning Objectives

1. Describe the importance of downtime preparedness for today's healthcare systems.
2. Assess your hospital's preparedness for cyberattacks and extended downtimes.
3. Apply the essential elements of downtime preparedness for the key clinical areas of your hospital

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Any hospital based physician or team member interested in understanding and preparing for extended downtime at their respective institution.
3. **Tracks**
Critical Care
EHR/Medical Informatics
Emergency Medicine
Hospital Medicine
Leadership and Business Training
Neonatology
Quality Improvement/Patient Safety
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

The Prescription to Pivot: How Pediatricians can Transition and Thrive in Academia and Beyond.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Lisa Earp is a nursing director and not a physician but brings incredible and essential value to the discussion from a different perspective.

8. **Does this submission involve one or more specialties or disciplines?**

Patient Safety, Hospital Medicine, Emergency Medicine, Critical Care, Neonatology, Patient Throughput, Senior Leadership, Nursing

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

No

10. **Additional comments**

Presentation Titles and Durations

Essentials of downtime from a CMO perspective at Dell Children's Medical Center.

Meena Iyer, MD.MBA

Duration of Presentation in Minutes

8

Essentials of downtime from an Associate CMO of Dell Children's North Campus and Hospitalist perspective.

Melissa Cossey, MD

Duration of Presentation in Minutes

8

Essentials of downtime from a Hospitalist perspective at Lurie Children's Hospital.

Cynthia Castiglioni, MD

Duration of Presentation in Minutes

8

Essentials of downtime from an Emergency Medicine Physician perspective at Lurie Children's Hospital.

Jacqueline Corboy, MD, MS

Duration of Presentation in Minutes

8

Essentials of Downtime from a Nursing Director perspective at Dell Children's Medical Center.

Lisa Earp, MSN

Duration of Presentation in Minutes

8

(19) Proposal ID: 1922256

Top Articles in Medical Education 2024: Applying the current literature to educational practice and scholarship

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Gayatri Madduri**

Score: **0**

Participant(s)

Gayatri B. Madduri, MD (she/her/hers)

Position:

Clinical Associate Professor

Organization:

Stanford University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APA

Melissa D. Klein, MD, MEd (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Cincinnati Children's Hospital Medical Center

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APA, APS

Heidi Kloster, MD (she/her/hers)

Position:

Associate Professor

Organization:

University of Wisconsin School of Medicine and Public health

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Uchechi Oddiri, MD, FAAP (she/her/hers)

Position:

Clinical Assistant Professor of Pediatrics

Organization:

Renaissance School of Medicine at Stony Brook University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Peggy Han, MD (she/her/hers)

Position:
Clinical Associate Professor of Pediatrics

Organization:
Stanford University School of Medicine

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Asian

Gender
Female

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

Allison Lyle, MD, MA (she/her/hers)

Position:
Assistant Professor of Pediatrics

Organization:
University of Louisville

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Elizabeth B. Seelbach, MD (she/her/hers)

Position:
Professor, Pediatrics

Organization:
University of Kentucky College of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Morgan Congdon, MD, MPH, MEd (she/her/hers)

Position:
Pediatric Hospital Medicine Attending

Organization:
Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Clinical educators are expected to provide evidence-based care for their patients. The same expectation should also apply to their educational approach to learners. Yet the busy clinical educator has little time to stay current with the massive number of articles published in medical education annually. This is why, for the past seven years, members of the APA's education committee have presented a synopsis of the most impactful articles in medical education. The goal of this session is to continue with that tradition, by presenting the top articles in medical education from 2024.

Our team selects articles that may significantly impact the practice of clinical educators whose primary duties are teaching through patient care and/or those whose primary duties involve oversight of an education program(s). We select articles using a two-tiered consensus-based approach by first reviewing abstracts and then by reviewing full manuscripts from selected journals. Each of our eight members/presenters are selected through formal application through the APA, and contributes their own significant experience in teaching, administration, scholarship, and diversity to the process.

Articles are presented in categories using a previously refined template. Audience members may participate in the discussion during two question and answer opportunities. Since this session aims to review all medical education articles from 2024, we cannot currently provide specific titles or categories. However, through our previous seven years of experience, we have developed a timeline that ensures timely completion of the final presentation. Historically, this well-attended PAS session is highly appreciated by the medical education community.

Learning Objectives

1. Discuss outcomes from the top articles in medical education from 2024
2. Formulate approaches to incorporate medical education innovations into their educational practice

3. Identify areas of scholarly interest for further reading, curricular development, and innovations in medical education

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Medical students, pediatric residents, pediatric fellows, pediatric medical educators, pediatric program directors, APA ESP community, general pediatricians.
3. **Tracks**
Academic and Research Skills
Career Development
Core Curriculum for Fellows
General Pediatrics
Medical Education
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
2 members are ESP scholars and 1 member is the chair of the APA education committee: request no conflicting meetings with ESP day/ESP meeting/APA Education Committee meetings. Members of this group may submit other workshop proposals but we are not aware of conflicting meetings during this time.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
No
9. **If your session was presented at another conference, please describe the conference and presentation.**
No
10. **Additional comments**

Historically, this session has been very well attended and not recorded. We request that the session be scheduled on conference day 2 (Saturday April 26) mid-morning/afternoon if possible. Last year, the session in Toronto was on Saturday 5/4/24 from 11-12:30. We'd prefer a similar time slot if possible. Thank you for considering!

Presentation Titles and Durations

Introduction, Methods, and Question Facilitation

Gayatri B. Madduri, MD

Duration of Presentation in Minutes

20

Topic 1

Melissa D. Klein, MD, MEd

Duration of Presentation in Minutes

10

Topic 2

Heidi Kloster, MD

Duration of Presentation in Minutes

10

Topic 3

Uchechi Oddiri, MD, FAAP

Duration of Presentation in Minutes

10

Topic 4

Peggy Han, MD

Duration of Presentation in Minutes

10

Topic 5

Allison Lyle, MD, MA

Duration of Presentation in Minutes

10

Topic 6

Elizabeth B. Seelbach, MD

Duration of Presentation in Minutes

10

Topic 7

Morgan Congdon, MD, MPH, MEd

Duration of Presentation in Minutes

10

(20) Proposal ID: 1894882

Anxious Minds, Cynical Hearts: How to effectively engage, teach, and mentor in an era of maladaptive coping and distrust in institutions

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Alison Holmes**

Score: **0**

Participant(s)

Alison V. Holmes, alison.v.holmes@hitchcock.org (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Geisel School of Medicine at Dartmouth

Role:

Submitter;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

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

AAP, APA, APS, SPR

Susan Nofziger, MD (she/her/hers)

Position:

Associate Dean of Experiential Education

Organization:

NEOMED

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Oriaku A. Kas-Osoka, MD, MEd (she/her/hers)

Position:

Associate Professor of Pediatrics, Pediatric Residency Program Director

Organization:

University of Arkansas for Medical Sciences College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, APA

Megan Aylor, MD (she/her/hers)

Position:

Professor

Organization:

Oregon Health & Science University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Aisha Barber, MD MEd (she/her/hers)

Position:
Director, Pediatric Residency Program; Associate Professor of
Pediatrics

Organization:
Children's National Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Session Description

Session Description

Pediatricians are well-aware of the epidemic of adolescent mood disorders that began in the early 2010s and continues unabated. But have we thoughtfully considered how the cohort effect of this mental health epidemic is now impacting our clinical, educational, and research environments? Recent research in the psychological and social sciences has identified factors that have significantly increased maladaptive coping among some young adults.

Rising levels of perfectionism, pessimism, distrust of leaders and institutions, and fragility in coping with life challenges can lead to team dysfunction that can adversely impact learning, discovery, and patient care.

In this session, national leaders in medical student and resident clinical education, career advising, and wellbeing will review seminal findings on young adult maladaptive coping from the cognitive psychology and social sciences literature. After describing the historical contexts and phenomena that have led to epidemic levels of mood disorders and maladaptive coping among young adults, we will outline promising strategies and present practical approaches to increase adaptive coping, foster learning and growth, and improve team functioning in our clinical, research, and educational environments.

Learning Objectives

1. Discuss four factors leading to increased maladaptive coping in young adults and describe their impact on patient care, academic progress, and response to feedback.
2. Evaluate how increased vulnerability affects overall well-being, including mental health and stress management, in the context of medical training and practice.
3. Learn and apply three strategies to increase adaptive coping among team members in the academic pediatric domains of medical education, research, and patient care.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
All PAS attendees as everyone either is or works with young adults in clinical care, medical education, or research
3. **Tracks**
Career Development
Diversity, Equity, and Inclusion
Medical Education
Mental Health
Quality Improvement/Patient Safety
Wellness and Well-being
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

Should not conflict with APA Education Committee, Medical Student Education SIG or wellbeing SIG

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

N/A

8. **Does this submission involve one or more specialties or disciplines?**

Resident Education, Medical Student Education, Fellowships, Well-being

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

N/A

10. **Additional comments**

None

Presentation Titles and Durations

Where are the medical students? Factors leading to changes in student engagement

Susan Nofziger, MD

Duration of Presentation in Minutes

10

What happened to our residents? The intersection between resident well being and patient care

Oriaku A. Kas-Osoka, MD, MEd

Duration of Presentation in Minutes

10

Maladaptive coping □ four factors that have led us to where we are today

Megan Aylor, MD

Duration of Presentation in Minutes

10

What can we do? Practical tips: Joy in work, Embracing uncertainty, Celebrating differences, and Anti-fragile practice

Aisha Barber, MD MEd

Duration of Presentation in Minutes

10

(21) Proposal ID: 1923541

Building resiliency from disasters: lessons learned in an extended downtime event, Hurricane Beryl and the Kansas City Super Bowl shooting

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Charles Macias**

Score: **0**

Participant(s)

Charles G. Macias, MD MPH (he/him/his)

Position:

Vice Chair of Quality and Safety

Organization:

UH Rainbow Babies & Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

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

AAP, APA, APS, SPR

Brent D. Kaziny, MD, MA, FAAP (he/him/his)

Position:

Associate Professor

Organization:

Baylor College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Larry K. Kociolek, MD MSCI (he/him/his)

Position:

Associate Professor of Pediatrics

Organization:

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

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

PIDS

Jennifer Watts, MD, MPH

Position:

Professor of Pediatrics

Organization:

Children's Mercy Hospitals and Clinics

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Everyday and disaster readiness improves the outcomes for children during times of strained capacity or capabilities of a health care system, mass casualty incidents, disasters or global health threats such as pandemics. In the US, disasters (natural and man-made) are occurring more frequently, with more than 200 disasters per decade. Healthcare systems are often ill prepared to manage disasters, particularly children impacted by disasters. A prior National Pediatric Readiness Project assessment of more than 4000 U.S. emergency departments noted that fewer than 50% of hospitals have disaster plans that include children. Children's hospitals and their providers are uniquely poised to support the dissemination of best practices in communities as greater than 80% of ill and injured children present to community hospitals rather than children's hospitals.

Subsequent presenters will share an extended downtime event, their insights into the critical preparedness for disasters, enablers and barriers to effective and efficient response, and lessons learned for building ongoing resiliency in healthcare systems. They will highlight opportunities for operational improvements and leveraging pediatric disaster science tenets. Additionally, they will discuss the work of HRSA's Pediatric Pandemic Network to support improving pediatric disaster research, dissemination of current knowledge in disaster science, and tools for improving everyday pediatric readiness.

Learning Objectives

1. Discuss the strengths and weakness of US healthcare's pediatric everyday and disaster readiness, highlighting the roles of three national readiness networks.

2. Identify several strategies to ensure safe delivery of pediatric care and continuity of hospital operations during everyday and emergent events.
3. Describe the impact of embedding pediatric expertise into preparedness and response of a mass casualty incident to effectively address both physical and mental health needs.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Faculty, disaster leaders, residents/fellows, nurses, emergency management specialists, quality and safety specialists
3. **Tracks**
Children with Chronic Conditions
EHR/Medical Informatics
Emergency Medicine
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Workshop: How to build sustainability in QI: Sharing lessons from national sepsis collaborations

Workshop: Practice Makes Prepared: Pediatric Mass Casualty Drill Workshop
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**
Drs. Macias, Kociolek, Watts and Kaziny are leaders in national pediatric and disaster readiness through their leadership in several preparedness

networks, including the Pediatric Pandemic Network. Additionally, they have served as disaster response and everyday readiness leaders in their own healthcare systems during the initial phases of the COVID-19 pandemic, the coordination of preparedness and recovery work through Hurricane Beryl, the Children's Mercy response to the 2024 Super Bowl shootings, and an extended downtime event at Lurie Children's in 2024.

Charles G Macias, MD MPH

Dr. Macias is a Professor of Pediatrics at the Case Western Reserve University School of Medicine and Vice Chair of Quality and Safety/Chief Quality Officer for the Rainbow Babies and Children's Hospital system of care. He has led the HICS for his system during the 2020 COVID pandemic onset and during the viral surge of fall 2022. He is PI of three national centers leading everyday and disaster readiness for healthcare systems across the country: the HRSA funded Pediatric Pandemic Network across 27 children's hospitals, the EMSC funded EMS for Children Innovation and Improvement Center, and the Administrations for Strategic Preparedness and Responses Region V for Kids Pediatric Disaster Center of Excellence. He serves as a liaison to the White House's Office of Pandemic Preparedness and Response.

Larry Kociolek, MD

Dr. Kociolek is an Attending Physician in the Division of Pediatric Infectious Diseases and Vice President of System Preparedness, Prevention, and Response at Ann & Robert H. Lurie Children's Hospital of Chicago, and he is an Associate Professor of Pediatrics at Northwestern University Feinberg School of Medicine. At Lurie Children's, Dr. Kociolek leads preparedness, prevention, and response efforts for all hazards, including infectious hazards such as emerging pathogens and non-infectious hazards such as extended downtime events. He serves as site PI for the HRSA-funded Pediatric Pandemic Network through which he co-leads the Infectious Diseases domain.

Brent Kaziny, MD

Dr. Brent D. Kaziny completed his medical degree at the University of Texas – Houston, School of Medicine. He started his pediatric intern year at the Tulane-Ochsner Pediatric Residency Program, where he received the Hurricane Katrina Code Grey Hero Award for his efforts caring for patients and assisting with the evacuation of Tulane Hospital during the aftermath of Hurricane Katrina. After completing his intern year, he transferred to Baylor College of Medicine, where he completed his residency training in general pediatrics. He completed his fellowship in Pediatric Emergency Medicine at the University of Utah in Salt Lake City. Upon completing fellowship, Dr. Kaziny took a position at Baylor College of Medicine and Texas Children's Hospital. On a national level

he serves as the Co-Director of the Disaster Domain for the Emergency Medical Services for Children – Innovations and Improvement Center, the Co-Lead of the Disaster Management Domain of the Pediatric Pandemic Network, the Vice-Chair of the AAP’s Council on Children and Disaster, and a voting member of the National Advisory Committee on Children and Disasters. At Texas Children’s Hospital he works in the Emergency Center and serves as the Medical Director of Emergency Management. Dr. Kaziny is the Principal Investigator for the third pediatric disaster care center of excellence, the Gulf 7 Pediatric Disaster Network funded by the Administration for Strategic Preparedness and Response.

Jennifer Watts, MD, MPH

Dr. Watts is a Professor of Pediatrics in the Division of Emergency Medicine at Children’s Mercy Kansas City and serves as the Chief Emergency Management Medical Officer. She led Children’s Mercy through the COVID-19 pandemic and has personally responded in the field to numerous disasters, local, national and international.

Presentation Titles and Durations

The state of pediatric everyday and disaster readiness in the US

Charles G. Macias, MD MPH

Duration of Presentation in Minutes

15

Hurricane Beryl and other natural disasters: institutional preparedness and response

Brent D. Kaziny, MD, MA, FAAP

Duration of Presentation in Minutes

20

Navigating an extended downtime event

Larry K. Kocielek, MD MSCI

Duration of Presentation in Minutes

20

2024 Chiefs Super Bowl parade and victory rally response

Jennifer Watts, MD, MPH

Duration of Presentation in Minutes

20

(22) Proposal ID: 1899760

Every door is the right door: Screening, Treating, and Linkage to Care for Substance Use Disorders across the Healthcare Continuum

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Andrew Terranella**

Score: **0**

Participant(s)

Andrew Terranella, MD MPH FAAP (he/him/his)

Position:

Medical Epidemiologist

Organization:

Centers for Disease Control and Prevention, Division of Overdose Prevention

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Deepa R. Camenga, MD, MHS

Position:

Associate Professor of Emergency Medicine, Pediatrics, Public Health

Organization:

Yale School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Chris Buresh, MD, MPH, DTM&H (he/him/his)

Position:

Associate Professor of Emergency Medicine

Organization:

University of Washington Department of Emergency Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Leslie Hulvershorn, MD, Mac (she/her/hers)

Position:

Chair, Department of Psychiatry

Organization:

Indiana University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Overdose deaths among youth increased 133% from 2019-2021, driven mainly by illegally made fentanyl. While not all youth who experience overdose have an opioid use disorder (OUD), OUD remains prevalent, affecting over 700,000 adolescents and young adults in 2023. Several medications are approved to treat OUD, have been shown to reduce the risk of overdose, and are recommended for use in youth. However, barriers to treatment including cost, clinician training and stigma mean few youth receive treatment, and medications for OUD (MOUD) are often unavailable – even in OUD treatment settings. Offering MOUD to youth across the healthcare continuum and linking them to care at every touch point in the healthcare system could make these lifesaving drugs more available.

Speakers will present strategies for linking patients to care and promising approaches to overdose prevention including initiating OUD treatment in settings across the healthcare continuum. The first speaker will present the epidemiology of OUD and overdose in youth, current trends in OUD, and overdose prevention and management in youth. The second speaker will discuss promising practices and challenges of treating OUD in hospital settings. The third speaker will present on developing protocols for OUD treatment in the pediatric emergency department including strategies for linking to treatment in the community. The final speaker will present strategies for provider-to-provider support in primary care and emergency departments via a statewide resource line dedicated to linking youth with OUD to treatment and supporting clinicians who wish to provide this care in various settings.

Learning Objectives

1. Discuss recent trends in opioid overdose and opioid use disorder treatment among youth, factors driving overdoses and best practices for OUD treatment in youth.
2. Implement OUD treatment protocols for all youth who present with opioid use disorder to your health system.
3. Consider promising practices to link youth with OUD to care when they need it regardless of treatment setting.

Scholarly Session Questions

1. **Audience Size**
75
2. **Target audience**
Youth serving clinicians of all specialties who might encounter adolescents and young adults who use drugs or are at risk for overdose. This includes general pediatricians, EM physicians, and academic clinicians developing policies and protocols for their health systems.
3. **Tracks**
Adolescent Medicine
Community Pediatrics
Emergency Medicine
General Pediatrics
Hospital Medicine
Injury Prevention
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
No conflicts
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Dr. Leslie Hulvershorn is a pediatric/adolescent psychiatrist at the University of Indiana. She is a member of the American Academy of Child and Adolescent Psychiatry. The AACAP is the leading national

professional medical association dedicated to treating and improving the quality of life for children, adolescents, and families affected by these disorders. They frequently partner with AAP on important issues related to child mental health.

8. **Does this submission involve one or more specialties or disciplines?**

Yes. This panel is of cross-cutting nature, addressing a national public health priority (overdose) and involves general pediatricians and public health professionals (Dr. Terranella), hospitalists (Dr. Camenga), peds emergency medicine (Dr. Buresh), and child and adolescent psychiatry (Dr. Hulvershorn). All presenters have expertise in addiction medicine as well. The topic is of interest and importance across the spectrum of specialties.

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

Not applicable.

10. **Additional comments**

Presentation Titles and Durations

Trends in Overdose and Overdose Prevention in Adolescents and Young Adults

Andrew Terranella, MD MPH FAAP

Duration of Presentation in Minutes

20

To Admit or Not to Admit - Implementing OUD Treatment Strategies in Pediatric Hospitals

Deepa R. Camenga, MD, MHS

Duration of Presentation in Minutes

20

Screen Doors and Safety Nets: Screening in the Peds ED and Safety Net Care

Chris Buresh, MD, MPH, DTM&H

Duration of Presentation in Minutes

20

Developing a Statewide Adolescent Addiction Access Program: If You Build It They Will Call

Leslie Hulvershorn, MD, Mac

Duration of Presentation in Minutes

20

(23) Proposal ID: 1924738

COVID-19 and Kids: Why It Still Matters (An Update on Risk Factors in Hospitalized Children, MIS-C and Long-COVID, and Vaccine Policy)

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Lakshmi Panagiotakopoulos**

Score: **0**

Participant(s)

Monica E. Patton, MD

Position:

Medical Epidemiologist

Organization:

Centers for Disease Control and Prevention

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Angela Campbell, MD, MPH (she/her/hers)

Position:

Medical Officer

Organization:

CDC

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

PIDS

Lakshmi Panagiotakopoulos, MD/MPH (she/her/hers)

Position:

Medical Officer

Organization:

Centers for Disease Control and Prevention

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

Not a member of any of these organizations

Session Description

Session Description

Children and adolescents continue to be impacted by COVID-19; however, vaccine fatigue, hesitancy, and lack of concern about infection have contributed to low vaccination rates. This session will be presented by three experts from

the CDC who are uniquely qualified to discuss relevant public health data, review pertinent contributions from the published literature, and provide the rationale for policy recommendations. Presentations will progress through a spectrum of pediatric COVID-19 related topics from acute infection to longer-term impacts. First, data on current pediatric COVID-19 epidemiology and hospitalization will be reviewed, with a focus on underlying medical conditions and racial and ethnic disparities that place children at risk for severe COVID-19. Then, current data on the burden of multisystem inflammatory syndrome in children (MIS-C) and longer-term sequelae of COVID-19 in children will be discussed, including what is known about prevention of these complications with COVID-19 vaccination. Finally, evidence behind the CDC's Advisory Committee for Immunization Practices universal 2024-2025 COVID-19 vaccination recommendation for all children ages 6 months and older, including the importance of maternal vaccination, and potential risks (e.g., myocarditis) and benefits of COVID-19 vaccination.

Learning Objectives

1. Understand the current epidemiology of pediatric COVID-19, including risk factors for hospitalization
2. Identify impact of complications of COVID-19 after acute infection, including MIS-C, Long COVID, and other longer-term sequelae
3. Discuss evidence behind ACIP's universal recommendation for everyone ages 6 months and older to receive 2024-2025 COVID-19 vaccination

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
General pediatricians, Infectious Disease specialists, public health personnel, immunization administrators
3. **Tracks**
COVID-19
Diversity, Equity, and Inclusion
Epidemiology
General Pediatrics
Health Equity/Social Determinants of Health
Immunizations/Delivery
Infectious Diseases
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

None

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr. Monica Patton is a Medical Epidemiologist with the RESP-NET Hospitalization Surveillance Team in the Coronavirus and Other Respiratory Viruses Division (CORVD) at the Centers for Disease Control and Prevention (CDC) in Atlanta, Georgia. The Respiratory Virus Hospitalization Surveillance Network (RESP-NET) is comprised of three networks that conduct population-based surveillance for laboratory-confirmed hospitalizations associated with COVID-19, respiratory syncytial virus (RSV), and influenza among children and adults. RESP-NET has had tangible effects on major public health policies, including providing pivotal evidence used in crucial decisions surrounding influenza, COVID-19, and RSV vaccine policies. Prior to joining RESP-NET team, Dr. Patton served as the Senior Advisor for the Quality Improvement (QI) Branch of the Centers for Disease Control and Prevention (CDC) in South Africa where she developed, implemented, and evaluated public health programs through the U.S. President's Emergency Fund for AIDS Relief (PEPFAR), with a particular focus on managing PEPFAR's surge activities aimed at rapidly accelerating South Africa's progress towards HIV epidemic control. Dr. Patton also served as a Resident Advisor (RA) for the U.S. President's Malaria Initiative (PMI) in Benin, West Africa during 2017–2019 where she worked with the National Malaria Control Program and the Ministry of Health to help design, implement, monitor, and evaluate key malaria prevention and control activities. From February 2016–May 2017, she worked as a medical epidemiologist at CDC in the Meningitis and Vaccine Preventable Diseases Branch (Atlanta, GA) where she focused on meningococcal vaccine policy work. Dr. Patton first joined CDC in 2012 as an Epidemic Intelligence Service Officer in the Division of STD Prevention, where she later served as a medical epidemiologist. Dr. Patton completed her pediatrics residency at New York University School of Medicine in New York, New York. Dr. Patton's knowledge and unique expertise and participation on this session will provide novel data on COVID-19 associated hospitalizations and risk factors that are critical

for pediatricians to understand when educating their patients and families on COVID-19 and COVID-19 vaccines.

Dr. Lakshmi Panagiotakopoulos is a medical officer for the Coronavirus and Other Respiratory Viruses Division (CORVD) at the Centers for Disease Control and Prevention (CDC) in Atlanta, Georgia. She is board certified in pediatrics and pediatric infectious diseases. Dr. Panagiotakopoulos is currently the co-lead of the COVID-19 vaccine Advisory Committee on Immunization Practices Work Group, which makes vaccine recommendations for the United States. In addition to her work at CDC, she is an adjunct professor at the Emory University School of Medicine department of infectious diseases and practices clinical medicine at the Emory Travel clinic. She completed her pediatrics residency at the Albert Einstein College of Medicine in New York and pediatric infectious diseases fellowship at Emory University in Atlanta, Georgia. Dr. Panagiotakopoulos also completed a NIH T32 fellowship in Vaccine Safety at Emory University and CDC, during which her research focused on the safety of tetanus, diphtheria and acellular pertussis vaccines administered during pregnancy. She also participated in CDC's COVID-19 vaccine response efforts, including the creation of a registry to actively monitor the safety of COVID-19 vaccines administered during pregnancy. She also served as a CDC liaison to the AAP's Committee on Infectious Diseases. Her knowledge and expertise will contribute to the success of this session, and will provide a unique educational opportunity for attendees.

8. **Does this submission involve one or more specialties or disciplines?**

General Pediatrics, Public Health, Infectious Diseases

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

N/A

10. **Additional comments**

Presentation Titles and Durations

Current Epidemiology of Pediatric COVID-19 and Risk Factors for Severe Illness

Monica E. Patton, MD

Duration of Presentation in Minutes

30

Multisystem Inflammatory Syndrome in Children (MIS-C), Long COVID, and other SARS-CoV-2 Sequelae

Angela Campbell, MD, MPH

Duration of Presentation in Minutes
30

Pediatric COVID-19 Vaccine Policy
Lakshmi Panagiotakopoulos, MD/MPH

Duration of Presentation in Minutes
30

(24) Proposal ID: 1930392

Healthcare delivery for children in foster care: Innovative partnerships to improve health outcomes

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Mary Greiner**

Score: **0**

Participant(s)

Mary Greiner, MD, MS (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Cincinnati Children's Hospital Medical Center

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Sarah J. Beal, PhD (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Cincinnati Children's Hospital

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

APA

Rebecca Seltzer, MD MHS (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Johns Hopkins University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

James Kaferly, III, MD (he/him/his)

Position:

Associate Professor

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Kristine Fortin, MD MPH

Position:
Associate Professor

Organization:
Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Despite best practices, challenges to delivering healthcare to children in foster care (i.e., in child protective services custody and placed out-of-home) persist. This panel brings foster care pediatricians and researchers from four states (PA, MD, OH, CO) together to highlight challenges and potential solutions to improve healthcare delivery, with the goal of providing better healthcare and promoting health for this high-risk, high-need population. First, an initiative to improve access to vision care at CHOP will be discussed. Data informed need

for this intervention and improvement strategies included case management and partnership with vision professionals. Next, work from Johns Hopkins demonstrates that collaboration between a pediatric primary care clinic and a child welfare medical case management agency can improve timely medical assessments for children in foster care, enhance ongoing care coordination for those with complex medical and behavioral needs, and inform systems change. Automated information sharing among child welfare and healthcare systems could help, as demonstrated in Ohio, which translated to both time saved and improved hospital reimbursements. Finally, the fourth presentation highlights a partnership between healthcare, child welfare and Medicaid systems which has improved the timeliness of behavioral health screening among children entering foster care in Colorado. Together, these studies demonstrate that cross-system collaboration is critical to improve healthcare service delivery for children in foster care, with generalizability across multiple contexts where children in foster care receive healthcare. Our discussion will emphasize opportunities for healthcare systems to improve health among children placed in foster through innovative and effective partnerships.

Learning Objectives

1. Upon completion, participants will be able to describe the health risks facing children in foster care.
2. Upon completion, participants will be able to utilize data to identify health risks in the population they serve.
3. Upon completion, participants will be able to identify partnerships that can improve healthcare delivery for the children they serve.

Scholarly Session Questions

1. Audience Size

50

2. Target audience

General Pediatricians, Trainees, Foster Care Pediatricians, Child Abuse Pediatricians, Complex Care Pediatricians, Ophthalmologists, Health Services Researchers, other team members working in community/public health

3. Tracks

Advocacy

Child Abuse & Neglect

Children with Chronic Conditions

Community Pediatrics

General Pediatrics

Health Equity/Social Determinants of Health

Health Services Research
Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Speakers will be submitting abstracts as well and if accepted, will need to coordinate scheduling.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Topic is Foster Care involving Child Abuse Pediatrics, General and Community Pediatrics, Foster Care Pediatrics, and Research Psychology.
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Data sharing to improve health outcomes for children in foster care
Mary Greiner, MD, MS

Duration of Presentation in Minutes

10

Improving timely care and care coordination for children in foster care in the primary care setting

Rebecca Seltzer, MD MHS

Duration of Presentation in Minutes

10

Enhancing timeliness behavioral health screening among children entering foster care

James Kaferly, III, MD

Duration of Presentation in Minutes

10

Improving Access to Vision Care for Children in Foster Care: From Data to Advocacy

Kristine Fortin, MD MPH

Duration of Presentation in Minutes

10

(25) Proposal ID: 1932388

Rare and Expensive Gene and Cell Therapies in Pediatrics: How Can Pediatric Institutions Improve Both Access and Equity?

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Emily berkman**

Score: **0**

Participant(s)

Emily R. Berkman, MD, MA (she/her/hers)

Position:
Associate Professor of Pediatrics

Organization:
Seattle Children's

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Jennifer K. Walter, MD, PhD, MS (she/her/hers)

Position:
Associate Professor of Pediatrics and Medical Ethics

Organization:
Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Erin Paquette, MD, JD, MBe (she/her/hers)

Position:

Associate Professor of Pediatric Critical Care

Organization:

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

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

Asian, White

Gender

Female

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

AAP, SPR

Session Description

Session Description

Innovation in gene and cell therapies (GCT) has exploded in the past few years. The FDA is approving more and more of these potentially life changing and curative therapies. Given the growing public knowledge of their existence,

good outcomes and commercial availability, parents and caregivers of children in need are now requesting access to these therapies. Yet, these therapies are often prohibitively expensive and require significant infrastructure on the institutional level, including help with obtaining insurance approval or determining alternate means of payment for the therapy, financial agreements and, for some therapies, local production. The limited number of institutions which will be able to leverage the capital and administrative support for GCT further strains access, concentrating availability to a small number of pediatric institutions. As a result, it is challenging to get these groundbreaking therapies to the children they were designed to help. Consideration of state and/or federal support through expansion of, or changes to, coverage through Medicare and Medicaid provides alternative sources of support. We present the experiences of three large pediatric institutions in navigating these obstacles, highlighting the ethical and practical challenges.

Emily Berkman will share the Seattle Children's Hospital experience and present prioritization frameworks for allocation of these scarce resources.

Jennifer Walter will share the Children's Hospital of Philadelphia experience and discuss potential avenues for financing.

Erin Paquette will share the Ann & Robert H. Lurie Children's Hospital experience and present possible ways to leverage our collective voice to help make change at the national level.

Learning Objectives

1. Appreciate the various institutional challenges with patient access to gene and cell therapies that currently exist
2. Ethically prioritize both gene and cell therapies and patients in need of these therapies
3. Identify potential next steps for improving patient access through both local and national channels

Scholarly Session Questions

1. **Audience Size**

25

2. **Target audience**

Hospital administrators, ethicists, pediatrician advocates, pharmacists, clinicians caring for children with chronic disease who may benefit from gene and cell therapies.

3. **Tracks**

Advocacy
Children with Chronic Conditions
Clinical Bioethics
Diversity, Equity, and Inclusion
General Pediatrics
Health Equity/Social Determinants of Health
Pharmacology and Therapeutics

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Friday will be hard as one presenter coming from another conference in Seattle.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Topic is Gene and Cell Therapy Access involving Organizational Ethics, General Pediatrics and Health Policy
9. **If your session was presented at another conference, please describe the conference and presentation.**
NA
10. **Additional comments**

Presentation Titles and Durations

Ethically Informed Prioritization Frameworks for Allocating Gene and Cell Therapies

Emily R. Berkman, MD, MA

Duration of Presentation in Minutes

25

Financing Expensive Gene and Cell Therapies to Ensure Access and Sustainability

Jennifer K. Walter, MD, PhD, MS

Duration of Presentation in Minutes

25

Leveraging Our Collective Voice to Improve Equitable Access to Gene and Cell Therapies

Erin Paquette, MD, JD, MBe

Duration of Presentation in Minutes

25

(26) Proposal ID: 1933025

Developmental Language Disorder (DLD): When it's not (just) ADHD

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Laurel Cederberg**

Score: **0**

Participant(s)

Laurel E. Cederberg, MD,MPH (she/her/hers)

Position:
Pediatrician

Organization:
HealthPartners Como Clinic Department of Pediatric and Adolescent
Medicine

Role:

Submitter;Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Sarah Hanson Prem, MA, CCC-SLP (she/her/hers)

Position:
Speech Language Pathologist

Organization:
Associated Speech & Language Specialists

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Session Description

Session Description

During this session, a general pediatrician and a speech language pathologist will discuss Developmental Language Disorder (DLD), the relatively new name that was chosen by an expert panel in 2016 for common, but underdiagnosed language processing issues. DLD is a hidden and often missed diagnosis when pediatric, adolescent, and young adult patients are evaluated for behavior issues, learning difficulties and possible ADHD. Parents, teachers and pediatric providers are effective at detecting speech disorders, but they are less effective in recognizing the symptoms of DLD which often mimic or co-exist with ADHD. DLD persist into adulthood and may lead to long-term negative effects such as underachievement in school, under-employment, difficulty in personal relationships, mood disorders, and substance abuse.

We first briefly discuss language development and screening in preschool years and then present case reports of children and adolescents with identified DLD. We will describe the basics of language evaluation and treatment.

We discuss various symptoms of DLD, and address benefits of increased awareness of DLD that can lead to better school-based "Response-to-Interventions if a child is having learning or behavior issues, more accurate ADHD/Learning/Behavior evaluations in clinical settings, and appropriate language-based support for children and adolescents who have co-existing DLD and mental health issues. In these cases, when DLD is identified, the children receive appropriate language therapy, supports and tools for self-advocacy.

Learning Objectives

1. identify symptoms in a child who has learning or behavior issues that would suggest DLD and need for a language evaluation by a speech-language pathologist.(SLP)
2. Appropriately evaluate a child with symptoms of inattention, distractibility and impaired executive functioning that includes an evaluation with a SLP who specializes in language disorders.
3. understand that DLD, ADHD and other neurodivergent conditions can co-exist in the same person and often are found as co-conditions.

Scholarly Session Questions

1. **Audience Size**

125

2. **Target audience**

Pediatricians, general and special education educators, speech and language pathologists, mental health providers, state and local education leaders and government policy makers

3. **Tracks**

Advocacy

Children with Chronic Conditions

Developmental and Behavioral Pediatrics

General Pediatrics

Health Equity/Social Determinants of Health

Mental Health

School and Community Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

We have no conflicting events

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Sarah Hanson Prem is a licensed speech and language pathologist and a member of the American Speech-Language-Hearing Association (ASHA), which is a professional association n equivalent to those listed.

Ms. Hanson Prem's presence and expertise are critical to increasing awareness about DLD for parents, educators, health care providers, mental health providers and policymakers who play important roles in children's learning and well-being. We need to get out of our silos and include important collaborative partners in care.

8. **Does this submission involve one or more specialties or disciplines?**

The diagnosis and treatment of DLD is important to those who work with children and adolescents/young adults in the areas of General pediatrics, Public Health, Mental Health, Behavior and Developmental Specialties, Speech and Language, Special Education, Children and Adolescents with Special Health Care Needs, and Parent Advocacy.

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

In March 2018, Dr. Laurel Cederberg and Sarah Hanson Prem presented some of the introductory information about speech and language disorders and DLD specifically with patient case reports the HealthPartners Medical Group "Behavioral Health" Conference in Minneapolis, Minnesota. The material in the current presentation is more up-to-date, introducing the new 2016 designation of Developmental Language Disorder (DLD), instead of the outdated "language processing disorder" nomenclature and is based on a broader review of the literature. With the speakers' 25+ years of clinical experience, this current presentation on DLD also includes clinical practice tips and recommendations for DLD screening and enhanced parental support, before and after language evaluation.

10. **Additional comments**

Presentation Titles and Durations

Pediatrician's Perspective: Awareness of DLD in Children & Adolescents in Primary Care, Referrals, Outcomes and Policy Change

Laurel E. Cederberg, MD,MPH

Duration of Presentation in Minutes

37

Speech-Language Pathologist Perspective: Basics of Language Evaluation and Treatment.

Sarah Hanson Prem, MA, CCC-SLP

Duration of Presentation in Minutes

38

(27) Proposal ID: 1922079

Securing the Safety Net: Challenges and Opportunities for Social Care in the ED

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Danielle Cullen**

Score: **0**

Participant(s)

Danielle Cullen, MD, MPH, MSHP (she/her/hers)

Position:

Assistant Professor

Organization:

Children's Hospital of Philadelphia

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Shenel Heisler, DO (she/her/hers)

Position:

Pediatric Emergency Medicine Fellow

Organization:

Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

Not a member of any of these organizations

Ashlee Murray, MD, MPH

Position:

Associate Professor of Clinical Pediatrics

Organization:

Perelman School of Medicine at the University of Pennsylvania

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Lauren AH VonHoltz, MD, MPH (she/her/hers)

Position:

Assistant Professor of Clinical Pediatrics, Attending Physician

Organization:

Childrens Hospital of Philadelphia

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Joel Fein, MD, MPH (he/him/his)

Position:
Professor of Pediatrics and Attending in Emergency Medicine

Organization:
Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Casey E. Pitts, MD, MBI (she/her/hers)

Position:
Assistant Professor of Clinical Pediatrics

Organization:
Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Unmet social need in childhood is a powerful driver of health, leading to poor health outcomes despite the most advanced medical care. Social needs interventions facilitate family connection with resources and support, improving caregiver quality of life and child health outcomes. The Emergency Department (ED) is a key setting for such intervention, with 40% of patients reporting at least one unmet social need. Despite requirements for institution-wide social needs interventions, there is little evidence to guide implementation. Given the unique characteristics of ED care-- volume and acuity of patients, multiple users accessing the medical record at each visit, and lack of longitudinal care of patients-- there is a need to establish best practices for social care in this setting, allowing for alignment with system-wide efforts while remaining sensitive to issues of privacy and bias. The first part of this session will explore 3 unique challenges and associated opportunities for social care in the ED setting: 1) Heuristics in ED decision making, and opportunities to leverage health technology to mitigate documentation of social need as a potential source of bias; 2) Cognitive burden of front-line providers, and the potential to develop social care procedures that operate in parallel with care; 3) 24/7 hours of ED operation without 24/7 social care support structure, and opportunities for tiered and asynchronous support. The second portion of this session will focus on navigating alignment with institutional efforts while preserving ED-specific adaptations. Panelists include experts in social emergency medicine, healthcare-based interventions, cognitive bias, and clinical informatics.

Learning Objectives

1. Examine the pediatric ED's role in addressing unmet social needs and the impact of addressing these needs on child health outcomes
2. Identify unique setting-specific challenges, and explore potential ED adaptations, such as streamlined workflows and technology integration, to optimize social care

3. Discuss strategies for aligning ED social care efforts with broader institutional frameworks, leveraging technology and best practices to ensure cohesive care

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
pediatric emergency medicine physicians and trainees, healthcare administrators, social care experts, public health professionals, informaticists
3. **Tracks**
Advocacy
Community Pediatrics
Emergency Medicine
Health Equity/Social Determinants of Health
Public Health
Quality Improvement/Patient Safety
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Getting it done and making it stick: Considering new methods when implementation fails
Health Policy Scholars Sessions
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Dr. Heisler is a trainee and not a current member of any of these societies, but our hope is to get her more involved and interested in membership-- she has deep interest in sources of cognitive bias, and developing expertise and thought leadership in use of AI to identify and reduce bias in EHR documentation

Dr. Pitts is an expert in clinical informatics and an early career faculty who contributes greatly in this topical area and beyond; we're eager to garner her greater participation in this work through the listed member organizations and PECARN

8. **Does this submission involve one or more specialties or disciplines?**

The topic is addressing health related social needs in the emergency department, involving emergency medicine, public health, health equity/SDoH, informatics, and quality improvement

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

n/a

10. **Additional comments**

Presentation Titles and Durations

From Crisis to Connection: Innovating Social Care in the Pediatric ED

Danielle Cullen, MD, MPH, MSHP

Duration of Presentation in Minutes

15

Breaking the Bias: Overcoming Documentation Pitfalls in the ED

Shenel Heisler, DO

Duration of Presentation in Minutes

15

Parallel Pathways: Integrating Social Care Without Disrupting ED Flow

Ashlee Murray, MD, MPH

Duration of Presentation in Minutes

7

Parallel Pathways: Integrating Social Care Without Disrupting ED Flow

Lauren AH VonHoltz, MD, MPH

Duration of Presentation in Minutes

8

24/7 Care, 24/7 Needs: Addressing the Timing Gap in Social Support

Joel Fein, MD, MPH

Duration of Presentation in Minutes

15

Tech-Forward Solutions: Aligning ED Social Care with System-Wide Efforts

Casey E. Pitts, MD, MBI

Duration of Presentation in Minutes

15

(28) Proposal ID: 1919028

Common GI conditions: The GI system that does not work

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Thomas Ciecierega**

Score: **0**

Participant(s)

Thomas Ciecierega, MD (he/him/his)

Position:

Associate Professor of Pediatrics

Organization:

Weill Cornell Medicine

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Manu Sood, MBBS, FRCPCH, MD, MSc (he/him/his)

Position:

Professor and Department Chair

Organization:

University of Illinois College of Medicine, Peoria

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

SPR

B U.K. Li, MD (he/him/his)

Position:

Emeritus Professor

Organization:

Medical College of Wisconsin

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

Not a member of any of these organizations

Maria E. Perez, DO (she/her/hers)

Position:

Assistant Professor

Organization:

Northwestern University The Feinberg School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Update on some of the most common GI conditions in pediatrics, including vomiting, constipation and feeding issues. Includes information related to diagnosis and management of these conditions, updated guidelines, updated terminology and novel therapeutic options from some of the world's leading experts in the field.

Learning Objectives

1. Upon completion, participants will be able to properly identify, evaluate and manage chronic constipation effectively, beyond just pharmacotherapy.
2. Upon completion, participants will be able to properly identify, evaluate and manage Cyclic Vomiting Syndrome and learn about new updates and variants.
3. Upon completion, participants will be able to properly identify, evaluate and manage eating disorders and their GI presentations.

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

General pediatricians, pediatric gastroenterologists, other pediatric subspecialists including Peds Endo and NICU, pediatric trainees and other pediatric providers including RNs, APNs, IDs, PAs, etc

3. **Tracks**

Adolescent Medicine
Breastfeeding/Human Milk
Endocrinology

Gastroenterology/Hepatology
General Pediatrics
Hospital Medicine
Neonatology
Pediatric Nutrition

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Please try to avoid other sessions focused on pediatric GI and hepatology.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
All speakers are members of NASPGHAN and experts in the field of pediatric gastroenterology, hepatology and nutrition.
8. **Does this submission involve one or more specialties or disciplines?**
Peds GI, Gen Peds, Peds Endo, Nutrition
9. **If your session was presented at another conference, please describe the conference and presentation.**
Not applicable
10. **Additional comments**
None

Presentation Titles and Durations

Constipation in infants in children: common and uncommon causes and treatments

Manu Sood, MBBS, FRCPCH, MD, MSc

Duration of Presentation in Minutes

30

Cyclic Vomiting Syndrome: what's old and what's new in workup and management

B U.K. Li, MD

Duration of Presentation in Minutes

30

GI manifestations in eating disorders: causes or consequences?

Maria E. Perez, DO

Duration of Presentation in Minutes

30

(29) Proposal ID: 1931023

Bridging Gaps in Pediatric Care: Addressing the Unique Needs of Children Involved with the Carceral System

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **April McNeill-Johnson**

Score: **0**

Participant(s)

Megan L. Schultz, MD, MA (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Medical College of Wisconsin

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Monique Jindal, MD, MPH (she/her/hers)

Position:

Assistant Professor

Organization:

Lurie Children's

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APA

April D. McNeill-Johnson, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Children's Mercy Hospitals and Clinics

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, APA

Elizabeth Barnert, MD, MPH, MS

Position:

Associate Professor

Organization:

UCLA

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Anna Abrams, MD (she/her/hers)

Position:
Assistant Professor Pediatrics, Emergency Medicine

Organization:
University of Colorado School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Alexandra Corley, MD MPH FAAP (she/her/hers)

Position:
Associate Professor

Organization:
Children's National Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Session Description

Session Description

This panel discussion seeks to illuminate the complex healthcare needs of youth with law enforcement involvement by delving into their experiences in medical settings. It will explore the prevalence of law enforcement in pediatric medical settings, the challenges faced by both patients and clinical teams, and the intersection of acute care, behavioral health crises, and legal issues. The session will also address the impact of law enforcement on healthcare delivery and patient experiences, as well as explore how implicit bias can shape clinical interactions. By integrating insights from experts and focusing on trauma-informed and equitable approaches, this panel will offer practical strategies to improve the continuity of care and health outcomes for this historically vulnerable population, ensuring that participants are well-equipped to address these critical issues in their practice.

Learning Objectives

1. Participants will understand the healthcare challenges faced by youth with juvenile legal involvement in medical settings and explore strategies to combat the inequities they face.
2. Participants will assess the impact of law enforcement presence on healthcare delivery and patient experiences for this population.
3. Participants will identify how implicit bias influences care and explore strategies to mitigate its effects.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**

General pediatricians
Subspecialists
Trainees

3. **Tracks**

Adolescent Medicine
Advocacy
Diversity, Equity, and Inclusion
Health Equity/Social Determinants of Health
School and Community Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Friday, April 25
Monday, April 28

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Unsure at this time as acceptances not sent out. However, would like to not overlap with other sessions with a carceral health/legal system focus.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

N/A

8. **Does this submission involve one or more specialties or disciplines?**

Emergency Medicine
General Pediatrics
Academic Pediatrics
Med-Peds

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

N/A

10. **Additional comments**

Presentation Titles and Durations

Welcome, Introduction to the session, and speakers
Megan L. Schultz, MD, MA

Duration of Presentation in Minutes

40

Welcome, Introduction to the session, and speakers

Monique Jindal, MD, MPH

Duration of Presentation in Minutes

40

Emergency Care for Youth with Juvenile Legal Involvement: Key Considerations and Practices

April D. McNeill-Johnson, MD

Duration of Presentation in Minutes

45

Emergency Care for Youth with Juvenile Legal Involvement: Key Considerations and Practices

Elizabeth Barnert, MD, MPH, MS

Duration of Presentation in Minutes

45

Policing in the Medical Setting: The Impact of Law Enforcement on Healthcare Delivery and Patient Experiences

Anna Abrams, MD

Duration of Presentation in Minutes

40

Implicit Bias: How Unconscious Attitudes Influence Care for Youth with Juvenile Legal Involvement

Alexandra Corley, MD MPH FAAP

Duration of Presentation in Minutes

40

(30) Proposal ID: 1918674

A Rubric for Identifying and Assessing Inequities Embedded in Clinical Guidance

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Joseph Wright**

Score: **0**

Participant(s)

Joseph Wright, MD MPH (he/him/his)

Position:

Professor (adjunct) of Emergency Medicine, Pediatrics, Health Policy & Management

Organization:

George Washington University Schools of Medicine and Public Health

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

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

AAP, APA, APS

Angela Ellison, MD, MSc

Position:

Professor, Vice Chair of Pediatrics

Organization:

Children's Hospital of Philadelphia

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, APA, APS, SPR

Tiffani Johnson, MD (she/her/hers)

Position:

Associate Professor of Emergency Medicine

Organization:

UC Davis

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, APA, SPR

Monika Goyal, MD, MSCE (she/her/hers)

Position:

Professor of Pediatrics and Emergency Medicine

Organization:

Children's National Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Elyse N. Portillo, MD, MPH (she/her/hers)

Position:
Assistant Professor

Organization:
Texas Children's Hospital/Baylor College of Medicine

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Shaquita Bell, MD

Position:
Clinical Professor of Pediatrics

Organization:
University of Washington School of Medicine, Department of Pediatrics.
Seattle Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
American Indian or Alaska Native, Black or African American

Gender
Female

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

Nia J. Heard-Garris, MD, MBA, MSc (She/they)

Position:
Assistant Professor of Pediatrics

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

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Agender

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

Session Description

Session Description

Bias, discrimination, and racism are deeply embedded in clinical algorithms and practice guidelines. There are many examples of the overt use of race assignment, a social construct, as an independent risk-determining or norming variable in the clinical decision-making process. Further, race and ethnicity have been inappropriately conflated with biologic factors throughout the history of medicine in the development of the policies and guidelines that drive clinical care delivery and practice. As an organizational commitment, the American Academy of Pediatrics has prioritized tackling and dismantling race-based

medicine [Eliminating Race-Based Medicine. *Pediatrics* 2022;150(1):e2022057998]. Accordingly, a team of equity scientists and health services researchers has been assembled to undertake a comprehensive review of the Academy's portfolio of published clinical policies and practice guidelines, and to systematically analyze and identify implicit or explicit representations of bias, discrimination and/or racism. This team of subject-matter-experts, i.e., the Rapid Revision Team, is refining a rubric to be shared with authors and authoring groups and be uniformly applied as an equity-enhancing tool to complement the work of policy development within the Academy. Ultimately, it is an overarching goal of this project to contribute to a broader effort among the organizations and professional societies responsible for the development of clinical guidance to critically identify and correct the inherent structural inequities that drive practice and lead to outcome disparities.

The session faculty is composed of the members of the project's Rapid Revision Team, who, as appointed and elected leaders, also uniquely represent the organizations that comprise the Pediatric Academic Societies.

Learning Objectives

1. Identify inequities embedded in clinical practice guidelines.
2. Discuss the parameters of conducting an equity review.
3. Define the pathway for moving from race-based to race-conscious medicine.

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Health Services Researchers, Equity Scientists, Injury Prevention Scholars, Public Health Practitioners, Public Policy Advocates, General Pediatricians, Subspecialty Pediatricians
3. **Tracks**
Academic and Research Skills
Community Pediatrics
Diversity, Equity, and Inclusion
General Pediatrics
Health Equity/Social Determinants of Health
Health Services Research
Medical Education
Quality Improvement/Patient Safety
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Diversity, Equity and Inclusion Reception

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

General Pediatrics

Health Policy

Medical Education

Quality Improvement

Subspecialty Pediatrics (all)

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

10. **Additional comments**

Presentation Titles and Durations

Introduction - Applying an equity lens to clinical practice guidelines: Getting out of the gate

Joseph Wright, MD MPH

Duration of Presentation in Minutes

8

Eliminating race-based medicine: An organizational priority

Angela Ellison, MD, MSc

Duration of Presentation in Minutes

12

Assessing bias in the pediatric literature: State-of-the-science

Tiffani Johnson, MD

Duration of Presentation in Minutes

12

Undertaking a systematic equity review: Establishing a methodology

Monika Goyal, MD, MSCE

Duration of Presentation in Minutes

12

How bias, discrimination and racism show up: A categorical rubric for assessment

Elyse N. Portillo, MD, MPH

Duration of Presentation in Minutes

12

Establishing a race-conscious approach to clinical guidance: Implementation and practice implications

Shaquita Bell, MD

Duration of Presentation in Minutes

12

Establishing a race-conscious approach to clinical guidance: The role of organized pediatrics and academic leadership

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

Duration of Presentation in Minutes

12

(31) Proposal ID: 1929764

Personalized decision-making and the art of making recommendations about complex decisions

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **eduard verhagen**

Score: **0**

Participant(s)

eduard verhagen, MD, JD, PhD

Position:
prof

Organization:
University Medical Center Groningen, Dept of pediatrics

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Rebecca Pearce, BSc, MSc, BEd (she/her/hers)

Position:
Parent Partner

Organization:
CHU Sainte Justine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

ANNIE Janvier, MD, PhD (call me Annie)

Position:

Professor of pediatrics and clinical ethics

Organization:

Université de Montréal, CHU Sainte-Justine

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

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

SPR

Trisha Prentice, MBBS, BMedSci, MBioeth, PhD (she/her/hers)

Position:

Dr

Organization:

The Royal Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

John Lantos, MD

Position:
Pediatrician

Organization:
Sun River Health

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Prefer not to respond

Gender
Prefer not to respond

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

Session Description

Session Description

Advances in diagnostics, prognostication, and therapeutics are making end-of-life for are becoming more complicated than ever. Forty years ago, these decisions were primarily based on conditions like Down Syndrome and Spina Bifida. Today, they often involve rare diseases that lead to complex, chronic, and technology-dependent situations with uncertain prognoses. As new treatments emerge, prognostic estimates can change, complicating decision-making further. Personalized decision-making (PDM) is an emerging approach

that helps clinicians and parents identify unique factors relevant to each case. It necessitates a delicate balance between physician guidance and parental autonomy, which can lead to moral distress if the balance shifts away from the child's best interests.

In this session, international experts will discuss the goals and pitfalls of PDM, using case studies to highlight its complexities, especially when cultural or religious norms conflict. They will share best practices and address ongoing controversies.

Dr. John Lantos will introduce PDM theory and its differences from previous approaches. Dr. Annie Janvier will focus on communicating with parents when a baby's prognosis is poor. Rebecca Pearce will discuss what parents prioritize in complex decisions. Dr. Verhagen will offer a Dutch perspective, including insights on pediatric euthanasia's impact on communication. Dr. Prentice will explore the moral distress faced by parents and clinicians in the context of PDM. Presenters will provide real-world examples of decision-making complexities across cultures, with time for audience questions to enhance understanding.

Learning Objectives

1. Understand the tensions inherent in personalized decision-making
2. Examine personalized decision making, the role of communication and consider practical recommendations.
3. Analyze the interactions between the concept of personalized decision-making and the need to respect differences in approaches to difficult end-of-life decisions.

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Clinicians in neonatology, bioethics, palliative care, critical care, hospital pediatrics, intensivists
3. **Tracks**
Clinical Bioethics
Critical Care
Diversity, Equity, and Inclusion
General Pediatrics
Global Neonatal & Children's Health
Hospital Medicine

Neonatology
Palliative Care

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Bioethics, Palliative Care
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Rebecca Pearce is a parent partner. She is member of parent advisory boards and on the board of the Canadian Premature Baby Foundation
8. **Does this submission involve one or more specialties or disciplines?**
The topics discussed are multidisciplinary and include Neonatology, Bioethics, Palliative care and academic pediatrics.
9. **If your session was presented at another conference, please describe the conference and presentation.**
This is a first-time panel
10. **Additional comments**
We focus on complex decision-making and we provide recommendations for communication, which is what young doctors have asked us to do at previous PAS workshops and panel presentations.

Presentation Titles and Durations

New steps in the Dutch approach towards decision-making and palliative care
eduard verhagen, MD, JD, PhD

Duration of Presentation in Minutes

13

Parental perspective on communication about care and outcomes in the NICU
Rebecca Pearce, BSc, MSc, BEd

Duration of Presentation in Minutes

13

Speaking about life and death in the NICU: personalized strategies

ANNIE Janvier, MD, PhD

Duration of Presentation in Minutes

13

The evolving concept of moral distress in the context of PDM

Trisha Prentice, MBBS, BMedSci, MBioeth, PhD

Duration of Presentation in Minutes

13

Introduction, discussion and wrap-up/conclusion

John Lantos, MD

Duration of Presentation in Minutes

35

(32) Proposal ID: 1898083

Burden of Group A Streptococcus infections, post-strep sequelae (arthritis, heart disease, basal ganglia inflammation) and vaccines on the horizon

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Sejal Bhavsar**

Score: **0**

Participant(s)

Sejal M. Bhavsar, MD

Position:

Pediatric Infectious Disease Physician

Organization:

Hackensack University Medical Center

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, PIDS

Jennifer E. Weiss, MD

Position:

Associate Professor of Pediatrics

Organization:

Hackensack University Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

APA

Monica Chugh, MD (she/her/hers)

Position:

Physician

Organization:

Joseph M. Sanzari Children's Hospital Hackensack University Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Jennifer Frankovich, MD (she/her/hers)

Position:

Clinical Professor, Pediatrics – Rheumatology

Organization:

Stanford

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Session Description

Session Description

Presentation Descriptions:

Group A streptococci (GAS) infections have varied clinical manifestations. Recent increase in invasive infections is associated with significant morbidity and mortality. Non-suppurative complications of GAS include acute rheumatic fever (ARF)/Sydenham Chorea (SC), Post-streptococcal glomerulonephritis, Post-Streptococcal Reactive Arthritis (PSRA) and Pediatric Autoimmune Neuropsychiatric Disorder Associated with GAS (PANDAS). This talk addresses clinical presentations, diagnostic evaluations and treatments, including increasing clindamycin resistance.

PSRA and ARF are viewed as a spectrum of disease with differences in their onset, symptoms, treatments and prognosis. PSRA is less severe, occurring shortly after GAS infection with the development of arthritis. ARF typically occurs 21 days after an untreated GAS infection and is more severe with multi-organ involvement. This talk differentiates between these conditions based on clinical presentation and diagnostic evaluation. Treatments will be reviewed.

Rheumatic Heart Disease (RHD), a sequela of ARF, is the leading cause of acquired heart disease in pediatrics worldwide. This talk will improve clinicians' recognition of the population disparity in RHD, review the diagnosis and management of acute and chronic RHD, and review multidisciplinary strategies to improve outcomes.

Evidence for basal ganglia inflammation/autoimmunity/dysfunction has been demonstrated for SC and PANS/PANDAS and will be reviewed. Epidemiologic,

human sera studies, and animal model studies have linked GAS to basal ganglia inflammation, injury, and symptoms (OCD, tics, eating restriction, chorea). Typical presentation of symptoms, diagnostic evaluation, and treatment strategies will be presented.

Given significant GAS-associated morbidity and mortality worldwide, strep vaccine efforts continue with 4 vaccines on the horizon which will be discussed.

Learning Objectives

1. recognize the recent shift in the epidemiology of Group A streptococcus with invasive disease which is driving the push for developing GAS vaccines.
2. name the four non-suppurative complications of GAS infection.
3. learn the general principles for treating acute GAS infections and non-suppurative complications.

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
General Pediatricians, Pediatric Infectious Disease physicians, Pediatric cardiologists and rheumatologists
3. **Tracks**
Cardiology
General Pediatrics
Infectious Diseases
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
n/a
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr Frankovich is not a member of these organizations but is a national leader for PANS/PANDAS research and serves as the director of the PANS program at Stanford University

8. **Does this submission involve one or more specialties or disciplines?**

General Pediatrics, Infectious Disease, Cardiology, Rheumatology

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

n/a

10. **Additional comments**

Presentation Titles and Durations

Overview of Group A streptococci infections and complications

Sejal M. Bhavsar, MD

Duration of Presentation in Minutes

30

Arthritis associated with Group A streptococci infections

Jennifer E. Weiss, MD

Duration of Presentation in Minutes

10

Rheumatic heart disease

Monica Chugh, MD

Duration of Presentation in Minutes

10

Post-strep Neuropsychiatric Conditions

Jennifer Frankovich, MD

Duration of Presentation in Minutes

30

(33) Proposal ID: 1925411

PICC lines and Central lines in the NICU... the things you don't know that you don't know but wished you had known!

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Frank Ing**

Score: **0**

Participant(s)

Yogen Singh, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

University of California Davis Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

Not a member of any of these organizations

Thomas E. Fagan, MD

Position:

Professor of Pediatrics

Organization:

Central Michigan University College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Jayashree Ramasethu, MBBS, DCH, MD (she/her/hers)

Position:

Professor of Clinical Pediatrics

Organization:

Georgetown University School of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, SPR

Frank Ing (he/him/his)

Position:

Professor of Pediatrics

Organization:

UC Davis Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Session Description

Session Description

Percutaneous, peripherally inserted central catheters (PICC) and central lines are increasingly being used in the NICU, but many neonatologists are not fully aware of the potential risks and complications, particularly the long-term loss of vessel patency in which these lines are placed. For patients with chronic diseases (e.g., short gut syndrome [SGS], congenital heart disease [CHD]), or multi-system diseases, vascular access is critical. The loss of vascular access for central lines increases both mortality and morbidity, even long after leaving the NICU. For example, one of the indications for intestinal transplant in SGS is loss of central venous access which might have been prevented in the NICU. Vascular patency is one of those issues that may not seem critical until it becomes a problem—and when it does, it becomes a major problem. This session will discuss the short- and long-term complications of PICC and central lines, as well as strategies to revascularize stenotic or occluded veins to restore vascular access in critical patients.

Learning Objectives

1. Learn what are the short term complications of PICC and central lines placed in neonates.
2. Learn what are the long term complications of PICC and central lines placed in neonates including SVC and IVC syndrome and chronically occluded veins.
3. Learn methods to obtain central venous access when the vessel has become stenotic or occluded from previous trauma of IV access.

Scholarly Session Questions

-
1. **Audience Size**
400
 2. **Target audience**
Neonatologists, intensivists, pediatric gastroenterologists, cardiologists, nephrologists, hematologists, oncologists, emergency room physicians, nurses, and anyone involved with placing, managing or requiring PICC lines and central lines.
 3. **Tracks**
Cardiology
Critical Care
Emergency Medicine
Gastroenterology/Hepatology
Hematology/Oncology
Neonatology
Quality Improvement/Patient Safety
 4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
 5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
unknown at this point.
 6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
 7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Frank Ing- Is an academic pediatric cardiologist and is a member of multiple cardiology related societies. Funding is limited to join the AAP, APA, APS, SPR, and other general pediatrics related societies.
 8. **Does this submission involve one or more specialties or disciplines?**
Yes, topic is relevant to neonatology, critical care, cardiology, gastroenterology, emergency room physicians, nephrology, hematology, oncology and any specialty requiring central venous access for management of their patients.
 9. **If your session was presented at another conference, please describe the conference and presentation.**
none
 10. **Additional comments**

Presentation Titles and Durations

PICC line placement- sometimes not so easy: tips and tricks

Yogen Singh, MD

Duration of Presentation in Minutes

15

Strategies for difficult vascular access: when the vessel is occluded!

Thomas E. Fagan, MD

Duration of Presentation in Minutes

15

PICC lines- early complications □ wished I paid more attention!

Jayashree Ramasethu, MBBS, DCH, MD

Duration of Presentation in Minutes

15

PICC lines- late complications □ impact of a lifetime even after graduation from the NICU!

Frank Ing

Duration of Presentation in Minutes

15

(34) Proposal ID: 1932028

NutGut: The Impact of Preterm Infant Nutrition Options on Gut Health

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Sarah Taylor**

Score: **0**

Participant(s)

Sarah N. Taylor, MD, MSCR (she/her/hers)

Position:
Professor of Pediatrics

Organization:
Yale University

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Camilia Martin, MD, MS (she/her/hers)

Position:
Professor of Pediatrics

Organization:
Weill Cornell Medicine

Role:

Speaker;Chair

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Meghan Azad, PhD (she/her/hers)

Position:
Director, Manitoba Interdisciplinary Lactation Centre (MILC)

Organization:
University of Manitoba

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Brenda Poindexter, MD MS (she/her/hers)

Position:
Chief, Division of Neonatology

Organization:
Children's Healthcare of Atlanta

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

When born premature, an infant is exposed to feeds rather than the amniotic fluid intended to bathe the gut in growth-promoting bioactives. Determining how to feed the preterm infant to optimize growth and development while also protecting the gut from injury is a critical goal in very preterm infant clinical care. The impact of feeding types on very preterm infant gut maturation, inflammation, and microbiome has been studied in vitro, in animal models, and in preterm infant populations. In this session, four nutrition scientists will merge the mechanistic data available to identify how macronutrient, micronutrient, and bioactive exposures harm or protect the developing gut.

Learning Objectives

1. Determine how feeding nutrients and milk bioactives relate to very preterm infant gut maturation.
2. Identify how specific nutrient exposures relate to very preterm infant gut inflammation.
3. Determine how nutrient and bioactive exposures relate to very preterm infant gut microbiome.

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
neonatologists, clinicians, basic scientists, translational scientists, clinical scientists, trainees, pediatric gastroenterologists, human milk scientists, nutrition specialists,
3. **Tracks**

Allergy, Immunology and Rheumatology
Basic Science
Breastfeeding/Human Milk
Clinical Research
Gastroenterology/Hepatology
Infectious Diseases
Neonatology
Pediatric Nutrition

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
SPR events, Human Milk and Breastfeeding Platforms, GI Physiology and NEC platforms
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Meghan Azad was invited to speak because she has performed innovative work that is critical to our understanding of the preterm infant gut microbiome. She is a basic science researcher in Canada and, therefore, is not a member of the U.S.-based clinically oriented societies but brings phenomenal expertise to this topic.
8. **Does this submission involve one or more specialties or disciplines?**
Nutrition, Neonatology, Public Health, Biochemistry, Microbiology, Epidemiology, Physiology
9. **If your session was presented at another conference, please describe the conference and presentation.**
not applicable
10. **Additional comments**

Presentation Titles and Durations

Very Preterm Infant Feeding and Gut Maturation
Sarah N. Taylor, MD, MSCR

Duration of Presentation in Minutes

15

Very Preterm Infant Feeding and Gut Maturation
Camilia Martin, MD, MS

Duration of Presentation in Minutes

15

Very Preterm infant Feeding and the Gut Microbiome
Meghan Azad, PhD

Duration of Presentation in Minutes

30

Evidence-based Very Preterm Infant Feeding
Brenda Poindexter, MD MS

Duration of Presentation in Minutes

15

(35) Proposal ID: 1933403

Hot Topics in Pediatric Emergency Medicine--A Focused Interactive Review and Discussion of Recent Practice Changing Literature

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Nicole Nadeau**

Score: **0**

Participant(s)

Nicole Nadeau, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics and Emergency Medicine

Organization:

MassGeneral Hospital for Children

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Moon Lee, MD MPH MS (she/her/hers)

Position:

Clinical Associate Professor

Organization:

Stanford University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Margaret Lin-Martore, MD (she/her/hers)

Position:

Associate Clinical Professor

Organization:

University of California, San Francisco, School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Session Description

Session Description

This will be a focused review of recent literature in the preceding year on three hot topics in pediatric emergency medicine. The topics have been chosen to reflect areas of important new policy/practice guidelines in the recent literature

(pediatric emergency imaging), of critical current focus for us as a medical community (care disparities) and of great current societal interest (artificial intelligence). One speaker will focus on each topic, initially providing an overview of the landscape of the most recent pertinent literature in the preceding 12 months and then moderating a brief Q&A and discussion on the topic. Word count unfortunately will not allow insertion of citations for articles identified to date but anticipate ultimate review and discussion of 2-4 articles per topic.

Learning Objectives

1. express understanding of current best practices and existing policy statements regarding imaging in pediatric emergency patients, incorporating these into their clinical practice.
2. identify literature-proven areas of inequity and bias in pediatric emergency care, to which they may be vulnerable in their own clinical practice.
3. describe emerging trends in potential use of artificial intelligence in recent literature and how it may impact their future clinical care.

Scholarly Session Questions

1. **Audience Size**
40
2. **Target audience**
This session will target all practicing pediatric emergency medicine providers, for whom a robust review and discussion of recent pertinent PEM literature could inform their clinical practice and elevate their education of trainees.
3. **Tracks**
Emergency Medicine
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide**

an explanation of the non-member speaker selection so that PAS staff may request approval.

N/A

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

No, it is focused primarily on pediatric emergency medicine.

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

It has not been.

10. Additional comments

Presentation Titles and Durations

Optimal Imaging in the Pediatric ED--A Look at Recent Policy and Literature
Nicole Nadeau, MD

Duration of Presentation in Minutes

30

Health Disparities in Recent PEM Literature: A Look at Potential Vulnerabilities
in Our Own Clinical Care

Moon Lee, MD MPH MS

Duration of Presentation in Minutes

30

Artificial Intelligence in Pediatric Emergency Medicine--A Look at Emerging
Literature

Margaret Lin-Martore, MD

Duration of Presentation in Minutes

30

(36) Proposal ID: 1914994

Unlocking Progress: The Synergy of History, Phenotyping, and Data in Necrotizing Enterocolitis Research

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Camilia Martin**

Score: **0**

Participant(s)

Camilia R. Martin, M.D., M.S. (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Weill Cornell Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

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

AAP, APS, SPR

Josef Neu, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

University of Florida

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APS, SPR

Christopher J. Stewart, PhD (he/him/his)

Position:

Chair of Human Microbiome Research

Organization:

Newcastle University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Session Description

Session Description

This session emphasizes the urgent need to advance understanding and treatment strategies for necrotizing enterocolitis (NEC), which has historically resisted significant breakthroughs. By exploring the evolution of epidemiology,

the speakers will trace historical milestones in NEC research, demonstrating how these have shaped current knowledge and laid a foundation for future directions in prevention and treatment. This section will underscore the critical role of historical insights in guiding the next steps and improving outcomes for vulnerable populations. The speakers will also address the challenges posed by the broad and ambiguous classification of NEC, which encompasses various forms of intestinal injury and dysfunction with distinct but poorly understood pathophysiologic mechanisms. This lack of specificity has hampered current research efforts to develop effective preventive and therapeutic strategies. To address this, there is a pressing need to revise the NEC paradigm by establishing a new taxonomy that allows for targeted evaluation of mechanisms within more accurately defined taxonomic clusters, particularly those that appear before clinical illness develops. Further, the speakers will discuss the transformative role of precise disease phenotyping and artificial intelligence in redefining these clusters. Integrated multiomics and systems biology approaches can help better define underlying mechanisms and generate targeted diagnostic biomarkers, prevention strategies, and novel treatments. The session will highlight the pivotal importance of extensive data networks, biobanks, and appropriate modeling in advancing precision medicine. By leveraging these resources, more accurate disease phenotyping and tailored therapies can drive significant breakthroughs in scientific understanding and patient care, overcoming longstanding challenges.

Learning Objectives

1. Participants will identify key milestones in NEC epidemiological research and explain how these have advanced current understanding while informing the next steps in translational research.
2. Participants will learn how revising the taxonomy of necrotizing enterocolitis through nuanced phenotyping and multiomics can enhance targeted diagnostics, prevention, and treatment strategies.
3. Participants will understand how extensive data networks and biobanks enhance precision medicine by enabling accurate disease phenotyping and tailored treatments through integrated systems biology.

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

Neonatologists, pediatric gastroenterologists, nutritionists, advanced practice providers in the NICU, cardiac ICU, and newborn nursery, intestinal and human milk investigators, and physician-scientists.

3. **Tracks**

Academic and Research Skills
Artificial Intelligence
Basic Science
Breastfeeding/Human Milk
Clinical Research
Gastroenterology/Hepatology
Neonatology
Pediatric Nutrition

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Minimal overlap with other Neonatology sessions, if possible.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Christopher Stewart, PhD is not a member of the listed organizations. Dr. Stewart is an award-winning and internationally known expert in systems biology in neonatology, NEC, and nutrition. He uniquely has access to extensive population data and biosample repositories and has developed models to investigate multi-omic data to answer complex questions. He is uniquely qualified to speak on this topic.

8. **Does this submission involve one or more specialties or disciplines?**

This submission encompasses the following specialties and disciplines: neonatology, gastroenterology, systems biology, and translational research.

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

Not applicable.

10. **Additional comments**

Presentation Titles and Durations

From Discovery to Insight: The Evolution of Epidemiology in Necrotizing Enterocolitis

Camilia R. Martin, M.D., M.S.

Duration of Presentation in Minutes

20

Redefining Necrotizing Enterocolitis: The Role of Phenotyping and Systems

Biology in Advancing Targeted Treatments

Josef Neu, MD

Duration of Presentation in Minutes

20

Empowering Precision Medicine: The Role of Data Networks and Biobanks in

Developing Targeted Therapies

Christopher J. Stewart, PhD

Duration of Presentation in Minutes

30

(37) Proposal ID: 1913392

Fresh Strategies for Modern Challenges in Outpatient Antibiotic Stewardship

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Rana El Feghaly**

Score: **0**

Participant(s)

Rana E. El Feghaly, MD, MSCI (she/her/hers)

Position:

Outpatient ASP Director, Professor of Pediatrics

Organization:

Children's Mercy Kansas City, UMKC

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, PIDS

Amanda Nedved, MD (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Children's Mercy Hospitals and Clinics

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Jacinda (JAM) Abdul-Mutakabbir, PharmD, MPH (she/her/hers)

Position:

Assistant Professor of Clinical Pharmacy

Organization:

University of California, San Diego School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

Not a member of any of these organizations

Holly M. Frost, MD, PhD

Position:

Associate Professor

Organization:

Intermountain Health and University of Utah

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

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

Jennifer McKinsey, MD

Position:
Clinical Associate Professor of Pediatrics

Organization:
Children's Mercy Kansas City

Role:

Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Joshua Herigon, MD, MPH, MBI (he/him/his)

Position:
Attending Physician

Organization:
Children's Mercy Kansas City

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Outpatient antibiotic stewardship programs (ASPs) have made significant gains in the judicious use of antibiotics through commitment, education, reporting and tracking. To continue to move the needle, ASP leaders should explore innovative approaches to engage families and prescribers. This session will highlight the use technology such as artificial intelligence and machine learning to enhance ASP initiatives. We will also discuss novel approaches such as formative research and implementation science that can be used to understand barriers and inform intervention development with an emphasis on health equity.

Topics will be presented by leaders from urgent care, pediatric infectious diseases, and general pediatrics. Dr. Frost is the senior medical director of research for Intermountain Health and a national leader in AS and implementation science. Dr. El Feghaly is leading an international outpatient ASP collaborative and is an expert in quality improvement. Dr Abdul-Mutakabbir is an antibiotic resistance and health equity expert. Dr Nedved leads multiple national quality improvement collaborative and is nationally recognized for her ASP expertise. Dr Herigon is a recognized ASP expert with a Master's degree in Biomedical Informatics, and special knowledge of artificial intelligence and machine learning in ASP settings.

We will provide practical tools for participants to modernize their approach to antibiotic stewardship and address important issues of equity in medicine. This session will be relevant to all those who work in emergency departments, urgent care centers, ambulatory clinics, and ambulatory health care systems.

Learning Objectives

1. Implement novel strategies to improve antibiotic use in children in outpatient settings
2. Explore the role of new technology and investigative strategies in outpatient antimicrobial stewardship
3. Promote antibiotic stewardship and equitable care across various outpatient settings

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
General pediatricians, hospitalists, emergency medicine, urgent care and infectious diseases specialists, and all those who work in emergency departments, urgent care centers, ambulatory clinics, and ambulatory health care systems
3. **Tracks**
Academic and Research Skills
Advocacy
Artificial Intelligence
Clinical Research
Community Pediatrics
Diversity, Equity, and Inclusion
EHR/Medical Informatics
Emergency Medicine
Environmental Health
Epidemiology
General Pediatrics
Health Equity/Social Determinants of Health
Health Services Research
Hospital Medicine
Infectious Diseases
Literacy
Pharmacology and Therapeutics
Quality Improvement/Patient Safety
School and Community Health
Social Media & Technology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
PIDS top abstracts
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide**

an explanation of the non-member speaker selection so that PAS staff may request approval.

8. **Does this submission involve one or more specialties or disciplines?**

Infectious diseases, general pediatrics, pharmacy, urgent care, emergency medicine, public health

9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Revolutionizing outpatient antimicrobial stewardship: Quality improvement and formative research perspectives

Rana E. El Feghaly, MD, MSCI

Duration of Presentation in Minutes

15

Sigma-level data visualization: Harnessing interactive dashboards for antibiotic stewardship

Amanda Nedved, MD

Duration of Presentation in Minutes

15

Prioritizing equity in antimicrobial stewardship efforts (EASE): A framework for clinicians

Jacinda (JAM) Abdul-Mutakabbir, PharmD, MPH

Duration of Presentation in Minutes

15

Prescription adventures: Implementing antibiotic stewardship in pediatric outpatient care

Holly M. Frost, MD, PhD

Duration of Presentation in Minutes

15

Advancing outpatient antimicrobial stewardship: Leveraging artificial intelligence and machine learning for optimal care

Joshua Herigon, MD, MPH, MBI

Duration of Presentation in Minutes

15

(38) Proposal ID: 1914810

Should Pediatric Subspecialty Fellowship be Shortened to Two-Years? A
Pro/Con Debate

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Shetal Shah**

Score: **0**

Participant(s)

Shetal Shah, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

New York Medical College

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

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

AAP, APA, SPR

Eliana Perrin, MD MPH (she/her/hers)

Position:

Bloomberg Distinguished Professor

Organization:

Johns Hopkins University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA, APS, SPR

Satyan Lakshminrusimha, MD (he/him/his)

Position:

Professor and Chair

Organization:

University of California Davis Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

AAP, APS, SPR

Camilia Martin, MD, MS (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Weill Cornell Medicine

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Co-sponsors: Pediatric Policy Council, Association of Medical School Pediatric Department Chairs, American Academy of Pediatrics Section on Neonatal-Perinatal Medicine, Society for Pediatric Research, American Board of Pediatrics.

Over the past 2 decades, the increased need for specialized pediatric services has been inadequately matched by increased availability of subspecialists, resulting in 2-5 month wait times for certain subspecialty services. To review this issue, the National Academies of Science, Engineering and Medicine (NASEM), issued a landmark 2023 report, “The Future of Pediatric

Subspecialty Physician Workforce: Meeting the Needs of Infants, Children and Adolescents,” Among its recommendations, the report called for the creation of clinically-oriented, two-year pediatric subspecialty fellowships, paralleling the two-year model pioneered by Hospital Pediatric Fellowship.

While shortening training would increase subspecialty supply and may allow for greater focus on administrative and leadership skills clinicians need in future administrative roles. Yet, reducing fellowship would sacrifice mandated time for research, long-considered an essential aspect of subspecialty training and a springboard for career researchers. Finally, there are concerns if fellows trained after 2 years are ready for independent practice.

Using a PRO/CON debate format, this session will review issues associated with shortening fellowship. Attendees will hear from diverse perspectives, including department chairs experiencing recruitment issues, physician-researchers and a co-author of the NASEM report. After a robust Question-

and-Answer session, attendees will vote on the merits of shortening fellowship training.

Learning Objectives

1. Provide insight into the pediatric subspecialty workforce shortage and its implications for access to care.
2. Understand the merits and drawbacks of various remedies for this shortage, including shortening of fellowship training.
3. Evaluate the role of research as a requirement for pediatric subspecialty training.

Scholarly Session Questions

1. **Audience Size**
75
2. **Target audience**
Medical Students, Residents, Fellows, Faculty and Administration interested in either pediatric subspecialty training or related workforce issues.
3. **Tracks**
Academic and Research Skills
Health Services Research
Medical Education
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**

Topic is fellowship education and involves all pediatric subspecialties, including medical educators.

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

Not presented, but some ideas discussed: Shah S, Myers P, Enciso JM, Davis AS, Crouch EE, Scheurer AM, Song C, Lakshminrusimha S. Should neonatal-perinatal medicine move to two-year fellowships? J Perinatol. 2024 Aug;44(8):1222-1227.

10. **Additional comments**

Presentation Titles and Durations

Introduction and CON: The Drawbacks of Shortening Fellowship: Clinical Competency and Health of the Field

Shetal Shah, MD

Duration of Presentation in Minutes

20

PRO: The Merits of Shortening Subspecialty Fellowship: Access to Care

Eliana Perrin, MD MPH

Duration of Presentation in Minutes

15

PRO: The Merits of Shortening Subspecialty Fellowship: Economics and Workforce Implications

Satyan Lakshminrusimha, MD

Duration of Presentation in Minutes

15

CON: The Drawbacks of Shortening Fellowship: The Impact on Research

Camilia Martin, MD, MS

Duration of Presentation in Minutes

15

(39) Proposal ID: 1906712

Less Bloat, More Clarity: Optimizing Clinical Notes

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Jane Im**

Score: **0**

Participant(s)

Deana Miller, MD, FAAP (she/her/hers)

Position:
Pediatric Hospitalist

Organization:
University of North Carolina Children's in Wilmington

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Brandan Kennedy, MD (he/him/his)

Position:
FAAP, Clinical Professor of Pediatrics

Organization:
Children's Mercy Hospitals and Clinics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Emily Reilly, MD, MPH

Position:

Pediatric Hospitalist

Organization:

Alaska Native Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Jane Im, MD

Position:

Assistant Professor

Organization:

Connecticut Children's Medical Center - - Hartford, CT

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race
Prefer not to respond

Gender
Prefer not to respond

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

Session Description

Session Description

With the progression of technology and expanded capabilities of the Electronic Health Record (EHR), clinicians have quick access to more clinical data than ever before. While beneficial in many ways, this has also resulted in increased cognitive load and contributes to burnout as clinicians struggle to balance time spent on documentation and face-to-face time with patients. In an attempt to ease documentation burden, many clinicians "over-automate" notes with pre-populated templates of data that could easily be found in other areas of the patient's chart. This "note bloat" from redundant information leads to longer notes and can make it difficult to find the relevant data needed for patient care. Note bloat in turn contributes to burdensome chart review, which can become a safety issue when needing to quickly respond to acute concerns or take over care of a patient.

In this session, we will discuss the problem of note bloat within progress notes and offer three areas for potential solutions, including improvements in the formatting of clinical notes, recognition of unnecessary content, and the creation of customizable automations to keep notes concise while minimizing cut and paste. The session presenters represent four different pediatric institutions that utilize two major EHR systems (Epic and Cerner) and will offer examples of changes in notes to improve readability and efficiency of documentation. Generalizable suggestions will also be explored that will be applicable to those that use other EHRs. The session will conclude with a discussion of future steps.

Learning Objectives

1. Define note bloat and identify unnecessary contributors to clinical note length
2. Describe methods to decrease extraneous data and improve readability of inpatient notes

3. Recognize strategies to implement data based processes to measure and reduce note bloat

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
All Pediatricians using EHRs
3. **Tracks**
EHR/Medical Informatics
General Pediatrics
Hospital Medicine
Wellness and Well-being
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Our group comprises pediatric hospitalists and clinical informaticists
9. **If your session was presented at another conference, please describe the conference and presentation.**
This presentation was presented at the Pediatric Hospital Medicine Conference as a Clinical Quick Hit with ~100 attendees and great feedback.
10. **Additional comments**

Presentation Titles and Durations

Note Bloat

Deana Miller, MD, FAAP
Duration of Presentation in Minutes
23

Note Content and Formatting
Brandan Kennedy, MD
Duration of Presentation in Minutes
23

Electronic Health Record Capabilities
Emily Reilly, MD, MPH
Duration of Presentation in Minutes
22

Analytics and Future Steps
Jane Im, MD
Duration of Presentation in Minutes
22

(40) Proposal ID: 1922952

Novel Anti-Inflammatory Therapies for Early Life Diseases

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Marcel Nold**

Score: **0**

Participant(s)

Steven H. Abman, MD (he/him/his)

Position:

Professor

Organization:

University of Colorado School of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

APS, SPR

Marcel F. Nold, MD

Position:

Professor

Organization:

Monash University

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Laurie C. Eldredge, MDPHd (she/her/hers)

Position:

Assistant Professor

Organization:

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

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Vineet Bhandari, MD DM (he/him/his)

Position:

Division Head of Neonatology

Organization:

The Children's Regional Hospital at Cooper

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Sylvain Chemtob, MD, PhD (he/him/his)

Position:
Professor

Organization:
Université de Montréal

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Inflammation is pivotal to the pathogenesis of many acute and chronic diseases affecting premature infants, including bronchopulmonary dysplasia (BPD), its most severe complication pulmonary hypertension secondary to BPD (BPD-PH), and cerebral white matter injury (WMI). Despite this pivotal role of inflammation, its molecular mechanisms remained poorly understood until surprisingly recently. Only in the last decade have rapid advances in omics-technologies such as single cell transcriptomics, proteomics, genomics, highly

multiplexed flow cytometry and microbiomics enabled researchers to obtain large amounts of data from minute sample sizes. These recent scientific advances have substantially advanced knowledge on the inflammatory pathogenesis of BPD, BPD-PH and WMI, thereby greatly accelerating the development of new pathophysiology-directed therapeutic approaches. By targeting mechanisms that drive disease and avoiding off-target adverse effects, these new approaches hold substantial promise to be safe and effective – and superior to conventional untargeted drugs such as glucocorticoids.

In this session, participants will learn about recent advances in knowledge on the inflammatory pathogenesis of early life diseases such as BPD, BPD-PH and WMI, achieved by research that spans the entire bedside-to-bench-and-back journey. Presenters will share their experiences – including rewards and challenges – with using traditional as well as cutting-edge technologies as part of this journey, and the strategies they employ to turn a great idea into a novel therapy. Participants will also learn about current frontiers in the translation of anti-inflammatory therapeutic innovation, ranging from the development of new drugs to first-in-population clinical trials.

Learning Objectives

1. ...understand the inflammatory pathogenesis of diseases affecting preterm infants such as BPD, BPD-PH and WMI.
2. ...appreciate the challenges and rewards of the bedside-to-bench-and-back journey from idea to therapy.
3. ...evaluate novel therapeutic approaches for early life diseases based on their mechanisms of action.

Scholarly Session Questions

1. Audience Size

75

2. Target audience

Clinicians (including medical, nursing and allied health) and scientists in the fields of neonatology, paediatric pulmonology, cardiology and neurology

3. Tracks

Academic and Research Skills

Basic Science

Cardiology

Clinical Research

Critical Care

Neonatology
Neurology
Pulmonology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Professor Marcel Nold is not a member of the PAS organizations. However, together with Professor Steve Abman, he is submitter and session Chair, and brings unique expertise and achievements in the fields of interventional immunology and advancing innovative therapies towards use in infants that are essential to this session.
All other speaker are members of at least one PAS organization.
8. **Does this submission involve one or more specialties or disciplines?**
Topic is early life inflammatory diseases, involving neonatology and paediatric pulmonology, cardiology and neurology
9. **If your session was presented at another conference, please describe the conference and presentation.**
Not applicable
10. **Additional comments**
Every speaker will have a 17-min talk and participate in the 15-min panel discussion at the end.

Presentation Titles and Durations

Introduction

Steven H. Abman, MD

Duration of Presentation in Minutes

5

Targeting Interleukin 1 to Ameliorate Early Life Inflammatory Disease - From Idea to Treatment

Marcel F. Nold, MD

Duration of Presentation in Minutes

32

Lung Development and Immunoregulation: Multiple Roles for the IL-33/Amphiregulin Axis in BPD Pathogenesis

Laurie C. Eldredge, MDPHD

Duration of Presentation in Minutes

17

Immunomodulatory Therapies for BPD □ Moving Beyond Steroids

Vineet Bhandari, MD DM

Duration of Presentation in Minutes

20

Breakthrough Therapeutic Solution to Prevent Preterm Birth

Sylvain Chemtob, MD, PhD

Duration of Presentation in Minutes

17

(41) Proposal ID: 1932920

Pediatric Policy Council Legislative Breakfast: Giving Children a Voice in the Political Process

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Matthew Mariani**

Score: **0**

Participant(s)

Matt Mariani (he/him/his)

Position:

Director, Federal Advocacy

Organization:

American Academy of Pediatrics

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

David Keller, MD (he/him/his)

Position:

Professor of Pediatrics and Vice Chair of Clinical Strategy and Transformation

Organization:

University of Colorado School of Medicine

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APA, APS

Mark Del monte, JD

Position:

CEO/Executive Vice President

Organization:

American Academy of Pediatrics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Session Description

Session Description

Advocates for children face unique challenges giving voice to the needs of a population that is excluded entirely from the political process that determines critical issues impacting their lives. Join the Pediatric Policy Council to hear

from a child health policymaker to learn more about how to most effectively give voice to the needs of young people and ensure they have a seat at the table. Mark Del Monte, JD, chief executive officer and executive vice president of the American Academy of Pediatrics, and David Keller, MD, chair of the Pediatric Policy Council will help facilitate a discussion regarding learning opportunities for child health advocates.

Learning Objectives

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

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Academic pediatricians with an interest in public policy advocacy.
3. **Tracks**
Advocacy
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
The PPC Legislative Breakfast invites a nonacademic voice from the policymaker community to share their unique insights about the intersection of child health advocacy and public policy. While the

speaker has not yet been finalized, they are not likely to be a member of any of the PAS societies.

8. **Does this submission involve one or more specialties or disciplines?**
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Opening Remarks

Mark Del monte, JD

Duration of Presentation in Minutes

10

(42) Proposal ID: 1920768

Clinical, ethical, and social considerations for children with Trisomy 13 and 18: intensive care interventions, cardiac surgery, and tracheostomy

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Benjamin Wilfond**

Score: **0**

Participant(s)

Jacqueline Vidosh, MD (she/her/hers)

Position:

Assistant Professoer

Organization:

San Antonio Uniformed Services Health Education Consortium

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

John Carey, MD, MPH (he/him/his)

Position:

Professor Emeritus

Organization:

University of Utah School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

APS, SPR

Benjamin S. Wilfond, MD (he/him/his)

Position:

Professor

Organization:

University of Washington School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APS

Mark R. Mercurio, MD,MA

Position:

Professor of Pediatrics

Organization:

Yale School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Stephanie Meredith, MA, DrPH

Position:
LEND Family Faculty

Organization:
University of Kentucky

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Social attitudes and medical care for infants and children with disabilities have changed profoundly in the last 50 years. For example, decisions to forego life extending surgeries such as gastrointestinal and cardiac repairs in children with trisomy 21 in the 1970s and 1980s have given way to the routine performance of surgery. However, social and medical attitudes towards children with more significant developmental disabilities and medical complexity, such as those with trisomy 18, are still controversial. The clinical standard wherein cardiac

surgery, tracheostomy, and critical care interventions were rarely offered to children with trisomy 13 and 18 is now quite variable, with some centers offering interventions but others not. This raises questions for parents, clinicians, and institutions about which interventions, and in which clinical contexts, should be made available to these children. There are ethical arguments for and against making these interventions available. This panel will explore the changing epidemiological data, recent professional guidelines, ethical and organizational considerations, and parental and disability perspectives relevant to clinical decisions that pediatricians, neonatologists, pediatric critical care clinicians, palliative care clinicians, cardiologists, and pulmonologists face.

Learning Objectives

1. Appreciate the societal factors that influence the experience of families with trisomy 13 and 18 in the NICU, PICU and at home
2. Understand the changes in clinical outcomes of children with trisomy 13 and 18 and the evolution of ethical arguments for and against these interventions
3. Consider the impact of professional society recommendations and institutional policies for medical and surgical interventions on the experience of clinicians and families

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Neonatologists, PICU, Genetics, Developmental Pediatricians, Hospitalists, pulmonologists, cardiologists, bioethicists, palliative care
3. **Tracks**
Cardiology
Clinical Bioethics
Critical Care
Genomics/Epigenomics
Hospital Medicine
Neonatology
Palliative Care
Pulmonology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

no

6. Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?

No

7. If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.

our first and last speakers are not pediatricians. The first speaker is a parent and an obstetrician and the final speaker is disability and health communications scholar

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

this will be relevant to cardiology, pulmonary, complex care, hospital medicine, genetics, developmental pediatrics, critical care, neonatology, and palliative care

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

10. Additional comments

Presentation Titles and Durations

Using shared decision making to guide treatment for children with trisomy 18: A parental perspective

Jacqueline Vidosh, MD

Duration of Presentation in Minutes

13

The changing data about survival outcome related to intensive interventions in children with trisomy 13 and 18

John Carey, MD, MPH

Duration of Presentation in Minutes

13

The 2024 AATS guidelines: Implications for cardiac surgery in infants with trisomies who require advanced respiratory support

Benjamin S. Wilfond, MD

Duration of Presentation in Minutes

13

Ethical and organizational considerations for navigating disagreements regarding interventions in children with trisomies

Mark R. Mercurio, MD, MA

Duration of Presentation in Minutes

13

The impact of health system barriers and bias on health disparities: A disability perspective

Stephanie Meredith, MA, DrPH

Duration of Presentation in Minutes

13

(43) Proposal ID: 1925760

Debate and Pro/Con Discussion: Controversies in Neonatal and Pediatric Infectious Diseases Practice

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Mark Schleiss**

Score: **0**

Participant(s)

Mark R. Schleiss, MD (he/him/his)

Position:

American Legion and Auxiliary Heart Research Foundation Professor

Organization:

UMN Medical School

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

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

AAP, APS, SPR, PIDS

Erin Osterholm, MD

Position:

Associate Professor of Pediatrics

Organization:

University of Minnesota Masonic Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Soren Gantt, MD, PhD, MPH

Position:

Professor of Microbiology and Pediatrics

Organization:

University of Montreal

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

PIDS

Sarah M. Heston, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Duke University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Nicholas Hysmith, MD,MS,MBA (he/him/his)

Position:
Associate Professor

Organization:
Le Bonheur Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Flor M. Munoz, MD (she/her/hers)

Position:
Associate Professor

Organization:
Baylor College of Medicine

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Octavio Ramilo, MD (he/him/his)

Position:
Chair, and Member, Department of Infectious Diseases

Organization:
St. Jude Children's Research Hospital

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Male

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

Pablo J. Sanchez, MD

Position:
Professor of Pediatrics

Organization:
Nationwide Children's Hospital, The Ohio State University College of
Medicine

Role:

Speaker;Chair

Ethnicity
Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

There is uncertainty about many current neonatal infectious diseases issues. In this pro-con session, three topics will be debated. The first controversial topic to be reviewed is how universal congenital cytomegalovirus (cCMV) screening should be implemented. Three states in the USA, and two provinces in Canada, are initiating or have initiated universal cCMV screening, despite questions about cost-effectiveness and approaches to diagnostic evaluation, parental counseling, and risks of over-treatment of asymptomatic/clinical inapparent infections. Additionally, there is debate about whether all infants admitted to the NICU should be screened for cCMV. Drs. Osterholm and Gantt (from the USA and Canada, respectively) will debate the pros and cons of these screening strategies. Secondly, the issue of management of bacteremia in the NICU and PICU setting will be debated by Drs. Heston and Hysmith. Shorter course of antibiotics for early-onset sepsis are associated with fewer days of antibiotic exposure, a shorter hospitalization, and a lower rate of antibiotic re-initiation. Traditionalists continue to use longer courses to ensure efficacy. Can shorter courses of antibiotics be employed? In addition to less antimicrobial resistance and avoidance of toxicities, would shorter courses of therapy preserve a salutary infant microbiome? Finally, new inventions are available (maternal immunization and nirsevimab) that have changed the landscape of RSV disease in infants, but currently only 18% of pregnant people receive RSV vaccine in the USA. Which invention should be the approach of choice - both from clinical and public health perspective? This will be debated by Drs. Flor Munoz-Rivas and Ramilo.

Learning Objectives

1. Upon completion, participants will be able to discuss the pros/cons of universal cCMV screening and the rationale for screening all NICU admissions for cCMV.
2. Upon completion, participants will be able to weigh the pros/cons of adopting a short-course parenteral antibiotic strategy for treating bacteremia in neonates and older children.

3. Upon completion, participants opine on which strategy - RSV vaccination of pregnant persons or nirsevimab administration - is preferable for RSV disease prevention in infants.

Scholarly Session Questions

1. **Audience Size**
300
2. **Target audience**
Neonatologists; hospitalists; primary care pediatricians; infectious diseases physicians; public policy experts; epidemiologists
3. **Tracks**
Breastfeeding/Human Milk
Epidemiology
General Pediatrics
Hospital Medicine
Infectious Diseases
Neonatology
Public Health
Well Newborn
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Request that this not be scheduled in conflict with PIDS programming or the SPR/APS plenary sessions.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A.
8. **Does this submission involve one or more specialties or disciplines?**
Topic is neonatal ID controversies involving neonatologists, hospitalists, primary care pediatricians, infectious diseases physicians, anssd public health experts/epidemiologists.

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

N/A.

10. **Additional comments**

We will have each debate planned for ~20 minutes (ten minutes per speaker) followed by a 3 minute "consensus" at the end of each debate where one of the 2 speakers gives a summary of what they both agree on.

This will take approximately 70 minutes. With the five-minute introduction this will allow 15 minutes for open Q and A from the audience, audience response voting, and a final summation from Dr. Sanchez. Recognizing that the speakers may need a couple of minutes as we move from session to session, we may not have a full 15 minutes for discussion but we intend to leave plenty of time for robust audience discussion!

Free registration is available for up to 6 speakers in a pro-con debate session, or a speaker who is scheduled for a 30 minute talk otherwise. So for our 8 person debate session only 6 speakers can get free registration. We are aware of this, and the moderators (Drs. Schleiss and Sanchez) will forgo the free registration; it should go to the speakers, if the proposal is accepted.

Presentation Titles and Durations

Current ID Controversies: Introduction and Overview

Mark R. Schleiss, MD

Duration of Presentation in Minutes

5

Universal Screening for Congenital CMV Should be Adopted - both for NICU Admissions and as Standard Practice for All Newborns

Erin Osterholm, MD

Duration of Presentation in Minutes

10

Is Universal Congenital CMV Screening the "New Normal"? Data Deficits Dictate Caution in Adopting this as Standard Practice

Soren Gantt, MD, PhD, MPH

Duration of Presentation in Minutes

10

Short Course Antibiotic Therapy for Pediatric Bacteremia Confers Many Benefits for Babies: A New Standard of Care is Emerging

Sarah M. Heston, MD

Duration of Presentation in Minutes

10

Short Course Antibiotic Treatment of Pediatric Bacteremia: Tempering the

Allure of this Approach with a Recognition of Risks

Nicholas Hysmith, MD,MS,MBA

Duration of Presentation in Minutes

10

Maternal Vaccination is the Preferred Approach to RSV Disease Prevention:

Improving Perception of Benefit in Pregnant Persons

Flor M. Munoz, MD

Duration of Presentation in Minutes

10

Nirsevimab is a Better Approach to Protect Infants against RSV Disease than

Maternal Vaccination: Enhancing Implementation

Octavio Ramilo, MD

Duration of Presentation in Minutes

10

The Audience Weighs In! A Summary of the Debate and Results of an

Audience Response Vote about these ID Controversies

Pablo J. Sanchez, MD

Duration of Presentation in Minutes

15

(44) Proposal ID: 1902144

Vulnerability and Resilience to Early-life Adversity: Societal, Individual and Mechanistic Lenses.

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Tallie Z. Baram**

Score: **0**

Participant(s)

Coleen Cunningham, MD (she/her/hers)

Position:

Professor and Chair of Pediatrics

Organization:

University of California, Irvine, School of Medicine

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APS, SPR, PIDS

Julianne McCall, MS, PhD (she/her/hers)

Position:

Chief Executive Officer

Organization:

California Council on Science & Technology

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Catherine Monk, PhD (she/her/hers)

Position:

Diana Vagelos Professor of Women's Mental Health

Organization:

Columbia University Vagelos College of Physicians and Surgeons

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Tallie Z. Baram

Position:

Professor, Pediatrics, Neurology, Anatomy/Neurobiology

Organization:

University of California-Irvine

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Female

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

Session Description

Session Description

Over 50% of the world's children experience significant sustained stress. Indeed, early-life adversity (ELA), including resource scarcity and food insecurity, neglect, uprooting, and abuse, is associated with physical, emotional and cognitive problems in children that endure to adulthood. Thus, the costs of ELA in the loss of human potential and societal burden are incalculable, yet there are major gaps in our understanding of the full impact of ELA, the mechanisms by which it impacts the developing child, and the strategies to prevent and mitigate its adverse consequences .

This trans-disciplinary session brings together authoritative experts to tackle these challenges. Dr McCall, who has led the California Governor's effort to address ELA via precision medicine will discuss evolving strategies to address ELA at the societal and policy levels. Dr Monk, a leading expert on maternal health and prenatal risk-factors, will highlight the major impact of prenatal exposure to maternal-derived adversity on children's outcomes. Finally Dr Baram, an internationally recognized leader in the biological bases of ELA and its consequences, will describe coordinate studies in children and in experimental animals demonstrating causal links between ELA and childhood outcomes, identifying an under-recognized universal ELA type, and uncovering novel, sex-dependent mechanisms by which ELA disrupts brain maturation. Together, the talks will provide orthogonal, complementary views of the state-of the art of one of Pediatrics' major challenges, and propose prevention and intervention approaches to minimize its impact on the world's children.

Learning Objectives

1. Appreciate the enormous importance and impact of early-life adversity
2. Recognize the numerous societal and environmental factors contributing to the burden of early-life adversity

3. Appreciate the crucial important of the prenatal environment on children's well-being

Scholarly Session Questions

1. **Audience Size**
800
2. **Target audience**
Everyone. The session's topic is timely and increasingly urgent. We provide perspectives that enrich Pediatricians and investigators' knowledge and grasp of a global threat. We appeal to neonatologists, child neurologists, those with interest in public health, advocacy and policy. We also address basic mechanisms using cutting-edge technologies, resonating with the research-focused conference participants
3. **Tracks**
Advocacy
Basic Science
Clinical Research
Health Equity/Social Determinants of Health
Mental Health
Neonatology
Neurology
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Monday, April 28
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
none known at the moment
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
The goal of the session is to bring an integrated set of views from beyond Pediatrics to tackle a major world challenge that impacts the essence and practice of Pediatrics. Thus, one speaker is a policy, advocacy and public health expert, a second is a maternal health /

pregnancy / prenatal life leader, and a third is a child neurologist and developmental neuroscientist (a member of CNS) who conducts (and transcends) both basic and clinical research. The speakers have unique knowledge and expertise, not common in PAS societies

8. **Does this submission involve one or more specialties or disciplines?**

Yes. The submission involves numerous disciplines: policy, advocacy, public health expert, maternal health, OB/GYN-pregnancy, prenatal life-neonatology, neurodevelopment, neuroscience, psychiatry, psychology, child neurology, emotional and cognitive health

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

this is a brand new session

10. **Additional comments**

We appreciate, and resonate with, PAS aim to highlight work from members of constituent societies.

Yet, we feel that the 'outside' speakers of this session will enrich PAS 2025.he

Presentation Titles and Durations

The evolving, escalating societal aspects of early-life adversity: a roadmap to resilience?

Julianne McCall, MS, PhD

Duration of Presentation in Minutes

30

The contribution of Prenatal life to childhood adversity: an emerging, tractable target:.

Catherine Monk, PhD

Duration of Presentation in Minutes

30

New mechanisms by which early-life adversity impacts cognitive and mental health: from the clinic to the lab-and back

Tallie Z. Baram

Duration of Presentation in Minutes

30

(45) Proposal ID: 1929642

Rescue inhaled nitric oxide use in preterm infants: can we agree on indications?

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Faith Zhu**

Score: **0**

Participant(s)

Faith Zhu, MBChB (she/her/hers)

Position:

Assistant Professor

Organization:

University of Toronto Temerty Faculty of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

SPR

Amish Jain, MBBS, MRCPCH, PhD (he/him/his)

Position:

Professor in Pediatrics

Organization:

University of Toronto Temerty Faculty of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

SPR

Satyan Lakshminrusimha, MD (he/him/his)

Position:

Professor and Chair

Organization:

University of California Davis Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

AAP, APS, SPR

Steven H. Abman, MD (he/him/his)

Position:

Professor

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Dany Weisz, MD, MSc

Position:
Associate Professor of Pediatrics

Organization:
University of Toronto Temerty Faculty of Medicine

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Prefer not to respond

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

Patrick J. McNamara, MB, BCH, BAO, DCH, MSc (Paeds), MRCP, MRCPCH, FASE (he/him/his)

Position:
Professor of Pediatrics & Internal Medicine

Organization:
University of Iowa Stead Family Children's Hospital

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Optimal evidence-based management of severe hypoxic respiratory failure (HRF) and pulmonary hypertension (PH) refractory to invasive mechanical ventilation and supportive care in premature infants remains a major challenge for neonatal intensivists. Conflicting expert consensus practice guidelines and cost-benefit considerations has led to vast controversy and variability in practice in the use of rescue inhaled nitric oxide (iNO) for this population. However, epidemiological network-level data indicates an increasing use of rescue iNO in the care of premature neonates in neonatal intensive care units (NICUs), with exposure rates inversely related to gestational age at birth. Over the last few years, several retrospective single-center studies and prospective registry-based studies have described the outcomes of premature neonates treated with rescue iNO for acute PH. Whether these data can inform a more uniform evidence-based practice for tertiary care neonatologists remains debatable. Targeted at neonatologists, paediatricians and intensivists, this session will include debates to address the current controversies and attempt to generate consensus in the end. This session will feature both established experts and rising early-career investigators in the field of neonatal pulmonary hypertension and hemodynamics.

Learning Objectives

1. Appraise the physiological considerations and current evidence for or against the use of rescue inhaled nitric oxide in preterm infants with refractory hypoxic respiratory failure
2. Debate and summarize if iNO has any role in management of preterm infants suffering from early-onset acute PH/HRF vs. late-onset acute PH/HRF vs. chronic PH/HRF
3. Understand the potential risks and benefits of using iNO in preterm infants

Scholarly Session Questions

-
1. **Audience Size**
150
 2. **Target audience**
Neonatologists
Paediatricians
Intensive care physicians
 3. **Tracks**
Cardiology
Critical Care
Neonatology
Pulmonology
 4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Saturday, April 26
 5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Haemodynamics club
Other scholarly events are being submitted which will involve all of these speakers
 6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
 7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
 8. **Does this submission involve one or more specialties or disciplines?**
Topic is pulmonary hypertension, involving Neonatology, Pulmonology, Cardiology and Critical Care
 9. **If your session was presented at another conference, please describe the conference and presentation.**
 10. **Additional comments**

Presentation Titles and Durations

Introduction

Faith Zhu, MBChB

Duration of Presentation in Minutes

10

Rescue inhaled nitric oxide in preterm infants with acute PH and HRF: should we still be discussing? (PRO)

Amish Jain, MBBS, MRCPCH, PhD

Duration of Presentation in Minutes

15

Rescue inhaled nitric oxide in preterm infants with acute PH and HRF: should we still be discussing? (CON)

Satyan Lakshminrusimha, MD

Duration of Presentation in Minutes

15

Rescue inhaled nitric oxide in preterm infants with chronic PH and HRF: can it help? (PRO)

Steven H. Abman, MD

Duration of Presentation in Minutes

15

Rescue inhaled nitric oxide in preterm infants with chronic PH and HRF: can it help? (CON)

Dany Weisz, MD, MSc

Duration of Presentation in Minutes

15

Closing Remarks and Q&A

Patrick J. McNamara, MB, BCH, BAO, DCH, MSc (Paeds), MRCP, MRCPCH, FASE

Duration of Presentation in Minutes

20

(46) Proposal ID: 1932223

Innovative clinical frontiers in Necrotizing Enterocolitis

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Bonny Jasani**

Score: **0**

Participant(s)

Bonny Jasani, MBBS, MD, DM (he/him/his)

Position:

Staff Neonatologist and Assistant Professor of Pediatrics

Organization:

The Hospital for Sick Children

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

Not a member of any of these organizations

**Sanjay K. Patole, MD, DCH, FRACP, FAIM, MLdshp, MSc, DrPH
(he/him/his)**

Position:

Clinical Professor

Organization:

KEM Hospital For Women, Perth

Role:

Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

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

Not a member of any of these organizations

Alan Daneman, MBBCh BSc FRACR FRCP(C) (he/him/his)

Position:

Professor

Organization:

University of Toronto

Role:

Speaker

Ethnicity

Prefer not to respond

Race

White

Gender

Male

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

Not a member of any of these organizations

Agostino Pierro, OBE, MD, FRCS (Engl), FRCS(Ed), FAAP (he/him/his)

Position:

Professor of Surgery

Organization:

The Hospital for Sick Children

Role:

Speaker;Chair

Ethnicity
Hispanic or Latino

Race
White

Gender
Male

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

Jordan Mann, RD (he/him/his)

Position:
Registered Dietitian

Organization:
The Hospital for Sick Children

Role:

Speaker

Ethnicity
Prefer not to respond

Race
White

Gender
Male

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

Session Description

Session Description

Necrotizing enterocolitis (NEC≥ Stage II) continues to carry significant health and socioeconomic burden especially in extremely preterm infants born before 28 weeks of gestation who need surgery for the illness. Presented by experts with proven track record in the field, this session will cover the current and

emerging evidence in the field of prevention and management of NEC in preterm infants

Learning Objectives

1. Appraise current evidence about probiotics, prebiotics, synbiotics, post-biotics, next generation probiotics and “no biotics” for preterm infants.
2. To describe the recent advances in imaging for diagnosis and monitoring of necrotizing enterocolitis.
3. Summarize the latest evidence for surgical management of NEC in preterm infants with emphasis on emerging novel therapies and nutritional management of post surgical NEC.

Scholarly Session Questions

1. **Audience Size**
250
2. **Target audience**
neonatologists, registered dietitians, pediatric surgeons, neonatal/perinatal fellows, neonatal nurse practitioners, pediatric residents
3. **Tracks**
Gastroenterology/Hepatology
Neonatology
Pediatric Nutrition
Pharmacology and Therapeutics
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr Patole, Dr Pierro, Dr Jasani and Jordan Mann are established experts in the field of necrotizing enterocolitis. Dr Jasani is an early career researcher who will be an SPR member in due course

8. **Does this submission involve one or more specialties or disciplines?**

Nutrition, Pediatric surgery, Neonatology, Clinical Pharmacology, Gastroenterology

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

N/A

10. **Additional comments**

N/A

Presentation Titles and Durations

What's new in Necrotizing Enterocolitis in 2025: Lessons learned from recent evidence

Bonny Jasani, MBBS, MD, DM

Duration of Presentation in Minutes

10

Biotics in Necrotizing Enterocolitis: What's on the horizon?

Sanjay K. Patole, MD, DCH, FRACP, FAIM, MLdshp, MSc, DrPH

Duration of Presentation in Minutes

20

Progress in imaging for necrotizing enterocolitis

Alan Daneman, MBBCh BSc FRACR FRCP(C)

Duration of Presentation in Minutes

15

Advances in surgical management of Necrotizing Enterocolitis: Have we reached a consensus?

Agostino Pierro, OBE, MD, FRCS (Engl), FRCS(Ed), FAAP

Duration of Presentation in Minutes

20

Optimizing nutrition after surgery for NEC: Unlocking the secret recipe

Jordan Mann, RD

Duration of Presentation in Minutes

10

(47) Proposal ID: 1917549

Advancing Precision Medicine by Measuring ACEs, Toxic Stress, and Intervention Efficacy with Policy Implications

Session Type: **Basic-Translational-Clinical Roundtable**

Proposal Status: **Complete / Locked**

Submitter: **David Reiner**

Score: **0**

Participant(s)

David Reiner, PhD (he/him/his)

Position:
Science Officer

Organization:
California Health and Human Services

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Laura M. Glynn, PhD (she/her/hers)

Position:
Professor of Psychology

Organization:
Chapman University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Pat Levitt, PhD

Position:

Simms Mann Professor of Developmental Neurogenetics

Organization:

Children's Hospital Los Angeles and University of Southern California

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Ariane Marie-Mitchell, MD, PhD, MPH (she/her/hers)

Position:

Associate Professor, Medical Director for Health Care Equity

Organization:

Loma Linda University Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Sayantani B. Sindher, MD (she/her/hers)

Position:
Clinical Associate Professor

Organization:
Stanford University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Rachel Gilgoff, MD, FAAP (she/her/hers)

Position:
Adjunct Clinical Associate Professor

Organization:
Rachel Gilgoff

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

George M. Slavich, PhD (he/him/his)

Position:
Professor of Psychiatry and Biobehavioral Sciences

Organization:
UCLA

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Prefer not to respond

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

Session Description

Session Description

This session will feature a state research program that addresses the health impacts of adverse childhood experiences (ACEs) with a precision medicine framework. Speakers will present data at the intersection of ACEs, toxic stress, biomarkers, and implementation science and describe policy implications. Dr. Reiner will describe a state-based model for research funding to advance precision medicine and applications to understanding the health impacts of ACEs. Dr. Glynn will share findings from 33,000 children screened for both ACEs and an understudied aspect of ACEs, unpredictability in the household and family environment, which suggests screening for unpredictability will

augment outcome prediction beyond existing recommendations in pediatric primary care. Dr. Levitt will describe two highly scalable biological measures of ACEs to improve early detection of toxic stress and resilience: mitochondria DNA and RNA and child novelty-induced heart rate variability. Dr. Marie-Mitchell will describe a pediatric intervention designed to address and reduce stress for children impacted by ACEs and share preliminary data on biomarkers associated with Child-ACEs. Drs. Sinder and Gilgoff will describe a systems-based approach for biomarkers on stress and trauma in adults impacted by ACEs and share how this approach can advance the development of comprehensive assessment tools and individualized interventions for Social Drivers of Health and toxic stress. Dr. Slavich will present data on the efficacy of a precision intervention for stress and resilience to reduce toxic stress in adults with elevated perceived stress levels impacted by ACEs, as well as how ACEs influence multisystem biological functioning.

Learning Objectives

1. Describe different approaches to measuring risk for toxic stress (e.g. ACEs, unpredictability, biomarkers).
2. Identify characteristics of potential clinical interventions to reduce toxic stress.
3. Discuss data-informed policy implications.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
General and Developmental Behavioral Pediatricians; Child Psychologists and Psychiatrists
3. **Tracks**
Child Abuse & Neglect
Developmental and Behavioral Pediatrics
Developmental Biology
Health Equity/Social Determinants of Health
Health Services Research
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

No conflicts

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr. Marie-Mitchell is an APA member and Dr. Gilgoff is an AAP and SPR member and recommended this presentation for PAS. They, as well as all of the other proposed speakers for this session, are PIs on grants funded by the state of California to advance precision medicine and under the administrative direction of David Reiner.

8. **Does this submission involve one or more specialties or disciplines?**

Yes, the submission involves general pediatrics as well as child abuse pediatrics, developmental pediatrics, mental and behavioral health, health equity, community-based participatory research, and implementation science.

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

Not presented at another conference.

10. **Additional comments**

None

Presentation Titles and Durations

A state-based precision medicine research approach to address the health impacts of ACEs

David Reiner, PhD

Duration of Presentation in Minutes

5

Unpredictability: A novel adverse childhood experience

Laura M. Glynn, PhD

Duration of Presentation in Minutes

15

Family first study: Scalable measures of toxic stress for clinical deployment

Pat Levitt, PhD

Duration of Presentation in Minutes

15

Building resilient families through pediatric practice
Ariane Marie-Mitchell, MD, PhD, MPH

Duration of Presentation in Minutes

15

A multidisciplinary systems approach to biomarkers and precision medicine:
study methodology and preliminary results

Sayantani B. Sindher, MD

Duration of Presentation in Minutes

7

A multidisciplinary systems approach to biomarkers and precision medicine:
stress biology & precision medicine

Rachel Gilgoff, MD, FAAP

Duration of Presentation in Minutes

8

A precision intervention for reducing stress and enhancing resilience

George M. Slavich, PhD

Duration of Presentation in Minutes

15

(48) Proposal ID: 1930166

The changing landscape of respiratory infections in the era of RSV prevention

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Asuncion Mejias**

Score: **0**

Participant(s)

Asuncion Mejias, MD, PhD, MsCS (she/her/hers)

Position:

Professor of Pediatrics

Organization:

St Jude Children's Research Hospital; The University of Tennessee
Health Science Center

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

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

APS, SPR, PIDS

Pablo J. Sanchez, MD

Position:

Professor of Pediatrics

Organization:

Nationwide Children's Hospital, The Ohio State University College of
Medicine

Role:

Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

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

AAP, APS, SPR, PIDS

Octavio Ramilo, MD (he/him/his)

Position:

Chair, and Member, Department of Infectious Diseases

Organization:

St. Jude Children's Research Hospital

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

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

APS, SPR, PIDS

Flor M. Munoz, MD (she/her/hers)

Position:

Associate Professor

Organization:

Baylor College of Medicine

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

The goal of this symposium is to provide an update of the landscape of respiratory infections in the era of RSV prevention and through passive and active immunization strategies beyond nirsevimab. It will also provide an overview of immune mechanisms underpinning the response to these interventions, and the far-reaching consequences of RSV prevention including modifications in viral-bacterial interactions, viral replacement and long-term wheezing.

Learning Objectives

1. Identify the different strategies and risks for RSV prevention according to age
2. Recognize the acute and long-term ecological and clinical implications of RSV prevention in infants
3. Define the immune mechanisms of protection against RSV and the importance of age

Scholarly Session Questions

1. **Audience Size**

150

2. **Target audience**

The symposium is designed for a diverse group of physicians and researchers with different backgrounds including General Pediatricians, specialists in Infectious Diseases, Hospital Medicine, Emergency

Medicine, Intensive Care and Pulmonology; as well as experts in Immunology, Vaccinology, and Clinical Microbiology.

3. **Tracks**
Allergy, Immunology and Rheumatology
Community Pediatrics
Epidemiology
General Pediatrics
Global Neonatal & Children's Health
Immunizations/Delivery
Infectious Diseases
Pulmonology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Other ID related sessions
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes, Infectious Diseases, neonatology, general pediatrics
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Expecting the unexpected: Far-reaching consequences of RSV prevention

Asuncion Mejias, MD, PhD, MsCS

Duration of Presentation in Minutes

20

RSV and the Immune System: An unhappy relationship

Octavio Ramilo, MD

Duration of Presentation in Minutes

20

Active and Passive Preventive Strategies for in Children of Different Age
Groups and Risks

Flor M. Munoz, MD

Duration of Presentation in Minutes

20

(49) Proposal ID: 1915789

Managing complex cases in nephrotic syndrome: Understanding the International Pediatric Nephrology Association (IPNA) clinical practice guidelines

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Katherine Dell**

Score: **0**

Participant(s)

Katherine M. Dell, MD (she/her/hers)

Position:

Professor of Pediatrics and Director of Clinical and Translational Research

Organization:

Cleveland Clinic Children's

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

Black or African American, White

Gender

Female

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

AAP, APS, SPR, ASPN

Kelly Garrity, MD (she/her/hers)

Position:

Assistant Professor of Pediatric Nephrology

Organization:
Medical University of South Carolina

Role:

Chair

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Female

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

Zubin Modi, MD, MS (he/him/his)

Position:
Assistant Professor

Organization:
University of Michigan Medical School

Role:

Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Susan M. Samuel, MD MSc FRCPC (she/her/hers)

Position:
Professor

Organization:
University of British Columbia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

Not a member of any of these organizations

Gabriel Cara Fuentes, MD, PhD (he/him/his)

Position:

Assistant Professor

Organization:

Nationwide Children's Hospital

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

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

SPR, ASPN

Marina Vivarelli, MD (she/her/hers)

Position:

Chief, Laboratory of Nephrology and Clinical Trials Center

Organization:

Bambino Gesù Children's Hospital, Rome ITALY

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

This session will explore the spectrum of challenging nephrotic syndrome (NS) cases to highlight International Pediatric Nephrology Association (IPNA) clinical practice guidelines with respect to steroid-dependent nephrotic syndrome (SDNS) and steroid-resistant nephrotic syndrome (SRNS). The session will provide an overview and epidemiology of childhood NS. Complex, difficult-to-manage SSNS and SRNS cases will be presented. Experts will discuss potential diagnostic and management approaches to these cases in the framework of recent IPNA guidelines and will highlight the relevant literature that anchored their medical decision making.

Learning Objectives

1. Describe the epidemiology of steroid sensitive and steroid resistant nephrotic syndrome
2. Learn management approaches to a challenging case of SDNS with respect to current IPNA clinical practice guidelines and published literature
3. Learn management approaches to a challenging case of SRNS with respect to current IPNA clinical practice guidelines and published literature

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Pediatric nephrology faculty and fellows, Pediatric Residents and Medical Students

3. **Tracks**

Children with Chronic Conditions
General Pediatrics
Nephrology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Marina Vivarelli has another session and would prefer this session to be Friday, April 25 or Saturday, April 26.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Marina Vivarelli is European Society of Pediatric Nephrology (ESPN) Speaker and will be supported by an existing arrangement of the ASPN with the ESPN. Susan Samuel is a pediatric nephrologist and was notified in the invitation (which she accepted) that the ASPN is not able to provide registration /travel support to peds nephrologists who are not ASPN (or AAP, etc) members

8. **Does this submission involve one or more specialties or disciplines?**

Nephrology

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

Not applicable

10. **Additional comments**

Marina Vivarelli has another session and would prefer this session to be Friday, April 25 or Saturday, April 26.

Presentation Titles and Durations

Overview and epidemiology of steroid-sensitive and steroid-resistant nephrotic syndrome

Susan M. Samuel, MD MSc FRCP

Duration of Presentation in Minutes

30

Steroid-dependent nephrotic syndrome: Challenging cases

Gabriel Cara Fuentes, MD, PhD

Duration of Presentation in Minutes

30

Steroid-resistant nephrotic syndrome: What are my options?

Marina Vivarelli, MD

Duration of Presentation in Minutes

30

(50) Proposal ID: 1917895

Adolescent Health and Well-being: Update on Efforts to Reach Global Goals

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Risa Turetsky**

Score: **0**

Participant(s)

Carol A. Ford, MD (she/her/hers)

Position:

Professor of Pediatrics, Adolescent Medicine Division, Editor-in-Chief
Journal of Adolescent Health

Organization:

Childrens Hospital of Philadelphia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

APS

Anshu Mohan, Ba, MBA, MPH (she/her/hers)

Position:

Senior Strategic Advisor

Organization:

PMNCH/World Health Organisation

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

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

Not a member of any of these organizations

Sophie Arseneault (she/her/hers)

Position:

Vice-Chair, E&A WG

Organization:

PMNCH

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Susan M. Sawyer, AM, MBBS MD FRACP

Position:

Chair of Adolescent Health

Organization:

The University of Melbourne

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Valentina Baltag, MD, MSc, PhD, (she/her/hers)

Position:
Unit Head, Adolescent and Young Adult Health

Organization:
World Health Organization

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Risa Turetsky, RN, NP, MPH (she/her/hers)

Position:
Social Science Reseacher

Organization:
Stanford University School of Medicine

Role:

Submitter;Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Peter Azzopardi, PhD

Position:
Prof

Organization:
MCRI

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Jonathan D. Klein, MD, MPH (he/him/his)

Position:
Marron and Mary Elizabeth Kendrick Professor of Pediatrics

Organization:
Stanford University School of Medicine

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Bonnie Halpern-Felsher, PhD (she/her/hers)

Position:
Marron and Mary Elizabeth Kendrick Professor in Pediatrics II

Organization:
Stanford University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Jason M. Nagata, MD, MSc (he/him/his)

Position:
Associate Professor of Pediatrics

Organization:
University of California, San Francisco, School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Session Description

Session Description

Global adolescent health initiatives have accelerated in recent years in response to budding awareness of young people's needs. This session highlights current efforts by WHO and others to strengthen primary care and improve professional education and health care delivery systems for young people worldwide.

Chairs: Drs. Carol Ford and Jonathan Klein

Presentations and discussants:

1. Dr. Anshu Mohan, PMNCH Lead (Partnership for Women's, Children's and Adolescents' Health) 2023 Call to Action: will present on national and organizational commitments for young people;
2. Ms. Sophie Arsenault, PMNCH under 30 Vice-Chair for the Evidence and Accountability Workgroup will present the PMNCH youth-led agenda and how accountability for commitments will be tracked and described;
3. Dr. Susan Sawyer will present an evidence update and describe the 2nd Lancet Commission on Adolescent Health and Well-Being's youth leadership work;
4. Dr. Valentina Baltag, WHO Adolescent Health Lead, will present on updated guidelines and standards for adolescent health and plans for implementation of adolescent health service improvement activities.
5. Ms. Risa Turetsky will present results of the youth consultation for WHO adolescent health guidelines, and how these align with WHO Universal Health Care Competencies;
6. Dr. Peter Appozardi will describe the Global Action for Measurement of Adolescent Health indicators and strategies for tracking improvements for Adolescent Well-Being;
7. Drs. Jonathan Klein and Bonnie Halpern-Felsher will address commitments and advocacy efforts by the International Association for Adolescent Health and the Society for Adolescent Health and Medicine, and Dr. Jason Nagata will present the work of young professionals.

Learning Objectives

1. Describe current global adolescent health care guidance and initiatives

2. Discuss current global initiatives designed to improve adolescent health care and their main contributions to the field of adolescent health
3. Identify ways improved guidelines, calls to action and indicators might help improve health outcomes for adolescents and young adults in participants practices, communities, and countries.

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
Clinicians and health service professionals who care for adolescents and/or young adults;
Local, National and Global health and policy professionals
3. **Tracks**
Adolescent Medicine
Advocacy
Community Pediatrics
General Pediatrics
Global Neonatal & Children's Health
Health Services Research
Public Health
School and Community Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Yes
 1. Proposal ID:1923837; Proposal Title: Primary care: an optimal setting for early identification and management of adolescent eating disorders
 2. Richard Chung, et al.: Consent and Confidentiality in the Care of Adolescents and Young Adults (Carol Ford, moderator, is included);
 3. Lewis First, et al.: Proposal is about Editors discuss issues in academic publishing (Carol Ford, moderator, is included);
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide**

an explanation of the non-member speaker selection so that PAS staff may request approval.

The following World Health Organization / UN affiliated staff are not members of our organizations

- Anshu Mohan, Partnership for Maternal Child Newborn Health, Senior Strategic Advisor

- Valentina Baltag, WHO, Unit Head for Adolescent & Young Adult Health

Also, Peter Azzopardi, PhD FRACP in Australia at the Murdoch Children's Institute, Lancet Commission for Adolescent Health Commissioner, and Co-Chair of WHO's Global Action for Measurement of Adolescent Health may not be a member.

One of the youth speakers, Sophie Arsenault, is also not a pediatrician and not a member of the organizations. Submitter and speaker Risa Turetsky is a family nurse practitioner with a fellowship in adolescent health.

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

Yes, this is a global health presentation that involves the pediatric subspecialty adolescent health as well as community/general pediatrics, global health, public health, primary care practice, health service delivery and health policy.

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

N/A

10. Additional comments

Thank you!

Presentation Titles and Durations

Welcome and Introduction

Carol A. Ford, MD

Duration of Presentation in Minutes

5

PMNCH (Partnership for Womens, Childrens and Adolescents Health): 2023 Call to Action: commitments by nations/organizations

Anshu Mohan, Ba, MBA, MPH

Duration of Presentation in Minutes

8

PMNCH: Launch of a youth-led agenda and accountability for commitments to youth

Sophie Arseneault

Duration of Presentation in Minutes

7

Evidence for what is needed: Lancet Commission on Adolescent Health & Well-Being

Susan M. Sawyer, AM, MBBS MD FRACP

Duration of Presentation in Minutes

10

WHO 2025 Guidelines and Competencies for adolescent health care and well-being

Valentina Baltag, MD, MSc, PhD,

Duration of Presentation in Minutes

10

What do young people want? Report from the global youth consultation on adolescent health standards and competencies

Risa Turetsky, RN, NP, MPH

Duration of Presentation in Minutes

10

WHO Global Action for Measurement of Adolescent Health (GAMA)

Peter Azzopardi, PhD

Duration of Presentation in Minutes

10

Professional Society Advocacy and Accountability: International Association for Adolescent Health (IAAH)

Jonathan D. Klein, MD, MPH

Duration of Presentation in Minutes

3

Professional Society Advocacy and Accountability: Society for Adolescent Health and Medicine (SAHM)

Bonnie Halpern-Felsher, PhD

Duration of Presentation in Minutes

3

Professional Society Advocacy and Accountability: IAAH Young/Emerging Professionals Network

Jason M. Nagata, MD, MSc

Duration of Presentation in Minutes

4

(51) Proposal ID: 1926945

Managing Tricky Conversations with Patients, Parents and Colleagues

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Joshua Wolf**

Score: **0**

Participant(s)

Joshua Wolf, MBBS, PhD, FRACP (he/him/his)

Position:
Member

Organization:
St. Jude Children's Research Hospital

Role:

Submitter;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Joshua Williams, MD (he/him/his)

Position:
Associate Professor of Pediatrics

Organization:
Denver Health

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Kevin Meesters, MD, MPH, PhD (he/him/his)

Position:

Pediatric Infectious Diseases Physician

Organization:

BC Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

PIDS

Jennifer K. Walter, MD, PhD, MS (she/her/hers)

Position:

Associate Professor of Pediatrics and Medical Ethics

Organization:

Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Although communicating with others is one of the most rewarding parts of pediatric practice, there are frustrating hot button issues that make our jobs more difficult.

This session brings together pediatricians and communication experts to provide practical, evidence-based, tips to for communicating around some of the most difficult domains: vaccine skepticism, appropriate (and inappropriate) antibiotic use, and dealing with disagreements or conflict between treating teams.

Vaccine hesitancy and denial has recently gone from a niche belief to a growing social phenomenon, with increasing public health impacts. Understanding the evolution of vaccine hesitancy during and after the COVID-19 pandemic, and learning effective communication techniques to address parental concerns, are necessary for all pediatricians practicing in diverse contexts today.

Misinformation, past antibiotic use, and the pressure to recover quickly often drive misconceptions about the need for antibiotics. Time pressures in clinical practice further complicate decision-making and communication. Simple and effective communication strategies, such as motivational interviewing, can uncover and address these misconceptions, leading to consensus on course of action, symptom management, and safety-netting instructions.

Interdisciplinary teams are vital for complex pediatric care. However, communication problems between teams, particularly around optimal patient care, can result in conflict and even harm patients or therapeutic relationships. We will discuss best practices teams can use to resolve disagreements before they reach patients and families.

Attendees will leave this session with more confidence (and competence) to embrace these otherwise frightening interactions.

Learning Objectives

1. Engage concerned caregivers around vaccine hesitancy or refusal through understanding evolution of vaccine denial, and implementation of practical strategies proven to improve vaccination uptake
2. Apply motivational interviewing techniques to engage patients and caregivers and promote responsible antibiotic use in both inpatient and outpatient settings
3. Use evidence-based approaches that avoid or resolve conflict between clinical teams, leading to optimal patient care and enjoyable working relationships

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
General pediatrics, hospitalist medicine, adolescent medicine, infectious diseases, all subspecialties, medical students, residents, fellows
3. **Tracks**
Adolescent Medicine
Advocacy
Community Pediatrics
Emergency Medicine
General Pediatrics
Hospital Medicine
Immunizations/Delivery
Infectious Diseases
Wellness and Well-being
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes! General pediatrics, infectious diseases, palliative care medicine
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Caring for the Vaccine-Hesitant Family: Evidence-Based Approaches to Tricky Conversations

Joshua Williams, MD

Duration of Presentation in Minutes

30

Empowering Patients and Caregivers Through Motivational Interviewing Techniques in Antimicrobial Stewardship

Kevin Meesters, MD, MPH, PhD

Duration of Presentation in Minutes

30

When Your Team and the Other Team Aren't on the Same Team: Managing Conflict Between Clinical Teams

Jennifer K. Walter, MD, PhD, MS

Duration of Presentation in Minutes

30

(52) Proposal ID: 1926037

Science Advocacy 101: How to be an Effective Advocate for Pediatric Research and Science

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Shetal Shah**

Score: **0**

Participant(s)

Shetal Shah, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

New York Medical College

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

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

AAP, APA, SPR

Jessie R. Maxwell, MD MBA

Position:

Associate Professor of Pediatrics and Neurosciences

Organization:

University of New Mexico School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Maya Ragavan, MD, MPH, MS (she/her/hers)

Position:

Associate Professor of Pediatrics; Associate Vice Chair Diversity Equity and Inclusion Research

Organization:

University of Pittsburgh School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APA, SPR

Lois Lee, MD, MPH (she/her/hers)

Position:

Senior Associate in Pediatrics, Associate Professor of Pediatrics and Emergency Medicine

Organization:

Boston Children's Hospital/Harvard Medical School

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APA, APS, SPR

Matt Mariani (he/him/his)

Position:

Director, Federal Advocacy

Organization:

American Academy of Pediatrics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Session Description

Session Description

Co-sponsors: Pediatric Policy Council, Society for Pediatric Research, AAP Section on Neonatal-Perinatal Medicine

Child health advocacy has long been an important skill for clinical pediatricians. However the COVID pandemic unearthed significant public distrust of science,

including public health and research. Politically, this has led to efforts to defund the National Institutes of Health and public health programs, restrict use of animal and stem models for research and efforts to prevent public access to government health data.

As experts, pediatric researchers are the most credible advocates to inform policymakers about the importance of these issues and the implications of poor policy decisions. While there is a pressing need for the input of scientists, many researchers are not comfortable in an advocacy role,

This session is intended to provide an introduction to advocacy for researchers/scientists. An expert panel will review the basics of advocacy. The session includes a brief review of resources available to scientists to better understand the policy landscape. Talks will include how to work with community partners in advocating for science and a discussion of peer-reviewed publishing opportunities in advocacy by a co-editor of the Journal of Perinatology advocacy series. A pediatrician/former Senate staff member will review how to best engage your legislators on federal issues and an American Academy of Pediatrics policy expert will outline the most time-sensitive issues in pediatric science advocacy.

Learning Objectives

1. To understand basic concepts in advocacy, including resources for education.
2. To review expanding peer-reviewed academic publishing opportunities in scientific advocacy.
3. To understand current advocacy issues requiring input from pediatric researchers.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Medical Students, Residents, Fellows, Pediatric Researchers
3. **Tracks**
Academic and Research Skills
Advocacy
Career Development
Health Services Research
Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Pediatric Policy Council Session and Legislative Breakfast
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Yes. Topic is advocacy for pediatric scientists which is applicable to all researchers.
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**
This session is especially relevant given the potential restructuring of the NIH (including elimination of the NICHD) proposed by the House Energy and Commerce Committee and poised to receive Congressional attention next Congress. Providing resources to researchers/scientists so they can ensure legislators understand the importance of these funding decisions is critical. Speaker panel is racially/ethnically and geographically diverse and includes senior and junior researchers.

Presentation Titles and Durations

Welcome and How to Create Academic Capital by Publishing Advocacy Work
Shetal Shah, MD

Duration of Presentation in Minutes

20

How to Increase Your Advocacy Knowledge Base: Tools and Resources
Jessie R. Maxwell, MD MBA

Duration of Presentation in Minutes

10

How to co-create science with community partners to support high-impact advocacy

Maya Ragavan, MD, MPH, MS

Duration of Presentation in Minutes

15

How to Work with Your Member of Congress in Support of Pediatric Research

Lois Lee, MD, MPH

Duration of Presentation in Minutes

15

Urgent Federal Policy Issues that Require Input from Pediatric Research

Matt Mariani

Duration of Presentation in Minutes

15

(53) Proposal ID: 1933481

Federally Funded Pediatric Innovation Programs: Catalyzing Transformative Solutions for Children's Health

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Kolaleh Eskandanian**

Score: **0**

Participant(s)

Kolaleh Eskandanian, PhD, MBA (she/her/hers)

Position:

Vice President and Chief Innovation Officer

Organization:

Children's National Health System

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Julia Finkel, MD (she/her/hers)

Position:

Professor

Organization:

Children's National Health System

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

SPR

Francesca Joseph, MD, MBA (she/her/hers)

Position:

Assistant Professor

Organization:

Children's National Health System

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Anne Adema, MD (she/her/hers)

Position:

Assistant Professor

Organization:

Children's Hospital Emergency Department

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Mark Piehl, MD, MPH

Position:
Associate Professor of Pediatrics

Organization:
University of North Carolina at Chapel Hill School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Pediatric innovation has seen remarkable progress, driven by the collective support of key federal agencies, including the Food and Drug Administration (FDA), the National Institutes of Health (NIH), the Advanced Research Projects Agency for Health (ARPA-H), the Health Resources and Services Administration Pediatric Pandemic Network (HRSA PPN), and the Biomedical Advanced Research and Development Authority (BARDA). These organizations are dedicated to fostering groundbreaking medical technologies,

therapies, and medical countermeasures that specifically target the unique needs of children.

Our session will provide an overview of the various federally funded initiatives designed to accelerate innovation in pediatric health. Through targeted funding mechanisms, regulatory guidance, and strategic partnerships, these agencies leverage public private partnerships to address the critical gaps in pediatric medical device development, therapeutics, and healthcare delivery models. Programs like the Pediatric Device Consortia grant program (FDA), novel ARPA-H initiatives, and BARDA's Accelerator Networks emphasize caring for vulnerable populations, including children and creating pathways for breakthrough innovations.

We will explore key case studies, including successful collaborations and the impact of these programs on improving pediatric care and health outcomes. The presentation will highlight the challenges and opportunities in translating innovative ideas into actionable solutions that address children's health needs, focusing on regulatory science, rapid response to public health crises, and sustainable healthcare models.

This session will engage clinicians, researchers, and innovators in a discussion on leveraging federal support to continue advancing pediatric healthcare innovation in the face of evolving medical and public health challenges.

Learning Objectives

1. Highlight the Role of Federal Agencies in Pediatric Innovation: Demonstrate how government funding is critical to accelerate the development of innovative medical technologies and therapies.
2. Showcase Successful Case Studies and Collaborations: Present successful innovations in pediatric healthcare, emphasizing how federally funded programs have supported breakthroughs in pediatric product development.
3. Discuss Challenges and Opportunities in Advancing Pediatric Innovation: Explore opportunities to leverage federal resources to develop sustainable solutions that address children's unmet health needs.

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

Pediatricians, trainees, fellows, pediatric researchers, members of public private partnership initiatives, academic entrepreneurs

3. **Tracks**

Academic and Research Skills
Advocacy
Artificial Intelligence
Career Development
Clinical Research
Emergency Medicine
Health Services Research
Leadership and Business Training

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Complex Care Sig

Hot topic symposium proposed: The Role of Pediatric Clinicians and Researchers in Medical Device Innovation

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr. Eskandarian is not a pediatrician, but she is a global leader in pediatric innovation overseeing regulated medical products

8. **Does this submission involve one or more specialties or disciplines?**

General pediatrics, emergency medicine, critical care

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

n/a

10. **Additional comments**

none

Presentation Titles and Durations

Overview of Federally Funded Pediatric Innovation Programs | Case Studies

Kolaleh Eskandarian, PhD, MBA

Duration of Presentation in Minutes

5

Academic Entrepreneurship Learned by a Clinician Scientist

Julia Finkel, MD

Duration of Presentation in Minutes

5

FDA Regulatory Pathways for Pediatric Devices

Francesca Joseph, MD, MBA

Duration of Presentation in Minutes

5

Emergency Medicine Clinician's Perspective on Product Development and
Innovation in an Academic Setting

Anne Adema, MD

Duration of Presentation in Minutes

5

Pediatric Innovations in Action

Mark Piehl, MD, MPH

Duration of Presentation in Minutes

5

(54) Proposal ID: 1916591

Mental Health Equity in Pediatric Primary Care Settings

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Andrea Young**

Score: **0**

Participant(s)

Andrea Young, PhD (she/her/hers)

Position:
Faculty

Organization:
Johns Hopkins University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Nancy S. Weinfield, PhD

Position:
Director of Research Science

Organization:
Kaiser Permanente Mid-Atlantic Permanente Research Institute

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Emily T. O’Gorman, PhD (she/her/hers)

Position:

Postdoctoral Fellow

Organization:

Johns Hopkins University School of Medicine

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

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

Not a member of any of these organizations

Laura Prichett, PhD, MHS (she/her/hers)

Position:

Assistant Professor

Organization:

Johns Hopkins Medical Insitutions

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Racially and ethnically minoritized youth experience decreased mental health (MH) care access (3, 4), which may exacerbate risk for impairment and psychiatric problems later in life (5, 6). One proposed strategy to improve access is MH screening and provision of MH services in primary care (PC). PC is a common setting where youth present in need of MH services (7), and thus may be well-suited to facilitate MH care access. However, there are insufficient data characterizing factors impacting screening, diagnosis, and treatment for youth presenting with MH problems in PC settings. This symposium aims to fill those gaps.

Presentation #1 presents adolescent depression screening data in PC across two large health systems, finding variability in screening frequency across systems and indicating racial differences in screening within each system. Presentation #2 examines actions taken by providers across two health systems after an elevated depression screen: certain actions, such as psychiatric diagnosis, were less likely among Black youth. Presentation #3 examines associations between aggression, depression, and suicidal behavior among a predominantly Black pediatric PC-based sample; both aggression and depression were associated with suicidal behavior. Presentation #4 examines trends in PC-based orders for antianxiety and antidepressant medications, finding White youth consistently more likely to receive prescriptions than youth of color.

Inequities in MH service delivery within PC could exacerbate disparities. These four studies suggest a need for more research on strategies to facilitate minoritized youths' access to PC-based MH care, including investigating patient-, provider-, and system-level barriers/facilitators.

Learning Objectives

1. Describe the frequency of adolescent depression screening in primary care.
2. Describe patterns of mental health diagnosis, treatment, referral, and consultation in the primary care setting and racial disparities across these actions.
3. Describe risk factors for suicide related behavior among a sample of predominantly Black youth presenting in the primary care setting.

Scholarly Session Questions

1. **Audience Size**

25

2. **Target audience**

Pediatric primary care providers including physicians, nurse practitioners, physicians assistants, nurses and mental health care providers (psychologists, social workers, case managers, psychiatrists) who work in primary care settings.

3. **Tracks**

Adolescent Medicine
Clinical Research
Community Pediatrics
Diversity, Equity, and Inclusion
Health Equity/Social Determinants of Health
Health Services Research
Mental Health
Wellness and Well-being

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

No

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Emily O'Gorman is not a member of a PAS society; she is still a trainee (a postdoctoral fellow) who will join academic and practice

societies/associations upon transitioning to a faculty position. She is interested in integrated care and receiving training in that area.

8. **Does this submission involve one or more specialties or disciplines?**

The Topic is Mental Health Equity involving Pediatrics, Child and Adolescent Psychology, and Epidemiology

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

NA

10. **Additional comments**

The proposed presenters are a group of child & adolescent clinical and/or developmental psychologists, epidemiologists, and trainees who have been working in pediatric mental health in primary care research and practice in collaboration with pediatrician colleagues. We are eager to present our work at PAS, where it will reach others focused on pediatric care and can, thereby, have a chance to make a meaningful difference in pediatric primary care research and practice.

Presentation Titles and Durations

Racial disparities in rates of adolescent depression screening in primary care across two large health systems

Andrea Young, PhD

Duration of Presentation in Minutes

18

Taking action: Racial disparities in primary care provider responses to elevated depression screening in adolescents

Nancy S. Weinfield, PhD

Duration of Presentation in Minutes

18

Associations between aggression and suicidal thoughts and behaviors in a predominantly Black youth sample in primary care

Emily T. O'Gorman, PhD

Duration of Presentation in Minutes

18

Trends in depression and anxiety treatment in pediatric primary care: are we improving mental health care equity?

Laura Prichett, PhD, MHS

Duration of Presentation in Minutes

18

(55) Proposal ID: 1926313

Care on Wheels: Enhancing Pediatric Health Equity through Mobile Clinics

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Anisha Rimal**

Score: **0**

Participant(s)

Anisha Rimal, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Robert Larner, M.D., College of Medicine at the University of Vermont

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Sheyanga Beecher, MSN MPH (she/her/hers)

Position:

Program Director

Organization:

Hennepin County Medical Center

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

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

AAP

Sanghamitra M. Misra, MD, MEd (she/her/hers)

Position:

Professor

Organization:

Baylor College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APA

Avani Shah, MD (she/her/hers)

Position:

Assistant Professor

Organization:

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

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
Prefer not to respond

Gender
Female

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

Session Description

Session Description

The COVID-19 pandemic dramatically reduced in-person pediatric wellness visits, leading to a significant decline in routine pediatric vaccinations. This crisis underscored the urgent need for innovative healthcare delivery models to help reach the most vulnerable children. Mobile pediatric clinics have long been leaders in building trust with schools and community partners, providing care through culturally sensitive, community-driven approaches. Most mobile clinics are fully-equipped mobile coaches designed to provide the full spectrum of healthcare on wheels. By leveraging established relationships and engaging local leaders who reflect the diverse communities they serve, these programs have proven effective in reducing health disparities.

Despite the incredible successes of mobile pediatric programs across the world, the pediatrics community is generally unaware of the advantages, challenges, and best practices of these programs. This panel will bring together experts from three prominent mobile pediatric programs across the country: Hennepin Healthcare Peds Mobile, Texas Children's Mobile Clinic Program, and the Lurie Children's Mobile health Program (Asthma Mobile Clinic). Panelists will explore the unique contexts and demographics of their programs, offering practical guidance on establishing and expanding mobile pediatric clinics. Each will highlight the critical role mobile clinics play in addressing health inequities and share key insights from their ongoing efforts to adapt and grow. This session is intended for general and subspecialty pediatricians and pediatric trainees.

This session is ideal for pediatricians and healthcare professionals interested in community-based care models, and those looking to expand access to healthcare for underserved pediatric populations.

Learning Objectives

1. Identify key challenges and considerations when developing mobile health programs in specific geographic/demographic contexts.

2. Demonstrate the impact of mobile pediatric programs in addressing health inequities and improving access to care for vulnerable populations.
3. Share actionable strategies for developing more pediatric mobile programs in other communities.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Pediatricians and healthcare professionals interested in community-based care models, and those looking to expand access to healthcare for underserved pediatric populations.
3. **Tracks**
Advocacy
Community Pediatrics
Health Equity/Social Determinants of Health
Immigrant Health
Immunizations/Delivery
Public Health
Pulmonology
School and Community Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Dr. Anisha Rimal is submitting another scholarly session on mentorship for underrepresented in medicine (UriM) mentees. Please avoid conflicts with these two sessions if they are both accepted.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
9. **If your session was presented at another conference, please describe the conference and presentation.**

10. **Additional comments**

Presentation Titles and Durations

Hennepin Health Pediatric Mobile Health Program

Sheyanga Beecher, MSN MPH

Duration of Presentation in Minutes

20

Texas Children's Mobile Clinic Program

Sanghamitra M. Misra, MD, MEd

Duration of Presentation in Minutes

20

Lurie Children's Mobile health Program (Asthma Mobile Clinic)

Avani Shah, MD

Duration of Presentation in Minutes

20

(56) Proposal ID: 1931304

Mental Health Access Programs: Innovations in implementation and evaluation

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Elizabeth Erickson**

Score: **0**

Participant(s)

Sandy Chung, MD (she/her/hers)

Position:
Medical Director

Organization:
Virginia Mental Health Access Program

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Rachel Reynolds, PhD (she/her/hers)

Position:
VMAP Assistant Director of Operations

Organization:
Children's Hospital of Richmond at VCU

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Bergen B. Nelson, MD, MS (she/her/hers)

Position:

Associate Professor

Organization:

Children's Hospital of Richmond at VCU

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Elizabeth Erickson, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Duke University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

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

Brittany Glass-Thomas, MS (she/her/hers)

Position:
Assistant Director, NC-PAL

Organization:
Duke University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Kristen Stefureac, MSW, LCSW (she/her/hers)

Position:
Clinical Social Worker

Organization:
Duke University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Sheila M. Marcus, MD, MD (she/her/hers)

Position:
Professor

Organization:
University of Michigan

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Prachi E. Shah, MD, MS (she/her/hers)

Position:
Professor, Pediatrics and Psychiatry

Organization:
University of Michigan Medical School

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Session Description

Session Description

As the incidence of pediatric mental health conditions continues to grow, primary care practices are increasingly asked to address screening, diagnosis, and care of mild to moderate mental health conditions within their scope. Mental health access programs (MHAPs) facilitate the implementation of an integrated care model through a combination of education, consultation, and care navigation to community resources. In the last decade, this method of service integration has grown across the United States thanks to increased awareness and funding at both statewide and national levels.

This presentation will highlight the implementation of MHAPs in three different states (Virginia, North Carolina, and Michigan) with current research demonstrating program impact and effectiveness. All three programs use a systems-based model to support the use of braided federal and state funds to accomplish sustainable change that supports primary care providers serving the pediatric population. Outcomes from all three programs indicate that providers engaging in education programs demonstrate increased screening for mental health conditions and increased confidence in diagnosing and medication management. Care navigation services address an evident gap in the primary care service system, driving a systems-of-care model that supports diverse family needs. MHAPs also address system gaps by providing consultation and relevant education to rural health providers.

All three states will share how their research, using both internal and third-party data (such as All Payers or Medicaid claims databases), supports the role of MHAPs in changing pediatric primary care service delivery by filling needed service gaps and supporting the educational needs of providers.

Learning Objectives

1. Identify key elements of a comprehensive mental health access program for pediatrics, including ways to leverage mental health care through primary care settings.
2. Name the role third-party data (i.e., claims data) plays in evaluating mental health access programs' role on pediatric provider confidence and competence in service delivery.

3. Describe how the broad use of MHAPs and advocacy efforts shift the paradigm of pediatric primary care through changes in billing and practice delivery.

Scholarly Session Questions

1. **Audience Size**

250

2. **Target audience**

This initiative is tailor-made for a diverse audience of professionals deeply committed to enhancing the well-being of children and adolescents. This includes:

Pediatricians seeking to integrate mental health assessment and intervention into their practices.

Researchers focused on mental health, public health, and integrated medicine models aiming to bridge the gap between research and clinical practice.

Pediatric Psychologists and Behavioral Health Providers dedicated to providing comprehensive mental health care to young people.

Anyone with a vested interest in promoting the mental health and resilience of children and adolescents.

This broad approach fosters collaboration and knowledge-sharing among various stakeholders, creating a powerful synergy to advance the field of pediatric mental health.

3. **Tracks**

Academic and Research Skills

Adolescent Medicine

Advocacy

Developmental and Behavioral Pediatrics

General Pediatrics

Health Equity/Social Determinants of Health

Mental Health

Telemedicine

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Advocacy SIG, Early Literacy SIG

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Sheila Marcus, MD, is a child and adolescent psychiatrist and the medical director of MC3 (Michigan's PMHCA). She is a member of AACAP. Rachel is not a member of these organizations but has played a pivotal role in developing and implementing the VA program, serving as an administrator since its inception. Her intimate knowledge of the program's history, challenges, and successes will provide valuable insights. Kristen Stefureac, MSW, LCSW is a social worker and the Director of Access & Telehealth Services for the Duke Department of Psychiatry and Behavioral Sciences. Brittany Glass-Thomas, MS, is an Assistant Director for NC-PAL with experience in research, administration, and implementation in pediatric healthcare systems.
8. **Does this submission involve one or more specialties or disciplines?**
Yes, the session involves psychiatry, public health, and pediatrics.
9. **If your session was presented at another conference, please describe the conference and presentation.**
n/a
10. **Additional comments**
None

Presentation Titles and Durations

Introduction: Why mental health access programs exist AND Bringing it all together

Sandy Chung, MD

Duration of Presentation in Minutes

25

Data and lessons learned from Virginia

Rachel Reynolds, PhD

Duration of Presentation in Minutes

15

Data and lessons learned from Virginia

Bergen B. Nelson, MD, MS

Duration of Presentation in Minutes

15

Data and lessons learned from North Carolina
Elizabeth Erickson, MD

Duration of Presentation in Minutes

15

Data and lessons learned from North Carolina
Brittany Glass-Thomas, MS

Duration of Presentation in Minutes

15

Data and lessons learned from North Carolina
Kristen Stefureac, MSW, LCSW

Duration of Presentation in Minutes

15

Data and lessons learned from Michigan
Sheila M. Marcus, MD, MD

Duration of Presentation in Minutes

15

Data and lessons learned from Michigan
Prachi E. Shah, MD, MS

Duration of Presentation in Minutes

15

(57) Proposal ID: 1932398

Advancement in Care Delivery and Outcomes for Children on Home Ventilation

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Christopher Baker**

Score: **0**

Participant(s)

Christopher D. Baker, MD (he/him/his)

Position:

Professor

Organization:

University of Colorado School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

SPR

Thida Ong, MD (she/her/hers)

Position:

Associate Professor

Organization:

Seattle Children's

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

APA

Audrey Tilly-Gratton, M.D (she/her/hers)

Position:

Pediatric Pulmonologist

Organization:

CHU Sainte-Justine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Carolyn C. FOSTER, MD, MS (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

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

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

This symposium features advancements in clinical knowledge and practice-based care for children on long-term invasive mechanical ventilation. Children who use long-term invasive mechanical ventilation make up a growing, high-cost population that requires multidisciplinary care for optimal patient and family outcomes. Although guidelines for pediatric chronic home invasive ventilation were published in 2016, a 2020 survey of 157 institutions across 44 states in the USA found large heterogeneity in clinical practice, indicating a considerable need for improved practice-based learning and knowledge. Recent publications have also linked practice variability to inequitable outcomes for patients from marginalized racial/ethnic families, including inequitably longer hospital stays and time on the ventilator. New research over the past 3-5 years is available to address these gaps. Speakers will review new strategies for chronic ventilator management (including transitioning to and weaning/liberating from chronic ventilation), the application of ethical and policy frameworks to hospital discharge and home healthcare, and the use of quality improvement to optimize caregiver education and patient-family engagement. A panel discussion with Q&A will follow for further learning. The symposium is designed for inpatient and outpatient multidisciplinary clinical teams (i.e., pulmonology, critical care/neonatology, hospital medicine, complex/specialized pediatrics, respiratory therapy, nursing), so they can better integrate knowledge, data, and ethics into ventilator management from hospital-to-home.

Learning Objectives

1. incorporate new evidence-based clinical strategies for ventilation management and weaning into practice-based care of children with invasive home mechanical ventilation.

2. integrate new ethical and policy frameworks into institutional discharge practices to improve equity in hospital length-of-stay and access to home healthcare for chronically-ventilated children.
3. apply a quality improvement approach to optimize caregiver education and patient-family engagement.

Scholarly Session Questions

1. **Audience Size**
80
2. **Target audience**
pulmonology, critical care/neonatology, specialized pediatrics, hospital medicine, respiratory therapy, and nursing
3. **Tracks**
Children with Chronic Conditions
Health Equity/Social Determinants of Health
Hospital Medicine
Pulmonology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Topic is Pediatric Chronic Home Invasive Ventilation involving Pulmonology, Hospital Medicine, Specialized Pediatrics, and Medical Ethics.
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Evidence-based Strategies for Transitioning Children with Tracheostomies to Portable/Home Mechanical Ventilation

Christopher D. Baker, MD

Duration of Presentation in Minutes

15

Quality Improvement Efforts to Expand Access to Pediatric Home Healthcare for Children on Home Ventilators

Thida Ong, MD

Duration of Presentation in Minutes

15

Weaning and Liberating Children with Tracheostomies from Chronic Ventilation

Audrey Tilly-Gratton, M.D

Duration of Presentation in Minutes

15

Application of Ethical Frameworks to Promote Equitable Discharge Outcomes

Carolyn C. FOSTER, MD, MS

Duration of Presentation in Minutes

15

(58) Proposal ID: 1917381

Tracheostomy Decision-Making: Navigating Life-Changing Treatments and The Impact on Pediatric Care and Caregivers

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Christine Traul**

Score: **0**

Participant(s)

Christine Traul, MD

Position:
Director, Pediatric Palliative Care

Organization:
Cleveland Clinic Children's

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Hemangini Bhakta, MD

Position:
Palliative Care Physician

Organization:
Cook Children's

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Aliza Olive, MD

Position:

Assistant Professor

Organization:

Cleveland Clinic Children's

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

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

AAP

Sabine Iben, MD, MA (she/her/hers)

Position:

Assistant Professor

Organization:

Cleveland Clinic Children's

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Ashley Ison, APRN (she/her/hers)

Position:
Advanced Practice Registered Nurse ;Certified Family Nurse
Practitioner

Organization:
Cleveland Clinic Children's

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Tracheostomy placement is increasingly common in pediatric care due to the growing number of children with complex conditions and chronic respiratory failure. While tracheostomies offer benefits, they also carry significant risks for the child as well as extraordinary caregiver commitment and resources. The decision to place a tracheostomy depends on the child's medical needs, particularly when dealing with ongoing respiratory issues and other co-

morbidities, in addition to long-term prognosis and quality of life considerations. It requires thoughtful input from the entire medical team and family. Caregivers often lack familiarity with the implications of tracheostomy care, such as post-procedure complications, home care resources, and long-term impact on the child's and family's lives. Although some pediatric centers have addressed these topics, there is no unified approach for discussing tracheostomies with families.

A group from Cleveland Clinic Children's Hospital medical and bioethics teams came together to standardize the process for evaluating a patient for potential tracheostomy placement. The team members developed best practice guidelines for providers to follow when evaluating any child for which a tracheostomy is considered. According to our guidelines medical providers meet with family members to counsel and thoroughly review the implications of tracheostomy placement and long-term care with the help of a checklist. Standardization of the process has become a way for the medical team to identify and address ethical and clinical concerns as a group before a procedure is offered and performed, potentially changing the trajectory of a child's care and increasing overall satisfaction with the process.

Learning Objectives

1. Outline the current practices in clinician decision-making and communication regarding tracheostomy placement in neonates and children.
2. Analyze the key ethical concerns associated with the decision-making process for tracheostomy placement in children.
3. Evaluate the development and effectiveness of a single center's Pediatric Tracheostomy Practice Guidelines by analyzing its application in a real case scenario.

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

All caregivers, including nurses, advance practice providers, respiratory therapy, therapists are impacted by this growing population. Trainees to late career providers are encouraged.

3. **Tracks**

Children with Chronic Conditions

Clinical Bioethics

Critical Care

Health Equity/Social Determinants of Health

Hospital Medicine

Neonatology
Palliative Care
Pulmonology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Christine Traul may possibly be in talks with Dr. Ashira Klein and Dr. Naomi Goloff.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes, Neonatology, Critical Care, Bioethics, Hospital Medicine, Palliative Care
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Overview of current practice of tracheostomy placement in the neonatal and pediatric patients. Also Q and A.

Christine Traul, MD

Duration of Presentation in Minutes

35

Review of the development of a single center's Pediatric Tracheostomy Practice Guidelines. Q and A

Hemangini Bhakta, MD

Duration of Presentation in Minutes

45

Ethical concerns that arise in review of tracheostomy decision-making in children Q and A

Aliza Olive, MD

Duration of Presentation in Minutes

45

Ethical concerns that arise in review of tracheostomy decision-making in children. Q and A

Sabine Iben, MD, MA

Duration of Presentation in Minutes

45

Review of the literature for clinician communication regarding tracheostomy placement in children. Q and A

Ashley Ison, APRN

Duration of Presentation in Minutes

40

(59) Proposal ID: 1921029

A Vaccine to Prevent Congenital Cytomegalovirus Infection: How Close are We?

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Mark Schleiss**

Score: **0**

Participant(s)

Stanley A. Plotkin, MD (he/him/his)

Position:
Emeritus Professor of Pediatrics

Organization:
University of Pennsylvania

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Sallie Permar, MD PhD (she/her/hers)

Position:
Professor

Organization:
Weill Cornell

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

APS, SPR, PIDS

Mark R. Schleiss, MD (he/him/his)

Position:

American Legion and Auxiliary Heart Research Foundation Professor

Organization:

UMN Medical School

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

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

AAP, APS, SPR, PIDS

Rajeev Gautam, PhD (he/him/his)

Position:

Program Officer

Organization:

National Institutes of Health

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Megan H. Pesch, MD, MS (she/her/hers)

Position:
Clinical Associate Professor

Organization:
University of Michigan

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Congenital cytomegalovirus (cCMV) infection represents the most common infectious disease responsible for childhood disability globally. There has been considerable interest in development of a vaccine to prevent cCMV for over 50 years, but human clinical trials have demonstrated, at best, marginal success in preventing acquisition of infection. The landscape of CMV vaccines has accelerated dramatically, driven by an enhanced understanding of the correlates of protective immunity and the development of novel vaccine

strategies. Several clinical trials of improved CMV vaccines, including a phase III trial of an mRNA-based vaccine platform, are ongoing. In this state-of-the-art symposium, new data from molecular immunology approaches, animal models, and clinical trials will be presented, toward the goal of providing attendees with the most current information about the prospects for prevention of cCMV transmission. Dr. Stanley Plotkin will provide an overview and perspective on the long path toward development of a CMV vaccine. Drs. Mark Schleiss and Sallie Permar will summarize current concepts on our understanding of the immunobiology of CMV, including lessons from animal models and studies of immune correlates from their respective NIH-funded laboratories. Dr. Rajeev Gautam (Program Officer at Virology Branch, at the Division of Microbiology and Infectious Diseases, NIAID) will present the NIH perspective on CMV vaccines, including a summary of a recently held workshop on the NIH campus. Finally, Dr. Megan Pesch, immediate past-president of the National CMV Foundation, will discuss how parental and legislative advocacy have positively impacted the pace of CMV vaccine development.

Learning Objectives

1. Upon completion, participants will understand the targets of innate and adaptive (T-cell, antibody) immunity to CMV and how insights into viral genetics inform vaccine design.
2. Symposium attendees describe the range of CMV vaccines currently being tested in human trials, their hypothesized mechanisms of protection, and study endpoints that enable licensure.
3. After completion, participants will describe advocacy activities, including state and federal legislation (S.3864-Stop CMV Act of 2024) that help accelerate progress toward a cCMV vaccine.

Scholarly Session Questions

1. **Audience Size**
500
2. **Target audience**
Neonatologists; public health officials; infectious diseases physicians; basic and translational scientists; primary care physicians; advocacy.
3. **Tracks**
Advocacy
Basic Science
Children with Chronic Conditions
Epidemiology
Immunizations/Delivery
Infectious Diseases

Neonatology
Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Please do not schedule in conflict with PIDS programming. Please avoid conflicts with original science platform sessions in infectious diseases/neonatal infectious diseases. Please avoid overlap with APS and SPR presidential plenary sessions.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr. Rajeev Gautam is Program Officer at Virology Branch, Division of Microbiology and Infectious Diseases, NIAID, NIH, and specifically is responsible for NIAID's CMV vaccine portfolio. He commissioned and carried out a workshop on the current state of CMV vaccines at the NIH campus. His presence is essential to the success of this symposium.

8. **Does this submission involve one or more specialties or disciplines?**

Topic is congenital CMV involving neonatology, community advocacy groups, public health, children with disabilities, basic science, molecular immunology, vaccine design, immunobiology, and clinical trials.

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

Dr. Rajeev Gautam is Program Officer at Virology Branch, Division of Microbiology and Infectious Diseases, NIAID, NIH, and he commissioned and carried out a workshop on CMV vaccines at the NIH campus in late 2023. He won't duplicate any of the presentations from that workshop, but he will reference and summarize this meeting as he discusses the current state of CMV vaccine design.

10. **Additional comments**

We anticipate that the results of a commercial phase III efficacy study of an mRNA CMV vaccine may become available by the time of the PAS meeting in 2025; this is a rapidly evolving area; the co-chairs, Drs. Schleiss and Permar, will be well-poised to adjust the programmatic content of this state-of-the-art symposium, as needed, to keep up with the most cutting-edge developments.

We also believe there is a good chance that the mRNA-1647 phase III vaccine efficacy data may become available by April, 2025. This is a pivotal efficacy study and if this data is public, it will be presented and discussed in this symposium.

Presentation Titles and Durations

Is a Fifty-Year Odyssey Coming to a Conclusion? A Historical Perspective and Future Prospects for a Cytomegalovirus Vaccine.

Stanley A. Plotkin, MD

Duration of Presentation in Minutes

10

Protective Immune Correlates and Transplacental CMV Transmission: New Insights in Immunobiology of Maternal-Fetal Infection.

Sallie Permar, MD PhD

Duration of Presentation in Minutes

20

What Have We Learned from Animal Models of Congenital Cytomegalovirus About Optimizing a Vaccine? A Summary of the Studies!

Mark R. Schleiss, MD

Duration of Presentation in Minutes

20

Clinical Trials of Cytomegalovirus Vaccines: Research Priorities from the Perspective of the National Institutes of Health.

Rajeev Gautam, PhD

Duration of Presentation in Minutes

20

Beyond Awareness: Advocacy Drives High Hopes for Urgent Approval and Licensure of a Vaccine for Congenital CMV.

Megan H. Pesch, MD, MS

Duration of Presentation in Minutes

20

(60) Proposal ID: 1928502

Changing the Tide: A multimodal well-being approach to target institutional and systemic change

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **ilanit Brook**

Score: **0**

Participant(s)

ilanit Brook, MD, MS (she/her/hers)

Position:

Associate Professor of Pediatrics, Chief Faculty Wellbeing Officer

Organization:

Children's Hospital Los Angeles

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Prefer not to respond

Gender

Female

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

AAP

Margaret Mou, DO, MEd (she/her/hers)

Position:

Attending Pediatric Hospitalist / Clinical Associate Professor

Organization:

Children's Hospital Los Angeles

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Irma Breakfield, LMFT, Ed.D (she/her/hers)

Position:

Licensed Marriage Family Therapist

Organization:

CHLA

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

Not a member of any of these organizations

Carrie E. Honn, MS, LMFT (she/her/hers)

Position:

Emotional Support Services Program Manager and Therapist

Organization:

Children's Hospital Los Angeles

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Saray Navarro, MSW, LCSW (She/Her/Ella)

Position:
Emotional Support Services Therapist/Peer Support Programs Manager

Organization:
CHLA

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
Prefer not to respond

Gender
Female

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

Alana Epstein, MSW, LCSW, PCC (she/her/hers)

Position:
MSW, LCSW, PCC

Organization:
Children's Hospital Los Angeles

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Female

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

Marcella Raney, PhD (she/her/hers)

Position:
Data Insights & Strategic Planning, Sr. Manager

Organization:
Children's Hospital Los Angeles - Children's Hospital Los Angeles4650
Sunset Blvd., #170Los Angeles, CA 90027UNITED STATES - Los
Angeles, CA

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Wellbeing, resilience, and burnout are critical variables shaping the current healthcare landscape. Children's Hospital Los Angeles has developed and implemented programming focused on increasing organizational compassion and resilience based on concepts presented in Culture of Well-Being and Practice Efficiencies from the Stanford Model of Fulfillment. Our interprofessional panel will invite attendees to learn about our integrated approach through case-based discussions. We will highlight the needs assessment process and steps taken

to implement and grow programs that support our well culture with both opt-in and opt-out options including our robust internal Employee Assistance program, peer support programs, wellness groups for trainees and faculty, and our floor rounding model. We will share how we are cultivating an organizational psychosocial safety climate with education surrounding upstanding with algorithms and practicing response around microaggressions and overt aggressions. We will also share practices on integration of efficiency work with AI scribe pilots to allow for more time to do fulfilling work. Lastly, we will speak to our individual team member and institutional outcomes and future assessment plans. All attendees will be invited to experience our algorithms, a wellness space and demonstration of efficiency work throughout the panel discussion.

Learning Objectives

1. Improve mental health and work engagement through prioritization of the psychosocial safety climate that embraces compassionate boundaries and emotion sharing
2. Invest in on-site individual confidential mental health support and opt-out group programs like peer support, wellness groups, and debriefs to cultivate institutional well-being
3. Leverage AI scribe tools and continuous assessment to minimize redundancies, improve practice efficiency, and evaluate well-being programs, prioritizing institutional return on investment

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Hospital Leaders, Faculty, Attending Physicians, Trainees who are interested in promoting employee well-being at their institutions
3. **Tracks**
Artificial Intelligence
Career Development
Diversity, Equity, and Inclusion
Leadership and Business Training
Mental Health
Wellness and Well-being
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

none

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr. Irma Breakfield LMFT EdD and Carrie Honn LMFT are members of our Emotional Support Services and co-direct the resident and fellow wellbeing activities. They both have content expertise in education, mental health and the collaboration between mental health resources and learner education and practice. Alana Epstein LCSW is imbedded in both our physician wellbeing councils, medical group and hospital emotional support services. She has content expertise in mental health and specifically in mental health and well culture integration in the medical field. Saray Navarro LCSW is the co-director for our peer support program. She has content expertise in teaching, facilitating and running our peer support program. Dr. Marci Raney PhD runs our assessment arm of all wellbeing interventions. She is a published academic and has been very involved in strategy setting, assessment and outcomes reporting. It is important to share the full interprofessional team in support of growing a wellbeing program.

8. **Does this submission involve one or more specialties or disciplines?**

Yes, Hospital Medicine, Palliative Medicine, Office of Wellbeing, health outcomes/assessments, Social Work and mental health

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

was not

10. **Additional comments**

Presentation Titles and Durations

Models of organizational wellbeing, needs assessments and case presentations, Leveraging AI Scribe Technology, ilanit Brook, MD, MS

Duration of Presentation in Minutes

11

Algorithms and Simulation-Based Education to Address
Micro/Macroaggressions and Create Psychological Safety, Q&A
Margaret Mou, DO, MEd

Duration of Presentation in Minutes

30

Creating a Supportive and Healthy Learning Environment: Opt-In and Opt-Out
Wellness Programs for Residents and Fellows

Irma Breakfield, LMFT, Ed.D

Duration of Presentation in Minutes

8

Integrating Just-In-Time Debriefing with a Support Rounding Model for
Enhanced Team Performance

Carrie E. Honn, MS, LMFT

Duration of Presentation in Minutes

8

Gateway to Support: Leveraging the Hospital-Wide In-the-Moment, Peer
Support Program with a Focus on Physician Inclusion

Saray Navarro, MSW, LCSW

Duration of Presentation in Minutes

13

Confidential Support for Physicians: The Essential Role of an internal EAP in
fostering a Psychosocially Safe Climate

Alana Epstein, MSW, LCSW, PCC

Duration of Presentation in Minutes

10

Measuring Impact: Individual team member and institutional outcomes, future
assessment plans

Marcella Raney, PhD

Duration of Presentation in Minutes

10

(61) Proposal ID: 1918140

O2 and NO – Time for a Divorce or a Reconciliation?

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Shyamala Dakshinamurti**

Score: **0**

Participant(s)

Janneke Dekker, RN PhD (she/her/hers)

Position:

Assistant professor

Organization:

Leiden University Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Satyan Lakshminrusimha, MD (he/him/his)

Position:

Professor and Chair

Organization:

University of California Davis Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

AAP, APS, SPR

Thomas M. Raffay, MD (he/him/his)

Position:

Associate Professor

Organization:

UH Rainbow Babies & Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, SPR

Shyamala Dakshinamurti, MD MSc (she/her/hers)

Position:

Professor of Pediatrics and Physiology

Organization:

Max Rady College of Medicine, Rady Faculty of Health Sciences,
University of Manitoba

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Steven H. Abman, MD (he/him/his)

Position:
Professor

Organization:
University of Colorado School of Medicine

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

A decade after the PAS session “O₂ and NO: Marriage Made in Heaven or Hell”, we revisit the relationship. Use of 100% O₂ and NO together is commonplace; NO is a first-line pulmonary vasodilator and a modifier of ventilator-induced lung injury. But the more we learn about oxidative and nitrosative stress in the pulmonary circuit, and the biochemical causes of NO response failure, the more we worry about how much to turn up the dial, and when. This session examines the biology of the NO response and the role of

oxygen targeting in pulmonary hypertension and chronic lung disease. Maybe it's not time for a restraining order – but definitely time for some counselling!

Learning Objectives

1. Describe current clinical practice for oxygen targeting in neonates with hypoxic respiratory failure treated with inhaled nitric oxide
2. Understand physiological benefits and risks of oxidative and nitrosative stress in the pulmonary circulation
3. Identify management strategies to safely dial up oxygen and nitric oxide, and alternative approaches to avoid treatment failure

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
Neonatologists, neonatal nursing, respiratory therapy, pediatric hospitalists, pulmonologists, cardiologist and basic scientists in the fields of physiology, pharmacology, oxidative stress and hemodynamics
3. **Tracks**
Academic and Research Skills
Basic Science
Cardiology
Critical Care
Neonatology
Pulmonology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Satyan Lakshminrusimha and Steve Abman are participants in other session proposals
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Non member speaker Janneke Dekker is an early career researcher and neonatal nurse with PhD in this field, co-author on the 2024 paper in Eur J Ped that triggered our interest in developing this hot topic. Her name was put forward by senior author Arjan te Pas as an ideal presenter for this session.

8. **Does this submission involve one or more specialties or disciplines?**

Neonatology clinical practice, epidemiology, physiology, pulmonology

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

10. **Additional comments**

This session is proposed as a hot topic symposium, but could also be well received as a state-of-the-art plenary session.

Presentation Titles and Durations

Swiping right, every time: The coincidence of NO and hyperoxia in pulmonary hypertension management

Janneke Dekker, RN PhD

Duration of Presentation in Minutes

15

Are we flirting with trouble? Oxygen targeting and the response to NO

Satyan Lakshminrusimha, MD

Duration of Presentation in Minutes

15

It's not you, it's me... Preserving nitroso signals in hyperoxic lung disease

Thomas M. Raffay, MD

Duration of Presentation in Minutes

20

Signs you're in a toxic relationship: Dangers of NO in an oxidized environment

Shyamala Dakshinamurti, MD MSc

Duration of Presentation in Minutes

20

Can this marriage be saved? Balancing O₂ and NO, and reactivating NO targets

Steven H. Abman, MD

Duration of Presentation in Minutes

20

(62) Proposal ID: 1930663

Immune Development in Early Life

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Kerry McEnaney**

Score: **0**

Participant(s)

Kerry McEnaney (she/her/hers)

Position:

Sr. Project Manager

Organization:

Boston Children's Hospital

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Ofer Levy, MD, PhD (he/him/his)

Position:

Director, Precision Vaccines Program

Organization:

Precision Vaccines Program, Boston Children's Hospital

Role:

Speaker;Chair

Ethnicity

Hispanic or Latino, Not Hispanic or Latino

Race

Prefer not to respond

Gender

Male

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

SPR

Liza Konnikova, MD PhD (she/her/hers)

Position:

Associate Professor

Organization:

Yale School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

SPR

Joann Arce, PhD (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Harvard Medical School

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
Asian

Gender
Female

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

Nelly Amenyogbe, PhD (she/they)

Position:
Post-doctoral fellow

Organization:
Dalhousie University Faculty of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American, White

Gender
Non-binary

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

Asimena Angelidou, MD, PhD (she/her/hers)

Position:
Assistant Professor in Pediatrics

Organization:
Harvard Medical School

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Olubukola T. Idoko, MD PhD

Position:
Honorary Associate Professor

Organization:
Sanofi

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Octavio Ramilo, MD (he/him/his)

Position:
Chair, and Member, Department of Infectious Diseases

Organization:
St. Jude Children's Research Hospital

Role:

Speaker;Chair

Ethnicity
Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

The Immune Development in Early Life (IDEAL) session will highlight advances in applying systems biology to define trajectories of infant immune ontogeny (change with age) in relation to common pediatric clinical outcomes such as vaccine responsiveness, respiratory infection, and asthma. Advances in sample sparing approaches of peripheral blood-based systems biology assays (e.g., transcriptomics, epigenetics, proteomics, microbiomics and metabolomics) to small biosamples have enabled deep insight into the dynamic cellular and molecular changes across the first hours, days and weeks of life that correlate with risk of infection and immune responsiveness. Our session will feature leading researchers who will present progress in studying longitudinal infant cohorts across the globe to define immune trajectories in relation to clinical outcomes. Their work is identifying interventions such as maternal vitamins, as well as infant probiotics and vaccines that redirect immune trajectories away from disease and towards health.

Learning Objectives

1. Upon completion, participant will be able to list distinct aspects of infant immunity in relation to age-specific susceptibility of infection.
2. Upon completion, participant will be able to define ontogeny and list key examples of immune pathways that vary with age and their clinical correlates.
3. Upon completion, participant will be able to describe early life interventions that redirect immune development towards health.

Scholarly Session Questions

1. **Audience Size**

60

2. **Target audience**

The target audience for IDEAL session includes physicians, scientists and other health professionals interested in pediatric infectious disease, pediatric allergy (including asthma) and immunology, vaccinology and

immunization. By applying cutting edge technology to common pediatric clinical outcomes (vaccine responsiveness, respiratory infection and asthma), this scientific and translational session is inherently multidisciplinary.

3. **Tracks**

Allergy, Immunology and Rheumatology
Basic Science
Clinical Research
Developmental Biology
Genomics/Epigenomics
Global Neonatal & Children's Health
Immunizations/Delivery
Infectious Diseases

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

- 1) Neonatal sepsis club (Ofer Levy is a co-organizer)
- 2) Vaccine/immunization/vaccinology sessions
- 3) Sessions focusing on Systems biology/omics /genomics/epigenomics

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr. Olubukola "Bukky" Idoko is a pediatrician from Nigeria who did her pediatric research at MRC Gambia (West Africa). She is a member of the European Society of Infectious Disease (ESPID).

Dr. Joann Arce is an accomplished bioinformatician, lead of the Precision Vaccine Program Data Management and Analysis Core, and is a member of American Association of Immunology (AAI) and American Society of Microbiology (ASM).

Dr. Nelly Amenyogbe is a postdoctoral fellow in the Department of Microbiology and Immunology at Dalhousie University.

Overall, inclusion of these scientists will help foster bridges between PAS, SPR, and other international organizations dedicated to the study of immunology and infectious diseases.

8. **Does this submission involve one or more specialties or disciplines?**

Yes, the Immune Development in Early Life (IDEAL) session is multi-disciplinary. The session will define immune development as it relates to infectious diseases, immunization, nutrition, microbiome, probiotics etc. It is also relevant to Global Health, Asthma and clinical research .

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

Our session has not been presented at any other conference. (Aspects of our session have been presented at a closed meeting at NIH/NIAID at the annual NIH U19 program meeting (Rockville, Maryland) but not at any conference.

10. **Additional comments**

The work is global in scale with longitudinal infant cohorts studies in Canada, U.S., Europe, Africa and Australasia and involves cutting edge genomic/systems biology science and translational pediatrics towards new approaches to redirect immune development towards health. Great opportunity for PAS to expand its reach and impact.

Of note, Dr. Levy discussed the concept of this session at PAS 2024 (Toronto) with PAS leadership including Kate Culliton and Eileen Fenton who expressed both interest and support.

Presentation Titles and Durations

Introduction to multi-omic systems biology to define immune development in early life

Ofer Levy, MD, PhD

Duration of Presentation in Minutes

10

Immune development in premature infants

Liza Konnikova, MD PhD

Duration of Presentation in Minutes

12

Immunometabolome Induction in Early Life Vaccination

Joann Arce, PhD

Duration of Presentation in Minutes

12

Ontogeny of the newborn microbiome in two diverse populations: Findings from the EPIC Consortium

Nelly Amenyogbe, PhD

Duration of Presentation in Minutes

12

Friends and foes of early life immunity: The neonatologist's perspective

Asimena Angelidou, MD, PhD

Duration of Presentation in Minutes

12

Iron and early immune development

Olubukola T. Idoko, MD PhD

Duration of Presentation in Minutes

12

Question and Answer

Octavio Ramilo, MD

Duration of Presentation in Minutes

20

(63) Proposal ID: 1910084

It's Science: The Case for Coaching Across the Continuum

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Maryellen Gusic**

Score: **0**

Participant(s)

Maryellen E. Gusic, MD

Position:

Senior Advisor, Educational Affairs; Professor of Pediatrics

Organization:

Medical University of South Carolina College of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

APA, APS

Amy Fleming, MD, MSChPE (she/her/hers)

Position:

Sr. Assoc Dean for medical student and alumni affairs

Organization:

Vanderbilt University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Sandra Sanguino, MD MPH (she/her/hers)

Position:

Senior Associate Dean Medical Education

Organization:

Northwestern University Feinberg School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

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

APA

Rebecca Blankenburg, MD, MPH (she/her/hers)

Position:

Clinical Professor; Assistant Dean of GME; Associate Chair of Education

Organization:

Stanford University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

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

Caroline Rassbach, MD, MA Ed

Position:
Clinical Professor

Organization:
Stanford University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Elaine E. Schulte, MD, MPH (she/her/hers)

Position:
Vice Chair, Academic Affairs and Faculty Development - Professor of
Pediatrics

Organization:
The Children's Hospital at Montefiore - Albert Einstein College of
Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Karen Wilson, MD, MPH (she/her/hers)

Position:
Professor

Organization:
University of Rochester School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Coaching is increasingly being used to support the personal and professional development of medical students, trainees, and academic faculty. In a 2017 review, Lovell noted the need for rigorous research to advance what is known about coaching in medical education. Since that time, research has demonstrated: the impact of coaching on learners' clinical and procedural competence, communication skills, growth mindset, professional identity formation, and well-being. Additionally, coaching has been found effective as a tool to support career progression and foster the vitality of faculty. Recent literature describing outcomes of coaching programs and of coaching "in the

moment” has both affirmed the underlying theoretical constructs and fostered a shared understanding among educators about best practices for effective implementation.

After an interactive poll to explore attendees’ experience with coaching, presenters will provide a critical review of the literature related to coaching for medical students, residents/fellows, and faculty. Presenters, each of whom have experience and expertise as coaches and as leaders of coaching programs at their institutions and/or within academic pediatric and professional medical organizations, will highlight studies in pediatrics and to define key coaching principles, outline best practices for application, and delineate gaps in what is known. The latter will be used to prompt small group discussion amongst attendees to explore a future research agenda to fill existing gaps in the literature. Opportunities for future collaborative efforts related to coaching will be evaluated (24 minutes). Questions curated throughout will be addressed by a faculty panel at the end of the session.

Learning Objectives

1. Define various types of coaching and the theories underlying their applications in education and professional development
2. Examine the literature supporting the use of coaching for medical students, trainees and faculty
3. Develop a potential research agenda to advance what is known about the effectiveness of coaching in academic pediatrics

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Educators, Learners, Educational Administrative Leaders, Faculty Development Professionals
3. **Tracks**
Academic and Research Skills
Career Development
Medical Education
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

- One speaker may have a conflict on Saturday
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
 7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
 8. **Does this submission involve one or more specialties or disciplines?**
General Pediatrics, Hospital Medicine
 9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
 10. **Additional comments**
The presenters are leaders/former leaders of COMSEP, APPD, APA, and have led coaching programs within these organizations and within the APS and AAP.

Presentation Titles and Durations

Coaching in education and professional development: Applications and theoretical foundations; Audience discussion; Q&A

Maryellen E. Gusic, MD

Duration of Presentation in Minutes

54

Coaching in medical student education: Effective interventions and outcomes for learners I

Amy Fleming, MD, MSChPE

Duration of Presentation in Minutes

6

Coaching in medical student education: Effective interventions and outcomes for learners II

Sandra Sanguino, MD MPH

Duration of Presentation in Minutes

6

Coaching for residents and fellows: Best practices and impact for trainees I

Rebecca Blankenburg, MD, MPH

Duration of Presentation in Minutes

6

Coaching for residents and fellows: Best practices and impact for trainees II

Caroline Rassbach, MD, MA Ed

Duration of Presentation in Minutes

6

Coaching faculty: Fostering personal and professional growth I

Elaine E. Schulte, MD, MPH

Duration of Presentation in Minutes

6

Coaching faculty: Fostering personal and professional growth II

Karen Wilson, MD, MPH

Duration of Presentation in Minutes

6

(64) Proposal ID: 1932170

The most vulnerable: How poverty, race, and geography intersect as challenges to health equity for rural children

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Alison Holmes**

Score: **0**

Participant(s)

Alison V. Holmes, alison.v.holmes@hitchcock.org (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Geisel School of Medicine at Dartmouth

Role:

Submitter;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

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

AAP, APA, APS, SPR

JoAnna Leyenaar, MD PhD MPH (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Dartmouth Health

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

SPR

Corrie E. McDaniel, DO (she/her/hers)

Position:

Associate Professor

Organization:

University of Washington and Seattle Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Sara Sanders, MD (she/her/hers)

Position:

Pediatric Hospitalist

Organization:

Arkansas Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Samantha House, DO, MPH

Position:
Associate Professor of Pediatrics

Organization:
Dartmouth Health Children's

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

To address health equity in pediatrics, we must pay attention to the disparities in access for children residing in rural communities. Child poverty is higher in rural counties, and children there are more likely to be insured through Medicaid. Reported rates of child maltreatment are higher in rural counties. Adolescent suicide rates and prevalence of firearms are double those in non-rural areas. Access to pediatric inpatient and specialist care present substantial challenges. Pediatric medical transport covers large distances has always been

limited and its supply has further decreased in recent years. Black and Native American children are the most likely to reside in rural counties that lack pediatric services.

In this session, national leaders in pediatric health services research and inpatient care from geographically distinct regions will discuss how these challenges impact children and families and how the academic pediatric workforce and rural children's hospitals are rising to meet the needs. While disparities, inequities, shortages, and maldistribution have all worsened over the past decade, academic pediatrics has been able to do what it does best—study, innovate, and advocate to address inequities for rural children. Research and clinical service innovations will be presented from northern New England, the rural South, and the Pacific Northwest.

Learning Objectives

1. Discuss the epidemiology, demographics and health disparities that impact rural children and families
2. Describe the challenges of developing and maintaining inpatient and specialty pediatric services that are accessible for rural families
3. Learn and apply innovations in pediatric medical transport, telemedicine support of rural pediatric units, and responses to inpatient mental health services

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Academic pediatricians interested in health services research, care for the underserved, and care innovations
3. **Tracks**
Advocacy
Children with Chronic Conditions
Health Services Research
Hospital Medicine
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

PHM SIG

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Health Services Research and Hospital Medicine
9. **If your session was presented at another conference, please describe the conference and presentation.**
No
10. **Additional comments**
N/A

Presentation Titles and Durations

The most vulnerable: A national view of distribution of services and barriers to care for rural children

JoAnna Leyenaar, MD PhD MPH

Duration of Presentation in Minutes

15

The Pacific Northwest: Sustainability of pediatric inpatient care in rural hospitals

Corrie E. McDaniel, DO

Duration of Presentation in Minutes

15

The South: Respiratory surges and bed shortages

Sara Sanders, MD

Duration of Presentation in Minutes

15

New England: Rural inpatient care delivery and value improvement opportunities

Samantha House, DO, MPH

Duration of Presentation in Minutes

15

(65) Proposal ID: 1914714

Riding the AI Wave: How Large Language Models May Impact Pediatric Medicine

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Kristyn Beam**

Score: **0**

Participant(s)

Kristyn S. Beam, MD MPH (she/her/hers)

Position:

Assistant Professor of Pediatrics, Neonatologist

Organization:

Harvard Medical School, Beth Israel Deaconess Medical Center

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

James S. Barry, MD, MBA (he/him/his)

Position:

Professor of Pediatrics, Co-Founder NeOMINDAI and Clinical Leaders Group

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, SPR

Srinivasan Suresh, MD, MBA, FAAP

Position:

Professor of Pediatrics

Organization:

University of Pittsburgh School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

AAP, SPR

Session Description

Session Description

The integration of Generative Artificial Intelligence (AI) and Large Language Models (LLMs) into the field of pediatrics offers unique opportunities for enhancing medical practice, patient and family experience, education, and

research to benefit clinicians, our patients, and their caregivers. This session will explore the multifaceted applications of LLMs in pediatrics, offering attendees a comprehensive overview from foundational concepts to concrete use examples.

The session begins with an introduction to the basics of AI and LLMs, explaining their underlying technology and development process. Attendees will gain a clear understanding of commonly available LLMs, how they are developed, and ethical considerations, including potential biases and limitations inherent in these systems.

Building on this, the session will delve into practical applications of LLMs, including the use of LLMs for image creation and analysis, and the importance of effective prompting for maximizing their utility in clinical settings in the care of children. Specific techniques and best practices will be highlighted to ensure attendees can effectively leverage these tools in their practice.

As a specific use case, the session will explore the role of LLMs in medical education, showcasing how they can serve as powerful tools for research, personalized tutoring, simulation, and facilitate innovative learning experiences. Attendees will learn about the concept of personalized GPTs, which tailor LLM outputs to specific educational or clinical needs.

The session will conclude with a panel discussion, providing a platform to address audience questions and share experiences.

Learning Objectives

1. Understand the Fundamentals of Large Language Models (LLMs).
2. Apply Practical Techniques for Using LLMs in Pediatric Clinical Care, Research, and Educational Settings.
3. Evaluate the Role of LLMs in Medical Education and Research.

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
Academic Pediatricians interested in using LLMs to support medical education, research, and general practice.
3. **Tracks**
Artificial Intelligence

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
AI in Neonatology PreConference Workshop
NeoMIND AI networking session
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Topic is Artificial Intelligence involving Neonatology, Pediatric Critical Care Medicine, Pediatric Emergency Medicine, Medical Informatics, and Medical Education
9. **If your session was presented at another conference, please describe the conference and presentation.**
Not presented anywhere else.
10. **Additional comments**

Presentation Titles and Durations

Introduction The Basics of Large Language Models: How Do They Work? Q&A
Kristyn S. Beam, MD MPH

Duration of Presentation in Minutes

30

Unlocking Potential with LLM Prompting Q&A
James S. Barry, MD, MBA

Duration of Presentation in Minutes

30

Enhancing Pediatric Medical Education with Large Language Models Q&A
Srinivasan Suresh, MD, MBA, FAAP

Duration of Presentation in Minutes

30

(66) Proposal ID: 1922824

Meditation as a clinical skill: Reducing burnout and teaching compassion in resident education

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Jason Tsuchlis**

Score: **0**

Participant(s)

Jason T. Tsuchlis, MD, MS

Position:

Pediatric Hospital Medicine Fellow

Organization:

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

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Catherine Ludwig, MD (she/her/hers)

Position:

Fellow

Organization:

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

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Duncan Henry, MD (he/him/his)

Position:

Associate Professor

Organization:

University of California, San Francisco, School of Medicine

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Elizabeth L. Seashore, MD (she/her/hers)

Position:

Assistant Professor, Pediatric Palliative Care and Pediatric Oncology

Organization:

UCSF Benioff Children's Hospital San Francisco

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Mariana Glusman, MD (she/her/hers)

Position:
Professor of Pediatrics

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

Role:

Chair

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Meditation has existed for thousands of years in numerous forms. Since the 1970s, researchers have been studying the practice, finding mental and physiologic health benefits. Moreover, mindfulness practices as a forms of meditation have gained increasing popularity and use in the general public. Through hypothesis-driven research, our understanding of how mindfulness affects us in the near and long term has deepened. Mediation has been shown to reduce stress, improve focus and sleep, reduce anxiety and symptoms of

PTSD, and lower blood pressure. Yet meditative practices are diverse, and studies have shown different brain activity and outcomes when compared to each other. Mindfulness programs are finding a role in high stress occupations, including medicine. While it is well documented that burnout in healthcare is caused by systems issues and must involve systems solutions, studies demonstrate that educating physicians in personal wellness practices such as meditation and self-compassion can also be helpful. Pediatrics residents are uniquely positioned to have to engage with highly distressing events as a part of their daily job which is made even more challenging by working long hours with limited sleep. We propose a three-lecture Symposium. First, we focus on our current knowledge of meditative practice, with particular attention to neurocognitive and psychological changes. Second, we will highlight what has been attempted in residency programs, and the results of those interventions. Lastly, we will discuss how we can pull from our understanding of mindfulness and meditative practice to tailor an evidence-based mindfulness curriculum for a pediatrics residency program.

Learning Objectives

1. identify different mindfulness and meditative techniques and understand their potential affects on individuals in high-stress occupations.
2. begin planning their own mindfulness and meditation curriculum for their pediatrics residencies.
3. find their breath and start a personal meditative practice.

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

The target audience for this symposium would be program directors, associate program directors, chief residents, and faculty and staff involved in graduate medical education. Additionally, we hope to attract providers in pediatric sub-specialties who see large amounts of difficult cases, including child abuse pediatrics, critical care, palliative medicine, and oncology and are likely to work with residents as they encounter these scenarios early in their careers.

3. **Tracks**

Child Abuse & Neglect
Critical Care
Hematology/Oncology
Medical Education
Mental Health

Neonatology
Palliative Care
Wellness and Well-being

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
We have no scheduling conflicts.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes.
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Putting the puzzle together: How to build an evidence-based meditation curriculum for pediatrics residents

Jason T. Tschlis, MD, MS

Duration of Presentation in Minutes

30

Peeking inside: What we know about how meditation can reduce stress and improve resiliency

Catherine Ludwig, MD

Duration of Presentation in Minutes

30

State of mindfulness: How have meditation interventions fared amongst medical trainees?

Elizabeth L. Seashore, MD

Duration of Presentation in Minutes

30

(67) Proposal ID: 1921090

Elevating Father Inclusion in Pediatric Research

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **John James Parker**

Score: **0**

Participant(s)

John James F. Parker, MD, MS (he/him/his)

Position:

Assistant Professor

Organization:

Lurie Children's Hospital and Northwestern University

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

APA

Craig Garfield, MD, MAPP (he/him/his)

Position:

Professor

Organization:

Lurie Children's Hospital of Chicago

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Teresa M. O'Connor, MD, MPH (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Baylor College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APS, SPR

Cameron N. Boyd, MD (he/him/his)

Position:

Neonatal Perinatal Medicine Fellow

Organization:

Northwestern University The Feinberg School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
Black or African American

Gender
Male

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

Shawna J. Lee, PhD, MSW, MPP (she/her/hers)

Position:
Professor, Associate Dean for Faculty Affairs

Organization:
University of Michigan

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

There is growing evidence demonstrating that fathers play an important role in the health and wellbeing of children and families. Yet, fathers are overwhelmingly underrepresented in pediatric population health and health services research- 1% of child health studies include only fathers, compared with 57% that include mothers only. As fathers continue to increase the amount of time they spend on childcare activities, it is critical to characterize father's role in family health. Furthermore, by including fathers in child health research, studies can better understand pathways for pediatric health outcomes and identify public health implications, and clinical intervention opportunities. The

goal of this scholarly session is to share methods, viewpoints, and advice for including fathers in child health research and programs. This session will offer complementary expertise from Drs. Craig Garfield, Teresia O'Connor, Cameron Boyd, and Shawna Lee. Dr. Garfield will share his experience creating the Pregnancy Risk Assessment Monitoring System (PRAMS) for Dads, which added fathers to a longstanding public health surveillance program. Dr. O'Connor will describe her approach to designing Papas Saludables, Niños Saludables, weight loss intervention of father-child dyads. Dr. Boyd will share his experience conducting support groups of fathers with newborns in the NICU. Dr. Lee will discuss her experience working with fathers in community based research and parenting interventions, including "Mobile Dad:" A technology application to enhance father engagement in childcare. This session will finish with a Q&A session that offers audience members to ask the speakers' advice on including fathers in research or programs.

Learning Objectives

1. Explain multiple ways fathers contribute to child outcomes
2. List strategies to improve recruitment and retention of fathers in research
3. Review approaches to designing father-tailored public health data collection, parenting support groups, community based research, and clinical interventions

Scholarly Session Questions

1. **Audience Size**
75
2. **Target audience**
Child Health Researchers who are interested in involving fathers or improving recruitment of fathers in their studies.
3. **Tracks**
Academic and Research Skills
Clinical Research
Community Pediatrics
General Pediatrics
Health Services Research
Public Health
Social Media & Technology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

Dr. Parker is part of a workshop proposal for Applying for a Job in Academic Medicine submitted by Dr. Lauren Starnes. Dr. Parker and Dr. Boyd will be submitting an abstract to PAS. Dr. O'Connor will participate in the SPR/APS Journey's mini-Gordon Conference on 4/25.

6. Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?

No

7. If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.

Dr. Shawna Lee is not currently a member of any of these organizations. Dr. Lee is a professor and associate dean for faculty affairs at the University of Michigan School of Social Work. She is also currently the director of the Parenting in Context Research Lab and director of the Program Evaluation Group at the UM-SSW. She serves as co-Editor-in-Chief for the academic journal Children & Youth Services Review. Her research is focused on child maltreatment, fathers' parenting, father-child relationships, parenting stress and family functioning, and parental discipline and has resulted in high societal impact, with major advocacy organizations such as the American Academy of Pediatrics, the American Psychological Association (APA) and the American Professional Society. Dr. Lee's social work and psychology background provides an important multidisciplinary perspective for this session.

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

Yes, this submission involves all specialties and disciplines in pediatric research since fathers can be included in all research settings.

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

N/a

10. Additional comments

Presentation Titles and Durations

Including fathers in public health surveillance: Key insight from the Pregnancy Risk Assessment Monitoring System for Dads

Craig Garfield, MD, MAPP

Duration of Presentation in Minutes

15

A father-tailored weight loss intervention utilizing a father-child dyads:
Description of Papas Saludables, Niños Saludables

Teresia M. O'Connor, MD, MPH

Duration of Presentation in Minutes

15

Engaging fathers in the postpartum period: lessons learned from support groups of Dads with newborns in the NICU

Cameron N. Boyd, MD

Duration of Presentation in Minutes

15

Approaches to including fathers in community-based maternal-child health programs

Shawna J. Lee, PhD, MSW, MPP

Duration of Presentation in Minutes

15

(68) Proposal ID: 1930365

Advocacy for Pediatric Research in a Climate Hostile Toward Science

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Shetal Shah**

Score: **0**

Participant(s)

Shetal Shah, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

New York Medical College

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

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

AAP, APA, SPR

Tina L. Cheng, MD, MPH (she/her/hers)

Position:

Professor and Chair of Pediatrics

Organization:

Cincinnati Children's Hospital Medical Center, Univ of Cincinnati

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APA, APS, SPR

Matt Mariani (he/him/his)

Position:

Director, Federal Advocacy

Organization:

American Academy of Pediatrics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Thomas Mariani, PhD (he/him/his)

Position:

Professor

Organization:

University of Rochester

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Co-sponsors: Pediatric Policy Council, Society for Pediatric Research

From the under-representation of children in large-scale clinical trials to potential re-structuring of the National Institutes of Health to eliminate the NICHD, there exist many active policy issues which necessitate the engagement of pediatric researchers. Pediatric researchers are ideally poised to use their expertise to engage policymakers seeking on scientific issues.

In this session, an expert group of pediatric researchers and advocates will review current threats and opportunities for scientific advocacy, including government funding, and recent attempts to curtail the use of animal and fetal cell experimental models. As all of these issues are ongoing, attendees will be coached on how to reach out to policy-makers to ensure their decision align with the best scientific practice. Finally, we will review how to efficiently integrate advocacy for science into a busy academic schedule.

Learning Objectives

1. To review current policy issues affecting pediatric scientists/researchers and their potential impacts on child health research.
2. Review the process providing input and advocacy to better inform current issues in pediatric science.
3. To understand how to implement science advocacy into your career as a pediatric researcher.

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**
Medical Students, Residents, Fellows, Pediatric Researchers at any career stage
3. **Tracks**
Academic and Research Skills
Advocacy
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Pediatric Policy Events (State of the Art Plenary and Legislative Breakfast)
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Yes, topic is advocacy in research and includes subjects related to research funding, experimental models and reporting results -- relevant to all fields of work.
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**
This session is the ONLY advocacy session which will focus exclusively on issues directly related to the practice of pediatric research, including availability of trial data, funding, curtailment of certain research models etc.

Presentation Titles and Durations

Welcome: Science Under Threat and 10-Simple Steps to Integrate Science Advocacy Into Your Career
Shetal Shah, MD

Duration of Presentation in Minutes

20

The Lasting Scars of a Pandemic: Threats to the Pediatric Research Workforce

Tina L. Cheng, MD, MPH

Duration of Presentation in Minutes

20

Pressing Federal Policy Issues for Pediatric Research: NIH Reorganization and Appropriations

Matt Mariani

Duration of Presentation in Minutes

20

Threats to the Use of Animal, Stem Cell and Fetal Cell Models

Thomas Mariani, PhD

Duration of Presentation in Minutes

20

(69) Proposal ID: 1918205

Health Equity Integration within Pediatric Research Settings: Experiences, Opportunities and Lessons Learned from US Children's Hospitals

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Raquel Hernandez**

Score: **0**

Participant(s)

Megan Bair-Merritt, MD, MSCE (she/her/hers)

Position:

Professor of Pediatrics and Chief Scientific Officer

Organization:

Boston Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

John D. Cowden, MD, MPH (he/him/his)

Position:

Professor of Pediatrics, Health Equity Integration Project Leader

Organization:

Children's Mercy Kansas City

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Darcy Thompson, MD, MPH

Position:

Professor, Clinical Research Director

Organization:

University of Colorado, Children's Hospital Colorado

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

APA

Erin Sandene, MS, BSN, RN, CCRC (she/her/hers)

Position:

Director of Research Operations and Education

Organization:

Children's Hospital Colorado

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Raquel G. Hernandez, MD, MPH (she/her/hers)

Position:
Associate Professor of Pediatrics, Director for the Center for Pediatric Health Equity Research

Organization:
Johns Hopkins All Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Maya Ragavan, MD, MPH, MS (she/her/hers)

Position:
Associate Professor of Pediatrics; Associate Vice Chair Diversity Equity and Inclusion Research

Organization:
University of Pittsburgh School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Session Description

Session Description

In June 2024, the FDA issued a guidance statement titled, “Diversity Action Plans to Improve Enrollment of Participants from Underrepresented Populations in Clinical Studies,” which targets the inclusion of historically underrepresented populations to “improve the strength and generalizability of the evidence for the intended use population.” In parallel, multiple funding agencies now require proposals to include community partnerships or diversity action plans within their research design or recruitment strategy to be considered for funding. While these recommendations are intended to address long-standing disparities in clinical research, little guidance has been offered to clinical investigators or research leadership on the resources, processes, and ethical considerations needed to effectively promote health equity within research settings and meet these new standards. Health equity integration (HEI) offers an approach for incorporating diversity, inclusion, and health equity perspectives into systems fundamentally, rather than adding them on top of existing structures and processes. Opportunities for academic organizations to share their experiences in efforts related to HEI in the research setting could promote collaboration and inform best practices.

This panel discussion will include clinical research leaders with expertise in health equity from four children’s hospitals across the US who participate in the Health Equity in Pediatric Research (HEIPR) Collaborative. Each panelist will detail unique and ongoing HEI efforts and strategies within the research setting, including opportunities for generalizability and lessons learned. Each panelist will also discuss how their organization is taking recent FDA and other mandates into future research-related processes and policies. A question-and-answer session will follow.

Learning Objectives

1. Be informed on the 2024 FDA Diversity Action Plan policy statement for enhancing diversity in clinical research
2. Recognize and understand the concept of health equity integration (HEI) and consider its application in clinical research settings
3. Evaluate models and strategies for HEI from four pediatric hospital research centers to inform practices for applying HEI within your organization

Scholarly Session Questions

1. **Audience Size**

75

2. **Target audience**

Clinical investigators, health service researchers, public health researchers, health equity leaders, institutional review board members, and research organizational leaders (e.g. Vice Dean, Associate Deans of Research)

3. **Tracks**

Academic and Research Skills

Clinical Bioethics

Clinical Research

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

Health Services Research

Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Three of the speakers on the panel have submitted another workshop proposal, "Language Access to Language Justice: Transforming Pediatric Academic Systems," for consideration. Additionally, our full panel will not be available until April 26th and onward.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

One of our speakers is a clinical research nurse by background. She is a leader within her research organization and, accordingly, a panelist for this session.

8. **Does this submission involve one or more specialties or disciplines?**

The topic of Health Equity Integration in research settings involves the following disciplines: academic and research skills, clinical research, public health, health services research, diversity equity and inclusion, research bioethics, community-based research

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

N/A

10. **Additional comments**

Presentation Titles and Durations

FDA Guidance on Diversity in Clinical Research: What Does this Mean for Pediatric Researchers and Academic Settings?

Megan Bair-Merritt, MD, MSCE

Duration of Presentation in Minutes

10

Language Equity Integration in a Research Enterprise: Translation Support for Researchers and Qualified Bilingual Staff

John D. Cowden, MD, MPH

Duration of Presentation in Minutes

20

System-Level Changes to Support Health Equity Integration within Centralized Research Services (Part 1)

Darcy Thompson, MD, MPH

Duration of Presentation in Minutes

8

System-Level Changes to Support Health Equity Integration within Centralized Research Services (Part 2)

Erin Sandene, MS, BSN, RN, CCRC

Duration of Presentation in Minutes

7

Building, Training, and Maintaining a Community Research Advisory Board to Empower Community-Based Participatory Research

Raquel G. Hernandez, MD, MPH

Duration of Presentation in Minutes

15

Community Vitality Collaborative: A Community-Academic Partnership to
Promote Trustworthiness of Covid-19 Vaccine Trials

Maya Ragavan, MD, MPH, MS

Duration of Presentation in Minutes

15

(70) Proposal ID: 1905586

Hawks vs Doves: A Debate on Common Controversies in the Management of Acute Respiratory Illnesses in Hospitalized Children

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Alan Schroeder**

Score: **0**

Participant(s)

Alan Schroeder, MD (he/him/his)

Position:

Clinical Professor of Pediatrics

Organization:

Stanford University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APA

Matthew D. Garber, MD (he/him/his)

Position:

Professor

Organization:

UF COM-Jacksonville

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Agbim Chisom, MD, MSHS (she/her/hers)

Position:

Clinical Assistant Professor

Organization:

Stanford University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP

Amy Tyler, MD, MSCS (she/her/hers)

Position:

Associate Professor

Organization:

Nationwide Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Ricardo A. Quinonez, MD, FAAP, FHM (he/him/his)

Position:
Associate Professor

Organization:
Texas Children's Hospital

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Male

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

Suchitra Rao, MBBS, MSCS

Position:
Associate Professor

Organization:
University of Colorado School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Hannah Bassett, MD

Position:
Clinical Associate Professor

Organization:
Stanford University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Respiratory illnesses are leading drivers of hospitalization and ED visits in children. For many of these conditions, there is ongoing debate over the evidence-base and the appropriateness of common interventions. The overuse of unnecessary interventions can drive excessive costs and patient harm, while underuse of beneficial interventions can lead to suboptimal patient outcomes.

This pro/con debate session will feature experts representing Pediatric Hospital Medicine, Pediatric Critical Care, Pediatric Infectious Disease, and Pediatric Emergency Medicine, and will focus on three timely controversies surrounding

the management of children with acute respiratory illnesses. First, for children with respiratory distress, the use of high-flow nasal canula (HFNC) has increased astronomically over the last decade, with associated increases in ICU admissions and hospital LOS. Although some trials suggest benefit of HFNC in various circumstances, these trials were generally unblinded and allowed for crossover, making their interpretation challenging. Second, for bronchiolitis, guidelines recommend against routine use of pharmacotherapies, yet bronchodilators and other treatments continue to be used frequently – even more so following the pandemic. Third, for children hospitalized with influenza, although national guidelines suggest routine treatment with antivirals, there is limited evidence to support these recommendations, and adherence is low.

This educational, entertaining, and provocative debate will feature a Q&A following each debate topic. Speaker assignment to the “hawk” vs “dove” side was determined by a coin flip. The debate winners will be decided by vote movement from audience polling before and after each session.

Learning Objectives

1. Review key trials on HFNC in children with bronchiolitis and other conditions and understand their limitations.
2. Understand the basis for professional society recommendations against bronchodilators in bronchiolitis and appreciate the arguments supporting a trial of bronchodilators in some patients.
3. Review professional guidelines on antiviral use in children hospitalized with influenza and analyze recent studies that have supported the need for a randomized trial

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Anyone who manages respiratory illnesses in the ED or inpatient setting.
3. **Tracks**
Academic and Research Skills
Critical Care
Emergency Medicine
General Pediatrics
Hospital Medicine
Infectious Diseases
Pulmonology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Healthcare Value SIG
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
n/a
8. **Does this submission involve one or more specialties or disciplines?**
Yes - very multidisciplinary (PHM, PEM, PICU, Peds ID, pulmonology)
9. **If your session was presented at another conference, please describe the conference and presentation.**
n/a
10. **Additional comments**
n/a

Presentation Titles and Durations

Introduction/Setting the debate stage

Alan Schroeder, MD

Duration of Presentation in Minutes

5

High-Flow Nasal Canula (HFNC) for respiratory support: HFNC should be given to all children with respiratory distress (Hawk)

Matthew D. Garber, MD

Duration of Presentation in Minutes

10

HFNC for respiratory support: HFNC is woefully overused (Dove)

Agbim Chisom, MD, MSHS

Duration of Presentation in Minutes

15

Treatment of bronchiolitis: Albuterol does work in bronchiolitis□we just need to find the right patients (Hawk)

Amy Tyler, MD, MSCS

Duration of Presentation in Minutes

15

Treatment of bronchiolitis: When will we finally agree that nothing works?

(Dove)

Ricardo A. Quinonez, MD, FAAP, FHM

Duration of Presentation in Minutes

15

Antivirals for children hospitalized with influenza: All hospitalized children should get treated (Hawk)

Suchitra Rao, MBBS, MSCS

Duration of Presentation in Minutes

15

Antivirals for children hospitalized with influenza: Oseltamivir (guidelines) make(s) me nauseous (Dove)

Hannah Bassett, MD

Duration of Presentation in Minutes

15

(71) Proposal ID: 1921336

Identifying and Managing Functional Disorders

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Miles Weinberger**

Score: **0**

Participant(s)

Miles Weinberger, MD (he/him/his)

Position:

Volunteer Visiting Clinical Professor of Pediatrics

Organization:

University of California San Diego

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

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

AAP, APS

Session Description

Session Description

Functional disorders are those without an organic or physical basis. They are characterized by chronic or recurrent physical symptoms with different levels of disability disproportionate to a primary biomedical pathology. These disorders tend to present primarily with chronic medically unexplained physical complaints. It is estimated that functional disorders represent about 20% of primary care consultations. They include all major systems. Respiratory, neurological, muscular, and gastrointestinal disorders. Chronic idiopathic cough, dyspnea, fainting, stomach pain, headaches, tics., and many more. The presenters will provide means of distinguishing functional disorders from those associated with biomedical pathology. Respiratory, gastrointestinal, and neurological specialists will be selected to discuss some of the more common symptomatic disorders.

Learning Objectives

1. distinguish functional symptoms from similar symptoms with biomedical pathology. Is.
2. manage a functional disorder without multiple tests and trials.
3. explain to patients and family the nature of the disorder.

Scholarly Session Questions

1. **Audience Size**
300
2. **Target audience**
Primary care pediatricians
3. **Tracks**
Allergy, Immunology and Rheumatology
Asthma
Developmental and Behavioral Pediatrics
General Pediatrics
Medical Education
Mental Health
Pulmonology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
non known

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes, pulmonology/allergy; t; gastroenterologist; pediatric hypnotherapist
9. **If your session was presented at another conference, please describe the conference and presentation.**
no
10. **Additional comments**

Presentation Titles and Durations

Functional respiratory disorders

Miles Weinberger, MD

Duration of Presentation in Minutes

40

(72) Proposal ID: 1906151

When to Consider Transcatheter Device Closure of the Patent Ductus Arteriosus in Premature Infants: Important Updates in 2025

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Brian Rivera**

Score: **0**

Participant(s)

CARL BACKES, MD. MBA (he/him/his)

Position:

MD

Organization:

Carl Backes, MD, Nationwide Childrens

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Shazia Bhombal, MD

Position:

Associate Professor

Organization:

Children's Healthcare of Atlanta/Emory University

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, SPR

Souvik Mitra, MD, PhD, FRCPC (he/him/his)

Position:

Associate Professor

Organization:

University of British Columbia Faculty of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

AAP, SPR

Dinushan C. Kaluarachchi, MBBS

Position:

Associate Professor

Organization:

University of Wisconsin School of Medicine and Public Health

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Philip T. Levy, MD (he/him/his)

Position:
Associate Professor of Pediatrics

Organization:
Boston Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Rachael M. Hyland, MD (she/her/hers)

Position:
Clinical Assistant Professor

Organization:
University of Iowa Stead Family Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Shyam Sathanandam, MD

Position:
Professor of Pediatrics

Organization:
University of Tennessee Health Science Center College of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Valerie Y. Chock, MD, MS Epi

Position:
Professor of Pediatrics

Organization:
Stanford University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Patrick J. McNamara, MB, BCH, BAO, DCH, MSc (Paeds), MRCP, MRCPCH, FASE (he/him/his)

Position:
Professor of Pediatrics & Internal Medicine

Organization:
University of Iowa Stead Family Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Patent ductus arteriosus (PDA), annually affecting approximately >24,000 US infants and >150,000 in the developed world, is the most commonly diagnosed cardiovascular condition in preterm infants. Despite decades of research, controversy about the optimal treatment of the PDA during infancy remains. Recently, the US Food and Drug Administration (US-FDA) approved a transcatheter PDA closure device among infants weighing >700 grams and a postnatal age of >3 days. However, questions persist about the adequacy of US-FDA approval to justify widespread dissemination of the device. Mixed results on the safety, feasibility, and efficacy of transcatheter ductal closure has led to uncertainty regarding patient selection and optimal timing for this emerging treatment. Given healthcare professionals lack evidence-based data

to guide their clinical management, this session will: i) inform on best available evidence and practice; ii) identify fundamental gaps in existing data to define research priorities.

Learning Objectives

1. Describe regional and national hospital variation in transcatheter PDA closure treatment.
2. Determine the strengths and limitations of evidence for transcatheter closure among preterm infants.
3. Discuss the need for clinical equipoise regarding treatment options, highlighting the value of pragmatic clinical trials to inform the practice of equity-focused, evidence-based medicine.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Clinicians involved in the management and care of infants with a patent ductus arteriosus (PDA)
3. **Tracks**
Cardiology
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None, at present
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Topic involves Neonatology and Cardiology

9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Introduction - Transcatheter PDA Closure: The Crux of the Medical Debate
CARL BACKES, MD. MBA

Duration of Presentation in Minutes

5

Time to Move Away from Drug Treatment - When to Offer Transcatheter Closure of the PDA

Souvik Mitra, MD, PhD, FRCPC

Duration of Presentation in Minutes

15

Changing Patterns of Transcatheter PDA Closure: Insights from the NICHD Neonatal Research Network

Dinushan C. Kaluarachchi, MBBS

Duration of Presentation in Minutes

15

Pre-procedural Assessment: A Standardized Approach to Identifying Candidates for Transcatheter PDA Closure

Philip T. Levy, MD

Duration of Presentation in Minutes

15

Impact of Center and Operator Experience on Patient Outcomes

Rachael M. Hyland, MD

Duration of Presentation in Minutes

15

Early Adopters: Lessons Learned from Over 1000 Transcatheter PDA Closures

Shyam Sathanandam, MD

Duration of Presentation in Minutes

15

Anticipatory Perioperative and Postoperative Management for Transcatheter PDA Closure

Valerie Y. Chock, MD, MS Epi

Duration of Presentation in Minutes

15

A Path Forward: Fundamental Questions and Research Priorities in the Use of Transcatheter Closure Among Preterm Infants

Patrick J. McNamara, MB, BCH, BAO, DCH, MSc (Paeds), MRCP, MRCPCH,
FASE

Duration of Presentation in Minutes

15

(73) Proposal ID: 1928621

Urgent Policy Priorities for Children's Health and Healthcare

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Glenn Flores**

Score: **0**

Participant(s)

Glenn Flores, M.D. (he/him/his)

Position:

Chair of Pediatrics, Sr. Associate Dean of Child Health, and Physician-in-Chief

Organization:

University of Miami School of Medicine/Holtz Children's Hospital

Role:

Submitter;Chair

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Male

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

AAP, APA, APS, SPR

Bruce D. Lesley, MA

Position:

President

Organization:

First Focus on Children

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Alex Ortega, PhD

Position:

Dean & Professor

Organization:

University of Hawaii at Manoa

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Male

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

Not a member of any of these organizations

Joshua Green, MD (he/him/his)

Position:

Governor of Hawaii

Organization:

University of Hawaii, John A. Burns School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

By a 71-17% margin, US voters overwhelmingly agree “children’s policy needs and concerns are often an afterthought or dismissed by policymakers,” regardless of voter age, race/ethnicity, or party identification (Democrats, 82%; Independents, 69%; Republicans, 60%). Indeed, by an 82-13% margin, voters believe “programs for children need greater attention and coordination across our federal, state, and local governments.” Nevertheless, although children account for 22% of America’s population, US spending on children comprised only 9.9% of total spending in the most recent fiscal year (FY), a 17% reduction vs. FY2021.

In this interactive plenary, three distinguished experts will address urgent priorities in child health policy. Bruce Lesley, MA, is President and CEO of First Focus on Children, a bipartisan advocacy organization working to make children the priority in federal policy and budget decisions by offering thorough, bipartisan, achievable solutions to ensure children's well-being.

Alex Ortega, PhD, is Dean of the University of Hawai‘i at Mānoa Thompson School of Social Work & Public Health. He is an expert on research and public advocacy focused on improving the health and well-being of Latino youth and families, especially those who are undocumented immigrants or otherwise disenfranchised.

Josh Green, MD, is Governor of Hawai‘i and a family physician. He has been recognized for his leadership in healthcare, providing health insurance for every child in the state of Hawaii, passing “Luke’s Law,” furnishing insurance coverage for kids with autism, and spearheading the state’s COVID pandemic response, resulting in Hawai‘i having the nation’s lowest COVID-19 fatality rate.

Learning Objectives

1. Identify urgent priorities in children's health policy in the US.

2. Explain the statistics documenting why each child-health priority is in urgent need of policy solutions.
3. List actionable policy solutions to address each child-health priority.

Scholarly Session Questions

1. **Audience Size**
1000
2. **Target audience**
Pediatric researchers, clinicians, educators, and advocates.
3. **Tracks**
Advocacy
Diversity, Equity, and Inclusion
Emergency Medicine
Epidemiology
Health Equity/Social Determinants of Health
Health Services Research
Immigrant Health
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
APA RAPID Scholars Lunch; APS Presidential Plenary; APA Presidential Plenary
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Bruce Lesley is President and CEO of First Focus on Children. He is a national children's policy expert, but not a pediatrician. Alex Ortega, PhD, is Dean of the University of Hawai'i at Mānoa Thompson School of Social Work & Public Health. He is not an academic pediatrician. Governor Josh Green, MD, is Governor of Hawaii. He is not an academic pediatrician (he is a family practice physician).
8. **Does this submission involve one or more specialties or disciplines?**

Yes- it encompasses all specialties and disciplines.

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

N/A

10. **Additional comments**

The Session Chair, Dr. Flores, has organized several other plenaries in the past that have included distinguished members of Congress and were quite well attended and received outstanding feedback from PAS attendees.

Presentation Titles and Durations

The State of Health and Healthcare for American's Children

Bruce D. Lesley, MA

Duration of Presentation in Minutes

20

Equity in Healthcare Access, Utilization, and Experiences for Latino Children by Parental Citizenship and Household Language

Alex Ortega, PhD

Duration of Presentation in Minutes

20

Advancing Children's Health as a Physician-Governor

Joshua Green, MD

Duration of Presentation in Minutes

20

(74) Proposal ID: 1912482

Global Innovations in Overdose Prevention: Which Strategies Used Internationally Could the United States Adopt to Curb Youth Deaths?

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Scott Hadland**

Score: **0**

Participant(s)

Scott E. Hadland, MD, MPH, MS, FAAP (he/him/his)

Position:

Division Chief / Associate Professor

Organization:

Mass General for Children

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APS, SPR

Sarah Bagley, MD, Mac (she/her/hers)

Position:

Associate Professor of Medicine and Pediatrics

Organization:

Chobanian & Avedisian School of Medicine and Boston Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Matthew Carwana, MD MPH FRCPC (he/him/his)

Position:

Assistant Professor

Organization:

The University of British Columbia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Danya Fast, MA, PhD (she/her/hers)

Position:

Assistant Professor

Organization:

University of British Columbia Faculty of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Drug overdoses among US adolescents and young adults (hereafter, “youth”) reached an all-time high in 2022, and drug poisonings are now the third leading cause of death among Americans under age 19. Three in four deaths among youth involve fentanyl, a highly potent opioid illicitly manufactured to look like prescription opioids (e.g., oxycodone) and benzodiazepines (e.g., alprazolam). Although the US leads most other nations in drug overdose mortality, it has not yet adopted many innovative, evidence-based strategies used in other countries to prevent overdoses. In particular, Canada, which has been comparably impacted by the fentanyl overdose crisis, has implemented several novel overdose prevention interventions in a North American context.

This panel will share innovative approaches to addressing overdose and opioid addiction in youth based on experiences from outside the US. Presenters will include adolescent health experts from the US and Canada. Presentations will cover: (1) novel approaches to testing drug safety, including community-based testing centers; (2) the evidence behind medically supervised safe consumption sites, with an emphasis on how such services can serve as a point of contact for youth addiction treatment; and (3) unique approaches to medication treatment for opioid addiction, including primary care-based treatment with methadone, use of slow-release morphine to address cravings and withdrawal, and prescriptions for hydromorphone to reduce individuals’ reliance on the illicit drug market.

The session will end with a moderated discussion to offer a balanced view of these interventions’ effectiveness, potential unintended consequences, legal considerations, and opportunities to engage youth with healthcare systems.

Learning Objectives

1. Describe how novel drug-checking technology and take-home test strips can help adolescents and young adults (“youth”) identify drug contamination with fentanyl and other adulterants.
2. Summarize the evidence base for medically supervised safe consumption sites and their role in overdose prevention and linkage to addiction treatment, particularly for youth.
3. Delineate novel pharmacotherapies to treat opioid use disorder and prevent overdose, and assess the evidence base for their use in youth.

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
Pediatricians and pediatric healthcare clinicians, adolescent medicine specialists, mental health researchers, and policymakers.
3. **Tracks**
Adolescent Medicine
Emergency Medicine
Mental Health
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
If possible, avoid significant overlap with other Adolescent Medicine-focused sessions. Thank you!
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Topic is substance use involving Adolescent Medicine, Emergency Medicine, General Pediatrics, and Public Health.

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

N/A

10. **Additional comments**

Presentation Titles and Durations

Introduction and Moderated Panel

Scott E. Hadland, MD, MPH, MS, FAAP

Duration of Presentation in Minutes

30

The Evidence Behind Medical Supervised Consumption Sites and Opportunities to Engage Youth

Sarah Bagley, MD, Mac

Duration of Presentation in Minutes

20

Community-Based Drug Checking and Take-Home Test Strips for Youth

Matthew Carwana, MD MPH FRCPC

Duration of Presentation in Minutes

20

Novel Medications for Opioid Use Disorder and Youth Perspectives on Treatment

Danya Fast, MA, PhD

Duration of Presentation in Minutes

20

(75) Proposal ID: 1921479

Addressing Families' Top Concerns About Environmental Hazards

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Ruth Etzel**

Score: **0**

Participant(s)

William H. Burr, PhD (he/him/his)

Position:
Senior Researcher

Organization:
American Academy of Pediatrics

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Susan E. Pacheco, MD

Position:
Professor of Pediatrics, Allergy and Immunology

Organization:
University of Texas School of Medicine HSC

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Female

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

AAP

Ruth A. Etzel, MD, PhD

Position:

Professor

Organization:

George Washington University

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

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

AAP

Session Description

Session Description

Environmental hazards are among the top health concerns many parents have for their children. Little time is spend during medical school and residency training on environmental hazards and their relationship to illness among children, and many pediatricians report that they

are not fully prepared or comfortable taking an environmental history or addressing parents' concerns about the environment in clinical practice. In November 2023 the American Academy of Pediatrics conducted a survey that included a number of questions on pediatricians' views about addressing environmental hazards. The findings showed that three-quarters of respondents agreed environmental health counselling should be a priority for pediatricians. Most reported feeling prepared to counsel patients and families on secondhand smoke/cigarettes, UV exposure, and lead. Less than half of respondents felt prepared to counsel on contaminated drinking water, pesticides, or mercury. Very few felt prepared to counsel on PFAS/forever chemicals. The most common topics for questions from families included: mold, lead, secondhand smoke/cigarettes, UV exposure, and outdoor air quality. In this session, we will consider some of the issues identified by pediatricians for which they wanted additional training about actions they could take in their practices. This session will describe tools available to help pediatricians become more active in using environmental histories and taking action to address environmental hazards.

Learning Objectives

1. advise parents and patients about adverse effects of the environment on health
2. teach about the health impact of the environment on children
3. advocate more effectively about issues related to the health impact of the environment on children

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
General pediatricians, specialists in environmental health, specialists in allergy & immunology
3. **Tracks**

Allergy, Immunology and Rheumatology

Asthma

Environmental Health

Public Health

Pulmonology

Tobacco Prevention

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Environmental Health SIG, PAS Climate Action SIG

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

Community Pediatrics, General Pediatrics, Public Health

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

10. **Additional comments**

Presentation Titles and Durations

Findings from the 2023 AAP Periodic Survey

William H. Burr, PhD

Duration of Presentation in Minutes

15

Actions that pediatricians can take to address air pollution and the climate crisis

Susan E. Pacheco, MD

Duration of Presentation in Minutes

30

Actions that pediatricians can take to address parent concerns about indoor air pollution and molds in the home

Ruth A. Etzel, MD, PhD

Duration of Presentation in Minutes

30

(76) Proposal ID: 1921058

Before and After the Cut: Current trends and best practices in pediatric surgical comanagement

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Christina Russell**

Score: **0**

Participant(s)

Christina Russell, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

University of Minnesota Masonic Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Ann Allen, MD (she/her/hers)

Position:

Associate Professor

Organization:

University of Wisconsin School of Medicine and Public Health

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Lyn M. Dos Santos, MD (she/her/hers)

Position:

Clinical Professor

Organization:

Stanford University School of Medicine

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

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

AAP

Deana Miller, MD, FAAP (she/her/hers)

Position:

Pediatric Hospitalist

Organization:

University of North Carolina Children's in Wilmington

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Many pediatric surgeries such as tonsillectomy, appendectomy, fracture repair, and abscess drainage are performed in community or general hospitals rather than pediatric specific institutions. Throughout the surgical process—before surgery, during hospitalization, and after discharge—surgical comanagement is frequently handled by community-based pediatric hospitalists and general pediatricians. Recent advancements in the field include the adoption of ERAS-like protocols tailored for pediatric patients and pediatric specific opioid prescribing guidelines. The speakers, all board-certified pediatric hospitalists from the AAP Community Pediatric Hospital Medicine Subcommittee, are leading experts in surgical comanagement and have presented on these topics at a national level.

This talk is designed for pediatric hospitalists, general pediatricians, and subspecialists who refer their patients for surgery. We will offer a comprehensive overview of evidence-based practices in surgical comanagement from preoperative clearance to postoperative management. We will begin by defining surgical comanagement and sharing findings from a national survey our group conducted, which highlights the diverse expectations and needs for surgical comanagement across the country. Next, we will examine current trends in preoperative care including surgical clearance, fasting guidelines, and inpatient admission criteria. Then we will delve into Child-Family Life techniques for helping children prepare for surgery and discuss how providers can incorporate these techniques into their own patient care. Finally, we will review best practices for managing postoperative pain and fever. The session will conclude with a robust question and answer session, and participants will leave the talk with access to a downloadable toolkit of resources for the surgical comanagement of pediatric patients.

Learning Objectives

1. Implement current guidelines for preoperative clearance and presurgical care for pediatric patients and incorporate Child-Family Life techniques to support children undergoing surgery.
2. Define ERAS (Enhanced Recovery After Surgery) protocols and describe their benefits for pediatric surgery.
3. Examine best practices for managing postoperative pain, the judicious use of opioids, and strategies for addressing postoperative fever.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Pediatric Hospitalists, General Pediatricians, Trainees, Midlevel Providers, Pediatric Subspecialists
3. **Tracks**
Community Pediatrics
General Pediatrics
Hospital Medicine
Pediatric Nutrition
Quality Improvement/Patient Safety
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
"Optimizing Clinical Notes"- Dr Deana Miller
"Cars, ambulances, helicopters, and more: Navigating the admission, transfer, and transport processes"- Dr Deana Miller
"APA Medical Student and Teaching in Community SIG session" - Dr Ann Allen
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
n/a

8. **Does this submission involve one or more specialties or disciplines?**

General Pediatrics, Community Pediatrics, Pediatric Hospital Medicine, Pediatric Surgery

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

n/a

10. **Additional comments**

n/a

Presentation Titles and Durations

The diversity of surgical comanagement: Insights from a national survey on resources and expectations

Christina Russell, MD

Duration of Presentation in Minutes

20

Before the cut: Navigating pre-operative clearance, fasting guidelines, and inpatient admission criteria

Ann Allen, MD

Duration of Presentation in Minutes

20

"You said what?!": Child-life techniques for effective anxiolysis

Lyn M. Dos Santos, MD

Duration of Presentation in Minutes

20

It's not over yet: Managing common post-operative issues in pediatric patients

Deana Miller, MD, FAAP

Duration of Presentation in Minutes

20

(77) Proposal ID: 1933546

Applied Behavior Analysis (ABA): Foundations and Current Practice in Healthcare Settings

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Nicole Lasserre**

Score: **0**

Participant(s)

Nicole T. Lasserre, PhD, BCBA-D, LBA

Position:

Program Lead, Neurodevelopmental Intervention Services

Organization:

Ochsner Hospital for Children

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Emily Mathis, PhD, BCBA, LBA

Position:

Clinical Practitioner/ Program Coordinator of Severe Behavior Clinic

Organization:

Ochsner Hospital for Children

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Robert G. Voigt, MD (he/him/his)

Position:

Professor

Organization:

University of Queensland/Ochsner Clinical School

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APS

Session Description

Session Description

Applied behavior analysis (ABA) is a relatively young science that has garnered significant public attention due to its application to interventions for autism spectrum disorder (ASD). The need for this symposium arises from the rapid

growth of ABA therapy, the increasing prevalence of ASD, and mandates for evidence-based interventions. Contemporary misperceptions and controversies surrounding ABA warrant updated discussions on the science of behavior analysis and current ABA practice. This symposium will explore the fundamental principles of ABA and its application in contemporary clinical settings, with special emphasis on healthcare. Participants will also gain an understanding of the breadth of ABA interventions through research on the efficacy of ABA for ASD and its application to socially significant behaviors. Integration of ABA into healthcare systems will be reviewed from least to most intensive care models with case examples. Emphasis will be placed on ABA delivery methods, distinguishing between focused and comprehensive approaches, as well as technician-supported versus BCBA-delivered services. Finally, the symposium will provide guidance on recognizing symptom presentation and diagnoses warranting ABA referrals, along with practical advice for integrating behavioral strategies into medical appointments to assist with exam compliance and decision-making needs (e.g., measuring medication response). In conclusion, the symposium will deepen understanding of ABA therapy and its relevance in clinical practice for ASD and beyond.

Learning Objectives

1. Participants will be able to distinguish between comprehensive and focused ABA-based therapy and identify one way ABA-therapy can be implemented into healthcare systems.
2. Participants will be able to identify 3 or more diagnoses and/or behaviors for which ABA-based therapy has been applied to and shown to be effective.
3. Participants will be able to identify at least one behavioral strategy that might improve exam compliance for individuals with intellectual and developmental disabilities.

Scholarly Session Questions

1. **Audience Size**

40

2. **Target audience**

This symposium is appropriate for pediatric clinicians at all stages of their career who actively treat and support individuals with autism and related intellectual and developmental disabilities.

3. **Tracks**

Children with Chronic Conditions

Community Pediatrics

Developmental and Behavioral Pediatrics

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
The two non-member speakers are psychologists and/or board certified behavior analysts and members of associations related to their areas of expertise and field of practice. They are content experts related to the science, application, and practice of applied behavior analysis across multiple settings, including within healthcare settings.
8. **Does this submission involve one or more specialties or disciplines?**
Yes - topic involves information about and application of applied behavior analysis within healthcare settings and involves Psychology, Behavior Analysis, and Developmental Pediatrics.
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**
N/A

Presentation Titles and Durations

Dispelling Misperceptions and Controversies Surrounding Applied Behavior Analysis Therapy

Nicole T. Lasserre, PhD, BCBA-D, LBA

Duration of Presentation in Minutes

30

Integration of Applied Behavior Analysis in Healthcare Systems

Emily Mathis, PhD, BCBA, LBA

Duration of Presentation in Minutes

30

Empowering Healthcare through Applied Behavior Analysis: A Multidisciplinary
Approach to Patient Care

Robert G. Voigt, MD

Duration of Presentation in Minutes

30

(78) Proposal ID: 1929003

Infant formulas, novel ingredients, and scrambles during shortages: do we stick to science or take an “escape room” approach?

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Cynthia Blanco**

Score: **0**

Participant(s)

Amy Hair, MD (she/her/hers)

Position:

Associate Professor

Organization:

Baylor College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Ariel Salas, MD, MSPH

Position:

Associate Professor

Organization:

University of Alabama School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

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

AAP, SPR

Cynthia L. Blanco, MD, MSCI (she/her/hers)

Position:

Professor of Pediatrics

Organization:

The University of Texas Health Science Center at San Antonio Joe R. and Teresa Lozano Long School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Rachel Jacob, RDN/LD (she/her/hers)

Position:

Neonatal and Pediatric Dietitian

Organization:

The University of Texas Health Science Center at San Antonio Joe R. and Teresa Lozano Long School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

ASPN

Session Description

Session Description

A contemporary approach to the unique formula environment we face will be discussed preparing clinicians to the ever-changing world of infant formula. Recent advances in infant formula continue to evolve with many additives beyond the basic nutritional substitutes. The focus will be to provide a clear scientific background and how to interpret the evidence.

We will debate Pros/Cons of novel ingredients and discuss several approaches targeted to increase scientific evidence behind each ingredient. Our approach will be to explore by grouping ingredient types: fat/protein/carbohydrates and special manufacturing. We will dive into protein source and hydrolysates, followed by DHA, milk fat globule membranes and carotenoids special considerations and potential benefits. A discussion of sugar content to include low lactose, prebiotics (Human Milk Oligosaccharides), probiotics, and nucleotides for immune function and allergy prevention will be reviewed.

A debate with potential parental requests for non-GMO, Kosher and other non-cow's milk-based formulas with cultural framework discussions will be enhanced via Q&A. Lastly, an interactive discussion of the current approach when selecting formulas in the face of shortages and provide alternative options depending on specific content. An overview with the indications for different specialized formulas with a program plan for successful transition preparing clinicians in the event of a formula recall or shortages. As new formulas continue to arise with little information available for clinicians, this is a perfect set up to increase preparedness for the busy clinician whether is inpatient or outpatient.

Learning Objectives

1. Discuss current approach when selecting formulas based on protein/sugar/fat content, novel ingredients, and new enzymes for prevention and treatment of gastrointestinal disease.
2. Overview of non-GMO, Kosher, and other non-cow's milk-based formulas and the scientific evidence in digestion and food standards.
3. Provide a dietitian's perspective on counseling about formula selection and drivers of fear and confusion that complicate supply and demand during shortages

Scholarly Session Questions

1. **Audience Size**

300

2. **Target audience**

Targeted for pediatricians, family practitioners, dietitians, neonatologists and other intensivists involved in care for infants requiring enteral nutrition. The choice of infant formula and its ingredients will be debated along with scientific approach for feeding intolerance and other gastrointestinal disturbances. The focus will be to provide the evidence to support novel ingredients in infant formulas and the biologic benefits of new infant formulas available on the market. A contemporary approach to the unique formula environment we face will be discussed preparing clinicians in the event of a formula recall or shortages.

3. **Tracks**

Children with Chronic Conditions
Community Pediatrics
Critical Care
Gastroenterology/Hepatology
General Pediatrics
Hospital Medicine
Neonatology
Pediatric Nutrition

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Cynthia Blanco is co-chairing the Perinatal Nutrition Club

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes, topic involves pediatricians in primary care, family practice, neonatology, critical care and dietitians who utilize infant formulas
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**
We have 6 topics to discuss in a debate format

Presentation Titles and Durations

We Have no Cow's protein!, Do we use Goat, Camel or Sheep? Types of Proteins and Hydrolysates Pros/Cons

Amy Hair, MD

Duration of Presentation in Minutes

20

DHA, Milk Fat Globule Membranes, Pre/Probiotics, Nucleotides, Old and New Controversies

Ariel Salas, MD, MSPH

Duration of Presentation in Minutes

20

Conundrums of Sweet Ingredients, Kosher, Non-GMO and more; Is it a Parent's Choice?

Cynthia L. Blanco, MD, MSCI

Duration of Presentation in Minutes

20

We Have no Formula! A Scientific or Escape Room Approach, Do's and Don'ts

Rachel Jacob, RDN/LD

Duration of Presentation in Minutes

10

(79) Proposal ID: 1925806

Neonatal Hypertension: It's not a little problem

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Daniel Feig**

Score: **0**

Participant(s)

Daniel I. Feig, MD/PhD (he/him/his)

Position:

Professor of Pediatrics

Organization:

University of Alabama, Birmingham, School of Medicine

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APS, ASPN

Sandeep Riar, MD (she/her/hers)

Position:

Assistant Professor

Organization:

Children's Healthcare of Atlanta

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, ASPN

Donald L. Batisky, MD (he/him/his)

Position:

Professor of Pediatrics, Associate Dean

Organization:

University of Cincinnati College of Medicine

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, ASPN

Janis Dionne, MD (she/her/hers)

Position:

Clinical Associate Professor

Organization:

University of British Columbia Faculty of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

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

Michelle C. Starr, MD MPH (she/her/hers)

Position:
Assistant Professor of Pediatrics

Organization:
Indiana University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Mahmoud Kallash, MD

Position:
Associate Professor

Organization:
Nationwide Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Elevated blood pressure in the newborn can be a challenge. In this session a look at the best practices for measurement of BP in the neonatal period will be reviewed. Understanding if and when to treat, the implications of treating or not, and how to treat will be discussed. Additionally, the long term implications of hypertension diagnosed in the neonatal period will also be considered.

Learning Objectives

1. Upon completion, participants will be able to apply best practices for the assessment of blood pressure in premature infants.
2. Upon completion, participants will be able to develop a pharmacologic management plan for neonatal hypertension
3. Upon completion, participants will be to develop a plan for long term follow up of patients with history of hypertension in the neonatal period.

Scholarly Session Questions

1. **Audience Size**
250
2. **Target audience**
Nephrology, Hypertension Cardiology and Neonatology specialists
3. **Tracks**
Cardiology
Epidemiology
Hypertension
Neonatology
Nephrology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Hypertension and Nephrology sessions
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Nephrology and neonatology
9. **If your session was presented at another conference, please describe the conference and presentation.**
not applicable
10. **Additional comments**

Presentation Titles and Durations

The challenge of measuring BP in the young infant

Janis Dionne, MD

Duration of Presentation in Minutes

25

To treat or not: Making the decision

Michelle C. Starr, MD MPH

Duration of Presentation in Minutes

25

The rest of the story: Need for long term follow-up

Mahmoud Kallash, MD

Duration of Presentation in Minutes

25

(80) Proposal ID: 1930048

Pediatric Mental Health: How Addressing Childhood Trauma and Toxic Stress in Primary Care Can Increase Access to Care and Improve Outcomes

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Rachel Gilgoff**

Score: **0**

Participant(s)

Rachel Gilgoff, MD, FAAP (she/her/hers)

Position:

Adjunct Clinical Associate Professor

Organization:

Rachel Gilgoff

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Robin Ortiz, MD, MSHP, FAAP, DipABLM (she/her/hers)

Position:

Assistant Professor of Pediatrics and Population Health

Organization:

New York University Grossman School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

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

APA

Nina N. Thompson, BA (she/her/hers)

Position:

Director, Innovation Lab

Organization:

UCLA-UCSF ACEs Aware Family Resilience Network

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

Not a member of any of these organizations

Mikah C. Owen, MD, MPH, MBA (he/him/his)

Position:

Co-Principal Investigator, UCAAN

Organization:

University of California, Davis, School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Male

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

Session Description

Session Description

We are facing dramatic increases in mental, relational, and behavioral health issues including loneliness, depression, anxiety, suicide, addictions, and chronic pain. Underlying stress biology is a major contributing factor and also a window into innovative healing interventions and necessary policy changes. Addressing the underlying stress physiology as well as the systemic inequities and barriers can improve individual and community health and well-being. These speakers will share emerging and evidence-based interventions, quality improvement data, and innovative policy initiatives that are addressing toxic stress as a root cause of disease and disparities. Dr. Gilgoff will present the science linking childhood trauma with adaptations in brain development, immune function, and pain processing as a window into innovative and evidence-based mental and behavioral health interventions. Dr. Ortiz will discuss the science of relational health and how strengths-based approaches can be used to engage caregivers, harness the power of dyadic health, and improve pediatric outcomes. Nina Thompson will describe (1) outcome data from over 40,000 patients screened for ACEs in Los Angeles County, and (2) the SHARK model, an innovative way for large health systems to address toxic stress and align with expanded government mental health and care coordination programs. To conclude, Dr. Owens will share insights from the California ACEs Aware Initiative, a first-in-the nation effort to promote early detection and intervention to mitigate the health and societal impacts of ACEs and toxic stress.

Learning Objectives

1. Describe the science of stress biology and evidence-based stress-mitigation strategies.

2. Use strengths-based approaches to engage caregivers and improve pediatric outcomes.
3. Understand models for healthcare system change to improve access to care and health outcomes.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Primary care clinicians interested in treating mental health.
3. **Tracks**
Child Abuse & Neglect
Community Pediatrics
Developmental and Behavioral Pediatrics
General Pediatrics
Health Equity/Social Determinants of Health
Mental Health
Public Health
Wellness and Well-being
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
One or more of our speakers are also involved in two other proposals: (1) Advancing Precision Medicine by Measuring ACEs, Toxic Stress, and Intervention Efficacy with Policy Implications and (2) Pediatric Mental Health: Treating Caregivers to Treat Their Children.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Nina Thompson oversees the ACEs Aware-funded ACEs-LA Network of Care and the team responsible for the implementation of ACE screening and response at LA County Department of Health Services, the largest health system in California. Nina co-leads the UCAAN Innovation Lab (iLab), which provides technical assistance to clinics across California;

development, testing, and deployment of products created by the iLab and Pilot Projects; and examines the impact of ACE implementation at a large health system. As UCAAN's Special Projects Director, Nina works closely with UCAAN stakeholders on training and claims data collection, analysis, and reporting. Nina graduated from UC Berkeley and has more than twenty years of experience in project management, data analytics, grants management, and community engagement.

8. **Does this submission involve one or more specialties or disciplines?**

The topic is Pediatric Mental Health and Trauma involving Child Abuse & Neglect, General Pediatrics, Community Pediatrics, Developmental and Behavioral Pediatrics, Public Health, Health Equity and Diversity, and Social Drivers of Health. In addition, trauma and toxic stress can alter brain development as well as endocrine, immune, metabolic, and epigenetic functioning such that additional subspecialties may also be interested in attending.

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

This session has not been presented at another conference.

10. **Additional comments**

Thank you for your time and consideration.

Presentation Titles and Durations

How the Science of Stress, Trauma, and Resilience can be Used to Improve Mental Health

Rachel Gilgoff, MD, FAAP

Duration of Presentation in Minutes

20

Engaging Caregivers to Address Pediatric Mental Health

Robin Ortiz, MD, MSHP, FAAP, DipABLM

Duration of Presentation in Minutes

20

Improving Healthcare Access and Quality in LA County

Nina N. Thompson, BA

Duration of Presentation in Minutes

20

How California is Improving Mental Health Outcomes through Policy Change

Mikah C. Owen, MD, MPH, MBA

Duration of Presentation in Minutes

20

(81) Proposal ID: 1931735

Harnessing the Promise of Artificial Intelligence for Pediatric Research and Education: Successes, Challenges, and Ethical Considerations

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Oluwakemi Badaki-Makun**

Score: **0**

Participant(s)

Oluwakemi Badaki-Makun, MD, PhD (she/her/hers)

Position:

Director of Research, Pediatric Emergency Medicine

Organization:

Johns Hopkins University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, SPR

Ioannis Koutroulis, MD, PhD, MBA

Position:

Associate Dean/Associate Professor

Organization:

Children's National Hospital/ GW SMHS

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APA, SPR

Todd P. Chang, MD, MAcM (he/him/his)

Position:

Vice Chair for Education for Department of Pediatrics

Organization:

Children's Hospital Los Angeles

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

AAP

Session Description

Session Description

As artificial intelligence (AI) rapidly advances, its potential to revolutionize pediatric research and education becomes increasingly evident. AI-driven tools and methodologies offer significant opportunities to enhance data analysis,

predict disease and clinical outcomes, optimize patient care, and improve the precision of treatment strategies for children. However, AI's integration into pediatric research also raises unique challenges, including ethical considerations, data privacy concerns, and the need for specialized algorithms tailored to pediatric populations. As the pediatric research community continues to harness the power of AI, this symposium will serve as a platform for sharing cutting-edge research, discussing challenges, and encouraging interdisciplinary collaboration. Given the growing interest in AI across medicine, a focused symposium on pediatric applications is both timely and critical for advancing the field.

The symposium will bring together leading experts in AI, pediatric research and medical education to discuss the latest advancements and the emerging role of artificial intelligence (AI) in Pediatrics. It will explore how machine learning (ML), generative AI, and big data analytics are changing the landscape of pediatric research and education, from disease and patient outcome prediction to the promise of personalized treatments. It will offer a platform for collaboration, debate, and the sharing of cutting-edge innovations, emphasizing the translation of AI technologies into improved clinical outcomes for children.

Learning Objectives

1. Discuss examples of successful deployments of AI-based tools in pediatric research and education;
2. Discuss unique challenges of AI with respect to pediatrics, such as limited sample sizes, developmental considerations, and the need for pediatric-specific models;
3. Point out ethical and regulatory considerations for AI in pediatrics, including transparency, bias, and data privacy, as well as the need for practical regulatory frameworks.

Scholarly Session Questions

1. **Audience Size**

60

2. **Target audience**

-Pediatric researchers and clinicians

-Data scientists and engineers

-Policy makers

-Medical students and Pediatric trainees at all levels

-Ethicists

3. **Tracks**

Academic and Research Skills

Artificial Intelligence

Clinical Research

Community Pediatrics

EHR/Medical Informatics

Emergency Medicine

General Pediatrics

Hospital Medicine

Infectious Diseases

Medical Education

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Sunday, April 27

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Pediatric Emergency Medicine sessions

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

Yes. The topic is Artificial Intelligence in Pediatric Research and Education and is thus applicable to many specialties and disciplines, including infectious diseases, emergency medicine, global health, general pediatrics, hospital medicine, and medical education.

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

This session has not been previously presented.

10. **Additional comments**

Presentation Titles and Durations

1. AI in Pediatrics - Unique Challenges / 2. Democratizing Medicine on a Global Scale - Harnessing the Power of Generative AI

Oluwakemi Badaki-Makun, MD, PhD

Duration of Presentation in Minutes

30

1.Leveraging AI for Pediatric Sepsis: Transforming Care with Predictive Analytics 2.AI: Ethical and Regulatory Considerations

Ioannis Koutroulis, MD, PhD, MBA

Duration of Presentation in Minutes

30

1. Optimizing Clinical Care for Children Everywhere - Digital Simulation and AI /
2. Panel Discussion, Q&A, Closing Remarks

Todd P. Chang, MD, MAcM

Duration of Presentation in Minutes

30

(82) Proposal ID: 1928010

Enhancing Immunization Coverage and Polio Surveillance in Pakistan:
Prospects and Challenges

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Sajid Soofi**

Score: **0**

Participant(s)

Sajid B. Soofi (he/him/his)

Position:
Professor & Associate Director

Organization:
Aga Khan University

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Shabina Ariff, MD,FCPS (she/her/hers)

Position:
Assoc Professor, Clinician Researcher

Organization:
Aga Khan university

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

Not a member of any of these organizations

Muhammad Umer, MBA

Position:

Public Health Researcher

Organization:

Aga Khan University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

Not a member of any of these organizations

Imtiaz Hussain, MA

Position:

Director Research

Organization:

Aga Khan University

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Asian

Gender
Male

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

Ahmad Khan, MA (he/him/his)

Position:
Researcher

Organization:
Aga Khan University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Session Description

Session Description

Pakistan has made significant progress in improving immunization coverage and reducing the incidences of wild poliovirus cases. Nonetheless, it is one of the two polio-endemic nations with 1.2 million unimmunized children. The country has a high under-five mortality rate of 65 per 1,000 live births, with the majority of deaths caused by VPDs.

Symposium Overview

This symposium aims to present findings and insights from three key research

studies conducted between 2017 and 2023, focusing on immunization coverage surveys 2021-2023, seroprevalence survey 2023, and strengthening essential immunization through the management of basic health facilities 2022-2023 in Pakistan.

The symposium will provide a platform to share the findings from the field, to provide a holistic and nationally representative picture regarding where the country stands in terms of childhood routine immunization coverage, including zero-dose children, refusals, and children who missed vaccination in routine and supplementary immunization activities, as well as seroprotection against the wild polioviruses. This will also discuss challenges faced surrounding the enhancement of routine immunization coverage and polio eradication in the country and the context-specific strategies adopted to address the underpinning issue of improving coverage and reducing the burden of VPDs. We believe that the symposium will offer an opportunity to share lessons from a low- and middle-income country like Pakistan, which is also one of the two polio-endemic nations in the world, and the information-rich content and discussion will be instrumental in offering the global health audience a comprehensive summary of effective ways to address the challenges.

Learning Objectives

1. To present findings from immunization coverage surveys to provide insights into the current status and sustainability of childhood routine immunization coverage in Pakistan
2. Discuss the effectiveness of an integrated approach in enhancing routine immunization coverage and combating wild poliovirus
3. To share lessons learned from field-level engagement in polio high-risk areas, focusing on strengthening routine immunization services and its implications at the policy level.

Scholarly Session Questions

1. Audience Size

50

2. Target audience

- Academics and Researchers
- Healthcare Providers
- Public Health Professionals
- Polio Eradication Stakeholders:
- Government Officials
- Community Leaders
- Non-Governmental Organizations (NGOs)
- Donors and Funding Agencies

3. **Tracks**
Immunizations/Delivery
Infectious Diseases
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
none
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Public Health
9. **If your session was presented at another conference, please describe the conference and presentation.**
no
10. **Additional comments**
none

Presentation Titles and Durations

Moving towards a more integrated healthcare approach for maternal and child health

Shabina Ariff, MD,FCPS

Duration of Presentation in Minutes

10

Strengthening essential immunization through rapid coverage surveys
targeting high-risk mobile population (HRMP)

Muhammad Umer, MBA

Duration of Presentation in Minutes

10

Essential Immunization Services in Pakistan: Current status and future directions from a national perspective

Imtiaz Hussain, MA

Duration of Presentation in Minutes

10

Disparity in immunization coverage in Pakistan and understanding the behavioural and social drivers of vaccination

Ahmad Khan, MA

Duration of Presentation in Minutes

10

(83) Proposal ID: 1907738

Applying the Injury Equity Framework to Intentional Injury and Firearm Violence Prevention

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Joseph Wright**

Score: **0**

Participant(s)

Joseph Wright, MD MPH (he/him/his)

Position:

Professor (adjunct) of Emergency Medicine, Pediatrics, Health Policy & Management

Organization:

George Washington University Schools of Medicine and Public Health

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

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

AAP, APA, APS

Lois Lee, MD, MPH (she/her/hers)

Position:

Senior Associate in Pediatrics, Associate Professor of Pediatrics and Emergency Medicine

Organization:
Boston Children's Hospital/Harvard Medical School

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Sadiqa Kendi, MD, MPH (she/her/hers)

Position:
Associate Professor

Organization:
Children's National Health System

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Michelle Macy, MD, MS (she/her/hers)

Position:
Professor

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

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA, APS, SPR

Monika Goyal, MD, MSCE (she/her/hers)

Position:

Professor of Pediatrics and Emergency Medicine

Organization:

Children's National Hospital

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APA, APS, SPR

Session Description

Session Description

In 1972, the Haddon Matrix was introduced as a framework to categorically analyze motor vehicle crashes and their mechanistic circumstances [J Trauma. 1972;12:193]. Built on the public health approach, the Haddon Matrix has been

widely taught as a foundational pillar of injury prevention research primarily applied to unintentional injury. The last several decades have seen modest harm reduction among selected types of childhood injury; yet overall, injury remains the leading cause of morbidity and in childhood and young adulthood. Especially concerning has been the rise in intentional causes of injury; most specifically, firearm-related deaths which now exceed motor vehicle crashes as the leading cause of pediatric mortality. Further, inherent societal inequities place historically minoritized populations at disparate vulnerability and risk of exposure to intentional injury.

In 2023, the Kendi-Macy Injury Equity Framework was introduced recognizing that “the lack of progress toward addressing disparities is caused in part by limitations of the tools used to analyze the factors that contribute to injuries and injury-related outcomes” [NEJM. 2023;388:774]. This framework, weaving Social Drivers of Health and intersectionality into the Haddon Matrix, presents an opportunity to leverage an expanded and more nuanced approach to mechanistic analysis and intervention development.

This session gathers equity scientists and health services researchers to discuss application of an equity approach to intentional injury and, specifically, the work of reducing the burden of childhood firearm-related injuries. Notably, these faculty represent leadership in organized pediatrics, as well as, core responsibility for the advancement of science at their respective academic institutions.

Learning Objectives

1. Define the Kendi-Macy Injury Equity Framework and understand its application to inequities in firearm injury
2. Identify gaps and forward directions for pediatric firearm injury research
3. Discuss the role of organized pediatrics and academic health systems in addressing firearm violence

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Health Services Researchers, Equity Scientists, Injury Prevention Scholars, Public Health Practitioners, Public Policy Advocates, General Pediatricians, Subspecialty Pediatricians
3. **Tracks**

Academic and Research Skills
Community Pediatrics
Diversity, Equity, and Inclusion
Emergency Medicine
Health Equity/Social Determinants of Health
Health Services Research
Injury Prevention
Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Diversity, Equity and Inclusion Reception
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Public Health
Pediatric Emergency Medicine
Health Policy
Injury Prevention
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Introduction: Role of the pediatrician in youth violence prevention
Joseph Wright, MD MPH

Duration of Presentation in Minutes

10

Pediatric firearm injury prevention: State-of-the-science
Lois Lee, MD, MPH

Duration of Presentation in Minutes

15

The injury equity framework: Innovation and application
Sadiqa Kendi, MD, MPH

Duration of Presentation in Minutes

15

Intentional injury prevention: Research gaps and opportunities
Michelle Macy, MD, MS

Duration of Presentation in Minutes

15

A holistic approach to childhood firearm injuries in the academic medical center
Monika Goyal, MD, MSCE

Duration of Presentation in Minutes

15

(84) Proposal ID: 1931063

Teach-y TORCHES: A case based review of congenital infections from conception through early childhood

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Ryan Rochat**

Score: **0**

Participant(s)

Ryan Rochat, MD, PhD, MS (he/him/his)

Position:

Assistant Professor

Organization:

Baylor College of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, PIDS

Irene Stafford, M.D., M.S

Position:

Associate Professor

Organization:

McGovern Medical School at the University of Texas Health Science Center at Houston

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

William Christopher Golden, MD (he/him/his)

Position:

Associate Professor of Pediatrics; Director, Core Clerkship in Pediatrics

Organization:

The Johns Hopkins University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

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

AAP, APA, PIDS

Session Description

Session Description

This session on congenital infections, focusing on TORCH infections, is designed to provide pediatricians with a comprehensive understanding of these diseases. Delivered by experts in obstetrics, neonatology, and infectious

diseases, the session will cover the journey from conception to childhood, highlighting the importance of early detection, management, and long-term care. Attendees will gain valuable insights into antenatal diagnosis of congenital infections, with a focus on characteristics noted on ultrasonography. How these infections are managed at birth will help prepare providers for counseling and making sure that these children get the follow up assessments they need through childhood. Finally, from the perspective of providers who manage these children after birth, the long-term outcomes for children affected by these congenital infections will inform providers as to the lifelong and chronic nature of congenital infections. A case based review of congenital infections from the perspective of these three specialties will raise awareness of the variegated manifestations of disease across multiple developmental time points. This session is an invaluable opportunity for pediatricians to stay updated on best practices and improve patient care for some of the most vulnerable populations.

Learning Objectives

1. Understand the Diagnosis and Management of TORCH Infections
2. Recognize the Clinical Presentation and Long-Term Outcomes of TORCH Infections
3. Implement Preventive Measures and Best Practices in Recognition and Management of TORCH Infections

Scholarly Session Questions

1. **Audience Size**
120
2. **Target audience**
Pediatricians, Neonatologists, Midwives, Physician Assistants, Infectious Disease Physicians, Health Policy Members, Obstetricians
3. **Tracks**
Advocacy
Developmental and Behavioral Pediatrics
General Pediatrics
Health Equity/Social Determinants of Health
Infectious Diseases
Neonatology
Public Health
Well Newborn
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Not that we know of at this moment

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Irene Stafford who is an expert in OB/GYN and a key member of the session for her expertise in sonography of congenital infections does not typically hold membership in traditional pediatric organizations. She is a member of other adult organizations like ACOG, etc.

8. **Does this submission involve one or more specialties or disciplines?**

Yes. Obstetrics and Gynecology, Neonatology, Pediatric Infectious Disease

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

Not presented elsewhere

10. **Additional comments**

Session Outline

Lecture 1: Overview and Obstetric Perspective (30 minutes)

Speaker: OB/GYN (Dr. Irene Stafford, Associate professor in the Department of Obstetrics, Gynecology, and Reproductive Sciences with McGovern Medical School at UTHealth Houston)

- Introduction to TORCH Infections (5 minutes)
- Definition and significance
- High-level Overview of TORCH (Toxoplasmosis, Other [syphilis, varicella-zoster, parvovirus B19], Rubella, Cytomegalovirus, Herpes simplex virus)
- Maternal Screening and Diagnosis (15 minutes)
- Prenatal screening protocols
- Diagnostic tests and procedures (with an emphasis on imaging MRI/US,)
- Case studies and examples (featuring sonographic review)
- Management During Pregnancy (5 minutes)
- Preventive measures
- Treatment options for infected mothers
- Impact on pregnancy outcomes
- Q&A Session (5 minutes)

Lecture 2: Neonatal Perspective (30 minutes)

Speaker: Neonatologist (Dr. Chris Golden, Associate Professor of Pediatrics at the Johns Hopkins University School of Medicine)

- Clinical Presentation in Newborns (10 minutes)
- Signs and symptoms of TORCH infections in neonates
- Differential diagnosis
- Diagnostic Workup (5 minutes)
- Laboratory tests and imaging
- Interpretation of results
- Management and Treatment (10 minutes)
- Immediate care and interventions
- Short-term management and follow-up
- Case studies and examples
- Q&A Session (5 minutes)

Lecture 3: Infectious Disease Perspective (30 minutes)

Speaker: Infectious Disease Physician (Dr. Ryan Rochat, Assistant Professor: Pediatric Infectious Diseases Baylor College of Medicine Houston)

- Epidemiology (2 minutes)
- Epidemiological trends and data
- Long-Term Outcomes (10 minutes)
- Neurological Sequelae: Cognitive impairments, developmental delays, and motor dysfunction
- Sensory Impairments: Hearing loss, vision problems
- Chronic Health Issues: Liver disease, cardiovascular anomalies, and growth restriction
- Psychosocial Impact: Effects on family dynamics and quality of life
- Prevention Strategies (3 minutes)
- Vaccination and prophylaxis
- Public health measures and education
- Case Studies and Emerging Research (10 minutes)
- Recent changes in diagnosis and treatment
- Case studies highlighting unique challenges
- Q&A Session and Wrap-Up (5 minutes)

Presentation Titles and Durations

Infectious Disease Perspective of TORCH Infections

Ryan Rochat, MD, PhD, MS

Duration of Presentation in Minutes

30

Overview and Obstetric Perspective of TORCH Infections

Irene Stafford, M.D., M.S

Duration of Presentation in Minutes

30

Neonatal Perspective of TORCH Infections

William Christopher Golden, MD

Duration of Presentation in Minutes

30

(85) Proposal ID: 1901005

Entertainment Media and Youth Suicide Prevention

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Jane Harness**

Score: **0**

Participant(s)

Jane Harness, DO (she/her/hers)

Position:

Clinical Assistant Professor

Organization:

University of Michigan Medical School

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Casey Berson, MD (she/her/hers)

Position:

Clinical Assistant Professor

Organization:

University of South Carolina School of Medicine Greenville

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Steven Sust, MD

Position:

Clinical Associate Professor

Organization:

Stanford University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

APA

Session Description

Session Description

During this “Hot Topic” symposia, speakers will introduce the "Papageno"-effect or the suicide preventative effect of hearing stories of individuals who overcome crisis with non-suicide alternatives. We will offer examples of “Papageno” stories in entertainment media (TV shows and movies). This is important because suicide is a leading cause of death for young people and

entertainment media comprises the largest fraction of young people's screen time. Entertainment media can be influential for viewer health behaviors ranging from substance use to suicide. We will also present findings from a qualitative study about what youth have to say about entertainment media's impact on mental health and suicidal thoughts/behaviors. We will specifically highlight youth insights about elements of entertainment media that could be suicide preventative such as: evoking feelings of comfort, promoting a hopeful world view, destigmatizing mental illness, promoting connection/reminding viewers they are not alone, promoting help seeking/problem solving/coping, and positive inclusive representation. We will review the guidelines for entertainment media with suicide content and point out how youth and families can learn more about movies/shows before watching them. We will offer practical guidance about how to bring up entertainment media during a clinical visit and how to use that information to bolster protective factors for suicide or mitigate harm from media exposures that confer risk.

Learning Objectives

1. understand the importance of talking with patients about entertainment media, know how to ask about it, and use tools to learn more about specific shows/movies.
2. appreciate the "Papageno" effect, including examples, and how patients may benefit from it.
3. describe what elements of TV/movies youth themselves find to be suicide protective.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Pediatricians, Mental Health Professionals, Media Professionals, Public Health Professionals
3. **Tracks**
Adolescent Medicine
Advocacy
Diversity, Equity, and Inclusion
General Pediatrics
Injury Prevention
Mental Health
Public Health
Social Media & Technology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
All speakers are members of AACAP (American Academy of Child and Adolescent Psychiatry)
8. **Does this submission involve one or more specialties or disciplines?**
Topic is Entertainment Media and Youth Suicide Prevention involving Child and Adolescent Psychiatry, General Pediatrics, Public Health, and Media
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Entertainment Media's Influence on Suicidal Thoughts and Behaviors: Insights from US Youth

Jane Harness, DO

Duration of Presentation in Minutes

30

The Papageno Effect in Entertainment Media

Casey Berson, MD

Duration of Presentation in Minutes

30

Entertainment Media Guidelines and Examples of Suicide Protective Media

Steven Sust, MD

Duration of Presentation in Minutes

30

(86) Proposal ID: 1924519

Feeding Very Preterm Newborns: How Soon, How Much, How Fast?

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Gregory Valentine**

Score: **0**

Participant(s)

Ariel Salas, MD, MSPH

Position:
Associate Professor

Organization:
University of Alabama School of Medicine

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Male

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

Shalini Ojha, PhD (she/her/hers)

Position:
Professor of Neonatal Medicine

Organization:
University of Nottingham

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

Not a member of any of these organizations

Amy Hair, MD (she/her/hers)

Position:

Associate Professor

Organization:

Baylor College of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Gregory C. Valentine, MD, MED, FAAP (he/him/his)

Position:

Associate Professor of Pediatrics, Division of Neonatology

Organization:

University of Washington

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Male

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

Krystle M. Perez, MD, MPH (she/her/hers)

Position:
Associate Professor of Pediatrics

Organization:
University of Washington

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Surprisingly, best practices for feeding very preterm newborns remain uncertain leaving clinicians often wondering “How soon do I start feeds? How much do I start feeding? And, how fast do I advance feeds by?” While there are limited trials evaluating optimal nutritional and fluid management during the critical fetal-to-neonatal transitional period (the first 1-2 weeks after birth) in very preterm (< 32 week’s gestation) newborns, newer evidence is emerging to provide evidence to these pervasive questions.

This panel-based scholarly session, led by experience preterm newborn nutrition researchers and experts, will discuss and synthesize peer-reviewed,

published literature surrounding feeding and fluid management of very preterm newborns in the first 2 weeks after birth. The panel will discuss the evidence, their experiences, and the future directions in this field with the goal of equipping participants with a framework to consider when making feeding and fluid management decisions for very preterm newborns.

The following topics will be discussed in detail by the panelists related to very preterm newborns: (1) early progression of feeding critically-ill, very preterm newborns, (2) early progression of feeding in stable, very preterm newborns, (3) early fortification practices, (4) time to regain birthweight, fluid management, and association with outcomes, and (5) donor breast milk use, including the development of milk banks in areas where they are lacking. Each of these topics will synthesize the published evidence, suggest clinical take-aways related to management of very preterm newborns feeding and fluid management, propose currently unanswered questions, and discuss future directions for research.

Learning Objectives

1. Appraise and integrate clinically-actionable evidence related to feeding and fluid management in the first 2 weeks after birth of very preterm newborns in high-resourced settings.
2. Describe and address challenges related to feeding and fluid management of very preterm newborns in high-resourced settings.
3. Evaluate currently unanswered questions and future directions for research related to further understanding optimal feeding and fluid management decisions for very preterm newborns.

Scholarly Session Questions

1. **Audience Size**

200

2. **Target audience**

This session would be of interest to clinicians working in neonatal medicine and pediatrics, researchers undertaking clinical trials in child health, clinical trialists and methodologists, medical journal editors and peer reviewers, policy makers and funding bodies.

3. **Tracks**

Breastfeeding/Human Milk
Neonatology
Pediatric Nutrition
Well Newborn

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

None

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

All are members of these organizations except one panelist - Dr. Shalini Ojha who has expertise in enteral feeding in preterm infants, leading the largest clinical trial in this area and sharing experience and bringing a global perspective to the discussion. We feel these aspects make it important to include her on the panel.

8. **Does this submission involve one or more specialties or disciplines?**

Nutrition, General Pediatrics, Neonatology, Milk Club

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

N/A

10. **Additional comments**

N/A

Presentation Titles and Durations

Early progression of feeding critically-ill, very preterm newborns

Ariel Salas, MD, MSPH

Duration of Presentation in Minutes

12

Early progression of feeding stable, very preterm newborns

Shalini Ojha, PhD

Duration of Presentation in Minutes

12

Early fortification practices for very preterm newborns

Amy Hair, MD

Duration of Presentation in Minutes

12

Time to regain birthweight and fluid management in the first 2 weeks and relationship with short- and long-term outcomes

Gregory C. Valentine, MD, MED, FAAP

Duration of Presentation in Minutes

12

Donor human milk: increasing access to donor human milk for very preterm newborns

Krystle M. Perez, MD, MPH

Duration of Presentation in Minutes

12

(87) Proposal ID: 1914185

Cord blood and cord tissue derived cell therapies for perinatal brain injuries

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Atul Malhotra**

Score: **0**

Participant(s)

Atul Malhotra, MD, PhD

Position:
Associate Professor

Organization:
Monash University

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Mohamed El-Dib, MD

Position:
Associate Professor of Pediatrics

Organization:
Harvard Medical School

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Prefer not to respond

Gender

Male

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

AAP, SPR

Charles S. Cox, Jr., M.D. (he/him/his)

Position:

George and Cynthia Mitchell Distinguished Chair in Neuroscience;
Professor of Pediatric Surgery

Organization:

McGovern Medical School at the University of Texas Health Science
Center at Houston

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Charles M. Cotten, MD MHS (he/him/his)

Position:

Professor of Pediatrics

Organization:

Duke University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Perinatal brain injuries are acquired during the fetal or neonatal period and can affect both term and preterm infants. They are often associated with hemorrhagic or ischemic events leading to acute or sub-acute injury of the developing brain. These injuries put the affected infants at high risk of developing neurodevelopmental disorders, including the most common physical disability in childhood, cerebral palsy. There is an urgent unmet need to develop newer therapies for these conditions to mitigate their impact on neurodevelopment and long term outcomes.

Cord blood and cord tissue derived cell therapies harness the strong anti-inflammatory, immunomodulatory, and other neuroprotective properties of stem and progenitor cells present in cord blood and cord tissue. They offer promise as they have been shown to have significant benefits in preclinical models of perinatal brain injury, and in early phase clinical trials. Options include autologous (from patient's own cord blood/tissue) and allogeneic (from a healthy donor) cord blood and tissue derived cell products. Early phase trials of these therapies have been conducted paving the way for larger, efficacy trials. This includes the CORD-CELL RCT, the largest neonatal cell therapy trial to date.

This symposium will inform the attendees of the background, science and advances happening in this exciting field.

It will be of interest to trainees, basic scientists, neonatologists, general and developmental pediatricians, pediatric neurologists, rehabilitation physicians, hematologists and transplant physicians.

Learning Objectives

1. Describe the likely mechanisms of action of cord blood and cord tissue derived cell therapy in neurological injury

2. Discuss the early phase studies of cord blood and cord tissue derived cell therapies conducted in infants with perinatal brain injuries
3. Discuss the current and future research studies required for cord blood and cord tissue derived cell therapy use in perinatal brain injuries

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Basic scientists, neonatologists, pediatrician, pediatric neurologists, rehabilitation physicians, hematologists and transplant physicians.
Trainees
3. **Tracks**
Academic and Research Skills
Advocacy
Basic Science
Children with Chronic Conditions
Clinical Research
Community Pediatrics
Developmental and Behavioral Pediatrics
Developmental Biology
General Pediatrics
Hematology/Oncology
Neonatology
Neurology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Avoid Neonatal Neurology sessions
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Atul Malhotra, MD, PhD is a world expert of neonatal cell therapy. He is also the Stem Cell and Regenerative Biology Section Editor of Pediatric Research, the official journal of APS, SPR and ESPR.

8. **Does this submission involve one or more specialties or disciplines?**

Yes. Topic is relevant for basic scientists, neonatologists, pediatrician, pediatric neurologists, rehabilitation physicians, hematologists and transplant physicians.

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

Not directly presented, but some aspects will be presented at the recent EAPS meeting in Vienna.

Session called Tomorrow' World: Stem cell therapies

10. **Additional comments**

Very important session as significant advances have happened in cord blood and cord tissue therapies in last few years, with multicenter RCTs underway.

Presentation Titles and Durations

Cord blood and cord tissue derived cell therapy for preterm brain injury

Atul Malhotra, MD, PhD

Duration of Presentation in Minutes

25

Introduction to perinatal brain injuries □ pathophysiology and impact

Mohamed El-Dib, MD

Duration of Presentation in Minutes

10

Mechanisms of action of cord blood derived cell therapy & the bioreactor hypothesis

Charles S. Cox, Jr., M.D.

Duration of Presentation in Minutes

20

Cord blood and cord tissue cell therapy for term brain injury

Charles M. Cotten, MD MHS

Duration of Presentation in Minutes

25

(88) Proposal ID: 1925264

Health Equity Journal Editors and the Advancement of Equity in Publishing and Pediatric Research

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Colin Orr**

Score: **0**

Participant(s)

Colin J. Orr, MD, MPH (he/him/his)

Position:

Assistant Professor

Organization:

Monroe Carell Jr. Children's Hospital at Vanderbilt

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

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

AAP, APA

Alexandra Corley, MD MPH FAAP (she/her/hers)

Position:

Associate Professor

Organization:

Children's National Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, APA, SPR

Kimberly Montez, MD, MPH, FAAP (she/her/ella)

Position:

Associate Professor; Vice Chair, JEDI-Peds; Associate Dean, Justice and Belonging

Organization:

Wake Forest School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA, SPR

Michelle A. Lopez, MD, MPH (she/her/hers)

Position:

Associate Professor

Organization:

Baylor College of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Female

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

AAP, APA

Andrea F. Duncan, MD, MSClinRes (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Children's Hospital of Philadelphia and University of Pennsylvania

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, SPR

Session Description

Session Description

Background: As the diversity of the children in the United States increases, health equity is increasingly important to the scientific community. With the growing importance of health equity in pediatric research, leading pediatric journals created health equity leadership roles on their editorial boards that would: 1) expand expertise in health equity at their journal, 2) increase

representation on their editorial board, and 3) prepare the next generation of pediatric researchers to be leaders in the scientific community.

Objectives: 1) Learn about the roles and responsibilities of a health equity editorial position at leading pediatric journals, 2) Discuss opportunities to include health equity principles in journal activities and priorities, 3) Discuss the role of health equity and inclusive language during review process, and 4) Discover professional development opportunities through health equity editorial positions

Methods: This hot-topic symposium will describe health equity editorial board roles at Academic Pediatrics, JAMA Pediatrics, and Pediatrics. The first speaker will provide the rationale and overview of these positions (roles and responsibilities, qualifications, application process, timeline). The next speakers (2-4) will focus on opportunities to promote health equity in journal priorities/activities, health equity and inclusive language during the review process, and professional development opportunities. The closing speaker will share perspectives on leading a health equity fellowship program and the future of these positions and health equity in pediatric research. Each session will last 15 minutes. The moderator will facilitate a 15-minute question-and-answer session.

Learning Objectives

1. Describe roles and responsibilities of health equity editorial positions at leading pediatric journals
2. Discuss two opportunities of how health equity and inclusivity can be included in the journal's vision and day-to-day journal activities
3. Summarize how health equity editorial roles can further one's professional development

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

Session is intended for individuals are interested in the review and publishing process and how equity is included in this process. This session is intended for trainees and early career faculty; however, the content will be of interest to all individuals who are interested in equity and the review process.

3. **Tracks**

Academic and Research Skills
Career Development
Diversity, Equity, and Inclusion
Health Equity/Social Determinants of Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
The panelist have divers expertise including neonatology, general pediatrics, and hospital pediatric
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Introduction and overview of health equity editor roles

Colin J. Orr, MD, MPH

Duration of Presentation in Minutes

10

Opportunities to inform journal priorities/science

Alexandra Corley, MD MPH FAAP

Duration of Presentation in Minutes

15

Health equity and inclusive language during the review process

Kimberly Montez, MD, MPH, FAAP

Duration of Presentation in Minutes

15

Professional development opportunities through the roles
Michelle A. Lopez, MD, MPH

Duration of Presentation in Minutes

15

Lessons learned leading fellowship, closing statement, encouraging
applications

Andrea F. Duncan, MD, MSClinRes

Duration of Presentation in Minutes

15

(89) Proposal ID: 1931529

The Mentorship Movement: Promoting Diversity in the Healthcare Workforce

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Anisha Rimal**

Score: **0**

Participant(s)

Yuri Takabatake, MD (she/her/hers)

Position:

Pediatric Hospital Medicine Fellow

Organization:

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

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Anisha Rimal, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Robert Larner, M.D., College of Medicine at the University of Vermont

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Brianna Glover, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics, Hospital Medicine; Associate Program Director, Peds Residency

Organization:

Emory University/Children's Healthcare of Atlanta

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP

Zofia Zdanowicz, MD (she/her/hers)

Position:

Pediatric Resident

Organization:

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

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Patients from racial and ethnic backgrounds that are underserved in healthcare have improved outcomes when cared for by healthcare providers with shared identities. This may be due to improved adherence to care plans delivered by a culturally congruent provider and decrease in implicit or explicit bias between patient and health care provider. This demonstrates the need for a more diverse healthcare workforce nationally. To achieve this goal, national leaders have focused on developing mentorship programs that seek to support and retain students and trainees who are underrepresented in healthcare professions.*

This panel presentation will include national leaders from innovative mentorship programs at three different institutions across the country (University of Vermont, Northwestern University, Emory University). The different mentorship models serve mentees who are underrepresented in the health professions.

Each program focuses on different groups of mentees (i.e. high school students, medical students, trainees). The programs employ innovative strategies, such as group-based and interprofessional mentorship, simulation sessions, and longitudinal curriculums.

Panelists will discuss their processes for establishing the programs. Each speaker will also highlight the impact of the program on their participants. Finally, they will share strategies towards sustainability and offer tools for developing similar programs in other institutions. This session is intended for medical educators and health equity champions who are interested in supporting students and trainees from underrepresented backgrounds to promote sustainable change within the field of healthcare.

*Racial and ethnic populations that are underrepresented in the medical profession relative to their numbers in the general population (AAMC)

Learning Objectives

1. Describe a variety of successful mentorship models across differing geographic and academic settings.
2. Discuss the positive impact of robust mentorship programs for mentees who are underrepresented in the health professions.
3. Identify strategies for establishing effective mentorship models that can serve mentees in their own programs and communities.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Medical educators and health equity champions who are interested in supporting students and trainees from underrepresented backgrounds.
3. **Tracks**
Advocacy
Career Development
Diversity, Equity, and Inclusion
Health Equity/Social Determinants of Health
Medical Education
Wellness and Well-being
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Dr. Anisha Rimal (speaker) will be submitting a proposal for scholarly session on Pediatric Mobile Health Program
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
9. **If your session was presented at another conference, please describe the conference and presentation.**

10. Additional comments

Presentation Titles and Durations

University of Vermont: Finding Affinity and Mentorship (FAM) Program

Anisha Rimal, MD

Duration of Presentation in Minutes

20

Emory Children's URiM Faculty-Resident Mentorship program

Brianna Glover, MD

Duration of Presentation in Minutes

20

Lurie Children's Teen Doc Mentorship Program

Zofia Zdanowicz, MD

Duration of Presentation in Minutes

20

(90) Proposal ID: 1926370

Neonatal Hypoglycemia: Guiding Principles for Clinical Care in 2025

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **sarbattama sen**

Score: **0**

Participant(s)

sarbattama sen, MD (she/her/hers)

Position:

Vice Chair Pediatric Research

Organization:

Women & Infants Hospital of Rhode Island

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

SPR

Camilia Martin, MD, MS (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Weill Cornell Medicine

Role:

Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

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

AAP, APS, SPR

Alfonso Galderisi, MD, PhD (he/him/his)

Position:

Assistant Professor

Organization:

Yale School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Priyanka Tiwari, MD (she/her/hers)

Position:

Neonatologist

Organization:

NewYork-Presbyterian Komansky Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
Asian

Gender
Female

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

Carmen Monthe-Dreze, MD (she/her/hers)

Position:
Neonatologist/Instructor in Pediatrics

Organization:
Brigham and Women's Hospital/Harvard Medical School

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Jane Harding, MBChB DPhil (she/her/hers)

Position:
Professor of Neonatology

Organization:
Liggins Institute, University of Auckland, Auckland, New Zealand

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

One of three infants in the US is evaluated for neonatal hypoglycemia, of whom approximately 50% are affected, making it the most common biochemical abnormality of the newborn period. Recent data implicate both hypoglycemia and glycemic variability in adverse neurodevelopmental outcomes, and clinical studies have advanced neonatal hypoglycemia evaluation and management. The American Academy of Pediatrics (AAP) Policy Statement frames the common clinical approach to hypoglycemia evaluation and management in the US, and revised recommendations integrating recent data will likely be published in 2025 by the AAP Committee on Fetus and Newborn. During this comprehensive hot topic symposium, the author working group of the new guidelines will summarize the major guiding principles considered in this revision and share the evidence underlying practice guidance. Invited experts who have led pivotal studies in the field will discuss the strengths and limitations of available evidence in key domains: i) glycemia and neurologic outcomes; ii) established and emerging risk factors for neonatal hypoglycemia; iii) glucose norms and thresholds; iv) dextrose gel as first line treatment; v) role of blood glucose variability in outcomes. Talks will focus on emerging evidence, providing a rationale for practice change. This symposium is relevant for neonatologists, pediatricians and pediatric endocrinologists to understand the new recommendations, implications for practice, and systems-level changes that will support implementation.

Learning Objectives

1. To identify newborns at high risk for neonatal hypoglycemia and best practices for screening
2. To define treatment thresholds and treatment approaches to support short- and long-term benefit for infants and families
3. To establish the role of neonatal glycemia in neurophysiologic indices and neurodevelopmental outcomes

Scholarly Session Questions

-
1. **Audience Size**
150
 2. **Target audience**
neonatologists, pediatricians and pediatric endocrinologists
 3. **Tracks**
Endocrinology
General Pediatrics
Neonatology
Quality Improvement/Patient Safety
Well Newborn
 4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
 5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
none
 6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
 7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Dr. Monthe-Dreze is currently nominated for membership to SPR
 8. **Does this submission involve one or more specialties or disciplines?**
Yes, the topic is of interest to neonatologists, pediatricians and pediatric endocrinologists
 9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
 10. **Additional comments**

Presentation Titles and Durations

Established and emerging risk factors for neonatal hypoglycemia
sarbattama sen, MD

Duration of Presentation in Minutes

15

Newborn Glycemia: role in neurophysiologic and developmental outcomes

Alfonso Galderisi, MD, PhD

Duration of Presentation in Minutes

15

Identifying glucose norms and thresholds for treatment: implementing hour of life-based thresholds

Priyanka Tiwari, MD

Duration of Presentation in Minutes

15

Role of blood glucose variability in outcomes: implementing a graded treatment approach

Carmen Monthe-Dreze, MD

Duration of Presentation in Minutes

15

Dextrose gel: Trials of neonatal hypoglycemia treatment and prevention

Jane Harding, MBChB DPhil

Duration of Presentation in Minutes

15

(91) Proposal ID: 1910075

Procalcitonin in Pediatrics

Session Type: **Basic-Translational-Clinical Roundtable**

Proposal Status: **Complete / Locked**

Submitter: **Nisha Gupta**

Score: **0**

Participant(s)

Nisha Gupta, MD (she/her/hers)

Position:
Pediatric Hospitalist

Organization:
Inova Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Christine Klingaman, DO

Position:
Pediatric Hospitalist

Organization:
Inova Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Kamilah Halmon, MD

Position:

Pediatric Hospitalist/PHM Fellowship Director

Organization:

Inova Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP

Session Description

Session Description

Procalcitonin is a biomarker that has been well-studied in the adult population and has gained increased attention in the pediatric population over the past two decades. This session aims to have participants critically review pre-identified studies and determine the role of procalcitonin in key clinical scenarios.

This session will start with a 10-minute review of the pathophysiology and kinetics of procalcitonin. Following this, participants at each roundtable will spend 20 minutes reviewing 1-2 fundamental articles that describes the potential role of procalcitonin in the evaluation and management of one of the following diagnoses: lower respiratory tract infections, musculoskeletal infections, febrile infants, vesicoureteral reflux, and sepsis severity. Then, each roundtable will spend 20 minutes discussing as a group how the findings from the article(s) can be integrated into clinical practice. Each roundtable will share with the large group a summary of the article(s) and conclusions with additional insight reviewed by the presenters. The last 10 minutes will be a Q&A. Participants will be given access to an electronic folder of all the articles reviewed.

Learning Objectives

1. Review the pathophysiology and kinetics of procalcitonin production
2. Demonstrate the clinical applications of procalcitonin including: lower respiratory tract infections, musculoskeletal infections, febrile infants, vesicoureteral reflux, and sepsis severity
3. Discuss potential applications of procalcitonin into clinical practice including integration into clinical practice pathways/guidelines

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
Medical students, residents, fellows, and attendings in the following specialties - hospital medicine, critical care, neonatal/newborn medicine, emergency medicine, infectious disease, nephrology, pulmonology, orthopedics
3. **Tracks**
Critical Care
Emergency Medicine
General Pediatrics
Hospital Medicine
Infectious Diseases
Neonatology
Nephrology
Pulmonology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Kamilah Halmon has a submission for another session

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

Topic is procalcitonin involving hospital medicine, critical care, neonatal/newborn medicine, emergency medicine, infectious disease, nephrology, pulmonology, orthopedics

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

This was presented at the Pediatric Hospital Medicine conference in August 2024 and was well attended with at least 100 attendees. The format was a 35-minute clinical quick hit. We reviewed the fundamental articles that have been published for each clinical scenario (limited to four of the above) and provided an overview of the key findings. Given this conference was targeted at pediatric hospitalists, we want to disseminate this knowledge to others who may also utilize procalcitonin in their clinical practice.

10. **Additional comments**

Presentation Titles and Durations

Clinical Applications of Procalcitonin in Pediatrics

Nisha Gupta, MD

Duration of Presentation in Minutes

25

Clinical Applications of Procalcitonin in Pediatrics

Christine Klingaman, DO

Duration of Presentation in Minutes

35

Clinical Applications of Procalcitonin in Pediatrics

Kamilah Halmon, MD

Duration of Presentation in Minutes

25

(92) Proposal ID: 1933616

Utilizing the Framework of Professional Identity Formation to Create an Environment of Inclusivity in Graduate Medical Education

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Shaunte Anum-Addo**

Score: **0**

Participant(s)

Shaunte Y. Anum-Addo, MD (she/her/hers)

Position:

Assistant Program Director for DEI, Pediatric Residency Program,
Assistant. Clinical Professor

Organization:

Children's National Health System

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP

Jessica Hippolyte, MD, MPH (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Childrens National Hospital

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP

Aisha Barber, MD MEd (she/her/hers)

Position:

Director, Pediatric Residency Program; Associate Professor of Pediatrics

Organization:

Children's National Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP

Courtney A. Gilliam, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Cincinnati Childrens Hospital Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, APA

Lahia Yemane, MD (she/her/hers)

Position:

APD, Pediatrics Residency; Asst Dean, Diversity in GME

Organization:

Stanford University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, APA

Tyree Winters, DO (he/him/his)

Position:

Clinical Assistant Professor of Pediatrics

Organization:

Thomas Jefferson University Sidney Kimmel Medical College

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
Black or African American

Gender
Male

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

Theiline T. Gborkorquellie, MD, MHS (she/her/hers)

Position:
Director of Health Equity Education, Pediatric Residency Program;
Assistant Professor

Organization:
Children's National Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Olanrewaju Falusi, MD, MEd (she/her/hers)

Position:
Medical Director of Advocacy Education; Residency Associate Program
Director

Organization:
Children's National Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Session Description

Session Description

Increasing diversity within the pediatric workforce has been shown to improve access to care, improve health outcomes and reduce healthcare disparities. A diverse physician workforce is imperative to achieving the goal of health equity. However, recruitment of diverse trainees into GME programs, in and of itself, has not been enough to create sustainable change to the current composition of the pediatric workforce. Trainees from backgrounds underrepresented in medicine (UIM) often face challenges of inclusivity and belonging that threaten their ability learn, develop, and thrive, often leading decreased job satisfaction, burnout and, in some instances, attrition. Rather, to achieve the goal of workforce diversity, efforts must be made to address the experience of trainees from UIM backgrounds and to create a foundation of inclusivity.

The concept of Professional Identity Formation (PIF) provides a framework to consider how GME leaders can intentionally address inclusivity in training programs. PIF describes the process through which trainees integrate their personal and professional identities as they learn to act and feel like they belong in their professional role. Multiple factors influence the process of PIF including the people with whom trainees interact, trainees' clinical and nonclinical experiences, their treatment by others, as well as a training program's structure, policy, and physical environment. These factors may be influenced to support inclusive learning environments for trainees from UIM backgrounds.

This symposium will highlight how the factors influencing PIF can be leveraged to address inclusivity in GME, by showcasing examples from across the country.

Learning Objectives

1. Discuss how inclusivity supports the goal of fostering diversity in medical training.
2. Describe the concept of professional identity formation (PIF) and how PIF contributes to a sense of belonging.
3. Illustrate how graduate medical education leadership can use the PIF framework to promote inclusivity in their programs.

Scholarly Session Questions

1. **Audience Size**

60

2. **Target audience**

The target audience for this hot topic sessions are individuals interested in diversity, equity, and inclusion topics, individuals interested in medical education, and curriculum development, individuals interested in professional identity formation and trainees.

3. **Tracks**

Academic and Research Skills
Diversity, Equity, and Inclusion
Health Equity/Social Determinants of Health
Medical Education

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

None

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

N/a

8. **Does this submission involve one or more specialties or disciplines?**

n/a

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

n/a

10. Additional comments

Presentation Titles and Durations

Welcome and introduction

Shaunte Y. Anum-Addo, MD

Duration of Presentation in Minutes

5

Closing remarks

Jessica Hippolyte, MD, MPH

Duration of Presentation in Minutes

5

Equity in GME through the lens of professional identity formation

Aisha Barber, MD MEd

Duration of Presentation in Minutes

10

Novel educational approaches to build belonging; the use of race based affinity groups in microaggression training

Courtney A. Gilliam, MD

Duration of Presentation in Minutes

10

LEAD: Increasing trainee DEI leadership skills, scholarship skills, and sense of belonging in academic medicine

Lahia Yemane, MD

Duration of Presentation in Minutes

10

How implicit bias training may improve pediatric residents' confidence in addressing social determinants of health

Tyree Winters, DO

Duration of Presentation in Minutes

10

Fostering inclusivity in GME: Leveraging service learning to advance health equity in pediatric residency

Theiline T. Gborkorquellie, MD, MHS

Duration of Presentation in Minutes

10

Providing faculty development on eliminating biased language to promote health equity

Olanrewaju Falusi, MD, MEd

Duration of Presentation in Minutes

10

(93) Proposal ID: 1930383

Epidemiology and Prevention of Healthcare-Associated Infections in Newborns and Children

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Gregory Priebe**

Score: **0**

Participant(s)

Charlotte Woods-Hill, MD MSHP

Position:

Assistant Professor

Organization:

Perelman School of Medicine at the University of Pennsylvania

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Karen M. Puopolo, MD, PhD (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Perelman School of Medicine at the University of Pennsylvania

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APS, SPR, PIDS

Gregory P. Priebe, MD (he/him/his)

Position:

Associate Professor

Organization:

Boston Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, SPR

Session Description

Session Description

Hospitalized newborns and children continue to suffer from healthcare-associated infections, including central line associated bloodstream infections (CLABSI) and pneumonia, which lead to increased morbidity and costs and

account for a large proportion of antibiotic use and misuse. This session will provide an update on new metrics for surveillance of hospital-onset infections as well as new prevention strategies for CLABSI and hospital-acquired pneumonia.

Learning Objectives

1. Describe diagnostic stewardship approaches for the prevention of CLABSI and antibiotic overuse.
2. Understand how prevention efforts for hospital-onset bacteremia will differ from those for CLABSI.
3. Describe how prevention bundles differ for hospital-acquired pneumonia (non-ventilator-associated), VAP, and VAE.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Physicians, nurses, APPs, and respiratory therapists who work in PICUs, CICUs, and NICUs; infectious diseases specialists; infection preventionists
3. **Tracks**
Critical Care
Infectious Diseases
Neonatology
Quality Improvement/Patient Safety
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Gregory Priebe has a proposal for another Hot Topics Symposium entitled "Microbiome and Infection." Please avoid overlap.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

Yes: ID, Critical Care, Neonatology, Infection Prevention and Control

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

N/A

10. **Additional comments**

Presentation Titles and Durations

Diagnostic Stewardship for Prevention of Pediatric CLABSI

Charlotte Woods-Hill, MD MSHP

Duration of Presentation in Minutes

30

Hospital-Onset Bacteremia Surveillance in Newborns and Children

Karen M. Puopolo, MD, PhD

Duration of Presentation in Minutes

30

Prevention of Pediatric Healthcare-Associated Pneumonia and Pediatric Ventilator-Associated Events

Gregory P. Priebe, MD

Duration of Presentation in Minutes

30

(94) Proposal ID: 1911130

Best Use Cases for Pharmacogenetics in Pediatrics

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Laura Ramsey**

Score: **0**

Participant(s)

Emily J. Cicali, PharmD (she/her/hers)

Position:

Clinical Associate Professor

Organization:

University of Florida College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Laura Ramsey, PhD (she/her/hers)

Position:

Associate Professor

Organization:

Children's Mercy Hospitals and Clinics

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

SPR

Sonya C. Tang Girdwood, MD, PhD (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Cincinnati Children' Hospital Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, SPR

Benjamin Duong, PharmD (he/him/his)

Position:

Clinical Pharmacogenomics Service Manager

Organization:

Nemours Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
Asian

Gender
Male

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

Session Description

Session Description

Pharmacogenetics is an important component of precision medicine, and the evidence for incorporating pharmacogenetics into clinical practice to improve outcomes in pediatrics is rapidly emerging. However, many pediatricians, whether generalists or subspecialists, lack formal training in incorporating pharmacogenetic test results into clinical practice. In this hot topic symposium, we will introduce participants to key terms used in pharmacogenetics and demonstrate resources to help pediatricians in using pharmacogenetics. Following the introduction, four talks (15 minutes each) will provide a practical summary of the pharmacogenetics evidence and implications for clinical practice through case discussions in different clinical areas within pediatrics. First, we will review the available pharmacogenetic evidence available for drugs relevant to the treatment of gastrointestinal disorders, including proton pump inhibitors and ondansetron, both prescribed frequently by general pediatricians and subspecialists for inpatient and outpatient use. Second, we will discuss how pharmacogenetics can be incorporated into evidence-based care in psychiatric disorders. Third, we will discuss how pharmacogenetics can benefit the care of children with medical complexity who are often prescribed many medications, from pain medications to neuropsychiatric medications and beyond. Finally, we will describe how pharmacogenetics can be incorporated into primary care practice. The remaining 15 minutes of the symposium will be a Q&A session, moderated by a pharmacologist who directs a pediatric pharmacogenetics service. The speakers have a diversity of training, including two pharmacists, a PhD pharmacologist, and a MD/PhD clinician scientist.

Learning Objectives

1. Recognize the importance of pharmacogenetics in the prescribing of common medications to children and adolescents and consider making changes to your prescribing practices

2. Define common terminology used in pharmacogenetics and identify pharmacogenetics resources available for future reference
3. Name important drug-gene pairs for medications prescribed for pain control, gastrointestinal disorders and mental health disorders with significant pediatric evidence for prescribing actions

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
General pediatricians, pediatric subspecialists, clinical pharmacologists
3. **Tracks**
Adolescent Medicine
Developmental and Behavioral Pediatrics
Gastroenterology/Hepatology
General Pediatrics
Genomics/Epigenomics
Hospital Medicine
Mental Health
Pharmacology and Therapeutics
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Please avoid scheduling at the same time as any other Pharmacology and Therapeutics sessions since we all have interest in P&T sessions and there are so few P&T sessions at PAS.
In addition, the following people are in proposals for other sessions:
Emily Cicali, Benjamin Duong, Laura Ramsey, Sonya Tang Girdwood
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Benjamin Duong, PharmD is the Clinical Pharmacogenomics Service Manager at Nemours Children's Health. He is a member of the Clinical Pharmacogenetics Implementation and Pharmacogenomics Global

Research Network. He has implemented one of the first clinical pharmacogenomics service in a pediatric health system that provides consultation for pediatricians in determining if pharmacogenetic testing is warranted, interpretation of the results in the perspective of the patient's need, and quality assurance of ordered/resulting through pharmacogenetic testing stewardship to minimize unnecessary testing or result misinterpretation. He engages in multidisciplinary collaboration to develop an in-house pharmacogenomics panel, pharmacogenomic clinical decision support with recommendations for drug-gene interactions, prepares educational materials for providers and patients, and participates in research (clinical trials and implementation sciences).

Emily J. Cicali, PharmD is a Clinical Associate Professor at University of Florida College of Pharmacy. She is a member of the Clinical Pharmacogenetics Implementation and Pharmacogenomics Global Research Network. Dr. Cicali launched a virtual pharmacist-led pharmacogenetics consult clinic, MyRx, that provides services throughout the state of Florida. About half of the patients seen in the clinic are pediatric patients seeking guidance from pharmacogenetic testing to guide psychiatric medications and/or a variety of other outpatient medications (e.g., PPIs). In addition to directing the MyRx program, Dr. Cicali is the Assistant Director for Clinical Pharmacogenetics within the UF Health Precision Medicine Program and oversees the pharmacogenetics infrastructure and day to day clinical activities. She has direct clinical experience with both single gene interpretation as well as panel-based gene test interpretations. She has a research interest in pharmacogenetics implementation and experience with several pragmatic clinical trials, most notably a PPI pilot in pediatric patients.

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

Topic is Pharmacology involving Mental Health, GI, Hospital Medicine, Gen Peds and the speakers include a pharmacologist, two pharmacists, and a pediatric hospitalist, who each run a pharmacogenetics implementation program at their respective institution.

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

A similar session was presented at PAS in 2022, with fabulous feedback and a request from the audience to do it every year. The two major updates are to include a presentation about children with medical complexity and one focused on general pediatrics.

10. Additional comments

Presentation Titles and Durations

Introduction (15 min) and Pharmacogenetics relevant to treating nausea, vomiting and reflux (15 min)

Emily J. Cicali, PharmD

Duration of Presentation in Minutes

30

Reducing Your Anxiety in Prescribing SSRIs with Pharmacogenetics (15 min), Q&A (15 min)

Laura Ramsey, PhD

Duration of Presentation in Minutes

30

Why Children with Medical Complexity Would Benefit from Pharmacogenetic Testing

Sonya C. Tang Girdwood, MD, PhD

Duration of Presentation in Minutes

15

Pharmacogenetics in General Pediatrics

Benjamin Duong, PharmD

Duration of Presentation in Minutes

15

(95) Proposal ID: 1926692

The Role of Pediatric Clinicians and Researchers in Medical Device Innovation

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Juan Espinoza**

Score: **0**

Participant(s)

Juan C. Espinoza, MD (he/him/his)

Position:

Chief Research Informatics Officer

Organization:

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

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Male

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

AAP, APA, SPR

Grzegorz Zapotoczny, PhD

Position:

Assistant Professor of Pediatrics

Organization:

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

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Kolaleh Eskandanian, PhD, MBA (she/her/hers)

Position:

Vice President and Chief Innovation Officer

Organization:

Children's National Health System

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Carolyn C. FOSTER, MD, MS (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

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

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

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

Cory Criss, MD

Position:
Assistant Professor

Organization:
Nationwide Children's Hospital

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Male

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

Session Description

Session Description

A major health inequity and safety issue in the US is the dearth of medical devices designed and tested specifically for children. There are several scientific, clinical, regulatory, and financial barriers to making progress that have been previously described in detail¹. Although federal agencies like the National Institutes of Health (NIH), The Food and Drug Administration (FDA), and Centers for Medicare and Medicaid Services (CMS) are responsible for discrete tasks like funding device-related research, regulating devices, and guidance device reimbursement, there is no national-level network to support and organize systems-level solutions to these barriers.

Pediatric clinicians play an important role in pediatric device innovation: as Innovators, As Advocates, and as Partners. In this Hot Topic Symposium, audience members will be able to learn from national leaders in pediatric device innovation about the regulatory and financial landscape surrounding medical devices, understand the journey from concept to commercialization, how to bring their own ideas to life, how to partner with industry, and important areas of legislative and public health advocacy related to devices.

Learning Objectives

1. Understand the scientific, clinical, regulatory, and financial barriers to making progress in pediatric medical devices.
2. Assess and organize effective partnerships with researchers and industry to develop and evaluate pediatric medical devices.
3. Recognize key areas of legislative and public health advocacy related to pediatric medical devices.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
fellows, faculty at all stages, researchers, primary care and subspecialty care
3. **Tracks**
Advocacy
Career Development
Clinical Research
Public Health
Social Media & Technology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Complex Care Sig
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes, topics that span medicine, business, engineering, public policy. The speakers include regulatory experts, pediatric surgeons, pediatric hospitalists, complex care pediatricians, and engineers.
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**
3 of the 5 speakers are PIs of the FDA funded Pediatric Device Consortia and bring significant expertise in working with startups, hospitals, investors, and federal agencies.

Presentation Titles and Durations

Introduction to medical device development

Juan C. Espinoza, MD

Duration of Presentation in Minutes

15

Overview of Medical Device Regulation

Grzegorz Zapotoczny, PhD

Duration of Presentation in Minutes

15

Pediatricians as Partners

Kolaleh Eskandarian, PhD, MBA

Duration of Presentation in Minutes

15

Pediatricians as Advocates

Carolyn C. FOSTER, MD, MS

Duration of Presentation in Minutes

15

Pediatricians as Innovators

Cory Criss, MD

Duration of Presentation in Minutes

15

(96) Proposal ID: 1909487

Physician Recruitment – “How Three Pediatric Physicians from around the United States Sealed the Deal!”

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Leigh Fredericks**

Score: **0**

Participant(s)

Leigh Fredericks (she/her/hers)

Position:

Physician Recruiter

Organization:

University of Wisconsin School of Medicine and Public Health

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Patty A. Shipton, CPRP (she/her/hers)

Position:

Senior Physician Recruiter

Organization:

Penn State Health

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

DeMarco A. Bowen, MD, MPH

Position:

Assistant Professor

Organization:

UW School of Medicine and Public Health

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American, White

Gender

Male

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

AAP

Claudia M. Douglas, MD, MS (she/her/hers)

Position:

Faculty Scientist - Acting Assistant Professor

Organization:

Seattle Children's

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Silvia Pereira-Smith, MD (she/her/hers)

Position:
Associate Professor

Organization:
Medical University of South Carolina College of Medicine

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Discover how three Physicians from various regions in the United States navigated job searching and found their current positions. Each provider will share their unique recruitment experience and what they prioritized when looking for an opportunity. Learn what key factors are sought after in Physician recruitment, such as benefits, location, professional development, teamwork, malpractice insurance, flexible PTO, 401K, compensation, work/life balance, positive relationships with staff and work colleagues, administrative support,

and many more. You may be surprised!

For recruiters and hiring managers, broaden the way you think about recruitment by developing recruitment strategies that are trending in 2025, which can help you get candidates to sign on the dotted line. Explore ways to create efficiency when recruiting and improve the overall candidate experience.

If you are a physician or trainee seeking a new position, join our panelists to discover the key dos and don'ts of finding the ideal job to suit your needs.

Participate in the live Q&A portion with three recently signed Physician panelists, moderated by two Physician Recruiters who ask pre-submitted burning questions and open the floor for you to ask a question on the spot.

Whether you are a Medical Student, Resident, Fellow, Hiring Manager, Administrator, Chair, Chief, Director, Recruiter, or HR Representative, this panel discussion is for you. You will walk away having learned what to prioritize when looking for a position, offering a position, and how to provide a phenomenal Physician recruitment experience.

Learning Objectives

1. Compare the key factors of what candidates prioritize as the most important aspects when looking for a Physician opportunity.
2. Develop successful recruitment strategies that broaden the way you think about recruitment.
3. Discover what Physician Recruitment processes look like and the trends projected for the future.

Scholarly Session Questions

1. **Audience Size**

300

2. **Target audience**

Trainees (Med Students, Residents, Fellows), Current Physicians, Hiring Managers (Chairs, Chiefs, Administrators, Human Resources, etc.).

3. **Tracks**

Academic and Research Skills

Adolescent Medicine

Career Development

Developmental and Behavioral Pediatrics

General Pediatrics

Hospital Medicine

Leadership and Business Training
Neonatology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

None

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

All the Physician Panelists are members. Leigh Fredericks & Patty Shipton are not members due to being Physician Recruiters.

8. **Does this submission involve one or more specialties or disciplines?**

It applies to all specialties within Pediatrics, due to all areas being involved with Physician Recruitment.

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

N/A

10. **Additional comments**

We are enthusiastic about showcasing this diverse panel of Pediatric Physicians recently hired at their current institutions to discuss the hot topic of all things relating to "Physician Recruitment." The three Providers are from the University of Wisconsin-Madison, University of Washington-Seattle, and the Medical University of South Carolina. Leigh Fredericks is from the University of Wisconsin-Madison and Patty Shipton is from the Pennsylvania State University, both Physician Recruiters who are invested in discussing the current state of recruitment and moderating several questions from Physician candidates, Trainees, Hiring Managers, Administrators, Faculty members, and more.

Presentation Titles and Durations

Physician recruitment How three Pediatric Physicians from around the United States sealed the deal!

Leigh Fredericks

Duration of Presentation in Minutes

30

Physician recruitment □ □How three Pediatric Physicians from around the United States sealed the deal!□

Patty A. Shipton, CPRP

Duration of Presentation in Minutes

30

Physician recruitment □ □How three Pediatric Physicians from around the United States sealed the deal!□

DeMarco A. Bowen, MD, MPH

Duration of Presentation in Minutes

60

Physician recruitment □ □How three Pediatric Physicians from around the United States sealed the deal!□

Claudia M. Douglas, MD, MS

Duration of Presentation in Minutes

60

Physician recruitment □ □How three Pediatric Physicians from around the United States sealed the deal!□

Silvia Pereira-Smith, MD

Duration of Presentation in Minutes

60

(97) Proposal ID: 1904853

Hot Topics in Clinical Pathways: Driving Continuous Improvement, EHR Integration, Equity, and Family-Centered Care in Pediatrics

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Courtney Titus**

Score: **0**

Participant(s)

Courtney Titus, MPAS, PA-C, CLSSGB

Position:

Director, Clinical Pathways Program

Organization:

Johns Hopkins All Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Kelsey Zindel, DNP, APRN-NP, CPNP-AC/PC (she/her/hers)

Position:

Manager, Clinical Effectiveness

Organization:

Children's Nebraska

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Sophia Blythe, MHA (she/her/hers)

Position:

Masters in Healthcare Administration

Organization:

Arkansas Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Leigh Anne Bakel, MD, MSc (she/her/hers)

Position:

Associate Professor of Pediatric Hospital Medicine

Organization:

Children's Hospital Colorado

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Ilana Waynik, MD (she/her/hers)

Position:
Associate Professor of Pediatrics

Organization:
Connecticut Children's Medical Center

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Jarrod Dusin, PhD, RD, CPHQ (he/him/his)

Position:
None

Organization:
Children's Mercy Kansas City

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Amy Bryl, MD (she/her/hers)

Position:
Associate Clinical Professor

Organization:
University of California, San Diego School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Kathleen Brown, MD (she/her/hers)

Position:
Professor Pediatrics and Emergency Medicine

Organization:
Childrens National

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

This session will highlight innovative strategies in pediatric clinical pathways, covering continuous improvement, EHR integration, nurse-led equity initiatives, and family-centered care, driving impactful change in pediatric healthcare.

Learning Objectives

1. Implement key strategies to promote continuous improvement in clinical pathway programs, ensuring they remain adaptable and effective in delivering high-quality pediatric care.
2. Outline potential strategies to engage patient and families in the clinical pathway development process
3. Describe how nurse-initiated clinical pathways can improve all six domains of quality care: safety, effectiveness, patient-centeredness, timeliness, efficiency, and equity.

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

The target audience for this symposium includes pediatric physicians, physician assistants, nurse practitioners, nurses, healthcare administrators, quality improvement specialists, frontline healthcare staff and clinicians involved in or interested in the development of clinical pathways and clinical pathway programs. The symposium aims to engage these professionals in discussions about enhancing equity and quality of care through collaborative practice.

3. **Tracks**

Critical Care

Diversity, Equity, and Inclusion

EHR/Medical Informatics

Emergency Medicine
General Pediatrics
Hospital Medicine
Medical Education
Quality Improvement/Patient Safety

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
no
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
n/a
8. **Does this submission involve one or more specialties or disciplines?**
Yes, this submission involves multiple specialties and disciplines. Clinical pathways integrate and coordinate care across different settings, including inpatient, outpatient, and specialty care. They reflect a collaborative approach that aligns various disciplines to enhance patient outcomes and streamline care processes.
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**
Clinical pathways are a crucial and evolving area in healthcare and offer significant opportunities for improving patient care. Our session will address these critical aspects and equip healthcare professionals with the tools and knowledge to effectively implement change, ultimately leading to better patient outcomes and improved system efficiency.

Presentation Titles and Durations

Introduction, Q&A and Closing Remarks for Hot Topics in Clinical Pathways
Courtney Titus, MPAS, PA-C, CLSSGB

Duration of Presentation in Minutes

10

Successful change management strategies for EHR-integrated clinical pathways

Kelsey Zindel, DNP, APRN-NP, CPNP-AC/PC

Duration of Presentation in Minutes

10

Successful change management strategies for EHR-integrated clinical pathways

Sophia Blythe, MHA

Duration of Presentation in Minutes

10

Strategies to promote continuous improvement in clinical pathway programs

Leigh Anne Bakel, MD, MSc

Duration of Presentation in Minutes

10

Strategies to promote continuous improvement in clinical pathway programs

Ilana Waynik, MD

Duration of Presentation in Minutes

10

Patient and Family Engagement in Clinical Pathway Development

Jarrold Dusin, PhD, RD, CPHQ

Duration of Presentation in Minutes

20

How to use nurse-initiated clinical pathways to improve equity & overall quality of care in a pediatric emergency department

Amy Bryl, MD

Duration of Presentation in Minutes

10

How to use nurse-initiated clinical pathways to improve equity & overall quality of care in a pediatric emergency department

Kathleen Brown, MD

Duration of Presentation in Minutes

10

(98) Proposal ID: 1915402

Together we stand, divided we fall – the impact of prematurity on cardiovascular and pulmonary health

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Roopa siddaiah**

Score: **0**

Participant(s)

Krithika Lingappan, MD MS PhD

Position:

Associate Professor

Organization:

Childrens Hospital of Philadelphia

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APS, SPR

Kara Goss, MD

Position:

Associate Professor

Organization:

University of Texas Southwestern Medical School

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Arvind Sehgal, PhD (he/him/his)

Position:

Prof

Organization:

MONASH UNIVERSITY

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

SPR

Shazia Bhombal, MD

Position:

Associate Professor

Organization:

Children's Healthcare of Atlanta/Emory University

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Roopa Siddaiah, MD (she/her/hers)

Position:
Associate Professor of Pediatrics

Organization:
Penn State Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Anne Monique Nuyt, MD (she/her/hers)

Position:
Chair/chief and Professor of Pediatrics

Organization:
Universite de Montreal Faculty of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Steven H. Abman, MD (he/him/his)

Position:
Professor

Organization:
University of Colorado School of Medicine

Role:

Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Preterm infants are born with underdeveloped lungs that are not fully equipped for efficient gas exchange. The lifesaving ventilatory support further stress their immature pulmonary microvasculature and hinder alveolar development, leading to inflammation, vascular remodeling and onset of bronchopulmonary dysplasia (BPD and associated pulmonary hypertension (BPD-PH). This issue is more severe in infants with intrauterine growth restriction (IUGR) where disrupted angiogenesis results in a sparse pulmonary microvasculature and maladaptive fetal pulmonary vessels that become thick and stiff. This can further exacerbate right ventricular dysfunction, worsening pulmonary blood

flow and gas exchange.

Cardiorespiratory mechanics are further complicated by other co-morbidities associated with prematurity such as elevated systemic afterload due to abnormal renin-angiotensin regulation. Additionally, left ventricular diastolic dysfunction characterized by impaired relaxation and increased stiffness, can cause pulmonary congestion due to back pressure leading to post-capillary or pulmonary venous hypertension.

Positive pressure ventilation also impacts cardiac function. Insufficient ventilation can increase pulmonary vascular resistance (PVR) and compromises pulmonary blood flow, while excessive positive pressure could negatively affect both pulmonary and systemic venous return, altering cardiac output and function. Achieving an optimal Positive End-Expiratory Pressure (PEEP) is essential for recruiting lung function and improving oxygenation while lowering PVR without adversely affecting cardiac hemodynamics.

Understanding early cardiopulmonary interaction is crucial for grasping the cardiovascular challenges and potential long-term health impacts these infants may face as they grow into adults.

Learning Objectives

1. Understand the pulmonary vascular, right heart, and left heart dysfunction associated with premature birth
2. Evaluate the impact of ventilation on hemodynamics in the setting of BPD-PH
3. Appreciate long-term sequelae of cardiopulmonary dysfunction in preterm-born adults

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Neonatology, cardiology, pulmonology, general pediatrics, pediatricians involved in long-term care of preterm infants, respiratory therapist, advanced practice providers
3. **Tracks**
Cardiology
Clinical Research
General Pediatrics
Neonatology
Pulmonology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

NA

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr. Kara Goss is not a member of the organization; however, she is a global expert on the implications of prematurity and cardiac and pulmonary vascular dysplasia into adulthood.

8. **Does this submission involve one or more specialties or disciplines?**

Neonatology, cardiology, pulmonology, general pediatrics, pediatricians involved in long-term care of preterm infants, respiratory therapist, advanced practice providers

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

NA

10. **Additional comments**

None

Presentation Titles and Durations

Effect of prematurity on pulmonary vascular growth and impact on the right ventricle

Kara Goss, MD

Duration of Presentation in Minutes

13

Consequences of preterm birth on left ventricle and systemic circulation

Arvind Sehgal, PhD

Duration of Presentation in Minutes

13

Tools to assess cardiopulmonary interactions in preterm infants

Shazia Bhombal, MD

Duration of Presentation in Minutes

13

Review ventilatory strategies to optimize hemodynamics in BPD
Roopa Siddaiah, MD

Duration of Presentation in Minutes

13

Long-term Implications of prematurity on the cardiovascular system
Anne Monique Nuyt, MD

Duration of Presentation in Minutes

13

(99) Proposal ID: 1915181

Congenital Diaphragmatic Hernia: Breaking Boundaries in Fetal Therapies, Cardio-respiratory Transitions, and Precision Care

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Gabriel Altit**

Score: **0**

Participant(s)

Gabriel Altit, MDCM, MSc, FRCPC, FASE (he/him/his)

Position:

Neonatologist - Assistant Professor

Organization:

McGill University Faculty of Medicine and Health Sciences

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Prefer not to respond

Gender

Male

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

SPR

Neil Patel, MD (he/him/his)

Position:

Associate Professor

Organization:

University of Glasgow

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Prefer not to respond

Gender

Male

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

Not a member of any of these organizations

Pramod Puligandl, MD MSc (he/him/his)

Position:

Professor of Pediatric Surgery, Pediatrics and Surgery

Organization:

Montreal Childrens Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

AAP

María V. Fraga, MD

Position:

Professor of Clinical Pediatrics

Organization:

Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Shazia Bhombal, MD

Position:
Associate Professor

Organization:
Children's Healthcare of Atlanta/Emory University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Jan A. Deprest, MD PhD FRCOG (he/him/his)

Position:
Professor Obstetrics Gynaecology

Organization:
KU Leuven

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Male

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

Session Description

Session Description

This interactive session, led by world-renowned experts in congenital diaphragmatic hernia (CDH), will offer insights into both the challenges and advancements in fetal and postnatal cardio-respiratory management. The session will feature a Q&A and future directions in CDH care.

Dr. Maky Fraga, a lead in CDH neonatology at the Children's Hospital of Philadelphia (CHOP)—the U.S. center with the highest annual number of CDH newborns—will explore delivery room strategies, focusing on cardiovascular transitions, delayed cord clamping, and lung ultrasound (LUS). Dr. Shazia Bhombal, a neonatologist at Emory with expertise in cardiovascular phenotyping and neonatal hemodynamics, will highlight the essential role of functional echocardiography in early CDH care.

Dr. Pramod Puligandla, who led the Canadian national guidelines for CDH, will discuss the balance between standardized and individualized care. A pediatric surgeon and intensive care specialist with expertise in ECMO, he will explore how to optimize outcomes. Dr. Jan Deprest, the global authority on fetal therapies and principal investigator of the TOTAL trial, will cover the possibilities and challenges of fetal therapies in CDH. Dr. Florian Kipfmüller, a neonatologist from Germany and an expert in pulmonary hypertension, will discuss European perspectives on PH phenotypes and controversies around the use of pulmonary vasodilators like iNO.

Chaired by Dr. Patel and Dr. Altit, the session will provide both global perspectives, offering cutting-edge insights and innovations in CDH management.

Learning Objectives

1. Explore fetal and postnatal management: Review current strategies, including FETO, delayed cord clamping, and lung ultrasound, to optimize outcomes in CDH patients.
2. Understand hemodynamics assessment's role: Learn the critical role of echocardiography in cardiovascular phenotyping and hemodynamic assessment for early CDH care.
3. Evaluate personalized vs standardized care: Discuss the impact of standardized protocols versus individualized management on outcomes in CDH, particularly regarding ECMO and pulmonary hypertension.

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

1. Neonatologists, Cardiologists, Pediatric Surgery, Respiriologists, Obstetricians Pediatric Healthcare Professionals, Allied health care professionals (nursing, respiratory therapy, pharmacist, social worker)

2. Medical Educators and Academic Faculty

3. Healthcare Administrators and Policy Makers

5. Researchers in Neonatology, Pediatrics, Obstetrics, Perinatal Health, Cardiovascular medicine and respiratory medicine

6. Patient Advocacy Groups and Parent Support Organizations

3. **Tracks**

Cardiology

Children with Chronic Conditions

Critical Care

Epidemiology

General Pediatrics

Hospital Medicine

Hypertension

Neonatology

Palliative Care

Pulmonology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Cannot be at same time as the Hemodynamics Club

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

G Altit – SPR member

N Patel – Not a member but a Neonatologist from the UK providing a European perspective on the topic. Senior and world renown expert on the topic of CDH.

J Deprest - Obstetrical medicine and world expert on the topic of fetal tracheal occlusion and fetal management in CDH.

F Kipfmueeller - Specialist from Europe with expertise in CDH-related pulmonary hypertension. Not a member.

S Bhombal – SPR member

M Fraga – AAP member

P Puligandla – AAP member

8. **Does this submission involve one or more specialties or disciplines?**

Yes - Neonatology, Respiratory Medicine, Cardiology, Obstetrics and Fetal Care, Neonatal Hemodynamics and Cardiology, Pediatrics, Community Groups and Family organization.

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

No

10. **Additional comments**

Session Format: The 90-minute session will feature presentations from world-renowned experts in congenital diaphragmatic hernia (CDH), sharing their strategies and experiences in managing both fetal and postnatal CDH care. Dr. Jan Deprest will begin with an overview of fetal therapies and the challenges surrounding FETO. Dr. Maky Fraga will focus on delivery room management and the cardiovascular transition, incorporating techniques like delayed cord clamping and lung ultrasound. Dr. Shazia Bhombal will present the role of functional (targeted neonatal) echocardiography in CDH, highlighting its importance in early cardiovascular phenotyping. Dr. Florian Kipfmueeller will discuss the evolving understanding of pulmonary hypertension in CDH, addressing the role of pulmonary vasodilators (and controversy). Dr. Pramod Puligandla will explore the balance between standardized and individualized care, drawing on his experience leading the Canadian national guidelines for CDH. The session will conclude with an interactive discussion and Q&A segment, providing practical guidance and real-world application.

This session will cover the full spectrum of CDH management, from fetal interventions to delivery room strategies and immediate postnatal critical care. It will focus on cardio-respiratory approaches and the standardization of care for these highly vulnerable infants, featuring a panel of world-renowned experts in the field.

Expected Outcomes

Attendees will leave with a comprehensive understanding of the latest CDH management strategies, from fetal therapies to postnatal cardiovascular care. They will gain insight into the use of functional echocardiography and its role in guiding personalized care decisions. The session aims to equip participants with evidence-based approaches that can be applied to optimize patient outcomes in CDH.

Conclusion

This panel brings together global leaders in CDH management, offering both advanced insights and practical strategies. Participants will be empowered to implement new approaches in their own practice, improving outcomes for infants with CDH through tailored, cutting-edge care.

Presentation Titles and Durations

Introduction and Q&A moderation
Gabriel Altit, MDCM, MSc, FRCPC, FASE
Duration of Presentation in Minutes
13

Introduction and Q&A moderation
Neil Patel, MD
Duration of Presentation in Minutes
12

One Size Fits All? Balancing Standardized vs. Individualized Care in CDH
Pramod Puligandl, MD MSc
Duration of Presentation in Minutes
13

Mastering the First Moments: Navigating Cardiovascular Transitions in Congenital Diaphragmatic Hernia
María V. Fraga, MD
Duration of Presentation in Minutes
13

Leveraging Functional Echocardiography to Optimize Hemodynamic Management in CDH

Shazia Bhombal, MD

Duration of Presentation in Minutes

13

Fetal therapies in CDH: possibilities and practical challenges

Jan A. Deprest, MD PhD FRCOG

Duration of Presentation in Minutes

13

(100) Proposal ID: 1907792

Tiny Hearts, Big Teamwork: Creating Synergy between Neonatology and Pediatric Cardiology

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **CARL BACKES**

Score: **0**

Participant(s)

CARL BACKES, MD

Position:
MD

Organization:
Nationwide Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Mary T. Donofrio, MD (she/her/hers)

Position:
Director of Prenatal Cardiology, VanMetre Professor of Fetal Cardiology

Organization:
Children's National Health System

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Ganga Krishnamurthy, MD (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Columbia University Vagelos College of Physicians and Surgeons

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

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

Not a member of any of these organizations

Kevin Hill, MD, MS (he/him/his)

Position:

Professor of Pediatrics, Chief Division of Pediatric Cardiology

Organization:

Kevin Hill

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Philip T. Levy, MD (he/him/his)

Position:
Associate Professor of Pediatrics

Organization:
Boston Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Stephanie Ford, MD (she/her/hers)

Position:
Associate Professor of Pediatrics, Neonatology Critical Care Attending

Organization:
Rainbow Babies and Children's Hospitals, Case Western Reserve
University School of Medicine

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Breakthroughs in the ability to diagnose, manage, and treat neonates with congenital heart disease (CHD) have enabled the pediatric community to positively change the short and longer-term outcomes of these highly vulnerable patients. Despite this success, at many institutions, collaborative clinical care and research initiatives between neonatology and pediatric cardiology remain elusive. Perpetuation of this siloed approach between neonatology and pediatric Cardiology hinders scientific progress and clinical-therapy development. To bridge the gap, the proposed scholarly session will highlight novel and innovative partnerships between neonatology and pediatric cardiology to address diagnostic and therapeutic challenges among CHD neonates. In view of the marked variability among centers in the approach to care, we will share ongoing innovative clinical and research programs in an interdisciplinary effort to reduce barriers and achieve best outcomes for CHD neonates.

Learning Objectives

1. Review contemporary outcomes among neonates with CHD and reinforce the critical need for greater collaboration between neonatology and pediatric Cardiology.
2. Describe ongoing clinical care programs that have accelerated best outcomes and identify future opportunities for neonatology and pediatric cardiology to be complementary partners.
3. Recognize the need for training programs to support the next generation of pediatric cardiology clinician-scientists and highlight innovative research strategies built on diverse academic partnerships.

Scholarly Session Questions

1. **Audience Size**
120
2. **Target audience**
Trainees (students, residents, fellows) and faculty interested in neonatology, pediatric cardiology, fetal cardiology, perinatal care, and obstetrics.
3. **Tracks**
Academic and Research Skills
Cardiology
Clinical Research
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Dr. Backes has also submitted a proposal for another Scholarly Session entitled "When to Consider Transcatheter Device Closure of the Patent Ductus Arteriosus in Premature Infants: Important Updates in 2025".
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes, Cardiology and Neonatology
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

A siloed mentality - bridging the gap between neonatology and pediatric cardiology

CARL BACKES, MD

Duration of Presentation in Minutes

5

Strategies to achieve optimal delivery room care of the neonate with congenital heart disease

Mary T. Donofrio, MD

Duration of Presentation in Minutes

15

The neonatal-cardiac intensive care unit - a model for collaboration and teamwork

Ganga Krishnamurthy, MD

Duration of Presentation in Minutes

15

Pragmatic clinical research at the interface of neonatology and pediatric cardiology

Kevin Hill, MD, MS

Duration of Presentation in Minutes

15

Children's Hospital Neonatal Consortium: building collaborative, interdisciplinary teams to address unanswered questions

Philip T. Levy, MD

Duration of Presentation in Minutes

15

Addressing the needs of patients at the interface of neonatology and pediatric cardiology: clinical and research priorities

Stephanie Ford, MD

Duration of Presentation in Minutes

15

(101) Proposal ID: 1926419

The Road Less Traveled: Sustaining a Career in Pediatrics

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Christina Master**

Score: **0**

Participant(s)

**Christina (Tina) L. Master, MD, FAAP, CAQSM, FACSM, FAMSSM
(she/her/hers)**

Position:

Professor of Pediatrics and Orthopaedic Surgery, Co-Director Minds
Matter Concussion Program

Organization:

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

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Rhonda G. Acholonu, MD (she/her/hers)

Position:

Regional Medical Scientific Director

Organization:
Merck

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Kamillah Wood, MD, MPH (she/her/hers)

Position:
Health Equity Clinical Specialist

Organization:
Google

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Session Description

Session Description

Pediatrician burnout is hurtling head-first toward a national pediatrician shortage, both in primary and specialty care. Much has been gleaned through important work investigating the myriad contributing factors, both promoters of and barriers to, engaging in a fulfilling career as a pediatrician. In this session, 3 senior women pediatricians who have lived experience navigating this path through multiple phases of successful career evolution across general and specialty pediatrics, inpatient and outpatient care, and industry/non-profit/academic settings will share the latest evidence base on factors contributing to career dissatisfaction, how to address those in order to prevent burnout, and share personal examples of how to approach these issues in order to fully engage with a gratifying professional career in pediatrics. At such an important time in the history of pediatrics, when traditional pathways for career development may be losing some of their lustre for younger generations of physicians, it is important that they hear from pediatricians who have successfully achieved fulfillment in their journey with a career in pediatrics with a non-traditional path so that the next generation can see a potentially different path forward for themselves and blaze their own trails. These 3 pediatricians who, together, have over 65 years of experience successfully engaging in meaningfully fulfilling careers in pediatrics will highlight the road less traveled and how, for them, that has made all the difference.

Learning Objectives

1. Understand potential barriers and promoters to career satisfaction in pediatrics, including systemic bias, loss of autonomy, work-life integration
2. Proactively identify and address factors contributing to pediatric career dissatisfaction and burnout, include the aforementioned, as well as sleep, stress, anxiety
3. Recognize the possibility of different paths to career satisfaction in pediatrics including general/specialty pediatrics, inpatient/outpatient, non-profit/industry and some examples of how to navigate those options.

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

Any pediatrician interested in understanding issues contributing to career dissatisfaction and burnout, how to address those issues to prevent dissatisfaction and burnout, and learn about different approaches to developing and sustaining a career in pediatrics that might otherwise be considered a non-traditional path, and the promoters and barriers to navigating such a path

3. **Tracks**

Career Development
Diversity, Equity, and Inclusion
Wellness and Well-being

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Dr. Master is on 2 other submissions, one relating to Concussion and the other Ethical Issues Sports Medicine.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

The topic is addressing factors contributing to career dissatisfaction and burnout in pediatrics and non-traditional career development paths including general and specialty pediatrics, inpatient and outpatient care, industry/non-profit/academia.

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

N/A

10. **Additional comments**

It is critical that the field of pediatrics increases the engagement and career satisfaction of its current ranks and also continues to attract the best and the brightest to pediatrics. Highlighting what is known about these factors and how to address them while also providing examples of successful navigation of non-traditional career paths in pediatrics provides younger generations of pediatricians with a view of what is possible. Here is a brief list of salient references for the topic.

Spector ND, Asante PA, Marcelin JR, Poorman JA, Larson AR, Salles A, Oxentenko AS, Silver JK. Women in Pediatrics: Progress, Barriers, and Opportunities for Equity, Diversity, and Inclusion. *Pediatrics*. 2019 Nov;144(5):e20192149. doi: 10.1542/peds.2019-2149. Epub 2019 Sep 23. PMID: 31548337.

Fuentes-Afflick E, Daniels S, Spector ND, Davis SD, Simon TD. Gender equity in the scientific workforce: what is the current state of pediatrics? *Pediatr Res.* 2023 Jan;93(1):17-18. doi: 10.1038/s41390-022-02235-0. Epub 2022 Sep 6.

Dammann CEL, Kieran K, Fromme HB, Espinosa C, Tarantino CA, Trent M, Lightdale JR, Blin K; FLEXPeds. Female Excellence and Leadership in Pediatrics Subspecialties (FLEXPeds): Creating a Network for Women Across Academic Pediatrics. *J Pediatr.* 2023 Dec;263:113512. doi: 10.1016/j.jpeds.2023.113512. Epub 2023 May 26. PMID: 37244585.PMID: 36068344; PMCID: PMC9876785.

<https://www.ama-assn.org/system/files/org-well-being-assessment.pdf>

Lucy CA, Wojtaszek J, LaLonde L, Bruni TP, Ham HL, Sunde E, Lancaster B, Maragakis A. Pediatrician Burnout Before and After the COVID-19 Pandemic. *J Prim Care Community Health.* 2023 Jan-Dec;14:21501319231194148. doi: 10.1177/21501319231194148. PMID: 37599442; PMCID: PMC10441537.

<https://www.mckinsey.com/industries/healthcare/our-insights/improving-pediatrician-well-being-and-career-satisfaction>

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Presentation Titles and Durations

Sustaining a Career in Pediatrics: Where are we now?
Christina (Tina) L. Master, MD, FAAP, CAQSM, FACSM, FAMSSM
Duration of Presentation in Minutes
20

Sustaining a Career in Pediatrics: What are the factors?
Rhonda G. Acholonu, MD
Duration of Presentation in Minutes
20

Sustaining a Career in Pediatrics: How do we do this?
Kamillah Wood, MD, MPH
Duration of Presentation in Minutes
20

(102) Proposal ID: 1929245

New Frontiers in Gene Therapy: From the Lab to Cures for Kids

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Ann Chahroudi**

Score: **0**

Participant(s)

Ann Chahroudi, MD, PhD (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Emory University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

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

APS, SPR, PIDS

Katherine Luzuriaga, MD (she/her/hers)

Position:

MD

Organization:

UMass Memorial Children's Medical Center

Role:

Speaker;Chair

Ethnicity
Hispanic or Latino

Race
Asian

Gender
Female

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

Vivien A. Sheehan, MD, PhD (she/her/hers)

Position:
Associate Professor of Pediatrics

Organization:
Emory University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Matthew H. Porteus, MD, PhD (he/him/his)

Position:
Sutardja Chuk Professor of Definitive and Curative Medicine

Organization:
Stanford University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Mauricio Martins, PhD

Position:
Associate Professor

Organization:
University of Florida

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
American Indian or Alaska Native, Black or African American, White

Gender
Male

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

Session Description

Session Description

Gene therapy is transforming the landscape of pediatric medicine, offering hope for patients with devastating diseases. This session will explore cutting-edge advances in gene-based treatments for childhood diseases. Bringing together leading experts in the field, the session will focus on FDA-approved therapies as well as innovative clinical and preclinical research.

The session will include an overview from the Chairs, followed by three presentations focused on specific disorders (sickle cell disease, cystic fibrosis, and HIV). Each presentation will cover the latest scientific breakthroughs,

detailing the translational steps from laboratory research to clinical trials, and ultimately, to treatment of pediatric patients. With a focus on state-of-the-art technologies, including viral vector-based therapies and gene editing techniques, this session will offer a comprehensive overview of the progress being made across multiple disease areas.

By addressing a diverse range of diseases, this session is designed to appeal to a broad audience, from basic scientists and clinical researchers to pediatricians and subspecialists seeking insight into future therapeutic strategies. Attendees will gain an understanding of the complex challenges of gene therapy, as well as the exciting potential for curative treatments in childhood diseases.

Engaging and forward-looking, this session will not only provide an overview of the current state of the field but will also inspire discussion about the next frontiers in pediatric gene therapy. Topics such as access, cost and ethics will be discussed.

Learning Objectives

1. Explain recent advancements in gene therapy technologies and their application in developing curative treatments for childhood diseases.
2. Describe and compare the mechanisms of gene therapy approaches for sickle cell disease, cystic fibrosis, and HIV infection.
3. Discuss the challenges and successes in translating gene therapy from research into clinical practice, and its potential impact on pediatric patient outcomes.

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

Pediatrician-Scientists, Trainees, Neonatologists, Academic and non-academic Pediatricians, Hematologists, Immunologists, Infectious Disease Specialists, Oncologists, Basic Scientists, Clinical Trialists, FDA, Patient Advocates

3. **Tracks**

Allergy, Immunology and Rheumatology

Basic Science

Children with Chronic Conditions

Clinical Research

Genomics/Epigenomics

Hematology/Oncology
Infectious Diseases
Pulmonology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
SPR Presidential Plenaries, PIDS Top Abstracts
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Mauricio Martins, PhD is a basic scientist studying HIV cure. Dr. Martins is the world's expert in AAV gene therapy for pediatric HIV cure and is truly the only person who could give this talk.
Vivien Sheehan, MD, PhD is a leading pediatrician-scientist expert in sickle cell disease and precision medicine treatments, including gene therapy. She will be nominated for SPR in the next cycle. It was an unfortunate oversight that she hasn't been nominated previously as she easily meets all criteria.
8. **Does this submission involve one or more specialties or disciplines?**
Yes.
9. **If your session was presented at another conference, please describe the conference and presentation.**
n/a
10. **Additional comments**

Presentation Titles and Durations

Introduction to session
Ann Chahroudi, MD, PhD
Duration of Presentation in Minutes
5

Overview of FDA-approved gene therapies in pediatrics
Katherine Luzuriaga, MD
Duration of Presentation in Minutes
10

Gene therapy for sickle cell disease

Vivien A. Sheehan, MD, PhD

Duration of Presentation in Minutes

20

Gene therapy for cystic fibrosis

Matthew H. Porteus, MD, PhD

Duration of Presentation in Minutes

20

Gene therapy for pediatric HIV cure

Mauricio Martins, PhD

Duration of Presentation in Minutes

20

(103) Proposal ID: 1924158

To Sedate or Not Sedate, Are We Doing Enough to Treat Pain and Anxiety During Medical Procedures?

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Juan Boriosi**

Score: **0**

Participant(s)

Hilary Woodward, MS, CCLS (she/her/hers)

Position:

Child Life Specialist

Organization:

NewYork-Presbyterian Morgan Stanley Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Rebecca Kriss Burger (she/her/hers)

Position:

Associate Professor of Pediatrics and Emergency Medicine

Organization:

Emory University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Juan Boriosi, MD (he/him/his)

Position:

Associate Professor of Pediatrics

Organization:

University of Wisconsin-Madison

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Session Description

Session Description

Treating pain and anxiety is an integral part of providing care for children who require medical procedures or testing that otherwise could not be achieved. Studies have shown inadequate treatment of procedural pain and anxiety is

associated with adverse psychological and somatic outcomes that persist beyond the sedation event. The best patient outcomes are obtained when a multimodal approach, using pharmacologic and non-pharmacologic interventions, is used to treat pain and anxiety during medical procedures. A multidisciplinary panel of pediatric experts will detail the short and long-term consequences of poorly managed pain and anxiety during medical procedures in children. They will discuss practical strategies and a holistic approach to address pain and anxiety during medical procedures as well as promising novel endeavors and potential paradigm shifts in practice that warrant consideration and future research.

Learning Objectives

1. Upon completion, participants will be able to understand the role of child life specialists in implementing strategies to minimize pain and anxiety during medical procedures
2. Upon completion, participants will be able to understand the role of pharmacologic strategies for treating pain and anxiety during medical procedures
3. Upon completion, participants will be able to understand the role of non-pharmacologic therapies for treating pain and anxiety during medical procedures

Scholarly Session Questions

1. **Audience Size**
25
2. **Target audience**
General pediatricians, pediatric emergency medicine physicians, pediatric critical care physicians, pediatric hospitalists, hematology and oncology physicians, neurologists
3. **Tracks**
Critical Care
Developmental and Behavioral Pediatrics
Emergency Medicine
General Pediatrics
Hematology/Oncology
Hospital Medicine
Neurology
Sedation Medicine
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Please avoid overlap with pediatric emergency medicine and critical care events

Please avoid overlap with other Sedation Medicine scholarly session: Starting a sedation service line: leadership, business, and sustainability

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Hilary Woodward MS, CCLS is a Child Life Specialist non-member speaker with expertise in child life therapies. This unique expertise is outside the scope of any of the member organizations

Juan Boriosi MD is a non-member speaker with expertise in Sedation Medicine. This unique expertise is outside the scope of any of the member organizations.

8. **Does this submission involve one or more specialties or disciplines?**

Topic is sedation medicine, involving pediatric emergency medicine, pediatric critical care medicine, and pediatric hospital medicine

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

NA

10. **Additional comments**

All panelists -Juan Boriosi, Rebecca Burger, and Hilary Woodward- will speak in the Q&A after the final presentation

Presentation Titles and Durations

Why child life specialists matter: How can we collaborate to improve management of pain and anxiety during procedures?

Hilary Woodward, MS, CCLS

Duration of Presentation in Minutes

25

When drugs are necessary: What is the best pharmacologic approach for treating pain and anxiety during procedures?

Rebecca Kriss Burger

Duration of Presentation in Minutes

25

Not just drugs: Non-pharmacologic approaches to treat pain and anxiety during medical procedures

Juan Boriosi, MD

Duration of Presentation in Minutes

25

(104) Proposal ID: 1933270

Building a Mental Health Experience to Meet ACGME Requirements while Working Towards Competence for Your Trainees and Faculty Alike

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Elizabeth Chawla**

Score: **0**

Participant(s)

Elizabeth M. Chawla, MD (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Georgetown University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

APA

Cori Green, MD, MSc (she/her/hers)

Position:

Associate Professor of Clinical Pediatrics

Organization:

NewYork-Presbyterian Komansky Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA, SPR

Sue E. Poynter, MD, MEd (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Cincinnati Children's/University of Cincinnati

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Su-Ting T. Li, MD, MPH (she/her/hers)

Position:

Professor

Organization:

University of California Davis

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Session Description

Session Description

As programs have been modifying their curricula over the past year to meet new ACGME requirements for July 2025, many academic faculty and program directors across the country are struggling with how to create a meaningful 'Mental Health Experience' for trainees that meets new requirements but also allows for the development of competence in these areas. Join us for this truly 'hot topic' symposium to hear from leaders of the pediatric mental health education community (across AAP, APA, and APPD) to learn which elements of training help support the development of behavioral/mental health (BMH) competence. You will hear from four programs with current MH rotations within Pediatric Residency Programs (small, medium, large, and X+Y programs). We will also discuss how to evaluate the efficacy of your MH rotation and share some initial outcomes data from our programs. We hope by sharing different MH rotation models that participants will gain ideas for incorporating into your own training program. Discussion will also include how all academic faculty who work with trainees can incorporate mental health training in their clinical teaching, as moving the needle on pediatric mental health competence will require pediatricians and mental health providers working together.

Learning Objectives

1. Understand components of behavioral/mental health competence for pediatric trainees (based on the BMH EPA), and what elements of training help support the development of competence
2. Gain ideas for your MH rotation that both meet the new ACGME requirement and work towards competence for your trainees by hearing about current examples
3. Understand how to evaluate the efficacy of your mental health rotation using the New World Kirkpatrick framework

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Program Directors, Associate Program Directors, Continuity Clinic Directors, Mental Health Rotation Directors, general pediatric faculty members
3. **Tracks**
General Pediatrics
Medical Education
Mental Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Yes, Cori Green, Su-Ting Li, and Sue Poynter are all on other submissions
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
NA
8. **Does this submission involve one or more specialties or disciplines?**
General Pediatrics, Behavioral/Mental Health
9. **If your session was presented at another conference, please describe the conference and presentation.**
NA
10. **Additional comments**
Full Agenda:
Introduction (5 min): Background
Designing a MH Rotation to Fit Within Your Program: Four Examples (60 min)
 - o Small program: Medstar Georgetown (Elizabeth) (15 min)
 - o Medium program: Cornell (Cori) (15 min)
 - o Large program: Cincinnati Children's (Sue) (15 min)

- o X+Y Program: UC Davis (Su-Ting) (15 min)
Building Meaningful Learning Experiences: Evaluating the Efficacy of your Mental Health Program Using the New World Kirkpatrick Framework to Move Learners Towards Competence (Su-Ting) (10 min)
- Audience Q&A and panel discussion (15 min)

Presentation Titles and Durations

Designing a MH Rotation to Fit Within Your Program: A Small Program

Example

Elizabeth M. Chawla, MD

Duration of Presentation in Minutes

15

Designing a MH Rotation to Fit Within Your Program: A Medium Program

Example

Cori Green, MD, MSc

Duration of Presentation in Minutes

15

Designing a MH Rotation to Fit Within Your Program: A Large Program

Example

Sue E. Poynter, MD, MEd

Duration of Presentation in Minutes

15

Designing a MH Rotation to Fit Within Your Program: An X+Y Program

Example

Su-Ting T. Li, MD, MPH

Duration of Presentation in Minutes

15

(105) Proposal ID: 1922982

Ethical and Clinical Controversies in Youth Sports

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Lainie Ross**

Score: **0**

Participant(s)

**Christina (Tina) L. Master, MD, FAAP, CAQSM, FACS, FAMSSM
(she/her/hers)**

Position:

Professor of Pediatrics and Orthopaedic Surgery, Co-Director Minds
Matter Concussion Program

Organization:

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

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Holly J. Benjamin, MD (she/her/hers)

Position:

Professor of Orthopaedic Surgery, Rehabilitation Medicine & Pediatrics

Organization:
University of Chicago

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Katherine Rizzone, MD MPH (she/her/hers)

Position:
Associate Professor

Organization:
University of Rochester School of Medicine and Dentistry

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Lainie F. Ross, MD, PhD (she/her/hers)

Position:
Dean's Professor and Chair, Dept of Health Humanities and Bioethics

Organization:
University of Rochester School of Medicine and Dentistry

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Session Description

Session Description

An estimated 26.8 million (53.8%) of children aged 6 to 17 played on a sports team or took lessons as of 2022. Sports provide an array of social, physical and emotional benefits, teaching children how to work in teams, and promoting life-long skills. However, between 1.1 and 1.9 millions sports and recreational related concussions occur in children younger than 18 years annually. And while rare, deaths occur most commonly from either traumatic brain injury, exertional heat stroke, exertional collapse associated with sickle cell trait (ECAST), or sudden cardiac arrest.

This panel includes 3 pediatric sports medicine clinicians and 1 pediatrician ethicist who will discuss clinical and ethical controversies in pediatric sports medicine. Using a case-based approach, we will discuss the pros and cons of 1) EKG screening for pre-participation sports clearance to prevent sudden cardiac death, 2) sickle cell trait (SCT) screening for NCAA eligibility to reduce ECAST, and 3) shared decision-making in return to play after a concussion. The 3 sports medicine clinicians will discuss current state-of-the-art evidence about these issues, sharing their own experiences with high school and college athletes, and offering their own positions about the pros and cons of EKG screening, SCT testing, and return to play policies. They will be joined by a pediatric ethicist who will discuss issues of decision-making under uncertainty, equity concerns raised by various screening protocols, the role of the youth and parent in shared decision-making, and how the ethical analysis evolves as the athlete goes from adolescent to young adult.

Learning Objectives

1. explore the pros and cons of common preventive health screening and protocol-based practices in youth sports
2. appreciate the trade-offs made by various preventive and participation-restricting measures in order to provide appropriate counseling for youth and their parents regarding sports participation
3. engage in shared decision making with youth and parents regarding athletic participation.

Scholarly Session Questions

1. **Audience Size**
70
2. **Target audience**
general pediatricians, clinicians involved in youth sports (e.g., team doctor), trainees interested in youth sports injury prevention, and clinicians involved in general pediatric residency training,
3. **Tracks**
Clinical Bioethics
Emergency Medicine
General Pediatrics
Injury Prevention
Medical Education
School and Community Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Lainie Ross serves on the board of the Journal of Pediatrics and we meet Thursday evening and all day Friday April 25.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Katherine Rizzone, MD MPH is not a member of AAP, APA, APS, SPR, ASPN and PIDS. She is a member of AMSSM (as are Drs. Benjamin

and Master). We invited her in order to ensure that we had diverse perspectives on issues. For each topic, we want a sports medicine doctor to take different sides. With the 3 sports medicine physicians, that is much more do-able.

8. **Does this submission involve one or more specialties or disciplines?**

Topic is pediatric sports medicine involving 3 pediatric sports medicine fellowship trained individuals and one pediatrician with training in ethics.

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

n/a

10. **Additional comments**

20 min (shared between 2 sports medicine doctors and the ethicist) to discuss annual EKG screening + 10 min Q&A; 20 min (shared between 2 sports medicine doctors and the ethicist) to discuss sickle cell trait screening and education + 10 min Q&A; 20 min (shared between 2 sports medicine doctors and the ethicist) to discuss shared decision making regarding return to play + 10 min Q&A

Presentation Titles and Durations

Clinical Issues in annual EKG screening, sickle cell trait screening, and shared decision making in return to play protocols

Christina (Tina) L. Master, MD, FAAP, CAQSM, FACSM, FAMSSM

Duration of Presentation in Minutes

15

Clinical Issues in annual EKG screening, SCT screening, and shared decision making in return to play protocols

Holly J. Benjamin, MD

Duration of Presentation in Minutes

15

Clinical controversies in annual EKG screening, SCT screening, and shared decision making in return to play protocols

Katherine Rizzone, MD MPH

Duration of Presentation in Minutes

15

Ethical Issues in annual EKG screening, sickle cell trait screening, and shared decision making in return to play protocols

Lainie F. Ross, MD, PhD

Duration of Presentation in Minutes

15

(106) Proposal ID: 1920107

Dying without a Diagnosis: A Guide to Genomic Autopsy for Pediatric Care Providers

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Monica Wojcik**

Score: **0**

Participant(s)

Kelly McCullagh, MD

Position:
Clinical Fellow

Organization:
Boston Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Cynthia J. Curry, MD (she/her/hers)

Position:
Professor of Pediatrics Emerita

Organization:
UCSF

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APS

Alicia B. Byrne, PhD (she/her/hers)

Position:

Research Scientist

Organization:

Broad Institute of MIT and Harvard

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Monica Wojcik, MD, MPH (she/her/hers)

Position:

Assistant Professor

Organization:

Boston Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Asian, White

Gender
Female

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

Richard D. Goldstein, MD (he/him/his)

Position:
Associate Professor of Pediatrics

Organization:
Harvard Medical School

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Many rare genetic conditions result in infant or childhood death, leaving the diagnostic odyssey - the process of identifying the underlying molecular genetic diagnosis - either incomplete or never begun. At the same time, the use of clinical genome-wide sequencing approaches, such as exome or genome sequencing, has been expanding rapidly across all areas of pediatric practice. Thus, application of these diagnostic techniques postmortem holds great potential. Current research into the impact of genomic autopsy reveals not only

the high diagnostic yield but also a broad range of benefits for families. We therefore present a comprehensive approach to help any pediatric researcher or clinician who may interface with families who have lost a child understand the genomic autopsy process and the key steps towards real-world implementation. This session includes experts in genomic analysis and phenotyping (Dr. Curry, with decades of experience in dysmorphology and syndrome delineation) both within the United States and globally (Drs. Wojcik and Byrne, both of whom have been involved in nationwide perinatal genomic autopsy projects in the U.S. and Australia, respectively), speakers at various career stages (trainee, early career, mid-career, senior) as well as clinician-researchers with expertise in neonatology, rare disease genetics/genomics, palliative care, and bereavement support. Following an introduction to the concepts included in the panel (Dr. McCullagh, trainee), this session begins with an overview of the clinical postmortem dysmorphology exam (Curry), then delves into genomic considerations (Byrne), clinical implementation of these approaches (Wojcik, and ends with the impact on the family (Goldstein).

Learning Objectives

1. Describe the typical process of postmortem genomic evaluation and potential benefits and utility of a diagnosis
2. Identify clinical scenarios where a postmortem genomic investigation may be beneficial
3. Guide interested families towards opportunities for postmortem genomic investigation

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Pediatric care providers (particularly those who work in critical care, emergency department, neonatology, general pediatrics, genetics/genomics), clinicians and researchers, trainees at any level.
3. **Tracks**
Clinical Research
Critical Care
Genomics/Epigenomics
Neonatology
Palliative Care
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Monica Wojcik is also a member of a workshop proposal and Monica Wojcik and Richard Goldstein are also part of a Research Roundtable proposal.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Alicia Byrne is a non-member speaker who is invited due to her particular expertise in genomic analysis and her global perspective, providing insight gained from her work in genomic autopsy across diverse populations in Australia.

8. **Does this submission involve one or more specialties or disciplines?**

Genomic Autopsy spans multiple disciplines, including: genetics/genomics, pathology, neurology, neonatology, critical care, general pediatrics, public health

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

N/A

10. **Additional comments**

Presentation Titles and Durations

Introduction to Genomic Autopsy

Kelly McCullagh, MD

Duration of Presentation in Minutes

10

Postmortem dysmorphology: lessons learned in clinical genetics practice

Cynthia J. Curry, MD

Duration of Presentation in Minutes

15

Genomic considerations in postmortem evaluation

Alicia B. Byrne, PhD

Duration of Presentation in Minutes

15

Implementing genomic autopsy in clinical practice
Monica Wojcik, MD, MPH

Duration of Presentation in Minutes

15

Impact of genomic autopsy on post-loss adaptation
Richard D. Goldstein, MD

Duration of Presentation in Minutes

15

(107) Proposal ID: 1915803

Show me the money: Advocating for and understanding economic drivers of pediatric nephrology

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Katherine Dell**

Score: **0**

Participant(s)

Katherine M. Dell, MD (she/her/hers)

Position:

Professor of Pediatrics and Director of Clinical and Translational Research

Organization:

Cleveland Clinic Children's

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

Black or African American, White

Gender

Female

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

AAP, APS, SPR, ASPN

Kiri Bagley, MD, MPH (she/her/hers)

Position:

Assistant Professor

Organization:

Wake Forest Baptist Health - Brenner Children's Hospital

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, ASPN

Caitlin Carter, MD (she/her/hers)

Position:

Clinical Professor of Pediatrics

Organization:

University of California, San Diego School of Medicine

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

ASPN

Eileen D. Brewer, N/A, MD

Position:

Professor of Pediatrics

Organization:

Baylor College of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Mark Joseph, MD (he/him/his)

Position:
Associate Professor Pediatric Nephrology

Organization:
Doernbecher Children's Hospital at Oregon Health & Science University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

J. Bryan Carmody, MD, MPH (he/him/his)

Position:
Associate Professor

Organization:
Eastern Virginia Medical School

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

The pediatric nephrology workforce continues to face numerous challenges. In the current fee-for-service system, the clinical care for children with kidney disease is neither sufficiently valued, nor appropriately compensated. The goal of this session is to facilitate discussion amongst the pediatric nephrology community about ways to promote tangible action regarding coding/billing/reimbursement, policy/advocacy, as well as individual and societal level contributions to address these pressing issues. This session will discuss how coding and billing norms were established and evolved, review the current financial landscape (billing, coding and relative value units, RVUs), provide suggestions for how practitioners can become more "economic/business" savvy across different practices and institution types and also understand approaches to identifying and advocating for sustainable pediatric nephrology business models.

Learning Objectives

1. Learn about the development, establishment and evolution of coding and billing norms in pediatric nephrology
2. Describe the current state of billing, coding, relative value units (RVUs) and reimbursements in pediatric nephrology
3. Learn how to develop business and economic skills and advocate for sustainable pediatric nephrology business models

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**

Pediatric Nephrologist, Pediatric Nephrology Fellows, Pediatric Residents

3. **Tracks**

Career Development
Leadership and Business Training
Nephrology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are you or any of your speakers in any other sessions that we should take into account when scheduling?**

Dr. Brewer is attending another meeting before this one and we would like to ask that the session occur on Sunday or Monday (4/27 or 4/28)

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

None

8. **Does this submission involve one or more specialties or disciplines?**

Pediatric Nephrology

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

No

10. **Additional comments**

Dr. Brewer is attending another meeting before this one and we would like to ask that the session occur on Sunday or Monday (4/27 or 4/28)

Presentation Titles and Durations

Evolution of billing and coding over time: Impact on current pediatric nephrology practice

Eileen D. Brewer, N/A, MD

Duration of Presentation in Minutes

30

Reimbursement in pediatric nephrology

Mark Joseph, MD

Duration of Presentation in Minutes

30

The business of nephrology: Developing and advocating for sustainable business models

J. Bryan Carmody, MD, MPH

Duration of Presentation in Minutes

30

(108) Proposal ID: 1930110

Cannabis use and suicidal behavior in youth

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Jesse Hinckley**

Score: **0**

Participant(s)

Aditya Pawar, MD (he/him/his)

Position:

Assistant Professor

Organization:

Johns Hopkins Medical Institute

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

APA

Jesse D. Hinckley, MD, PhD (he/him/his)

Position:

Associate Clinical Professor

Organization:

University of Colorado School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Christopher Joseph Hammond, MD, PhD (he/him/his)

Position:
Associate Professor of Psychiatry and Pediatrics

Organization:
Johns Hopkins University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Adolescence is characterized by ongoing neurodevelopment, a uniquely vulnerable window to the adverse effects of cannabis use and a period when many youths experience the onset of mental health problems. Suicide is the second-leading cause of death among youth aged 10-24 years in the United States. Over the past two decades the prevalence of suicide has increased

sharply, leading to the American Academy of Pediatrics, American Academy of Child and Adolescent Psychiatry, and Children's Hospital Association jointly declaring a national emergency in child and adolescent mental health. This rise in youth suicide has coincided with the liberalization of cannabis policies, and cannabis use has been associated with suicidal behavior in both adolescents and adults. In this symposium, three child and adolescent psychiatrists who specialize in substance use disorders will give research-focused presentations that explore the relationship between cannabis and suicidal thoughts in youth. Aditya Pawar, MD, will present findings from a systematic review and meta-analysis to investigate the association of cannabis use and suicidal behavior among youth. Next, Jesse Hinckley, MD, PhD, will present on the association between cannabis use, depression, and suicidal behavior in youth and examine the mediating role of depression on these relationships. Finally, Christopher Hammond, MD, PhD, will present the results from two studies examining the impact of state-level cannabis policies on suicide-related outcomes. The findings of these studies will highlight the association between cannabis and suicidal behavior in adolescence and the association of changing cannabis policies with increased suicide-related mortality.

Learning Objectives

1. Explore the association of cannabis use and suicidal behavior in adolescents.
2. Describe the relationship between cannabis use, depression, and suicidal behavior in youth.
3. Understand how cannabis policy may contribute to increased risk of suicidal behavior.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Clinicians, researchers, allied professionals, and policy advocates who work with youth.
3. **Tracks**
Adolescent Medicine
Mental Health
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Not applicable

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

Child and Adolescent Psychiatry

Addiction

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

Jesse Hinckley and Christopher Hammond will chair a research symposium on cannabis use and suicidal behavior at the American Academy of Child and Adolescent Psychiatry Annual Conference in October 2024. In the AACAP session, findings of the association between cannabis use and depression and state-specific cannabis laws will be presented specific to a mental health audience. For PAS, the context will be broadened for a more general audience and a new systematic review and meta-analysis will be added.

10. **Additional comments**

Presentation Titles and Durations

Cannabis Use and Suicide in Children and Adolescents: Investigating the link through a systematic review and meta-analysis

Aditya Pawar, MD

Duration of Presentation in Minutes

20

Cannabis use is associated with depression and suicidal behavior in youth

Jesse D. Hinckley, MD, PhD

Duration of Presentation in Minutes

30

Associations Between Medical and Recreational Cannabis Legalization and Suicide-Related Outcomes Among US Youth

Christopher Joseph Hammond, MD, PhD

Duration of Presentation in Minutes

30

(109) Proposal ID: 1931402

Bench, bedside & academia: How and why we are failing Women in health(care)

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Eleanor Gradidge**

Score: **0**

Participant(s)

Eleanor Gradidge, MD (she/her/hers)

Position:

Assistant Professor

Organization:

University of Nebraska Medical Center

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Session Description

Session Description

Systemic gender bias continues to plague both clinical care and the workplace. It has become so endemic that we only recognize the symptoms (i.e., pay gap) and not the underlying problem (e.g., biased evaluations, biased interviewing, poor career support). This bias extends beyond the workplace and has also influenced how we care for women's health (i.e., studies on heart attacks and effectiveness of aspirin included only men and has led to poor outcomes in women through lack of symptom recognition and appropriate treatment). This session will critically examine how gender bias has become ingrained in healthcare and will provide actionable strategies to reform the system.

Learning Objectives

1. Upon completion, participants will be able to analyze the biased design of landmark studies behind today's clinical management.
2. Upon completion, participants will be able to evaluate the problems leading to pay gaps and limited opportunities for women.
3. Upon completion, participants will be able to institute immediate changes in clinical care, research and career advancement.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Women in research, academia and healthcare. Leaders and managers who supervise women.
3. **Tracks**
Diversity, Equity, and Inclusion
Health Equity/Social Determinants of Health
Leadership and Business Training
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide**

an explanation of the non-member speaker selection so that PAS staff may request approval.

8. **Does this submission involve one or more specialties or disciplines?**

Yes, Topic is Inclusion and Equity involving all specialties and disciplines.

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

10. **Additional comments**

Presentation Titles and Durations

Bench, bedside & academia: How and why we are failing Women in health(care)

Eleanor Gradidge, MD

Duration of Presentation in Minutes

45

(110) Proposal ID: 1929687

Would Aligning Policy, Practice and Evidence Improve Early Access to Therapy and Outcomes for Infants Born Preterm? A Great Debate

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Stacey Dusing**

Score: **0**

Participant(s)

Stacey C. Dusing, PT, PhD, PCS (she/her/hers)

Position:

Sykes Family Chair of Pediatric Physical Therapy, Health, and Development

Organization:

University of Southern California, Division of Biokinesiology and Physical Therapy

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Roberta Pineda, PhD OTR/L, CNT (she/her/hers)

Position:

Associate Professor

Organization:
University of Southern California

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Prefer not to respond

Gender
Female

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

Sai Iyer, MD (she/her/hers)

Position:
Assistant Clinical Professor

Organization:
University of California, Los Angeles David Geffen School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Ashwini Lakshmanan, MD, MS, MPH (she/her/hers)

Position:
Associate Professor, HSS

Organization:
Kaiser Permanente Bernard J. Tyson School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APA, SPR

Jennifer Burnsed, MD, MS (she/her/hers)

Position:

Associate Professor

Organization:

University of Virginia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Christiana Butera, EdM, PhD (she/her/hers)

Position:

Assistant Professor of Research

Organization:

University of Southern California

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Infants born preterm are at high risk of falling through the gap in care between neonatal intensive care and follow-up programs. This session will provide evidence of the existence of this gap in care and its detrimental effect on development, caregivers' mental health, and healthcare utilization. Clinicians and researchers from various disciplines will debate who is responsible for addressing this gap in care and how health care and educational systems, as well as providers, can play a role in closing the gap.

Learning Objectives

1. List 4 policies and caregiving systems that could support infants' development in the transition from NICU to home
2. Describe the difference between rehabilitation and habilitation and the implications for early service initiation vs a wait-and-see approach
3. Compare and contrast the role of therapists, neonatologists, high-risk infant follow-up, and primary care providers in improving continuity of care from the NICU to home.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Therapists, neonatology, primary care , developmental pediatrics, policy makers
3. **Tracks**

Academic and Research Skills

Advocacy

Community Pediatrics

Developmental and Behavioral Pediatrics

Health Equity/Social Determinants of Health

Health Services Research

Neonatology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

NICU Followup Club

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Stacey Dusing is not a member of any of these groups. As a practicing physical therapist and researcher, she belongs to other organizations. This will be her first time at PAS.

8. **Does this submission involve one or more specialties or disciplines?**

Neonatology, Therapy, General Pediatrics, Community Resources

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

N/A

10. **Additional comments**

The debate format will be used with 40 min for audience engagement rather than Q & A

Presentation Titles and Durations

Would Aligning Policy, Practice and Evidence Improve Access to Therapy and Outcomes for Infants Born Preterm? A Great Debate

Stacey C. Dusing, PT, PhD, PCS

Duration of Presentation in Minutes

90

Would Aligning Policy, Practice and Evidence Improve Access to Therapy and Outcomes for Infants Born Preterm? A Great Debate

Roberta Pineda, PhD OTR/L, CNT

Duration of Presentation in Minutes

90

Would Aligning Policy, Practice and Evidence Improve Access to Therapy and Outcomes for Infants Born Preterm? A Great Debate

Sai Iyer, MD

Duration of Presentation in Minutes

90

Would Aligning Policy, Practice and Evidence Improve Access to Therapy and Outcomes for Infants Born Preterm? A Great Debate

Ashwini Lakshmanan, MD, MS, MPH

Duration of Presentation in Minutes

90

Would Aligning Policy, Practice and Evidence Improve Access to Therapy and Outcomes for Infants Born Preterm? A Great Debate

Jennifer Burnsed, MD, MS

Duration of Presentation in Minutes

90

Would Aligning Policy, Practice and Evidence Improve Access to Therapy and Outcomes for Infants Born Preterm? A Great Debate

Christiana Butera, EdM, PhD

Duration of Presentation in Minutes

90

(111) Proposal ID: 1928201

Defining the Perfect NICU Progress Note: Too Much, Too Little or Just Right?

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Shama Patel**

Score: **0**

Participant(s)

Shama Patel, MD, MPH

Position:

Assistant Professor of Pediatrics, Attending Neonatologist and Physician Informaticst

Organization:

Nationwide Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Ameena Husain, DO (she/her/hers)

Position:

Assistant Professor

Organization:

University of Utah School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Nicholas Carr, DO

Position:

Associate Professor, Neonatology

Organization:

Intermountain Health

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, SPR

Antonio Hernandez, MD (he/him/his)

Position:

Associate Professor

Organization:

The University of Texas Health Science Center at San Antonio Joe R. and Teresa Lozano Long School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Lindsey A. Knake, MD MS

Position:

Assistant Professor

Organization:

University of Iowa

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Session Description

Session Description

In the fast-paced environment of the Neonatal Intensive Care Unit (NICU), progress notes are a vital tool for effective communication and continuity of care. Traditionally, these notes have served as a comprehensive repository of information throughout the hospital stay, often functioning as a real-time "scratch pad" for clinicians. However, as Electronic Medical Records (EMRs)

evolve to provide instantaneous access to vast amounts of data, the question arises: Are our current progress notes, modeled after paper-based charting, still the most effective and efficient way to document?

This session will dive into the debate over what note structure is ideal and what content should be prioritized in NICU progress notes. With AI driven documentation just on the horizon, it is imperative that we as neonatologists take control of the process to ensure it serves both us and our patients effectively. Featuring a dynamic, Pro/Con debate format, we invite audience participation through interactive polling software and open discussion, allowing real-time feedback and opinions from attendees to shape the discussion. We will review best practices and high points of contention as we explore the purpose of the progress notes, authorship, key components to be auto-populated, and the unique portions reflective of the physicians clinical decision making for the day.

Join us as we work together to define what the perfect NICU progress note should look like as we prepare for the next phase of AI supported documentation. Come ready to share your thoughts and defend your positions!

Learning Objectives

1. Upon completion participants will be able to identify the strengths and limitations of current NICU progress note structures
2. Upon completion, participants will be able to formulate recommendations for balancing documentation with clinical efficiency, including the prioritization of essential content in NICU progress notes.
3. Upon completion, participants will be able to propose a basic framework for NICU note writing to facilitate a transition to AI based documentation

Scholarly Session Questions

1. **Audience Size**
25
2. **Target audience**
Neonatologists, Neonatal fellows, Neonatal Nurse Practitioners
3. **Tracks**
EHR/Medical Informatics
Neonatology
Wellness and Well-being
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

Streamlining the EHR for Neonatologists: Smart Solutions to Ease your Everyday Challenges

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Antonio Hernandez is not a member of any of these organizations but is a Neonatologist and Informativist with expertise in this area

8. **Does this submission involve one or more specialties or disciplines?**

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

10. **Additional comments**

Presentation Titles and Durations

Introduction. Defining the Purpose of a Progress Note.

Shama Patel, MD, MPH

Duration of Presentation in Minutes

20

Understanding the Who: Authorship and Audience

Ameena Husain, DO

Duration of Presentation in Minutes

15

Auto-population and Copy-Forward: Friend or Foe?

Nicholas Carr, DO

Duration of Presentation in Minutes

15

What's the problem? Problem oriented vs. Systems-Based Charting

Antonio Hernandez, MD

Duration of Presentation in Minutes

15

Then and Now: Defining the Hospital Course

Lindsey A. Knake, MD MS

Duration of Presentation in Minutes

15

(112) Proposal ID: 1921167

Beyond BPD: Innovations in respiratory research and interventions for preterm infants

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Katharine Callahan**

Score: **0**

Participant(s)

Rebecca Pearce, BSc, MSc, BEd (she/her/hers)

Position:

Parent Partner

Organization:

CHU Sainte Justine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Keith J. Barrington, MB ChB (he/him/his)

Position:

Professor of Pediatrics

Organization:

Université de Montréal

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

SPR

ANNIE Janvier, MD, PhD (call me Annie)

Position:

Professor of pediatrics and clinical ethics

Organization:

Université de Montréal, CHU Sainte-Justine

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

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

SPR

Brett J. Manley, MB BS, PhD (he/him/his)

Position:

Prof

Organization:

The University of Melbourne

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Bernard Thebaud, MD, PhD (he/him/his)

Position:
Professor of Pediatrics

Organization:
Children's Hospital of Eastern Ontario

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Male

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

Katharine P. Callahan, MD, MSME (she/her/hers)

Position:
Assistant Professor

Organization:
CHOP

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Respiratory problems are the most common cause of mortality and morbidity associated with prematurity. An enormous amount of research has focused on defining bronchopulmonary dysplasia (BPD) and what conditions and interventions are associated with it. Trials are designed to decrease BPD. Yet, this work has evolved almost entirely without patient/parental input. Parents perceive outcomes differently, and BPD inadequately captures outcomes they care about. Parents' own rating of their child's respiratory health correlates poorly with research grading. They care about the functional limitations associated with breathing, such as trouble with sleeping or eating, social isolation, and function in everyday activities. Aiming solely to decrease BPD may in some cases even increase problems families care about. Instead, integrating the outcomes important to parents/patients into large trials is increasingly possible. We know more than ever before about what respiratory outcomes parents prioritize. Clinical trial outcomes are being re-imagined and re-designed. New innovations in trial methodology, such as adaptive design, increase efficiency: more than one trial can be done at the same time and several outcomes can be examined. New therapies, such as stem cell therapies, may benefit from these new trial designs and create new opportunities to improve the outcomes most important to parents. The evolution taking place in the field of BPD research reflects a broader effort to re-center research around the parents/patients it aims to serve.

This interdisciplinary panel (parent, neonatologist, clinical trialist, basic researcher, clinical ethicist) will discuss these complex topics and the evolution of respiratory research in preterm infants.

Learning Objectives

1. Describe what we know about parents' perspective on respiratory outcomes, and how we are learning more

2. Demonstrate how outcomes prioritized by parents can be integrated into research and clinical trial design
3. Reflect on the outcomes important to parent/patient in other medical fields, and the extent to which research does (or does not) capture these

Scholarly Session Questions

1. **Audience Size**
120
2. **Target audience**
Pediatricians, follow-up clinicians, researchers, stakeholders (parents, patients, families), critical care clinicians, hospitalists, trainees, clinical ethicists, palliative care clinicians, rehabilitation clinicians, respiratory therapists
3. **Tracks**
Academic and Research Skills
Basic Science
Children with Chronic Conditions
Clinical Research
Critical Care
Developmental and Behavioral Pediatrics
Neonatology
Pulmonology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Should not coincide with neonatal clinical trial session
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
All physician speakers are members of SPR and/or AAP. Rebecca Pearce is a NICU parent who is not a member of any of these societies but adds a perspective essential to the goals of this session.
8. **Does this submission involve one or more specialties or disciplines?**

Yes, our panel includes a parent, neonatologists, a clinical trialist, a basic researcher, and clinical ethicists.

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

10. **Additional comments**

The content of this panel spans many disciplines, but we also intend to pose questions to the audience encouraging them to reflect on how the perspective of parents/patients is, or is not, represented in pediatric research more broadly. We will pose these questions throughout the talks and to initiate the Q&A conversation.

Presentation Titles and Durations

A Parent's Perspective on Breathing

Rebecca Pearce, BSc, MSc, BEd

Duration of Presentation in Minutes

10

Do trials that decrease BPD improve long-term outcomes?

Keith J. Barrington, MB ChB

Duration of Presentation in Minutes

10

Parent-Important Respiratory Outcomes

ANNIE Janvier, MD, PhD

Duration of Presentation in Minutes

10

Innovations in respiratory trial outcomes for preterm infants

Brett J. Manley, MB BS, PhD

Duration of Presentation in Minutes

15

Stem cell research to decrease adverse breathing outcomes

Bernard Thebaud, MD, PhD

Duration of Presentation in Minutes

15

The BIO-Prem trial and the future patient-important outcome research

Katharine P. Callahan, MD, MSME

Duration of Presentation in Minutes

15

(113) Proposal ID: 1923682

The Youth Mental Health Crisis: Comprehensive Strategies for Transformation

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Tina Cheng**

Score: **0**

Participant(s)

Tina L. Cheng, MD, MPH (she/her/hers)

Position:

Professor and Chair of Pediatrics

Organization:

Cincinnati Children's Hospital Medical Center, Univ of Cincinnati

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APA, APS, SPR

Leslie R. Walker-Harding, MD (she/her/hers)

Position:

Chair Department of Pediatrics/Chief Academic Officer SVP

Organization:

University of Washington/Seattle Children's

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, APS

Deepa Sekhar, MD, MSc (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Pennsylvania State University College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APA, SPR

Session Description

Session Description

May is Mental Health Awareness Month in the U.S. and Canada and a time to re-focus on a major threat to child and adolescent health. In late 2021 the American Academy of Pediatrics (AAP), the American Academy of Child and Adolescent Psychiatry (AACAP) and the Children's Hospital Association (CHA) declared a National State of Emergency in Children's Mental Health and the

Surgeon General issued a rare public health advisory calling on the nation to respond to the growing mental health crisis impacting young people. The declaration specifically addressed 10 areas of advocacy including fully funding “comprehensive, community-based systems of care that connect families in need of behavioral health services and supports for their child with evidence-based interventions in their home, community or school.” Different regions are using different approaches and innovations to address this crisis. These have included multi-sector collaboration, regional coalition building, peer and family leadership, behavioral health integration in primary care, school-based care, learning health networks, community outreach, novel research proposals, and legislative action. This session reviews some multi-level approaches in different parts of the country and their emerging evidence base. Evaluation results, lessons learned, sustainability, and scalability will be discussed. This session is co-sponsored by the Pediatric Policy Council (APA, APS, AMSPDC, SPR with AAP convening).

Learning Objectives

1. Identify comprehensive multi-level strategies to address the mental and behavioral health crisis.
2. Describe programs and policies needed to improve child, adolescent, and family mental and behavioral health.
3. Acquire inspiration and advocacy skills for change.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Trainees, general pediatricians, mental and behavioral health clinicians, pediatric subspecialists, educators, policymakers
3. **Tracks**
Advocacy
Community Pediatrics
Developmental and Behavioral Pediatrics
Health Services Research
Mental Health
Public Health
School and Community Health
Wellness and Well-being
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Plenary sessions
APA business meeting
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
NA
8. **Does this submission involve one or more specialties or disciplines?**
Mental and behavioral health involves all clinical subspecialties, general pediatrics, and public health.
9. **If your session was presented at another conference, please describe the conference and presentation.**
NA
10. **Additional comments**

Presentation Titles and Durations

A School and Community Learning Health Network Approach in the Cincinnati Region

Tina L. Cheng, MD, MPH

Duration of Presentation in Minutes

22

A City-wide Multi-sector Collaborative Approach in Seattle

Leslie R. Walker-Harding, MD

Duration of Presentation in Minutes

22

A School-based Screening Approach to Mental Wellness: Penn State PRO Wellness

Deepa Sekhar, MD, MSc

Duration of Presentation in Minutes

22

(114) Proposal ID: 1931591

Applied Hemodynamic Physiology at the Bedside: A Step Towards Lowering Mortality Burden of Acute Critical Illnesses in the NICU

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Ashraf Kharrat**

Score: **0**

Participant(s)

Patrick J. McNamara, MB, BCH, BAO, DCH, MSc (Paeds), MRCP, MRCPCH, FASE (he/him/his)

Position:
Professor of Pediatrics & Internal Medicine

Organization:
University of Iowa Stead Family Children's Hospital

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Dany Weisz, MD, MSc

Position:
Associate Professor of Pediatrics

Organization:
University of Toronto Temerty Faculty of Medicine

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

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

SPR

Ashraf Kharrat, MD MSc(HQ) FRCPC

Position:

Staff Neonatologist

Organization:

Mount Sinai Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

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

SPR

Danielle R. Rios, MD, MS (she/her/hers)

Position:

Professor of Pediatrics

Organization:

University of Iowa Department of Pediatrics

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Poorva Deshpande, MBBS, MRCPCH, MSc (she/her/hers)

Position:
Neonatologist

Organization:
Mount Sinai Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Amish Jain, MBBS, MRCPCH, PhD (he/him/his)

Position:
Professor in Pediatrics

Organization:
University of Toronto Temerty Faculty of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Koert de Waal, PhD (he/him/his)

Position:
A/Prof

Organization:
University of Newcastle (Australia)

Role:

Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

There remains a great deal of variability in the management of neonates with cardiorespiratory compromise in neonatal intensive care units. Newborn infants often present with non-specific clinical symptoms and signs. A high index of suspicion and a comprehensive understanding of cardiopulmonary physiology are integral to the evaluation and care of the critically ill newborn. Integration of these physiologic principles of cardiac development and adaptation in the fetus and newborn with bedside evaluation of organ function and shock are key components of the management of the various disease states that can result in acute critical illness.

This session will provide attendees a physiologic approach to the assessment and management of cardiorespiratory disorders in the critically ill neonate, focusing on translating applied cardiovascular physiology to bedside clinical care.

Learning Objectives

1. Outline foundational principles in cardiovascular physiology, their application in modulating cardiac output, systemic and pulmonary vascular resistance, and the role of echocardiography in their assessment.
2. Describe various pathophysiologic circulatory disturbances that may characterize shock in acute pulmonary hypertension, sepsis and hypoxic-ischemic encephalopathy.
3. Summarize the unique physiological differences in myocardial structure and function among preterm infants and their impact on newborn adaptation.

Scholarly Session Questions

1. **Audience Size**
300
2. **Target audience**
Neonatologists, neonatal nurse practitioners, neonatal nurses, cardiologists
3. **Tracks**
Critical Care
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are you or any of your speakers in any other sessions that we should take into account when scheduling?**
Hemodynamics Club
Other workshops/sessions with the focus on neonatal hemodynamics
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

- N/A
8. **Does this submission involve one or more specialties or disciplines?**
No
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**
N/A

Presentation Titles and Durations

Neonatal hemodynamics 101: key physiology concepts
Patrick J. McNamara, MB, BCH, BAO, DCH, MSc (Paeds), MRCP, MRCPCH, FASE

Duration of Presentation in Minutes
5

The 3 I's of hemodynamic management of acute pulmonary hypertension:
invasive ventilation, iNO, and inotropes
Dany Weisz, MD, MSc

Duration of Presentation in Minutes
15

Back to SHOCKingly fundamental principles: Focus on sepsis
Ashraf Kharrat, MD MSc(HQ) FRCPC

Duration of Presentation in Minutes
15

Hemodynamic management of neonates with HIE: Walking the tight rope of the
ischemia-reperfusion continuum
Danielle R. Rios, MD, MS

Duration of Presentation in Minutes
15

A big transition for the smallest of babies: Special considerations for the
preterm infant
Poorva Deshpande, MBBS, MRCPCH, MSc

Duration of Presentation in Minutes
15

Call a friend: Role of Targeted Neonatal Echocardiography
Amish Jain, MBBS, MRCPCH, PhD

Duration of Presentation in Minutes
10

(115) Proposal ID: 1915871

Diabetic kidney disease (DKD): Not just an adult problem!

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Katherine Dell**

Score: **0**

Participant(s)

Katherine M. Dell, MD (she/her/hers)

Position:

Professor of Pediatrics and Director of Clinical and Translational Research

Organization:

Cleveland Clinic Children's

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

Black or African American, White

Gender

Female

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

AAP, APS, SPR, ASPN

Rhiana Lau, MD (she/her/hers)

Position:

Assistant Professor

Organization:

University of Hawaii, John A. Burns School of Medicine

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, ASPN

Kelly Bergmann, DO, MS (he/him/his)

Position:

Pediatric Emergency Physician, Emergency Research Director

Organization:

Children's Minnesota

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Cherry Mammen, MD (he/him/his)

Position:

Pediatric Nephrologist

Organization:

University of British Columbia Faculty of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Allison Dart, MD MSc FRCPC (she/her/hers)

Position:
Associate Professor

Organization:
Max Rady College of Medicine, Rady Faculty of Health Sciences,
University of Manitoba

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Petter Bjornstad, MD

Position:
Professor of Pediatrics and Medicine; Raisbeck Endowed Chair of
Diabetes Research; UWMDI Director

Organization:
University of Washington School of Medicine, and Seattle Children's
Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

This session will highlight the spectrum and burden of diabetic kidney disease (DKD) in childhood, covering both type 1 and type 2 diabetes. The session will cover a range of topics spanning epidemiology of acute kidney injury (AKI) in diabetic ketoacidosis (DKA), hyperfiltration injury, albuminuria and chronic kidney disease (CKD) progression in DKD, and the latest research on sodium-glucose cotransporter-2 (SGLT2) inhibitors and glucagon-like peptide-1 receptor (GLP-1R) agonists in the prevention and treatment of DKD progression.

Learning Objectives

1. Describe the epidemiology, clinical presentation, management and long-term outcome of AKI in children with T1DM presenting in DKA.
2. Delineate the epidemiology and clinicopathologic features of DKD in children with T2DM and describe the long-term outcomes and psychosocial challenges identified by recent studies.
3. Describe the pharmacology, rationale for use, risks, benefits and outcomes of SGLT2 inhibitors and GLP-1R agonists in patients with DM.

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**

pediatric nephrology, endocrinology, emergency medicine and hospital medicine trainees and faculty; general pediatricians and others interested in obesity

3. **Tracks**

Emergency Medicine
Endocrinology
General Pediatrics
Hospital Medicine
Nephrology
Obesity
Pediatric Nutrition
Pharmacology and Therapeutics

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

none

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr. Bjornstadt is an expert in SGLT2 inhibitors and clinical trials in those agents. He will be giving the Spitzer lectureship, which is an endowed lectureship through the ASPN

8. **Does this submission involve one or more specialties or disciplines?**

nephrology, endocrinology, emergency medicine, hospital medicine, general pediatrics, nutrition

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

n/a

10. **Additional comments**

n/a

Presentation Titles and Durations

Acute kidney injury (AKI) associated with diabetic ketoacidosis and kidney outcomes in Type 1 diabetes mellitus

Cherry Mammen, MD

Duration of Presentation in Minutes

30

The spectrum of kidney disease in childhood Type 2 diabetes mellitus (T2DM)

Allison Dart, MD MSc FRCPC

Duration of Presentation in Minutes

30

The role of SGLT2 inhibitors and GLP-1R agonists in treatment and prevention of DKD: The Adrian Spitzer lectureship

Petter Bjornstad, MD

Duration of Presentation in Minutes

30

(116) Proposal ID: 1923413

From the Bench to the Playground: Translating Exercise Science to Clinical Application During Critical Periods of Growth and Development

Session Type: **Basic-Translational-Clinical Roundtable**

Proposal Status: **Complete / Locked**

Submitter: **Dan Cooper**

Score: **0**

Participant(s)

Dan M. Cooper, MD (he/him/his)

Position:

University of California Distinguished Professor of Pediatrics

Organization:

University of California at Irvine

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

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

AAP, SPR

Shlomit Radom-Aizik, PhD

Position:

Professor, Department of Pediatrics

Organization:

University of California Irvine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Bareket Falk, PhD (she/her/hers)

Position:

Professor

Organization:

Brock University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Ronen Bar-Yoseph, MD (he/him/his)

Position:

Director, Pediatric Pulmonary Institute and CF Center

Organization:

Rambam Health Care Campus

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Naomi Gauthier, MD (she/her/hers)

Position:
Assistant Professor of Pediatrics, Harvard Medical School

Organization:
Boston Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

The roundtable is designed to highlight how exciting new mechanistic insights into the biology of exercise will transform pediatric clinical practice. The panelists of basic and physician scientists will present

Novel molecular discoveries elucidating the powerful immunobiologic effects of exercise

New understanding of how physical activity programs muscle and bone growth early in life

Innovative applications of information theory to physiological signals obtained during cardiopulmonary exercise testing and how these new approaches may transform clinical evaluation of fitness

Transformative approaches involving behavioral science and physiology to enhance rehabilitation in children with congenital heart disease

In the introduction, we will note: 1) never before has translational research into the health effects of exercise and physical activity been so critical for child and adolescent healthcare providers; 2) the epidemic of poor physical fitness and unhealthy body composition in the pediatric population has proven to be intractable; 3) the use of new medications like the GLP-1RA class of drugs are increasing in youth at an exponential rate while we still know very little about their long term effects energy balance during critical periods; and 4) as the number of survivors of previously fatal or debilitating pediatric diseases increases (e.g., congenital heart disease, sickle cell disease, malignancies) innovative research is necessary to frame optimal levels of rehabilitation. Each panelist will present not only key basic science discoveries, but how these insights can benefit clinical application and address health disparities and inequities.

Learning Objectives

1. Identify exercise associated immune regulation that can impact the care of children with asthma, sickle cell disease, and obesity.
2. Prescribe developmentally appropriate physical activity and exercise protocols that optimize bone development in adolescence.
3. Understand how novel applications of information system theory to cardiorespiratory signals during exercise can revolutionize clinical exercise testing.

Scholarly Session Questions

1. **Audience Size**
40
2. **Target audience**
Primary care pediatricians
Pediatric pulmonologists
Pediatric cardiologists
3. **Tracks**

Artificial Intelligence
Asthma
Basic Science
Cardiology
Genomics/Epigenomics
Obesity
Public Health
Pulmonology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Abstracts
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Introduction: Impact of exercise science research on critical clinical issues in pediatrics

Dan M. Cooper, MD

Duration of Presentation in Minutes

10

Immune system omics: New insights into molecular exercise health effects in pediatrics

Shlomit Radom-Aizik, PhD

Duration of Presentation in Minutes

20

The new biology of bone and muscle growth: Implications for exercise during critical periods of development

Bareket Falk, PhD

Duration of Presentation in Minutes

20

Information theory and entropy: New approaches to clinical exercise testing in children and adolescents

Ronen Bar-Yoseph, MD

Duration of Presentation in Minutes

20

Novel understandings of rehabilitation and behavior: Impact on congenital heart disease therapies

Naomi Gauthier, MD

Duration of Presentation in Minutes

20

(117) Proposal ID: 1931449

Introduction to the Safe Kids Injury Risk Index (SKIRI): An Innovative Tool to Identify Communities with Children at Risk for Unintentional Injuries

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **sadiqa kendi**

Score: **0**

Participant(s)

Sadiqa Kendi, MD, MPH (she/her/hers)

Position:

Associate Professor

Organization:

Children's National Health System

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, APA

J. Morag MacKay, BScN, MSc (she/her/hers)

Position:

Chief Research and Network Officer

Organization:

Safe Kids Worldwide

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Michelle Macy, MD, MS (she/her/hers)

Position:

Professor

Organization:

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

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA, APS, SPR

Mark R. Zonfrillo, MD, MSCE (he/him/his)

Position:

Professor of Emergency Medicine and Pediatrics

Organization:

The Warren Alpert Medical School of Brown University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Abby Collier, DrPH (she/her/hers)

Position:
Director

Organization:
National Center for Fatality Review and Prevention

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Andrew W. Kiragu, MD (he/him/his)

Position:
Associate Professor

Organization:
Children's Minnesota

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Male

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

Kyran Quinlan, MD, MPH

Position:
Professor

Organization:
Rush University Medical Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Joelle N. Simpson, MD, MPH (she/her/hers)

Position:
Associate Professor of Pediatrics and Emergency Medicine

Organization:
Children's National Health System

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Session Description

Session Description

Child unintentional injury has persistently been unequally distributed by social, demographic, and geographic factors despite substantial reductions in overall injury prevalence over the past 3 decades. New tools are needed to more effectively address injury inequities, and the Safe Kids Injury Risk Index (SKIRI) was developed to support researchers, policy makers, public health practitioners, and physicians better target their efforts. Existing child wellness indices such as the social deprivation index and child opportunity index are not specific for use in unintentional injury. SKIRI seeks to address this gap by predicting risk of unintentional injury in children at the ZIP Code Tabulation Area (ZCTA) level. It uses 5 levels of risk, from “very low risk” to “very high risk”.

The hot topic symposium will start with an overview of SKIRI, methodology used for its development, and how it is different from other childhood wellness indices. We will demonstrate SKIRI in different geographic areas, using areas with geographic, economic, and racial diversity. In addition, we will utilize a case-based approach to demonstrate how SKIRI could be used by both clinical and research focused pediatric practitioners.

Learning Objectives

1. Upon completion, participants will be able to understand the basic components of the Safe Kids Injury Risk Index (SKIRI)
2. Upon completion, participants will be able to identify ways that SKIRI can be used in their research
3. Upon completion, participants will be able to discuss the role of SKIRI in clinical practice when weighing the role of various categories of anticipatory guidance

Scholarly Session Questions

1. **Audience Size**
75
2. **Target audience**
Clinical pediatricians, injury prevention researchers, equity researchers, public health focused pediatricians
3. **Tracks**
Advocacy
Community Pediatrics
Diversity, Equity, and Inclusion
Emergency Medicine
Health Equity/Social Determinants of Health
Health Services Research
Injury Prevention
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Injury prevention SIG, Pediatric Injury Equity Review Workshop (if accepted)
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Morag MacKay participated in the development of the tool being discussed. She is not a pediatrician and is staff with Safe Kids Worldwide, thus is not a member of the organizations listed.
8. **Does this submission involve one or more specialties or disciplines?**
Yes, as listed above.
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Inequities in Child Unintentional Injury

Sadiqa Kendi, MD, MPH

Duration of Presentation in Minutes

10

SKIRI Development

J. Morag MacKay, BScN, MSc

Duration of Presentation in Minutes

10

Use of SKIRI in the Research Setting: Part 1

Michelle Macy, MD, MS

Duration of Presentation in Minutes

10

Use of SKIRI in the Research Setting: Part 2

Mark R. Zonfrillo, MD, MSCE

Duration of Presentation in Minutes

10

Use of SKIRI by Child Death Review Teams

Abby Collier, DrPH

Duration of Presentation in Minutes

10

Use of SKIRI in the Clinical Setting: PICU

Andrew W. Kiragu, MD

Duration of Presentation in Minutes

10

Use of SKIRI in the Clinical Setting: Primary Care

Kyran Quinlan, MD, MPH

Duration of Presentation in Minutes

10

Use of SKIRI in the Clinical Setting: ED

Joelle N. Simpson, MD, MPH

Duration of Presentation in Minutes

10

(118) Proposal ID: 1927402

Behavioral Health Emergencies: Exploring opportunities for real impact

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Lauren Gambill**

Score: **0**

Participant(s)

Lauren K. Gambill, MD, MPA, FAAP (she/her/hers)

Position:

Assistant Professor

Organization:

University of Texas at Austin Dell Medical School

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Kelsey Fath, MD

Position:

Assistant Professor of Pediatrics

Organization:

UT Austin Dell Medical School

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Keely G. Smith, MD (she/her/hers)

Position:

Professor

Organization:

McGovern Medical School at the University of Texas Health Science
Center at Houston

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Session Description

Session Description

The frequency of Behavioral Health Emergencies (BHE) has increased alarmingly in pediatric hospitals. These events can have significant and far reaching negative impacts on patients, families, and healthcare providers. As such, understanding these events and optimizing their management is crucial.

Emerging literature describes emerging protocols and interventions, but there is great opportunity to improve the understanding and management of these events. This panel brings together content area experts to share experiences and insights critical to this work.

Dr. Keely Smith is a pediatric hospitalist in Houston and an expert in trauma-informed care and behavioral health trends in inpatient pediatrics. She has done extensive work with pediatric trainees, faculty, and staff on de-escalation and safety policies.

Dr. Kelsey Fath is a pediatric hospitalist in Austin where she is a member of the Workplace Violence Committee and site lead for the AAP PACC Quality Network Mental Health Processes, Workflows & Responses (IMPWR) project. Her research focuses on patient and caregiver perceptions of BHEs.

This dynamic and interactive panel will be moderated by Lauren Gambill, who has explored this topic extensively through a legislative advocacy and policy lens.

Attendees will walk away with actionable steps at the clinical, community, and legislative levels to decrease the frequency of BHEs as well as optimize their management when they do occur.

Learning Objectives

1. Evaluate existing research on current approaches to behavioral health emergencies to identify opportunities to improve current practice and policies
2. Analyze opportunities to leverage resources, at the local, state, and federal levels to improve individual institutional practices
3. Generate a plan for advocacy of broader policy solutions to address shortcomings in the prevention and management of behavioral health emergencies

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

This panel is relevant to anyone working in the pediatric hospital setting. This includes pediatric faculty and trainees across all inpatient subspecialties.

3. **Tracks**
Advocacy
Hospital Medicine
Mental Health
Quality Improvement/Patient Safety
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Health Policy Scholars Program
AAP Section on Hospital Medicine Executive Committee Meeting
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
This panel is comprised of pediatric hospitalists but it is relevant to anyone who works in the pediatric hospital setting.
9. **If your session was presented at another conference, please describe the conference and presentation.**
A version of this panel has been accepted and will be presented at the Texas Pediatric Society Annual Meeting in October 2024
10. **Additional comments**
This emerging topic is a of critical importance. Participants will walk away with a better understand of local action they each can take but also contribute to a greater national conversation on this topic.

Presentation Titles and Durations

Behavioral Health Emergencies: A critical conversation locally, regionally, and nationally

Lauren K. Gambill, MD, MPA, FAAP

Duration of Presentation in Minutes

15

Patient and Family Perspectives on BHEs: understanding the mental, physical, and societal toll

Kelsey Fath, MD

Duration of Presentation in Minutes

30

Behavioral Health Emergency Institutional Best Practices

Keely G. Smith, MD

Duration of Presentation in Minutes

30

(119) Proposal ID: 1916879

Advances and Challenges in Delivery Room Resuscitation Research: Better Evidence for Better Outcomes

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **James Sotiropoulos**

Score: **0**

Participant(s)

Ju-Lee Oei, MBBS FRACP MD (she/her/hers)

Position:

Conjoint Professor

Organization:

University of New South Wales

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

Not a member of any of these organizations

Anna Lene Seidler, PhD, MSc, BSc (she/her/hers)

Position:

Senior Research Fellow

Organization:

University of Sydney

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

James X. Sotiropoulos, MD BMed BSc (Hons) (he/him/his)

Position:

PhD Candidate

Organization:

University of Sydney, University of New South Wales

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Anup Katheria, M.D.

Position:

Associate Professor of Pediatrics

Organization:

University of California, San Diego School of Medicine

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Prefer not to respond

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

Roger F. Soll, MD (he/him/his)

Position:
H. Wallace Professor of Neonatology

Organization:
Robert Larner, M.D., College of Medicine at the University of Vermont

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Rapid and unprecedented advancements in delivery room care have materialized in the past several decades, but critical knowledge gaps persist. Despite best efforts, existing evidence informing standard practice is fraught with bias, inconsistency, and critical limitations. The evidence informing many internationally recognized recommendations remains low or very low certainty, meaning many infants may be exposed to ineffective or harmful treatments.

Standard avenues for generating new evidence are either limited by their costs and time-intensiveness or by relying on published summary data alone. Innovative methods for generating and synthesizing evidence can address this and lead to better care in the delivery room, however, the application of these methods remains elusive.

This session aims to unravel the complexities of delivery room evidence generation and synthesis, and discuss how emerging methods can more effectively generate 'Better Evidence' in the pursuit of 'Better Outcomes' for newborn infants.

The curated panel of international experts on delivery room resuscitation research will discuss:

1. The power of innovative collaborative methods such as individual participant data meta-analysis to leverage existing data to dispel uncertainty in the delivery room
2. The application of other emerging evidence synthesis methodologies, such as prospective and network meta-analyses, to coordinate research activities and explore the complexities of delivery room interventions
3. The intersection of delivery room interventions, and considerations for future research to explore bundles of care through novel and adaptive trial designs
4. Avenues to more effectively generate and synthesize evidence that can be directly translated and implemented into practice

Learning Objectives

1. Upon completion, participants will be able to understand the advantages of applying emerging evidence synthesis methodologies to neonatal resuscitation questions
2. Upon completion, participants will be able to identify limitations and gaps in current neonatal resuscitation research
3. Upon completion, participants will be able to understand the application of novel methods to generate 'Better Evidence' to address delivery room knowledge gaps

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Neonatologists
General Pediatricians
Pediatric Intensivists

Obstericians and Gynecologists
Neonatal Nurse Practitioners
Midwives

3. **Tracks**

Academic and Research Skills
Clinical Research
Neonatology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

No other confirmed events.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

We have curated a diverse panel of international experts on neonatal resuscitation research, including panellists from Australasia who are not members of the above named organizations. The expertise of these panellists is critical to the conducting of the session, as they possess unique knowledge, specifically their expertise relates to the next-generation evidence synthesis methods (like individual participant data, network- and prospective meta-analysis) and the translation of evidence emerging from these methods into guidelines and practice. These methods will be a focus of this session.

We have also selected panellists from a diverse range of career stages (including early career researchers, mid-career researchers and tenured Professors). There is a balance of gender and representation from different ethnic groups and LGBTIQ+ representation.

8. **Does this submission involve one or more specialties or disciplines?**

Topic is Neonatal Resuscitation and Research Methods. Relevant to Neonatologists, General Pediatricians, Clinical Epidemiologists, Biostatisticians

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

N/A

10. **Additional comments**

N/A

Presentation Titles and Durations

Introduction: Striving toward better evidence for better outcomes in studies of neonatal resuscitation

Ju-Lee Oei, MBBS FRACP MD

Duration of Presentation in Minutes

20

Leveraging novel collaborative approaches to evidence synthesis in the delivery room: lessons from the iCOMP Collaboration

Anna Lene Seidler, PhD, MSc, BSc

Duration of Presentation in Minutes

20

Overcoming challenges in understanding initial oxygen for preterm infants:

Lessons learned from the NETMOTION study

James X. Sotiropoulos, MD BMed BSc (Hons)

Duration of Presentation in Minutes

30

Synergy in the delivery room: considering the intersection of interventions in neonatal resuscitation trials

Anup Katheria, M.D.

Duration of Presentation in Minutes

20

Setting the standard for better delivery room evidence: Cochrane Neonatal perspective

Roger F. Soll, MD

Duration of Presentation in Minutes

20

(120) Proposal ID: 1925905

Bridging bench and bedside: hot topics in developing lung research

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Meaghan Ransom**

Score: **0**

Participant(s)

Meaghan Ransom, MD, MPH

Position:

Assistant Professor

Organization:

Monroe Carell Jr. Children's Hospital at Vanderbilt

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Laurie C. Eldredge, MDPH (she/her/hers)

Position:

Assistant Professor

Organization:

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

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Stephanie Adaikalam, MD (she/her/hers)

Position:

Pediatric Pulmonary Fellow

Organization:

Riley Hospital for Children at Indiana University Health

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Lawrence S. Prince, MD, PhD (he/him/his)

Position:

Professor of Pediatrics, Chief of Neonatal and Developmental Medicine

Organization:

Stanford University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Roopa Siddaiah, MD (she/her/hers)

Position:
Associate Professor of Pediatrics

Organization:
Penn State Children's Hospital

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Anne Hilgendorff, MD (she/her/hers)

Position:
Head of Translation in Neonatology

Organization:
Dept. of Pediatrics, Medical Faculty, University of Oldenburg and
University Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Jennifer Sucre, MD

Position:
Associate Professor of Pediatrics

Organization:
Vanderbilt University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

BPD is the most common morbidity of premature birth yet we lack targeted therapeutics. There is a knowledge gap of basic mechanisms of BPD pathogenesis and progression. New and innovative models of bench to bedside research will enable investigators to develop predictors of BPD and eventual therapies.

Learning Objectives

1. Upon completion, participants will be able to describe ongoing basic research in BPD.
2. Upon completion, participants will be able to describe translational approaches in BPD.
3. Upon completion, participants will be able to identify novel techniques to study the developing lung.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
pulmonologists, neonatologists, pediatric critical care, pediatric otolaryngologists, respiratory therapists
3. **Tracks**
Children with Chronic Conditions
Critical Care
Neonatology
Pulmonology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Not aware at this time
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes, topic is bronchopulmonary dysplasia involving neonatology, pulmonology, critical care, otolaryngologists and respiratory therapy
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Introduction (1 min) and "The Emerging Role of Extracellular Vesicles in BPD" (10 min)

Meaghan Ransom, MD, MPH

Duration of Presentation in Minutes

11

"Airway epithelial cell differentiation and injury in BPD" 10 min and co-speaker for post panel Q&A (14 min)

Laurie C. Eldredge, MDPhD

Duration of Presentation in Minutes

24

"Spatial transcriptomics of airway malacia in premature infants" (10 min)

Stephanie Adaikalam, MD

Duration of Presentation in Minutes

10

"Immune mediators of evolving BPD" (10 min)

Lawrence S. Prince, MD, PhD

Duration of Presentation in Minutes

10

"Noninvasive salivary predictors of BPD-PH" (10min) and co-lead for post session Q&A with Laurie Eldredge

Roopa Siddaiah, MD

Duration of Presentation in Minutes

10

"MRI and pulmonary vascular disease in premature lung disease" (10min)

Anne Hilgendorff, MD

Duration of Presentation in Minutes

10

"New techniques in developing lung research" (15 min)

Jennifer Sucre, MD

Duration of Presentation in Minutes

15

(121) Proposal ID: 1908998

Opportunities and Challenges in Pediatric Hospital at Home Implementation in the United States

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Ryan Brewster**

Score: **0**

Participant(s)

Ryan Brewster, MD

Position:

Research Fellow

Organization:

Ariadne Labs, Brigham and Women's Hospital

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian, White

Gender

Male

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

AAP

Courtney Sump, MD MSc (she/her/hers)

Position:

Assistant Professor

Organization:

Cincinnati Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA, SPR

Karen Titchener, Masters in Advanced Nursing Practice as Nurse Practitioner (she/her/hers)

Position:

None

Organization:

None

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Christina Olson, MD

Position:

Associate Professor

Organization:

University of Colorado School of Medicine/ Children's Hospital Colorado

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

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

AAP, APA

Werner Vorster

Position:

Founder & CEO

Organization:

Vitls Inc.

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Session Description

Session Description

Hospitalization is associated with myriad unintended consequences, including disruption to family routines and medical trauma. Coupled with the decreasing capacity for inpatient pediatric care, there is a need to develop innovative models of care delivery for acutely ill children. Hospital at Home (HaH), wherein hospital-level services are provided at home, has emerged as a compelling

alternative to conventional hospitalization with evidence of comparable, if not superior, clinical outcomes, utilization, patient experience, and cost. Despite international pediatric HaH programs having great success, among more than 300 programs in the U.S., none serve a pediatric population. Adapting HaH to pediatrics will require close collaboration and alignment across diverse stakeholders.

In this Scholarly Session, we will convene a diverse panel of leaders across clinical, policy, clinical, and academic sectors, including those with direct experiences with pediatric HaH programs internationally. The discussion will be anchored on the foundational characteristics of HaH, drawing on the current literature and experiences in adults and internationally. We will describe the potential benefits, limitations, and challenges associated with pediatric HaH implementation in the U.S. Among areas of focus will be: Determining patient eligibility criteria; Integrating HaH workflows into existing clinical operations; Deploying pediatric-specific and validated technologies for telecommunications and remote monitoring; Coordinating robust emergency response mechanisms; and mitigating caregiver burnout. Equitable care provision will be emphasized across all domains. Panelist insights will inform the next steps for operationalizing pediatric HaH and providing the groundwork for high-quality research and policy transformation.

Learning Objectives

1. Review the current evidence base and landscape of HaH in the US and internationally
2. Examine the potential benefits and limitations of pediatric HaH compared to conventional models of inpatient hospitalization
3. Define the operational, policy, technological, and research considerations for implementing pediatric HaH in the US

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Hospital administrators; pediatric hospital medicine providers and other clinicians interested in pediatric hospital at home; Telemedicine, remote monitoring, and virtual care programs
3. **Tracks**
Clinical Research
Health Services Research
Hospital Medicine

Quality Improvement/Patient Safety
Telemedicine

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
No
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Karen Titchener is a UK-based operational leader in pediatric hospital at home; Werner Vorster is a representative from the only FDA-cleared pediatric remote patient monitoring platform. Both Ms. Titchener and Mr. Vorster bring real world experience in pediatric hospital at home and represent important stakeholders alongside more academic and clinical perspectives.
8. **Does this submission involve one or more specialties or disciplines?**
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Policy innovations: Shaping the future of pediatric hospital at home reimbursement, value, and sustainability

Courtney Sump, MD MSc

Duration of Presentation in Minutes

15

Experiences from the field: Defining clinical eligibility and operational pathways for pediatric hospital at home

Karen Titchener, Masters in Advanced Nursing Practice as Nurse Practitioner

Duration of Presentation in Minutes

30

The double-edged sword: Understanding and addressing threats to health equity in pediatric hospital at home

Christina Olson, MD

Duration of Presentation in Minutes

15

Leveraging remote patient monitoring technology in hospital at home to ensure quality of care and safety

Werner Vorster

Duration of Presentation in Minutes

15

(122) Proposal ID: 1923790

To Merge or Not to Merge: Pros and Cons of Community Hospital and Children's Hospital Consolidation

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Scott Krugman**

Score: **0**

Participant(s)

Scott D. Krugman, skrugman@lifebridgehealth.org (he/him/his)

Position:

Senior Associate Dean

Organization:

George Washington University School of Medicine and Health Sciences

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APA, APS

Beth C. Natt, MD, MPH, MBA (she/her/hers)

Position:

Chair of Pediatrics and System Medical Director of Pediatric Service Line

Organization:

Goryeb Children's Hospital/Atlantic Health

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Ricardo A. Quinonez, MD, FAAP, FHM (he/him/his)

Position:

Associate Professor

Organization:

Texas Children's Hospital

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

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

AAP, APA

Jeff Sperring, MD (he/him/his)

Position:

Chief Executive Officer

Organization:

Seattle Children's

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Over the past two decades, community pediatric inpatient units have been closing as a result of financial constraints and decreasing volumes. Care has consolidated at children's hospitals resulting in an increasing number of children being transported to receive definitive care but leading to space constraints at referral centers. The beginning COVID-19 pandemic with strict infection control measures exacerbated community hospital unit closures by dramatically decreasing census at the same time as increased adult volumes. The subsequent "respiratory viral surge" a few years later highlighted the challenges of the reduced capacity as many regions experienced severe shortages of PICU and inpatient beds requiring children to remain in poorly resourced community settings awaiting beds or transporting across state lines. One approach to balancing the need of children's hospitals to maintain capacity for high end complex care while maintaining local resources at community hospitals is partnership opportunities between community and children's hospitals – known as consolidation. While this approach varies from loose affiliations to complete ownership, it has been increasingly popular over the past decade and can be successful. However, it is not without challenges for both institutions. The objective of this panel discussion is to highlight the changing environment of pediatric inpatient care and discuss the pros and cons of consolidation for both community hospitals as well as children's hospitals.

Learning Objectives

1. Discuss the current state of pediatric inpatient care and the landscape for children to obtain definitive care.
2. Describe opportunities and challenges that should be considered when community and children's hospitals evaluate partnership opportunities.
3. Compare models for partnership to maximize success for both organizations

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Hospitalists, department chairs, chief medical officers
3. **Tracks**
Community Pediatrics
Hospital Medicine
Leadership and Business Training
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are you or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes - crosses business, administration, community pediatrics and hospitalists.
9. **If your session was presented at another conference, please describe the conference and presentation.**
A similar presentation by Scott Krugman, Dan Rauch and Beth Natt was presented and well-received at PHM24.
10. **Additional comments**

Presentation Titles and Durations

The Current State of Community Hospital Inpatient Pediatrics and Consolidation of Care

Scott D. Krugman, skrugman@lifebridgehealth.org

Duration of Presentation in Minutes

10

Community Hospital Challenges with Consolidation

Beth C. Natt, MD, MPH, MBA

Duration of Presentation in Minutes

20

Successful Integration of Community sites with Children's hospitals

Ricardo A. Quinonez, MD, FAAP, FHM

Duration of Presentation in Minutes

20

Creating collaborative approaches to inpatient care delivery

Jeff Sperring, MD

Duration of Presentation in Minutes

20

(123) Proposal ID: 1930386

Beyond Borders: Pediatricians Stepping up for Immigrant Children in the U.S.

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Rishi Mediratta**

Score: **0**

Participant(s)

Rishi Mediratta, MD, MSc, MA (he/him/his)

Position:

Clinical Associate Professor of Pediatrics

Organization:

Stanford University School of Medicine

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

AAP

Karla Fredricks, MD, MPH (she/her/hers)

Position:

Assistant Professor

Organization:

Baylor College of Medicine/Texas Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Olanrewaju Falusi, MD, MEd (she/her/hers)

Position:

Medical Director of Advocacy Education; Residency Associate Program
Director

Organization:

Children's National Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, APA

Session Description

Session Description

Immigrant and migrant children face barriers to accessing quality healthcare due to language barriers, cultural differences, limited knowledge of available services, lack of health insurance, and structural racism. These challenges are compounded by the trauma many immigrant children experience at different

stages: leaving their home country, crossing international borders, and reintegrating into a new society. This session will focus on the third stage of trauma- adjusting to life in the U.S.- and how it impacts the medical care immigrant children receive. General pediatricians and pediatric subspecialists must understand these challenges and have the knowledge and skills to provide culturally competent care to immigrant children and their families.

We will focus on how pediatricians can optimize care for immigrant and refugee children, including those with disabilities and complex medical needs, in the U.S. Panelists will discuss strategies for establishing medical homes for these children and advocating for their health and well-being within and beyond clinical settings, highlighting practical solutions and collaborative efforts to meet their unique healthcare needs.

Learning Objectives

1. Develop insights into the challenges and successes of establishing a medical home for immigrant children and their families
2. Identify strategies for how pediatricians can optimize care for immigrant children with disabilities and complex medical needs
3. Highlight approaches to advocate for the health and well-being of immigrant children beyond clinical settings

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
General pediatricians at PAS, trainees, and others interested in immigration and global newborn and child health
3. **Tracks**
Advocacy
Diversity, Equity, and Inclusion
General Pediatrics
Global Neonatal & Children's Health
Health Equity/Social Determinants of Health
Immigrant Health
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Monday, April 28
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

Other Global and Child Health panel discussion

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

The topic of immigrant health, which involves pediatrics, global child health, health services research, and immigration.

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

Prior panel discussion at PAS 2024 about the triple trauma of migration and health on children.

10. **Additional comments**

Presentation Titles and Durations

Models of Care for Newly Arrived Children with Medically Complex Needs

Karla Fredricks, MD, MPH

Duration of Presentation in Minutes

30

Immigrant Health: Equity through Care and Advocacy

Olanrewaju Falusi, MD, MEd

Duration of Presentation in Minutes

30

(124) Proposal ID: 1932305

Learning from Variation as Child Health Equity Centers Emerge: Driving Pediatric Systems Change and Improving Health Outcomes

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Lisa Chamberlain**

Score: **0**

Participant(s)

Ryan Padrez, MD

Position:

Clinical Associate Professor

Organization:

Stanford University School of Medicine

Role:

Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

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

AAP

Leslie R. Walker-Harding, MD (she/her/hers)

Position:

Chair Department of Pediatrics/Chief Academic Officer SVP

Organization:

University of Washington/Seattle Children's

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, APS

Lee S. Beers, MD, FAAP (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Children's National Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA, APS

Lisa Chamberlain, MD, MPH (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Stanford University School of Medicine

Role:

Submitter;Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Robert S. Kahn, MD, MPH (he/him/his)

Position:
Vice President, Health Equity Strategy

Organization:
Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

Health equity is a central tenet in medicine, and as a response new pediatric centers (or other similar entities) focused on reducing child health disparities are being developed. A range of factors are driving this trend: the rising focus on social determinants of health, the further exacerbation of disparities wrought by COVID-19 pandemic, and the failure of existing approaches to close health gaps. These new centers often must navigate parallel efforts by their children's hospitals, academic pediatric departments, and universities. In addition, these

centers may intersect with new accountable care structures and value-based payments incentives. The potential for a shared agenda between these entities to address health inequities offers new opportunities to drive pediatric systems change and reduce child health inequities. While the organizational structure, goals, and strategies of these centers are influenced by their local context, common best practices are emerging. At this early stage, as more organizations look to establish pediatric health equity centers, we will bring together a panel of pioneer leaders in the field to describe lessons learned, share emergent best practices and inform the development of the next generation of health equity leaders.

Learning Objectives

1. Understand the context for why new centers/institutes have become a foundational strategy to address racial/ethnic health inequities in pediatrics.
2. Compare and contrast variations in vision, strategies, partnerships, and outcomes across recently established Centers within pediatric departments and children's hospitals which address health equity.
3. Consider structures, strategies and resources needed to develop the next generation of equity researchers and leaders to drive pediatric systems change and achieve desired outcomes

Scholarly Session Questions

1. **Audience Size**
075
2. **Target audience**
Children's hospital leadership, department leaders, Academic faculty, Health service researchers, policy researchers, advocates, learners/trainees
3. **Tracks**
Advocacy
Diversity, Equity, and Inclusion
Health Equity/Social Determinants of Health
Health Services Research
Leadership and Business Training
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

None

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

NA

8. **Does this submission involve one or more specialties or disciplines?**

NA

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

No

10. **Additional comments**

Presentation Titles and Durations

Factors Driving the Growth in Pediatric Health Equity Centers

Ryan Padrez, MD

Duration of Presentation in Minutes

5

Shifting Equity priorities of the CEO/Department Chair

Leslie R. Walker-Harding, MD

Duration of Presentation in Minutes

10

Addressing Health Equity through a Condition-Specific Approach: Community Mental Health

Lee S. Beers, MD, FAAP

Duration of Presentation in Minutes

15

Critical Collaboration with Hospital and University Government Relations

Lisa Chamberlain, MD, MPH

Duration of Presentation in Minutes

15

Building Shared Vision and Executing: A Community Systems Frame

Robert S. Kahn, MD, MPH

Duration of Presentation in Minutes

15

(125) Proposal ID: 1899513

Environmental Hazard of Endocrine Disrupting Plasticizers in the NICU:
Current State and Strategies for Mitigation

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Lucas Panneel**

Score: **0**

Participant(s)

Judy L. Aschner, N/A, MD (she/her/hers)

Position:
Professor of Pediatrics

Organization:
Hackensack Meridian Health

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Lucas Panneel (he/him/his)

Position:
MD, PhD-Student

Organization:
Antwerp University Hospital

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Annemarie Stroustrup, MD, MPH (she/her/hers)

Position:

Professor

Organization:

Cohen Children's Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR

Randall Jenkins, MD

Position:

Pediatric Nephrologist

Organization:

St. Luke's Children's Hospital St. Luke's Regional Medical Center

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Male

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

Cynthia F. Bearer, MD, PhD (she/her/hers)

Position:
William & Lois Briggs Chair of Neonatology; Chief of Neonatology;
Professor of Pediatrics

Organization:
UH Rainbow Babies & Children's Hospital/Case Western Reserve
University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Premature infants are exposed to known chemical toxicants during a sensitive developmental window through products used in neonatal intensive care. Specifically, hospital-based exposure to common chemical plasticizers is associated with worse pulmonary function, altered neurodevelopment, and maladapted growth in preterm infants. Recent research reveals significant

ongoing exposure of NICU babies to phthalates and alternative plasticizers and growing evidence of the multi-system adverse effects of early-life exposure to endocrine disrupting plasticizers. Importantly, exposure to specific toxic plasticizers can be mitigated once source exposures are definitively identified. Thus, this area of research at the crossroads of neonatology, developmental biology, endocrinology, and environmental health holds promise to significantly improve the lives of the hundreds of thousands of children who spend time in a neonatal intensive care unit every year.

This hot topic symposium will provide current exposure profiles of premature neonates to phthalates and their alternatives, comparing USA and EU based cohort studies. Dr. Aschner will provide an overview of environmental exposures in the NICU. Dr. L. Panneel will share results on sources and levels of plasticizer exposure in the NICU. Dr. Stroustrup will highlight clinical outcomes after perinatal phthalate exposure. Dr. Jenkins will discuss the phenotype of low-renin hypertension associated with NICU phthalate exposure. The session will end with an interactive discussion and Q&A moderated by Dr. Aschner and Dr. Cynthia Bearer, focusing on clinical, legislative, and advocacy strategies to reduce exposure and future research priorities. We aim to raise awareness around exposure to these potentially harmful substances in a vulnerable population.

Learning Objectives

1. Gain insights into modifiable sources and levels of neonatal plasticizer exposure
2. Learn about the environmental health hazard of perinatal plasticizer exposure, and the possible mechanisms of action
3. Be involved in public health strategies to limit exposure to and promote substitution of harmful plasticizers in the NICU

Scholarly Session Questions

1. **Audience Size**

300

2. **Target audience**

Neonatologists, pediatric intensive care physicians, pediatric hospitalists, environmental health scientists, public health scientists, endocrinologists, nephrologists, child neurologists, developmental pediatricians, general pediatricians, obstetricians, pharmacists, neonatal intensive care nurses, pediatric intensive care nurses.

3. **Tracks**

Advocacy

Endocrinology

Environmental Health
Epidemiology
Hypertension
Neonatology
Neurology
Pharmacology and Therapeutics
Public Health
Pulmonology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Minimize opposing neonatal sessions

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

All speakers except for Dr. Panneel (MD) are members or will cover their own travel expenses. He has published several peer-reviewed papers on the topic as part of his PhD, and provides essential complementary experience from EU based cohort studies.

8. **Does this submission involve one or more specialties or disciplines?**

Topic involves several subdisciplines: Neonatology, endocrinology, environmental health, epidemiology, neurology, public health, pulmonology, advocacy and policy makers

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

N/A

10. **Additional comments**

N/A

Presentation Titles and Durations

Introduction and overview of environmental exposures to endocrine disrupting plasticizers in the NICU

Judy L. Aschner, N/A, MD

Duration of Presentation in Minutes

10

Epidemiological evidence on sources and levels of plasticizer exposure in the NICU □ an overview of USA and EU cohort studies

Lucas Panneel

Duration of Presentation in Minutes

30

Perinatal phthalate exposure and child health outcomes

Annemarie Stroustrup, MD, MPH

Duration of Presentation in Minutes

20

Phthalate exposure and neonatal hypertension

Randall Jenkins, MD

Duration of Presentation in Minutes

15

Discussion and Audience Q&A: The power of perinatal environmental health research: risk reduction and legislative strategies

Cynthia F. Bearer, MD, PhD

Duration of Presentation in Minutes

15

(126) Proposal ID: 1924959

Digital twins and synthetic patient data: Can they empower clinical trials in children?

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Mohan Pammi**

Score: **0**

Participant(s)

Mohan Pammi, MD, PhD, MRCPCH (he/him/his)

Position:

Professor

Organization:

Baylor College of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

AAP, APS

Josef Neu, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

University of Florida

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APS, SPR

Prakesh S. Shah, MD, FRCPC (he/him/his)

Position:

Professor

Organization:

Mount Sinai Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

SPR

Nima Aghaeepour, PhD

Position:

Associate Professor

Organization:

Stanford University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian, White

Gender
Male

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

Session Description

Session Description

Randomized controlled trials (RCT) are the gold standard to evaluate the effectiveness and safety of clinical interventions but are expensive, time consuming and RCTs in children including neonates (especially in preterm infants) lack adequate power.

The Digital twin concept (DTC) is a health model in which deep phenotypic and molecular characteristics of a patient are closely matched to thousands of patients with similar clinical and molecular profiles, allowing better prediction of individualized treatment and health outcomes. Advancement in generative AI models enables the development of synthetic patient data, which includes data that is computer-generated, mimics real-world patterns and preserve patient privacy.

The use of virtual patient data (DTC and synthetic) in pediatric clinical trials would mean decreased exposure of children to potentially ineffective or risky interventions, shorter trial durations leading to ascertainment of safety and effectiveness of interventions and faster drug approvals. This would lead to higher certainty of evidence for interventions in children with more personalized treatment options through improved trial data and increased access to novel interventions. Researchers will have improved ability to test multiple treatment variations and test the potential for continuous monitoring and adaptive trial designs. We believe that the advantages of utilizing virtual patient data would lead to enhanced data quality and quantity. However, in addition to addressing numerous technical details of this exciting technology, we need to design ethical and safety frameworks, and to develop data privacy and ownership regulations before its widespread use in our clinical research.

Learning Objectives

1. Understand the need for well designed RCTs in children and understand the fallibilities of clinical trials in neonates (low sample size, low event rate).
2. Discuss how virtual patient data including the Digital Twin Concept (DTC) and synthetic patient data can empower clinical trials in neonates and children
3. Delineate regulatory and ethical needs for the use of virtual patient data in RCTs enrolling children and neonates.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Trainees, faculty and clinical trialists
3. **Tracks**
Artificial Intelligence
Clinical Research
General Pediatrics
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
clinical trial presentations/workshops, presentations/ workshops on AI
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Dr. Aghaeepour is a computational scientist and an expert in artificial intelligence
8. **Does this submission involve one or more specialties or disciplines?**
Yes
9. **If your session was presented at another conference, please describe the conference and presentation.**
No
10. **Additional comments**

Presentation Titles and Durations

The state of RCT evidence in neonates and children

Mohan Pammi, MD, PhD, MRCPCH

Duration of Presentation in Minutes

20

Intestine on Chip- and example of a model to circumvent patient recruitment in nutritional models in preterm neonates

Josef Neu, MD

Duration of Presentation in Minutes

20

Virtual patient data and its accuracy compared to real enrolled patient data

Prakesh S. Shah, MD, FRCPC

Duration of Presentation in Minutes

20

An AI Approach and methodology to create virtual patient data

Nima Aghaeepour, PhD

Duration of Presentation in Minutes

20

(127) Proposal ID: 1915797

Let's talk about sex: Sexual healthcare for chronic kidney disease (CKD) patients

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Katherine Dell**

Score: **0**

Participant(s)

Katherine M. Dell, MD (she/her/hers)

Position:

Professor of Pediatrics and Director of Clinical and Translational Research

Organization:

Cleveland Clinic Children's

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

Black or African American, White

Gender

Female

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

AAP, APS, SPR, ASPN

Celina Brunson, MD, MSCe

Position:

Assistant Professor

Organization:

Children's National Hospital

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP, ASPN

Ken Sutha, MD/PhD (he/him/his)

Position:

Instructor

Organization:

Stanford University School of Medicine

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

SPR, ASPN

Pia Francisco-Natanauan, MD (she/her/hers)

Position:

Associate Professor of Pediatrics, Associate Clinical Professor of Family Medicine

Organization:

University of Hawaii, John A. Burns School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP

Gina Sequeira, MD, MS (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Seattle Children's

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Non-binary

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

AAP

Heather D. Stewart, MD (she/her/hers)

Position:

Division Chief Pediatric Nephrology and Hypertension

Organization:

Dwaine and Cynthia Willett Children's Hospital of Savannah

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Pediatric nephrology practitioners and nurses often serve as a source of primary care for patients with advanced Chronic Kidney Disease (CKD) and End Stage Kidney Disease (ESKD). Sexual healthcare in children and young adults with CKD and ESKD can pose unique challenges. In this session, speakers will address specific areas related to sexual healthcare for adolescents and young adults with CKD and ESKD, including discussion of contraception options, sexual health screening and gender-affirming care. The session will also discuss management considerations during pregnancy in dialysis and transplant patients and short and long term pregnancy outcomes.

Learning Objectives

1. Understand the role of pediatric nephrologist in sexual health of CKD patients, including sexual health screening, safety, tolerability, and efficacy of contraception options
2. Explore the intersection of kidney disease and transgender care with special considerations of hormonal therapies
3. Learn the management issues and short-term and long-term outcomes of pregnancy in chronic kidney disease (including advanced CKD) patients

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Pediatric Nephrologist, General Pediatricians, Adolescent Medicine, and Hospital Medicine faculty and trainees
3. **Tracks**

Adolescent Medicine
Children with Chronic Conditions
General Pediatrics
Hospital Medicine
Nephrology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
No
8. **Does this submission involve one or more specialties or disciplines?**
Yes, Nephrology, General Pediatrics, Adolescent Medicine
9. **If your session was presented at another conference, please describe the conference and presentation.**
Not applicable
10. **Additional comments**
None

Presentation Titles and Durations

Sexual Health, contraception and sexually transmitted infection (STI) screening in CKD

Pia Francisco-Natanauan, MD

Duration of Presentation in Minutes

30

Gender-affirming medical care for patients with CKD

Gina Sequeira, MD, MS

Duration of Presentation in Minutes

30

Pregnancy outcomes in CKD and ESKD

Heather D. Stewart, MD

Duration of Presentation in Minutes

30

(128) Proposal ID: 1919804

Using Human Factors Science to Address Key Challenges in Cardiopulmonary Resuscitation

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Louis Halamek**

Score: **0**

Participant(s)

Louis Halamek, MD (he/him/his)

Position:
Professor and Attending Physician

Organization:
Stanford University

Role:

Submitter;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Ken Catchpole, PhD (he/him/his)

Position:
SmartState Endowed Chair in Clinical Practice and Human Factors

Organization:
Medical University of South Carolina College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Connor Lusk, PHD

Position:

Assistant Professor

Organization:

Medical University of South Carolina

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

Brenda H. Law, MD MSc

Position:

Assistant Professor

Organization:

University of Alberta Faculty of Medicine and Dentistry

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Nicole Yamada, MD, MS (she/her/hers)

Position:
Clinical Professor

Organization:
Stanford University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Georg Schmolzer, MD, PhD

Position:
Clinician Scientist

Organization:
University of Alberta

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

The sociotechnical system in which cardiopulmonary resuscitation occurs is comprised of two major elements:

- 1) human beings who must accurately recall content knowledge, make decisions without comprehensive knowledge of the patient's history, safely perform invasive (and potentially harmful) technical procedures, and exhibit appropriate behavioral skills such as effective communication, leadership and teamwork, all while working under intense time pressure; and
- 2) environments characterized by physical spaces of varying dimensions and levels of organization that are populated by technologies manufactured by multiple vendors with limited interoperability and multiple routes (visual, auditory, tactile) of communicating key data.

Perhaps nowhere do these elements come together to create more challenges to human performance than in the delivery room during neonatal resuscitation.

Human factors engineering is the study of how humans interact with their environment and the application of this knowledge to improve performance. Applying human factors principles to the sociotechnical system of neonatal resuscitation can help clinicians, administrators and investigators to identify threats to optimal performance and develop and test potential solutions, including but not limited to the design of procedures, algorithms, technologies, equipment and workspaces. Ultimately, this work will reduce the risk of failure/error, improve patient outcomes and increase staff safety.

This panel brings together experts in human factors science and academic neonatologists to discuss key challenges during neonatal resuscitation and identify aspects of the system that are amenable to critical examination. We will highlight important research questions, methods that can be used to answer them (e.g., simulation-based experimentation), and potential funding sources.

Learning Objectives

- 1) list the types of human performance challenges faced by resuscitation teams.
- 2) discuss how human factors science can address those challenges.
- 3) specify 3 key areas of research that can lead to improvements in human performance during resuscitation and potential fundings sources for each.

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
neonatologists, pediatric critical care physicians, pediatric emergency medicine physicians, pediatric anesthesiologists, pediatric cardiologists
3. **Tracks**
Cardiology
Critical Care
Emergency Medicine
Global Neonatal & Children's Health
Hospital Medicine
Neonatology
Quality Improvement/Patient Safety
Sedation Medicine
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
n/a
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Drs. Catchpole and Lusk possess PhDs in Human Factors and Ergonomics. The field of Human Factors and Ergonomics is not limited to healthcare, nor is it divided into pediatric and adult sections. Their expertise represents an untapped research approach within pediatrics in general, and neonatal and pediatric critical care in particular.

8. **Does this submission involve one or more specialties or disciplines?**

The panelists represent expertise in Neonatology, Patient Safety, Human Factors and Ergonomics. The topic is relevant to neonatology and the following pediatric subspecialties: critical care, emergency medicine, cardiology, anesthesiology, hospital medicine, patient safety and global health.

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

n/a

10. **Additional comments**

n/a

Presentation Titles and Durations

The Value of Human Factors in Healthcare
Ken Catchpole, PhD

Duration of Presentation in Minutes

15

The Value of Human Factors in Healthcare
Connor Lusk, PHD

Duration of Presentation in Minutes

15

Human Factors Issues in Resuscitation: My Experience as a Clinician and Investigator

Brenda H. Law, MD MSc

Duration of Presentation in Minutes

15

Human Factors Issues in Resuscitation: My Experience as a Clinician and Investigator

Nicole Yamada, MD, MS

Duration of Presentation in Minutes

15

Human Factors Issues in Resuscitation: My Experience as a Clinician and Investigator

Georg Schmolzer, MD, PhD

Duration of Presentation in Minutes

15

(129) Proposal ID: 1927143

Balancing a Double-Edged Sword: Risk Factors and Preventative Strategies for Clotting and Bleeding in Hospitalized Children

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Anthony Sochet**

Score: **0**

Participant(s)

Anthony A. Sochet, MD, MSc (he/him/his)

Position:

Assistant Professor, Anesthesiology & Critical Care Medicine

Organization:

Johns Hopkins All Children's Hospital; Johns Hopkins University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP

Marisol Betensky, MD, MPH (she/her/hers)

Position:

Assistant Professor

Organization:

Johns Hopkins University School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

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

Not a member of any of these organizations

E. Vincent Faustino, MD, MHS

Position:

Professor of Pediatrics (Critical Care)

Organization:

Yale School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

SPR

Hilary Whitworth, MD, MSCE (she/her/hers)

Position:

Attending Physician

Organization:

Childrens Hospital of Philadelphia

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Epidemiologic data reveal an increase in the incidence and/or recognition of pediatric venous thromboembolism (VTE) by 130-200% in the preceding two decades. While the American College of Physicians recommends thromboprophylaxis for hospitalized adults without contraindication, the absence of phase 3-trials of pediatric pharmacological thromboprophylaxis and an understanding that many hospitalized children are at elevated risk of major bleeding precludes the creation of universal thromboprophylaxis recommendations among hospitalized children.

In this session, we invite international and national experts in pediatric thrombosis and hemostasis (Moderated by Dr. Anthony Sochet) to address the following hot topics and knowledge gaps:

- Lecture 1: Establishing "at-risk" prothrombotic pediatric subpopulations (15-minutes) – Dr. Marisol Betensky
- Lecture 2: Establishing "at-risk" coagulopathic pediatric subpopulations (15-minutes) – Dr. Hilary Whitworth
- Lecture 3: Reviewing current evidence for the efficacy and safety of pediatric thromboprophylaxis including mechanical and pharmacological strategies (15-minutes) – Dr. Anthony Sochet
- Lecture 4: Explore the results of phase 2 pediatric thromboprophylaxis RCTs and ongoing clinical trials (15-minutes) – Dr. E. Vincent Faustino
- Lecture 5: As a panel, review the approach to four common clinical case scenarios balancing the risk of clinically relevant bleeding and HA-VTE (15-

minutes) – Entire Panel

- Q/A Session (15-minutes) – Entire Panel

By establishing at-risk, prothrombotic pediatric subpopulations and those at elevated risk of bleeding (including from anticoagulant exposure), we trust this session will result in active dialogue, collaboration, and networking opportunities regarding a common conundrum that clinical providers of all roles expected to attend PAS 2025 routinely face.

Learning Objectives

1. Identify at-risk pediatric subpopulations for both clinically relevant bleeding and hospital-acquired venous thromboembolism.
2. Understand the current evidence regarding the safety and efficacy of pediatric thromboprophylaxis extrapolated from observational data and completed phase 2 trials.
3. Approach common scenarios regarding the application of anticoagulant thromboprophylaxis in children including a balance approach to the risk of clinically relevant bleeding and thrombosis.

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

General Pediatricians, Hospital Medicine Providers, Intensivists (both neonatal and pediatric), and Hematologists. This includes non-physician members of these fields.

3. **Tracks**

Critical Care
Epidemiology
Hematology/Oncology
Hospital Medicine
Neonatology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

None

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Yes, the topic spans multiple specialties including Hematology, Critical Care, Neonatology, Hospital Medicine and General Pediatrics
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**
N/A

Presentation Titles and Durations

Updates regarding the efficacy and safety of pharmacological thromboprophylaxis in children.

Anthony A. Sochet, MD, MSc

Duration of Presentation in Minutes

15

Hospitalized children at greatest risk for venous thromboembolism: observational data insights.

Marisol Betensky, MD, MPH

Duration of Presentation in Minutes

15

Results of phase 2 pediatric thromboprophylaxis RCTs and ongoing clinical trials

E. Vincent Faustino, MD, MHS

Duration of Presentation in Minutes

15

Predictors of clinically relevant bleeding among hospitalized children.

Hilary Whitworth, MD, MSCE

Duration of Presentation in Minutes

15

(130) Proposal ID: 1925754

The Pediatrician in Preventive Medicine: Can We Predict and Mitigate Future Cardiovascular Disease?

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Daniel Feig**

Score: **0**

Participant(s)

Daniel I. Feig, MD/PhD (he/him/his)

Position:

Professor of Pediatrics

Organization:

University of Alabama, Birmingham, School of Medicine

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APS, ASPN

Sarah E. Henson, MD (she/her/hers)

Position:

Assistant Professor Preventive Cardiology

Organization:

Cincinnati Children's Hospital

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Bonita E. Falkner, Doctor of Medicine (she/her/hers)

Position:

Emeritus Professor of Medicine and Pediatrics

Organization:

Sidney Kimmel Medical College at Thomas Jefferson University

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

SPR, ASPN

Rahul Chanchlani, MD MSc FRCPC FASN (he/him/his)

Position:

Associate Professor

Organization:

McMaster Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Andrew H. Tran, MD, MPH, MS (he/him/his)

Position:
Assistant Professor

Organization:
Nationwide Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

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

Carissa M. Baker-Smith, MD MPH MS (she/her/hers)

Position:
Associate Professor

Organization:
Nemours Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Session Description

Session Description

Atherosclerotic cardiovascular disease is the most common cause of death globally. A preventive medicine approach throughout the lifecourse is essential in decreasing this disease burden. This session will educate pediatricians and other attendees about the impact of blood pressure throughout the lifespan and the importance of traditional and non-traditional cardiovascular risk factors. The session will also provide an overview of frameworks for cardiovascular health such as the American Heart Association's Life's Essential 8.

Learning Objectives

1. Upon completion, participants will be able to assess blood pressure changes with age and advise families on the implications of chronic hypertension.
2. Upon completion, participants will be able to utilize pediatric cardiovascular risk scores in clinical practice.
3. Upon completion, participants will be able to assess patients for traditional and non-traditional cardiovascular risk factors and develop mitigation plans.

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Primary Care, Nephrologists, Cardiologists
3. **Tracks**
Cardiology
General Pediatrics
Hypertension

- Nephrology
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
 5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Hypertension/ IPHA programs
ASPN programs are complementary
 6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
 7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
 8. **Does this submission involve one or more specialties or disciplines?**
Cardiology, Public Health, Nephrology
 9. **If your session was presented at another conference, please describe the conference and presentation.**
no
 10. **Additional comments**

Presentation Titles and Durations

Blood Pressure Trajectories Through the Lifespan

Rahul Chanchlani, MD MSc FRCPC FASN

Duration of Presentation in Minutes

25

Traditional and Non-Traditional Cardiovascular Risk Factors

Andrew H. Tran, MD, MPH, MS

Duration of Presentation in Minutes

25

Frameworks for Cardiovascular Health

Carissa M. Baker-Smith, MD MPH MS

Duration of Presentation in Minutes

25

(131) Proposal ID: 1928409

Best of the Best in Pediatric Overuse Literature

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Ricardo quinonez**

Score: **0**

Participant(s)

Danni Liang, MD (she/her/hers)

Position:

Assistant Professor

Organization:

Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APA

Elizabeth Wolf, MD, MPH

Position:

Associate Professor

Organization:

Virginia Commonwealth University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Nathan Money, DO (he/him/his)

Position:

Assistant professor

Organization:

University of Utah

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APA

Ricardo A. Quinonez, MD, FAAP, FHM (he/him/his)

Position:

Associate Professor

Organization:

Texas Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

In the complex landscape of modern healthcare, medical overuse has become a pressing issue with significant implications for patient outcomes, costs, and the effectiveness of interventions. Medical overuse involves unnecessary tests, treatments, or procedures that may cause more harm than benefit. Despite advancements in medical science, overuse remains a major barrier to providing optimal, patient-centered care and an understudied issue in pediatrics

This session features experts in medical overuse who have extensively published on the topic. Since 2016, these authors have produced a series of literature reviews in JAMA Pediatrics and Pediatrics, spotlighting 60 high-quality articles on medical overuse. This session aims to review the “best of the best” of these 60 articles as chosen by the authors using the same rigorous methodology as in their publications.

The session will begin with an introduction to the significance of medical overuse, followed by an examination of key articles from three time periods: 2015-2016, 2017-2019, and 2020-2023. The review will focus on the quality of methodologies, findings, and conclusions of these articles, as well as types of overuse such as overtreatment and overdiagnosis. A total of 10 articles will be discussed—3-4 from each period. The session will conclude with a summary of essential takeaways for pediatric providers and recommendations for potential practice changes based on the findings

Learning Objectives

1. Define medical overuse and explore its importance in pediatrics
2. Discuss the best articles highlighting pediatric overuse over the past nine years
3. Synthesize take home points and needed practice changes regarding medical overuse in pediatrics

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Pediatric hospitalists, pediatric general academic, pediatric subspecialists and pediatric trainees
3. **Tracks**
Critical Care
Developmental and Behavioral Pediatrics
Emergency Medicine
Endocrinology
Epidemiology
Gastroenterology/Hepatology
General Pediatrics
Hospital Medicine
Infectious Diseases
Mental Health
Neonatology
Nephrology
Public Health
Quality Improvement/Patient Safety
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Monday, April 28
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Health Care Deliver Committee Meeting
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

This session will appeal to a wide audience given that the reviewed literature cuts across all of pediatrics

Presentation Titles and Durations

Introduction and Best of the Best in Overuse Literature 2015-2016

Danni Liang, MD

Duration of Presentation in Minutes

20

Best of the Best in Overuse Literature 2017-2019

Elizabeth Wolf, MD, MPH

Duration of Presentation in Minutes

15

Best of the Best in Overuse Literature 2020-2023

Nathan Money, DO

Duration of Presentation in Minutes

30

Conclusions and Q&A Best of the Best in Overuse Literature

Ricardo A. Quinonez, MD, FAAP, FHM

Duration of Presentation in Minutes

25

(132) Proposal ID: 1917950

Back to the Future: The impact of child maltreatment and social experience on neurodevelopment and future behavior.

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Lane Strathearn**

Score: **0**

Participant(s)

Lane Strathearn, MBBS FRACP PhD (he/him/his)

Position:

Professor

Organization:

University of Iowa

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

SPR

Session Description

Session Description

Infancy is a time of rapid neural development, in which repetitive, attuned social experiences are transformed into neural connections that become the foundation for social and cognitive development. Likewise, pregnancy, childbirth, lactation, and caregiving experience appear to prime a mother's brain to respond to her infant by engaging specific neuroendocrine systems, including the dopamine reward and the oxytocin affiliation systems. Drawing upon a 30-year longitudinal study from pregnancy, we have shown that child maltreatment, particularly emotional abuse and/or neglect, is associated with a wide range of long-term adverse health and developmental outcomes, including cognitive, psychological, addiction, sexual health, and physical health, assessed in up to 5200 offspring. Likewise, we have shown, using functional MRI (fMRI), that maternal psychopathology including addiction, depression, and unresolved trauma impacts neuroendocrine responses to infant face cues, and subsequent child development. In contrast, mothers with secure patterns of adult attachment show greater fMRI dopaminergic reward response when viewing their own infants' faces, as well as increased release of the hormone oxytocin during mother-infant interaction. This is accompanied by more attuned maternal behavior, such as face-to-face gaze and responsive vocalizations, with an increased likelihood of secure attachment in her offspring. Our current NIH-funded research is testing how early social experience may interact with genetic vulnerability, via epigenetic mechanisms, to affect the development of social behavior in autism. Overall, our research program has looked "back to the future" to see the profound impact of child maltreatment and early social experience on future behavior and neurodevelopment.

Learning Objectives

1. Explain basic neural mechanism through which early adversity and social experience impacts behavior and neurodevelopment.
2. List the developmental and behavioral outcomes associated with child abuse and neglect, particularly psychological maltreatment.
3. Identify psychosocial risk factors for ongoing developmental and behavioral concerns, and provide appropriate support for families.

Scholarly Session Questions

1. **Audience Size**

200

2. **Target audience**

General pediatricians, child psychiatrists, psychologists, neuroimaging researchers, early childhood specialists.

3. **Tracks**

Breastfeeding/Human Milk
Child Abuse & Neglect
Community Pediatrics
Developmental and Behavioral Pediatrics
Developmental Biology
Genomics/Epigenomics
Mental Health
Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
The topic relating to child development and adversity would involve Developmental-Behavioral Pediatrics, General Pediatrics, Public Health, Community Groups and Early Childhood Specialists.
9. **If your session was presented at another conference, please describe the conference and presentation.**
There would be some overlap with a Spotlight Research Presentation at the Society for Behavioral and Developmental Pediatrics (SDBP) Annual Meeting in October 2022.
10. **Additional comments**

Presentation Titles and Durations

Back to the Future: The impact of child maltreatment and social experience on neurodevelopment and future behavior

Lane Strathearn, MBBS FRACP PhD

Duration of Presentation in Minutes

90

(133) Proposal ID: 1931724

The New Nicotine Frontier: Navigating the unique dangers, clinical challenges and regulatory gaps of synthetic nicotine

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Charlotte Moore Hepburn**

Score: **0**

Participant(s)

Susan Walley, MD, MHCM (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Children's National Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APA

Trish Tulloch, MD MS FRCPC (she/her/hers)

Position:

Assistant Professor

Organization:

University of Toronto

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP

Charlotte Moore Hepburn, MD (she/her/hers)

Position:

Medical Director, Child Health Policy Accelerator

Organization:

Hospital for Sick Children

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Session Description

Session Description

The dramatic increase in the use of synthetic nicotine, in the form of e-liquids, moist snuff, and most recently, nicotine pouches, presents a new and serious health threat to children and adolescents. Synthetic nicotine, often marketed as

a “health products” and an “alternative to traditional tobacco”, is particularly appealing to young people. While the unique health risks associated with synthetic nicotine are still being investigated, it is well-established that nicotine, whether synthetic or naturally derived, is highly addictive, toxic to young children, and can cause significant damage to the developing brain.

This symposium will provide an in-depth exploration of the cutting-edge science surrounding nicotine exposure in the pediatric population. New research on how nicotine disrupts brain development, cognitive function and emotional regulation will be presented. Through illustrative case studies, attendees will also learn about emerging clinical guidelines for the prevention and treatment of nicotine addiction in youth, including evidence-based best practices that address both physical and psychological dependency.

Recognizing that the tobacco industry has skillfully exploited legislative loopholes that allow these products to bypass existing tobacco and vaping regulations, the session will also explore the critical regulatory challenges posed by synthetic nicotine. Through vignettes and global examples, the symposium will highlight best practices from leading international jurisdictions that have enacted proactive, protective regulations. Finally, the symposium will explore opportunities for advocacy and will outline the crucial role of healthcare professionals in pushing for stronger protections to safeguard the health of children and youth from the threat of synthetic nicotine.

Learning Objectives

1. Analyze the unique health risks associated with synthetic nicotine by appreciating the latest evidence on pediatric addiction and impacts on the developing brain
2. Apply evidence-informed best practices for preventing and treating nicotine addiction in youth, including both physiologic and psychological dependencies
3. Evaluate regulatory challenges posed by synthetic nicotine and engage in advocacy to address critical gaps in current public policy

Scholarly Session Questions

1. **Audience Size**

60

2. **Target audience**

Adolescent Medicine specialists; Pediatricians interested in addiction medicine; Pediatricians interested in emergency medicine; Academic pediatricians and child health policy professionals interested in

advocacy, public health policy, regulatory science, tobacco control and addiction medicine

3. **Tracks**

Adolescent Medicine

Advocacy

Emergency Medicine

Health Equity/Social Determinants of Health

Mental Health

Pharmacology and Therapeutics

Public Health

Tobacco Prevention

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Charlotte Moore Hepburn has also been invited as a speaker on the subject of regulatory policy related to child-friendly medicines (Proposal ID: 1928270)

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

N/A

8. **Does this submission involve one or more specialties or disciplines?**

Yes -- Topic is Synthetic Nicotine. This new public health threat is of interest to adolescent medicine and addiction medicine specialists, emergency medicine specialists, individuals interested in pharmacology, public health policy and regulatory science.

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

N/A

10. **Additional comments**

Presentation Titles and Durations

Through the Haze: Understanding Nicotine's Impact on Young Brains and the Unique Risks of Synthetic Products

Susan Walley, MD, MHCM

Duration of Presentation in Minutes

20

Clearing the Air: Effective Prevention and Treatment of Youth Nicotine

Dependence

Trish Tulloch, MD MS FRCPC

Duration of Presentation in Minutes

20

Beyond the Smoke: Closing Critical Policy Gaps Presented by Novel Synthetic
Nicotine Products

Charlotte Moore Hepburn, MD

Duration of Presentation in Minutes

35

(134) Proposal ID: 1919951

Pearls of Pediatric GI

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Thomas Ciecierega**

Score: **0**

Participant(s)

Thomas Ciecierega, MD (he/him/his)

Position:

Associate Professor of Pediatrics

Organization:

Weill Cornell Medicine

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Robbyn E. Sockolow, MD (she/her/hers)

Position:

Professor of Clinical Pediatrics Vice Chair for Ambulatory Care Services
- Access and Strategy

Organization:

New York Presbyterian Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Jose M. Garza, MD MS (he/him/his)

Position:

Medical Director Neurogastroenterology and Motility Program at
Children's Healthcare of Atlanta

Organization:

Gi Care for Kids / Children's Healthcare of Atlanta

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Richard J. Noel, MD, PhD

Position:

Professor of Pediatrics

Organization:

Duke University

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Session Description

Session Description

Update on some of the most common GI conditions in pediatrics, including abdominal pain, Inflammatory Bowel Disease (IBD) and feeding issues in infants, including breastfeeding and breastmilk.

Includes information related to diagnosis and management of these conditions, updated guidelines, updated terminology and novel therapeutic options from some of the world's leading experts in the field.

Learning Objectives

1. Upon completion, participants will be able to properly identify, evaluate and manage effectively Inflammatory Bowel Disease, including emerging bio-similar pharmacotherapy.
2. Upon completion, participants will be able to properly identify, evaluate and effectively manage abdominal pain in children.
3. Upon completion, participants will be able to comfortably manage infant feeding issues, learn about emerging benefits of breastmilk and optimize use of breastfeeding.

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

General pediatricians, pediatric gastroenterologists, other pediatric sub specialists including Peds Endo and NICU, pediatric trainees and other pediatric providers including RNs, APNs, IDs, PAs, etc.

3. **Tracks**

Breastfeeding/Human Milk
Gastroenterology/Hepatology
Neonatology
Pediatric Nutrition
Well Newborn

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Please try to avoid other sessions focused on pediatric GI and hepatology.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

All speakers are members of NASPGHAN and experts in the field of pediatric gastroenterology, hepatology and nutrition.

8. **Does this submission involve one or more specialties or disciplines?**

Peds GI, Gen Peds, Peds Endo, Nutrition.

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

N/A

10. **Additional comments**

None

Presentation Titles and Durations

The new dawn of treatment of Inflammatory Bowel Disease: the biosimilars
Robbyn E. Sockolow, MD

Duration of Presentation in Minutes

30

Abdominal pain in children - beyond organic causes; how to approach and treat successfully

Jose M. Garza, MD MS

Duration of Presentation in Minutes

30

Feeding issues in infants; the pros and cons of breastfeeding and breastmilk

Richard J. Noel, MD, PhD

Duration of Presentation in Minutes

30

(135) Proposal ID: 1931632

Shades of Gray: Confronting Clinical Uncertainty

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Mary Woodward**

Score: **0**

Participant(s)

Connie Williams, MD, PhD, FRCPC (she/her/hers)

Position:
Associate Professor

Organization:
McMaster University

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Mary A. Woodward, MD, FRCP(C), MSc (she/her/hers)

Position:
Assistant Professor

Organization:
Hospital for Sick Children

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

Not a member of any of these organizations

Session Description

Session Description

Within healthcare, many levels of uncertainty surround decision-making. As technology advances and the asymmetry of information between patients and providers decreases, navigating uncertainty with patients, parents, and among health care providers challenges clinical care. As a result, uncertainty is also a frequent source of moral distress. Current training predominantly focuses on serious illness conversations yet approaches to acknowledging, mitigating, and communicating uncertainty are lacking in postgraduate and continuing medical education curricula. This interactive session will challenge participants' own concepts of uncertainty, its influence on their clinical practice, and advance arguments based in epistemology, psychology, and ethics, for navigating uncertainty in pediatrics. Through co-facilitation, applying these multiple lenses, this session will incorporate interactive methodologies for large audiences including i) examination of 'types of uncertainty' through thought experimentation, ii) values exploration for participant critical reflection, and iii) application of conceptual frameworks to cases involving uncertainty and shared decision-making.

Learning Objectives

1. Examine types of uncertainty and its impact on clinical practice.
2. Contrast conceptual frameworks addressing uncertainty in the clinical environment.
3. Challenge current language and encourage meaningful communication of uncertainty with families and health care providers.

Scholarly Session Questions

-
1. **Audience Size**
100
 2. **Target audience**
All pediatric health care providers including physicians, nurses, administrators, and allied health.
 3. **Tracks**
Academic and Research Skills
Advocacy
Clinical Bioethics
Critical Care
General Pediatrics
Medical Education
Neonatology
Wellness and Well-being
 4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
 5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
 6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
 7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Speaker selection is based on topic expertise, academic credentials, and clinical experience: Post graduate and academic work in Education, MSc and Ethics, PhD
 8. **Does this submission involve one or more specialties or disciplines?**
Yes relevant to all Pediatric clinical practitioners: includes Critical Care, General Peds, and subspecialties. As well as inter professional and interdisciplinary audience (Ethics, wellness, professional development).
 9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
 10. **Additional comments**

Presentation Titles and Durations

Shades of Gray: Confronting Clinical Uncertainty Co-facilitated interactive session by Connie Williams and Mary Woodward

Connie Williams, MD, PhD, FRCPC

Duration of Presentation in Minutes

75

Shades of Gray: Confronting Clinical Uncertainty Co-facilitated interactive session by Connie Williams and Mary Woodward

Mary A. Woodward, MD, FRCP(C), MSc

Duration of Presentation in Minutes

75

(136) Proposal ID: 1928971

What's New in Congenital and Perinatal Infections?

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Pablo Sanchez**

Score: **0**

Participant(s)

Pablo J. Sanchez, MD

Position:

Professor of Pediatrics

Organization:

Nationwide Children's Hospital, The Ohio State University College of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

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

AAP, APS, SPR, PIDS

Mark R. Schleiss, MD (he/him/his)

Position:

American Legion and Auxiliary Heart Research Foundation Professor

Organization:

UMN Medical School

Role:

Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

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

AAP, APS, SPR, PIDS

Claudia P. Vicetti Miguel, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Medical College of Wisconsin

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Female

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

AAP, PIDS

David Kimberlin, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

University of Alabama School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Session Description

Session Description

This session will focus on a new and emerging congenital infection with Oropouche virus as well as providing up-to-date information on the best breastfeeding practices for HIV-infected mothers and their infants. In addition, new recommendations on treatment of the infant with congenital CMV infection and isolated sensorineural hearing loss will be discussed. These topics are timely and novel, and will provide important information and evidence for contemporary management of these issues.

Learning Objectives

1. 1) Describe the clinical manifestations of maternal and fetal/neonatal Oropouche virus infection
2. Learn and discuss the management of best breastfeeding practices for HIV-infected mothers and their infants
3. Learn the management of infants with congenital CMV infection and isolated sensorineural hearing loss

Scholarly Session Questions

1. **Audience Size**
500
2. **Target audience**
Pediatricians, Neonatologists, Pediatric Infectious Diseases specialists, Newborn Hospitalists.
3. **Tracks**

Breastfeeding/Human Milk
Infectious Diseases
Neonatology
Well Newborn

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
other neonatal infectious diseases and infectious diseases sessions
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Neonatology and Infectious Diseases, Newborn Hospitalists
9. **If your session was presented at another conference, please describe the conference and presentation.**
n/a
10. **Additional comments**

Presentation Titles and Durations

Oropouche Virus: The New Zika?

Pablo J. Sanchez, MD

Duration of Presentation in Minutes

30

Maternal HIV-Infection and Breastfeeding: Why and How?

Claudia P. Vicetti Miguel, MD

Duration of Presentation in Minutes

30

Congenital CMV Infection and Isolated Sensorineural Hearing Loss: To Treat or Not to Treat?

David Kimberlin, MD

Duration of Presentation in Minutes

30

(137) Proposal ID: 1929618

Controversies in the management of Mycoplasma pneumoniae: A Pro/Con Debate

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Lilliam Ambroggio**

Score: **0**

Participant(s)

Lilliam Ambroggio, PhD (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Children's Hospital Colorado

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

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

APA, SPR

Patrick M. Meyer Sauter, MD PhD PD (Privatdozent) (he/him/his)

Position:

MD PhD PD (Privatdozent)

Organization:

Division of Infectious Diseases and Hospital Epidemiology, Children's

Research Center, University Children's Hospital Zurich, University of Zurich, Zurich, Switzerland

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Todd A. Florin, MD (he/him/his)

Position:

Associate Professor of Pediatrics

Organization:

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

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APA, APS, SPR

Jillian Cotter, MD, MSCS (she/her/hers)

Position:

Assistant Professor

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Derek Williams, MD, MPH

Position:

Assoc Professor

Organization:

VUMC

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

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

AAP, APA, APS, SPR

Session Description

Session Description

Mycoplasma pneumoniae (Mp) is the most detected bacterial pathogen causing community-acquired pneumonia (CAP). In the late summer/early fall 2024 a steep increase in Mp CAP was detected within North America and

Europe. Recent reports predicted this outbreak of Mp and estimate that it will continue throughout subsequent respiratory seasons. Even though Mp continues to be a prevalent cause of CAP, controversies around the management still exist. Previous literature indicates that 17% of children get tested for Mp however among the same population, 31% receive macrolides indicating a discrepancy between testing and treatment. Recent studies have also shown limited benefit in macrolide therapy even in children who have tested positive for Mp CAP. Lastly steroids may help reduce the inflammation caused by Mp infection however the use of corticosteroids as adjunctive therapy is variable across sites. This session will consist of experts in the field including an international expert from Europe debating 3 controversies in the management of Mp CAP using a pro/con format: (1) Mp PCR testing is the gold standard and should be routinely performed, (2) macrolide therapy is always recommended as treatment for Mp CAP, and (3) corticosteroids is the most effective adjunctive therapy in the treatment of Mp CAP. The “pro” and “con” sides will each have 10 mins to discuss their side (i.e., 20 mins per topic), and a total of 30 mins of interactive discussion with the audience throughout the debate.

Learning Objectives

1. Determine the utility of performing Mp PCR compared with other forms of testing on all children who are suspected of having Mp CAP.
2. Evaluate the evidence in support of and against the use of macrolide therapy for the treatment of Mp CAP.
3. Determine the effectiveness of adjunctive corticosteroid therapy in the supportive care of Mp CAP.

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

Clinicians and researchers in primary care, emergency medicine, hospital medicine, infectious diseases, and critical care

3. **Tracks**

Community Pediatrics

Critical Care

Emergency Medicine

General Pediatrics

Hospital Medicine

Infectious Diseases

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
No known conflicts.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Dr. Meyer Sauteur is a Pediatric Infectious Diseases physician and Director of Research for Infectious Diseases at the University Children's Hospital of Zurich, University of Zurich. He is a world renowned expert in the diagnosis and treatment of Mycoplasma pneumoniae. He has developed novel diagnostic tests that can differentiate colonization versus infection among children with PCR-detected Mycoplasma pneumoniae. In addition he leads the global ESGMAC Mycoplasma pneumoniae Surveillance Study (<https://www.escmid.org/research-projects/study-groups/study-groups-g-n/mycoplasma-and-chlamydia/esgmac-maps-study>) and a national multi-center randomized controlled non-inferiority trial of placebo versus macrolide antibiotics for Mycoplasma pneumoniae infection in children with CAP (www.mythic-study.ch). His expertise in Mycoplasma pneumoniae as a clinician, a researcher, and from a different global setting, would be invaluable to this debate.
8. **Does this submission involve one or more specialties or disciplines?**
This submission involves physicians and researchers with hospital medicine, emergency medicine, and infectious diseases.
9. **If your session was presented at another conference, please describe the conference and presentation.**
No it has not been presented at another conference.
10. **Additional comments**
None.

Presentation Titles and Durations

Utility of performing Mp diagnostic testing in children with CAP.
Lilliam Ambroggio, PhD

Duration of Presentation in Minutes

20

Limited utility in performing Mp diagnostic testing and evidence against the use of macrolide therapy.

Patrick M. Meyer Sauter, MD PhD PD (Privatdozent)

Duration of Presentation in Minutes

40

Evidence to support the use of macrolide therapy in children with Mp CAP.

Todd A. Florin, MD

Duration of Presentation in Minutes

20

Effectiveness of adjunctive corticosteroid therapy in the supportive care of Mp CAP in children.

Jillian Cotter, MD, MSCS

Duration of Presentation in Minutes

20

Adjunctive corticosteroid treatment should not be recommended in children with CAP

Derek Williams, MD, MPH

Duration of Presentation in Minutes

20

(138) Proposal ID: 1929930

Trauma-Proofing Your Career: A Guide for Women in Medicine

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Andrea Rivera-Sepulveda**

Score: **0**

Participant(s)

Andrea Rivera-Sepulveda, MD, MSc

Position:

Associate Professor of Pediatrics

Organization:

Nemours Children's Hospital

Role:

Submitter

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

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

SPR

Lisa Spector, MD

Position:

Chief, Division of Developmental Behavioral Pediatrics

Organization:

Nemours Children's Hospital - Florida

Role:

Speaker;Chair

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Female

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

AAP

Autumn Hinds, MD (she/her/hers)

Position:

General Pediatrician

Organization:

Nemours Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

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

AAP

Lonna P. Gordon, MD, PharmD, FAAP (she/her/hers)

Position:

Chief Adolescent Medicine

Organization:

Nemours Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Jennifer S. Nelson, MD MS (she/her/hers)

Position:
Professor of Surgery

Organization:
Nemours Children's Hospital, Florida

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Sarah Romero, Pediatric Emergency Medicine

Position:
Sarah Romero, MD

Organization:
Nemours Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Noel Mensah-Bonsu, MD (she/her/hers)

Position:
Assistant Professor

Organization:
Baylor College of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

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

Session Description

Session Description

This session addresses the unique challenges faced by women in medicine, particularly the often unseen emotional and psychological toll of workplace trauma. Obstacles such as gender bias, microaggressions, discrimination, systemic inequities, and burnout contribute to career-related trauma. Our panel discussion will provide insights and practical strategies for women to "trauma-proof" their careers in healthcare. By focusing on resilience-building, mental health awareness, and navigating professional setbacks, this session aims to empower women physicians, researchers, and healthcare professionals to thrive in their demanding fields.

Leveraging principles of narrative medicine, experienced female leaders will share their journeys of overcoming trauma and adversity, offering strategies for

managing stress, setting boundaries, and fostering supportive environment within medical institutions. Participants will learn to recognize signs of burnout early, address systemic barriers, and implement proactive measures to safeguard their well-being.

Additionally, the discussion will highlight the importance of mentorship, peer support, and the power of strong networks in building a trauma-resilient career path. Attendees will walk away with actionable advice on how to not only survive but thrive in their medical careers, transforming their professional journeys into stories of resilience and growth. This session is particularly valuable for women at all stages of their medical careers, from trainees to seasoned professionals, and aims to foster a culture of resilience and support within the field of medicine.

Learning Objectives

1. Analyze key sources of workplace trauma for women in medicine, including microaggressions, gender bias, and harassment, and evaluate how these experiences shape career trajectories.
2. Acquire strategies to build resilience, manage stress, and establish boundaries to safeguard mental and emotional well-being.
3. Harness mentorship, peer support, and narrative medicine to cultivate a trauma-resilient career path and foster inclusive and supportive workplace environments.

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

This session is designed for women at all stages of their medical careers, from trainees to seasoned professionals, particularly those in male-dominated fields, as well as Human Resources professionals, organizational leaders, and mentors who are committed to fostering inclusive and supportive workplaces.

3. **Tracks**

Advocacy
Career Development
Diversity, Equity, and Inclusion
Leadership and Business Training
Mental Health
Wellness and Well-being

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
A workshop has been submitted with the some of the authors to further address the topic.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Topics involve Advocacy, Career Development, Diversity, Equity and Inclusion, Mental Health, Wellness and Well-Being and Leadership and Business Training.
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

A brief glimpse into women in medicine and workplace trauma
Lisa Spector, MD

Duration of Presentation in Minutes

5

Creating a successful roadmap for transition early in your career
Autumn Hinds, MD

Duration of Presentation in Minutes

13

Centering during collective patient-provider grief
Lonna P. Gordon, MD, PharmD, FAAP

Duration of Presentation in Minutes

13

Navigating highly male spaces as a female academic surgeon
Jennifer S. Nelson, MD MS

Duration of Presentation in Minutes

13

Could it happen to you?

Sarah Romero, Pediatric Emergency Medicine

Duration of Presentation in Minutes

13

A journey of transition, family and innovation

Noel Mensah-Bonsu, MD

Duration of Presentation in Minutes

13

(139) Proposal ID: 1922477

Navigating the Edge: Pediatric Health Challenges in Extreme Activities and Environments

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Ann Marshburn**

Score: **0**

Participant(s)

Nicolas Heft, MD

Position:

Director - Space Medicine Fellowship

Organization:

McGovern Medical School at the University of Texas Health Science Center at Houston

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

Not a member of any of these organizations

Surya Mundluru, MD, MBA

Position:

Assistant Professor Orthopedic Surgery

Organization:

The University of Texas Health Science Center at San Antonio Joe R. and Teresa Lozano Long School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

Not a member of any of these organizations

Robert Lapus, MD (he/him/his)

Position:

Associate Professor of Emergency Medicine

Organization:

McGovern Medical School at UTHealth Houston

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

Not a member of any of these organizations

Ann Marshburn, MD

Position:

Associate Professor, Pediatric Hospital Medicine

Organization:

UTHealth Science Center Houston

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

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

AAP

Session Description

Session Description

It is human nature to push the limits: to climb higher, dive deeper, and explore further. We celebrate these accomplishments and laud the adventurers behind them, yet few may realize that these feats are not limited to adults. With a growing number of adolescents and young adults engaging in extreme activities such as mountaineering, oceaneering, extreme SCUBA diving, and even the possibility of suborbital spaceflight, we must ask: What unique risks do these extreme environments pose to pediatric individuals?

This session will explore the distinct challenges that young individuals face in extreme environments. As these activities become more popular, pediatricians are increasingly likely to care for young patients exposed to such conditions. We will discuss the effects of hypoxia, extreme endurance, increased atmospheric pressure, and space environments on the developing body.

The physical conditioning required for these extreme activities also demands careful consideration, particularly how it may impact growth and long-term health. Additionally, we will address how to manage complications and injuries specific to these pursuits.

The session will conclude with an exploration of the ethical considerations surrounding pediatric participation in extreme activities. We will focus on the distinction between consent and assent, examining how minors may struggle to comprehend the potential long-term risks. By comparing and contrasting prior examples from both medical and adventure contexts. This ethical reflection will

help guide future decisions on how, or if, young people should be permitted to take part in such high-risk endeavors.

Learning Objectives

1. Describe key physiologic changes that are seen in individuals who engage in extreme environments such as mountaineering, oceaneering, extreme diving, and spaceflight.
2. Describe in what ways the management of physical conditioning for and complications of extreme environment activities uniquely affects pediatric individuals.
3. Outline the ethical considerations of pediatric participation in extreme activities, differentiating between consent and assent, and applying historical examples to guide future decision-making.

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

The target audience for this panel discussion includes pediatricians, pediatric specialists, healthcare providers, and medical researchers with an interest in adolescent health, sports medicine, and ethics. It will also appeal to professionals involved in pediatric critical care, developmental medicine, and those addressing the physical and psychological impacts of extreme environments on children and adolescents. Additionally, bioethicists and healthcare administrators who are involved in policy development and the management of consent and assent in minors will find the discussion relevant to their work.

3. **Tracks**

Adolescent Medicine
Clinical Bioethics
Critical Care
Developmental and Behavioral Pediatrics
Emergency Medicine
General Pediatrics
Hospital Medicine
Injury Prevention

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

No

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr. Nicholas Heft is a space medicine expert, and the section director of our institution's Space Medicine Section of the Department of Emergency Medicine. While he is not a pediatric physician, his expertise on the topic of space and extreme medicine is crucial to the discussion.

Drs. Lapus and Munduluru are not members, but are subspecialty trained in Pediatric Emergency Medicine and Pediatric Orthopedic Surgery, respectively. Their expertise and participation are crucial to the presentation, as they provide unique perspectives and guidance.

8. **Does this submission involve one or more specialties or disciplines?**

Yes: Pediatric Emergency Medicine, Pediatric Orthopedic Surgery, Space Medicine, Pediatric Hospital Medicine

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

10. **Additional comments**

Presentation Titles and Durations

Physiologic stress in an extreme environment: How does the body adapt to novel and extreme conditions?

Nicolas Heft, MD

Duration of Presentation in Minutes

20

Prevention of complications that occur in extreme environments: Unique challenges in pediatric adventurers.

Surya Mundluru, MD, MBA

Duration of Presentation in Minutes

20

Management of complications that occur in extreme environments: Unique challenges in pediatric adventurers.

Robert Lapus, MD

Duration of Presentation in Minutes

20

Ethical boundaries: Navigating consent and assent in pediatric participation in extreme activities

Ann Marshburn, MD

Duration of Presentation in Minutes

30

(140) Proposal ID: 1928976

Long COVID in Children and Adolescents: Emerging Insights and Clinical Updates from RECOVER

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Rachel Gross**

Score: **0**

Participant(s)

Rachel S. Gross, MD MS (she/her/hers)

Position:

Associate Professor of Pediatrics and Population Health, RECOVER
Director of Pediatric Research

Organization:

New York University Grossman School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA

Kyung Rhee, MD, MSc, MA (she/her/hers)

Position:

Professor and Vice Chair of Equity, Diversity, and Inclusion

Organization:

UC San Diego School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, APA

Lawrence C. Kleinman, MD, MPH (he/him/his)

Position:

Professor, Vice Chair, Director PopQulS Division

Organization:

Rutgers RWJ Medical School

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, APA, APS, SPR

Melissa Stockwell, MD MPH (she/her/hers)

Position:

Chief, Division of Child and Adolescent Health, Prof of Pediatrics and Population and Family Health

Organization:

Columbia University Irving Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA, APS, SPR

Kelan Tantisira, MD. MPH

Position:

Professor of Pediatrics

Organization:

University of California, San Diego School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

SPR

Sindhu Mohandas, MD, MRCPCH (she/her/hers)

Position:

Assistant Professor, Division of Infectious Diseases

Organization:

Children's Hospital Los Angeles

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
Asian

Gender
Female

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

Session Description

Session Description

Investigators from RECOVER (Researching COVID to Enhance Recovery), an NIH-funded national multi-site observational study, will present findings to date about the long-term effects of COVID in children. RECOVER includes >100 sites across the US, and a broadly diverse sample of ~15,000 caregiver-child dyads between birth and 25 years old, with ~5,000 being followed longitudinally for up to 4 years. Participants were recruited from clinical and community settings and provide patient-reported data (surveys), direct assessments (e.g., neurocognitive, anthropometric), and biospecimen collection. The RECOVER cohort study fosters current and future research across multiple scientific domains through the life course.

This session will: 1) describe what is known about Long COVID in children, why it is important, and how RECOVER is addressing the limitations of prior COVID-related studies; 2) present the pediatric RECOVER study and an overview of its current data resources; and 3) describe RECOVER findings in the context of what has been previously described, including:

- a) What is Long COVID in children and how do the symptoms vary by age?
- b) What are the potential social and medical risk and resiliency factors associated with developing Long COVID?
- c) What is known about the effects of Long COVID on child physical health, mental health, and development?
- d) What can we say about the underlying mechanisms and pathobiology contributing to the development of Long COVID that could serve as therapeutic targets of intervention?

e) What is the current state of the evidence regarding the management of children and adolescents with Long COVID?

Learning Objectives

1. Describe the current evidence about Long COVID in children, including symptoms, prevalence, associated risk/resiliency factors, and long-term effects, integrating new RECOVER findings with current literature.
2. Provide a framework that integrates hypothesized underlying mechanisms of Long COVID and share data that could help uncover therapeutic targets of intervention for clinical trials.
3. Describe current treatments, future directions and clinical trials available to children, the evidence for their use, and potential approaches to prevent development of Long COVID.

Scholarly Session Questions

1. **Audience Size**

500

2. **Target audience**

The target audience is broad, including all levels of training (e.g., students, residents, fellows, early, mid and senior career faculty/clinicians, as well as allied professionals). This session also targets general and community pediatrics, as well as all subspecialists.

3. **Tracks**

Cardiology

Children with Chronic Conditions

COVID-19

Developmental and Behavioral Pediatrics

General Pediatrics

Health Equity/Social Determinants of Health

Infectious Diseases

Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

This session should not overlap with the APA or AAP presidential plenaries.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
This session is multidisciplinary, involving general pediatrics, adolescent medicine, hospital medicine, population health, infectious disease, pulmonary medicine and clinical and systems biology researchers.
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**
Most research characterizing Long COVID has focused on adults, leading to the misperception that Long COVID in children is rare, or that it presents similarly to adults. This may lead clinicians to miss symptoms or misdiagnose children. The limited research focused on the pediatric population has led to a major gaps in our understanding of how Long COVID affects children—making the RECOVER study, a critical key step forward in pediatric Long COVID research.

Presentation Titles and Durations

What is Long COVID in children and how does its presentation vary by age group?

Rachel S. Gross, MD MS

Duration of Presentation in Minutes

30

To what extent is Long Covid associated with social determinants of health and how does it vary by age?

Kyung Rhee, MD, MSc, MA

Duration of Presentation in Minutes

10

What are the relationships between Long Covid and a spectrum of clinical factors and how do they vary by age?

Lawrence C. Kleinman, MD, MPH

Duration of Presentation in Minutes

10

How does Long COVID affect child health and development across different age groups and what are the mechanisms of impact?

Melissa Stockwell, MD MPH

Duration of Presentation in Minutes

15

What do we know about the underlying pathobiology of Long COVID and how can this research guide development of treatments?

Kelan Tantisira, MD. MPH

Duration of Presentation in Minutes

15

What is the current state of treating children with Long COVID and can it be prevented?

Sindhu Mohandas, MD, MRCPCH

Duration of Presentation in Minutes

10

(141) Proposal ID: 1927975

Hot Topics in Pediatric Vaccination

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Joshua Wolf**

Score: **0**

Participant(s)

Joshua Wolf, MBBS, PhD, FRACP (he/him/his)

Position:
Member

Organization:
St. Jude Children's Research Hospital

Role:

Submitter

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

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

Elisa Margolis, MD PhD (she/her/hers)

Position:
Associate Member

Organization:
St. Jude Children's Research Hospital

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

PIDS

Sean T. O'Leary, MD, MPH (he/him/his)

Position:

Professor of Pediatrics

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, PIDS

HELEN Y. CHU, MD MPH (she/her/hers)

Position:

Professor

Organization:

University of Washington School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
Asian

Gender
Female

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

Claudia L. Gaviria Agudelo, MD (she/her/hers)

Position:
Pediatric Infectious Diseases Specialist

Organization:
University of South Florida

Role:

Speaker;Chair

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

This session will provide pediatricians, trainees and subspecialists an insight into the hottest topics in pediatric vaccination, with an emphasis on controversies and new evidence to guide counselling and decision-making.

The session will begin by outlining the history of the advisory committee on immunization practices and its current function. Attendees will learn how decisions are made about recommendations for common childhood vaccines, including those for measles, mumps, rubella (MMR), and whooping cough, emphasizing the deliberations behind these recommendations.

Although most children and adults in the USA have now received at least one COVID-19 vaccine, community awareness of the research and rigorous testing behind the updated vaccines is very limited. The second session will offer insights into the immune response generated by these vaccines and the available evidence behind these newer vaccines.

In the third seminar, real-world case scenarios will illustrate common situations facing healthcare providers when providing vaccinations for special populations, including managing inadvertent administration of live vaccines in immunocompromised hosts, and additional vaccines for high-risk children.

By the end of the session, attendees will have new perspectives on the vaccine landscape, and expertise in advocating for immunization and public health initiatives.

Learning Objectives

1. Identify the roles and deliberative approaches of key decision-making organizations contributing to pediatric vaccination schedules
2. Differentiate between available pediatric COVID-19 vaccines, focusing on mechanism of action, efficacy, and approved age groups, to provide advice and address common questions and concerns
3. Understand and implement current guidelines for vaccine administration in immunocompromised children

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
General pediatrics, hospitalist medicine, adolescent medicine, pulmonology, hematology/oncology, immunology, infectious diseases, all subspecialties, medical students, residents, fellows
3. **Tracks**
Adolescent Medicine
Allergy, Immunology and Rheumatology
Children with Chronic Conditions
COVID-19
General Pediatrics
Hematology/Oncology
Hospital Medicine
Immunizations/Delivery

Infectious Diseases
Pulmonology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
General pediatrics, infectious diseases
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Who decides the vaccine schedule, how did we get here, and where are we going?

Sean T. O'Leary, MD, MPH

Duration of Presentation in Minutes

30

Advising patients and families about the newest COVID-19 vaccines

HELEN Y. CHU, MD MPH

Duration of Presentation in Minutes

30

Adventures and misadventures in the world of special host vaccination

Claudia L. Gaviria Agudelo, MD

Duration of Presentation in Minutes

30

(142) Proposal ID: 1930435

Microbiome and Infection

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Gregory Priebe**

Score: **0**

Participant(s)

Seth Rakoff-Nahoum, MD PhD

Position:

Associate Professor

Organization:

Boston Children's Hospital

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

PIDS

Andrew Y. Koh, MD (he/him/his)

Position:

Professor of Pediatrics, Microbiology, and Harold C. Simmons
Comprehensive Cancer Center

Organization:

University of Texas Southwestern Medical School

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

SPR

Gregory P. Priebe, MD (he/him/his)

Position:

Associate Professor

Organization:

Boston Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

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

AAP, SPR

Session Description

Session Description

Perturbations of the microbiome occur frequently in hospitalized newborns and children, particularly in cancer and stem cell transplant patients. This session will explore the impacts of these perturbations on health and disease, with

focus on bacterial and fungal infections. We will also highlight the intraspecies genomic diversity of bacteria during infection and its impact on antibiotic resistance and pathogenicity.

Learning Objectives

1. Highlight microbiome features in health and disease in healthy and hospitalized children.
2. Understand how the GI tract microbiome modulates susceptibility to bacteremia and fungemia in cancer and stem cell transplant patients.
3. Describe the intraspecies bacterial genomic diversity in both acute and chronic infections and its impacts on antibiotic resistance and pathogenicity.

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
Physicians, nurses, APPs; specialists include oncologists, neonatologists, pulmonologists, gastroenterologists, pediatric intensivists, infectious diseases specialists; infection preventionists
3. **Tracks**
Basic Science
Critical Care
Hematology/Oncology
Infectious Diseases
Neonatology
Pulmonology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Saturday, April 26
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Gregory Priebe has also submitted a Hot Topics proposal called "Epidemiology and Prevention of Healthcare-Associated Infections in Newborns and Children." Please avoid time conflicts if both are approved.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes. Should be of interest to oncologists, neonatologists, pulmonologists, gastroenterologists, pediatric intensivists, and infectious diseases specialists
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Diet-Microbiome Interactions in Host Defense

Seth Rakoff-Nahoum, MD PhD

Duration of Presentation in Minutes

30

Role of the Gut Microbiome in Modulating Bacteremia/fungemia in Cancer and Stem Cell Transplant Patients

Andrew Y. Koh, MD

Duration of Presentation in Minutes

30

Bacterial Whole-Genome Sequencing to Explore Antibiotic Resistance and Pathogenicity During Acute And Chronic Infections

Gregory P. Priebe, MD

Duration of Presentation in Minutes

30

(143) Proposal ID: 1914561

Beyond the Trauma: Advancing Recovery in Pediatric Traumatic Brain Injury Through Collaborative Care

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Alexandra Schaller**

Score: **0**

Participant(s)

Laurel J. Metzler, MD, FAAP (she/her/hers)

Position:

Assistant Professor, Department of Pediatrics, Division of Pediatric Critical Care

Organization:

ULPS - Pediatric Critical Care

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Alexandra L. Schaller, DO (she/her/hers)

Position:

Assistant Professor, Department of Pediatrics, Division of Pediatric Critical Care, FAAP

Organization:
Le Bonheur Children's Hospital, St Jude Children's Research Hospital

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Regan Williams, MD MS (she/her/hers)

Position:
Associate Professor, Department of Surgery and Pediatrics

Organization:
Le Bonheur Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

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

Session Description

Session Description

Pediatric traumatic brain injury (TBI) requires coordinated multi-specialty management over an extended period, spanning from critical illness to outpatient care. Pediatric TBI guidelines have offered management guidance for the acute phase of critical care resuscitation but as understanding of neurocognitive outcomes grows a more comprehensive approach is crucial. This session will explore other high-impact points along the continuum where interventions may contribute to improved outcomes. Each session will explore medical and rehabilitative strategies aimed at enhancing recovery. The sessions will be divided by time points in care, including ICU management, post-acute inpatient management, and outpatient support. In addition, these sessions will offer ways to incorporate management approaches into routine patient care.

Dr. Laurel Metzler will discuss ICU management strategies that support early rehabilitation including early mobility, nutrition, and tracheostomy. This discussion will also explore approaches to ICU liberation, proactive nursing, and therapist engagement. Dr. Alexandra Schaller will discuss post-acute inpatient management, emphasizing understanding of current prognostication data, expected patient trajectory, and pharmaceutical and environmental interventions for arousal, agitation/aggression, sleep, cognitive impairment, and depression. Dr. Regan Williams will discuss the effect of trauma on communities with attention to the resources and support necessary for comprehensive outpatient prevention, rehabilitation, and community outreach interventions. These sessions offer goal directed approaches to enhancing Pediatric TBI care.

Learning Objectives

1. Understand the Role of Early Mobility in Pediatric TBI Recovery: Participants will learn how early rehabilitation interventions impact recovery outcomes
2. Recognize Key Components of Post-Acute Management in Pediatric TBI: Attendees will gain knowledge about patient recovery expectations and strategies for management.
3. Examine the Broader Impact of Pediatric TBI on Communities and Systems: Learners will explore how pediatric TBI affects communities and the importance of trauma-informed outreach

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**

General pediatricians, Pediatric Hospitalists, Pediatric Critical Care, Pediatric Surgeons, Trainees, Therapists, PM&R, pulmonology

3. **Tracks**

Advocacy
Community Pediatrics
Critical Care
General Pediatrics
Hospital Medicine
Neurology
Pediatric Nutrition
Pharmacology and Therapeutics
Pulmonology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

No conflicts

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

Yes there will be a variety of topics included in discussing Pediatric TBI including nutrition, respiratory care with focus on early tracheostomy, early mobility, general pediatric care, post traumatic neurological assessment, public health, community outreach, and ongoing management of sequelae of Pediatric TBI.

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

10. **Additional comments**

Presentation Titles and Durations

Beyond the Trauma: Early Mobility in Pediatric TBI
Laurel J. Metzler, MD, FAAP

Duration of Presentation in Minutes

30

Beyond the Trauma: Post- Acute Inpatient TBI Care
Alexandra L. Schaller, DO

Duration of Presentation in Minutes

30

Beyond the Trauma: Pediatric TBI and Community Outreach
Regan Williams, MD MS

Duration of Presentation in Minutes

30

(144) Proposal ID: 1908322

Children with Severe Neurologic Impairment: A Framework for Assessment and Initial Management of Chronic Pain

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Chien-Rong Chen**

Score: **0**

Participant(s)

Chien-Rong Chen, DO (he/him/his)

Position:

Assistant Professor

Organization:

Harbor-UCLA Medical Center

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

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

AAP

Tamara D. Simon, MD, MSPH (she/her/hers)

Position:

Professor of Pediatrics (Clinical Scholar)

Organization:

CHLA

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA, APS, SPR

Julie Hauer, MD (she/her/hers)

Position:

Assistant Professor

Organization:

Boston Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP

Melissa Cowell, MD MPH (she/her/hers)

Position:

Attending Hospitalist

Organization:

Children's Hospital Los Angeles

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian, White

Gender
Female

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

Sarah Luthy, MD MSCS

Position:
Assistant Professor

Organization:
Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

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

Session Description

Session Description

While the number of children with severe neurologic impairment (SNI) has steadily grown with advances in pediatric care, so has the proportion of hospital admissions and charges attributable to this patient population. Both families and providers have rated symptom management, including pain control, as a top priority before other considerations about goals of care may be properly addressed. Neuro-pain is pain caused by a dysfunctional or sensitized nervous system that can affect many other body systems, leading to chronic pain such

as with visceral hyperalgesia, paroxysmal sympathetic hyperactivity, dystonia, etc. Uncontrolled chronic pain and acute exacerbations are one of the most common reasons for unplanned care visits across all settings; however, there are currently no specific diagnostic tests, clinical criteria, or standardized work up for its management. The lack of consensus and the nonverbal nature of this patient population furthermore makes them particularly vulnerable to health disparities and poor outcomes. The presentation lays out common signs, a differential diagnosis, and a framework for the assessment and management of neuro-pain in children with SNI. The presentation will culminate with a Q&A with topic experts including one of the authors of the AAP Clinical Report on, "Pain Assessment and Treatment in Children with Significant Impairment of the Central Nervous System."

Learning Objectives

1. Define common features of neuro-pain in children with severe neurologic impairment
2. Implement nonpharmacologic and pharmacologic guidelines for management of chronic neuro-pain in children with severe neurologic impairment
3. Develop interventional language strategies into your framework of discussing care with families of children with severe neurologic impairment

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
General Pediatrics, Pediatric Hospital Medicine, Palliative Care, Neurology, Complex Care, Pain Management
Medical Students, Residents, Fellows, Attendings, APPs, Nurses
3. **Tracks**
Children with Chronic Conditions
Community Pediatrics
Critical Care
General Pediatrics
Hospital Medicine
Neurology
Palliative Care
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Topic is Children with Medical Complexity involving General Pediatrics, Pediatric Hospital Medicine, Palliative Care, Neurology, Complex Care, Pain Management
9. **If your session was presented at another conference, please describe the conference and presentation.**
A smaller version of this session was presented at Pediatric Hospital Medicine 2024 in Minneapolis, Minnesota. The session was accepted and presented as a mini-plenary session involving a Q&A to an audience of about 80-100.
10. **Additional comments**

Presentation Titles and Durations

Children with Severe Neurologic Impairment: A Framework for Assessment and Initial Management of Chronic Pain

Tamara D. Simon, MD, MSPH

Duration of Presentation in Minutes

15

Children with Severe Neurologic Impairment: A Framework for Assessment and Initial Management of Chronic Pain

Julie Hauer, MD

Duration of Presentation in Minutes

15

Children with Severe Neurologic Impairment: A Framework for Assessment and Initial Management of Chronic Pain

Melissa Cowell, MD MPH

Duration of Presentation in Minutes

15

Children with Severe Neurologic Impairment: A Framework for Assessment
and Initial Management of Chronic Pain

Sarah Luthy, MD MSCS

Duration of Presentation in Minutes

15

(145) Proposal ID: 1932508

Tackling severe viral infections in young infants: The latest in diagnosis and treatment

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Leena Mithal**

Score: **0**

Participant(s)

Leena B. Mithal, MD MSCI (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

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

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

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

AAP, SPR, PIDS

Cristina Tomatis Souverbielle, MD (she/her/hers)

Position:

assistant professor

Organization:

Nationwide Children's Hospital

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

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

AAP, SPR, PIDS

Pablo J. Sanchez, MD

Position:

Professor of Pediatrics

Organization:

Nationwide Children's Hospital, The Ohio State University College of
Medicine

Role:

Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

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

AAP, APS, SPR, PIDS

Session Description

Session Description

This session highlights important viral pathogens that can cause severe, disseminated infection in neonates and young infants. An overarching goal is to

ensure attendees understand when to consider important non-herpes viral causes of neonatal febrile illness, sepsis, and meningoencephalitis. We will discuss the clinical features and hallmark diagnostic considerations for enterovirus, parechovirus, and adenovirus infections in young infants. Clinicians will be reminded about the nomenclature and types of non-polio enteroviruses; the unique features of severe enteroviral illness including myocarditis, hepatitis, encephalitis; and treatment options including IVIG and pocapavir. Attendees will learn about neonatal parechovirus epidemiology, unique central nervous system infection with absence of pleocytosis in cerebrospinal fluid, MRI findings, and prognosis. Finally, we will discuss postnatal severe adenovirus infection, outbreaks in neonatal units, treatment options including cidofovir. We hope that this session will ensure that providers consider these pathogens in appropriate clinical setting, know recommended diagnostics, and the latest management strategies with understanding of the current level of evidence to inform care.

Learning Objectives

1. Understand the epidemiology, potential morbidity, and management of severe, disseminated enterovirus infection in neonates.
2. Recognize key clinical features and prognosis of neonatal human parechovirus central nervous system infection.
3. Identify diagnostic and treatment options for severe neonatal adenovirus infection.

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
Neonatal and Pediatrics clinicians (including Neonatologists, Hospital Based Medicine, and General Pediatricians who care for patients in the hospital if readmitted with neonatal sepsis/fever) and Infectious Diseases specialists.
3. **Tracks**
General Pediatrics
Hospital Medicine
Infectious Diseases
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Neonatal Sepsis Club, Neonatal ID/Immunology abstract sessions, Symposia related to congenital infections
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Topic is severe neonatal viral infections involving Infectious Diseases, Neonatology, Hospital Based Medicine and General Pediatrics.
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A - new session
10. **Additional comments**

Presentation Titles and Durations

Severe neonatal enterovirus infections: keep in mind and take it to heart
Leena B. Mithal, MD MSCI

Duration of Presentation in Minutes

30

Parechovirus meningoencephalitis in young infants: it (white) matters
Cristina Tomatis Souverbielle, MD

Duration of Presentation in Minutes

25

Adenoviral sepsis: therapeutic options for severe illness
Pablo J. Sanchez, MD

Duration of Presentation in Minutes

20

(146) Proposal ID: 1933044

Navigating the Evidence: Youth Suicide Risk Screening in Focus

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Cori Green**

Score: **0**

Participant(s)

Cori Green, MD, MSc (she/her/hers)

Position:

Associate Professor of Clinical Pediatrics

Organization:

NewYork-Presbyterian Komansky Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

AAP, APA, SPR

Maria H. Rahmandar, MD (she/her/hers)

Position:

Medical Director, Substance Use & Prevention Program

Organization:

Lurie Children's Hospital of Chicago

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

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

AAP

JoAnna Leyenaar, MD PhD MPH (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Dartmouth Health

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

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

SPR

Alexandra Huttie, MD (she/her/hers)

Position:

Instructor in Pediatrics

Organization:

Weill Cornell Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

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

John Parkhurst, PhD (he/him/his)

Position:
Associate Professor of Psychiatry and Behavioral Sciences
Northwestern University's Feinberg School

Organization:
Ann & Robert H. Lurie Children's Hospital of Chicago

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
APA

Session Description

Session Description

Suicide is the second leading cause of death among adolescents, highlighting the urgent need for effective risk identification. This symposium will bring together clinicians and researchers to discuss hot topics around suicide risk identification in pediatric settings.

Conflicting practice statements by the United States Preventive Task Force (USPTF) and the American Academy of Pediatrics (AAP) create challenges for pediatricians regarding who, when, and how to screen for suicide risk. Dr.

Green will introduce differences in these practice guidelines, bringing attention to the relative lack of evidence that informed USPSTF's recommendations. Dr. Rahmandar will discuss the AAP's 2023 policy statement, advocating for universal screening using standardized suicide-specific tools.

Studies have demonstrated that screening for depression may not identify adolescents at increased risk of suicide, yet recent national survey data suggests this method is most often utilized by pediatricians. Dr. Leyenaar will share new results from a national survey of >5000 general and subspecialty pediatricians on current practices around suicide risk screening. Dr. Huttell will describe suicide risk detection strategies, including the use of sequential assessment tools to help reduce implementation barriers reported by pediatricians and enhance detection in pediatric primary care.

Pediatric health care systems are increasingly engaging in universal screening for suicide across medical settings, but responses to positive screening results are variable. Dr. Parkhurst will describe how one hospital system implemented universal prevention activities, including screening, assessment, and interventions. He will then facilitate an engaging discussion with the audience on these critical topics around suicide prevention practices.

Learning Objectives

1. Review Evidence: Examine the research that shaped the recommendations from both the USPSTF and the AAP.
2. Discuss Implementation Challenges: Discuss current pediatricians' practices, facilitators, and barriers to effective suicide risk screening, including the selection of evidence-based screening tools.
3. Elicit Audience Engagement: Facilitate a discussion on the advantages and disadvantages of suicide risk screening and explore practical strategies for implementation

Scholarly Session Questions

1. **Audience Size**

30

2. **Target audience**

General pediatricians attendings and trainees

Subspecialty pediatricians and trainees

Adolescent medicine attendings and trainees

health service researchers

Policy workers

3. **Tracks**

Adolescent Medicine
General Pediatrics
Health Services Research
Mental Health
Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Yes, Cori Green is on a submission for 2 other Hot Topics entitled 1) The Pediatric Behavioral Mental Health Epidemic: What's Happening in PediatricSubspecialty Care? 2) Building a Mental Health Experience to Meet ACGME Requirements while Working Towards Competence for Your Trainees and Faculty Alike
JoAnna Leyenaar will also have a conflict with 1) The Pediatric Behavioral Mental Health Epidemic: What's Happening in PediatricSubspecialty Care?
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes, General Pediatrics, Psychology, Adolescent Medicine
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Introduction to Hot Topics around Suicide Risk Screening and the USPTF
Recommendations

Cori Green, MD, MSc

Duration of Presentation in Minutes

12

13 reasons why to screen for suicide: Putting the AAP guidance into practice
Maria H. Rahmandar, MD

Duration of Presentation in Minutes

15

Screening for suicide risk: a national survey of general pediatricians and subspecialists

JoAnna Leyenaar, MD PhD MPH

Duration of Presentation in Minutes

10

Beyond Screening: Moving the Needle in Youth Suicide Prevention

Alexandra Huttler, MD

Duration of Presentation in Minutes

15

Moving systems: Adopting suicide screening across a pediatric hospital

John Parkhurst, PhD

Duration of Presentation in Minutes

15

(147) Proposal ID: 1928974

Genomics and multiomics in neonatal care

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Pankaj Agrawal**

Score: **0**

Participant(s)

Pankaj B. Agrawal, MD, MMSC

Position:

Chief of Neonatology and Professor of Pediatrics and Genetics

Organization:

University of Miami Leonard M. Miller School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS, SPR

Vineet Bhandari, MD DM (he/him/his)

Position:

Division Head of Neonatology

Organization:

The Children's Regional Hospital at Cooper

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Misty Good, MD, MS (she/her/hers)

Position:

Division Chief, Neonatal-Perinatal Medicine

Organization:

University of North Carolina at Chapel Hill School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Namasivayam Ambalavanan, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

University of Alabama School of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Session Description

Session Description

Advances in genomics and multiomics are changing the way we understand diseases better at the molecular level thereby improving diagnosis and leading the way to novel therapies. The multiomics approaches include genomics, transcriptomics, proteomics, epigenomics, metabolomics, and similar “-omic” approaches. These tools and their integration can be applied in neonatology whereby understanding of rare and prematurity-related neonatal disorders such as bronchopulmonary dysplasia, necrotizing enterocolitis can be advanced leading to novel insights into their pathogenesis and future therapies.

Learning Objectives

1. Basic tools of genomics and multiomics and their integration
2. Utilization of “omic” approaches in rare diseases presenting in neonates
3. How Understanding of BPD and NEC has changed after the utilization of those approaches

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
neonatologists, basic scientists, geneticists
3. **Tracks**
Basic Science
Genomics/Epigenomics
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

session on genomics/epigenomics

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

Neonatology, genomics, pulmonary, gastrointestinal

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

Presentation Titles and Durations

Multiomics tools in rare genetic diseases

Pankaj B. Agrawal, MD, MMSC

Duration of Presentation in Minutes

25

Multiomic approaches in BPD

Vineet Bhandari, MD DM

Duration of Presentation in Minutes

25

Multiomic approaches in NEC

Misty Good, MD, MS

Duration of Presentation in Minutes

25

enomics, Proteomics, and other multiomic tools and examples of their integration in neonatal care

Namasivayam Ambalavanan, MD

Duration of Presentation in Minutes

25

(148) Proposal ID: 1925290

Screening for food insecurity across clinical settings: current evidence, gaps, and future directions

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Colin Orr**

Score: **0**

Participant(s)

Colin J. Orr, MD, MPH (he/him/his)

Position:

Assistant Professor

Organization:

Monroe Carell Jr. Children's Hospital at Vanderbilt

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Kimberly Montez, MD, MPH, FAAP (she/her/ella)

Position:

Associate Professor; Vice Chair, JEDI-Peds; Associate Dean, Justice and Belonging

Organization:

Wake Forest School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, SPR

Cristin Q. Fritz, MD, MPH (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Vanderbilt University Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Danielle L. Cullen, MD, MPH, MSHP (she/her/hers)

Position:

Assistant Professor

Organization:

Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Arvin Garg, MD, MPH

Position:
Professor of Pediatrics and Vice Chair of Health Equity

Organization:
UMass Memorial Children's Medical Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, APS

Session Description

Session Description

Background: Food insecurity (FI) is a social determinant of health (SDoH) that negatively impacts the physical, mental, and developmental health of children. In recognition of this common threat to children, the American Academy of Pediatrics (AAP) published the policy statement “Promoting Food Security for all Children” highlighting the essential role pediatricians play in screening and intervening on FI through connection to local, community, or federal nutrition resources. Since then, screening and intervening for FI has become

increasingly common in pediatrics and across multiple clinical settings (outpatient, inpatient, and emergency department), yet evidence-based best practices for coordinating efforts across care settings are lacking.

Objective: 1) Review the current science of FI screening and referral in the outpatient, inpatient, and emergency department settings; 2) Discuss the barriers, facilitators, and privacy considerations of sharing SDoH information across clinical settings; and 3) Review policy barriers and facilitators for food insecurity screening and referral across health systems

Methods: This hot-topic symposium will describe the current science of FI screening and intervening across the outpatient, inpatient, and emergency room. The first speaker will provide an overview of the effects of food insecurity on pediatric health. The next speakers (2-4) will focus on the current evidence, gaps, and future directions of FI screening and intervening in the outpatient, inpatient, and emergency department settings. The closing speaker will discuss implications of FI screening at the health system and policy level. A 15-minute Q&A will conclude the session

Learning Objectives

1. 1) List three detrimental effects of food insecurity on child health
2. 2) Describe the current science of screening and referral for FI in 3 different clinical settings
3. 3) Highlight opportunities and research needs for coordination across care settings

Scholarly Session Questions

1. **Audience Size**

60

2. **Target audience**

Individuals who are interested in the science of screening and intervening for the social determinants of health across multiple clinical settings

3. **Tracks**

Emergency Medicine
General Pediatrics
Health Equity/Social Determinants of Health
Health Services Research
Hospital Medicine

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

N/A

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

The has expertise in pediatric hospital medicine, general pediatrics, pediatric emergency medicine, and public health

9. **If your session was presented at another conference, please describe the conference and presentation.**

10. **Additional comments**

Presentation Titles and Durations

Overview of food insecurity and pediatric health

Colin J. Orr, MD, MPH

Duration of Presentation in Minutes

10

What is known about screening and intervening for food insecurity in the outpatient setting

Kimberly Montez, MD, MPH, FAAP

Duration of Presentation in Minutes

15

What is known about food insecurity screening and intervening in the inpatient setting?

Cristin Q. Fritz, MD, MPH

Duration of Presentation in Minutes

15

What is known about food insecurity screening and intervening in the emergency room?

Danielle L. Cullen, MD, MPH, MSHP

Duration of Presentation in Minutes

15

Screening and intervening for food insecurity: implications for policy and health systems

Arvin Garg, MD, MPH

Duration of Presentation in Minutes

15

(149) Proposal ID: 1929023

What's New in Vaccine Safety

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Michael Smith**

Score: **0**

Participant(s)

Michael Smith, MD, MSCE (he/him/his)

Position:

Professor of Pediatrics

Organization:

Duke University School of Medicine

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR, PIDS

Buddy Creech, MD, MPH

Position:

Edie Carell Johnson Chair and Professor

Organization:

Vanderbilt University Medical Center

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS, PIDS

Melissa Stockwell, MD MPH (she/her/hers)

Position:

Chief, Division of Child and Adolescent Health, Prof of Pediatrics and Population and Family Health

Organization:

Columbia University Irving Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS, SPR

Elizabeth D. Barnett, MD (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Boston University Chobanian & Avedisian School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, PIDS

Emmanuel B. Walter, MD, MPH (he/him/his)

Position:
Chief Medical Officer

Organization:
Duke Human Vaccine Institute, Duke University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
APS, SPR, PIDS

Session Description

Session Description

In the current climate of vaccine hesitancy, it is critical for pediatricians to be aware of the processes in place to assure vaccine safety. In this session, we will review the regulatory pathways that are part of vaccine development, licensure and approval in the United States including mechanisms for post-licensure vaccine safety processes such as the Vaccine Adverse Events Reporting System, Vaccine Safety Datalink and the Clinical Immunization Safety Assessment Project. Our second speaker will focus on vaccines used

outside of the United States, including challenges surrounding post-licensure safety in countries with less robust vaccine safety infrastructure. During the third talk, participants will become familiar with the science of vaccine safety research and learn about recent publications in the field of vaccine safety.

Learning Objectives

1. Describe the life cycle of vaccines, from pre-clinical studies to licensure
2. Describe the mechanisms in place to monitor post-licensure vaccine safety in the United States
3. Communicate vaccine safety to patients and their families

Scholarly Session Questions

1. **Audience Size**
75
2. **Target audience**
The target audience includes attendees who provide vaccines as part of their clinical practice or are engaged in vaccine or health services research
3. **Tracks**
Academic and Research Skills
Community Pediatrics
General Pediatrics
Global Neonatal & Children's Health
Immunizations/Delivery
Infectious Diseases
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are you or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

N/A

8. **Does this submission involve one or more specialties or disciplines?**

This submission will include information about vaccines and vaccine safety. It will be relevant to pediatricians in infectious diseases, general pediatrics, global health and public health

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

Presentation Titles and Durations

The Life Cycle of a Vaccine

Melissa Stockwell, MD MPH

Duration of Presentation in Minutes

30

Global Vaccines and Vaccine Safety Challenges

Elizabeth D. Barnett, MD

Duration of Presentation in Minutes

30

Challenges and Successes in Vaccine Safety Research

Emmanuel B. Walter, MD, MPH

Duration of Presentation in Minutes

30

(150) Proposal ID: 1927004

Controversies in Infectious Diseases for General Pediatrics: Debates That May Change Your Practice

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Joshua Wolf**

Score: **0**

Participant(s)

Joshua Wolf, MBBS, PhD, FRACP (he/him/his)

Position:

Member

Organization:

St. Jude Children's Research Hospital

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Sandra Arnold, MD MSc (she/her/hers)

Position:

Professor of Pediatrics

Organization:

University of Tennessee Health Science Center College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Thomas Sandora, MD MPH

Position:

Professor of Pediatrics, Harvard Medical School

Organization:

Boston Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR, PIDS

Anna Sick-Samuels, MD, MPH

Position:

Assistant Professor of Pediatrics

Organization:

Johns Hopkins Children's Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
PIDS

Elizabeth Lloyd, MD (she/her/hers)

Position:
Assistant Professor - Pediatric Infectious Diseases

Organization:
University of Michigan Medical School

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
PIDS

Tonya Scardina, PharmD (she/her/hers)

Position:
Pharmacy Antimicrobial Stewardship Coordinator

Organization:
Ann & Robert H. Lurie Children's Hospital of Chicago

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
PIDS

Ted Morton, PharmD (he/him/his)

Position:
Clinical Pharmacy Specialist and Professor

Organization:
St. Jude Children's Research Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
PIDS

Session Description

Session Description

Targeted at general pediatricians, hospitalists, pediatric ER docs, and subspecialist or generalist pediatric trainees, these 3 rapidfire debates will address current controversies in prevention, diagnosis and management of infections in hospitalized children. The focus is on practical and applicable analysis of available data, and attempting to provide some consensus at the end! They will feature established and rising stars in the world of Infectious Diseases.

The topics are: 1. That long-term central venous catheters infected with

Staphylococcus aureus or Candida spp. should routinely be removed; 2. That inflammatory markers should be used to determine immediate management of children presenting to ER with fever; and 3. That fidaxomicin should be first-line therapy for Clostridioides difficile infection in children and adolescents at high risk of treatment failure or relapse.

This session will move fast, and cover a lot of ground. Audiences get to decide who won each debate, and will be able to apply what they learned immediately.

Learning Objectives

1. To discriminate situations in which it is necessary to remove long-term central lines in children with bloodstream infection
2. To establish practical and evidence-based rules for using inflammatory markers to stratify management of children presenting with fever
3. To determine which antibiotics to use for children and adolescents presenting with Clostridioides difficile infection who are at high risk of treatment failure or relapse.

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
General pediatrics, hospitalist medicine, infectious diseases, nephrology, gastroenterology, pediatric emergency medicine, medical educators, medical students, residents, fellows
3. **Tracks**
Emergency Medicine
Gastroenterology/Hepatology
General Pediatrics
Hematology/Oncology
Hospital Medicine
Infectious Diseases
Medical Education
Nephrology
Pharmacology and Therapeutics
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

N/A

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

Yes: General pediatrics, gastroenterology, hematology/oncology, neonatology, infectious diseases, clinical pharmacy, hospitalist medicine
pediatric emergency medicine

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

Presentation Titles and Durations

Routine removal of long-term central venous catheters infected with Staphylococcus aureus or Candida - Pro
Sandra Arnold, MD MSc

Duration of Presentation in Minutes

15

Routine removal of long-term central venous catheters infected with Staphylococcus aureus or Candida - Con
Thomas Sandora, MD MPH

Duration of Presentation in Minutes

15

Use of inflammatory markers to determine immediate management of children presenting to ER with fever - Pro
Anna Sick-Samuels, MD, MPH

Duration of Presentation in Minutes

15

Use of inflammatory markers to determine immediate management of children presenting to ER with fever - Con
Elizabeth Lloyd, MD

Duration of Presentation in Minutes

15

Fidaxomicin as first-line therapy for high-risk *Clostridioides difficile* infection in children and adolescents - Pro

Tonya Scardina, PharmD

Duration of Presentation in Minutes

15

Fidaxomicin as first-line therapy for high-risk *Clostridioides difficile* infection in children and adolescents - Con

Ted Morton, PharmD

Duration of Presentation in Minutes

15

(151) Proposal ID: 1920728

Social Media for the Antisocial: Exploring the Benefits and Challenges of Online Engagement for Clinicians and Families in Pediatrics

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Gabriel Altit**

Score: **0**

Participant(s)

Gabriel Altit, MDCM, MSc, FRCPC, FASE (he/him/his)

Position:

Neonatologist - Assistant Professor

Organization:

McGill University Faculty of Medicine and Health Sciences

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Daphna Yasova Barbeau, MD (she/her/hers)

Position:

Neonatologist

Organization:

HCA University Hospital

Role:

Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Keith J. Barrington, MB ChB (he/him/his)

Position:

Professor of Pediatrics

Organization:

Université de Montréal

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Benjamin Curchia, MD

Position:

NICU Medical Director

Organization:

HCA FL University Hospital

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

ANNIE Janvier, MD, PhD (call me Annie)

Position:
Professor of pediatrics and clinical ethics

Organization:
Université de Montréal, CHU Sainte-Justine

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Brett J. Manley, MB BS, PhD (he/him/his)

Position:
Prof

Organization:
The University of Melbourne

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

In the digital age, neonatologists and pediatric healthcare professionals have unprecedented opportunities to enhance patient care, medical education, and scientific discourse. This panel will explore how to effectively leverage digital platforms such as X (formerly known as Twitter), podcasts, blogs, and specialized websites to advance neonatal and pediatric care. The session will highlight the unique strengths of each medium: from the rapid exchange of information on social media, to the in-depth learning and clinical insights provided by podcasts, the comprehensive analysis found on specialized websites, and the reflective practice encouraged by blogs.

Increasingly, parents turn to social media to connect with others in similar situations, sharing advice, celebrating achievements, and mourning losses together. While these communities can be beneficial, certain groups may also pose risks by influencing parents in ways that may not align with their child's best interests. This panel will explore how clinicians can help parents navigate these platforms, ensuring a balanced and informed approach to their child's care.

Clinical academics and social media experts will describe practical strategies for creating impactful content, building a professional online presence, and integrating digital resources into clinical practice and education—all while maintaining ethical standards and patient privacy. The session will emphasize how digital engagement can transform clinical practice and improve outcomes for infants and children, even for those who consider themselves less tech-savvy.

Learning Objectives

1. Evaluate the ethical considerations and professional responsibilities involved in interacting on digital platforms, particularly in guiding parental engagement on social media while maintaining professional credibility.
2. Design strategies to promote equitable access to pediatric knowledge and resources through digital platforms, ensuring professionals and families worldwide benefit from shared expertise and experiences.
3. Analyze the role of new media in reshaping pediatric education, focusing on how blogs, podcasts, and social-medias contribute to dissemination of science and clinical practices.

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

1. Neonatologists, Pediatric Healthcare Professionals, Allied health care professionals (nursing, respiratory therapy, pharmacist, social worker)
2. Medical Educators and Academic Faculty
3. Healthcare Administrators and Policy Makers
4. Social Media Managers and Digital Communication Specialists in Healthcare, and communication specialists
5. Researchers in Neonatology and Pediatrics
6. Patient Advocacy Groups and Parent Support Organizations

3. **Tracks**

Academic and Research Skills
Artificial Intelligence
Cardiology
Clinical Bioethics
Clinical Research
General Pediatrics
Global Neonatal & Children's Health
Hospital Medicine
Literacy
Medical Education
Neonatology
Social Media & Technology
Well Newborn

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Friday, April 25

Saturday, April 26

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

Neonatal Hemodynamics Club

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

N/A

8. **Does this submission involve one or more specialties or disciplines?**

Yes - Ethics, Neonatology, Neonatal Hemodynamics and Cardiology, Community Groups and Family organization.

9. **If your session was presented at another conference, please describe the conference and presentation.**

Never presented before.

10. **Additional comments**

Session Format: The 90-minute session will include presentations from each panelist, sharing their strategies and experiences in using new media. The focus will then shift to practical guidance on how attendees can begin engaging with these platforms, regardless of their technical expertise. Dr. Janvier will provide unique insights into how non-tech-savvy individuals can still make significant contributions, particularly by harnessing the power of stories and parental engagement. The session will also include interactive discussions and a Q&A segment, allowing the audience to gain hands-on understanding.

Expected Outcomes:

Attendees will leave with a clear understanding of how to get started with digital platforms, how to leverage them effectively, and how to contribute to the pediatric community in innovative ways. This session aims to empower all participants, regardless of their technical background, to engage with new media and make a meaningful impact on pediatric care and education.

Conclusion: This panel brings together diverse voices in pediatric new media, offering both inspiration and practical tools. Participants will be equipped with the knowledge and confidence to navigate and contribute to the digital transformation of pediatric care, enhancing both professional development and patient outcomes

Presentation Titles and Durations

From Sketching Hearts to Mastering Neonatal Hemodynamics: NeoCardioLab's Digital Revolution

Gabriel Altit, MDCM, MSc, FRCPC, FASE

Duration of Presentation in Minutes

11

The Incubator Podcast: Global Dissemination of Evidence-Based Practices Through Podcasting

Daphna Yasova Barbeau, MD

Duration of Presentation in Minutes

6

NeonatalResearch.org: The Blog That Bridges Complex Research and Clinical Practice in Neonatology

Keith J. Barrington, MB ChB

Duration of Presentation in Minutes

11

The Incubator Podcast: Global Dissemination of Evidence-Based Practices Through Podcasting

Benjamin Courchia, MD

Duration of Presentation in Minutes

5

Guiding parents navigate through the risks and benefits of the social media maze

ANNIE Janvier, MD, PhD

Duration of Presentation in Minutes

11

Social media for academia: It's not all about people's cats or birds

Brett J. Manley, MB BS, PhD

Duration of Presentation in Minutes

11

(152) Proposal ID: 1924232

What Can a Sedation Service Do for You? Moving Procedural Care Out of the Operating Room

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Juan Boriosi**

Score: **0**

Participant(s)

Anna Lin, MD (she/her/hers)

Position:
Clinical Professor

Organization:
Stanford School of Medicine

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Alexandra Nienhuis, MSN, ARNP (she/her/hers)

Position:
Clinical Lead Mobile Sedation Team and Acute Pain Service

Organization:
Seattle Children's

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Carmen D. Sulton, MD (she/her/hers)

Position:

Associate Professoer

Organization:

Emory University School of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Juan Boriosi, MD (he/him/his)

Position:

Associate Professor of Pediatrics

Organization:

University of Wisconsin-Madison

Role:

Submitter;Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

If you provide procedural care for your patients, this session was designed for you. A sedation service line can provide sedation and pain control services to meet your specific patient needs. However, identifying the correct patient population, team building, multi- and interdisciplinary collaboration, demonstration of positive economic impact, and sustainability are challenges faced by all new and established service lines. A multidisciplinary panel of pediatric sedation experts in positions of clinical leadership will provide insights into how pediatric procedural sedation can support your patients as well as discuss the challenges of maintaining a clinical service line.

Learning Objectives

1. Upon completion, participants will be able to identify the right patient population who can benefit from a unique sedation service
2. Upon completion, participants will be able to describe team building skills and member's roles in procedural sedation
3. Upon completion, participants will be able to describe strategies for the sustainability of a clinical service line.

Scholarly Session Questions

1. **Audience Size**
25
2. **Target audience**

Hospital medicine providers, pediatric critical care medicine providers, pediatric emergency medicine providers, sedation medicine providers, hematology-oncology providers, neurology providers

3. **Tracks**

Cardiology
Critical Care
Developmental and Behavioral Pediatrics
Emergency Medicine
Hematology/Oncology
Hospital Medicine
Neurology
Sedation Medicine

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Pediatric emergency medicine events
Pediatric critical care events
Pediatric hospital medicine events
Other Sedation Medicine events

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Alexa Nienhuis, PNP is a non-member speaker, pediatric nurse practitioner, who brings expertise not available in any of the member speaker organizations

8. **Does this submission involve one or more specialties or disciplines?**

Pediatric Emergency Medicine
Pediatric Critical Care Medicine
Pediatric Hospital Medicine
Sedation Medicine

9. **If your session was presented at another conference, please describe the conference and presentation.**

10. **Additional comments**

Note the session has a 15 min Q&A after the final presentation that will include all speakers (Anna Lin, Alexa Nienhuis, and Carmen Sulton)

Presentation Titles and Durations

Understanding Pediatric Procedural Sedation

Anna Lin, MD

Duration of Presentation in Minutes

25

Team building/roles

Alexandra Nienhuis, MSN, ARNP

Duration of Presentation in Minutes

25

Service line sustainability

Carmen D. Sulton, MD

Duration of Presentation in Minutes

25

Q&A

Juan Boriosi, MD

Duration of Presentation in Minutes

15

(153) Proposal ID: 1916778

How to Protect Children Around the World from Respiratory Syncytial Virus (RSV)

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Chikara Ogimi**

Score: **0**

Participant(s)

Janet A. Englund, MD (she/her/hers)

Position:

Professor

Organization:

Janet A Englund

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Chikara Ogimi, MD, PhD (he/him/his)

Position:

Head, Division of Infectious Diseases and Director of Infection Control

Organization:

National Center for Child Health and Development

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Lien Anh Ha Do, MD, PhD (she/her/hers)

Position:

Dr

Organization:

Murdoch Children's Research Institute

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Yae-Jean Kim, MD, PhD, FISDA (she/her/hers)

Position:

Professor, Department of Pediatrics

Organization:

Samsung Medical Center, SungKyunKwan University

Role:

Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
PIDS

Session Description

Session Description

This session, titled "How to Protect Children Around the World from Respiratory Syncytial Virus (RSV)", will focus on global strategies for RSV prevention in young children, highlighting and comparing prophylaxis strategies in Western and Asian countries. The discussion will cover the epidemiology of RSV in different regions and the use of nirsevimab and maternal RSV vaccines, with insights from the U.S., Japan, and Vietnam.

Dr. Janet Englund will present the U.S. perspective, where both nirsevimab and maternal RSV vaccine are approved for all infants, and maternal RSV vaccine is widely accessible through government or private insurance. Dr. Chikara Ogimi will discuss strategies in Japan, where nirsevimab is limited to high-risk children, and maternal RSV vaccines are only available at the patient's expense. Dr. Lien Anh Ha Do will focus on Vietnam, where RSV epidemiology differs significantly from the West, and high-cost treatments like nirsevimab are unaffordable, posing significant challenges for widespread prevention. The panel, led by Dr. Janet Englund and Dr. YaeJean Kim, will explore disparities in access to RSV prophylaxis, including monoclonal antibodies and vaccines, and discuss future opportunities to expand protection, particularly for high-risk groups such as immunocompromised patients or older high-risk children.

This session will provide valuable insights into the current landscape of RSV prevention and the future potential for global implementation of universal RSV prophylaxis.

Learning Objectives

1. Upon completion, participants will be able to describe the global epidemiology of RSV infections and their impact on children in both Western and Asian countries.

2. Upon completion, participants will be able to identify gaps in RSV prevention strategies, including monoclonal antibodies and vaccines, in Western and Asian healthcare systems.
3. Upon completion, participants will be able to evaluate the potential future use of RSV monoclonal antibodies and vaccines for high-risk groups, including immunocompromised patients.

Scholarly Session Questions

1. **Audience Size**
500
2. **Target audience**
Pediatrician, infectious disease specialist, other healthcare professionals, public health officials, policy maker, Pharmaceutical and Biotech Representatives, and Patient Advocacy
3. **Tracks**
Advocacy
General Pediatrics
Global Neonatal & Children's Health
Health Equity/Social Determinants of Health
Immunizations/Delivery
Infectious Diseases
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
YaeJean Kim (chairperson) is also a speaker for congenital CMV session
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Dr. Do is an emerging leader in RSV virology and immunology from Vietnam. Since 2016, she has established an RSV research laboratory at the Murdoch Children's Research Institute (MCRI) in Melbourne, Australia, and has authored 55 publications, with over 50% as first or senior author, in top journals such as eBioMedicine, The Lancet, and

Nature Communications. Her 2013 PhD thesis was the first to provide in-depth RSV data in Vietnam, covering clinical, molecular epidemiology, and host-pathogen interactions.

Dr. Do serves as the Principal Investigator for a study on hospitalized RSV cases at the Royal Children's Hospital in Melbourne and co-leads a pneumococcal conjugate vaccine (PCV) study in Mongolia with Prof. Mulholland, examining the impact of PCV on RSV infections. She also co-leads research on host-RSV interactions in high-risk patients with A/Prof Licciardi.

Her contributions to the global understanding of RSV include leading studies in Vietnam, Mongolia, and Australia, which have been integral to the global RSV seasonality study (Lancet Glob Health, 2019;7:e1031) and the global RSV burden study in children under 5 years of age (The Lancet, 2022;399:2047). Her research supports efforts to improve universal access to RSV vaccines in low- and middle-income countries (LMICs) including the first RSV cost dataset from Vietnam (BMC Infect Dis., 2023;23(1):73), and one of the few from LMICs, contributing valuable insights into the cost-effectiveness of the two recently approved RSV prevention products in Vietnam (Vaccine, 2023;41(46):9)). This research brings critical attention to LMICs in global discussions, where the focus has largely been on high-income countries, despite 99% of RSV mortality occurring in LMICs.

Dr. Do currently serves on the International Society for Influenza and Other Respiratory Virus Diseases (ISIRV) committee, one of the largest and most established societies for viral respiratory infections globally.

With her medical training background, hands-on expertise in immunology and virology (gained through her MSc and PhD), and her advocacy for LMICs, Dr. Do would be a valuable addition to our session as a speaker.

8. Does this submission involve one or more specialties or disciplines?

The topic is RSV prevention involving General Pediatrics, Public Health, Infectious Diseases, and Global Health

9. If your session was presented at another conference, please describe the conference and presentation.

No, our session was not presented anywhere else.

10. Additional comments

This session was proposed by JPS (The Japan Pediatric Society) and it has been approved by AAP.

Presentation Titles and Durations

Nirsevimab and RSV Vaccine Implementation in the U.S.: Achieving Universal Infant and Maternal Coverage

Janet A. Englund, MD

Duration of Presentation in Minutes

25

Challenges in RSV Prevention in Japan: Limited Access to Nirsevimab and Cost Barriers for Maternal Vaccination

Chikara Ogimi, MD, PhD

Duration of Presentation in Minutes

25

RSV Prevention in Vietnam and Asia: Epidemiological Differences and Barriers to Expensive Monoclonal Antibodies and Vaccines

Lien Anh Ha Do, MD, PhD

Duration of Presentation in Minutes

25

(154) Proposal ID: 1930833

Closing the Gap: Addressing Pediatric Asthma Through a Multi-Faceted Approach

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Anand Gourishankar**

Score: **0**

Participant(s)

Anand Gourishankar, M.B.B.S, MRCP, MAS (he/him/his)

Position:

Professor of Pediatrics

Organization:

Children's National Health System

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Kaviany Parisa, MD (she/her/hers)

Position:

Assistant Professor

Organization:

Children's National Health System

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Shilpa J. Patel, MD, MPH (she/her/hers)

Position:

Associate Professor of Pediatrics and Emergency Medicine

Organization:

Children's National Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Rachel Margolis, PhD, LICSW

Position:

Assistant Professor

Organization:

Children's National Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Jordan Tyriss, MD MSHS (she/her/hers)

Position:
Assistant Professor of Pediatrics; Attending Physician, Division of
Hospital Medicine

Organization:
Children's National Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Session Description

Session Description

The first brief introductory talk (10 minutes): It provides a comprehensive overview of the topics below.

The next speaker's topic is "The Asthma Epidemic in our Homes: Indoor Air Quality, housing problems and Pediatric Asthma (15 minutes)": 1. Explore the impact of indoor allergens, pollutants, and poor ventilation on asthma prevalence and severity, 2. Interventions for improving indoor air quality in

homes from our local "healthy homes programs" to improve the home environment, 3. Toolkit that could help pediatricians navigate some of the challenges of asthma care.

The following topic will be "Asthma in the Classroom: Addressing Gaps in School-Based Asthma Management (15 minutes): Challenges in supporting students with asthma and Strategies for improving asthma management in the school setting, including staff training and student education.

The third speaker's content includes "Caring for the caretaker-Caregiver Depression and Child Asthma" (15 minutes). Depressive symptoms are common among caregivers of children with asthma, particularly in families living in marginalized and disinvested communities: 1. Examine the role of caregiver depression in pediatric asthma morbidity; 2. Explore innovative strategies for identifying and addressing caregiver depression in pediatric asthma care.

The last speaker addresses "Social Determinants of Health and Pediatric Asthma: A Holistic Approach (15 minutes)": 1. Stress the need for a comprehensive approach that considers all social factors, such as poverty, housing instability, access to healthcare, etc., in pediatric asthma outcomes, 2. Propose strategies for integrating social determinants of health into asthma management.

Q&A: 5 minutes for each speaker.

Learning Objectives

1. Upon completion, participants will be able to explain how poor air quality, school issues, and caregiver stress worsen asthma in underserved children.
2. Upon completion, participants will be able to identify strategies to improve asthma care in homes and schools and support caregivers' mental health.
3. Upon completion, participants will be able to incorporate poverty, housing, and healthcare challenges into asthma care planning to improve pediatric outcomes.

Scholarly Session Questions

1. **Audience Size**
25
2. **Target audience**
General pediatricians, hospitalists, pulmonologists, midlevel practitioners, and learners such as students, residents, and fellows.
3. **Tracks**
Asthma
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Poster sessions or oral abstract presentation

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

9. **If your session was presented at another conference, please describe the conference and presentation.**

10. **Additional comments**

Presentation Titles and Durations

The Asthma Epidemic in our Homes: Indoor Air Quality, housing problems and Pediatric Asthma

Kaviany Parisa, MD

Duration of Presentation in Minutes

15

Asthma in the Classroom: Addressing Gaps in School-Based Asthma Management

Shilpa J. Patel, MD, MPH

Duration of Presentation in Minutes

15

Caring for the caretaker-Caregiver Depression and Child Asthma

Rachel Margolis, PhD, LICSW

Duration of Presentation in Minutes

15

Social Determinants of Health and Pediatric Asthma: A Holistic Approach

Jordan Tyris, MD MSHS

Duration of Presentation in Minutes

15

(155) Proposal ID: 1900187

Creating a supportive environment for international medical graduate residents, fellows and junior faculty

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Teoh Zheyi**

Score: **0**

Participant(s)

Teoh Zheyi, MBBS, MsPH (he/him/his)

Position:

Assistant Professor

Organization:

Seattle Children's Hospital/University of Washington

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, PIDS

Liset Olarte, MD, MSc

Position:

Associate Professor of Pediatrics

Organization:

Baylor College of Medicine

Role:

Chair

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, PIDS

Guliz Erdem, MD (she/her/hers)

Position:

Professor

Organization:

Nationwide Children's Hospital

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR, PIDS

Ligia Moschen Nascente Chanock, MD (she/her/hers)

Position:

Assistant Professor

Organization:

Children's National Health System

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
Prefer not to respond

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Mobeen Rathore, MD

Position:
Professor and Associate Chair

Organization:
University of Florida

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR, PIDS

Melissa Vincenty

Position:
Managing Director

Organization:
University of Hawaii, John A. Burns School of Medicine

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

IMGs constitute a substantial and growing proportion of the pediatric workforce, consisting of 25% of all US physicians and 25% of the pediatric and pediatric subspecialty workforce. IMGs trainees and early-career physicians face unique challenges during their residency and fellowship training, post-graduate employment search, work authorization, and career development. In this engaging panel discussion, we leverage the experience of IMGs, program leaders, and legal experts in providing practical and realistic advice and tools for not only IMGs but also their program leaders, mentors, and colleagues.

Session Schedule:

1. Introduction.
2. I am a graduating pediatric IMG trainee, now what?
 - Review common pitfalls during graduate medical training, and important timelines for a successful job search. Highlight strategies to succeed as an early-career faculty member while navigating the restrictions imposed on IMGs including waiver/visa restrictions and research funding limitations.
3. Practical immigration tips for obtaining a post-training job as an IMG.
 - Provide understanding the types of J-1 waiver mechanisms, waiver/visa restrictions, finding waiver-friendly positions, limitations with waiver/visa sponsorship, advocating and negotiating during the hiring process as an IMG, and overcoming unexpected legal roadblocks or delays.
3. Allyship from program leaders: How to set up your IMG trainees and faculty for success.
 - Discuss challenges and practical solutions, from the perspective of program leaders, in helping their IMG trainees and faculty succeed, and how they can leverage institutional resources and priorities to improve recruitment and retention of IMG faculty and clinical staff.
6. Panel discussion and Q&A

Learning Objectives

1. Highlight the growing composition and importance of IMGs to the current and future of the pediatric and pediatric subspecialty workforce.
2. Understand the complex challenges faced by IMG trainees and early-career doctors, including those that occur after graduating residency and/or fellowship
3. Provide concrete, actionable steps that IMGs and their non-IMG mentors, allies, and program leaders can take to overcome these challenges

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Trainees including residents and fellows, early-career physicians, all faculty especially program directors and division chiefs interested in workplace diversity, increasing social equity in healthcare, medical education, and global health
3. **Tracks**
Academic and Research Skills
Career Development
Diversity, Equity, and Inclusion
Medical Education
Wellness and Well-being
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Avoid other events targeted at trainees
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
We have invited an immigration lawyer who will speak to the legal challenges that IMGs face and will provide technical expertise not available by using physicians.

8. **Does this submission involve one or more specialties or disciplines?**

Yes, this topic is relevant to all specialties and disciplines

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

There continues to be a tremendous lack of IMG-specific sessions at major academic conferences including PAS and NCE. Considering the ongoing shortage of physicians and the huge role IMGs make in the pediatric and pediatric subspecialty workforce (ONE in four pediatricians are IMGs), this area remains a heavily neglected.

In addition, this proposal has been formulated and organized by PIDS members (Dr. Teoh, Olarte, and Erdem) who are members of the Inclusion, Diversity, Access, and Equity Committee and the Global Health Committee. This session was submitted and is particularly relevant to "Pediatric Infectious diseases workforce updates with a focus on how we can attract new post-doctoral fellows to pediatric infectious diseases" which is a timely pediatric infectious diseases (and any other pediatric subspecialty) topic proposed by PIDS for PAS 2025

Presentation Titles and Durations

I am a graduating pediatric IMG trainee, now what?

Teoh Zheyi, MBBS, MsPH

Duration of Presentation in Minutes

10

Allyship from program leaders: How to set up your IMG trainees and faculty for success.

Ligia Moschen Nascente Chanock, MD

Duration of Presentation in Minutes

20

Allyship from program leaders: How to set up your IMG trainees and faculty for success.

Mobeen Rathore, MD

Duration of Presentation in Minutes

20

Practical immigration tips for obtaining a post-training job as an IMG

Melissa Vincenty

Duration of Presentation in Minutes

20

(156) Proposal ID: 1924533

Conflict in Gaza

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **ARHAM ALI**

Score: **0**

Participant(s)

ARHAM ALI, MD, MS

Position:

Instructor

Organization:

Loma Linda University Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Session Description

Session Description

I am a Pediatric Critical Care physician who recently traveled to Gaza in February 2024 to deliver humanitarian aid. As pediatricians, we have a professional duty to advocate for the safety and well-being of children. The proposed State of the Art Plenary offers a vital platform for discussion among colleagues to address the most significant humanitarian crises affecting children in modern history. The session will focus on the targeted attacks on healthcare facilities, restriction of humanitarian aid, impact on child health, and a call to action for Pediatricians globally.

Learning Objectives

1. Report, Analyze, and Examine the Collapse of Healthcare Infrastructure in Gaza
2. Provide a Detailed Account of Deliberate Injury to Children and Pediatric Providers
3. Summarize the Critical Role of Pediatric Providers During Periods of Armed Conflict

Scholarly Session Questions

1. **Audience Size**
300
2. **Target audience**
All
3. **Tracks**
Advocacy
Child Abuse & Neglect
Clinical Bioethics
Critical Care
Diversity, Equity, and Inclusion
Global Neonatal & Children's Health
Health Equity/Social Determinants of Health
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Friday, April 25
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

I (Arham Ali, MD) and not an active member of the aforementioned organizations. I request an exception be made as I am one of the very few Pediatric Intensivists who has physically gone and provided aid and relief in Gaza since October 7, 2023.

8. **Does this submission involve one or more specialties or disciplines?**

This topic pertains to nearly all disciplines and specialties within Pediatrics and Healthcare.

9. **If your session was presented at another conference, please describe the conference and presentation.**

Arham Ali presented a modified version of the session in the form of Grand Rounds and Los Angeles County Medical Center on July 23, 2024. Otherwise, it has not been presented at any local, national, or international conferences.

10. **Additional comments**

Presentation Titles and Durations

Conflict in Gaza

ARHAM ALI, MD, MS

Duration of Presentation in Minutes

90

(157) Proposal ID: 1924935

MEDICAID AT 60: The Next Generation of Innovations in Children's Health Insurance Coverage

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Shetal Shah**

Score: **0**

Participant(s)

Shetal Shah, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

New York Medical College

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, SPR

Jennifer K. Saper, MD. MS

Position:

Assistant Professor

Organization:

Lurie Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

James M. Perrin, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

MassGeneral Hospital for Children; Harvard Medical School

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS

Stephanie Glier, MPH (she/her/hers)

Position:

Director, Federal Advocacy

Organization:

American Academy of Pediatrics

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

Co-sponsors: Suggested, American Academy of Pediatrics Section on Neonatal-Perinatal Medicine, Pediatric Policy Council, Academic Pediatric Association

Started in 1965, Medicaid/ CHIP together are the largest pediatric health insurers, covering ~50% of children nationally. Recent work, including the 2023 AAP Medicaid Policy Statement and the upcoming Technical Report on Medicaid provide guidance for broad strengthening of this key insurance program.

During the pandemic, states were disallowed from removing Medicaid recipients. However, with the end of the public health emergency in 2023, states again had to reassess eligibility of children (and other Medicaid recipients) resulting in removal of ~5 million children from Medicaid. These changes worsened disparities in children's health insurance coverage based on race/ethnicity. Several lessons arose from the unwinding, with several states' using the pandemic experience as a template for longer periods of coverage. Innovations in Medicaid/ CHIP offer promise for stronger children's health coverage, in duration of coverage, scope of services, new access standards, stronger EPSDT enforcement, and payment advances.

The purpose of this session is to review trends in children's health coverage since the end of the pandemic and review recent Medicaid innovations. Benefits of these changes, as well as pitfalls in implementation will be reviewed. An expert and diverse panel of speakers including authors of the AAP policy report and Washington-based Medicaid experts will discuss and speculate on Medicaid changes in the context of a new presidential administration.

Learning Objectives

1. Provide insight into disparities of losses in pediatric Medicaid enrollment during the Medicaid “Unwinding.”
2. Review the importance of state-based Medicaid innovations including continuous coverage, EPSDT and coverage of health-related social needs.
3. Predict new opportunities and anticipate threats across the landscape of public health coverage for children.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Medical Students, Residents, Fellows, Faculty interested in Medicaid, Child Health Policy, Financing, Insurance
3. **Tracks**
Advocacy
Health Equity/Social Determinants of Health
Health Services Research
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Pediatric Policy Council Sessions (Legislative Breakfast, Plenary session)
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Topic includes health insurance coverage and includes policy researchers, general pediatricians, academic leadership and subspecialists.

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

This session is particularly important as the AAP Medicaid Technical Report is currently being revised, a new President and Congress will be seated and is well-timed to coincide with Medicaid's 60th Anniversary. The panel is ethnically/racially diverse, come from different geographic regions and includes junior and senior faculty.

Presentation Titles and Durations

Welcome: Medicaid at 60 years and Continuous Medicaid Coverage through School Age, Why it SHOULD work, Why it might NOT.

Shetal Shah, MD

Duration of Presentation in Minutes

20

The Current Landscape of Medicaid Coverage and Health Equity

Jennifer K. Saper, MD. MS

Duration of Presentation in Minutes

15

Medicaid Parity: Issues and Opportunities in Medicaid/CHIP Payment for Child Health Services

James M. Perrin, MD

Duration of Presentation in Minutes

15

The Future of Medicaid in the Current Washington Environment

Stephanie Glier, MPH

Duration of Presentation in Minutes

20

(158) Proposal ID: 1928691

Baby, It is Hot Outside: The Impact and Interventions to Mitigate Climate Change Effects in the First Year of Life

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Heather Brumberg**

Score: **0**

Participant(s)

Heather L. Brumberg, N/A, MD, MPH (she/her/hers)

Position:

Professor of Pediatrics and Clinical Public Health

Organization:

New York Medical College/Maria Fareri Children's Hospital at Westchester Medical Center

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Mark Cicero, MD

Position:

Associate Professor of Pediatrics and Emergency Medicine

Organization:

Yale School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Melanie Leong, MD, MS

Position:

Assistant Professor of Pediatrics

Organization:

New York Medical College/Maria Fareri Children's Hospital at
Westchester Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Kimberley Greeson, Ph.D. (she/her/hers)

Position:

Professor

Organization:

Prescott College

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian, White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Rasheda J. Vereen, MD, MBS (she/her/hers)

Position:

Assistant Professor, Staff Neonatologist

Organization:

Uniformed Services University of the Health Sciences F. Edward Hebert
School of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Session Description

Session Description

Climate change increasingly impacts children's health and well-being. However, there is a gap in understanding specific health outcomes and preventive actions around climate change that target the perinatal period into the first year of life.

This panel session will review how climate change can affect pregnant people and their infants. Further the session will discuss opportunities to prepare providers and families to mitigate exposure as well as delineate biopolitical (the intersection of government, legislation, and health and well-being) and community actions to prevent climate change. Participants will hear from and interact with neonatologists, pediatric hospitalists (or intensivists), emergency medicine physicians, and community sustainability and biopolitical researchers who will give an in-depth examination of how climate change affects infants and what can be done. The discussion will include the pathophysiology of climate and air pollution and how they synergistically cause adverse health outcomes. Additionally, there will be an in-depth delineation of specific effects of natural disasters and related emerging infectious diseases on the healthy infant and those dependent on technology (i.e. mechanical ventilation or gastrostomy feeding). These issues will be given context in the history of structural racism toward Black and Indigenous populations. Finally, constructive actions will be considered at the individual, family, hospital-based, community level, and policy levels.

Learning Objectives

1. To review how air pollution and climate change are linked and the pathophysiology of related impacts on the health of pregnant people and infants.
2. To describe the impact of climate-related emergencies, including weather and infectious disease on the vulnerable infant.
3. Develop action plans to mitigate exposure, prevent worsening climate change, and advocate for policies to protect families, especially minoritized populations affected by structural racism.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Neonatology, Environmental Health, Emergency Medicine, Infectious Disease, Hospital Medicine, Well Newborn Care, Pulmonology, Critical Care
3. **Tracks**
Advocacy
Critical Care
Emergency Medicine
Environmental Health
Health Equity/Social Determinants of Health

Infectious Diseases
Neonatology
Well Newborn

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
unclear at this time
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Although the remainder of the proposed speakers are members of at least one organization, Dr. Greeson is not a member of AAP or SPR etc. However, Dr. Greeson is core faculty for the Ph.D program in Sustainability Education at Prescott College, lives on the Big Island does environmental justice work with indigenous Hawaiian people
8. **Does this submission involve one or more specialties or disciplines?**
Yes. Environmental health regarding climate change in the first year of life--targeting neonatology, critical care, emergency medicine/disaster preparedness.
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**
Climate change affects pregnant mothers and neonates, especially those most vulnerable such as technology dependent infants. Yet, there is very little information/guidance for providers caring for this population. We are aiming to provide education and actionable items for providers to include into their daily practice around climate change.

Presentation Titles and Durations

A Neonatologist's Perspective: How Air Pollution and Climate Change Linked and Why Should We Care

Heather L. Brumberg, N/A, MD, MPH

Duration of Presentation in Minutes

10

Natural Disaster Emergency Preparedness: How Can We Protect Infants

Mark Cicero, MD

Duration of Presentation in Minutes

15

Primer on Emerging Infectious Diseases Due to Climate Change To Prepare

Those Caring for Infants

Melanie Leong, MD, MS

Duration of Presentation in Minutes

15

All Are Not Equally Affected: Climate Change as a Health Justice Issue

Kimberley Greeson, Ph.D.

Duration of Presentation in Minutes

15

Greening Hospitals L&D, NICU and Beyond

Rasheda J. Vereen, MD, MBS

Duration of Presentation in Minutes

10

(159) Proposal ID: 1926894

Too Hot: Update on Pediatric Fever Syndromes

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Joshua Wolf**

Score: **0**

Participant(s)

Joshua Wolf, MBBS, PhD, FRACP (he/him/his)

Position:

Member

Organization:

St. Jude Children's Research Hospital

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Elisa Margolis, MD PhD (she/her/hers)

Position:

Associate Member

Organization:

St. Jude Children's Research Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Amanda Green, MD, FAAP (she/her/hers)

Position:

Physician Scientist Instructor

Organization:

St. Jude Children's Research Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Amanda K. Ombrello, MD (she/her/hers)

Position:

Associate Research Physician

Organization:

NHGRI/NIH

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

Although fever is the most common presenting syndrome for pediatric illness, persistent unexplained fever, recurrent fever, and fever with rash remain challenging to manage. In this session, experts in pediatric infectious diseases and rheumatology give an update on what's new in approaching these difficult cases. The focus will be on developing practical skills and expertise, and bringing new research findings into the clinic.

Learning Objectives

1. Confidently develop a risk stratified and individualized approach to diagnosis and management of persistent fever of unknown origin
2. Recognize and diagnose children with recurrent fever syndromes and identify approaches to initial management
3. Distinguish important causes of fever and rash syndromes that require urgent intervention

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
General pediatrics, hospitalist medicine, ID, rheumatology, neonatology, ER medicine, neurology, med ed, medical students, residents, fellows
3. **Tracks**
Allergy, Immunology and Rheumatology
Emergency Medicine
General Pediatrics

Hospital Medicine
Infectious Diseases

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes: Infectious diseases, rheumatology, general pediatrics
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Too hot too rashy: Differentiating important causes of fever and rash in children
Elisa Margolis, MD PhD

Duration of Presentation in Minutes

30

Too hot too long: Getting a handle on persistent unexplained fever
Amanda Green, MD, FAAP

Duration of Presentation in Minutes

30

Too hot too often: Identifying and managing periodic fever syndromes
Amanda K. Ombrello, MD

Duration of Presentation in Minutes

30

(160) Proposal ID: 1925433

The Pediatric Match: Red Herring or Canary in the Coal Mine? A Data-informed Discussion of the State of the US Pediatrician Workforce

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Laurel Leslie**

Score: **0**

Participant(s)

Robert J. Vinci, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

Boston University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS

Lynn M. Olson, N/A, PhD (she/her/hers)

Position:

Vice President Research

Organization:

American Academy of Pediatrics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA

Adam Turner, MPH, PMP

Position:

Director of Research, Analytics, and Visualization

Organization:

The American Board of Pediatrics

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Colin J. Orr, MD, MPH (he/him/his)

Position:

Assistant Professor

Organization:

Monroe Carell Jr. Children's Hospital at Vanderbilt

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Lyuba Konopasek, MD (she/her/hers)

Position:

Senior Vice President

Organization:

Intealth

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Laurel K. Leslie, MD MPH (she/her/hers)

Position:

Vice-President, Research

Organization:

American Board of Pediatrics

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, APS

Session Description

Session Description

Recent scientific and lay publications have questioned the future of the US pediatrician workforce, highlighting the closure of pediatric hospital beds, salary disparities between pediatric and adult clinicians, and pediatric residency and fellowship match rates in 2024. Yet, from 2013 to 2023, the number of first-year residents in categorical pediatric training programs increased by 10% and first-year pediatric subspecialty fellows increased by 26%. Over that same period, the number of children in the US remained stable, but with notable geographic change and increasing diversity. The last decades have also witnessed substantive improvements in child health, resulting from advances in technology, diagnostic testing, precision medicine, therapeutic interventions, and recognition of the social drivers of health. In a time of great promise for pediatric care, what can available data tell us about its chief caretakers- the general and subspecialty pediatrician workforce?

This session will examine the current and future trajectory of the pediatrician workforce, leveraging available datasets and expert insights. Presenters will share data from the National Resident Matching Program (NRMP), the American Board of Pediatrics (ABP), the American Academy of Pediatrics (AAP), Intealth, the US Census Bureau, and other sources to examine current numbers, diversity, trends over time, and future projections regarding the pediatric primary care and subspecialty workforce. Recommendations will be shared by leaders from national organizations regarding proactive strategies to address the evolving health needs of US children.

Learning Objectives

1. Identify available national and international data sources regarding the current and future pediatric workforce, articulate nuances regarding data interpretation, and summarize them broadly

2. State the current numbers and trends in US children from conception through young adulthood cared for by pediatricians
3. Articulate recommendations for assuring US children have access to the quality health care that they need

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
generalist pediatricians, subspecialty pediatricians, medical educators, policymakers, health workforce researchers
3. **Tracks**
Diversity, Equity, and Inclusion
Epidemiology
Health Equity/Social Determinants of Health
Health Services Research
Medical Education
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Speakers are also on several other hot topic symposias that have been submitted.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Adam Turner is a non-physician researcher on staff with the American Board of Pediatrics (Role: Director, Research, Analytics, and Vizualization). Lynn Olson is a a non-physician researcher on staff with the American Academy of Pediatrics (Role: Vice-President, Research).
8. **Does this submission involve one or more specialties or disciplines?**
This submission is on the pediatric workforce, ranging from general to subspecialty pediatricians (including trainees).

9. **If your session was presented at another conference, please describe the conference and presentation.**

NA

10. **Additional comments**

NA

Presentation Titles and Durations

What do we know about entry into pediatric residency and subspecialty fellowship training?

Robert J. Vinci, MD

Duration of Presentation in Minutes

12

What do we know about the US child population?

Lynn M. Olson, N/A, PhD

Duration of Presentation in Minutes

12

What do we know about current trainees and general pediatricians?

Adam Turner, MPH, PMP

Duration of Presentation in Minutes

12

What do we know about the subspecialty pediatrician workforce?

Colin J. Orr, MD, MPH

Duration of Presentation in Minutes

12

What do we know about international medical graduates and the pediatrician workforce?

Lyuba Konopasek, MD

Duration of Presentation in Minutes

12

Using data to inform proactive strategies to address the evolving health needs of US children

Laurel K. Leslie, MD MPH

Duration of Presentation in Minutes

5

(161) Proposal ID: 1908068

Decoding Congenital Heart Disease: Multifactorial Influences of Genetics, Placenta, Hemodynamics, and Maternal Health

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Rachel Leon**

Score: **0**

Participant(s)

Vidu Garg, MD (he/him/his)

Position:

Professor

Organization:

Nationwide Children's Hospital

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Rachel L. Leon, MD, PhD (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

University of Texas Southwestern Medical School

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Matthew Durbin, MD MS

Position:

Assistant Professor of Pediatrics

Organization:

Indiana University School of Medicine Department of Pediatrics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Rajiv Chaturvedi, MB BChir, MD, PhD (he/him/his)

Position:

Professor

Organization:

The Hospital for Sick Children

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Prefer not to respond

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Vidya Rajagopalan, PhD

Position:
Assistant Professor

Organization:
Children's Hospital Los Angeles

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Session Description

Session Description

The etiology of congenital heart disease is multifactorial and for the majority of patients, remains unknown. Animal models of CHD demonstrate that genetic perturbations, biomechanical disturbances, and maternal disease can all lead to CHD in offspring, but the relative contributions of these factors in human CHD is a major gap in understand and an area of active research. This session will feature discussions on how genetic models of CHD have informed the clinical care of CHD patients. Speakers will cover insights into the impacts of

maternal health on fetal cardiac development including discussions on novel methods examining placental disturbances and how they may contribute to the etiology of CHD. The overall goal of this session is to increase understanding of the complex interplay between genetics and environment in the etiology of CHD.

Learning Objectives

1. Discuss current models and methods of investigating the etiology of CHD.
2. Describe the role of maternal health and disease on fetal cardiac development including the influences of the placenta.
3. Understand how current research supports a comprehensive approach to the clinical care of CHD patients both pre- and postnatally.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Neonatologists, Cardiologists, Basic Science Investigators, Imaging Scientists,
3. **Tracks**
Basic Science
Cardiology
Clinical Research
Developmental Biology
Genomics/Epigenomics
Neonatology
Obesity
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
No
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide**

an explanation of the non-member speaker selection so that PAS staff may request approval.

Rajiv Chaturvedi, MD, PhD is a Professor of Pediatrics at the University of Toronto and an Interventional Pediatric Cardiologist at The Hospital for Sick Children (SickKids). He also performs fetal cardiac interventions. He has pioneered work in the fetal lamb to create a model of a severe form of CHD known as Hypoplastic Left Heart Syndrome by implantation of coils in the developing left atrium. This line of work provides very compelling evidence that normal left ventricular growth depends upon hemodynamic forces. His insights will be key to the holistic approach we are seeking for this session on the multifactorial influences at work in the developing heart and, more broadly, in these vulnerable pregnancies complicated by fetal heart defects.

8. Does this submission involve one or more specialties or disciplines?

Yes - this session spans basic to translational and clinical research. It touches on themes of neonatal-perinatal medicine, developmental biology, cardiology, advanced imaging sciences, obesity medicine, and genetics.

9. If your session was presented at another conference, please describe the conference and presentation.

Not previously presented

10. Additional comments

This session includes a diverse group of speakers who range in specialty, geographic region, career stage, and racial/ ethnic background. The chairs are a senior pediatric cardiologist and researcher (Dr. Garg, Professor with Endowed Chair and Director of the Center for Cardiovascular Research at Nationwide Children's with H-index of 45) and an early career neonatologist and clinical researcher (Dr. Leon, Assistant Professor on a K23 at UT Southwestern with H-index of 11). They will provide a comprehensive session on new insights in the etiology of CHD from multiple angles - genetics, hemodynamics, placenta, and maternal health. Speakers will cover basic, translational, and clinical research in the field of CHD research.

Presentation Titles and Durations

Insights into the Etiology of Congenital Heart Disease: From Mouse Models to Human Genetics

Vidu Garg, MD

Duration of Presentation in Minutes

15

Influences of the Placenta in Fetal CHD Pregnancies

Rachel L. Leon, MD, PhD

Duration of Presentation in Minutes

15

The Role of Maternal Obesity in Offspring Congenital Heart Defects

Matthew Durbin, MD MS

Duration of Presentation in Minutes

15

Effects of Hemodynamic Disturbances on Heart Development

Rajiv Chaturvedi, MB BChir, MD, PhD

Duration of Presentation in Minutes

15

Novel Methods to Investigate Disrupted Fetal Development

Vidya Rajagopalan, PhD

Duration of Presentation in Minutes

15

(162) Proposal ID: 1928270

Access To Safe, Effective And Affordable Medications: Addressing Longstanding Dependence On Compounding And Advocating For Child-Friendly Formulations

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Geert 't Jong**

Score: **0**

Participant(s)

Geert W. 't Jong, MD, PhD (he/him/his)

Position:

Pediatrician, Pharmacologist, Hospitalist

Organization:

Max Rady College of Medicine, Rady Faculty of Health Sciences,
University of Manitoba

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Charlotte Moore Hepburn, MD (she/her/hers)

Position:

Medical Director, Child Health Policy Accelerator

Organization:
Hospital for Sick Children

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Diane E. Hindman, MD PharmD FAAP FACMT (she/her/hers)

Position:
Attending Physician, Emergency Department

Organization:
Phoenix Children's

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Session Description

Session Description

Children require medications that are specifically formulated to meet their unique needs in terms of age, size, and developmental stage. Yet, most medications on the market are tailored for adults, leaving significant gaps in pediatric pharmacotherapy. The continued reliance of the pediatric community on compounding (both in pharmacy and home settings) presents significant clinical and regulatory risks for our patients. This session will address the global shortage of pediatric medications in child-appropriate forms, including medications that are commonly prescribed, medications that have narrow therapeutic indexes or present significant toxicity risks.

We will explore the barriers that hinder the commercial development of pediatric-specific medications, including scientific challenges and market-size limitations, and highlight the crucial role of the pediatric community in advocating for more commercially available, child-friendly formulations. Furthermore, while new formulations are being developed, their often-prohibitive pricing remains a critical issue. This session will discuss the need for the pediatric community to play an active role in ensuring fair and equitable pricing of these essential products.

Illustrative case studies will be presented to underscore the clinical risks associated with medication compounding and the impact of excessive pricing on medication access, bringing real-world insights into these urgent issues. Join us in this important conversation to help shape a more inclusive future for pediatric medicine.

Learning Objectives

1. Identify the Clinical and Regulatory Risks of Compounded Medications in Pediatric Care
2. Analyze the Barriers to Commercial Development of Pediatric-Specific Medications
3. Evaluate the Role of the Pediatric Community in Advocating for Access to Affordable, Child-Specific Medications

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Pediatricians, Pharmacists,
3. **Tracks**
Advocacy
Children with Chronic Conditions
Emergency Medicine
General Pediatrics

Hospital Medicine
Medical Education
Pharmacology and Therapeutics
Quality Improvement/Patient Safety

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
no
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
This topic applies to all clinicians and would be tailored to people interested in advocacy, QI and safety, and education
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Mini Doses - Mayor Impact: Eliminating the Risks Associated With
Compounding In Pediatric Medicines
Geert W. 't Jong, MD, PhD

Duration of Presentation in Minutes

20

Prescription for Change: Advocating For Affordable, Kid-Friendly Medicines
Charlotte Moore Hepburn, MD

Duration of Presentation in Minutes

20

Prescription Precision: Equipping Pediatric Prescribers With Essential Dosing
and Formulation Information

Diane E. Hindman, MD PharmD FAAP FACMT

Duration of Presentation in Minutes

30

(163) Proposal ID: 1927543

Overview of Antimicrobial Resistance and the Real-World Use of Novel Beta-lactams in the Pediatric Population

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Taylor Morrisette**

Score: **0**

Participant(s)

Taylor Morrisette, PharmD, MPH (he/him/his)

Position:

Assistant Professor

Organization:

Medical University of South Carolina College of Pharmacy

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Session Description

Session Description

The problematic misuse of antimicrobials within pediatric medicine is fueled by the lack of real-world, pediatric-specific data. Additionally, bacteria exhibiting multidrug-resistance (MDR) and/or difficult-to-treat resistance (DTR) further contribute to this major clinical challenge and substantially to morbidity and mortality. Commonly used options to treat pathogens with these highly resistant phenotypes are further restricted in children by contraindications/precautions (i.e. novel tetracyclines, fluoroquinolones, trimethoprim/sulfamethoxazole) or by unfavorable pharmacokinetic (PK) profiles, wide interpatient variabilities, and toxicities (i.e. polymyxins, aminoglycosides). Although novel beta-lactam/beta-lactamase inhibitors (BL/BLI) have been developed and shown to be safer and more effective against these pathogens in adults, data are essentially non-existent in children. Therefore, there is an urgent and unmet clinical need for real-world data surrounding the use of novel BL/BLI in the pediatric population to help guide appropriate therapy.

The primary objectives of this session are to review the mechanisms of antimicrobial resistance in gram-negative bacteria, discuss approaches for managing infections caused by organisms exhibiting this genotypes/phenotypes, and review the real-world data surrounding the use of novel BL/BLI in children.

Thank you for your consideration.

Learning Objectives

1. Describe the most common mechanisms and clinical implications for frequently encountered antimicrobial-resistant bacteria
2. Discuss evidence-based treatment approaches and novel beta-lactams for antimicrobial resistant gram-negative infections
3. Review the available data and identify the current role of novel beta-lactams in the pediatric population

Scholarly Session Questions

1. **Audience Size**

75

2. **Target audience**

General pediatricians, pediatric intensivists, and pediatric infectious diseases specialists

3. **Tracks**

Critical Care

Hospital Medicine

Infectious Diseases

Neonatology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

N/A

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

9. **If your session was presented at another conference, please describe the conference and presentation.**

Parts of this presentation were presented at the 2024 American Society of Microbiology (ASM) Annual Meeting

10. **Additional comments**

Thank you for your consideration - feel free to email me at Tam271@musc.edu if there is anything that I can clarify! I planned to give this presentation myself (although, I can recruit others, if needed); hence, why I listed myself as submitter, speaker, and chair on the following task.

(164) Proposal ID: 1900601

Putting the 'pnew' in pneumonia

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Erin Ho**

Score: **0**

Participant(s)

Jillian Cotter, MD, MSCS (she/her/hers)

Position:

Assistant Professor

Organization:

University of Colorado School of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Denver Niles, MD, D(ABMM)

Position:

Assistant Professor of Pediatrics, Pathology and Immunology

Organization:

Baylor College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Erin Ho, MD (she/her/hers)

Position:

Fellow, Pediatric infectious diseases

Organization:

University of Colorado School of Medicine

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, PIDS

Samuel Dominguez, MD, PhD (he/him/his)

Position:

Professor of Pediatric Infectious Disease

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
PIDS

Jeffrey Gerber, MD, PhD (he/him/his)

Position:
Professor of Pediatrics and Epidemiology

Organization:
Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, PIDS

Session Description

Session Description

This proposed hot topic symposia will be focused on the latest research evidence, expert perspectives, and unanswered questions related to the diagnosis and management of pediatric community-acquired pneumonia (CAP), which remains the leading cause of morbidity and mortality for children globally. In particular, the proposed session will focus on the utility of biomarkers (e.g., CBC, CRP, procalcitonin, the novel MeMed Bacterial vs. Viral test) in the initial diagnosis of bacterial vs. viral CAP and their role in monitoring of children with pneumonia, new developments in invasive and non-invasive modalities for molecular detection of pneumonia pathogens (e.g., lower

respiratory tract and pleural fluid syndromic vs. targeted PCRs, metagenomic microbial cell-free DNA sequencing), and updates in the antimicrobial treatment of CAP (e.g., oral vs. IV treatment, duration of antibiotics for uncomplicated and complicated CAP). The session will cover both mild cases of CAP that can be managed in an outpatient setting and severe, complicated CAP requiring surgical intervention. We expect the session will be engaging for a diverse group of conference attendees at all levels of experience, including inpatient and outpatient clinicians, trainees, pharmacists, researchers, and epidemiologists.

Learning Objectives

1. Consider the role of conventional and novel biomarkers in the diagnosis and monitoring of children with community-acquired pneumonia
2. Describe the landscape of new advanced molecular diagnostics for pneumonia pathogen detection and discuss the challenges and opportunities for diagnostic stewardship of new tests
3. Discuss new trends and shifts in the antimicrobial treatment of bacterial community-acquired pneumonia and consider how these updates may impact clinical practice

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Clinicians, trainees, pharmacists
3. **Tracks**
Core Curriculum for Fellows
Critical Care
Emergency Medicine
General Pediatrics
Hospital Medicine
Infectious Diseases
Pharmacology and Therapeutics
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
n/a

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Topic addresses important updates in pediatric community-acquired pneumonia involving Infectious Diseases, General Pediatrics, Hospital Medicine, Critical Care, Pharmacy
9. **If your session was presented at another conference, please describe the conference and presentation.**
n/a
10. **Additional comments**

Presentation Titles and Durations

Speaker introductions and Q&A

Jillian Cotter, MD, MSCS

Duration of Presentation in Minutes

5

Clinical utility of traditional and novel biomarkers in the diagnosis and management of community-acquired pneumonia

Denver Niles, MD, D(ABMM)

Duration of Presentation in Minutes

30

Molecular diagnostic testing for complicated community-acquired pneumonia: Opportunities and challenges

Erin Ho, MD

Duration of Presentation in Minutes

15

Molecular diagnostic testing for complicated community-acquired pneumonia: Opportunities and challenges

Samuel Dominguez, MD, PhD

Duration of Presentation in Minutes

15

Updates in the treatment of community-acquired pneumonia

Jeffrey Gerber, MD, PhD

Duration of Presentation in Minutes

30

(165) Proposal ID: 1895641

Cord Wars – May the Force be with the Baby: Controversial topics in umbilical cord management

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Anup Katheria**

Score: **0**

Participant(s)

Anup Katheria, M.D.

Position:

Associate Professor of Pediatrics

Organization:

University of California, San Diego School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Heike Rabe, MD, PhD (she/her/hers)

Position:

Professor of Perinatal Medicine

Organization:

Brighton and Sussex Medical School, University of Sussex

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS

Ola Andersson, MD PhD (he/him/his)

Position:

Associate professor

Organization:

Lund University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Satyan Lakshminrusimha, MD (he/him/his)

Position:

Professor and Chair

Organization:

University of California Davis Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Judith Mercer, PhD, CNM (she/her/hers)

Position:
Professor Emerita

Organization:
University of Rhode Island

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Tonse NK Raju, DCH, MD

Position:
Program Officer

Organization:
ECHO Program, Office of the Director, National Institutes of Health,
Bethesda, MD

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Session Description

Session Description

There is a large body of evidence that has now demonstrated that delayed cord clamping (DCC) has benefits for term and preterm infants. These benefits include reductions in morbidities such as mortality in preterm infants. However, there are several situations where immediate clamping is still performed, due to either a lack of evidence or knowledge that these infants also benefit from delayed cord clamping or other methods of providing a placental transfusion. This session will review the translation of bench to bedside, evidence from cord clamping trials and other cohort studies to date, and a physiological rationale for performing DCC in these special circumstances. We have assembled diverse experts on cord management including policymakers, midwives, neonatologists, physiologists and clinical trialists from around the world with extensive knowledge and experience with cord management strategies.

Learning Objectives

1. Upon completion, participants will be able to understand the translation of animal to human data for cord clamping practices
2. Upon completion, participants will be able to review the evidence or (or lack of) from the current trials and cohort studies to inform current practice
3. Upon completion, participants will be able to explore the knowledge gaps and future directions for cord clamping research.

Scholarly Session Questions

1. **Audience Size**
500
2. **Target audience**

Neonatologists, neonatal fellows and residents, and advance practice providers

3. **Tracks**

Clinical Research

Health Services Research

Neonatology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

n/a

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

Topic is placental transfusion involving neonatology, obstetrics, general pediatrics, and policy makers

9. **If your session was presented at another conference, please describe the conference and presentation.**

10. **Additional comments**

Presentation Titles and Durations

Placental menace: fetomaternal hemorrhage, abruptions and multiples
Anup Katheria, M.D.

Duration of Presentation in Minutes

12

Revenge of the infections COVID-19, HIV and other infections
Heike Rabe, MD, PhD

Duration of Presentation in Minutes

12

The Hemoglobin strikes back ABO incompatibility, polycythemia and hyperbilirubinemia

Ola Andersson, MD PhD

Duration of Presentation in Minutes

12

The rise of Fetal hemoglobin □ role in CDH and CCHD

Satyan Lakshminrusimha, MD

Duration of Presentation in Minutes

12

Growth Restriction: Keep the Force with the baby

Judith Mercer, PhD, CNM

Duration of Presentation in Minutes

12

The Story of Cord War □ A twisted story of cord management at birth

Tonse NK Raju, DCH, MD

Duration of Presentation in Minutes

12

(166) Proposal ID: 1930908

Lessons Learned: Effective DEI Programs That Have Moved the Needle Forward for Academic Pediatrics

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Fernando Mendoza**

Score: **0**

Participant(s)

Fernando S. Mendoza, MD, MPH (he/him/his)

Position:

Professor of Pediatrics, Emeritus

Organization:

Stanford University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS

Michael DeBaun, MD

Position:

Professor of Pediatrics

Organization:

Vanderbilt University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS

Morgan Walls, MD MS (she/her/hers)

Position:

Assistant Professor

Organization:

Atrium Health Wake Forest

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA

Glenn Flores, M.D. (he/him/his)

Position:

Chair of Pediatrics, Sr. Associate Dean of Child Health, and Physician-in-Chief

Organization:

University of Miami School of Medicine/Holtz Children's Hospital

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS, SPR

Lahia Yemane, MD (she/her/hers)

Position:

APD, Pediatrics Residency; Asst Dean, Diversity in GME

Organization:

Stanford University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Session Description

Session Description

Although there is a disproportionately low percentage of URiM faculty in academic pediatrics compared with the proportion of children of color, recent national efforts to limit DEI activities are making it challenging to increase URiM faculty diversity. Anti-DEI policies have been enacted in state legislatures or public universities in 22 states. Nonetheless, progress has been made in

developing programs to increase faculty diversity. In this session, a conceptual model is proposed for increasing URiM academic faculty, the 4 P's: Pool, Pathway, Professional development/identity, & Politics of DEI. Six successful DEI programs are then presented which have effectively delivered on the 4 P's over the past decades, including 1) pool development through community college programs, 2) a pathway into academic pediatrics for URiM medical students through an early matriculation program, 3) successes in professional development and identity of medical students, residents, fellows, and junior faculty through HBCU and Hispanic Serving Institutions partnerships for medical students' research experiences, academic exposure for residents through the New Century Scholars Program, and professional development of fellows and junior faculty through the Research in Academic Pediatrics Initiative on Diversity (RAPID), and 4) addressing changing DEI politics by reframing DEI as human-capital development as demonstrated by exemplary programs such as Leadership Education in Advancing Diversity and the increasing activities of academic societies to support diversity.

The connectivity and lessons learned in the 4 P areas by leaders of these programs will be the basis for audience discussion on moving forward with DEI efforts in academic pediatrics.

Learning Objectives

1. Upon completion, participants will be able to describe the 4 P model for increasing URiM faculty diversity in academic pediatrics.
2. Upon completion, participants will be able to describe the program components throughout the faculty pipeline that can improve each of the 4 "P".
3. Upon completion, participants will be able to discuss the value of developing our nation's human capital as part of framing future DEI discussions.

Scholarly Session Questions

1. Audience Size

100

2. Target audience

URiM faculty, Departmental DEI officers, Pediatric Academic leaders, Pediatric faculty, URiM resident, fellows, and junior faculty

3. Tracks

Academic and Research Skills
Career Development
Diversity, Equity, and Inclusion
General Pediatrics

Health Equity/Social Determinants of Health
Leadership and Business Training
Medical Education
Wellness and Well-being

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None unknown
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
NA
8. **Does this submission involve one or more specialties or disciplines?**
DEI presentation- all presenters are academic pediatricians
9. **If your session was presented at another conference, please describe the conference and presentation.**
NA
10. **Additional comments**
NA

Presentation Titles and Durations

The 4 P Model for Advancing Diversity in Academic Pediatrics: Increasing the Pool and Improve Pathways

Fernando S. Mendoza, MD, MPH

Duration of Presentation in Minutes

10

How to Create Successful Partnerships with HBCUs and HSIs for Professional Development of URiM Trainees

Michael DeBaun, MD

Duration of Presentation in Minutes

8

Professional Development of URiM Residents for Pediatric Academic Careers: Lessons Learned from New Century Scholars

Morgan Walls, MD MS

Duration of Presentation in Minutes

8

Professional Development Through the RAPID Solution for Advancing Diversity
in Academic Pediatrics

Glenn Flores, M.D.

Duration of Presentation in Minutes

8

Changing the Politics Around Diversity: The LEAD Program for Inclusion

Lahia Yemane, MD

Duration of Presentation in Minutes

10

(167) Proposal ID: 1931901

May the Force Be With You: Initiatives to Revitalize and Sustain the Pediatric Workforce

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Kenya McNeal-Trice**

Score: **0**

Participant(s)

Kenya McNeal-Trice, MD (she/her/hers)

Position:

Professor of Pediatrics, Senior Vice Chair of Education

Organization:

University of North Carolina at Chapel Hill

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS

April Buchanan, MD (she/her/hers)

Position:

Senior Associate Dean for Academic Affairs/ Prof of Pediatrics

Organization:

University of South Carolina School of Medicine Greenville

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Priyanka Rao, MD (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

University of North Carolina at Chapel Hill School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian, White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Emma Omoruyi, MD/MPH

Position:

Professor of Pediatrics

Organization:

University of Texas Health Science Center at Houston

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Su-Ting T. Li, MD, MPH (she/her/hers)

Position:

Professor

Organization:

University of California Davis

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS

Dewesh Agrawal, MD (he/him/his)

Position:

Vice-Chair for Education & ACGME Designated Institutional Official

Organization:

Professor of Pediatrics & Emergency Medicine, Children's National Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, APS, SPR

Louis Halamek, MD (he/him/his)

Position:
Professor and Attending Physician

Organization:
Stanford University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, SPR

Jennifer L. Trainor, MD (she/her/hers)

Position:
Professor of Pediatrics & Medical Education, Feinberg School of
Medicine

Organization:
Ann & Robert H. Lurie Children's Hospital of Chicago

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, SPR

Session Description

Session Description

National organizations, such as the AAMC, AMA and NIH, have been sounding the alarm for many years of the rapidly approaching physician workforce shortage. Several national initiatives have been implemented over the past 20 years to address physician shortages including the opening of new medical schools, increasing class sizes, and HRSA funding of residency training positions in underserved areas. Despite these initiatives, the decline in the pediatric physician workforce is accelerating beyond that of other specialties. Multiple factors further amplify the decline in the pediatric physician workforce as compared to other specialties, including fewer pediatric educators and preceptors within undergraduate medical education (UME), lower exposure to pediatric curricula in UME, educational loan debt, length of subspecialty training and lower compensation in practice. Many medical schools are reporting lower numbers of students entering pediatrics. The Match Week in March of 2024 bore witness to only 91.8% of pediatric residency slots filling prior to the supplemental phase of the match.

This panel is comprised of members of the National Association of Distinguished Educators in Pediatrics. Panelists represent multiple clinical subspecialties and expertise within clinical practice, education, research, and public policy. The panel will present innovative and successful programming prioritizing multiple access points in the pathways to pediatric medical education, training, practice, research and leadership. The session will emphasize the vital importance of collaboration across health systems, academic centers, communities, and government entities to effectively address the decline in the pediatric physician workforce and Implement sustainable solutions.

Learning Objectives

1. Review the background, current state, and diverse factors contributing to the decline in pediatric physician and scientist workforce numbers

2. Describe and outline the importance of addressing all access points of the educational, training, and practice continuum in developing a thriving pediatric physician workforce
3. Discuss and Disseminate outcomes of successful initiatives to increase pediatric trainees, clinicians, scientists, and leaders in under-resourced areas

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
GME Program Leadership - Residency Program Directors, Fellowship Program Directors, Vice Chair of Education, Chief Residents, ACGME Designated Institutional Officials
Trainees - Medical Students, Residents, Fellows
Administrative Leadership - Vice Chairs of Education, Department Chairs Administrators
Program Coordinators
Medical School Administrative Leaders (Deans, Chairs, Chief Officers)
Pediatric Faculty
3. **Tracks**
Advocacy
Diversity, Equity, and Inclusion
General Pediatrics
Leadership and Business Training
Medical Education
Wellness and Well-being
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Conflicting Events would include other Scholarly workshops or panel discussions accepted from participating workshop leaders.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide**

an explanation of the non-member speaker selection so that PAS staff may request approval.

N/A

8. Does this submission involve one or more specialties or disciplines?

Speakers represent clinical subspecialties including General Pediatrics, Hospital Medicine, Neonatology. Speakers have administrative and leadership expertise in Medical Education, Faculty Development, Simulation, Public Health, and DEI, Leadership. All Speakers are members of the National Association of Distinguished Educators in Pediatrics. There is a junior faculty member panelist who has published specifically in this topic area being mentored within national presentations.

9. If your session was presented at another conference, please describe the conference and presentation.

No

10. Additional comments

Panelists who are listed with the same title presentation are co-presenting the information.

Recruitment, Retention, and Well-being of Pediatric Resident and Fellow Trainees (Su-Ting Li and Dewesh Agrawal)

Developing Faculty to Thrive in Academic and Research Settings (Louis Halamek and Jennifer Trainor)

Presentation Titles and Durations

May the WorkForce Be With You: Initiatives to Revitalize and Sustain the Pediatric Workforce

Kenya McNeal-Trice, MD

Duration of Presentation in Minutes

10

Star Wars □ A New Hope: Pathway Programming to Support Successful Recruitment and Admissions into Medical School

April Buchanan, MD

Duration of Presentation in Minutes

12

The Empire Strikes Back: Prioritizing Pediatric Curricula, Mentoring, and Advising within UME

Priyanka Rao, MD

Duration of Presentation in Minutes

12

Return of the Jedi: Identification, Development, and Sustainability of Pediatric Preceptors in Clinical Settings

Emma Omoruyi, MD/MPH

Duration of Presentation in Minutes

12

The Force Awakens: Recruitment, Retention, and Well-being of Pediatric Resident and Fellowship Trainees

Su-Ting T. Li, MD, MPH

Duration of Presentation in Minutes

6

The Force Awakens: Recruitment, Retention, and Well-being of Pediatric Resident and Fellowship Trainees

Dewesh Agrawal, MD

Duration of Presentation in Minutes

6

The Rise of Skywalker: Developing Faculty to Thrive in Academic and Research Settings

Louis Halamek, MD

Duration of Presentation in Minutes

6

The Rise of Skywalker: Developing Faculty to Thrive in Academic and Research Settings

Jennifer L. Trainor, MD

Duration of Presentation in Minutes

6

(168) Proposal ID: 1930495

Point of Care Ultrasound for the General Pediatrician: PoCUS in the Evaluation of Pneumonia

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **John Aubrey**

Score: **0**

Participant(s)

Preetha Kurian, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Cohen Children's Medical Center

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Sudha N. Parashar, MD (she/her/hers)

Position:

Assistant Professor

Organization:

northwell

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

John R. Aubrey, MD MS (he/him/his)

Position:

Fellow

Organization:

Cohen Children's Medical Center

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Session Description

Session Description

Infectious respiratory disease is common in pediatrics, but the etiology is not always clear. Lung point of care ultrasound (PoCUS) is a fast and relatively simple evaluation that can be done in the office or at the bedside and offer

insight into uncertain cases without exposing patients to radiation. This session will give a brief dive into lung PoCUS with a specific focus on one of the more common applications, evaluating for pneumonia. The session will cover a review of the literature on PoCUS in the evaluation of pneumonia, a basic approach to performing lung PoCUS, how to interpret images, and end with a couple cases.

Learning Objectives

1. Discuss the current literature on lung PoCUS in evaluating for pneumonia
2. Understand a basic approach to image acquisition in lung PoCUS
3. Identify markers of pneumonia and effusion on lung PoCUS

Scholarly Session Questions

1. **Audience Size**
40
2. **Target audience**
General pediatricians, pediatric hospitalists, emergency physicians, urgent care physicians, or anyone else who manages pediatric infectious respiratory disease
3. **Tracks**
Community Pediatrics
Core Curriculum for Fellows
Emergency Medicine
General Pediatrics
Hospital Medicine
Infectious Diseases
Social Media & Technology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
n/a
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide**

an explanation of the non-member speaker selection so that PAS staff may request approval.

8. **Does this submission involve one or more specialties or disciplines?**

Topic is pneumonia involving General Pediatrics, Emergency Medicine, and Hospital Medicine

9. **If your session was presented at another conference, please describe the conference and presentation.**

10. **Additional comments**

Presentation Titles and Durations

Review of the Literature on Lung PoCUS in the Evaluation of Pneumonia
Preetha Kurian, MD

Duration of Presentation in Minutes

15

Image Acquisition in Lung PoCUS
Sudha N. Parashar, MD

Duration of Presentation in Minutes

10

Interpretation of Imaging on Lung PoCUS
John R. Aubrey, MD MS

Duration of Presentation in Minutes

20

(169) Proposal ID: 1920186

The NICU at a Crossroads: Where Pain, Sedation, and Delirium Converge

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Olivia Ruth**

Score: **0**

Participant(s)

Olivia Ruth, MD (she/her/hers)

Position:
Clinical Instructor

Organization:
University of Michigan Medical School

Role:

Submitter;Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Chani Traube, MD, FAAP, FCCM

Position:
Professor of Pediatrics

Organization:
Weill Cornell Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Emma L. Ross, PharmD (she/her/hers)

Position:

Clinical Pharmacy Specialist

Organization:

Children's Hospital Colorado

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Ferras Bashqoy, PharmD, BCPPS, BCCCP (he/him/his)

Position:

NICU Pharmacy Specialist

Organization:

Hassenfeld Children's Hospital at NYU Langone

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Elana Siegel, MD (she/her/hers)

Position:
Assistant Professor

Organization:
The Mount Sinai Kravis Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

Advances in neonatal care over the last several decades have contributed to the evolution of an aging and increasingly complex patient population in neonatal intensive care units (NICUs). Long hospitalizations, high burdens of medical comorbidities, complex polypharmacy, and developmental immaturity place neonates at high risk of delirium, a diagnosis which puzzles many NICU clinicians as they disentangle its symptoms from pain, agitation, and withdrawal. Delirium has been independently associated with both short- and long-term morbidity in pediatrics, though its identification and diagnosis can be challenging in the NICU environment. Developing a stronger understanding of

delirium in this population presents a substantial opportunity for improvement in neonatal care. This session will highlight the changing landscape of the level IV NICU, discuss the overlap in clinical presentation of pain, agitation, withdrawal, and delirium in neonates and their long-term impacts, review the evaluation and management of delirium in the NICU population, and discuss the nuances of pharmacologic management of analgesedatives in neonates.

Learning Objectives

1. Develop an understanding of the conundrums NICU clinicians encounter in the management of pain, sedation, and delirium in the level 4 NICU.
2. Describe how bedside delirium screening may be applied in the NICU to improve recognition of ICU delirium and facilitate diagnosis in term and term-corrected infants.
3. Develop a framework for management of sedatives and analgesics in infants that centers the unique physiology of the developing brain.

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

This session will be specifically oriented toward the interdisciplinary NICU team (physicians, APPs, pharmacists, therapists, etc.) but may be of interest to anyone who cares for critically ill newborns and infants, including pediatric or cardiac intensivists, pharmacists, or psychiatrists.

3. **Tracks**

Critical Care

Mental Health

Neonatology

Neurology

Palliative Care

Pharmacology and Therapeutics

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Friday, April 25

Saturday, April 26

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

There are no other known scheduling conflicts at the time of this submission.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Emma Ross and Ferras Bashqoy are members of PPA (Pediatric Pharmacy Association) but as pharmacists have not been nominated for any of the above medical organizations. The role of the pharmacist is crucial in critical care settings and in managing analgesia, sedation, delirium, and withdrawal in neonates. Having speakers who can reflect this perspective is felt to be vitally important. Elana Siegel has previously been a member of the AAP but is no longer an active member, though is an actively practicing pediatric hospitalist at an academic medical center.

8. **Does this submission involve one or more specialties or disciplines?**

Pediatric critical care, hospital pediatrics, neonatology, clinical pharmacy

9. **If your session was presented at another conference, please describe the conference and presentation.**

10. **Additional comments**

The final presentation will be a joint presentation by Emma Ross and Ferras Bashqoy. There was no clear way to enter a joint presentation in the speaker view but this should be reflected in the titles.

Presentation Titles and Durations

How did we end up here, and where are we going next?: Challenges in pain, sedation, and delirium in the NICU

Olivia Ruth, MD

Duration of Presentation in Minutes

15

Demystifying delirium: Detecting, preventing, and managing delirium in high-risk infants

Chani Traube, MD, FAAP, FCCM

Duration of Presentation in Minutes

20

Neurodevelopmental framework for analgosedative use in the NICU

Emma L. Ross, PharmD

Duration of Presentation in Minutes

20

Neurodevelopmental framework for analgesedative use in the NICU
Ferras Bashqoy, PharmD, BCPPS, BCCCP

Duration of Presentation in Minutes

20

Beyond the NICU: Improving outcomes for high-risk infants
Elana Siegel, MD

Duration of Presentation in Minutes

20

(170) Proposal ID: 1906674

Surviving and Thriving: Innovations in Pediatric Critical Care Outcomes Research

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Cyndni Williams**

Score: **0**

Participant(s)

Cyndni Williams, MD, MCR (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Doernbecher Children's Hospital at Oregon Health & Science University

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Trevor Hall, PsyD, ABPdN (he/him/his)

Position:

Professor of Pediatrics; Pediatric Neuropsychologist

Organization:

Doernbecher Children's Hospital at Oregon Health & Science University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA

Debbie A. Long, N/A, BN MN(Crit Care) PhD (she/her/hers)

Position:

Professor of Nursing

Organization:

Queensland University of Technology

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Session Description

Session Description

Each year more than 300,000 children are admitted to pediatric intensive care units (PICUs) for life-threatening critical illness or injury resulting from conditions such as cardiac arrest, traumatic brain injury, sepsis, and severe

pneumonia. Advances in hospital-based medical care have drastically reduced PICU mortality, and resulted in increasing rates of chronic morbidity in survivors. The 98% of children that survive the PICU suffer a multitude of serious transdiagnostic morbidities after hospital discharge. Post-intensive care syndrome in pediatrics (PICS-p) refers to the constellation of physical, cognitive, and psychosocial health problems experienced by children who survive critical illness and the psychosocial health sequelae faced by their families and caregivers. Knowledge of how to optimize recovery after hospital discharge lags behind research in hospital-based lifesaving technologies and procedures. In this symposium, we will present new research on transdiagnostic PICS-p morbidities in physical, cognitive, and psychosocial health domains. Our expert multidisciplinary speakers will address advances in measurement of PICS-p, incorporating patient and family perspectives with objective multidimensional assessments, and new interventions for optimizing recovery across domains. The speakers will highlight current evidenced-based interventions from inpatient to outpatient recovery, active intervention research within the biopsychosocial framework, and the interdependence of PICS-p domains in intervention research. With increasing PICU survival, ongoing collaboration between multidisciplinary clinicians and researchers is integral to the identification of more comprehensive PICS-p screening tools, elucidating risk factors for poor outcomes, and developing effective interventions to optimize PICS-p recovery.

Learning Objectives

1. Identify common morbidities in pediatric critical care survivors and families encompassed by post-intensive care syndrome.
2. Compare and contrast measurement techniques for PICS morbidities using multiple perspectives and objective assessments.
3. Identify evidenced based therapeutic interventions for the transdiagnostic morbidities of PICS in physical, cognitive, and psychosocial health domains.

Scholarly Session Questions

1. **Audience Size**
40
2. **Target audience**
Pediatric Critical Care, Clinical outcomes research, Integrated behavioral health
3. **Tracks**
Academic and Research Skills
Children with Chronic Conditions

Clinical Research
Critical Care

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Pediatric Critical Care sessions and abstract presentations

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr. Trevor Hall is a US based pediatric neuropsychologist working exclusively with the PICU population. Dr. Debbie Long is a pediatric nurse and PhD researcher in Australia and a leader in ANZICS for pediatric outcomes and clinical trials. Both are recognized experts within the field of PICU outcomes research (cognitive and psychosocial health and interventions) and will have broad appeal to pediatric physicians and clinicians working in critical care. Their presentations will complement Dr. Williams' work as a pediatric intensivist with clinical and research expertise in PICU outcomes. All speakers are grant funded researchers in PICU outcomes and have relevant clinical expertise in post-ICU care.

8. **Does this submission involve one or more specialties or disciplines?**

Yes- Dr. Cydni Williams is a pediatric intensivist. Dr. Trevor Hall is a pediatric neuropsychologist. Dr. Debbie Long is a PICU nurse researcher.

9. **If your session was presented at another conference, please describe the conference and presentation.**

This session in the current format of combined topics has not been presented. Each speaker has presented at multiple conferences internationally on related topics.

10. **Additional comments**

Drs. Williams, Hall, and Long have published extensively in their respective areas of PICU outcomes research and have active clinical trials for PICU survivors.

Presentation Titles and Durations

Post-intensive care syndrome in pediatrics: the role of sleep and pain in pediatric critical care survivorship

Cyndi Williams, MD, MCR

Duration of Presentation in Minutes

30

Proactive assessment of cognition in pediatric critical care survivors: innovative approaches to measurement and intervention

Trevor Hall, PsyD, ABPdN

Duration of Presentation in Minutes

25

Novel interventions for post traumatic stress in patients and parents after pediatric critical care

Debbie A. Long, N/A, BN MN(Crit Care) PhD

Duration of Presentation in Minutes

35

(171) Proposal ID: 1930284

Pediatric Mental Health: Treating Caregivers to Treat Their Children

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Rachel Gilgoff**

Score: **0**

Participant(s)

Rachel Gilgoff, MD, FAAP (she/her/hers)

Position:

Adjunct Clinical Associate Professor

Organization:

Rachel Gilgoff

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Robin Ortiz, MD, MSHP, FAAP, DipABLM (she/her/hers)

Position:

Assistant Professor of Pediatrics and Population Health

Organization:

New York University Grossman School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA

Mikah C. Owen, MD, MPH, MBA (he/him/his)

Position:

Co-Principal Investigator, UCAAN

Organization:

University of California, Davis, School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Session Description

Session Description

Dr. Vivek H. Murthy recently released an advisory, "Parents Under Pressure: The U.S. Surgeon General's Advisory on the Mental Health & Well-Being of Parents" calling for urgent, tangible support for parents, caregivers, and families. This panel of clinicians will present concrete strategies and evidence-based practices to support caregivers in pediatric practice. Dr. Gilgoff will set

the stage by describing the literature linking caregiver stress, trauma, mental health, warmth, and parenting style with children's mental and physical health. She will then focus on tangible ways busy pediatric clinics can support individual caregiver's health and wellness as a critical piece to helping children heal. Dr. Ortiz will discuss broader family and community approaches to decrease parental stress and improve pediatric health outcomes. She will present two complimentary models – Dyadic Behavior Change and Community-Based Participatory Research (CBPR) as a foundation for addressing caregiver well-being in clinical practice. We don't have to do this work alone. Dr. Owens will discuss structural and policy approaches to support caregivers and families. He will describe his experience as a pediatrician with the Juvenile Justice System in Davis, California as well as the role state initiatives and grant funding can play to further support clinics and healthcare systems to do this work.

Learning Objectives

1. Describe the science linking caregiver mental health with offspring health.
2. Use tangible strategies to support caregivers in your clinical practice starting now.
3. Advocate for systems- and policy-level changes to support caregivers in your community and state.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Pediatric clinicians interested in mental health.
3. **Tracks**
Advocacy
Child Abuse & Neglect
Community Pediatrics
Developmental and Behavioral Pediatrics
Health Equity/Social Determinants of Health
Mental Health
Public Health
Wellness and Well-being
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

One or more of our speakers are also involved in two other proposals: (1) Advancing Precision Medicine by Measuring ACEs, Toxic Stress, and Intervention Efficacy with Policy Implications and (2) Pediatric Mental Health: How Addressing Childhood Trauma and Toxic Stress in Primary Care Can Increase Access to Care and Improve Outcomes.

6. Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?

Yes

7. If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.

N/A

8. Does this submission involve one or more specialties or disciplines?

The topic is Pediatric Mental Health involving Child Abuse & Neglect, General Pediatrics, Community Pediatrics, Developmental and Behavioral Pediatrics, Public Health, Health Equity and Diversity, and Social Drivers of Health.

9. If your session was presented at another conference, please describe the conference and presentation.

N/A

10. Additional comments

Thank you for your time and consideration.

Presentation Titles and Durations

Healing Strategies for Caregiver Stress

Rachel Gilgoff, MD, FAAP

Duration of Presentation in Minutes

30

Family and Community Approaches

Robin Ortiz, MD, MSHP, FAAP, DipABLM

Duration of Presentation in Minutes

30

Supporting Caregivers of System-Impacted Youth: Structural and Policy Approaches

Mikah C. Owen, MD, MPH, MBA

Duration of Presentation in Minutes

30

(172) Proposal ID: 1930426

Bots for Tots: Artificial Intelligence and Machine Learning in Pediatric Care and Research

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Judith Dexheimer**

Score: **0**

Participant(s)

Judith Dexheimer, PhD (she/her/hers)

Position:

Professor

Organization:

Cincinnati Children's Hospital Medical Center

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Eneida Mendonca, MD, PhD

Position:

Professor and Division Director

Organization:

Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Peter J. Embi, MD, MS (he/him/his)

Position:

Professor & Dept Chair

Organization:

Vanderbilt University Medical Center

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Sara Van Driest, MD, PhD (she/her/hers)

Position:

Director of Pediatrics, All of Us Research Program

Organization:

National Institutes of Health, Office of the Director

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

Session Description

Session Description

Machine learning (ML) and artificial intelligence (AI) are transforming many sectors, but their application in pediatrics is still in its early stages. This field presents unique challenges and opportunities for pediatricians to conceptualize and integrate AI methods in their practice.

Dr. Dexheimer, a biomedical informaticist at CCHMC, will explore how ML and AI can improve diagnostic accuracy, predict outcomes, and tailor treatments in pediatric care, with an emphasis on early detection of developmental disorders and leveraging electronic health records. She will also discuss challenges such as data privacy and equitable access.

Dr. Mendonça, Director of the Division of Biomedical Informatics at CCHMC, will delve into the use of AI-driven language models in pediatric mental health. These tools can assess conditions like anxiety or depression through speech and behavior analysis, enabling early interventions. She will address concerns related to data security, model accuracy, and ethical considerations.

Dr. Embí, Chair of Biomedical Informatics at Vanderbilt University, will highlight ethical challenges in AI use, including privacy, consent, algorithmic bias, and equity. He will emphasize the need for transparent and responsible AI use in pediatric informatics.

Dr. Van Driest, a leader in the All of Us research program, will discuss how diverse datasets can drive AI to improve health equity and outcomes in pediatric care, focusing on the inclusion of underrepresented populations.

Learning Objectives

1. Upon completion, attendees will be able to describe machine learning in common terms and provide examples of applying machine learning to pediatric care.
2. By the end of the session, attendees will understand the challenges and ethical considerations of using machine learning for research and child health.
3. Upon completion, participants will understand state of the art research being performed with clinical data and examine potential impact of new models.

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Trainees, general and community pediatricians, academic researchers, and all people who are interested in medical informatics and machine learning research as applied to pediatrics.
3. **Tracks**
Academic and Research Skills
Clinical Research
EHR/Medical Informatics
Social Media & Technology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Medical Informatics, Ethics, Pediatrics
9. **If your session was presented at another conference, please describe the conference and presentation.**
Prior PAS with a slightly different set of speakers.

10. Additional comments

Presentation Titles and Durations

Big Data for Tiny Patients: Applications and Integration of Machine Learning
Judith Dexheimer, PhD

Duration of Presentation in Minutes

20

Advancing Pediatric Mental Health with Language Models: Opportunities and Ethical Challenges

Eneida Mendonca, MD, PhD

Duration of Presentation in Minutes

20

The Ethics of Machine Learning Research in Pediatrics

Peter J. Embi, MD, MS

Duration of Presentation in Minutes

20

Advancing Pediatric Research and Health Equity: The Potentially Intersecting Roles of AI and the All of Us Research Program

Sara Van Driest, MD, PhD

Duration of Presentation in Minutes

20

(173) Proposal ID: 1924990

The Pediatric Behavioral Mental Health Epidemic: What's Happening in Pediatric Subspecialty Care?

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Laurel Leslie**

Score: **0**

Participant(s)

Cori Green, MD, MSc (she/her/hers)

Position:

Associate Professor of Clinical Pediatrics

Organization:

NewYork-Presbyterian Komansky Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, SPR

Rebecca Sanders, MD, PhD (she/her/hers)

Position:

Pediatrics Residency Program Director

Organization:

Emory University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Andrew C. Dwyer, PhD (he/him/his)

Position:

Andrew C Dwyer

Organization:

American Board of Pediatrics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Carole Lannon, MD MPH (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

JoAnna Leyenaar, MD PhD MPH (she/her/hers)

Position:
Professor of Pediatrics

Organization:
Dartmouth Health

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Becky Lois, PhD

Position:
Director of Psychology

Organization:
Hassenfeld Children's Hospital at NYU Langone

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Laurel K. Leslie, MD MPH (she/her/hers)

Position:
Vice-President, Research

Organization:
American Board of Pediatrics

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, APS

Session Description

Session Description

In 2019, the American Academy of Pediatrics (AAP) published a policy statement on the behavioral mental health (BMH) needs of US children from conception through young adulthood. That statement stressed the role of both general and subspecialty pediatricians in preventing, identifying, and addressing BMH needs. The inclusion of pediatric subspecialists drew on increasing documentation of the unique BMH challenges children with serious acute or chronic medical conditions and their families face across ambulatory, inpatient, and critical care settings.

The BMH needs of children rapidly escalated with the Covid-19 pandemic. Simultaneously, new guidelines on screening for anxiety, depression, and suicidality were published by the US Preventive Services Task Force and the AAP partnered with the Centers for Disease Control and Prevention to publish a suicide prevention toolkit.

Drawing on data collected by the American Board of Pediatrics, Association of Pediatric Program Directors, and independent researchers, this scientific session will address several critical questions: How has the current BMH crisis impacted the pediatric subspecialty workforce compared with general pediatricians? Do subspecialty fellows, program directors, and recent graduates view BMH as their responsibility and are they adequately prepared by current training? How common is screening for anxiety, depression, and suicidality in pediatric subspecialty settings and how can we improve timely identification of children's BMH needs? What types of interventions exist to help subspecialists better manage BMH care?

Speakers will share recent research findings and novel interventions. Q & A will provide opportunities for participants to share information from their work and/or institutions.

Learning Objectives

1. State the impact of the current BMH crisis among children from conception through young adulthood cared for by the pediatric subspecialty workforce
2. Understand the perceptions of current subspecialty fellows, recent graduates, and subspecialty pediatricians regarding their preparation for and role in caring for children with BMH needs
3. Identify several novel approaches to addressing the BMH needs of children with serious acute or chronic medical conditions

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

Pediatric subspecialists, medical educators, policy makers, general pediatricians co-managing children with pediatric subspecialists

3. **Tracks**

Children with Chronic Conditions

Core Curriculum for Fellows

Diversity, Equity, and Inclusion

Epidemiology

Health Services Research
Medical Education
Mental Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Some of the speakers are listed in other hot topics submissions on mental health or workforce.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
The non-member speakers are psychologists. Dr. Lois is speaking on integrating psychologists into subspecialty clinics. Dr. Dwyer is sharing ABP data.
8. **Does this submission involve one or more specialties or disciplines?**
This topic is speaking about children with behavioral mental health needs cared for by pediatric subspecialists, including neonatology, hospital medicine, emergency medicine, adolescent medicine, developmental-behavioral medicine, child abuse, and the nine other systems-based pediatric subspecialties.
9. **If your session was presented at another conference, please describe the conference and presentation.**
NA.
10. **Additional comments**

Presentation Titles and Durations

Subspecialty fellows and current pediatric subspecialists: Perspectives, needs, and solutions

Cori Green, MD, MSc

Duration of Presentation in Minutes

12

Fellowship directors and recent graduates: Perspectives, needs, and solutions

Rebecca Sanders, MD, PhD

Duration of Presentation in Minutes

12

The American Board of Pediatrics' subspecialty practice analyses:

Perspectives, needs, and solutions

Andrew C. Dwyer, PhD

Duration of Presentation in Minutes

10

Incorporating anticipatory guidance, surveillance, and communication tools In subspecialty settings: The Roadmap project

Carole Lannon, MD MPH

Duration of Presentation in Minutes

12

Addressing behavioral mental health in emergency departments and inpatient settings

JoAnna Leyenaar, MD PhD MPH

Duration of Presentation in Minutes

12

Embedding psychologists in subspecialty outpatient clinics

Becky Lois, PhD

Duration of Presentation in Minutes

12

Improving behavioral mental health for children, adolescents, and young adults cared for by pediatric subspecialists

Laurel K. Leslie, MD MPH

Duration of Presentation in Minutes

5

(174) Proposal ID: 1912318

Cardiorenal syndrome: The intersection of cardiac and kidney disease

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Katherine Dell**

Score: **0**

Participant(s)

Katherine M. Dell, MD (she/her/hers)

Position:

Professor of Pediatrics and Director of Clinical and Translational Research

Organization:

Cleveland Clinic Children's

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

Black or African American, White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR, ASPN

Scott Sutherland, MD

Position:

Clinical Professor

Organization:

Stanford University School of Medicine

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS, ASPN

Chloe E. Douglas, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics, Division of Nephrology

Organization:

Doernbecher Children's Hospital at Oregon Health & Science University

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

ASPN

Tara M. Neumayr, MD (she/her/hers)

Position:

Associate Professor

Organization:

Washington University in St. Louis School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
ASPN

Alexander J. Kula, MD, MHS (he/him/his)

Position:
Assistant Professor of Pediatric Nephrology

Organization:
Ann & Robert H. Lurie Children's Hospital of Chicago

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, ASPN

Seth Adam Hollander, MD (he/him/his)

Position:
Clinical Professor

Organization:
Stanford University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

The overall goal of the session is to discuss the intersection of cardiac and kidney disease. This session will cover topics including cardiorenal syndrome definitions, pathophysiology and management and acute kidney injury (AKI) and chronic kidney disease (CKD) management in children with heart failure. Kidney disease after cardiac transplantation will also be discussed including the risk of CKD, proteinuria, and hypertension as well as reno-protective considerations in the choice of immunosuppression regimens.

Learning Objectives

1. Provide an overview of cardiorenal syndrome including definitions, pathophysiology and management
2. Discuss the management of AKI and CKD in children with heart failure
3. Learn to diagnose and manage kidney disease after heart transplantation and understand reno-protective immunosuppression regimens

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Pediatric Nephrologists, Pediatric Cardiologists, Pediatric Nephrology and Cardiology trainees
3. **Tracks**
Cardiology
Children with Chronic Conditions
Critical Care
Nephrology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Seth Hollander will deliver Schnaper Lectureship, which is an ASPN sponsored endowed lectureship
8. **Does this submission involve one or more specialties or disciplines?**
Yes, Nephrology, Cardiology
9. **If your session was presented at another conference, please describe the conference and presentation.**
Not applicable
10. **Additional comments**
None

Presentation Titles and Durations

Overview of cardiorenal syndrome

Tara M. Neumayr, MD

Duration of Presentation in Minutes

30

Managing kidney disease in heart failure

Alexander J. Kula, MD, MHS

Duration of Presentation in Minutes

30

Kidney disease following cardiac transplantation: The H. William Schnaper lectureship

Seth Adam Hollander, MD

Duration of Presentation in Minutes

30

(175) Proposal ID: 1908839

Thriving Beyond the NICU: Optimizing Lifelong Health for Adult Preemies

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Steven Abman**

Score: **0**

Participant(s)

Steven H. Abman, MD (he/him/his)

Position:

Professor

Organization:

University of Colorado School of Medicine

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS, SPR

Lauren Ingledow (she/her/hers)

Position:

Co-founder / Director

Organization:

Adult Premie Advocacy Network CIC

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Michelle M. Kelly, PhD, CRNP, FAANP, FAAN (she/her/hers)

Position:

Associate Professor

Organization:

Villanova University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Sharon McGrath-Morrow, MD (she/her/hers)

Position:

Professor

Organization:

Childrens Hospital of Philadelphia

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Francesca Polverino, MD PhD

Position:
Lester and Sue Smith professor of medicine

Organization:
Baylor College of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

Marked improvements in perinatal care have increased the survival of preterm infants throughout the NICU course and into childhood. With increased survival, there has been a growing awareness of late respiratory sequelae and other health issues throughout childhood, which continue into adulthood. However, many practitioners outside of the NICU may be unaware of the impact of premature birth on numerous problems across the lifespan, especially as related to lung disease, and there is a clear need to increase awareness of patients and care providers regarding the risks for other co-morbidities. This session focuses on addressing the need to recognize how a

history of preterm birth impacts health across the lifespan, with the goal of increasing early interventions in the ambulatory setting after NICU discharge and optimizing anticipatory management of diverse health problems by pediatric and adult care providers. This session will include an adult born preterm to highlight under-recognized health care issues; an academic nursing professor who has extensive experience with many challenges in linking vital patient needs with developing a greater awareness of pediatric and adult health care providers on the impact of preterm birth history; and presentations from pediatric and adult pulmonary physicians to tackle respiratory and cardiovascular outcomes that contribute to many late morbidities throughout infancy and childhood, as well as up-to-date information on the importance of developing and applying innovative respiratory care strategies to enhance long-term outcomes, particularly as related to progressive development of chronic obstructive pulmonary disease (COPD).

Learning Objectives

1. understand the nature of health-related challenges in accessing optimal health care across the lifespan as faced by adults with a history of preterm birth;
2. recognize the importance of anticipating diverse late complications of prematurity and to develop optimal care strategies through anticipatory guidance and interventions across the lifespan;
3. become aware of prematurity-associated lung disease, the need to proactively assess and treat respiratory diseases, especially as related to the risks for early COPD.

Scholarly Session Questions

1. **Audience Size**

200

2. **Target audience**

Neonatologists, general pediatricians, pediatric pulmonologists, pediatric cardiologists, nurses and advanced practitioners, psychologists, respiratory therapists, and other pediatric subspecialists more broadly.

3. **Tracks**

Advocacy

Asthma

Children with Chronic Conditions

Community Pediatrics

Developmental and Behavioral Pediatrics

Neonatology

Public Health
Pulmonology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Lung Club

Howland Dinner

Neonatal Follow-up Club

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

1- Lauren Ingledow is a patient who also initiated and leads the Adult Premie Advocacy Network CiC; She provides very unique expertise to the symposium based on her life experiences as an adult who was born premature as well as her leadership of and engagement with the Adult Premie Advocacy Network, in which she can add even greater insights here.

2- Michelle Kelly is an academic nursing professor with particular expertise on health care issues and access as related to diverse medical problems of adults born prematurely. Michelle's expertise and academic focus on this theme is well-established, and she will draw on extensive and unique knowledge to the symposium.

3- Francesca Polverino is an adult pulmonologist with special academic and clinical experience in pre-COPD, especially as related to premature birth. Unlike pediatric pulmonary experts, Dr. Polverino adds invaluable knowledge in current characterization of early COPD and the impact of various therapeutic interventions.

8. **Does this submission involve one or more specialties or disciplines?**

Yes- Neonatology; advocacy; general pediatrics; pulmonary medicine; public health; and other sub specialists and therapists engaged in long term follow-up of infants, children and adults born preterm.

9. **If your session was presented at another conference, please describe the conference and presentation.**

This symposium has not previously presented in this format. However, 2 of these speakers will be presenting at a session of the Chronic Lung Disease Conference sponsored by the Children's Hospital of

Philadelphia in March, 2025. This is a small conference and although the content of the 2 speakers will likely be similar, the overall session here includes a pediatric pulmonologist and a physician in adult pulmonary medicine that are NOT included in the talks in Philadelphia, as described above.

10. **Additional comments**

this session will provide a diverse platform of presentations from a patient's experience, a global view as related to public health issues and outlines diverse medical and mental health concerns; and links between pediatric and adult respiratory disease and transitions of care.

Presentation Titles and Durations

"Life Outside The Box - Lived Experience of an Adult Born Preterm"

Lauren Ingledow

Duration of Presentation in Minutes

30

Relevance of preterm birth history to adolescent and adult health

Michelle M. Kelly, PhD, CRNP, FAANP, FAAN

Duration of Presentation in Minutes

30

Spectrum of prematurity-associated lung diseases in school-age children with BPD

Sharon McGrath-Morrow, MD

Duration of Presentation in Minutes

15

Early Origins of Airflow Limitation: Pathways to Adult Respiratory Health

Francesca Polverino, MD PhD

Duration of Presentation in Minutes

15

(176) Proposal ID: 1931713

Spotlight on Septic Shock: A Discussion on Pathophysiology, Organ Dysfunction, and Management

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Ashraf Kharrat**

Score: **0**

Participant(s)

Gabriel Altit, MDCM, MSc, FRCPC, FASE (he/him/his)

Position:

Neonatologist - Assistant Professor

Organization:

McGill University Faculty of Medicine and Health Sciences

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Faith Zhu, MBChB (she/her/hers)

Position:

Assistant Professor

Organization:

University of Toronto Temerty Faculty of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Ashraf Kharrat, MD MSc(HQ) FRCPC

Position:

Staff Neonatologist

Organization:

Mount Sinai Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Koert de Waal, PhD (he/him/his)

Position:

A/Prof

Organization:

University of Newcastle (Australia)

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

There remains a great deal of variability in the management of neonates with septic shock in neonatal intensive care units. Septic shock remains one of the most common causes of neonatal morbidity and mortality, particularly among extremely preterm infants. Evidence to guide the management of infants with septic shock lags behind that available in older populations; therefore, a thorough appreciation of the underlying pathophysiology and evaluation of clinical indices of organ function are critical to providing care.

This session will provide attendees a physiologic approach to the assessment of neonatal septic shock, focusing on recognition and management of hemodynamic dysfunction.

Learning Objectives

1. Outline the challenges in identifying sepsis, and highlight the foundational cardiovascular principles that come into play in the diagnosis of septic shock.
2. Describe various pathophysiologic circulatory disturbances that may characterize hemodynamic dysfunction and hypoxemic respiratory failure in septic shock.
3. Highlight a physiologic-based approach to therapeutic management of infants with septic shock.

Scholarly Session Questions

1. **Audience Size**

250

2. **Target audience**
Neonatologists, neonatal NPs, neonatal nurses, infectious disease specialists
3. **Tracks**
Critical Care
Infectious Diseases
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Hemodynamics Club
Any neonatal hemodynamics programming
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
n/a
8. **Does this submission involve one or more specialties or disciplines?**
Neonatology and Infectious Diseases
9. **If your session was presented at another conference, please describe the conference and presentation.**
n/a
10. **Additional comments**
n/a

Presentation Titles and Durations

Recognizing shock: clinical monitoring of hemodynamic dysfunction

Gabriel Altit, MDCM, MSc, FRCPC, FASE

Duration of Presentation in Minutes

15

Physiology of septic shock: practice essentials

Faith Zhu, MBChB

Duration of Presentation in Minutes

15

Hypoxemic respiratory failure in septic shock: global approach
Ashraf Kharrat, MD MSc(HQ) FRCPC

Duration of Presentation in Minutes

15

Fluid therapy in septic shock: how much and what to give; Putting it all together: therapeutic management

Koert de Waal, PhD

Duration of Presentation in Minutes

30

(177) Proposal ID: 1932574

Adrenal Insufficiency from Chronic Systemic and Inhaled Corticosteroids: A Screening and Care Guide for Neonatal and Pediatric Non-Endocrinologists.

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Cathrine Constantacos**

Score: **0**

Participant(s)

Alexandra Ahmet, MD, FRCPC (she/her/hers)

Position:

Pediatric Endocrinologist, Associate Professor of Pediatrics

Organization:

Children's Hospital of Eastern Ontario

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Sean Watson, MD (he/him/his)

Position:

Neonatology - Fellow

Organization:

Wake Forest Baptist Health - Brenner Children's Hospital

Role:

Speaker

Ethnicity

Prefer not to respond

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Cathrine Constantacos, MD, FAAP

Position:

Associate Professor, Pediatric Endocrinology

Organization:

Wake Forest School of Medicine - Brenner Children's Hospital/ AHWFB

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Session Description

Session Description

Join us for an engaging session on an innovative Adrenal Suppression Program, designed to improve the screening and management of adrenal insufficiency from chronic corticosteroid exposure (a.k.a. adrenal suppression)

and its severe complication of adrenal crisis in pediatric patients from infancy to adolescence. With the rising use of corticosteroids and no established national pediatric guidelines in the U.S., there is an urgent need to address adrenal suppression to reduce morbidity and mortality.

This session will offer practical guidance for primary care providers, acute care teams, and non-endocrine specialists on how to identify at-risk patients and manage their care effectively.

Dr. Alexandra Ahmet (Associate Professor, Pediatrics, University of Ottawa, Canada; international expert in pediatric adrenal suppression) will commence the session with an overview of adrenal suppression, highlighting existing international guidelines and expert insights.

Following that, Dr. Sean Watson (Neonatology Fellow, Wake Forest University, School of Medicine, Winston Salem, NC) will share findings from the neonatal ICU Adrenal Rounds, focusing on screening algorithms for infants and clinical management strategies from diagnosis to home care, along with the results achieved thus far.

Finally, Dr. Cathrine Constantacos (Associate Professor, Pediatrics, Director Adrenal Suppression Program, Wake Forest University, School of Medicine, Winston Salem, NC) will present the Adrenal Suppression Program's approach for older children, detailing emergency management protocols and sharing the program's data and outcomes to date.

This comprehensive approach aims to empower healthcare providers with the knowledge necessary to prevent adrenal crises and improve patient outcomes.

Learning Objectives

1. assess the risk of adrenal suppression in pediatric patients using the screening algorithm.
2. understanding and implementing the adrenal suppression management care plan to mitigate adrenal crisis risk.
3. optimize workflow to integrate adrenal suppression screening efficiently.

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**

For all pediatric primary care or pediatric subspecialty providers (physicians, APP) who are prescribing inhaled or systemic corticosteroids (-oral/ IM/ IV/ etc.), including General Pediatricians, Family Medicine, Neonatologists, Pulmonologists, Nephrologists, Heme/Oncologists, Rheumatologists, Gastroenterologists, Neurologists, etc., and acute care and surgical providers (Emergency Medicine providers, Surgical specialists, Anesthesiologists, etc.) treating pediatric patients chronically exposed to corticosteroids, and who want help with recommendations how to identify adrenal crisis risk and prevent morbidity and mortality.

Also, recommended for trainees of any clinical track to learn to recognize adrenal suppression risk early in their training and practice.

3. Tracks

Allergy, Immunology and Rheumatology
Asthma
Children with Chronic Conditions
Community Pediatrics
Critical Care
Emergency Medicine
Endocrinology
Gastroenterology/Hepatology
General Pediatrics
Hematology/Oncology
Hospital Medicine
Neonatology
Nephrology
Neurology
Pulmonology
Quality Improvement/Patient Safety

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided.

Not Applicable

5. Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?

no

6. Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?

No

7. If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.

Dr. Watson - AAP member

Dr. Constantacos: AAP member. Unable to renew membership by August 1st and currently site not allowing renewal. Will renew when the system allows. Dr Constantacos is the Director of the US Adrenal Suppression program with unique US expertise in organized adrenal suppression management.

Dr. Ahmet- is not an active AAP member. Her international expertise - she is an internationally recognized expert in adrenal suppression- will be of great benefit to the audience and ensuing discussions.

8. Does this submission involve one or more specialties or disciplines?

Yes.

Topic is Adrenal Insufficiency from corticosteroid exposure (a.k.a. Adrenal Suppression) and involves Neonatology, Endocrinology, General Pediatrics, Surgical and Acute care and all subspecialties prescribing corticosteroids.

9. If your session was presented at another conference, please describe the conference and presentation.

Most of the presentation has not been presented.

Part of the session (adrenal suppression in older children) was presented by Dr. Constantacos to an audience of endocrinology providers only at recent 2024 PES meeting (Pediatric endocrine Society) as invited Adrenal SIG session and was very well received. Resulted in invitation of Dr. Constantacos back to PES 2025 for a Meet-the-professor presentation on adrenal suppression.

The PAS presentation will be catered to non-endocrinologists.

The Neonatal and Infantile approach and results have not been presented to date.

10. Additional comments

Our Adrenal Suppression Program has received enthusiastic feedback at grand rounds presentations and the 2024 PES meeting.

This topic will be very beneficial for any provider who prescribes corticosteroids or treats patients with diagnosed or undiagnosed adrenal suppression in acute or surgical settings, where the risk of adrenal crisis is heightened. While adrenal insufficiency from corticosteroid exposure can be transient, adrenal crisis poses in the interim a serious, life-threatening risk if unrecognized and untreated.

Although guidelines (e.g. the GINA asthma guidelines) recommend screening for adrenal suppression after chronic corticosteroid exposure, there needs to be clear guidance for non-endocrine subspecialists on the exact steps for screening and management.

this session aims to bridge this knowledge gap, helping non-endocrinologists collaborate effectively with endocrinologists in diagnosing and managing adrenal suppression until its resolution.

Presentation Titles and Durations

Understanding Adrenal Suppression in Children with a highlight on existing international guidelines and current care gaps.

Alexandra Ahmet, MD, FRCPC

Duration of Presentation in Minutes

25

NICU Adrenal Rounds: Increasing Awareness and Standardizing Screening for At-Risk Infants on Long-Term Corticosteroids.

Sean Watson, MD

Duration of Presentation in Minutes

15

Practical Tools for Non-Endocrinologists to Screen and Manage Adrenal Insufficiency from Corticosteroids Beyond Infancy.

Cathrine Constantacos, MD, FAAP

Duration of Presentation in Minutes

30

(178) Proposal ID: 1928203

Multidrug-resistant Escherichia coli: Coming to a NICU Near You!

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Dustin Flannery**

Score: **0**

Participant(s)

Dustin D. Flannery, DO, MSCE

Position:

Assistant Professor of Pediatrics

Organization:

Children's Hospital of Philadelphia

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR, PIDS

Karen M. Puopolo, MD, PhD (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Perelman School of Medicine at the University of Pennsylvania

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR, PIDS

Scott J. Weissman, MD (he/him/his)

Position:

Professor

Organization:

Seattle Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Session Description

Session Description

Escherichia coli is one of the most widely studied organisms in biology, yet this complex microbe continues to cause significant morbidity and mortality worldwide. E. coli is the most common cause of neonatal early-onset sepsis (bacteremia and meningitis) among preterm infants and the second most common cause among term infants, second only to group B Streptococcus.

The bacterium is also a common cause of NICU late-onset sepsis, including bacteremia often associated with pneumonitis, necrotizing enterocolitis, and urinary tract infections. While prevention strategies for GBS have been extensively studied and implemented, there are no specific preventative measures for neonatal E. coli infection. Further, global antibiotic resistance among invasive E. coli strains is widespread, and multidrug resistance is increasingly common. This threatens the utility of first-line antibiotics and could lead to widespread broad-spectrum antibiotic exposure for at-risk newborns - and will ultimately propagate strains resistant to all available drugs. This Hot Topic Symposia will discuss the contemporary epidemiology of neonatal E. coli infections in the US and abroad with a focus on evolving antibiotic resistance. We will review lessons learned from maternal screening and targeted prophylaxis to prevent group B Streptococcus. Lastly, we will describe the genetic characteristics of invasive neonatal E. coli at the sequence type level as well as ongoing efforts to better understand the roles of virulence and antibiotic-resistance genes. Such analyses will inform new vaccine targets, identify markers of highly virulent or resistant strains, and suggest new targets for anti-virulence antibiotic-sparing therapies.

Learning Objectives

1. To discuss the current epidemiology of neonatal E. coli infections in the US and abroad
2. To review lessons learned from group B Streptococcus prevention strategies and compare and contrast to E. coli prevention
3. To describe the genetic characteristics of neonatal E. coli and ongoing efforts to better understand the roles of virulence and antibiotic-resistance genes

Scholarly Session Questions

1. **Audience Size**
75
2. **Target audience**
Neonatologists, pediatric infectious diseases, pediatric hospital medicine, pediatric pharmacists, microbiologists, trainees
3. **Tracks**
Infectious Diseases
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Neonatal Sepsis Club, Neonatal ID oral sessions
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Neonatologists, pediatric infectious diseases, pediatric hospital medicine, pediatric pharmacists, microbiologists, trainees
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**
This is a hot topic!

Presentation Titles and Durations

1) Opening and introductions (10min); 2) Epidemiology of multi-drug-resistant neonatal E. coli in the US and abroad (20min)

Dustin D. Flannery, DO, MSCE

Duration of Presentation in Minutes

30

Prevention of neonatal E. coli infection: Lessons from group B Streptococcus

Karen M. Puopolo, MD, PhD

Duration of Presentation in Minutes

20

Molecular characterization of neonatal E. coli strains to inform clinical practice

Scott J. Weissman, MD

Duration of Presentation in Minutes

20

(179) Proposal ID: 1925577

It's Tough Out Here: Navigating These Academic Streets

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Joseph Wright**

Score: **0**

Participant(s)

Joseph Wright, MD MPH (he/him/his)

Position:

Professor (adjunct) of Emergency Medicine, Pediatrics, Health Policy & Management

Organization:

George Washington University Schools of Medicine and Public Health

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS

Colin J. Orr, MD, MPH (he/him/his)

Position:

Assistant Professor

Organization:

Monroe Carell Jr. Children's Hospital at Vanderbilt

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Tiffani Johnson, MD (she/her/hers)

Position:

Associate Professor of Emergency Medicine

Organization:

UC Davis

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, SPR

Kenya McNeal-Trice, MD (she/her/hers)

Position:

Professor of Pediatrics, Senior Vice Chair of Education

Organization:

University of North Carolina at Chapel Hill

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, APS

Joelle N. Simpson, MD, MPH (she/her/hers)

Position:
Associate Professor of Pediatrics and Emergency Medicine

Organization:
Children's National Health System

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS

Session Description

Session Description

The academic medicine ecosystem poses unique challenges for underrepresented in medicine (URiM) faculty. While notable steps have been taken in the aftermath of the murder of George Floyd to promote diverse and inclusive environments, faculty around the country are now experiencing backlash and reactive headwinds related to the clawing back of equity-focused initiatives. Whether related to the imposition of untenable accountability metrics, unfunded mandates and/or under-resourced leadership roles, URiM

faculty have historically borne a disproportionate “tax” burden associated with balancing moral injury and navigating the academic landscape. Further, lack of psychological safety in the face of microaggressions, macroaggressions, or outright racism can exacerbate the toxicity of the URiM faculty experience.

The impact of internalized differential lived personal and professional experiences of URiM faculty on physiologic and psychologic well-being has been under-reported, and, certainly, under-investigated. This session transparently addresses some of the systemic challenges faced specifically by URiM academic faculty, and initiates frank discourse to overtly characterize and categorize common transgressions and their potential consequences. This session also represents nascent steps being undertaken by the American Academy of Pediatrics to both support its members and explore constructive ways to clear the structural brush that may be impeding the progress of all physician scientists and health services researchers who are committing their scholarship to the advancement of health equity. The session faculty is composed of participants in the AAP’s inaugural “Navigating These Academic Streets Summit” notably all of whom also occupy leadership roles across the organizations that comprise the Pediatric Academic Societies.

Learning Objectives

1. Identify systemic and structural inequities inherent in the academic medicine ecosystem.
2. Discuss the allostatic load burden associated with physiologic withering and weathering.
3. Define a pathway for academic and organized pediatrics to create meaningful and enduring community for underrepresented in medicine faculty.

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Health Services Researchers, Equity Scientists, Public Health Practitioners, Public Policy Advocates, General Pediatricians, Subspecialty Pediatricians, Academic Leaders, Medical Educators
3. **Tracks**
Academic and Research Skills
Career Development
Community Pediatrics
Diversity, Equity, and Inclusion

General Pediatrics
Health Equity/Social Determinants of Health
Health Services Research
Medical Education

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Diversity, Equity and Inclusion reception
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Community Pediatrics, General Pediatrics, Subspecialty Pediatric (all), Public Health, Medical Education
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Introduction: Challenges facing underrepresented in medicine faculty in the academic ecosystem

Joseph Wright, MD MPH

Duration of Presentation in Minutes

12

The leaky pathway for underrepresented in medicine faculty: What does the data show?

Colin J. Orr, MD, MPH

Duration of Presentation in Minutes

12

Pet to threat: Unique mentorship and sponsorship dynamics confronted by academic faculty

Tiffani Johnson, MD

Duration of Presentation in Minutes

12

Methylating DNA and withering telomeres: Impact of physiologic weathering on underrepresented in medicine faculty

Kenya McNeal-Trice, MD

Duration of Presentation in Minutes

12

Building an enduring and restorative community for underrepresented in medicine faculty: The role of organized pediatrics

Joelle N. Simpson, MD, MPH

Duration of Presentation in Minutes

12

(180) Proposal ID: 1927652

The Dizzy Adolescent: Is it POTS or Just Tuesday?

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Jennifer Woods**

Score: **0**

Participant(s)

Jennifer Woods, MD, MSc, MEd, FSAHM, FAAP

Position:

Professor of Pediatrics, Section of Adolescent Medicine

Organization:

University of Colorado School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Session Description

Session Description

Dysautonomia and postural orthostatic tachycardia syndrome (POTS) have gained considerable attention in the adolescent population and are often highlighted in the media and on social platforms. While recognizing autonomic dysfunction as a key cause of orthostasis, it is important to consider all possible causes of dizziness, orthostasis, fatigue and other associated symptoms in adolescents and young adults (AYA) and to take a holistic approach to ensure the most comprehensive and effective care.

Some of the most important causes of dizziness in the AYA population are related to nutrition and behavioral health as disordered eating, depression and anxiety are leading causes of dizziness. Additional focus is also needed in assessment of potential psychosocial factors that may be limiting access to food, water and other resources. Consideration of home, school and activities is also imperative for a complete picture when assessing the dizzy adolescent.

For individuals with autonomic dysfunction, it is imperative to consider non-pharmacologic and pharmacologic interventions with close consideration of other aspects of care in a holistic manner. This patient population also often has comorbid diagnoses requiring coordinated care across the medical system.

Dr. Woods works with adolescents in primary care and consultative sessions and sees multiple presentations of dizziness and orthostasis. She has a consultative clinic for AYA referred for possible autonomic function where she assesses the global patient with common diagnoses of dysautonomia, eating disorders, depression, anxiety, and chronic fatigue. This population is especially important to Dr. Woods as an individual with dysautonomia herself.

Learning Objectives

1. Analyze common causes of dizziness in the AYA population with consideration of psychosocial and behavioral health considerations.
2. Define dysautonomia and postural orthostatic tachycardia syndrome.
3. Explain potential therapeutic interventions for orthostasis in the AYA population including non-pharmacologic and pharmacologic treatment of patients autonomic dysfunction.

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

Providers, nurses, staff, behavioral health clinics, multidisciplinary teams caring for the AYA population

3. **Tracks**
Adolescent Medicine
Neurology
Wellness and Well-being
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Submission of workshop on Transition Medicine, submitting abstract on Transition Medicine
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
n/a
8. **Does this submission involve one or more specialties or disciplines?**
Autonomic dysfunction presented by Adolescent Medicine specialist with overlap of cardiology, neurology, general pediatrics, Adolescent framework
9. **If your session was presented at another conference, please describe the conference and presentation.**
n/a
10. **Additional comments**

Presentation Titles and Durations

The Dizzy Adolescent: Is it POTS or Just Tuesday?

Jennifer Woods, MD, MSc, MEd, FSAHM, FAAP

Duration of Presentation in Minutes

90

(181) Proposal ID: 1927338

AI and Peer-review of Manuscripts

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Mary Esther Rocha**

Score: **0**

Participant(s)

Mary Esther M. Rocha, MD, MPH (she/her/hers)

Position:

Associate Professor

Organization:

Baylor College of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

William Christopher Golden, MD (he/him/his)

Position:

Associate Professor of Pediatrics; Director, Core Clerkship in Pediatrics

Organization:

The Johns Hopkins University School of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, PIDS

Cynthia Bearer, MD, PhD (she/her/hers)

Position:

William & Lois Briggs Chair of Neonatology, Division Chief of Neonatology, Professor of Pediatrics

Organization:

UH Rainbow Babies & Children's Hospital/Case Western Reserve University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS, SPR

dimitri christakis, MD MPH (he/him/his)

Position:

Professor. Chief Health Officer Special Olympics

Organization:

University of Washington School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Andrea T. Cruz, MD (she/her/hers)

Position:
Professor

Organization:
Baylor College of Medicine

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Paul G. Fisher, MD

Position:
Professor, Neurology and Pediatrics

Organization:
Stanford University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Su-Ting T. Li, MD, MPH (she/her/hers)

Position:
Professor

Organization:
University of California Davis

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, APS

George K. Siberry, MD, MPH (he/him/his)

Position:
Chief Medical Officer

Organization:
USAID

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, PIDS

Jonathan R. Swanson, MD, MSc, MBA (he/him/his)

Position:
Professor of Pediatrics

Organization:
University of Virginia

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

Karen Wilson, MD, MPH (she/her/hers)

Position:
Professor

Organization:
University of Rochester School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, APS, SPR

Session Description

Session Description

The moderators, Drs. Golden and Rocha, are two of the course directors of the Peer Review of Manuscripts course taught in the Academic Pediatric Association Educational Scholars Program. Dr. Golden serves on the editorial board of The Journal of Pediatrics and Dr. Rocha is editor for PREP-Hospital Medicine.

The panelists, Drs. Bearer, Christakis, Cruz, Fisher, Li, Siberry, Swanson and Wilson are editors or deputy/associate editors of 8 major journals (Academic Pediatrics, Hospital Pediatrics, JAMA Pediatrics, Journal of Perinatology, Pediatric Research, Pediatrics, The Journal of Pediatrics, and The Pediatric Infectious Disease Journal).

Intro. Moderators, Panelists introduce themselves.

Concurrently, audience participates via live polling. (5 min)

Do you use AI in a professional capacity? participate in peer review?

Part I. Map the journal review process, identifying potential opportunities for AI use - Moderators

Concurrently, audience participates via polling. (10 min)

Have you used AI in peer review?

How likely are you to use AI in peer review?

Audience Q&A (5 min)

Part II. Pro-con debate of the ethical implications of AI at various points along the peer-review pathway - panelists (50 min)

Alternating, pro/con, panelists present their views

Part III. Active engagement allows participants to formulate their own informed opinions of AI use in the peer-review process.

Alternating:

1. Audience Q&A of panel

2. Audience participates via polling (15 min)

How likely are you to use AI in peer review?

In what capacity of peer review would you use AI?

Wrap up. Take home messages from the debate/discussion - Moderators (5 min)

Learning Objectives

1. delineate the steps in the journal peer-review process with the potential uses of AI.
2. debate the ethical implications for the use of AI in journal peer-review.
3. formulate an informed opinion on the ethical use of AI in journal peer-review.

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
All trainees and faculty interested in the impacts of AI on the peer-review process; Trainees and junior faculty interested in looking behind the curtain of journal peer-review
3. **Tracks**
Academic and Research Skills
Artificial Intelligence
Career Development
Clinical Research
Core Curriculum for Fellows
Health Services Research
Medical Education
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A

8. **Does this submission involve one or more specialties or disciplines?**

The pediatric specialties involved include: Neurology, Emergency Medicine, Infectious Diseases, Hospital Medicine, Medical Education, Neonatology

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

Presentation Titles and Durations

Introduction, Journal peer-review process, Wrap-up

Mary Esther M. Rocha, MD, MPH

Duration of Presentation in Minutes

10

Introduction. AI opportunities in journal peer-review. Wrap-up.

William Christopher Golden, MD

Duration of Presentation in Minutes

10

Debate. Q&A.

Cynthia Bearer, MD, PhD

Duration of Presentation in Minutes

9

Debate. Q&A.

dimitri christakis, MD MPH

Duration of Presentation in Minutes

9

Debate. Q&A.

Andrea T. Cruz, MD

Duration of Presentation in Minutes

9

Debate. Q&A.

Paul G. Fisher, MD

Duration of Presentation in Minutes

9

Debate. Q&A.

Su-Ting T. Li, MD, MPH

Duration of Presentation in Minutes

9

Debate. Q&A.

George K. Siberry, MD, MPH

Duration of Presentation in Minutes

9

Debate. Q&A.

Jonathan R. Swanson, MD, MSc, MBA

Duration of Presentation in Minutes

9

Debate. Q&A.

Karen Wilson, MD, MPH

Duration of Presentation in Minutes

9

(182) Proposal ID: 1933920

Rise Up: A Call to Action to Address Firearm Injuries in Children and Heal Our Communities

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Kenya McNeal-Trice**

Score: **0**

Participant(s)

Kenya McNeal-Trice, MD (she/her/hers)

Position:

Professor of Pediatrics, Senior Vice Chair of Education

Organization:

University of North Carolina at Chapel Hill

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS

April D. McNeill-Johnson, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Children's Mercy Hospitals and Clinics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Jeffrey Upperman, MD

Position:

Surgeon in Chief

Organization:

Monroe Carell Jr Childrens Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, PIDS

Xavier Williams, MD, MPH (he/him/his)

Position:

Assistant Professor of Pediatrics

Organization:

University of North Carolina at Chapel Hill School of Medicine

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
American Indian or Alaska Native, Black or African American

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Tamera Coyne-Beasley, MD, MPH (she/her/hers)

Position:
Vice-Chair, Pediatrics; Endowed Chair Adolescent Medicine; Division
Director, Adolescent Medicine

Organization:
University of Alabama at Birmingham

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, APS

Session Description

Session Description

Our country is experiencing an unprecedented crisis of firearm injuries and deaths. Firearm injuries are now the third leading cause of death in children. Despite unintentional firearm injuries being more common in younger children, more childhood deaths are associated with firearm use with intent to injure. For targeted injury prevention efforts to be effective, we must first understand the circumstance surrounding firearm injuries in children, adolescents, and

emerging adults. Prevention, management, and recovery of firearm injuries requires a multidisciplinary approach. However, there remain gaps in knowledge and resources for effective interventions, clinical practice guidelines, tracking outcomes, and assessing the social, emotional, and financial impact of critical violent injuries within communities and healthcare systems.

This panel is comprised of members of the American Pediatric Society's Council on Diversity, Inclusion, and Equity and represent multiple subspecialties with expertise in clinical practice, education, research, and public policy. The panel will discuss the emergency management of pediatric firearm injuries, the critical role of interdisciplinary collaboration, the impact on families and resources available to support them through recovery. Experts will highlight the disparate impact of firearm access and injuries on youth in carceral settings, and the unmet needs surrounding physical and emotional trauma. This session will outline best practices for community-based firearm injury prevention that attendees can implement within their own settings.

Learning Objectives

1. Recognize the impact of firearm injuries and violence on families and identify resources available to support them through recovery and ongoing care.
2. Discuss emergency management of pediatric firearm injuries and understand the critical role of interdisciplinary collaboration (e.g. social workers, chaplains, and law enforcement),
3. Identify the best practices for firearm injury interventions and create actionable plans for implementation within one's own clinical and community settings.

Scholarly Session Questions

1. **Audience Size**

150

2. **Target audience**

Medical Specialists - General Pediatricians, Hospitalists, Emergency Medicine, Critical Care, Surgery, Physical Medicine and Rehabilitation Health Services Researchers

GME Program Leadership - Residency Program Directors, Fellowship Program Directors, Vice Chair of Education, Chief Residents, ACGME Designated Institutional Officials

Trainees - Medical Students, Residents, Fellows

Administrative Leadership - Vice Chairs of Education, Department Chairs Administrators

Program Coordinators
Medical School Administrative Leaders (Deans, Chairs, Chief Officers)

3. **Tracks**

Advocacy
Critical Care
Emergency Medicine
General Pediatrics
Health Equity/Social Determinants of Health
Injury Prevention
Public Health
School and Community Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Conflicting Events would include other Scholarly workshops or panel discussions accepted from participating workshop leaders.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

Topic is Firearm injuries in children involving General Pediatrics, Pediatric Emergency Medicine, Hospital Medicine, Pediatric Surgery, Public Health, Social Determinants of Health, Advocacy, Injury Prevention

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

Presentation Titles and Durations

Rise Up: A Call to Action Addressing the Crisis of Firearm Injuries in Children
Kenya McNeal-Trice, MD

Duration of Presentation in Minutes

10

From Crisis to Support: A Multi-Disciplinary Approach to Pediatric Firearm Injury Management and Family Care.

April D. McNeill-Johnson, MD

Duration of Presentation in Minutes

15

The Rise of Unintentional Firearm Injuries in Young Children

Jeffrey Upperman, MD

Duration of Presentation in Minutes

15

The Role of Firearms for Youth Impacted by the Juvenile Justice and Carceral System.

Xavier Williams, MD, MPH

Duration of Presentation in Minutes

15

Clinical and Community Engaged Strategies for Firearm Injury Prevention

Tamera Coyne-Beasley, MD, MPH

Duration of Presentation in Minutes

15

(183) Proposal ID: 1924367

Genomics in Child Health

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Cynthia Bearer**

Score: **0**

Participant(s)

Cynthia Bearer, MD, PhD (she/her/hers)

Position:

William & Lois Briggs Chair of Neonatology, Division Chief of Neonatology, Professor of Pediatrics

Organization:

UH Rainbow Babies & Children's Hospital/Case Western Reserve University

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
APS, SPR

Olivier Fortin, MD, FRCPC (he/him/his)

Position:

Fetal-neonatal Neurologist

Organization:

Montreal Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Srirupa Hari Gopal, MBBS (she/her/hers)

Position:

Assistant Professor

Organization:

SSM Cardinal Glennon Children's Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Kelsey Sullivan, MD (she/her/hers)

Position:

Assistant Professor

Organization:

University of Pittsburgh Medical Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

Patrick McGann, MD PhD

Position:
Associate Professor of Pediatrics and Medicine

Organization:
The Warren Alpert Medical School of Brown University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS

Eleanor J. Molloy, MB PhD FRCPI (she/her/hers)

Position:
Chair and Professor of Paediatrics

Organization:
Trinity College, Paediatrics and Child Health

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
APS

Session Description

Session Description

Advances in genetics have significantly improved outcomes. In these four presentations, we will describe advances in prenatal diagnosis, the understanding and modification of epigenetic changes, and specific new genetic interventions for sickle cell anemia.

Olivier Fortin – Comprehensive prenatal genetic testing has become an essential tool that improves the accuracy of prognostication. The testing strategies of chromosomal microarray, exome sequencing, and genome sequencing will be presented. The significant ethical considerations associated with this practice prior to generalizing its use will be discussed.

Srirupa Hari Gopal - Epigenetics is the study of changes in gene expression, without a change in the DNA sequence that are potentially heritable. We review early life epigenetics, the influence of maternal health, maternal toxin, and drug exposures on the fetus, and its impact on perinatal, neonatal, and childhood outcomes.

Kelsey Sullivan - Oxytocin research is rapidly evolving and increasingly reveals that epigenetic modifications to the oxytocin receptor gene (OXTR) are functional, plastic, and reliable components of oxytocinergic system function. This presentation outlines how OXTR epigenetics are shaped by the early life environment, impact social-developmental outcomes, and have strong potential to serve as therapeutic targets.

Patrick McGann - Sickle cell disease (SCD) is an inherited disorder of hemoglobin that affects tens of millions of individuals worldwide. Recently, gene therapy has come to the forefront in sickle cell disease and brings the hope of a cure for many patients. We will present the two different gene therapy approaches to improving, maybe curing, this ancient scourge.

Learning Objectives

1. Describe the pros and cons of various strategies of prenatal genetic testing
2. Understand the impact of the modification of epigenetics

3. Evaluate the two new gene therapies for sickle cell anemia.

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

Medical Students, Residents, Fellows, Genetists (both prenatal and pediatric), Newborn hospitalists, Pediatricians, Subspecialists, Public Health practitioners. Basically, everyone.

3. **Tracks**

Clinical Research
Critical Care
Environmental Health
General Pediatrics
Genomics/Epigenomics
Hematology/Oncology
Neonatology
Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

APS Presidential Plenary, or our workshop if selected (Maximizing the Impact of your Publication),

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Olivier Fortin is the only speaker who is not a member of one of the listed organizations. However, he just finished a fellowship in perinatal neurology and is now an Assistant Professor at McGill University. He has 23 publications at this early stage in his career of which 15 are first authored. He was invited to the symposium for his recent accepted manuscript to Pediatric Research on "Advancing Fetal Diagnosis and Prognostication through Comprehensive Prenatal Genetic Testing."

8. **Does this submission involve one or more specialties or disciplines?**

Topic is Genomics in Child Health which involves pretty much everything in pediatrics and public health.

9. **If your session was presented at another conference, please describe the conference and presentation.**

This session has not been presented anywhere else.

10. **Additional comments**

Presentation Titles and Durations

Introduction to Genomics in Child Health

Cynthia Bearer, MD, PhD

Duration of Presentation in Minutes

5

Advancing Fetal Diagnosis and Prognostication through Comprehensive Prenatal Genetic Testing

Olivier Fortin, MD, FRCPC

Duration of Presentation in Minutes

20

Cord Blood Epigenomics and Childhood Outcomes

Srirupa Hari Gopal, MBBS

Duration of Presentation in Minutes

20

The Impact of the Early Environment on Oxytocin Receptor Epigenetics and Potential Therapeutic Implications

Kelsey Sullivan, MD

Duration of Presentation in Minutes

20

Advancements in Sickle Cell Disease Therapies and the Fostering of a Healthier Generation of Children

Patrick McGann, MD PhD

Duration of Presentation in Minutes

20

Questions & Answers

Eleanor J. Molloy, MB PhD FRCPI

Duration of Presentation in Minutes

5

(184) Proposal ID: 1926909

Neonatal Body Composition: New Perspectives for Enhanced Insights - A Primer.

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Pradeep Alur**

Score: **0**

Participant(s)

Pradeep Alur, MD (he/him/his)

Position:

Professor

Organization:

Penn State College of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Sreekanth Viswanathan, MD, MS (he/him/his)

Position:

Professor of Pediatrics

Organization:

Nemours Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Prabhu S. Parimi

Position:

Professor, Department of Pediatrics, CWRU

Organization:

MetroHealth Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Session Description

Session Description

In recent years, respiratory and nutritional care advancements have significantly improved preterm infants' survival and long-term health. However, research suggests that early body composition patterns can impact cognitive

functions in childhood. Adults born prematurely experience health issues stemming from their early birth.

The American Academy of Pediatrics recommends that preterm infants have growth rates similar to fetuses. Clinicians promote catch-up growth to help preterm babies reach their expected weight for their gestational age. However, this approach often changes body composition, with increased fat mass and decreased fat-free mass compared to full-term infants at the same age. A meta-analysis found that preterm infants have a higher percentage of fat mass and higher intra-abdominal fat but lower subcutaneous fat compared to term infants, which is associated with insulin resistance. Mother's milk provision may have a beneficial effect on body composition.

Air displacement plethysmography is a highly reliable method for measuring body composition in newborns. While the DEXA scan is trustworthy, it tends to overestimate body fat. Other methods to measure neonatal body composition include bioelectric impedance, MRI, isotope dilution, ultrasound, and skinfold thickness. We propose raising awareness among neonatal clinicians about the importance of ideal neonatal body composition. Specifically, we will discuss:

1. Pros and cons of the current methods available for body composition measurements,
2. The impact of nutrition on body composition in preterm infants and
3. Long-term follow-up data on body composition.
4. Utilizing body composition data to modify nutrition in the neonatal intensive care unit (NICU) and following discharge.

Learning Objectives

1. Upon completion, participants will be able to understand various tools to measure body composition in newborn infants.
2. Upon completion, participants will be able to understand the impact of current nutrition strategies on body composition of preterm infants
3. Upon completion, participants will be able to understand the long-term consequences of alterations in body composition in preterm infants.

Scholarly Session Questions

1. **Audience Size**

300

2. **Target audience**

Neonatologists, nutritionists, Neonatal nurse practitioners, Neonatal fellows.

3. **Tracks**

Neonatology

Obesity

Pediatric Nutrition

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Neonatal Pulmonology

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

NA

8. **Does this submission involve one or more specialties or disciplines?**

Involves, Nutritionists, Imaging specialty.

9. **If your session was presented at another conference, please describe the conference and presentation.**

NA.

10. **Additional comments**

Presentation Titles and Durations

The impact of nutrition on body composition in preterm infants

Pradeep Alur, MD

Duration of Presentation in Minutes

30

Pros and cons of different body composition measurements. Using body composition data to adjust nutrition in the preterm.

Sreekanth Viswanathan, MD, MS

Duration of Presentation in Minutes

30

Long-term follow-up data on body composition.

Prabhu S. Parimi

Duration of Presentation in Minutes

20

(185) Proposal ID: 1925301

All Adults Belong in Adult Hospitals - Or Do They?

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Ruchi Doshi**

Score: **0**

Participant(s)

Ruchi s. Doshi, MD MPH (she/her/hers)

Position:

Assistant Professor

Organization:

Duke University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Rachel Peterson, MD

Position:

Associate Professor of Medicine and Pediatrics

Organization:

Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Richard J. Chung, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

Perelman School of Medicine at the University of Pennsylvania

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Ashley Jenkins, MD, MSc (she/her/hers)

Position:

Assistant Professor of Medicine and Pediatrics

Organization:

Golisano Children's Hospital at The University of Rochester Medical Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, SPR

Session Description

Session Description

As adolescents with childhood-onset chronic conditions age, some individuals may continue to use the pediatric hospital system as adults. This is despite well-established healthcare transition guidelines agreed upon by the American Academy of Pediatrics, American College of Physicians, American Association of Family Practice, and most subspecialty societies. While common sense dictates that just as children belong in pediatric hospitals, adults belong in adult hospitals, clinician experience and over 20 years of pediatric hospital admission data demonstrate that this may not necessarily be true for all adult-aged patients.

Targeted at any clinician who works with adolescent patients with childhood-onset conditions who are broaching adulthood, this session highlights the data- and experience-driven perspectives of experts in pediatric-to-adult healthcare hospital transition. The pro-con debate format will highlight the current state of pediatric hospitals with a focus on (1) if there is a difference in the clinical expertise and safety of care available in pediatric versus adult hospitals for patients with childhood-onset conditions; (2) whether inpatient transfer from pediatric to adult hospitals should always be included in the pediatric to adult healthcare transition; and (3) whether transition policies and formalized practices can enable health equity and decrease healthcare disparities. Each topic will have 15 minutes of discussion on the “pro” side followed by 15 minutes of discussion on the “con” side.

Learning Objectives

1. Understand that adults have been and continue to be cared for in pediatric hospitals in the United States.

2. Evaluate the benefits and limitations of caring for adults with childhood-onset conditions in both the pediatric and adult hospital settings.
3. Examine how institutional guidelines and policies impact healthcare disparities for individuals with childhood-onset conditions.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Any clinicians caring for adolescents and young adults with childhood-onset conditions who may be admitted to general inpatient wards in the pediatric or adult setting (e.g., chronic kidney Disease, Inflammatory Bowel Disease, Type 1 Diabetes, Sickle Cell, Cerebral Palsy, Spina Bifida, Congenital Cardiac Defects).
3. **Tracks**
Adolescent Medicine
Children with Chronic Conditions
General Pediatrics
Health Equity/Social Determinants of Health
Hospital Medicine
Quality Improvement/Patient Safety
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Cars, ambulances, helicopters, and more: Navigating the admission, transfer, and transport processes
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes, this impacts anyone who cares for adolescents or young adults with childhood onset chronic conditions who may have periods of

overlapping adult and pediatric care (nephrology, endocrinology, neurology, pulmonology, cardiology, etc).

9. **If your session was presented at another conference, please describe the conference and presentation.**

10. **Additional comments**

We have four speakers but two speakers are going to speak twice, which I cannot put in the full submission. There is a breakdown of time and speakers below:

Pro: Adult hospitals provide high quality care for adults with childhood-onset conditions - Ruchi - 15 minutes

Con: Adult hospitals provide high quality care for adults with childhood-onset conditions - Rachel - 15 minutes

Pro: Eighteen years is the right age to transfer from pediatric to adult hospital care - Ruchi - 15 minutes

Con: Eighteen years is the right age to transfer from pediatric to adult hospital care - Richard - 15 minutes

Pro: Pediatric institutional guidelines and policies enable equitable care for adults with childhood-onset conditions - Ashley - 15 minutes

Con: Pediatric institutional guidelines and policies enable equitable care for adults with childhood-onset conditions - Rachel - 15 minutes

Presentation Titles and Durations

Pro: Adult hospitals provide high quality care for adults with childhood-onset conditions

Ruchi s. Doshi, MD MPH

Duration of Presentation in Minutes

30

Con: Adult hospitals provide high quality care for adults with childhood-onset conditions

Rachel Peterson, MD

Duration of Presentation in Minutes

30

Con: Eighteen years is the right age to transfer from pediatric to adult hospital care

Richard J. Chung, MD

Duration of Presentation in Minutes

15

Pro: Pediatric institutional guidelines and policies enable equitable care for adults with childhood-onset conditions

Ashley Jenkins, MD, MSc

Duration of Presentation in Minutes

15

(186) Proposal ID: 1900051

Addressing Ableism in Academic Pediatric Settings

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Dennis Kuo**

Score: **0**

Participant(s)

Dennis Z. Kuo, MD, MHS

Position:

Professor of Pediatrics

Organization:

Golisano Children's Hospital at The University of Rochester Medical Center

Role:

Submitter;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, SPR

Carolyn C. FOSTER, MD, MS (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Ann & Robert H. Lurie Children's Hospital of Chicago

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, SPR

Stefanie Ames, MD, MS (she/her/hers)

Position:

Associate Professor

Organization:

University of Utah School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Allysa Ware, PhD, MSW (she/her/hers)

Position:

Executive Director

Organization:

Family Voices

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

Ableism is discrimination against disabled people. Its recognition is integral to addressing diversity, equity, and inclusion efforts in academic pediatrics. One in six children has a disability, and an estimated 8% of medical students and the broader health care workforce report a disability, although this is likely underreported. Despite legal protections and increasing recognition of discrimination, people with disabilities continue to face significant disparities in health care access, health outcomes, and quality of care. Recognition and mitigation of ableism is integral to improving child health and family well-being as well as supporting a diverse healthcare workforce.

In recent years, academic pediatrics has increasingly recognized the impact of ableism in clinical care encounters, institutions and systems, and workforce development. Families of children with disabilities report significant barriers in care access, fragmented care, and dehumanization. Session attendees will learn about the latest research on ableism in pediatric clinical care, how the life course of children with disabilities is impacted by ableism, and how academic pediatric institutions and systems may perpetuate ableism. The presenters will review disability bias, studies of quality of life assumptions, system barriers including insurance gaps and home health supports, and clinician unwillingness to provide care. Our session will also present on ableism in pediatric workforce development and trainee support, and the impact of disability curricula through equity, diversity, and inclusion efforts. The presenters have extensive experience with disability systems, lived experience, research, and workforce training, including intersectionality between ableism and structural determinants of health.

Learning Objectives

1. Upon completion, participants will be able to recognize, describe, and address ableism in clinical pediatric care.
2. Upon completion, participants will be able to recognize institutional and systematic discrimination and discuss strategies to mitigate discrimination.
3. Upon completion, participants will be able to describe the impact of disability curricula in pediatric workforce development.

Scholarly Session Questions

1. **Audience Size**

75

2. **Target audience**

Pediatricians, clinicians, family leaders, educators, trainees, administrators

3. **Tracks**

Advocacy

Children with Chronic Conditions

Developmental and Behavioral Pediatrics

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

Medical Education

Palliative Care

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

no

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Allysa Ware, PhD, MSW is Executive Director of Family Voices. She is a family leader and researcher with extensive experience in family engagement, human relations, and system change, focusing on lived experience. Family Voices is a national group of family leaders that works closely with the academic pediatric and MCH communities regarding care systems for CYSHCN and children with disabilities.

Family Voices has completed extensive training and education work on ableism, intersectionality, and workforce for its own staff and for state and national collaborators. Dr. Ware is PI on several Family Voices initiatives, including a PCORI Eugene Washington Engagement Award and the ACL-funded Center for Transition to Adult Care for Youth With Disabilities. She is co-I and/or expert consultant to nationally supported pediatric initiatives, including: System of Care CYSHCN National Center (AAP), CYSHCN Research Network (co-I with Jay Berry, MD, MPH, Boston Children's Hospital, and Ryan Collier, MD, MPH, University of Wisconsin), CMC CollN (Academy Health), and the MCH Workforce Development Center. Finally, Dr. Ware is the Family Liaison to the AAP Council on Children With Disabilities. With her academic achievements, leadership experience, collaborations with the academic pediatrics community, and workforce training experience, Dr. Ware has the best credentials to present on the topic of disability visibility and curricula in workforce development for academic pediatrics.

8. **Does this submission involve one or more specialties or disciplines?**

no

9. **If your session was presented at another conference, please describe the conference and presentation.**

n/a

10. **Additional comments**

Presentation Titles and Durations

Evidence of Ableism in Pediatric Clinical Care

Carolyn C. FOSTER, MD, MS

Duration of Presentation in Minutes

20

Insights into Recognition and Mitigation of Institutional and Systemic Ableism in Pediatric Healthcare

Stefanie Ames, MD, MS

Duration of Presentation in Minutes

20

Disability Visibility and Curricula in Pediatric Workforce Development

Allysa Ware, PhD, MSW

Duration of Presentation in Minutes

20

(187) Proposal ID: 1928032

Irish and America approach to food allergy: The use of milk ladder vs traditional management in cows milk protein allergy (CMPA) IgE mediated

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Juan Trujillo**

Score: **0**

Participant(s)

Juan Trujillo, MD PhD (he/him/his)

Position:

Consultant paediatric allergist

Organization:

Cork University Hospital - University College Cork

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Sara Anvari, MD, MSc (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Texas Children's Hospital

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Jonathan O'B Hourihane, MD

Position:

Head of Department Paediatrics and Child Health

Organization:

Royal College of Surgeons in Ireland

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Session Description

Session Description

Cow's milk protein allergy (CMPA) is one of the most common food allergies in infancy and childhood, affecting approximately 1% of Irish infants and approximately 2% in the United States. Complete avoidance of milk protein is

the usual management worldwide. However, for over a decade in Ireland, the iMAP milk ladder has been the main strategy for reintroducing milk in children with CMPA IgE mediated. This debate will focus on updating the different approaches of an entire country using a dietary advanced therapy approach like the milk ladder in CMPA IgE patients, its potential benefits, its comparison to a more traditional approach like strict avoidance and differences with other therapies like oral immunotherapy.

The session will be delivered in 3 sessions by 3 expert allergists 2 from the Republic of Ireland and 1 from the United States of America. Each session will be 30 minutes with the following titles:

1. Classical approach of CMPA IgE in the US and different strategies across the country
2. A decade of milk ladder in Ireland: Safety and effectiveness as a country-based effort after learning from our mistakes.
3. Pros and cons of both management approaches, potential risks and benefits.

Learning Objectives

1. Understand the management cows milk protein allergy IgE mediated using milk ladder or classical strategies
2. Compare the different approaches to Cows' milk protein allergy that include dietetic advanced therapy approaches, its benefits and potential risks
3. Formulate an idea of the resources needed to adapt to new approaches to managing strategies of CMPA IgE in their pediatric area

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
General pediatricians
pediatric residents
pediatric allergist
pediatric nurses
medical students
pediatric dietetics
3. **Tracks**
Allergy, Immunology and Rheumatology
Gastroenterology/Hepatology
General Pediatrics
Pediatric Nutrition

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
none
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
2 International paediatric allergists based in the Republic of Ireland Prof Jonathan Hourihane and Dr Juan Trujillo
8. **Does this submission involve one or more specialties or disciplines?**
General Pediatrics, Allergy, Nutrition, Gastroenterology
9. **If your session was presented at another conference, please describe the conference and presentation.**
no
10. **Additional comments**
This will be the first time the Irish approach is presented as the publication of our management from the 2 major researchers in the area has exponentially skyrocketed in the last 3 years (Dr Juan Trujillo Senior Lecturer from University College Cork and Professor Jonathan Hourihane Royal College of Surgeons Ireland). We will be happy to share the session with our colleague Dr Sara Anvari associate professor of Baylor College of Medicine

Presentation Titles and Durations

Pros and cons of both management approaches, potential risks and benefits.

Juan Trujillo, MD PhD

Duration of Presentation in Minutes

30

Classical approach of CMPA IgE in the US and different strategies across the country

Sara Anvari, MD, MSc

Duration of Presentation in Minutes

30

A decade of milk ladder in Ireland: safety and effectiveness as a country-based effort after learning from our mistakes.

Jonathan O'B Hourihane, MD

Duration of Presentation in Minutes

30

(188) Proposal ID: 1931977

Literacy Through the Lifespan: Lessons Learned to Inform Healthcare Transition

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Julia LaMotte**

Score: **0**

Participant(s)

Julia E. LaMotte, PhD, HSPP (she/her/hers)

Position:

Assistant Professor of Clinical Pediatrics

Organization:

Riley Hospital for Children

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA, ASPN

Seethal A. Jacob, MD, MS (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Indiana University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

JEFFREY KARST, PhD (he/him/his)

Position:

Associate Professor of Pediatrics

Organization:

Medical College of Wisconsin

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Patrick McGann, MD PhD (he/him/his)

Position:

Associate Professor of Pediatrics and Medicine

Organization:

The Warren Alpert Medical School of Brown University

Role:

Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS

Session Description

Session Description

While the transition from pediatric to adult healthcare often occurs during emerging adulthood, the opportunity to better understand and intervene upon potential barriers begins in early childhood. Utilizing the example of a lifelong chronic health condition, sickle cell disease (SCD), invaluable lessons can be extrapolated through understanding the unique challenges in neurocognitive development, literacy, and disease self-management that are applicable to a multitude of childhood health conditions as well as general pediatrics.

This session will explore key lessons learned about these areas, emphasizing the impact of literacy promotion, social determinants of health (SDOH), and their interplay in improving disease self-management and transition readiness. This session aims to provide a comprehensive understanding of the neurocognitive, social, and educational challenges faced by individuals with SCD as they transition to adulthood. By highlighting successful embedded screening pathways, literacy initiatives, and the crucial role of SDOH, attendees will gain valuable insights into enhancing disease self-management and readiness for transition through integrated approaches.

Presented by subject matter experts, attendees will first learn of innovative approaches to capturing the neurocognitive impact of SCD throughout childhood and adolescence in an embedded interdisciplinary model. Second, utilizing state and national metrics, neurocognitive profiles will be better understood through disparities in resource access within the communities for which patients reside. Finally, tailored and culturally informed interventions will be presented as strategies for mitigating the impact on overall disease self-management and transition readiness.

Learning Objectives

1. understand the neurocognitive challenges commonly observed in children with sickle cell disease (SCD), including their impact on literacy and overall development.
2. analyze the influence of SDOH on neurocognitive functioning in children with SCD and identify how these factors contribute to variations in literacy and developmental outcomes.
3. be equipped to connect improved health literacy with enhanced disease self-management and transition readiness and implement strategies that promote literacy development within disease management programs.

Scholarly Session Questions

1. **Audience Size**

60

2. **Target audience**

General Pediatricians, Developmental Pediatricians, Hematology, Psychologists, Health Services Research, Quality Improvement

3. **Tracks**

Children with Chronic Conditions
General Pediatrics
Health Equity/Social Determinants of Health
Health Services Research
Hematology/Oncology
Literacy
School and Community Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

All speakers have submitted materials for other sessions within PAS.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Both Drs. Karst & LaMotte are members of the American Psychological Association, not American Pediatric Association. Psychologists are only able to be affiliate members for the AAP.

8. **Does this submission involve one or more specialties or disciplines?**
Hematology, Psychology, Neuropsychology, Health Science Research
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Books as Building Blocks: Tailoring Interventions to Promote Literacy and Disease Self-Management

Julia E. LaMotte, PhD, HSPP

Duration of Presentation in Minutes

20

Beyond Clinic Screening: How Neighborhood Impact Helps Explain Differences In Youth with Sickle Cell Disease

Seethal A. Jacob, MD, MS

Duration of Presentation in Minutes

20

Understanding & Efficiently Assessing the Cognitive Profile of Children and Adolescents with Sickle Cell Disease

JEFFREY KARST, PhD

Duration of Presentation in Minutes

20

(189) Proposal ID: 1925774

Assessment and Management of Hypertensive Target Organ Damage

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Daniel Feig**

Score: **0**

Participant(s)

Daniel I. Feig, MD/PhD (he/him/his)

Position:

Professor of Pediatrics

Organization:

University of Alabama, Birmingham, School of Medicine

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, ASPN

Joyce P. Samuel, MD, MS

Position:

Associate Professor of Pediatrics

Organization:

The University of Texas Health Science Center at Houston

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR, ASPN

Mark M. Mitsnefes, MD, MS

Position:

Professor of Pediatrics

Organization:

Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
ASPN

Don L. Batsky, MD (he/him/his)

Position:

Professor of Pediatrics, Associate Dean

Organization:

University of Cincinnati College of Medicine; Cincinnati Children's
Hospital Medical Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, ASPN

Session Description

Session Description

Progressive hypertensive target organ damage is the primary reason for both screening and treatment of hypertension in both youth and adults. Nevertheless, while pediatricians have greatly improved screening for elevated blood pressure, an understanding of the risks and mitigation of target organ damage has lagged behind. A thorough understanding of the epidemiology, mechanism and management of hypertensive target organ damage will allow identification of those in greater need of therapy, titration of medications and intensified screening as well as much more effective efforts to improve child health.

Learning Objectives

1. Upon completion, participants will be able to assess patients for acute renal and chronic renal hypertensive target organ damage.
2. Upon completion, participants will be able to assess and treat patients for cardiac and vascular damage from hypertension.
3. Upon completion, participants will be able to diagnose and treat the central nervous system injury seen in childhood hypertension.

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Nephrologist, cardiologists, neurologists, primary care pediatricians
3. **Tracks**

Cardiology
Children with Chronic Conditions
Epidemiology
General Pediatrics
Hypertension
Neurology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Hypertension and Nephrology sessions
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Hypertension is a topic germane to nephrology, cardiology and general pediatrics
9. **If your session was presented at another conference, please describe the conference and presentation.**
not applicable
10. **Additional comments**

Presentation Titles and Durations

Renal Target Organ Damage
Mark M. Mitsnefes, MD, MS

Duration of Presentation in Minutes
25

Neurocognitive Target Organ Damage
Don L. Batsky, MD

Duration of Presentation in Minutes
25

(190) Proposal ID: 1921266

Persistent Inflammation and Failed Recovery after Perinatal Brain Injury: The Path to New Therapies & Sustained Repair

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Hawley Helmbrecht**

Score: **0**

Participant(s)

Hawley Helmbrecht, PhD

Position:
Postdoctoral Fellow

Organization:
Johns Hopkins University School of Medicine

Role:

Submitter

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Eleanor J. Molloy, MB, PhD, FRCPI (she/her/hers)

Position:
Chair of Paediatrics

Organization:
Trinity College Dublin

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
APS, SPR

Pierre Gressens, MD, PhD (he/him/his)

Position:

Laboratory Director

Organization:

Inserù

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Carina Mallard, PhD (she/her/hers)

Position:

Professor

Organization:

University of Gothenburg

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Lauren Jantzie, PhD (she/her/hers)

Position:
Associate Professor

Organization:
Johns Hopkins University School of Medicine

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Session Description

Session Description

Since perinatal brain injury (PBI) is a major predictor of neurological disability, many physicians and physician-scientists focus on treatment and mechanistic studies to lower neonatal mortality and morbidity. PBI may persist for long ranges of time triggering both acute and persistent inflammation. However, resolution of acute inflammation after PBI is ineffective in long-term clinical recovery; persistent central and peripheral inflammation after acute resolution is the likely explanation for failed PBI recovery and improved outcomes.

Persistent inflammation is correlated with a disrupted placental-fetal-brain axis, altered innate immune system development, dysregulated immune-neural crosstalk, and adjusted inflammatory signatures. The combination of altered development caused by PBI and persistent inflammation results in lifelong changes to immune responsiveness, neural networks maintenance, and homeostasis. Preclinical and clinic research are needed to understand the complex relationship between development, perinatal brain injury, and persistent inflammation. Our preclinical and clinical expert speakers will highlight long-term consequences of disruptions in the placental-fetal-brain axis, unique inflammatory signatures of PBI, major routes of immune cell activation and response, and mechanisms of neural-immune conversation in both the term and preterm infant. Recognizing and treating persistent inflammation as a key player in PBI will enable scientists and physicians to reduce the impact of PBI across the lifespan.

Learning Objectives

1. Upon completion, participants will be able to list and discuss the major impacts of persistent inflammation in perinatal brain injury
2. Upon completion, participants will be able to identify cellular and molecular mechanisms of inflammation and subsequent developmental impacts
3. Upon completion, participants will be able to recognize unique inflammatory signatures across pre-clinical and clinical research of persistent inflammation in neonates

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

Clinicians, physician-scientists, basic and translational scientists, and any professional caring for preterm and term infants. Interested subspecialists may include neonatologists, neurologists, neuroscientists, critical care specialists, anesthesiologists, neurosurgeons, neurodevelopmental medicine, neuropsychologists, and related fields.

3. **Tracks**

Basic Science

Children with Chronic Conditions

Critical Care

Developmental and Behavioral Pediatrics

Developmental Biology

Injury Prevention

- Neonatology
Neurology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
 5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
 6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
 7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
 8. **Does this submission involve one or more specialties or disciplines?**
Topic is Persistent inflammation involving neonatology, neurology, maternal-fetal medicine, critical care, neuropsychology, developmental biology, and basic science
 9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
 10. **Additional comments**

Presentation Titles and Durations

Persistent Systemic Inflammation in Childhood Following Perinatal Brain Injury
in Term and Preterm Infants

Eleanor J. Molloy, MB, PhD, FRCPI

Duration of Presentation in Minutes

17

Role of Microglia and Macrophages in Sustained Inflammation Following
Perinatal Brain Insult

Pierre Gressens, MD, PhD

Duration of Presentation in Minutes

17

Effects of Perinatal Inflammation on the Blood-Brain Barrier and Choroid
Plexus

Carina Mallard, PhD

Duration of Presentation in Minutes

17

Sustained Peripheral Immune Reactivity and Lasting Motor and Cognitive Impairment

Lauren Jantzie, PhD

Duration of Presentation in Minutes

17

(191) Proposal ID: 1920249

HealthySteps to Healthy Parents: Postpartum Depression Screening and Intervention in Pediatric Primary Care

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Diane Lee**

Score: **0**

Participant(s)

Sana Hussain, PhD (she/her/hers)

Position:

Assistant Professor of Psychology in Clinical Pediatrics

Organization:

Weill Cornell Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Rahil Briggs, PsyD (she/her/hers)

Position:

Clinical Professor of Pediatrics, Psychiatry & Behavioral Sciences

Organization:

Albert Einstein College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Jennifer Tracey, MHA (she/her/hers)

Position:

Senior Director of Growth and Sustainability, HealthySteps National Office

Organization:

HealthySteps National Office at ZERO TO THREE

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Diane Lee, PsyD (she/her/hers)

Position:

Assistant Professor of Pediatrics and Psychiatry

Organization:

Weill Cornell Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Nancy J. Lee, MD (she/her/hers)

Position:

Assistant Professor of Clinical Pediatrics

Organization:

Weill Cornell Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA

Session Description

Session Description

Postpartum depression (PPD) is the most common obstetric complication affecting infants and mothers. It is a leading cause of pregnancy-related death and has long-term developmental and health consequences for children. However, rates of screening and access to services remain low, with half of women with PPD undiagnosed and untreated. The Surgeon General's recent

Advisory on the well-being of parents highlights the critical nature of the postpartum period, the growing stressors of parenting, the need for increased screening, and multidisciplinary partnerships to provide comprehensive mental health care for parents.

Pediatric primary care settings are well-positioned to respond to the Advisory. Specifically in early childhood, pediatric primary care settings are almost universal, frequently accessed, and non-stigmatized, making them critical for PPD screening and early intervention. The HealthySteps model leverages the pediatric primary care setting and prioritizes universal PPD screening, prevention, and intervention through integration of an early childhood specialist into the primary care team.

This Symposium will present the impact of PPD on young children, the innovative and evidence-based HealthySteps model, and policy solutions that support and sustain models such as HealthySteps to promote parental mental health. We will highlight effective collaborations between stakeholders, including residents and attendings in pediatrics and obstetrics and policy makers and payers, to transform screening, referral, and service delivery practices for PPD within pediatric primary care. We will conclude with lessons learned, including data on PPD symptoms, screening, and mental health care access, from a HealthySteps model at an urban, academic primary care practice.

Learning Objectives

1. Describe the developmental, social-emotional, and health consequences of PPD for children and families.
2. Understand the HealthySteps model and approach to screening and intervention for PPD within pediatric primary care.
3. Identify and discuss best practices for fostering effective partnerships between pediatricians, mental health providers, and policymakers to implement and sustain PPD initiatives and supports.

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
pediatric residents and attendings, mental health providers, policymakers and payers
3. **Tracks**
Community Pediatrics
Developmental and Behavioral Pediatrics
General Pediatrics

Mental Health
Quality Improvement/Patient Safety
Wellness and Well-being

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Diane Lee, Rahil Briggs, and Sana Hussain are psychologists and therefore not members of PAS. They are members of the American Psychological Association. Jennifer Tracey is also not an MD and therefore not a member of PAS. She has spent the last 26 years specializing in health policy and Medicaid design and payment. She has led the Policy and Finance Team at the HealthySteps National Office for the last 9 years where they have successfully helped states transform their Medicaid policies, for the first time ever, to allow payment pay for preventive, dyadic, behavioral health services for young children and their caregivers. She has also previously been approved and presented at two PAS conferences. Nancy Lee is a member of APA.
8. **Does this submission involve one or more specialties or disciplines?**
Yes, our topic is Postpartum Depression in pediatric primary care and involves General Pediatrics, Psychiatry/Psychology, and Healthcare Administration/Policy
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Maternal mental health and its association with infant and early childhood health: An overview
Sana Hussain, PhD

Duration of Presentation in Minutes

18

HealthySteps: An evidence-based model of care to address postpartum depression within pediatrics

Rahil Briggs, PsyD

Duration of Presentation in Minutes

18

Sustaining caregiver services through innovative payment and reimbursement approaches

Jennifer Tracey, MHA

Duration of Presentation in Minutes

18

Bridging the gap: A multidisciplinary quality improvement initiative to improve postpartum depression care in pediatrics

Diane Lee, PsyD

Duration of Presentation in Minutes

18

Bridging the gap: A multidisciplinary quality improvement initiative to improve postpartum depression care in pediatrics

Nancy J. Lee, MD

Duration of Presentation in Minutes

18

(192) Proposal ID: 1923608

Transcatheter PDA occlusion in premature infants: the why, the how and what to look out for?

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Frank Ing**

Score: **0**

Participant(s)

Richard A. Polin, MD, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

Columbia University Vagelos College of Physicians and Surgeons

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Shyam Sathanandam, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

University of Tennessee Health Science Center College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Frank Ing (he/him/his)

Position:

Professor of Pediatrics

Organization:

UC Davis Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Alexandra Erdmann, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics, Division of Pediatric Cardiology

Organization:

University of Wisconsin Madison School of Medicine and Public Health

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Shazia Bhombal, MD

Position:
Associate Professor

Organization:
Children's Healthcare of Atlanta/Emory University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

Satyan Lakshminrusimha, MD (he/him/his)

Position:
Professor and Chair

Organization:
University of California Davis Children's Hospital

Role:

Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Session Description

Session Description

PDA occlusion in premature infants has proven to be safe and effective but has not been universally adopted by neonatologists. Philosophical differences and a focus on different systems of the body exist between neonatologists and pediatric cardiologists. While cardiologists may be more focused on the hemodynamic derangements caused by the PDA, neonatologists may be more concerned with the lungs and long-term outcomes.

Previous publications have suggested that no long-term differences exist between premature infants who had a PDA closed using medications or surgery compared to those who received no treatment. However, there is a paucity of data regarding the less invasive transcatheter closure technique. Neonatologists and cardiologists differ in whether, when, and how to manage PDA.

This session aims to explore these differences and generate dialogue between the two pediatric subspecialties, with the goal of reaching a consensus. Five lectures are proposed:

1. The premature infant duct: why and why not to close- neonatologist perspective
2. The premature infant duct: why and why not to close- cardiologist perspective
3. How: Homeostasis for transportation to the cath lab and during the procedure: tips and tricks.
4. How: PDA occlusion of the VLBW infant- tips and tricks to avoid adverse events and complications.
5. What to look out for: Management of the infant before and after PDA occlusion

Learning Objectives

1. Learn the neonatologist perspective and the pediatric cardiologist perspective of why it is (or not) important to close the PDA in premature infants.
2. Learn how homeostasis is achieved for transportation and procedure and some tips and tricks used by the cardiologist to ensure safety/efficacy with the occlusion procedure.
3. Learn what are some of the issues to look out for in the premature infant before and after PDA occlusion.

Scholarly Session Questions

1. **Audience Size**
500
2. **Target audience**
Neonatologists and pediatric cardiologists
3. **Tracks**
Cardiology
Global Neonatal & Children's Health
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
No conflicts
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Frank Ing- he is a pediatric cardiologist and interventionist with membership in the ACC, AHA, and two interventional societies (SCAI and PICS Society).
8. **Does this submission involve one or more specialties or disciplines?**
Neonatology and Pediatric Cardiology
9. **If your session was presented at another conference, please describe the conference and presentation.**
NA

10. Additional comments

Presentation Titles and Durations

The premature infant duct: why and why not to close- neonatologist perspective
Richard A. Polin, MD, MD

Duration of Presentation in Minutes

15

The premature infant duct: why and why not to close- cardiologist perspective
Shyam Sathanandam, MD

Duration of Presentation in Minutes

15

How: Homeostasis for transportation to the cath lab and during the procedure:
tips and tricks.

Frank Ing

Duration of Presentation in Minutes

15

How: PDA occlusion of the VLBW infant- tips and tricks to avoid adverse
events and complications.

Alexandra Erdmann, MD

Duration of Presentation in Minutes

15

What to look out for: Management of the infant before and after PDA occlusion
Shazia Bhombal, MD

Duration of Presentation in Minutes

15

(193) Proposal ID: 1931001

Promoting brain health in neonates with congenital heart disease: emerging opportunities

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Thiviya Selvanathan**

Score: **0**

Participant(s)

Shabnam Peyvandi, MD MAS (she/her/hers)

Position:

Professor of Pediatrics

Organization:

UCSF Benioff Children's Hospital San Francisco

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Devin Chetan, MD (he/him/his)

Position:

Fellow

Organization:

The Hospital for Sick Children

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Thiviya Selvanathan, MD PhD (she/her/hers)

Position:

Assistant Professor

Organization:

University of British Columbia Faculty of Medicine

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Steven P. Miller, MDCM FRSC (he/him/his)

Position:

Head and Professor, Pediatrics

Organization:

University of British Columbia Faculty of Medicine

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
APS, SPR

Session Description

Session Description

This Hot Topic Symposium will provide an overview of strategies to promote brain health in infants with congenital heart disease. The session will begin with a review of maternal and fetal factors that impact early brain development in fetuses with congenital heart disease such as maternal prenatal stress and socioeconomic status. This will be followed by an overview of strategies to promote brain health through optimizing cardiovascular management and neurocritical care. The session will end with a summary of key research gaps and highlights of future directions for research and clinical care.

Learning Objectives

1. Recognize the impacts of social determinants of health on brain development.
2. Understand how cardiovascular management can impact neurodevelopment.
3. Identify neurocritical care strategies that promote brain health in infants with CHD.

Scholarly Session Questions

1. **Audience Size**
200

2. **Target audience**

Clinicians and researchers including neonatal neurologists, neonatologists, pediatric cardiologists, Developmental pediatricians, general pediatricians, allied health clinicians caring for children with

congenital heart disease (e.g. OT, PT), researchers studying neurodevelopment in children with congenital heart disease

3. **Tracks**

Cardiology
Critical Care
Developmental and Behavioral Pediatrics
General Pediatrics
Neonatology
Neurology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Neonatal neurology hot topics symposia, oral abstracts, and poster presentations

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

Topic is promoting brain health in congenital heart disease involving Neurology, Neonatology, Cardiology, Child Development, and General Pediatrics.

9. **If your session was presented at another conference, please describe the conference and presentation.**

Not applicable

10. **Additional comments**

We feel that this session would fit best as part of the Neurology (neonatal neurology) track.

Presentation Titles and Durations

Promoting brain health in neonates with CHD begins in utero
Shabnam Peyvandi, MD MAS

Duration of Presentation in Minutes

30

Cardiovascular management to optimize neurodevelopmental outcomes

Devin Chetan, MD

Duration of Presentation in Minutes

30

Neurocritical and neurodevelopmental care: the importance of the everyday

Thiviya Selvanathan, MD PhD

Duration of Presentation in Minutes

30

What's next?

Steven P. Miller, MDCM FRSC

Duration of Presentation in Minutes

10

(194) Proposal ID: 1915888

Navigating the world of Artificial intelligence (AI) in medicine: Pediatric nephrology perspective

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Katherine Dell**

Score: **0**

Participant(s)

Katherine M. Dell, MD (she/her/hers)

Position:

Professor of Pediatrics and Director of Clinical and Translational Research

Organization:

Cleveland Clinic Children's

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

Black or African American, White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR, ASPN

Arwa Nada, MD., MSc. (she/her/hers)

Position:

Associate Professor

Organization:

Loma Linda Childten's. LLU

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

ASPN

Ari Pollack, MD

Position:

Associate Professor

Organization:

Seattle Children's

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

ASPN

Ibrahim Sandokji, MD, FAAP

Position:

Assistant Professor

Organization:

Taibah University

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
ASPN

Shina Menon, MD (she/her/hers)

Position:
Associate Professor

Organization:
Stanford University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR, ASPN

Kera Luckritz, DO, MPH (she/her/hers)

Position:
Clinical Associate Professor

Organization:
University of Michigan Medical School

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
ASPN

Michael A. Freeman, MD, MA (Bioethics) (he/him/his)

Position:
Associate Professor of Pediatrics and Humanities

Organization:
Pennsylvania State University College of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
ASPN

Session Description

Session Description

This session will explore the integration of Artificial intelligence (AI) in pediatric nephrology and address how AI technologies can revolutionize the diagnosis, treatment, and management of kidney diseases in children. The goal of the session is to present the latest advancements, case studies, and innovative AI tools that are transforming pediatric kidney care as well as the ethical considerations of applications of AI. It is hoped that the presentations will inspire attendees in further research, collaboration, and implementation of AI solutions to improve outcomes for young patients with kidney diseases.

Learning Objectives

1. Appreciate the multiple uses of AI in pediatric nephrology clinical practice, research, education and training, including the use of social media in these domains.
2. Describe examples of AI use in clinical practice, including facilitating AKI diagnosis, treatment and outcome prediction and helping physicians complete notes in the outpatient setting.
3. Describe the ethical considerations and challenges associated with the AI deployment in medicine, focusing on privacy, bias, accountability, and implications for patient care and trust.

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Pediatric nephrologists and other pediatric specialist and general pediatricians interested in AI
3. **Tracks**
Artificial Intelligence
Clinical Bioethics
EHR/Medical Informatics
General Pediatrics
Nephrology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
n/a
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
potentially applicable to all pediatric specialties and general pediatrics

9. **If your session was presented at another conference, please describe the conference and presentation.**

n/a

10. **Additional comments**

n/a

Presentation Titles and Durations

AI in pediatric nephrology: Endless possibilities today and in the future

Ibrahim Sandokji, MD, FAAP

Duration of Presentation in Minutes

20

AI in acute kidney injury (AKI)

Shina Menon, MD

Duration of Presentation in Minutes

20

AI in the outpatient setting

Kera Luckritz, DO, MPH

Duration of Presentation in Minutes

20

AI in medicine: the ethical dilemma

Michael A. Freeman, MD, MA (Bioethics)

Duration of Presentation in Minutes

20

(195) Proposal ID: 1928422

Breathe Easy: An Update on Critical Asthma Corticosteroids and Immunomodulation Adjuncts

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Anthony Sochet**

Score: **0**

Participant(s)

Anthony A. Sochet, MD, MSc (he/him/his)

Position:

Assistant Professor, Anesthesiology & Critical Care Medicine

Organization:

Johns Hopkins All Children's Hospital; Johns Hopkins University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Alexa R. Roberts, MD (she/her/hers)

Position:

Pediatric Critical Care Medicine Fellow

Organization:

Johns Hopkins All Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Meghan R. Roddy, PharmD, MPH, BCPPS (she/her/hers)

Position:

Critical Care Clinical Pharmacist

Organization:

Johns Hopkins All Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Session Description

Session Description

Many adjunct therapies are employed for children hospitalized with an acute asthma exacerbation. Clinical providers are faced with a challenge in selecting optimal pharmaceutical treatments including the primary systemic

glucocorticoid (the mainstay of acute management) and potentially anti-inflammatory treatments such as macrolide antibiotics. The absence of definitive clinical trials with head-to-head comparisons of corticosteroid agents and delineation of safety and efficacy for immunomodulation has yielded a loss of clinical equipoise and significant practice variation that warrants discussion at international and national fora.

In this session, an expert panel will review the most updated pediatric observational, clinical trial and translational science findings regarding systemic glucocorticoids and macrolide antibiotics for children hospitalized in the pediatric intensive care unit for an asthma exacerbation (referred to as having “critical asthma”).

An itinerary is as follows:

- Introductory Comments (5 minutes) – Anthony A. Sochet, MD
- Lecture 1 (20 minutes): “Pharmacologic benefits and pitfalls of unique glucocorticoid agents for the hospitalized child with asthma exacerbation” – Meghan Roddy, PharmD
- Lecture 2 (20 minutes): “Trial-derived and observational evidence for systemic glucocorticoids in critical asthma” – Anthony A. Sochet, MD
- Lecture 2 (25 minutes): “Translational evidence in support of macrolide antibiotics and inflammatory phenotypes for risk stratification in critical asthma” – Alexa R. Roberts, MD
- Q/A Session (15-minutes) – Entire Panel

We trust this session will be of interest to clinical providers of many roles expected to attend PAS 2025 (i.e., general pediatricians, hospitalists, intensivists, emergency room providers, and pulmonologists) routinely face.

Learning Objectives

1. Delineate the pharmacology of specific glucocorticoid agents commonly prescribed for the hospitalized child with an acute asthma exacerbation.
2. Review trial-derived and observational evidence for specific systemic glucocorticoids agents including those that may infer superiority or non-inferiority for clinical decision making.
3. Assess the clinical and translational evidence in support of macrolide antibiotics and immune-based phenotypes of children with critical asthma exacerbation.

Scholarly Session Questions

-
1. **Audience Size**
100
 2. **Target audience**
General pediatricians, pulmonologists, intensivists, pharmacists, and hospitalists.
 3. **Tracks**
Asthma
Critical Care
 4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
 5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Dr. Sochet is also listed as a speaker/moderator for another session proposal. Depending on approval, this may or may not lead to a potential conflict.
 6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
 7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
 8. **Does this submission involve one or more specialties or disciplines?**
Yes, see above.
 9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
 10. **Additional comments**
N/A

Presentation Titles and Durations

Trial-derived and observational evidence for systemic glucocorticoids in critical asthma

Anthony A. Sochet, MD, MSc

Duration of Presentation in Minutes

20

Translational evidence for macrolide antibiotics and inflammatory phenotypes
for risk stratification in critical asthma

Alexa R. Roberts, MD

Duration of Presentation in Minutes

25

Pharmacologic benefits and pitfalls of unique glucocorticoid agents for the
hospitalized child with asthma exacerbation

Meghan R. Roddy, PharmD, MPH, BCPPS

Duration of Presentation in Minutes

20

(196) Proposal ID: 1921283

Rethinking Advocacy: A Panel Conversation with the AAP Section on Hospital
Medicine Advocacy Task Force

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Lauren Gambill**

Score: **0**

Participant(s)

Lauren K. Gambill, MD, MPA, FAAP (she/her/hers)

Position:

Assistant Professor

Organization:

University of Texas at Austin Dell Medical School

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Aarabhi S. Rajagopal, MD, FAAP (she/her/hers)

Position:

Pediatric Hospital Medicine Fellow

Organization:

University of Minnesota

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Patricia Tran, MD, MS (she/her/hers)

Position:

Assistant Professor of Clinical Pediatrics

Organization:

University of Illinois College of Medicine Peoria

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Gabrielle A. Pina, DO (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Loma Linda University Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Molly Krager, MD (she/her/hers)

Position:
Associate Professor of Pediatrics

Organization:
Children's Mercy Hospitals and Clinics

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Jamee Walters, MD

Position:
Associate Program Director

Organization:
Johns Hopkins All Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Matthew Magyar, MD, MPH (he/him/his)

Position:
Assistant Professor

Organization:
Children's National Health System

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Sahar Barfchin, MD (she/her/hers)

Position:
Clinical Assistant Professor of Pediatrics

Organization:
NemoursAlfred I. duPont Hospital for Children

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Prefer not to respond

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Session Description

Session Description

Pediatric hospitalists are challenging the notion that advocacy work is limited to general pediatricians and are stepping into the role of advocate. The intersection of pediatric hospital medicine and advocacy is a relatively new space with exciting opportunities and unique challenges

The AAP Section on Hospital Medicine (SOHM) recognized the need to understand this career path more fully and created the first SOHM Advocacy Task Force. This task force consists of pediatric hospitalists and experts in advocacy from across the US working in a variety of practice settings and engaging in a broad range of advocacy activities.

The Task Force has worked over the last year to conduct a needs assessment to better understand the landscape of advocacy within pediatric hospital medicine. The results of the needs assessment will be a primary focus of the expert panel comprised of all members of the Task Force.

In a series of dynamic and conversational lightning talks panelists will:

- Provide an overview of value/importance of advocacy in PHM
- Review the background, goals, and progress of the SOHM Advocacy Task Force
- Disseminate eye-opening findings from the needs assessment
- Explore key challenges and opportunities to working in advocacy and PHM

Robust audience engagement will be encouraged through the use of audience polling, and open mic question and insight sharing at key intervals. Participants will walk away energized, hopeful, and with an action plan to propel their individual career forward while simultaneously advancing the field of pediatric hospital medicine

Learning Objectives

1. Explore the current landscape of advocacy in pediatric hospital medicine through critical appraisal of the needs assessment conducted by the SOHM Advocacy Task Force.
2. Dissect the unique barriers and opportunities to participation in advocacy as pediatric hospitalists
3. Propose an action plan to overcome barriers to incorporating advocacy into the careers of pediatric hospitalists as well as into the profession as a whole

Scholarly Session Questions

1. **Audience Size**
40
2. **Target audience**
:Pediatric Hospital Medicine Faculty; Fellowship Trainees; Pediatric Residents; Medical Students
3. **Tracks**
Advocacy
Career Development
Community Pediatrics
Diversity, Equity, and Inclusion
Health Equity/Social Determinants of Health
Hospital Medicine
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Health Policy Scholar Program; AAP SOHM Executive Committee Meeting
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
All panelists are hospitalists and advocates. They span a variety of practice settings and types of advocacy work.

9. **If your session was presented at another conference, please describe the conference and presentation.**

n/a

10. **Additional comments**

The expertise of this task force is expansive within the realm of advocacy and we are excited for the opportunity to bring them all together for this session. Given the larger number of panelists, meticulous attention will be paid to flow and timing of lightening talks to help highlight the key points of this topic from the lens of the panelists expertise

Presentation Titles and Durations

Overview of Importance of Advocacy in Pediatric Hospital Medicine,
Background on SOHM Advocacy Task Force

Lauren K. Gambill, MD, MPA, FAAP

Duration of Presentation in Minutes

30

SOHM Advocacy Task Force Needs Assessment; moderator for lightening
talks

Aarabhi S. Rajagopal, MD, FAAP

Duration of Presentation in Minutes

30

Challenges and Controversies Specific to Pediatric Hospital Medicine and
Advocacy

Patricia Tran, MD, MS

Duration of Presentation in Minutes

5

Opportunities Within PHM and Advocacy

Gabrielle A. Pina, DO

Duration of Presentation in Minutes

5

Career Paths at the Intersection of Advocacy and Pediatric Hospital Medicine

Molly Krager, MD

Duration of Presentation in Minutes

5

Supporting Advocacy in Pediatric Hospital Medicine as a Field

Jamee Walters, MD

Duration of Presentation in Minutes

5

The Future of Advocacy and PHM, Next Steps

Matthew Magyar, MD, MPH
Duration of Presentation in Minutes
5

Conclusion, Key Points
Sahar Barfchin, MD
Duration of Presentation in Minutes
5

(197) Proposal ID: 1915865

Improving development of therapies: A collaborative approach with the Food and Drug Administration (FDA), industry and academia

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Katherine Dell**

Score: **0**

Participant(s)

Katherine M. Dell, MD (she/her/hers)

Position:

Professor of Pediatrics and Director of Clinical and Translational Research

Organization:

Cleveland Clinic Children's

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American, White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR, ASPN

Mona Khurana, MD (she/her/hers)

Position:

Medical Team Leader

Organization:

FDA

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Shamir Tuchman, MD, MPH (he/him/his)

Position:

Senior Physician

Organization:

U.S. Food and Drug Administration (FDA)

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Deepa H. Chand, MD, MHSA (she/her/hers)

Position:

Clinical Professor of Pediatrics

Organization:

University of Illinois College of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
ASPN

Bradley A. Warady, MD

Position:
Professor of Pediatrics, Director, Division of Nephrology

Organization:
Children's Mercy Kansas City

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR, ASPN

Session Description

Session Description

Most medicines available in the U.S. are not approved for children, resulting in off-label use. Inherent issues with off-label medicine use include clinician reluctance to prescribe these products and the potential for adverse drug reactions. Since the early 2000s, drug development for children has improved because of the passage of important legislation in the U.S. However, on average, there remains an 8-to-9-year lag between the time of medicinal approval in adults to approval in pediatric populations. This session is intended

to explore the myths and realities about pediatric therapeutics development from bench to bedside. Examples of successes and failures in the development of therapies for children will be reviewed. The session will also examine potential collaborations to optimize the development of therapies for children. Specifically, cross-functional roles in the pediatric therapeutics development “ecosystem” will be discussed, to enhance future collaborations to decrease the delay in medicinal approvals for children.

Learning Objectives

1. Review the regulatory framework for medicine development in children and explain how this regulatory framework is applied to pediatric clinical research.
2. Compare and contrast industry-sponsored pediatric drug development programs to examine factors that can be applied to pediatric clinical research
3. Characterize the important role that academic pediatricians play in therapeutics development and discuss the utility of regulatory-grade research in academic pediatrics

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Clinical and translational researchers in pediatrics, including pediatric nephrology trainees and faculty.
3. **Tracks**
Academic and Research Skills
Clinical Research
Nephrology
Pharmacology and Therapeutics
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr. Tuchman provides sepcific expertise re: FDA. He is a pediatric nephrologist. Per the ASPN policy, he is not eligible for registration or travel if he is not an ASPN (or AAP, etc) member and was notified of this in the speaker invitation email, which he accepted

8. **Does this submission involve one or more specialties or disciplines?**

Pediatric nephrology

9. **If your session was presented at another conference, please describe the conference and presentation.**

n/a

10. **Additional comments**

Presentation Titles and Durations

FDA: Regulatory definitions and perspectives

Shamir Tuchman, MD, MPH

Duration of Presentation in Minutes

30

Pediatric drug development successes and failures: The Industry perspective

Deepa H. Chand, MD, MHSA

Duration of Presentation in Minutes

30

The role of academia in drug development

Bradley A. Warady, MD

Duration of Presentation in Minutes

30

(198) Proposal ID: 1919452

Hot Topic Debates: Management of Infections in Hospitalized Neonates and Children

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Matthew Kronman**

Score: **0**

Participant(s)

Mariana Lanata, MD (she/her/hers)

Position:

Associate Professor - Department of Pediatrics

Organization:

Marshall University Joan C. Edwards School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, PIDS

Matthew Kronman, MD, MSCE

Position:

Professor, Pediatric Infectious Diseases

Organization:

University of Washington

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Daniel J. Adams, MD

Position:

Associate Professor

Organization:

Uniformed Services University of the Health Sciences F. Edward Hebert

School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, PIDS

Joshua Herigon, MD, MPH, MBI (he/him/his)

Position:

Attending Physician

Organization:

Children's Mercy Kansas City

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, PIDS

Rana E. El Feghaly, MD, MSCI (she/her/hers)

Position:

Outpatient ASP Director, Professor of Pediatrics

Organization:

Children's Mercy Kansas City, UMKC

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, PIDS

Maria S. Rueda Altez, MD, MSHS (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

University of Alabama at Birmingham

Role:

Speaker

Ethnicity

Hispanic or Latino

Race
Prefer not to respond

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR, PIDS

Session Description

Session Description

This session will involve 3 debates on clinically relevant hot topics relating to antimicrobial use for hospitalized neonates and children, including whether and when gentamicin is appropriate for the management of hospitalized neonates with fever or early onset sepsis; whether antibiotic therapy must be provided intravenously for children hospitalized with common infections such as community acquired pneumonia (CAP), skin and soft tissue infections (SSTI), and urinary tract infections (UTI); and whether use of metagenomic next generation pathogen sequencing should be unrestricted for use by inpatient providers. During this session, national leaders in Infectious Diseases will debate these topics. The format will involve three 30 minute debates, in which each speaker will review the scientific evidence for their position for 8-10 minutes (20 minutes total), respond to the other speaker for 2 minutes (4 minutes total), and then garner audience participation through live polling and questions for the remaining 6-10 minutes total. The presentation of the initial positions could be pre-recorded if needed, while the rebuttals and Q&A section would ideally be live. The overarching goal of the session is to highlight the evidence for and against the infection management strategies covered for these common situations in hospitalized neonates and 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 neonates and children, including medical student and resident trainees, general pediatricians, hospitalists, and specialists in emergency medicine, neonatology, and infectious diseases.

Learning Objectives

1. Describe the data for and against use of gentamicin in neonates with fever or early onset sepsis.

2. Evaluate the data for, and risks and benefits of, preferential use of intravenous antibiotics at hospitalization for children hospitalized for common infections.
3. Review the data for the utility and benefit of metagenomic next generation pathogen sequencing in children with undifferentiated infection

Scholarly Session Questions

1. **Audience Size**
75
2. **Target audience**
Medical students, residents, general pediatricians, hospitalists, and specialists in emergency medicine, neonatology, and infectious diseases.
3. **Tracks**
Critical Care
Emergency Medicine
General Pediatrics
Hospital Medicine
Infectious Diseases
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Would like to avoid conflict with other PIDS sessions, if possible
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Discussants are from Infectious Diseases, but topics are relevant to Emergency Medicine, General pediatrics / Hospital Medicine, and Neonatology
9. **If your session was presented at another conference, please describe the conference and presentation.**

10. Additional comments

Presentation Titles and Durations

Gentamicin should be used as part of neonatal fever / early onset sepsis
Mariana Lanata, MD

Duration of Presentation in Minutes

15

Gentamicin should NOT be used as part of neonatal fever / early onset sepsis
Matthew Kronman, MD, MSCE

Duration of Presentation in Minutes

15

Healthy children admitted for routine infections such as CAP, SSTI, and UTI
should only be treated IV while hospitalized

Daniel J. Adams, MD

Duration of Presentation in Minutes

15

Healthy children admitted for routine infections such as CAP, SSTI, and UTI
should NOT only be treated IV while hospitalized

Joshua Herigon, MD, MPH, MBI

Duration of Presentation in Minutes

15

Metagenomic next generation sequencing should be unrestricted for provider
use

Rana E. El Feghaly, MD, MSCI

Duration of Presentation in Minutes

15

Metagenomic next generation sequencing should NOT be unrestricted for
provider use

Maria S. Rueda Altez, MD, MSHS

Duration of Presentation in Minutes

15

(199) Proposal ID: 1925716

Empiric Antibiotics for Late-Onset Sepsis: Can One Size Fit All?

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Sarah Coggins**

Score: **0**

Participant(s)

Sarah A. Coggins, MD MSCE

Position:

Instructor of Pediatrics

Organization:

University of Pennsylvania/Children's Hospital of Philadelphia

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Rachel G. Greenberg, MD, MB, MHS (she/her/hers)

Position:

Associate Professor

Organization:

Duke Clinical Research Institute

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Sagori Mukhopadhyay, MD, MMSc (she/her/hers)

Position:

Associate Professor

Organization:

Childrens Hospital of Philadelphia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Rana F. Hamdy, MD, MPH, MSCE (she/her/hers)

Position:

Associate Professor

Organization:

Children's National Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
Prefer not to respond

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR, PIDS

Kelly Wade, MD, PhD, MSCE (she/her/hers)

Position:
Professor Clinical Pediatrics

Organization:
Childrens Hospital of Philadelphia

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Session Description

Session Description

Neonatal ICU (NICU) patients are at risk for late-onset infections, including bacteremia, UTI, pneumonia, intestinal colitis, and skin/bone/soft tissue infections. Presenting signs are often varied and non-specific, compounding the difficulty of accurate detection of infection and contributing to frequent, low-yield LOS evaluations. Cumulative exposures to empiric antibiotics for suspected LOS throughout the course of the NICU hospitalization may contribute to alterations in the microbiome, short- and long-term drug toxicities (e.g., acute kidney injury), and promote antimicrobial resistance. Many individual NICUs have standardized their empiric antibiotic regimen for

suspected late-onset sepsis (LOS). However, there is substantial variation in empiric antibiotic choices between NICUs, and no consensus guidance to inform such decision-making. There is variation in the choice of empiric Gram-positive coverage (e.g., beta-lactams vs. vancomycin) and in the choice of empiric Gram-negative coverage (e.g., cephalosporins vs. aminoglycosides). We will debate the merits of these different approaches to empiric antibiotic selection for LOS evaluations in Level 3 and Level 4 NICUs.

This Hot Topic Symposia will discuss the past and present state of late onset sepsis epidemiology; examine the current state of empiric antibiotic utilization for LOS; review different unit-based strategies for empiric antibiotic coverage for suspected LOS in the NICU; and begin to unpack strategies for targeted antimicrobial selection based on unit- and patient-specific factors, viewed through an antimicrobial stewardship lens. The content will be applicable to attendees who practice neonatology, infectious diseases, immunology, pharmacy, and health policy.

Learning Objectives

1. To describe the present state of late-onset sepsis epidemiology and antimicrobial use in the neonatal ICU
2. To compare varying Gram-positive and Gram-negative coverage options for empiric treatment of suspected late-onset sepsis
3. To describe what patient-specific or unit-specific factors could inform empiric antibiotic protocols in NICUs

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Neonatologists, Neonatal Infectious Disease physicians, Pharmacists
3. **Tracks**
Epidemiology
Infectious Diseases
Neonatology
Pharmacology and Therapeutics
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

Dr. Mukhopadhyay is also involved in Neonatal Sepsis Club.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

Yes. Neonatology, Infectious Diseases, Epidemiology

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

Please note that the specific presentations total 55 minutes in duration; the introduction and panel Q&A together will be 35 minutes in duration to make a total session duration of 90 minutes.

Presentation Titles and Durations

Contemporary LOS epidemiology and antibiotic utilization

Sarah A. Coggins, MD MSCE

Duration of Presentation in Minutes

10

Ampicillin and gentamicin should be the empiric regimen of choice for LOS

Rachel G. Greenberg, MD, MB, MHS

Duration of Presentation in Minutes

15

Vancomycin should be included in the empiric regimen of choice for LOS

PRO vs CON

Sagori Mukhopadhyay, MD, MMSc

Duration of Presentation in Minutes

15

Third-generation cephalosporins should be included in the empiric antibiotic regimen of choice for LOS PRO vs CON

Rana F. Hamdy, MD, MPH, MSCE

Duration of Presentation in Minutes

15

Do we need consensus alignment to achieve rational empiric antibiotic prescribing for suspected LOS?

Kelly Wade, MD, PhD, MSCE

Duration of Presentation in Minutes

10

(200) Proposal ID: 1910581

Agitation in the NICU: is this Neonatal Delirium or something else?

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Raul Chavez-Valdez**

Score: **0**

Participant(s)

Frances J. Northington, MD

Position:

PRofessor of Pediatrics and Neurology

Organization:

Johns Hopkins University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS, SPR

Adam L. Numis, MD (he/him/his)

Position:

Associate Professor of Neurology and Pediatrics

Organization:

University of California, San Francisco

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Raul Chavez-Valdez, MD (he/him/his)

Position:

Associate Professor

Organization:

Johns Hopkins University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Vera Joanna Burton, MD/PhD

Position:

Assistant Professor, Neurology and Developmental Medicine

Organization:

Kennedy Krieger Institute

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

Gwendolyn Gerner, PsyD (she/her/hers)

Position:
Assistant Professor

Organization:
Kennedy Krieger Institute

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Lauren Jantzie, PhD (she/her/hers)

Position:
Associate Professor

Organization:
Johns Hopkins University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Session Description

Session Description

Delirium is an acute neuropsychiatric disorder with significant disturbances in attention, awareness and cognition. The developing brain of a neonate admitted for a prolonged period of time in the NICU is subject to the impact of multiple comorbidities, interventions and noxious stimuli. Thus, identification of an acute cerebral disorder and exclusion of a prior cognitive impairment, both diagnostic criteria of delirium, are cumbersome. This is particularly difficult in an aging premature infant developing symptoms mimicking delirium, as characterized in older children and adults. As the developmental needs for social interaction increase in premature infants, they may also develop restlessness and agitation, which are further complicated by common treatments reversing their sleep/wake cycle. Furthermore, in neonates many of the biochemical substrates and structural connections needed to develop delirium are yet to be developed. One of the most serious complications of diagnosing neonatal "delirium" is that, in certain instances, anti-psychotic medications are initiated. These drugs modulate many of the same neurotransmitter systems essential for brain development. In this state-of-the-art plenary, we will discuss cutting-edge research about: a) dynamics in neurotransmitter systems and regional connectome development, b) impact of chronic morbidities during brain development leading to agitation as premature infants age, c) management of agitation/restlessness in premature infants as they age and d) consequences of the use of anti-psychotics in this vulnerable population, with an aim to incentivize a discussion that translates to the clinical management of this very complex and common problem.

Learning Objectives

1. Upon completion, participants will be able to understand the dynamics in the neurotransmitter systems and regional connectome during brain development as premature infant age.
2. Upon completion, participants will be able to recognize the impact of chronic morbidities during brain development leading to agitation in premature infants as they age.

3. Upon completion, participants will be able to recognize therapeutic options and their potential complications in the management of agitation in premature infants as they age.

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
Neonatologists, Neurologists, Intensivists, Developmental Neurologists, General Pediatricians, Hospitalists, Pediatrics psychiatrists, neuropsychologists.
3. **Tracks**
Basic Science
Children with Chronic Conditions
Critical Care
Developmental and Behavioral Pediatrics
Developmental Biology
Neonatology
Neurology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
none
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Topic is about delirium involving neonatologist, developmental neurologists, intensivists, neuropsychologists and pediatric psychiatry.
9. **If your session was presented at another conference, please describe the conference and presentation.**
NA
10. **Additional comments**

None

Presentation Titles and Durations

Agitation in the NICU: is this Neonatal Delirium or something else? -

Introduction

Frances J. Northington, MD

Duration of Presentation in Minutes

5

Neurotransmitter systems and regional connectome during brain development

Adam L. Numis, MD

Duration of Presentation in Minutes

15

Impact of chronic morbidities during early brain development leading to agitation and restlessness - concepts

Raul Chavez-Valdez, MD

Duration of Presentation in Minutes

15

Non-pharmacological and pharmacological interventions to treat agitation in premature infants as they develop - part 1

Vera Joanna Burton, MD/PhD

Duration of Presentation in Minutes

10

Non-pharmacological and pharmacological interventions to treat agitation in premature infants as they develop - part 2

Gwendolyn Gerner, PsyD

Duration of Presentation in Minutes

10

Anti-psychotics in neonates , is it a good idea?

Lauren Jantzie, PhD

Duration of Presentation in Minutes

15

(201) Proposal ID: 1931689

Wildfire Smoke: A Burning Issue for Pediatric Patients

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Catherine Karr**

Score: **0**

Participant(s)

Catherine Karr, MD PHD (she/her/hers)

Position:

Professor

Organization:

University of Washington

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Allison Sherris, PhD (she/her/hers)

Position:

Postdoctoral Scholar

Organization:

University of Washington

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Christine Loftus, PhD MPH MS

Position:

Clinical Associate Professor

Organization:

University of Washington

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Mary Crocker, MD, MPH (she/her/hers)

Position:

Assistant Professor

Organization:

University of Washington

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Stephanie M. Holm, MD, PhD, MPH (she/her/hers)

Position:
Assistant Clinical Professor

Organization:
University of California, San Francisco, School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

Fueled by climate change, the frequency and intensity of wildfires in the US are growing. Short- and long-range transport of smoke plumes from fires expose millions of children each year to dangerous levels of smoke. Robust evidence links these exposures to acute upper and lower respiratory tract symptoms, infections, and asthma exacerbation, while emerging science suggests that smoke exposure can contribute to eczema development or exacerbation and impede lung development and function. The translation of research on wildfire smoke and pediatric health to effective clinical practice is urgently needed. In this symposium, we first provide an overview of the magnitude of this growing

public health crisis and describe vulnerabilities and inequities in the pediatric population. Second, a synthesis of the epidemiological evidence connecting wildfire smoke to child health provides the “state of the science” and highlights uncertainties in existing evidence and future research needs. Third, we describe a community-based study set in a rural, low-resourced area highly impacted by smoke, characterizing barriers to protective behaviors to inform future interventions. Fourth, we discuss perspectives from health care providers, sharing research findings related to unmet needs and opportunities to support parents in protecting their children. Finally, we present existing evidence-based resources for pediatricians and families, including risk communication materials appropriate for a variety of settings. Overall, we aim to build a space where researchers and clinicians close the gap between research on wildfire smoke health effects and research translation to protect children’s health.

Learning Objectives

1. Upon completion, participants will be able to describe the types of pediatric health concerns associated with early life exposure to wildfire smoke.
2. Define knowledge gaps and barriers faced by community members and health care providers in reducing children’s exposure to wildfire smoke.
3. Upon completion, participants will be able to access resources for patient anticipatory guidance on wildfire smoke exposure protection for diverse populations.

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

Members of the PAS Environmental Health and APA Environmental Health, Climate Change and Sustainability Special Interest group, Maternal Child Health Special Interest group members, General Academic Pediatricians, Neonatologists. Pediatric Pulmonologists

3. **Tracks**

Asthma

Community Pediatrics

Environmental Health

Epidemiology

General Pediatrics

Health Equity/Social Determinants of Health

Public Health

School and Community Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

EH SIG Oral Sessions

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Allison Sherris – Dr. Sherris is a postdoctoral research trainee in Dr. Karr’s research program. She is leading national studies on wildfire smoke exposure and child health for the national NIH ECHO (Environmental Influences on Child Health program). As a non-clinician environmental epidemiologist researcher in the postdoctoral phase of training, she is not a member of the PAS affiliated societies. She does not require funding to participate in the symposium.

Christine Loftus – Dr. Loftus is a highly experienced air pollution epidemiologist with a new research program on wildfire smoke, emphasizing translation-oriented studies to address high risk communities and inform best practices for interventions and policies. She is a non-clinician environmental epidemiologist. She does not require funding to participate in the symposium.

Stephanie Holm- Dr. Holm is the Director of the federal Region 9 Pediatric Environmental Health Specialty Unit (PEHSU). She has clinical training in pediatrics, pediatric pulmonary medicine and occupational and environmental medicine. She has been a leader in the national PEHSU Program on wildfire smoke outreach and education materials for professional and non-professional audiences. As a faculty member in the UCSF Occupational & Environmental Medicine Program she maintains multiple professional association memberships but this does not include the PAS affiliated societies. She does not require funding to participate in this symposium.

8. **Does this submission involve one or more specialties or disciplines?**

The topic of wildfire smoke and child health involves general pediatrics, pediatric pulmonology, neonatology, community health, public health, epidemiology, and risk communication.

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

This symposium concept was discussed and endorsed by Dr. Ruth Etzel who serves on the Program Committee as a representative of the International Society for Children's Health & the Environment (ISCHE). Drs. Karr (submitter, presenter) and Loftus (presenter) are active members of ISCHE and Dr. Sherris is a postdoctoral trainee member.

Presentation Titles and Durations

Wildfire smoke: Toxicity, trends, and disparities

Catherine Karr, MD PHD

Duration of Presentation in Minutes

10

Wildfire smoke in early life and adverse pediatric health consequences: An updated review of epidemiological evidence

Allison Sherris, PhD

Duration of Presentation in Minutes

15

Understanding barriers to wildfire smoke protection in early life: Perspectives from a smoke impacted community

Christine Loftus, PhD MPH MS

Duration of Presentation in Minutes

15

Perspectives from providers: Knowledge gaps, educational needs, and new tools for patient guidance

Mary Crocker, MD, MPH

Duration of Presentation in Minutes

15

Guidelines and messaging resources for pediatricians and families

Stephanie M. Holm, MD, PhD, MPH

Duration of Presentation in Minutes

15

(202) Proposal ID: 1918171

Oxygen supplementation during neonatal resuscitation- Too little vs too much, does it matter?

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Deepika Sankaran**

Score: **0**

Participant(s)

Anup Katheria, M.D.

Position:

Associate Professor of Pediatrics

Organization:

University of California, San Diego School of Medicine

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Ola Didrik Saugstad, MD, PhD (he/him/his)

Position:

Professor

Organization:

Ann & Robert H. Lurie Children's Hospital of Chicago, University of Oslo, Norway

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS

Vishal kapadia, MD MSCS FAAP

Position:

Associate Professor of Pediatrics

Organization:

University of Texas Southwestern Medical School

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Deepika Sankaran, MD (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

University of California Davis Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

Satyan Lakshminrusimha, MD (he/him/his)

Position:
Professor and Chair

Organization:
University of California Davis Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Session Description

Session Description

Oxygen (O₂) is the most frequently used drug in neonatal resuscitation. During advanced cardiopulmonary resuscitation including chest compressions for neonatal bradycardia and cardiac arrest, the International Liaison Committee on Resuscitation advocates to increase inspired O₂ to 100%. However, similar ROSC outcomes are reported with the use of lower inspired O₂ during chest compressions.¹ Hyperoxia may be harmful in the post-resuscitation period.² Oxygen free radicals are important contributors to brain injury in perinatal

asphyxia.³ Judicious use of O₂ is warranted to minimize lung and brain tissue injury, and improve long-term outcomes. On the contrary, achieving SpO₂ >80% and heart rate >100bpm by 5 min after birth are associated with improved outcomes in preterm infants.⁴ Clinical trials are ongoing to investigate the use of higher inspired O₂ during deferred cord clamping to achieve early oxygenation while avoiding hyperoxia.⁵

1. Garcia-Hidalgo C et al. A Review of Oxygen Use During Chest Compressions in Newborns-A Meta-Analysis of Animal Data. *Front Pediatr.* 2018;6:400.
2. Kapadia VS et al. Perinatal asphyxia with hyperoxemia within the first hour of life is associated with moderate to severe hypoxic-ischemic encephalopathy. *J Pediatr.* 2013;163(4):949-954.
3. Saugstad OD et al. Oxygen therapy of the newborn from molecular understanding to clinical practice. *Pediatric Research.* 2019;85(1):20-29.
4. Oei JL et al. Outcomes of oxygen saturation targeting during delivery room stabilisation of preterm infants. *ADC Fetal and Neonatal Ed.* 2018;103(5):F446-f454.
5. Lakshminrusimha S et al. Differential Alveolar and Systemic Oxygenation during Preterm Resuscitation with 100% Oxygen during Delayed Cord Clamping. *Am J Perinatol.* 2023;40(6):630-637.

Learning Objectives

1. understand the physiology of oxygen utilization during resuscitation.
2. review current literature on optimal oxygen supplementation during resuscitation and target saturations in term and preterm infants.
3. explore knowledge gaps and future areas of research in oxygen supplementation and targeting in newborns during resuscitation.

Scholarly Session Questions

1. **Audience Size**
500
2. **Target audience**
Neonatologists, General Pediatricians, and Pediatric Trainees.
3. **Tracks**
Basic Science
Clinical Research
Community Pediatrics
General Pediatrics
Global Neonatal & Children's Health
Neonatology
Well Newborn

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are you or any of your speakers in any other sessions that we should take into account when scheduling?**
Neonatal Resuscitation Oral platform session
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
General Pediatrics and Neonatology
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Oxygenation during deferred cord clamping
Anup Katheria, M.D.

Duration of Presentation in Minutes

15

Hyperoxia and oxidative stress
Ola Didrik Saugstad, MD, PhD

Duration of Presentation in Minutes

15

Oxygen supplementation during resuscitation of preterm infants
Vishal kapadia, MD MSCS FAAP

Duration of Presentation in Minutes

15

Oxygen use during chest compressions
Deepika Sankaran, MD

Duration of Presentation in Minutes

15

Oxygenation in the post-resuscitation period and during therapeutic hypothermia

Satyan Lakshminrusimha, MD

Duration of Presentation in Minutes

15

(203) Proposal ID: 1902312

Neurogenetics of the Newborn

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Zachary Whitt**

Score: **0**

Participant(s)

Zachary A. Whitt, MD (he/him/his)

Position:

Perinatal and Neonatal Medicine Fellow, PGY-6

Organization:

Emory University School of Medicine

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Alissa M. D'Gama, MD, PhD (she/her/hers)

Position:

Neonatologist

Organization:

Boston Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian, White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Vann Chau, MD (he/him/his)

Position:

Associate Professor and Attending Neurologist

Organization:

The Hospital for Sick Children

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Jennifer Harmon, MD PhD (she/her/hers)

Position:

Assistant Professor

Organization:

Wake Forest School of Medicine of Wake Forest Baptist Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

Given the expansion of genomic medicine, the growing recognition that many relatively common neonatal neurological presentations have underlying genetic etiologies, and the potential of precision diagnosis in these conditions to impact clinical care (including emerging precision therapies), we propose a Hot Topics Symposia on “Neurogenetics of the Newborn.” We will discuss the most common neurogenetic disorders that present in the fetal and neonatal periods: unexplained seizures, brain malformations, and tone abnormalities. Whether in the newborn nursery or the neonatal intensive care unit, we will discuss the differential diagnosis, recommended laboratory and radiologic evaluation, and management of these disorders, as well as special considerations for these presentations. We will discuss the pros and cons of different genetic testing approaches for these disorders, including recent publications and evidence-based guidelines that propose a shift to an exome or genome-first approach in certain contexts. The session will be presented by a multidisciplinary group of providers with expertise in neonatology, geneticists, and neurology to ensure there is a comprehensive and in-depth review of each disorder. The format will include a presentation on each of the three conditions led by one member of the team with input from the other members to incorporate relevant expertise. The session will include time for questions and answers from the audience to allow for participants to learn as much as possible to take back and apply in their home institutions.

Learning Objectives

1. Construct a thorough differential diagnosis for three common neurogenetic presentations in the newborn period: unexplained seizures, brain malformations, and tone abnormalities.
2. Formulate a diagnostic strategy to evaluate the underlying etiology of seizures, suspected brain malformations, and tone abnormalities in neonates.

3. Develop an awareness of the impact of genetic testing and diagnosis on the clinical management of these disorders and on the families of these neonates.

Scholarly Session Questions

1. **Audience Size**
60
2. **Target audience**
General pediatricians, well newborn providers, neonatologists
3. **Tracks**
Critical Care
Genomics/Epigenomics
Neonatology
Neurology
Well Newborn
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
One of our members is a Child Neurologist and Geneticist, but is not a member of one of these groups, but it is felt that her expertise is essential for fully discussing these topics.
8. **Does this submission involve one or more specialties or disciplines?**
Our topic will cover Genetics/Genomics, Neurology, Neonatology, and Well newborn
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**
N/A

Presentation Titles and Durations

Genetic Brain Malformations

Zachary A. Whitt, MD

Duration of Presentation in Minutes

30

Genetics of Neonatal Seizures

Alissa M. D'Gama, MD, PhD

Duration of Presentation in Minutes

30

Genetics Tone Abnormalities: When to be Suspicious for a Genetic Etiology

Jennifer Harmon, MD PhD

Duration of Presentation in Minutes

30

(204) Proposal ID: 1925699

New Systematic Reviews from the Agency For Healthcare Research and Quality Addressing the Mental Health of Children And Adolescents

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Anjali Jain**

Score: **0**

Participant(s)

Anjali Jain, MD (she/her/hers)

Position:

Medical Officer

Organization:

Agency for Healthcare Research & Quality

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Leslie Sim, PhD (she/her/hers)

Position:

Professor of Psychology

Organization:

Mayo Clinic College of Medicine and Science

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Shelley S. Selph, MD, MPH (she/her/hers)

Position:

Associate Professor

Organization:

ohsu

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Ilya Ivlev, MD, PhD, MBI

Position:

Associate Professor

Organization:

Oregon Health & Science University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Sheila V. Patel, PhD (she/her/hers)

Position:
Dr.

Organization:
RTI International

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

Youth mental health is in crisis. Rigorously conducted systematic reviews (SRs) can inform evidence-based approaches to addressing mental health and wellbeing among children and teens. As part of the Agency for Healthcare Research and Quality's (AHRQ) mission to produce evidence to make healthcare safer, higher quality, more accessible and equitable, the Evidence-based Practice Center Program (EPC) at AHRQ conducts SRs on high priority topics nominated by professional organizations and the public. This session will

include lead investigators describing four new SRs and their findings on four pediatric mental health topics: 1). Management of suicidal thoughts and behaviors, 2). Treatment of disruptive behavior, 3). Mindfulness-based interventions for mental health and wellbeing of children and adolescents, and 4). Implementation of recommended mental health and substance use screening and counseling interventions in primary care. The presentations and moderated discussion will describe the methods for identifying and assessing intervention studies, the results and conclusions, research gaps and limitations as well as the state of implementation research for addressing mental health in primary care settings. There will be 3-5 minutes for a brief or clarifying question after each presentation followed by 20 minutes for Q & A discussion at the end of the session.

Learning Objectives

1. Describe AHRQ's systematic reviews on treating mental health conditions among children and adolescents and implementing recommended mental health and substance use screening and counseling interventions.
2. Recall the evidence for managing disruptive behaviors and suicidal thoughts and behaviors among children and adolescents.
3. Identify how mindfulness-based interventions are used to address mental health and wellbeing for children and adolescents in clinical and school-based settings.

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

The target audience includes practitioners and trainees, including general pediatricians and developmental and behavioral professionals including pediatricians, psychologists/therapists and psychiatrists; school-based health professionals, health services researchers including systematic reviewers and epidemiologists.

3. **Tracks**

Academic and Research Skills

Clinical Research

Developmental and Behavioral Pediatrics

General Pediatrics

Health Services Research

Mental Health

School and Community Health

Wellness and Well-being

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
n/a
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Dr. Jain has been a member of PAS for many years in the past but has been less involved/inactive since joining AHRQ in 2020. She is the medical officer for the reviews of these child health topics which are of high relevance to PAS attendees as they involve both research and clinical practice on a high priority topic.
8. **Does this submission involve one or more specialties or disciplines?**
Topic is relevant to General Pediatrics, Behavioral/Mental Health, Psychology and Psychiatry, School-based Health and Developmental Pediatrics, Health services research and Epidemiology
9. **If your session was presented at another conference, please describe the conference and presentation.**
n/a
10. **Additional comments**

Presentation Titles and Durations

The state of mental health among children and youth and the role of systematic reviews

Anjali Jain, MD

Duration of Presentation in Minutes

10

Management of suicidal thoughts and behaviors in youth

Leslie Sim, PhD

Duration of Presentation in Minutes

15

Psychosocial and Pharmacological Interventions for Disruptive Behavior in Children and Adolescents

Shelley S. Selph, MD, MPH

Duration of Presentation in Minutes

15

Mindfulness-based interventions for the mental health and wellbeing of children and adolescents

Ilya Ivlev, MD, PhD, MBI

Duration of Presentation in Minutes

15

Implementation of Recommended Mental Health and Substance Use Screening and Counseling Interventions in Primary Care Settings

Sheila V. Patel, PhD

Duration of Presentation in Minutes

15

(205) Proposal ID: 1905855

Beta-Lactam Precision Dosing in Children: The Time is Now

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Sonya Tang Girdwood**

Score: **0**

Participant(s)

Sonya C. Tang Girdwood, MD, PhD (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Cincinnati Children' Hospital Medical Center

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

H. Rhodes Hambrick, MD, MS (he/him/his)

Position:

Assistant Professor of Pediatric Nephrology

Organization:

Ann & Robert H. Lurie Children's Hospital of Chicago

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

ASPN

Gideon Stitt, PharmD, BCCCP (he/him/his)

Position:

Assistant Professor

Organization:

University of Utah School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Laura M. Dinnes, PharmD BCIDP BCPPS

Position:

Pediatric Antimicrobial Stewardship/Infectious Diseases Pharmacist

Organization:

Mayo Clinic Children's Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
PIDS

Ronaldo Morales Junior, PhD (he/him/his)

Position:
Postdoctoral Research Fellow

Organization:
Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

There has been great interest in recent years in providing individualized precision dosing of beta-lactam antibiotics in adults and children due to known highly variable drug exposures (i.e. concentrations over time) achieved with standard dosing. Recently completed beta-lactam precision dosing trials demonstrate benefits including decreased lengths of stay and lower mortality in specific subpopulations of adults when performed early and target concentrations are achieved. In children, data have been slower to emerge, but there remains strong interest in precision dosing.

In this session, we will introduce the audience to the basic clinical pharmacology principles that govern beta-lactam effectiveness and toxicity and discuss why certain pediatric patients are at increased risk of sub- or supratherapeutic concentrations. We will teach the concepts of therapeutic drug monitoring (TDM) and model-informed precision dosing (MIPD) and how they can reduce variability in beta-lactam antibiotic exposure and increase attainment of target concentrations. We will discuss specific patient populations or scenarios in which precision dosing of beta-lactam antibiotics may be beneficial due to an increased risk of altered concentrations, including patients with acute kidney injury, with augmented renal clearance, who are critically ill, and on extracorporeal support devices such as extracorporeal membrane oxygenation or continuous kidney replacement therapy. Experts who have launched beta-lactam precision dosing services at the Mayo Clinic and at Cincinnati Children's will describe the logistics and challenges of their services and provide examples of patients who have benefited from precision dosing. The session will conclude with a Q&A session.

Learning Objectives

1. State the basic clinical pharmacology principles that govern effectiveness and toxicity of beta-lactam antibiotics and factors that lead to variability in antibiotic concentrations
2. Identify pediatric patients who may benefit from beta-lactam precision dosing
3. Compare and contrast the beta-lactam precision dosing services for hospitalized children at two different institutions

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
General pediatricians, pediatric subspecialists, pharmacists, clinical pharmacologists, critical care physicians
3. **Tracks**
Children with Chronic Conditions
Clinical Research
Critical Care
Hematology/Oncology
Hospital Medicine
Infectious Diseases
Nephrology
Pharmacology and Therapeutics

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Please avoid scheduling at the same time as any other Pharmacology and Therapeutics sessions since we all have interest in P&T sessions and there are so few P&T sessions at PAS. It would also be great if this session was not scheduled at the same time as critical care or nephrology sessions.

In addition, the following people are in proposals for other sessions: Horace Rhodes Hambrick, Ronaldo Morales Junior, Sonya Tang Girdwood

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Gideon Stitt, PharmD, BCCPS is an Assistant Professor in the Division of Clinical Pharmacology at the University of Utah. Dr. Stitt's research focuses on antimicrobial dose optimization in children on extracorporeal support and the use of model-informed precision dosing to improve drug dosing in critically ill children. Utilizing physiologically-based pharmacokinetic (PBPK) modeling, Dr. Stitt's research program works to translate ex vivo drug disposition data to bedside dosing recommendations.

Ronaldo Morales Junior, PhD, is a postdoctoral research fellow in the Division of Translational and Clinical Pharmacology at Cincinnati Children's, with a focus on the pharmacokinetics and pharmacodynamics of antibiotics in pediatric patients. His work centers on improving therapeutic target attainment with an emphasis on special patient populations such as transplant recipients. His experience includes implementing a therapeutic drug monitoring service for antibiotics in a developing country, and he helped with the implementation of the beta-lactam precision dosing service at Cincinnati Children's. He has developed and published several beta-lactam models for use in the precision dosing service.

8. **Does this submission involve one or more specialties or disciplines?**

The speakers in this submission represent hospital medicine, nephrology, critical care medicine, pharmacy and clinical pharmacology. The topic is relevant to general pediatrics and all pediatric subspecialties.

9. **If your session was presented at another conference, please describe the conference and presentation.**

These five talks have never been presented together in one session. Some of the talks have been given independently of each other, mostly in local venues. Dr. Dinnes presented a selection of different content on the same topic at the Pediatric Pharmacy Association Annual Meeting as a Best Practice Platform presentation May 2024. Dr. Dinnes will be able to discuss almost two years worth of experience at Mayo Clinic at the time of this talk. A version of Dr. Morales Junior's talk was given by Dr. Tang Girdwood at IATDMCT 2024. This presentation will be updated for PAS 2025 with patient cases that were not available for Dr. Tang Girdwood's talk.

10. **Additional comments**

This session will be very timely as there is an international group, which includes Dr. Tang Girdwood and Dr. Erin Barreto who has mentored and overseen the work of Dr. Dinnes (proposed speaker), who is currently writing guidelines on individualized beta-lactam dosing in adult and children and will likely be published in late 2025.

Presentation Titles and Durations

Introduction to Clinical Pharmacology Principles, Therapeutic Drug Monitoring and Model-Informed Precision Dosing; Q&A (end)

Sonya C. Tang Girdwood, MD, PhD

Duration of Presentation in Minutes

30

The Case for Beta-lactam Precision Dosing in Pediatric Patients with Altered Renal Function

H. Rhodes Hambrick, MD, MS

Duration of Presentation in Minutes

15

The Case for Beta-lactam Precision Dosing in Critically Ill Pediatric Patients and those on Extracorporeal Support Devices

Gideon Stitt, PharmD, BCCCP

Duration of Presentation in Minutes

15

The Mayo Clinic Beta-lactam Precision Dosing Experience in Pediatric and Neonatal Patients

Laura M. Dinnes, PharmD BCIDP BCPPS

Duration of Presentation in Minutes

15

The Cincinnati Children's Beta-lactam Precision Dosing Service Experience

Ronaldo Morales Junior, PhD

Duration of Presentation in Minutes

15

(206) Proposal ID: 1915015

Neonatology Under Assault: Lessons from Recent Legal Actions to Ensure Uninterrupted and Protected Progress in Caring for the Extremely Fragile Infant

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Camilia Martin**

Score: **0**

Participant(s)

Josef Neu, MD (he/him/his)

Position:
Professor of Pediatrics

Organization:
University of Florida

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Peter J. Pitts (he/him/his)

Position:
Professor

Organization:
University of Paris School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Jonathan M. Fanaroff, MD, JD

Position:

Professor of Pediatrics & Director, Rainbow Center for Pediatric Ethics

Organization:

UH Rainbow Babies & Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Camilia R. Martin, M.D., M.S. (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Weill Cornell Medicine

Role:

Submitter;Speaker;Chair

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Session Description

Session Description

This session will dissect the increasing legal challenges confronting the field of neonatology nutrition and necrotizing enterocolitis (NEC), with a particular focus on how recent litigations have exploited gaps in clinical practice and scientific research. The session aims to equip neonatologists with essential tools and insights to maintain the progress and protection of neonatal care. A central theme will be the vulnerabilities inherent in the current understanding and characterization of diseases like NEC, which remain ill-defined and consequently expose the practice of neonatology to legal risks. The speakers will highlight how misconceptions around disease associations, risks, and causality can lead to significant legal challenges and emphasize the urgent need for clearer disease characterization and use of appropriate terminology to mitigate these risks. Additionally, the session speakers will discuss the critical role of informed consent, comprehensive parent education, and the implementation of evidence-based policies to safeguard medical practices and the well-being of families. The talks will advocate for transforming legal precedents into robust federal interventions to protect vulnerable populations such as preterm infants. Emphasizing precision in language and practice, the session will guide neonatologists in developing strategies to prevent legal exploitation, foster trust, and emphasize clarity within the neonatology community. Overall, this session aims to underscore the importance of vigilance, proactive strategies, and collaboration across hospital and government levels to ensure that uninterrupted care and advances in neonatal care for highly fragile infants continue effectively.

Learning Objectives

1. Participants will learn how imprecise NEC definitions and unclear communication lead to legal exploitation and the importance of precise language in clinical neonatology and research.
2. Participants will learn how inadequate court rulings on medical issues necessitate stronger federal interventions to protect the health of vulnerable populations like preterm infants.
3. Participants will gain legal strategies to protect their neonatology practice, emphasizing informed consent, comprehensive parent education, and evidence-based guidelines for improved patient and family care.

Scholarly Session Questions

1. **Audience Size**

200

2. **Target audience**

Neonatologists, pediatric gastroenterologists, pediatricians, nutritionists, and advanced practice providers in the NICU, cardiac ICU, and newborn nursery.

3. **Tracks**

Advocacy

Gastroenterology/Hepatology

General Pediatrics

Neonatology

Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Avoid overlap with other Neonatology sessions, if possible.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Peter J. Pitts is not a member of the listed organizations. Mr. Pitts is an internationally known expert in healthcare policy, lecturing worldwide. Peter Pitts is President and co-founder of the Center for Medicine in the Public Interest. Mr. Pitts is a former United States Senior Executive

Service member and Associate Commissioner of the US Food & Drug Administration. He served as senior communications and policy adviser to the Commissioner. He supervised the FDA's Office of Public Affairs, Office of the Ombudsman, Office of Special Health Issues, Office of Executive Secretariat, and Advisory Committee Oversight and Management. His comments and commentaries on healthcare policy issues regularly appear in The New York Times, The Los Angeles Times, The Washington Post, The Wall Street Journal, The Financial Times, Health Affairs, Time, Newsweek, The Boston Globe, The Washington Times, The Chicago Tribune, The San Francisco Examiner, Investor's Business Daily, The Baltimore Sun, The Economist, The Lancet, Nature Biotechnology, BioCentury, The Journal of Commercial Biotechnology, the BBC World Service, Fox News, CNBC, Bloomberg, The PBS NewsHour, NBC Dateline, Sky News, La Stampa. L'Opinion, The Daily Show with John Stewart, among others.

Mr. Pitts offers extensive expertise and is uniquely qualified to speak on this important public health issue. We would be very fortunate to have him participate in PAS and this session and speak on a topic relevant to all pediatricians.

8. **Does this submission involve one or more specialties or disciplines?**

This submission encompasses the following specialties and disciplines: pediatrics, neonatology, gastroenterology, and health policy.

9. **If your session was presented at another conference, please describe the conference and presentation.**

Not applicable.

10. **Additional comments**

Presentation Titles and Durations

When Nutrition Turns to Liability: Recent Legal Cases on Formula and Necrotizing Enterocolitis

Josef Neu, MD

Duration of Presentation in Minutes

15

When Legal and Regulatory Precedent Fails: Securing Federal Protections for Neonatal Health

Peter J. Pitts

Duration of Presentation in Minutes

30

Balancing Care and Liability: Legal Insights for Neonatologists

Jonathan M. Fanaroff, MD, JD

Duration of Presentation in Minutes

20

Precision Matters: Strengthening Evidence-Based Care, Scientific Integrity, and Family Education

Camilia R. Martin, M.D., M.S.

Duration of Presentation in Minutes

15

(207) Proposal ID: 1929798

Thinking Differently: Pediatric organizations coming together to reshape trends in the pediatric workforce

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Rebecca Blankenburg**

Score: **0**

Participant(s)

Robert J. Vinci, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

Boston University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS

Laura Degnon, CAE (she/her/hers)

Position:

President & CEO

Organization:

Degnon Associates

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Mary Beth Leonard, MD, MSCE (she/her/hers)

Position:

Arline and Pete Harman Professor and Chair

Organization:

Stanford University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS, SPR, ASPN

Rebecca Blankenburg, MD, MPH (she/her/hers)

Position:

Clinical Professor; Assistant Dean of GME; Associate Chair of Education

Organization:

Stanford University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, APS

Sallie Permar, MD PhD (she/her/hers)

Position:
Professor

Organization:
Weill Cornell

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
APS, SPR, PIDS

Ann Reed, Md (she/her/hers)

Position:
Professor of Pediatrics

Organization:
Duke University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

JOSEPH W. ST GEME, III, MD (he/him/his)

Position:
Professor, Chair of the Department of Pediatrics, Physician-in-Chief

Organization:
Childrens Hospital of Philadelphia

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR, PIDS

Benjamin Hoffman, MD (he/him/his)

Position:
Professor of Pediatrics

Organization:
OHSU

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Michael A. Barone, MD, MPH (he/him/his)

Position:
President / CEO

Organization:
American Board of Pediatrics

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Stephen R. Daniels, MD, PhD, MPH

Position:
Professor and Chair, Department of Pediatrics; Pediatrician-in-Chief,
Children's Hospital Colorado

Organization:
University of Colorado School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Megan Aylor, MD (she/her/hers)

Position:
Professor

Organization:
Oregon Health & Science University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Melissa D. Klein, MD, MEd (she/her/hers)

Position:
Professor of Pediatrics

Organization:
Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, APS

Session Description

Session Description

In March 2024, the pediatric community was startled by an 8% unmatched rate in the NRMP initial (pre-SOAP) match. However, leaders in pediatrics have been engaged in addressing the decreasing numbers of medical students going into pediatrics for the past 5 years. Challenges include salary inequities between pediatric and adult providers, long length of subspecialty training, geographic maldistribution of physicians, regionalization of pediatric care with high community hospital pediatric bed closures, and decreased pediatrics exposure in medical school. The recent NASEM Report on Workforce made several recommendations regarding how to best address this crisis.

In this informative and interactive plenary, leaders of the AMSPDC Workforce Initiative will share an overview of workforce challenges, opportunities, and innovations. We will share data about the numbers of learners/providers at each step in the pediatric pathway and specific challenges our specialty faces. We will then share a brief overview of the 2025 AMSPDC Workforce Initiative as well as the NASEM study and recommendations for the pediatrics workforce. Leaders of each of the four domains of the new AMSPDC Workforce Initiative (Economic Strategy, Education Redesign, Physician Scientists, and Practice Collaboration) will then provide an overview of our strategic plan and ongoing efforts. A panel representing numerous pediatric organizations will then reflect on and answer questions about the strategic plans. Participants will leave with tangible ideas for improving the pathway into pediatrics at their own institutions, as well as identify opportunities for further innovation nationally.

Learning Objectives

1. Discuss the current threats and opportunities for the pediatric workforce.
2. Analyze strategic plans for improving the pediatric workforce.
3. Develop innovative solutions for improving the pediatric workforce.

Scholarly Session Questions

1. **Audience Size**
300
2. **Target audience**

Chairs, Policymakers, Advocates, Health Service Researchers,
Educational Leaders, Learners, Clinicians

3. **Tracks**

Advocacy
Career Development
Children with Chronic Conditions
Community Pediatrics
Diversity, Equity, and Inclusion
Health Equity/Social Determinants of Health
Health Services Research
Medical Education
Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

None

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

This topic of Workforce Concerns and Solutions is of interest to General Pediatrics and all subspecialties.

9. **If your session was presented at another conference, please describe the conference and presentation.**

None

10. **Additional comments**

This session represents a broad pediatric organizational effort on addressing the pediatric workforce issues with innovative solutions.

Presentation Titles and Durations

Overview of Current Workforce Crisis

Robert J. Vinci, MD

Duration of Presentation in Minutes

10

Overview of the AMSPDC Workforce Initiative
Laura Degnon, CAE

Duration of Presentation in Minutes

10

AMSPDC Workforce Initiative: Economic Strategy
Mary Beth Leonard, MD, MSCE

Duration of Presentation in Minutes

10

AMSPDC Workforce Initiative: Educational Redesign
Rebecca Blankenburg, MD, MPH

Duration of Presentation in Minutes

10

AMSPDC Workforce Initiative: Physician Scientists
Sallie Permar, MD PhD

Duration of Presentation in Minutes

10

AMSPDC Workforce Initiative: Practice Collaboration
Ann Reed, Md

Duration of Presentation in Minutes

10

Panel of Representatives from Pediatric Organizations to reflect on ideas
presented and answer questions

JOSEPH W. ST GEME, III, MD

Duration of Presentation in Minutes

30

Panel of Representatives from Pediatric Organizations to reflect on ideas
presented and answer questions

Benjamin Hoffman, MD

Duration of Presentation in Minutes

30

Panel of Representatives from Pediatric Organizations to reflect on ideas
presented and answer questions

Michael A. Barone, MD, MPH

Duration of Presentation in Minutes

30

Panel of Representatives from Pediatric Organizations to reflect on ideas
presented and answer questions

Stephen R. Daniels, MD, PhD, MPH

Duration of Presentation in Minutes

30

Panel of Representatives from Pediatric Organizations to reflect on ideas presented and answer questions

Megan Aylor, MD

Duration of Presentation in Minutes

30

Panel of Representatives from Pediatric Organizations to reflect on ideas presented and answer questions

Melissa D. Klein, MD, MEd

Duration of Presentation in Minutes

30

(208) Proposal ID: 1928798

Family business: Innovations in multi-generational integrated behavioral health services addressing adversity, attachment, Autism, and adolescents

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Ayelet Talmi**

Score: **0**

Participant(s)

Ayelet Talmi, PhD (she/her/hers)

Position:

Professor

Organization:

University of Colorado School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Melissa Buchholz, PsyD (she/her/hers)

Position:

Professor

Organization:

University of Colorado School of Medicine and Children's Hospital
Colorado

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA

ABIGAIL S. ANGULO, MD, MPH (she/her/hers)

Position:

Associate Professor

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Jessica Kenny, PhD (she/her/hers)

Position:

Assistant Professor, Licensed Clinical Psychologist

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
APA

Session Description

Session Description

Pediatric primary care settings are critical ports of entry for accessing behavioral health services. This session explores the importance of identifying and addressing family Social Determinants of Health (SDoH) when delivering integrated behavioral health services to early childhood, neurodiverse, and adolescent populations.

Universal screening for SDoH helps identify family-level challenges, including resource needs, safety, substance use, and mental health issues. More than 137,250 screeners were administered since 2017. A 22% positive rate suggests that many families experience psychosocial stress that should be addressed within a medical home with integrated behavioral health.

Implementing an early childhood integrated behavioral health model (HealthySteps, HS) provides a framework for identifying and addressing SDoH in families with young children. Caregiver needs and contextual factors impacting development and relational health are identified and addressed early in a child's life, leading to improved health outcomes later in life.

To address the potential delays in autism diagnoses, a Developmental Behavioral Pediatrician (DBP) integrated in the medical home supports PCPs in identifying neurodevelopmental differences, improving timely access to developmental expertise. The DPB provides individualized developmental diagnoses and recommendations and integrated providers support families in navigating complex service systems to access care.

Assessing SDoH allows medical homes to address contextual factors that may contribute to adolescent depression and suicidality. Overall PHQ-9A scores were correlated with caregiver concerns about adolescent's educational needs

($r = .16$, $p < .01$). Caregiver concerns about housing/becoming unhoused were associated with an elevated PHQ-9A at visit 2 ($r = .66$, $p < .01$).

Learning Objectives

1. Examine the importance of Social Determinants of Health (SDoH) screening for adverse experiences and environments with families seen in pediatric primary care settings.
2. Identify strategies to enhance nurturing relationships by providing families with integrated behavioral health services and supports to enhance the health and well-being of pediatric populations.
3. Describe ways in which family experiences, including adversity factors, impact perinatal/infant/early childhood mental health, neurodiverse populations, and adolescent depression and suicidality.

Scholarly Session Questions

1. **Audience Size**

125

2. **Target audience**

Primary care providers interested in advancing integrated behavioral health services and supports that target Social Determinants of Health (SDoH) and adversity, and perinatal/infant/early childhood populations, neurodiverse populations, and adolescent depression and suicidality; residency training settings interested in how integrated behavioral health programs can build pediatric residents' capacity to address mental health, behavior, and development.

3. **Tracks**

Developmental and Behavioral Pediatrics
General Pediatrics
Health Equity/Social Determinants of Health
Mental Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

N/A

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Three of the speakers are integrated behavioral health program directors and licensed clinical psychologists. They work exclusively in pediatric primary care settings in an academic medical center and engage in integrated primary care behavioral health integration program development, implementation, evaluation, and dissemination. They are also engaged in workforce capacity building efforts, training pediatric trainees and learners in identifying and addressing mental health, behavior, and development. They are members of national psychology organizations (e.g., American Psychological Association, Society of Pediatric Psychology, Association of Psychologists in Academic Health Centers, Collaborative Family Healthcare Association) and are actively engaged in systems, policy, and advocacy efforts.

8. **Does this submission involve one or more specialties or disciplines?**

Developmental Pediatrics, Psychology, General Pediatrics, Behavioral Health

9. **If your session was presented at another conference, please describe the conference and presentation.**

No

10. **Additional comments**

N/A

Presentation Titles and Durations

What's stress got to do with it? The role of integrated behavioral health in addressing family-level adversity

Ayelet Talmi, PhD

Duration of Presentation in Minutes

17

It starts here: Promoting health and addressing adversity with our youngest patients

Melissa Buchholz, PsyD

Duration of Presentation in Minutes

17

Championing neurodiversity: Identifying and supporting autistic youth and their families in the primary care setting

ABIGAIL S. ANGULO, MD, MPH

Duration of Presentation in Minutes

17

Context matters: The relationship between social determinants of health and adolescent depression/suicidality

Jessica Kenny, PhD

Duration of Presentation in Minutes

17

(209) Proposal ID: 1918088

HEAL KIDS (Knowledge, Innovation and Discovery Studies) Pain Program

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Kevin Watt**

Score: **0**

Participant(s)

Kevin M. Watt, MD, PhD

Position:

Professor

Organization:

University of Utah School of Medicine

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Rachel G. Greenberg, MD, MB, MHS (she/her/hers)

Position:

Associate Professor

Organization:

Duke Clinical Research Institute

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Amy L. Drendel, DO MS

Position:

Professor

Organization:

Medical College of Wisconsin

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Chani Traube, MD, FAAP, FCCM

Position:

Professor of Pediatrics

Organization:

Weill Cornell Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

Senthilkumar Sadhasivam, MD, MPH, MBA (he/him/his)

Position:
Professor, Executive Vice Chair and Associate Dean for Research

Organization:
University of Pittsburgh Medical Center (UPMC), Pittsburgh

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

As part of the NIH's Helping to End Addiction Long-term (HEAL) Initiative, the NICHD-sponsored HEAL KIDS (Knowledge, Innovation and Discovery Studies) Pain program was funded to support innovative, multi-site clinical trials focused on improving the assessment, management, and/or treatment of acute pain in children. Pain in children is common, often under-recognized, inconsistently assessed, and inadequately measured and treated. Moreover, the relationship between pain and human development, including any potential effects of repeated pain experiences on future physical dependency, remains largely unexplored. The overall goal of the HEAL KIDS Pain program is to support

multi-site clinical trials that seek to establish or implement systematic and/or multimodal approaches for the diagnosis, assessment, and effective treatment of acute pain for children across the continuum of care. The HEAL KIDS Pain Program funds three innovative, groundbreaking, large-scale, multi-site clinical trials: 1) MoKA - Efficacy of intravenous (IV) sub-dissociative ketamine versus IV morphine in children with acute pain; 2) OPTICOM - Optimizing Pain Treatment In Children On Mechanical ventilation; and 3) PRECISE - Prospective Randomized Evaluation of Analgesia for Cardiac and Idiopathic Scoliosis Spine Fusion Elective Surgery in Children. In addition to the trials, HEAL KIDS also funds a Resource and Data Center to provide leadership in data curation and harmonization and administrative and logistical support for the program. The purpose of this Hot Topic Scientific Session is to showcase this newly funded program to the pediatric community.

Learning Objectives

1. Upon completion, participants will be able to highlight the challenges of diagnosis, assessment, and effective treatment of acute pain in children.
2. Upon completion, participants will be able to discuss the HEAL KIDS Pain Program and its primary and secondary objectives.
3. Upon completion, participants will be able to provide an overview of the three HEAL KIDS clinical trials.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Providers who treat acute pain, e.g., Emergency Medicine, Hospitalists, Intensivists, Palliative Care; Clinical Trialists
3. **Tracks**
Clinical Research
Critical Care
Emergency Medicine
Hospital Medicine
Neonatology
Palliative Care
Pharmacology and Therapeutics
Sedation Medicine
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Friday, April 25
Saturday, April 26

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

N/A

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr. Sadhasivam is a member of the Society for Pediatric Anesthesia but is not a member of AAP, APA, APS, SPR, ASPN, or PIDS. We included him because he is the PI of one of the three trials that will be presented.

8. **Does this submission involve one or more specialties or disciplines?**

Topic is acute pain care involving multiple subspecialties including Critical Care, Emergency Medicine, Hospital Medicine, Neonatology, Palliative Care, and Pharmacology and Therapeutics

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

We have two Jewish presenters who can not present Friday after noon or all day Saturday. They are available to present Friday morning or anytime Sunday or Monday.

Presentation Titles and Durations

Overview of the HEAL KIDS Pain Program

Rachel G. Greenberg, MD, MB, MHS

Duration of Presentation in Minutes

15

MoKA Trial - Efficacy of intravenous (IV) sub-dissociative ketamine versus IV morphine in children with acute pain

Amy L. Drendel, DO MS

Duration of Presentation in Minutes

20

OPTICOM Trial - Optimizing Pain Treatment In Children On Mechanical ventilation

Chani Traube, MD, FAAP, FCCM

Duration of Presentation in Minutes

20

Prospective Randomized Evaluation of Analgesia for Cardiac and Idiopathic Scoliosis Spine Fusion Elective Surgery in Children

Senthilkumar Sadhasivam, MD, MPH, MBA

Duration of Presentation in Minutes

20

(210) Proposal ID: 1917608

Launching Lifelong Health by Improving the Health and Wellbeing of Children:
A New National Academy of Science, Engineering, Medicine Report

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Tina Cheng**

Score: **0**

Participant(s)

Tina L. Cheng, MD, MPH (she/her/hers)

Position:

Professor and Chair of Pediatrics

Organization:

Cincinnati Children's Hospital Medical Center, Univ of Cincinnati

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS, SPR

Kelly J. Kelleher, MD MPH

Position:

Professor

Organization:

Nationwide Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS, SPR

Jennifer Walton, MD, MPH, FAAP (she/her/hers)

Position:

Associate Professor of Clinical Pediatrics

Organization:

University of Miami Leonard M. Miller School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

James M. Perrin, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

MassGeneral Hospital for Children; Harvard Med School

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, APS

Aimee Grace, MD, MPH, FAAP (she/her/hers)

Position:
Director, Office of Strategic Health Initiatives

Organization:
University of Hawai'i System

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Session Description

Session Description

The United States faces a crisis of worsening trends in the health and wellbeing of children, adolescents, and young adults, coupled with more chronic disease and disability among working age groups, partly representing childhood problems persisting into adulthood. A key report from the National Academies documents increases in the incidence of chronic diseases, mental and behavioral health concerns, and significant disparities among population subgroups and calls for transforming care to launch lifelong health for

America's children.

Even with expanded insurance coverage, many children lack access to adequate care. Health care payment models, usually relying on fee-for-service or value-based arrangements focused on lowering costs for high-cost adult patients, do not provide child health clinicians the flexibility or incentives to work with families and partner with communities to address their needs. The report focused on the health care sector, defined broadly to include clinical and community care, along with public health investments in child and family health and school-based efforts. The work builds on an ever-expanding body of research on the importance of early life experiences, relationship-based care, genetics, and developmental origins of health and disease. This session will cover key areas: the changing structure of pediatric care (increasing community base and team care), ways to increase national focus on improving health and health care, improving health care financing and payment, building consumer voice, and improving public health and schools' efforts in health care and promotion.

This session is co-sponsored by the Pediatric Policy Council (APA, APS, AMSPDC, SPR with AAP convening).

Learning Objectives

1. Identify comprehensive strategies to reverse the concerning trends in child and adolescent health and wellbeing.
2. Describe programs and policies needed to improve child, adolescent, and family health and transform care.
3. Describe opportunities to improve financing and payment for health care for children.

Scholarly Session Questions

1. **Audience Size**

200

2. **Target audience**

All attendees: trainees, general pediatricians, pediatric subspecialists, educators, policymakers

3. **Tracks**

Advocacy

Children with Chronic Conditions

Community Pediatrics

Diversity, Equity, and Inclusion

Health Equity/Social Determinants of Health

Health Services Research

Leadership and Business Training
Public Health
School and Community Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
APA, APS, SPR Plenaries
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
NA
8. **Does this submission involve one or more specialties or disciplines?**
Child health care transformation crosses all specialties and disciplines.
9. **If your session was presented at another conference, please describe the conference and presentation.**
A public briefing on the National Academies report will be conducted on release in September 2024. The proposed PAS session goes into much greater detail.
10. **Additional comments**

Presentation Titles and Durations

The Case for Transformation, Principles for Change

Tina L. Cheng, MD, MPH

Duration of Presentation in Minutes

14

Prevention, Health Promotion, and Public Health for Lifelong Health

Kelly J. Kelleher, MD MPH

Duration of Presentation in Minutes

14

Health Equity and Cross Sector Approaches

Jennifer Walton, MD, MPH, FAAP

Duration of Presentation in Minutes

14

Report Transformation Recommendations
James M. Perrin, MD

Duration of Presentation in Minutes

14

Transformation Next Steps
Aimee Grace, MD, MPH, FAAP

Duration of Presentation in Minutes

14

(211) Proposal ID: 1933169

Pharmacogenetic testing in Pediatrics: Tests you Should Use in Your Clinical Practice

Session Type: **Basic-Translational-Clinical Roundtable**

Proposal Status: **Complete / Locked**

Submitter: **Bruce Carleton**

Score: **0**

Participant(s)

Bruce Carleton, BSc, PharmD

Position:

Professor and Chair, Division of Translational Therapeutics, Department of Pediatrics

Organization:

University of British Columbia Faculty of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Gabriella S. Groeneweg, MA (she/her/hers)

Position:

Research Program Manager

Organization:

University of British Columbia Faculty of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Geert W. 't Jong, MD, PhD (he/him/his)

Position:

Pediatrician, Pharmacologist, Hospitalist

Organization:

Max Rady College of Medicine, Rady Faculty of Health Sciences,
University of Manitoba

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Session Description

Session Description

Pharmacogenetic testing to screen patients for their individualized risk of adverse events, prediction of what is most likely to be effective or safe, has

come of age. More than 450 drugs licensed in the United States have pharmacogenetic information in the drug's label (and more than 1000 globally). This information ranges from information that prescribers may find useful to mandatory testing before the drug is prescribed and used by the patient. There are more than 200 clinical guideline annotations for prescription drug pharmacogenetics; 32 guidelines have been written for pediatric prescribing specifically. But beyond labeling information and guidelines is a wealth of scientific literature that also details pharmacogenetic findings. How does one know what literature without labeling or guideline advice is relevant to use for clinical practice? Labeling and guideline production lag behind the production of evidence in the peer-reviewed literature. This is particularly true in underserved populations like pediatrics and pregnancy but also in specialized populations within these groups like childhood cancer. This session will cover the top 10 pharmacogenetic tests pediatricians should order for their patients, how pharmacogenetic testing was implemented within a national network of pediatric health centres and thresholds of evidence for pharmacogenetic testing. Participants will learn which patients should be tested and for what genetic variants. Case examples will be used to encourage uptake of practical knowledge and discussion.

Learning Objectives

1. Identify at least 10 pharmacogenetic tests that are of value in pediatric clinical medicine.
2. Decide which patients should be tested for pharmacogenetic variants and for whom such testing is not necessary.
3. Explain relevant evidence thresholds for evidence-based pharmacogenetic testing

Scholarly Session Questions

1. **Audience Size**

50

2. **Target audience**

Pediatricians in practice, academic clinician scientists, specialist pediatricians (oncology, neurology, psychiatry, clinical pharmacology), clinical pharmacy, pharmacovigilance, drug safety, quality improvement, epidemiology, education, general pediatrics, pediatric hospital medicine

3. **Tracks**

Children with Chronic Conditions
Community Pediatrics
Core Curriculum for Fellows
General Pediatrics

Genomics/Epigenomics
Hospital Medicine
Pharmacology and Therapeutics
Quality Improvement/Patient Safety

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
One speaker has a Master's degree in organizational behaviour and will speak about national implementation of pharmacogenetic testing. Her role was to oversee this program across 10 academic pediatric health centres across Canada.
8. **Does this submission involve one or more specialties or disciplines?**
Yes - pharmacogenetics is within clinical pharmacology and all disciplines of medicine and nursing, etc prescribe, dispense or monitor medication use outcomes. Drug therapy is a cross-cutting theme of all specialities and most health care disciplines involved in pediatric care.
9. **If your session was presented at another conference, please describe the conference and presentation.**
Not applicable
10. **Additional comments**

Presentation Titles and Durations

Top 10 Pharmacogenetic Tests to Use in Pediatric Clinical Care

Bruce Carleton, BSc, PharmD

Duration of Presentation in Minutes

20

National Implementation of Pharmacogenetic Testing in Pediatric Health Centres across Canada

Gabriella S. Groeneweg, MA

Duration of Presentation in Minutes

20

Evidence Thresholds for Pharmacogenetic Testing

Geert W. 't Jong, MD, PhD

Duration of Presentation in Minutes

20

(212) Proposal ID: 1933359

Streamlining the EHR for neonatologists: Smart solutions to ease your everyday challenges

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Ameena Husain**

Score: **0**

Participant(s)

Ameena Husain, DO (she/her/hers)

Position:

Assistant Professor

Organization:

University of Utah School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Antonio Hernandez, MD (he/him/his)

Position:

Associate Professor

Organization:

The University of Texas Health Science Center at San Antonio Joe R. and Teresa Lozano Long School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Nicholas Carr, DO

Position:

Associate Professor, Neonatology

Organization:

Intermountain Health

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Lindsey A. Knake, MD MS

Position:

Assistant Professor

Organization:

University of Iowa

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

Shama Patel, MD, MPH

Position:
Assistant Professor of Pediatrics, Attending Neonatologist and Physician Informaticst

Organization:
Nationwide Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Session Description

Session Description

In this session, we will discuss tangible ways to improve efficiency for daily tasks within the electronic health record (EHR) for neonatal providers. The talks will be divided into focus areas of note documentation, daily review of patient data, and automation tools. Within each focused talk, we will discuss general approaches to increase speed and ease of use of the EHR, as well as specific examples of solutions that are being used in some NICUs. We will provide

informatics concepts that are applicable across EHR systems, but will also highlight some Epic (Verona, WI) tools in portions of the talks to provide a granular level of detail of build solutions that participants could utilize and implement in their respective institutions. Finally, we will finish with a talk that describes the area of applied clinical informatics and paths to becoming a physician/provider informaticist. We will discuss the many benefits that can come with this knowledge base and how to make changes effectively within your institution.

Learning Objectives

1. Explore practical build solutions that increase efficiency in note-writing and patient data review.
2. Understand methods available to automate some key NICU tasks within the EHR.
3. Learn how the area of applied clinical informatics can improve efficiency, utility, and ease of use of the EHR.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Neonatologists and Neonatal Advanced Practice Providers
3. **Tracks**
Artificial Intelligence
EHR/Medical Informatics
Neonatology
Social Media & Technology
Well Newborn
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Pre-conference program: From Cribs to Computer Code: Surfing the AI Wave in Neonatology
Debate Pro/Con session: Defining the Perfect NICU Progress Note: Too Much, Too Little or Just Right?
Scholarly session: From innovation to implementation in the NICU: understanding the journey of artificial

intelligence technology

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Antonio Hernandez is not a member of any of these organizations, but is an Associate Professor in Neonatology at UT Health San Antonio, and is a physician informaticist.

8. **Does this submission involve one or more specialties or disciplines?**

Neonatology

9. **If your session was presented at another conference, please describe the conference and presentation.**

10. **Additional comments**

Presentation Titles and Durations

Streamlining the EHR for neonatologists: Reviewing, aggregating, and summarizing patient data more efficiently

Ameena Husain, DO

Duration of Presentation in Minutes

15

Streamlining the EHR for neonatologists: Impact of note documentation formatting on clarity and accuracy

Antonio Hernandez, MD

Duration of Presentation in Minutes

15

Streamlining the EHR for neonatologists: Solutions to improve the ease and efficiency of daily documentation

Nicholas Carr, DO

Duration of Presentation in Minutes

15

Streamlining the EHR for neonatologists: Utilizing automation and clinical decision support tools

Lindsey A. Knake, MD MS

Duration of Presentation in Minutes

15

What is applied clinical informatics? How to become your local EHR champion!

Shama Patel, MD, MPH

Duration of Presentation in Minutes

15

(213) Proposal ID: 1928115

Early Identification and Intervention for Infant Siblings of Children with Autism
Diagnoses: Advances and Clinical Implications

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Carol Wilkinson**

Score: **0**

Participant(s)

Catherine Burrows, PhD (she/her/hers)

Position:
Assistant Professor

Organization:
University of Minnesota Medical School

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Carol L. Wilkinson, MD PhD (she/her/hers)

Position:
Assistant Professor

Organization:
Boston Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian, White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA

Tiffany Woynaroski, PhD, CCC-SLP (she/her/hers)

Position:

Assistant Professor

Organization:

Vanderbilt University Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Session Description

Session Description

Early identification of children with autism and developmental delays is critical for facilitating early intervention and improving long-term outcomes. Infants with an older autistic sibling (hereafter referred to simply as “infant siblings”) have

elevated likelihood for autism and for delays in other domains, including language, sensory, and motor development. Prospective longitudinal studies of infant siblings have informed our understanding of recurrence rates and of child and family factors that predict later outcomes. This symposium will feature a multidisciplinary panel of experts who will cover the latest research findings relevant to early identification and intervention in infant siblings with a specific focus on the primary care setting.

The session will first provide an overview of recent findings for rates of autism and other developmental delays in infant siblings. Speakers will present longitudinal infant data on prelinguistic social communication skills, sensory features, and motor delays, discussing how these early developmental markers vary by sex and predict later developmental outcomes. The symposium will also highlight emerging research on neuroimaging measures as potential clinical tools for early identification of neurodevelopmental conditions. In addition, attendees will learn about the promise of caregiver-mediated preemptive interventions that aim to support the development of infant siblings before formal diagnosis.

The session will conclude with practical guidance for pediatricians, offering recommendations for monitoring infant siblings and counseling families on early intervention strategies. Finally, implications for general autism screening will be discussed, equipping clinicians with actionable knowledge for improving care.

Learning Objectives

1. Upon completion, participants will know the estimated prevalence of autism and non-autism developmental delay amongst infant siblings.
2. Upon completion, participants will be able to name at least three child and family factors that are associated with later autism diagnosis.
3. Upon completion, participants will be able to describe one preemptive intervention approach with the potential to increase caregivers' use of strategies that support development

Scholarly Session Questions

1. **Audience Size**

150

2. **Target audience**

Primary care pediatricians and providers. Developmental Behavioral Pediatricians. Trainees interested in primary care, autism, and developmental pediatrics.

Note - we were unsure of the audience size, so please your best estimate.

3. **Tracks**

Clinical Research
Community Pediatrics
Developmental and Behavioral Pediatrics
General Pediatrics
Health Services Research
Neurology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

APA Developmental-Behavioral Pediatrics SIG

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Our presenters also include researchers in the field of developmental and child clinical psychology, speech-language pathology, and neuroscience, as well as caregivers of autistic children and their younger siblings. While not all pediatricians, their diverse, cross-disciplinary perspectives on early infant development as it relates to autism and neurodevelopmental conditions will be valuable to the PAS audience. Speakers are members of the Baby Sibling Research Consortium, the Society of Developmental Behavioral Pediatrics, the American Psychological Association, the American Speech-Language-Hearing Association, the Society for Research in Child Development, the International Congress on Infant Studies, and the International Society for Autism Research. They are experts and leaders in the topics they are presenting and are dedicated to sharing important findings from infant sibling research with pediatricians to improve outcomes.

8. **Does this submission involve one or more specialties or disciplines?**

Developmental Behavioral Pediatrics, Clinical Child Psychology

9. **If your session was presented at another conference, please describe the conference and presentation.**

NA

10. **Additional comments**

NA

Presentation Titles and Durations

Early developmental markers associated with autism diagnosis

Catherine Burrows, PhD

Duration of Presentation in Minutes

25

Emerging research on neuroimaging as potential clinical tool for early identification of autism and developmental delays

Carol L. Wilkinson, MD PhD

Duration of Presentation in Minutes

20

Caregiver-mediated interventions prior to autism diagnosis

Tiffany Woynaroski, PhD, CCC-SLP

Duration of Presentation in Minutes

20

(214) Proposal ID: 1925983

Pediatric Research in the CTSA: The Importance of Integrating Child Health into Lifecourse Research

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Mark Schleiss**

Score: **0**

Participant(s)

Mark R. Schleiss, MD (he/him/his)

Position:

American Legion and Auxiliary Heart Research Foundation Professor

Organization:

UMN Medical School

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR, PIDS

Jessica Kahn, MD MPH (she/her/hers)

Position:

Senior Associate Dean, Clinical and Translational Research

Organization:

Albert Einstein College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA

Karen Wilson, MD, MPH (she/her/hers)

Position:

Professor

Organization:

University of Rochester School of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS, SPR

Daniel Armstrong, PhD

Position:

Professor

Organization:

University of Miami Miller School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
APS

Jareen Meinzen-Derr, PhD, MPH (she/her/hers)

Position:
Professor

Organization:
Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Session Description

Session Description

The impact of childhood experience on adult health is a hot topic in Pediatrics. There is an ever-increasing need to consider studies of child health in the broader context of lifecourse research. This concept is key component of the NIH-funded Clinical and Translational Science (CTSA) network. Collaborative lifecourse research conducted within the CTSA networks is, in particular, embodied by the "Integration Across the Lifecourse" committee. This committee is one of the CTSA "Enterprise Committees (ECs)", which are

instrumental in advancing the field of translational science by providing opportunities for CTSA members to collaborate, plan projects, develop metrics to gauge impact, and collaborate on white papers and workshops, ultimately leading to new advances in translational science. The PAS Child Health Translational Research Committee has a similar mission, making this topic symposium an important potential session for the PAS meeting. In this symposium, the co-chairs of the Lifecourse EC, Drs. Mark Schleiss and Karen Wilson, will present updates and overviews of the key roles that the CTSA's play in child health research. An overview of how the CTSA's promote child health research will be provided by Dr. Jessica Kahn. Speakers from two working groups from the Lifecourse Committee - one focusing on optimization of pediatric practice networks (Dr. Wilson) and the other empaneled to engage individuals disabilities as research collaborators (Drs. Armstrong and Meinzen-Derr) - will present work on these topics. Participants will have an enhanced understanding of how the CTSA's contribute to pediatric research and, ultimately, improved cared for children.

Learning Objectives

1. Upon completion, participants will understand how they can get engaged with and take advantage of the resources in their CTSA's to do pediatric->adult lifecourse research.
2. Upon completion, participants will be able to discuss NCATS' and other national initiatives that identify opportunities, build infrastructure, and foster innovation supporting pediatric clinical trials.
3. Upon completion, participants will become aware of toolkits for investigators, disabled patients, journal editorial staff, and administrators supporting engagement of these patients as research collaborators.

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
Primary care pediatricians; translational researchers; clinical researchers; academic pediatricians; individuals working with children with chronic diseases
3. **Tracks**
Academic and Research Skills
Advocacy
Children with Chronic Conditions
Clinical Research
General Pediatrics

Health Equity/Social Determinants of Health
Health Services Research
School and Community Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Request that conflicts with plenary sessions for the PAS partner organizations be avoided.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Transitions in care and lifecourse research are hot topics in pediatrics. Primary care pediatricians; translational researchers; clinical researchers; academic pediatricians; individuals working with children with chronic diseases/disabilities will all be interested in this symposium.
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A.
10. **Additional comments**
Dr. Armstrong's work is a collaboration of the Clinical and Translational Science Awards (CTSA) network and the Association of University Centers on Disability (AUCD).

We think a session devoted to the relationship of the CTSA's to academic pediatricians will be of interest to PAS meeting attendees. We are pleased to get feedback from the CHTRC and Program Committee. Our goal is to provide a broad overview (Dr. Kahn) and specific examples of projects/data from the Integration Across the Lifespan Enterprise Committee. We believe this is a "Hot Topic" in academic pediatrics but if the Program Committee is supportive but would rather re-package this as a "Panel Discussion" or a "Basic-Clinical-Translational Roundtable", we would be pleased to make any suggested revisions.

Thank you for considering this proposal.

Presentation Titles and Durations

The CTSA Enterprise Committees: Structure, Mission, and Deliverables

Mark R. Schleiss, MD

Duration of Presentation in Minutes

5

Navigating Clinical and Translational Science Awards to Foster Lifespan
Research: A Guide for Pediatric Researchers

Jessica Kahn, MD MPH

Duration of Presentation in Minutes

25

Supporting Infrastructure and Innovation to Increase Pediatric Clinical Trials

Karen Wilson, MD, MPH

Duration of Presentation in Minutes

20

Engaging Individuals with Lived Disability Experience as Collaborators:
Addressing the Unmet Need for Disability Research

Daniel Armstrong, PhD

Duration of Presentation in Minutes

10

Engaging Individuals with Lived Disability Experience as Research
Collaborators: Building an Infrastructure for Success

Jareen Meitzen-Derr, PhD, MPH

Duration of Presentation in Minutes

10

(215) Proposal ID: 1930702

Rheum2Play: How to Become a Med Ed Influencer

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Miriah Gillispie Taylor**

Score: **0**

Participant(s)

Miriah Gillispie Taylor, MD (she/her/hers)

Position:

Assistant Professor

Organization:

Baylor College of Medicine

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Ginger Janow, MD, MPH (she/her/hers)

Position:

Assistant Professor

Organization:

Hackensack Meridian School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Session Description

Session Description

Technology has created extensive opportunities for education via synchronous and asynchronous tools, such as webinars, bulletin boards, and podcasts, with a significant surge in these resources secondary to the Covid-19 pandemic. The volume of material available can make it challenging for learners to choose the most high-yield, enjoyable, retainable and accurate material for their learning style. In addition, quality is not guaranteed; yet one study showed that as many as 91% of learners do not evaluate the quality of podcasts they choose to listen to. Since the inception of podcasts, utilization has increased significantly with high uptake amongst medical students, residents and practicing physicians. A recent review of podcast use in medical education showed that while there's significant data supporting listener satisfaction as it applies to educational podcasts, many fewer assess educational outcomes at Kirkpatrick levels 2 or 3; despite this, they are being increasingly incorporated into curricula. Given the limited exposure to pediatric rheumatology for many learners, we developed a podcast series to teach basic concepts in juvenile idiopathic arthritis. While we created 5 episodes with robust online learning companions, developed social media presence and utilized multiple channels to recruit listeners, the tools are not being used broadly. The issues with recruitment seemed incongruous with the overall level of interest from pediatric rheumatology educators around the country, who were excited to be able to use the podcasts as a teaching tool for resident and medical student rotators. We aim to discuss our successes and pitfalls.

Learning Objectives

1. Identify and utilize core drivers in learner preferences for podcasts related to topic, format, duration, questions, style and companion resources across diverse backgrounds.
2. Use data gained from thematic analysis and content guidelines created by oversight bodies to help inform content development.
3. Assess the efficacy of the podcast as a teaching tool and improving confidence in areas covered by the learning objectives using quantitative and qualitative measures.

Scholarly Session Questions

1. **Audience Size**
20
2. **Target audience**
Learners and faculty who are interested in engaging with social media as a potential teaching platform.
3. **Tracks**
Allergy, Immunology and Rheumatology
Medical Education
Social Media & Technology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
We would like to avoid any other sessions discussing social media and/or use of technology to teach. We would specifically like to avoid conflicting with the E-Learning SIG.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
The focus of the podcasts are juvenile idiopathic arthritis, so rheumatology.
9. **If your session was presented at another conference, please describe the conference and presentation.**

10. Additional comments

Presentation Titles and Durations

Introduction and Social Media Development

Miriah Gillispie Taylor, MD

Duration of Presentation in Minutes

45

Dissemination of Your Product and Data Collection, Q&A

Ginger Janow, MD, MPH

Duration of Presentation in Minutes

45

(216) Proposal ID: 1922318

Minding the gap: Innovative approaches to optimize transitions of care

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Christina Olson**

Score: **0**

Participant(s)

Christina Olson, MD

Position:

Associate Professor

Organization:

University of Colorado School of Medicine/ Children's Hospital Colorado

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Katherine A. Auger, MD, MSc (she/her/hers)

Position:

Professor

Organization:

Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, SPR

John Chuo, MD, MS, IA (he/him/his)

Position:

Professor of Clinical Pediatrics

Organization:

University of Pennsylvania

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Native Hawaiian and other Pacific Islander

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, SPR

William C. Anderson, III, MD (he/him/his)

Position:

Associate Professor of Pediatrics

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Session Description

Session Description

Transitions of care are complex, costly and associated with potential gaps in care that can lead to decreased quality of life, increased morbidity and patient safety events, and readmissions. This is particularly true for children with medical complexity who experience several care transition events during their lifetime. Challenges to successful transitions include fragmentation and silos within our healthcare system, disparate electronic health records, certain social determinants of health, and sustainability of interventions that do not align with traditional financial models. Transitions of care have long been an area of interest for researchers, clinicians and patients alike, with increasing focus lately due to capacity pressures on pediatric inpatient units and reduced access to subspecialty clinics, along with the growth of value-based payment models.

Heightened attention on successful transitions of care has resulted in new opportunities, including grant funding and technology platforms that aim to solve this long-standing challenge. This Hot Topics Symposium will provide deep dives into four innovative transition of care programs across the country with discussion of implementation, evaluation methods, outcomes and sustainability. These programs are addressing transition points spanning the continuum of care – initial hospital discharge for NICU patients, transfer from pediatric to adult ambulatory subspecialty care for patients with chronic conditions, and transitions from referral hospitals to community-based care following complex hospitalizations. The session will end with Q&A time focusing on ways to translate the lessons learned by these programs to individual attendees' practice settings.

Learning Objectives

1. Describe care gaps and their consequences that can occur during healthcare transitions.

2. Examine virtual technology-enabled interventions that bridge the transition from hospital to home for children with medical complexity.
3. Develop a pediatric to adult care team transition roadmap for patients with chronic conditions.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
physicians, researchers, trainees, health system leaders, advanced practice providers
3. **Tracks**
Children with Chronic Conditions
Health Services Research
Quality Improvement/Patient Safety
Telemedicine
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
1- one presenter is a presenter for the APA SIG: Interdisciplinary Pediatric Researchers submission; 2- one of the presenters is on a Hospital-at-Home panel submission; 3- two presenters are submitting a workshop on designing healthcare research to inform policy.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Due to the nature of transitions of care, this presentation spans almost all specialties and disciplines. Examples include: primary care, subspecialty care (all specialties), hospital medicine, population health, nursing, health services research, etc.

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

Presentation Titles and Durations

TNTP: Reducing readmission risk following complex discharges with a 30-day tele-nursing bridge program

Christina Olson, MD

Duration of Presentation in Minutes

30

GET2HOME: Learnings from a randomized trial evaluating telehealth handoffs for hospital to home transitions

Katherine A. Auger, MD, MSc

Duration of Presentation in Minutes

20

CATCH-ing problems early: A remote patient management (RPM) program to reduce avoidable readmissions for complex neonates

John Chuo, MD, MS, IA

Duration of Presentation in Minutes

20

Making an ImPACT: An interdisciplinary, hospital-wide approach to facilitate pediatric to adult care transitions

William C. Anderson, III, MD

Duration of Presentation in Minutes

20

(217) Proposal ID: 1902283

Application of Human Lung Organoids in Disease Modeling

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Sandra Leibel**

Score: **0**

Participant(s)

Chandani Sen, PhD (she/her/hers)

Position:
Project Scientist

Organization:
University of California, Los Angeles David Geffen School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Shimpei Gotoh, MD, PhD (he/him/his)

Position:
Professor

Organization:
Center for iPS Cell Research and Application (CiRA), Kyoto University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Sandra L. Leibel, MD MS (she/her/hers)

Position:

Associate Professor

Organization:

University of California, San Diego School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Session Description

Session Description

In recent years, human lung organoids have emerged as a groundbreaking tool in disease modeling, offering unprecedented insights into lung biology and pathology. Although animal models have been important in uncovering mechanisms of lung development and disease, they fail to replicate the specificities of human cell responses. This session will explore the diverse

applications of lung organoids in studying lung development, respiratory diseases, including interstitial pulmonary fibrosis, and viral infections.

Participants will learn about the latest advancements in organoid technology, including the development of patient-derived models that accurately replicate disease phenotypes. We will highlight how these organoids can be utilized to dissect disease mechanisms, assess drug responses, and evaluate therapeutic interventions in a controlled, in vitro environment.

Additionally, discussions will focus on the challenges and future directions of organoid research, including scalability, standardization, and the integration of organoids with other technologies like co-culturing with immune cells and gene editing.

Join us for an engaging session that promises to expand your understanding of lung organoids and their transformative potential in respiratory disease research and personalized medicine.

Learning Objectives

1. Understand the advantages of using human lung organoids over traditional animal models in studying lung development and disease.
2. Explore applications in disease modeling including patient specific lung diseases and acute viral infections.
3. Assess future directions in lung organoid research including advancements in personalized medicine and gene editing technologies

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Basic scientists and clinicians interested in human lung disease.
3. **Tracks**
Academic and Research Skills
Asthma
Basic Science
Developmental Biology
Pulmonology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
n/a
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Dr. Sen is a trainee in Dr. Gompert's lab in UCLA. Dr. Gotoh is a Physician Scientist from Japan and is not a member of an American affiliated organization.
8. **Does this submission involve one or more specialties or disciplines?**
Yes. Pulmonology, Infectious Diseases, Genetics.
9. **If your session was presented at another conference, please describe the conference and presentation.**
n/a
10. **Additional comments**

Presentation Titles and Durations

Development of A Human Alveolar Organoid Model of Pulmonary Fibrosis to Understand Disease Mechanism and Screen Therapeutics

Chandani Sen, PhD

Duration of Presentation in Minutes

30

Synergistic Applications of Induced Pluripotent Stem Cells and Gene Editing for Innovative Lung Disease Modeling

Shimpei Gotoh, MD, PhD

Duration of Presentation in Minutes

30

Revolutionizing Personalized Medicine: The Role of Lung Organoids in Tailoring Respiratory Disease Treatments

Sandra L. Leibel, MD MS

Duration of Presentation in Minutes

30

(218) Proposal ID: 1921160

Inflammatory markers to inform antibiotic treatment: the next frontier of diagnostic stewardship?

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Anna Sick-Samuels**

Score: **0**

Participant(s)

Anna Sick-Samuels, MD, MPH

Position:

Assistant Professor

Organization:

Johns Hopkins Children's Center

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Daniel Shapiro, MD, MPH

Position:

Assistant Professor of Emergency Medicine

Organization:

UCSF Benioff Children's Hospital San Francisco

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

John Morrison, MD, PhD (he/him/his)

Position:

Assistant Professor

Organization:

Johns Hopkins All Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, SPR

Charlotte Woods-Hill, MD MSHP

Position:

Assistant Professor

Organization:

Perelman School of Medicine at the University of Pennsylvania

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Session Description

Session Description

Diagnostic Stewardship, the judicious use of microbiology diagnostic testing, is a rapidly growing field to combat antimicrobial overuse and deliver high-value care. Evidence supports the role of inflammatory markers (e.g., C-reactive protein and procalcitonin) in select indications to improve management and outcomes. However, they are widely used to evaluate patients with potential infections and may represent a target for diagnostic stewardship to optimize applications. This session will explore current evidence, challenges, and knowledge gaps in the application of inflammatory markers for the evaluation of suspected infection to inform antibiotic treatment considering perspectives across the hospital care continuum.

Dr. Anna Sick-Samuels (Johns Hopkins) will provide an overview of inflammatory markers mechanism of actions and principles and present a hypothetical case (e.g., febrile patient with respiratory symptoms) and ask expert panelists from 3 pediatric settings to evaluate the current evidence for application, limitations, and opportunities to optimize applications while considering setting-specific challenges. Dr. Daniel Shapiro (UCSF) will consider the role of inflammatory markers in the emergency department. Dr. John Morrison (Johns Hopkins All Children's Hospital) will consider applications in hospitalized acute care patients. Dr. Charley Woods-Hill (CHOP) will discuss utility in the pediatric intensive care unit and challenges that are similar to or different from the other care settings. Panelists will consider how clinicians can collaborate across disciplines to best use inflammatory markers in different pediatric care settings, discuss how applying principles of diagnostic stewardship could help to standardize care, reduce antibiotic overuse, and establish priorities for future research.

Learning Objectives

1. Summarize evidence for the use of C-reactive protein and procalcitonin in common acute pediatric infectious illnesses in the ED, acute care ward, and ICU settings
2. Consider where evidence is lacking for use of acute inflammatory markers and where additional research is needed to inform antibiotic treatment decisions
3. Explore how diagnostic stewardship strategies can be applied to encourage high-value use of inflammatory markers

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Physicians and advanced practice providers in pediatric emergency room care, acute care, critical care, infectious diseases, general pediatrics.
3. **Tracks**
Clinical Research
Critical Care
Emergency Medicine
General Pediatrics
Hospital Medicine
Infectious Diseases
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Have submitted other proposals but unknown if accepted or not yet.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes- Infectious Diseases, Emergency medicine, Critical care, Hospital medicine, and Clinical Research

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

To increase audience engagement, we would like to have the audience consider how they would manage a patient based on different inflammatory marker results and then have the panelists consider those decisions as part of their talk. For example, the febrile patient with respiratory symptoms has initial CRP of 2.0 How does this impact your management decisions?

Presentation Titles and Durations

Inflammatory marker alphabet soup- what do the letters stand for? mechanism and principles behind inflammatory marker testing

Anna Sick-Samuels, MD, MPH

Duration of Presentation in Minutes

10

Is the patient sick or not? Applying inflammatory markers in the pediatric emergency room

Daniel Shapiro, MD, MPH

Duration of Presentation in Minutes

15

To continue antibiotics, or not? Use of inflammatory markers to diagnose and manage common infections in the hospital setting

John Morrison, MD, PhD

Duration of Presentation in Minutes

15

A sea of data points in an ocean of uncertainty: CRP and procalcitonin in pediatric intensive care unit

Charlotte Woods-Hill, MD MSHP

Duration of Presentation in Minutes

15

(219) Proposal ID: 1905373

Opening the Black Box: The Social Environment and Developmental Outcome of Children born Preterm

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Dieter Wolke**

Score: **0**

Participant(s)

Steven P. Miller, MDCM FRSC (he/him/his)

Position:

Head and Professor, Pediatrics

Organization:

University of British Columbia Faculty of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS, SPR

Julia Jaekel, PhD (she/her/hers)

Position:

Prof. Dr.

Organization:

University of Oulu

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Dieter Wolke (he/him/his)

Position:

Professor of Developmental Psychology and Individual Differences

Organization:

University of Warwick

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

William Copeland, PhD

Position:

Professor

Organization:

The University of Vermont Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

The current approach to research of children born preterm is the investigation of neonatal exposure (e.g. preterm birth, medical complications) and its associations to mainly adverse outcomes such as impairment. This pathology focussed approach overlooks how many preterm born children develop well following medical complexity. A radical refocussing of follow-up research requires moving away from repeated documentation of adverse outcomes after neonatal exposure to studying positive adaptation in the face of this early adversity. This is done by adopting a developmental and life course approach and the study of developmental plasticity, i.e. changes in timing of development, structure or function of biological or psychological systems across the life course. Thus, the focus shifts from documentation of impairment to understanding who and why many at risk children do better in their development than expected based on their neonatal exposure. This may be done by studying alternative models of how social environment alters developmental trajectories including models of vulnerability, resilience or differential susceptibility. Speakers will provide examples of how social environment may alter brain development, behaviour and academic functioning or allows to master life tasks into adulthood. This will include a look at how and why minority status is associated with developmental outcome. Suggestions are made for universal and targeted interventions that go beyond improving medical neonatal care but continue across the life-course.

Learning Objectives

1. Identify social factors in preterm children's environment that enhance their developmental outcome
2. Classify home and social environment factors in those that are modifiable by practical interventions and those that require wider policy changes

3. Promote innovative research to distinguish alternative models of how different social factors positively affect different development outcomes

Scholarly Session Questions

1. **Audience Size**
250
2. **Target audience**
Neonatologists; developmental pediatricians, neonatal follow-up; social pediatricians, neonatal neurology; neonatal nurses; epidemiologists
3. **Tracks**
Academic and Research Skills
Developmental and Behavioral Pediatrics
Diversity, Equity, and Inclusion
Epidemiology
Health Equity/Social Determinants of Health
Mental Health
Neonatology
Neurology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Events: Long term outcome after preterm birth; Neuroimaging of preterm children; Developmental and Behavioral Pediatrics
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Dieter Wolke: Proposer and speaker: I am a psychologist who works in the field of longitudinal follow-up studies of at-risk children (e.g. preterm; infant regulatory problems; peer and sibling bullying) ; all my work is interdisciplinary and with neonatologists and pediatricians and I work with various advocacy organisations; E.g European Foundation for the Care of neonates and infants (EFCNI) etc. and present mainly at medical conferences. I am a highly cited researcher cross-fields
However; I am not a member of the above organisations.

Prof Steven Miller is co-proposing this session with me (member of APS, SPR);

Prof Julia Jaekel is a developmental psychologist who studies the environmental factors and the effects on the development of children born preterm. A major interest is the study of preterm children from minority background and what specific factors contribute to their developmental outcome, she is not a member of any PAS affiliated organisation but frequently presents to neonatologists and pediatricians Prof William Copeland is a Clinical Psychologist and the Director of the Great Smokey Mountain Study (GSMS) that includes a high percentage (25%) of participants that are native Americans. This allowed for a natural experiment to investigate income supplementation (from casinos) on the development of children. He is not a member of any PAS associated organisations.

8. **Does this submission involve one or more specialties or disciplines?**

Pediatrics, Developmental Pediatrics, Neonatology, Neurology, Public Health, neonatal follow-up, Social Pediatrics

9. **If your session was presented at another conference, please describe the conference and presentation.**

No

10. **Additional comments**

Some cutting edge research on environmental influences sometimes referred to as exosome is carried out in interdisciplinary teams and experts in the developmental psychology field and those who work with neonatologists but are not in the PAS affiliated pediatric organisations.

Presentation Titles and Durations

The importance of the everyday for modifying outcomes of neonatal brain injury
Steven P. Miller, MDCM FRSC

Duration of Presentation in Minutes

18

Risks and protective factors for the mental health and school readiness of immigrant children born preterm

Julia Jaekel, PhD

Duration of Presentation in Minutes

18

Parenting and academic achievement in childhood mediate the association of very preterm birth and adult outcomes

Dieter Wolke

Duration of Presentation in Minutes

18

Effects of a family income supplement on adult outcomes of children exposed to neonatal adversity

William Copeland, PhD

Duration of Presentation in Minutes

18

(220) Proposal ID: 1931716

Management of Lower Respiratory Tract Infections in Critically Ill Children

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Lilliam Ambroggio**

Score: **0**

Participant(s)

Lilliam Ambroggio, PhD (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Children's Hospital Colorado

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA, SPR

Peter M. Mourani, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

University of Arkansas for Medical Sciences and Arkansas Children's
Research Institute

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS, SPR

Christina M. Osborne, MD (she/her/hers)

Position:

Assistant Professor

Organization:

Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, PIDS

Steven L. Shein, MD, FCCM

Position:

Chief, Pediatric Critical Care Medicine

Organization:

UH Rainbow Babies & Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Session Description

Session Description

Lower respiratory tract infections (LRTI) are the leading cause of death in children globally. LRTI ranges from mild diseases that can be managed in the outpatient setting to life-threatening diseases that must be managed in a pediatric intensive care unit. LRTI remains diagnostically challenging in children due to high rates of viral/bacterial co-infections, noninfectious syndromes that mimic LRTI, frequent incidental pathogen carriage, and the limitations of existing clinical diagnostics. As a result, accurate and timely LRTI diagnosis is difficult to achieve in children, leading to the potentially unnecessary or unwarranted use of empirical antibiotics, the emergence of resistant pathogens, and adverse patient outcomes. During this session there will be four presentations on the most current evidence regarding diagnostic testing, clinical outcomes, and antibiotic therapy in critically ill children with LRTI. The presentations will also present novel diagnostic and management strategies that will likely impact the future management of LRTI.

Learning Objectives

1. Understand the current management challenges and strategies in critically ill children with LRTI.
2. Evaluate novel diagnostic approaches including genomic sequencing, and understand their potential impact on improving the accuracy and timeliness of LRTI diagnosis in pediatric patients.
3. Apply the latest evidence on antibiotic management and the role of steroids for critically ill children with LRTI in order to improve patient outcomes.

Scholarly Session Questions

-
1. **Audience Size**
40
 2. **Target audience**
Clinicians and researchers in emergency medicine, hospital medicine, critical care, and infectious diseases.
 3. **Tracks**
Clinical Research
Critical Care
Emergency Medicine
Epidemiology
Genomics/Epigenomics
Hematology/Oncology
Infectious Diseases
 4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
 5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
 6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
 7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
 8. **Does this submission involve one or more specialties or disciplines?**
Topic is the diagnosis and management of lower respiratory tract infection in critically ill children which would include emergency medicine, hospital medicine, and critical care medicine.
 9. **If your session was presented at another conference, please describe the conference and presentation.**
This has not been presented at any other conference.
 10. **Additional comments**
None.

Presentation Titles and Durations

Existing management and diagnostic strategies for LRTI in critically ill children
Lilliam Ambroggio, PhD

Duration of Presentation in Minutes

15

Novel diagnostic strategies including metagenomic Next Generation
Sequencing host microbe classifier

Peter M. Mourani, MD

Duration of Presentation in Minutes

15

Antibiotic management of critically ill children with LRTI

Christina M. Osborne, MD

Duration of Presentation in Minutes

15

Steroid and Antibiotic treatment of severe viral bronchiolitis

Steven L. Shein, MD, FCCM

Duration of Presentation in Minutes

15

(221) Proposal ID: 1929219

Less is More: Innovative Approaches to Reducing Neonatal Mortality in LMICs

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Ola Andersson**

Score: **0**

Participant(s)

Susan Niermeyer, MD, MPH (she/her/hers)

Position:

Professor Emerita of Pediatrics

Organization:

University of Colorado School of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Sara Berkelhamer, MD (she/her/hers)

Position:

Professor of Pediatrics

Organization:

University of Washington

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Ola Andersson, MD PhD (he/him/his)

Position:

Associate professor

Organization:

Lund University

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Harish Kumar Chellani, MD (he/him/his)

Position:

Distinguished Scientist and WHO consultant

Organization:

Society for Applied Studies, New Delhi

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

This panel discussion will explore simple yet powerful interventions that significantly impact neonatal survival in low- and middle-income countries (LMICs). Our expert panel will examine low-cost, high-impact approaches aimed primarily at effective implementation in LMICs, while also highlighting their relevance for optimizing neonatal outcomes in high-resource settings.

Dr. Susan Niermeyer will provide historical context on global efforts to reduce newborn deaths, discussing the evolution of programs like Helping Babies Breathe and Helping Babies Survive. Her insights on adapting interventions for resource-limited settings will set the stage for our discussion.

Dr. Sara Berkelhamer will present the current WHO Essential Newborn Care Course, highlighting key elements such as effective resuscitation, thermal support, preventative care, and early breastfeeding initiation. She will highlight how simple interventions and skills-based education can dramatically improve newborn outcomes and optimize care delivery.

Dr. Ola Andersson will present evidence on how delayed cord clamping and intact cord resuscitation can reduce neonatal mortality. He will demonstrate the interventions' benefits for anemia and neurodevelopment, and outline practical implementation strategies for diverse clinical settings.

Dr. Harish Chellani will provide new evidence on Kangaroo Mother Care (KMC) and Mother-Newborn Couplet Care models, sharing his experience in India and other LMICs. He will highlight strategies for overcoming barriers to KMC implementation.

Attendees will gain a comprehensive understanding of evidence-based strategies to improve neonatal outcomes in LMICs, with broader implications for practice in high-resource settings. The session will conclude with a

discussion on future directions for research and implementation to further reduce neonatal mortality globally.

Learning Objectives

1. Upon completion, participants will be able to describe three low-cost interventions that significantly reduce neonatal mortality in low- and middle-income countries.
2. Upon completion, participants will be able to explain how Essential Newborn Care, delayed cord clamping, and Kangaroo Mother Care work together to improve neonatal outcomes.
3. Upon completion, participants will be able to analyze challenges and opportunities for implementing evidence-based neonatal care practices in health systems of low- and middle-income countries.

Scholarly Session Questions

1. **Audience Size**
250
2. **Target audience**
Neonatologists, neonatal fellows and residents, advance practice providers, and program managers.
3. **Tracks**
Breastfeeding/Human Milk
Global Neonatal & Children's Health
Neonatology
Quality Improvement/Patient Safety
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Ola Andersson is also part of the proposal for a PAS session: 'Cord Wars – May the Force be with the Baby: Controversial topics in umbilical cord management'
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide**

an explanation of the non-member speaker selection so that PAS staff may request approval.

Dr Harish Chellani is not a member of the any of the organizations. Dr. Chellani was the Principal Investigator of the key immediate Kangaroo Mother Care (KMC) study from Asia and has been practicing mother-newborn couplet care since 2020. He was also a member of the writing group for the Global Position Paper and implementation strategy of KMC, contributing to publications in the New England Journal of Medicine and The Lancet. His pioneering work in adapting and scaling these interventions has significantly improved neonatal outcomes across low- and middle-income countries, making him an ideal expert to discuss practical implementation strategies and overcoming barriers.

8. **Does this submission involve one or more specialties or disciplines?**

Yes, Neonatology and Global health medicine

9. **If your session was presented at another conference, please describe the conference and presentation.**

10. **Additional comments**

Presentation Titles and Durations

Introduction and Historical Context

Susan Niermeyer, MD, MPH

Duration of Presentation in Minutes

22

WHO Essential Newborn Care □ Transition from Helping Babies Breathe and Helping Babies Survive

Sara Berkelhamer, MD

Duration of Presentation in Minutes

22

Keeping the Cord Intact

Ola Andersson, MD PhD

Duration of Presentation in Minutes

22

Kangaroo Mother Care/Mother-Newborn Couplet Care

Harish Kumar Chellani, MD

Duration of Presentation in Minutes

22

(222) Proposal ID: 1927920

More than preventing CLABSI: Innovations in vascular access practice

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Amanda Ullman**

Score: **0**

Participant(s)

Amanda Ullman, RN PhD (she/her/hers)

Position:

Professor and Chair in Paediatric Nursing

Organization:

The University of Queensland and Childrens Health Queensland

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Deanne L. August, PhD

Position:

Post-Doc

Organization:

University of Queensland, Royal Brisbane and Women's Hospital

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Sabrina de Souza, Dr (she/her/hers)

Position:

Post-doctoral research fellow

Organization:

The University of Queensland and Universidade Federal de Santa Catarina

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Tricia M. Kleidon, RN MNSc (Nurs. Prac.)

Position:

Nurse Practitioner

Organization:

QCH

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

Almost every child admitted to hospital has an intravenous catheter inserted; whether a peripheral or a central device but we rarely stop to consider the science that supports this every day healthcare experience. There are vital moments of vascular access decision-making and practice that are modifiable, during device selection, insertion, management and removal. Together these simple innovations can prevent complications such as infections, thrombosis and pain.

Within this session we will explore the burden and sequelae of vascular access in pediatrics and neonatal healthcare. We will bring attention to children and families with increased vulnerability to positive and negative experience, because of structural inequities and biases globally. We will present new, evidence-based technologies that are ready for implementation, such as device indications and securement. We will also explain other traditional practices that are in need of rapid de-implementation.

Speakers and topics will include:

- Uncovering the burden of vascular access, including equity and vulnerability: Prof Amanda Ullman (Chair Paediatric Nursing, Queensland Australia)
- New technologies and old practices in pediatrics: Tricia Kleidon (Nurse Practitioner in Vascular Access, Australia)
- New technologies and old practices in neonatal care: Deanne August (Research Fellow in Neonatal Care, Australia)
- What to do in variable resourced settings: Sabrina De Souza (Research Fellow and Pediatric Nurse, Brazil)

The session will be a combination of practical skill acquisition (including videos and Q&A opportunities), recent clinical trial results (published in JAMA

Pediatrics, Pediatrics, others) applied to case studies. We will also highlight future innovation, including current trials.

Learning Objectives

1. Recognise the burden and sequelae of vascular access in pediatrics and neonatal healthcare.
2. Identify children and families with increased vulnerability to positive and negative experience associated with vascular access, because of structural inequities and biases.
3. Understand and apply new, evidence-based vascular access technologies, and remove other traditional vascular access practices.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Interdisciplinary clinicians involved in current hospitalized pediatric care.
3. **Tracks**
Critical Care
Emergency Medicine
General Pediatrics
Hematology/Oncology
Hospital Medicine
Infectious Diseases
Quality Improvement/Patient Safety
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Potentially participating in the INSPIRE session on international clinical research collaborations.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

All speakers are pediatric and neonatal nurses based in Australia and Brazil, so are not formally associated with these organizations currently.

8. **Does this submission involve one or more specialties or disciplines?**

Topic of vascular access crosses multiple disciplines, with individual speakers including specialists in ICU, anaesthetics, neonatal care, general pediatrics and hospital pediatrics.

9. **If your session was presented at another conference, please describe the conference and presentation.**

No

10. **Additional comments**

Presentation Titles and Durations

Uncovering the burden of vascular access in pediatrics; a focus on equity and vulnerability

Amanda Ullman, RN PhD

Duration of Presentation in Minutes

30

New technologies and old practices in neonatal care

Deanne L. August, PhD

Duration of Presentation in Minutes

15

Vascular access innovation when resources are scant

Sabrina de Souza, Dr

Duration of Presentation in Minutes

15

New technologies and old practices in pediatrics

Tricia M. Kleidon, RN MNsc (Nurs. Prac.)

Duration of Presentation in Minutes

30

(223) Proposal ID: 1902815

Game On! Debating Complexities in Pediatric Emergent Advanced Airway Management

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Monica Prieto**

Score: **0**

Participant(s)

Joshua Nagler, MD MHPEd

Position:

Associate Professor of Pediatrics and Emergency Medicine

Organization:

Harvard Medical School

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Robyn Wing, MD, MPH (she/her/hers)

Position:

Associate Professor of Emergency Medicine & Pediatrics

Organization:

The Warren Alpert Medical School of Brown University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Monica M. Prieto, MD, MSHS (she/her/hers)

Position:

Assistant Professor

Organization:

Childrens Hospital of Philadelphia

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Emily Greenwald, MD

Position:

Assistant Professor

Organization:

Duke Children's

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Session Description

Session Description

Pediatric advanced airway management is a critical, life-saving procedure. Increased research, fueled by multi-center collaborations, has provided evidence and informed expert consensus around best practices for pediatric airway management. However, recent data from the NEAR4PEM Collaborative demonstrated considerable variability in emergent airway management practices across Pediatric Emergency Departments. This interactive session by leaders from the NEAR4PEM Collaborative will explore available evidence and expert consensus around four key areas in pediatric advanced airway management: (1) the utilization of traditional versus video laryngoscopy, (2) the use of vagolytic agents, (3) the role of apneic oxygenation during laryngoscopy, and (4) the use and choice of paralytics in pediatric emergency intubations. Panelists will lead a high-energy gamification of the pro-con debate and utilize an audience response system and case-based content to encourage participant engagement throughout the session. After the session, attendees will receive an infographic handout summarizing the presented evidence and expert consensus to support the implementation of best practices in pediatric advanced airway management at their home institutions.

Learning Objectives

1. Appraise the evidence in favor or against the use of video laryngoscopy, vagolytic medications, apneic oxygenation, and neuromuscular blocking agents in pediatric advanced airway management
2. Compare best practices in emergent pediatric advanced airway management based on evidence and expert consensus with the practices at their home institution
3. Formulate evidence-based advanced airway management plans based on a patient's unique presentation

Scholarly Session Questions

1. **Audience Size**
70
2. **Target audience**
Clinicians involved in emergent advanced airway management of children, such as pediatric emergency medicine and critical care providers, and inpatient hospitalists.
3. **Tracks**
Critical Care
Emergency Medicine
Hospital Medicine
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Monday, April 28
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Dr. Monica Prieto is also a potential panelist in a session submitted by Dr. Danielle Cullen Titled "Getting it Done and Making it Stick" on implementation science, quality improvement, and human factors.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Pediatric Emergency Medicine, Critical Care Medicine, Hospitalist Medicine, Pediatric Advanced Life Support
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Pixel-Perfect Game-Changer, or Overhype? Use of Videolaryngoscopy in Pediatric Emergent Advanced Airway Management
Joshua Nagler, MD MHPed

Duration of Presentation in Minutes

15

Pulse Power Play, or Cardiac Flop? Vagolytic Medications in Pediatric Emergent Advanced Airway Management
Robyn Wing, MD, MPH

Duration of Presentation in Minutes

15

A Breath(less) of Fresh Air - Gimmick or Winning Strategy? Role of Apneic Oxygenation in Pediatric Advanced Airway Management
Monica M. Prieto, MD, MSHS

Duration of Presentation in Minutes

15

Twitch-Free Tubing: High-Risk or Safe Play? Use of Paralytics in Pediatric Emergent Advanced Airway Management
Emily Greenwald, MD

Duration of Presentation in Minutes

15

(224) Proposal ID: 1925028

Today's Adolescent STI Explosion. Is sexual health education a right or a "divisive concept"?

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Claudette Poole**

Score: **0**

Participant(s)

Claudette Poole, MD (she/her/hers)

Position:
Associate Professor

Organization:
UAB

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, PIDS

Samantha V. Hill, MD, MPH, FAAP (she/her/hers)

Position:
Assistant Professor

Organization:
Emory University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Morissa J. Ladinsky, MD (she/her/hers)

Position:

Professor of Pediatrics

Organization:

UAB Department of Pediatrics, Childrens of Alabama

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Lauren Middlebrooks, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics and Emergency Medicine

Organization:

Emory University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
American Indian or Alaska Native, Black or African American

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Session Description

Session Description

Addressing sexual and reproductive health are essential components of providing comprehensive adolescent healthcare. Most adolescents can not access fellowship trained adolescent medicine physicians, leaving primary care providers accountable for this AAP recommended care. Rates of sexually transmitted infections in US adolescents are skyrocketing. Adolescents now comprise the second highest incidence for new HIV diagnoses. School based sexual health education is tightly restricted in many states, while access to gender-affirming care and the full scope of reproductive services remain banned in over 20. Less than 3% of pediatric practices offer universal opt-out HIV testing, despite long-standing CDC and AAP recommendations. PrEP for HIV prevention is very under-prescribed for adolescents who could benefit. The diverse panelist , specialists in infectious disease, HIV, adolescent health, and gender-affirming care will address: 1. How to discuss sexual health, reproductive health and gender-affirming care in states with restrictive environments. 2. How to talk to parents / guardians. 3. How to find supportive adults if the parent/ guardian is not. 4. Are there "safe" states for gender affirming care / abortion services, what are potential legal ramifications for referring out of state. 5. How to implement universal opt-out HIV testing for adolescents as recommended by the AAP in your setting. 6. How to prescribe PrEP

Learning Objectives

1. confidently discuss sexual, reproductive health and gender-affirming care with their adolescent patients.
2. confidently discuss sexual, reproductive health and gender affirming care with patient's parents / guardians or how to identify other supportive adults.

3. implement universal opt-out HIV testing in their practice as well as prescribe PrEP for eligible adolescent patients

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
General Pediatricians, Pediatric Emergency Room physicians, adolescent medicine, public health practitioners
3. **Tracks**
Adolescent Medicine
Advocacy
Community Pediatrics
Emergency Medicine
General Pediatrics
Hospital Medicine
Infectious Diseases
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
NA
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Sexual health, reproductive health and gender affirming care involves General Pediatrics, Public Health, Infectious Diseases, Adolescent Health, Mental Health, Obstetric and Gynaecology, Health Education, Health Advocacy, Legal
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Adolescent Sexual Health and HIV prevention beyond the use of condoms
Claudette Poole, MD

Duration of Presentation in Minutes

15

How to address age-appropriate sexual health in general pediatric practice &
legal concerns with family planning services

Samantha V. Hill, MD, MPH, FAAP

Duration of Presentation in Minutes

15

Best practice care for gender dysphoric youth and how to access that care
Morissa J. Ladinsky, MD

Duration of Presentation in Minutes

15

Standardizing sexual health and HIV screening in non-outpatient settings
Lauren Middlebrooks, MD

Duration of Presentation in Minutes

15

(225) Proposal ID: 1904854

Stewardship Principles and Sustainability Across the Care Spectrum

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Rana El Feghaly**

Score: **0**

Participant(s)

Rana E. El Feghaly, MD, MSCI (she/her/hers)

Position:

Outpatient ASP Director, Professor of Pediatrics

Organization:

Children's Mercy Kansas City, UMKC

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, PIDS

Matthew Kronman, MD, MSCE

Position:

Professor, Pediatric Infectious Diseases

Organization:

University of Washington

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Shreya M. Doshi, MD (she/her/hers)

Position:

Fellow

Organization:

Children's National health System - - Washington, DC

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR, PIDS

Christine macbrayne, PharmD, MSCS, BCIDP (she/her/hers)

Position:

Clinical Pharmacy Manager

Organization:

Children's Hospital Colorado

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Anna Sick-Samuels, MD, MPH

Position:
Assistant Professor of Pediatrics

Organization:
Johns Hopkins Children's Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
PIDS

Judith A. Guzman-Cottrill, DO (she/her/hers)

Position:
Professor of Pediatrics

Organization:
Doernbecher Children's Hospital at Oregon Health & Science University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
PIDS

Mariana M. Lanata, MD, FAAP (she/her/hers)

Position:
Associate Professor - Department of Pediatrics

Organization:
Marshall University Joan C. Edwards School of Medicine

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, PIDS

Session Description

Session Description

Healthcare sustainability, defined as measures to decrease waste, pollution, and gas emission during the healthcare delivery process, is tightly linked to infectious diseases, from diagnostics to antimicrobial use to infections prevention practices. In the US the healthcare industry contributes to about 8-10% of the total emissions and when you compare the US healthcare related emissions with that of the world, we contribute about 27%, which is higher than any other country. Hence, we suggest a series that highlights actionable steps for providers to reduce healthcare's harmful impact on the environment. Strategies to improve healthcare sustainability were proposed in a recent call-for-action article in the Journal of the Pediatrics Infectious Diseases Society. During this session, national leaders in the field of stewardship and sustainability will discuss the intersection of stewardship principles and

sustainability across the care spectrum including inpatient, outpatient, pharmacy, and laboratory, with an emphasis on environmental racism and social determinants of health.

This session will provide practical tools for participants to improve the quality of stewardship practices, will address important issues of equity in medicine, and will be relevant to general pediatricians, hospitalists, emergency medicine, urgent care, and infectious diseases specialists, and all those who work in the healthcare system.

Learning Objectives

1. Understand the impact of infectious diseases healthcare on sustainability
2. Improve healthcare sustainability through optimized use of diagnostics and antibiotics
3. Plan strategies to decrease environmental racism

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

General pediatrics, hospitalists, emergency medicine, urgent care, and infectious diseases specialists, NICU, pharmacy, infection prevention

3. **Tracks**

Advocacy

Clinical Research

Community Pediatrics

Diversity, Equity, and Inclusion

Emergency Medicine

Environmental Health

Epidemiology

General Pediatrics

Health Equity/Social Determinants of Health

Health Services Research

Hospital Medicine

Infectious Diseases

Literacy

Neonatology

Pharmacology and Therapeutics

Public Health

Quality Improvement/Patient Safety

Telemedicine

Well Newborn

Wellness and Well-being

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
PIDS top abstract
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Infectious diseases, general pediatrics, pharmacy, urgent care, emergency medicine, public health
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

How we can paint a green future in infectious diseases

Shreya M. Doshi, MD

Duration of Presentation in Minutes

15

Smart Stewardship: Tackling Antimicrobial and Medication Waste

Christine macbrayne, PharmD, MSCS, BCIDP

Duration of Presentation in Minutes

15

Diagnostic Test Stewardship and Sustainability

Anna Sick-Samuels, MD, MPH

Duration of Presentation in Minutes

15

Gowns, Gloves, and Single-Use Items: Can Healthcare Infection Prevention and Sustainability Coexist?

Judith A. Guzman-Cottrill, DO

Duration of Presentation in Minutes

15

Is Telehealth the Answer? Exploring Its Impact on Sustainability, Equity, and Access in Antimicrobial Stewardship

Mariana M. Lanata, MD, FAAP

Duration of Presentation in Minutes

15

(226) Proposal ID: 1921613

Advancing novel precision therapies in rare childhood genetic disorders

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Pankaj Agrawal**

Score: **0**

Participant(s)

Pankaj B. Agrawal, MD, MMSC

Position:

Chief of Neonatology and Professor of Pediatrics and Genetics

Organization:

University of Miami Leonard M. Miller School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS, SPR

Timothy Yu, MD PhD

Position:

Associate Professor

Organization:

Harvard Medical School

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Guangping Gao, PhD (he/him/his)

Position:

Professor and Director, Horae Gene Therapy Center

Organization:

University of Massachusetts Medical School

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Monkol Lek, PhD (he/him/his)

Position:

Assistant Professor

Organization:

Yale School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

Over 10% of the population in US lives with a rare disease; majority of those conditions are genetic and affect children. Genome/exome sequencing is accelerating the pace of diagnosis in these patients, although a large proportion of patients remain undiagnosed despite the advancements. Many institutions and NIH-funded networks including The Undiagnosed Disease Network (UDN), are dedicated to helping those patients receive a diagnosis. While diagnostic advances are critical in this journey, treatment options continue to be elusive for most patients. New and creative tools and frameworks will be necessary to address those challenges. The therapeutic approaches will include antisense oligonucleotides (ASO)/siRNAs, gene replacement therapy, and CRISPR-based gene editing. The therapeutic promise of ASOs is particularly true in the CNS with the remarkable success of nusinersen for spinal muscular atrophy (SMA) as well as promising data from investigations of oligonucleotides against several neurological disorders. There are also promising ASOs being developed for n of 1 patients. Similarly, the approval of gene replacement therapy against SMA and very recently, Duchenne muscular dystrophy has shown the potential of gene replacement therapies in the near future. Hundreds of clinical trials are currently ongoing to use gene replacement therapy approach in rare diseases. Lastly, the promise of CRISPR-based therapies where gene editing is rapidly progressing with many ongoing clinical trials. Recent approval of Casgevy against sickle cell disease exemplifies successful CRISPR-CAS9 based approach. Furthermore, potential use of newborn screening to identify potentially treatable genetic disorders early can change the therapeutic paradigm.

Learning Objectives

1. navigate diagnostic odysseys when dealing with an unexplained rare disease

2. understand personalized therapeutic approaches for patients with a genetic disorder including antisense oligonucleotides, gene replacement therapy or CRISPR-based editing.
3. understand advocacy efforts such as push for including certain genetic disorders in newborn screening

Scholarly Session Questions

1. **Audience Size**
50100
2. **Target audience**
neonatologists, general pediatricians, geneticists, researchers interested in Mendelian disorders, genetic counselors and proactive families.
3. **Tracks**
Basic Science
Genomics/Epigenomics
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are you or any of your speakers in any other sessions that we should take into account when scheduling?**
Genomics/epigenomics sessions
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
The speakers are world leaders in those topics.
8. **Does this submission involve one or more specialties or disciplines?**
Yes. Neonatology, Genetics, Genomics, basic research
9. **If your session was presented at another conference, please describe the conference and presentation.**
no
10. **Additional comments**

Presentation Titles and Durations

Navigating diagnostic challenges in pediatric rare diseases

Pankaj B. Agrawal, MD, MMSC

Duration of Presentation in Minutes

25

Antisense oligonucleotide therapy approach to genetic neurological disorders

Timothy Yu, MD PhD

Duration of Presentation in Minutes

25

Gene replacement therapy, now and the future

Guangping Gao, PhD

Duration of Presentation in Minutes

25

CRISPR-based therapeutic advances in genetic disorders

Monkol Lek, PhD

Duration of Presentation in Minutes

25

(227) Proposal ID: 1913805

From wicked problems to incisive solutions: Fast-tracking innovative pediatric interventions and policy in an era of complexity.

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Jonathan Huang**

Score: **0**

Participant(s)

Jonathan Y. Huang, PhD, MPH (he/him/his)

Position:

Assistant Professor

Organization:

University of Hawaii, John A. Burns School of Medicine

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA

Melissa Wake, MBChB MD FRACP FAAHMS (she/her/hers)

Position:

Scientific Director, Generation Victoria

Organization:

Murdoch Children's Research Institute

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Catherine Birken, MD, MSc, FRCPC (she/her/hers)

Position:

Professor Pediatrics, Senior Scientist, Sickkids Research Institute

Organization:

Temerty Faculty of Medicine, University of Toronto

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Rachel Novotny, Phd RDN LD FASN

Position:

Professor and Graduate Chair

Organization:

University of Hawaii

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
APA

Arjun Bhattacharya, PhD (he/him/his)

Position:
Assistant Professor

Organization:
University of Texas MD Anderson Cancer Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
APA

Session Description

Session Description

Join us for a groundbreaking plenary on accelerating population approaches to children's health and wellbeing interventions and reducing disparities.

You will gain insights into how novel designs and computational strategies are revolutionizing trials and observational studies to create actionable, intervention- and policy-oriented research. Don't miss this opportunity to engage with leading experts tackling pediatric health's most "wicked" problems.

Population pediatric health faces unique challenges: from the complexity of translating basic discovery into actionable insights; to the transportability of community-or clinic-based study findings to diverse, real-world systems; to time lag and efficacy limitations of population-based, longitudinal cohort studies.

This international, Hawai`i-led panel will showcase cutting-edge, multi-level, trans-disciplinary approaches to overcoming these obstacles, with child obesity as a unifying theme. You'll hear about:

1. Introduction: Overview of challenges in evidence-informed pediatric interventions and the target trial framework (Assistant Professor Jonathan Huang)
2. Integrating environmental, gene expression, and computational modeling to identify modifiable pathways in early life programming across diverse populations (Assistant Professor Arjun Bhattacharya)
3. Community Based System Dynamics to project multi-level intervention effects in a multijurisdictional trial aimed at reducing child overweight and obesity in the US-affiliated Pacific: The Children's Healthy Living trial. (Professor Rachel Novotny)
4. A cell-to-society mega-cohort of children and parents deeply embedded in an entire Australian state enabling rapid, cost-effective community and clinical trials: Generation Victoria (GenV). (Professor Melissa Wake)
5. A global preconception, whole-of-childhood trial using technology-based solutions to improve pregnancy and child outcomes: The Canadian arm of Healthy Early Life Trajectories (HELTi). (Professor Catherine Birken)

Learning Objectives

1. Describe key challenges in genomic discovery of child development determinants and potential solutions through integrating environmental and genomic data with trial emulation methods.
2. Identify solutions for overcoming challenges to multi-level interventions in low-resource settings with limited infrastructure and culturally-appropriate tools.
3. Explain how today's flexible pediatric longitudinal cohorts and trials can generate stronger, faster evidence than previously, including embedded intervention platforms to accelerate translation.

Scholarly Session Questions

1. **Audience Size**
200

2. Target audience

Clinicians and researchers interested in the state-of-art in population-based, big-data study design and methods to accelerate development and translation of meaningful population interventions and policy for pediatric health across diverse settings. Those with a specific interest in pediatric nutrition, metabolism, overweight, and obesity.

3. Tracks

Academic and Research Skills
Clinical Research
Genomics/Epigenomics
Global Neonatal & Children's Health
Health Equity/Social Determinants of Health
Obesity
Pediatric Nutrition
Public Health

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided.

Not Applicable

5. Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?

No

6. Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?

Yes

7. If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.

8. Does this submission involve one or more specialties or disciplines?

Obesity, Nutrition, General Pediatrics, Epidemiology, Public Health, Genomics

9. If your session was presented at another conference, please describe the conference and presentation.

N/A

10. Additional comments

Presentation Titles and Durations

How mega-cohorts can enable rapid, cost-effective population trials:

Generation Victoria (GenV)

Melissa Wake, MBChB MD FRACP FAAHMS

Duration of Presentation in Minutes

20

Global preconception, whole-of-childhood trials improving pregnancy & child outcomes: Healthy Early Life Trajectories (HELTI)

Catherine Birken, MD, MSc, FRCPC

Duration of Presentation in Minutes

20

Community-based systems dynamics modeling to reduce child obesity in US-affiliated Pacific: Children's Healthy Living Trial

Rachel Novotny, Phd RDN LD FASN

Duration of Presentation in Minutes

20

Integrating environment, gene expression, & computational models to identify modifiable pathways across diverse populations

Arjun Bhattacharya, PhD

Duration of Presentation in Minutes

20

(228) Proposal ID: 1903404

Consent and Confidentiality in the Care of Adolescents and Young Adults

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Richard Chung**

Score: **0**

Participant(s)

Richard J. Chung, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

Perelman School of Medicine at the University of Pennsylvania

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Elizabeth Alderman, MD (she/her/hers)

Position:

Professor of Pediatrics, Professor of Obstetrics & Gynecology and Women's Health

Organization:

Albert Einstein College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS

Carol A. Ford, MD (she/her/hers)

Position:

Professor of Pediatrics, Adolescent Medicine Division, Editor-in-Chief

Journal of Adolescent Health

Organization:

Childrens Hospital of Philadelphia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS

Jesse Hackell, MD (he/him/his)

Position:

Clinical Assistant Professor

Organization:

New York Medical College

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Session Description

Session Description

Consent and confidentiality are foundational elements in adolescent and young adult (AYA) care, with profound implications for access, quality, outcomes, equity, and safety, and direct relevance to all pediatric health professionals caring for AYA across settings and circumstances. Dynamic evolutions in AYA care, including the technological context of care and payment and policy innovations, the rich diversity of youth seeking care, and the complex sociopolitical landscape make these complex issues relevant, timely, and of critical importance.

This session will begin with an examination of the developmental and ethical foundations of AYA consent and confidentiality, the complex fabric of state and federal laws relevant to consent and confidentiality in the United States, and the sociopolitical climate driving challenges to these provisions. Next, there will be a case-based panel discussion of key related challenges and management strategies in day-to-day clinical practice, with each case bringing into full relief critical issues and learning points, including strategies to minimize the risk of losing AYA patients' trust while encouraging appropriate parent/caregiver involvement.

This comprehensive examination will be grounded in the 2024 American Academy of Pediatrics confidentiality policy statement and technical report and the SAHM position statement on confidentiality, with lead authors from these documents serving as presenters. This session will provide not only a comprehensive rendering of the foundations and implications of consent and confidentiality, but practical insights, strategies, and resources for advancing

consent and confidentiality provisions in practice and thereby improving access, quality, safety, and equity for youth and their families.

Learning Objectives

1. Describe three ethical principles that undergird consent and confidentiality in the care of AYA.
2. List two ways that state and federal laws influence confidentiality protections in AYA health care.
3. Delineate practical strategies for addressing key challenges in maintaining confidentiality raised by three real-life case examples.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
All clinicians who care for adolescents and young adults as well as non-clinicians engaged in shaping policies, regulations and laws in jurisdictions where youth seek care.
3. **Tracks**
Adolescent Medicine
Advocacy
Clinical Bioethics
Core Curriculum for Fellows
EHR/Medical Informatics
General Pediatrics
Health Equity/Social Determinants of Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Prefer to avoid overlap with other major adolescent medicine/adolescent health sessions
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide**

an explanation of the non-member speaker selection so that PAS staff may request approval.

8. **Does this submission involve one or more specialties or disciplines?**

Topic is confidentiality and consent with speakers representing academic as well as community-based pediatrics, adolescent medicine, and internal medicine.

9. **If your session was presented at another conference, please describe the conference and presentation.**

n/a

10. **Additional comments**

Presentation Titles and Durations

The Developmental, Ethical, and Legal Foundations of AYA Consent and Confidentiality

Richard J. Chung, MD

Duration of Presentation in Minutes

30

Case-based Panel Discussion

Elizabeth Alderman, MD

Duration of Presentation in Minutes

60

Case-based Panel Discussion

Carol A. Ford, MD

Duration of Presentation in Minutes

60

Case-based Panel Discussion

Jesse Hackell, MD

Duration of Presentation in Minutes

60

(229) Proposal ID: 1917123

Congenital CMV Across the Pacific: New and Emerging Concepts in Management, Pathogenesis and Prevention

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Mark Schleiss**

Score: **0**

Participant(s)

Mark R. Schleiss, MD (he/him/his)

Position:

American Legion and Auxiliary Heart Research Foundation Professor

Organization:

UMN Medical School

Role:

Submitter;Speaker;Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR, PIDS

Yae-Jean Kim, MD, PhD, FISDA (she/her/hers)

Position:

Professor, Department of Pediatrics

Organization:

Samsung Medical Center, SungKyunKwan University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Valerie Sung, MBBS(Hons) FRACP MPH PhD (she/her/hers)

Position:

Paediatrician, Associate Professor

Organization:

Murdoch Children's Research Institute, Royal Children's Hospital,
University of Melbourne

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Hiroyuki Moriuchi, MD, PhD

Position:

Director, National Research Center for the Control and Prevention of
Infectious Diseases

Organization:

Nagasaki University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Karen B. Fowler, DrPH (she/her/hers)

Position:

Professor

Organization:

University of Alabama School of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Session Description

Session Description

The congenital cytomegalovirus (cCMV) landscape is rapidly changing. Driven by initiatives to test all newborn infants for cCMV in the USA and Canada, and by vaccine studies currently in phase 3 clinical trials aimed at preventing CMV infection in women of child-bearing age, there is great interest in public health surveillance, maternal and newborn screening, diagnostic evaluation in infants,

therapeutic management (including antivirals), and assessment of long-term neurodevelopmental and audiologic outcomes. In this session undertaken in collaboration with CMV experts from the Asian Society for Pediatric Research, the depth and breadth of cCMV research "across the Pacific" will be explored. Co-chaired by Drs. Karen Fowler (University of Alabama-Birmingham) and Mark R. Schleiss (University of Minnesota), the session will explore initiatives "across the Pacific" to better understanding pathogenesis and management of cCMV. Speakers will include Dr. Yae-Jean Kim (Sungkyunkwan University, Seoul, South Korea); Dr. Valerie Sung (University of Melbourne, Australia); and Dr. Hiroyuki Moriuchi (Nagasaki University, Japan). The themes of the session will focus on the approach to diagnostic evaluation for cCMV in the era of universal cCMV screening (Dr. Kim); the case for targeted cCMV screening and the audiologic sequelae of infection (Dr. Sung); clinical practice guidelines for the management of cCMV (Dr. Moriuchi); and prospects for cCMV prevention through behavioral modification (Dr. Fowler) and vaccines (Dr. Schleiss). Experiences, policies and practices regarding cCMV will be compared across the four countries (USA, Australia, South Korea, and Japan) represented at this state-of-the-art symposium, and high-priorities areas for future collaborative research identified.

Learning Objectives

1. Upon completion, participants will be able to compare and contrast the prevalence of cCMV across the four countries represented (USA, Japan, South Korea, and Australia).
2. Upon completion, participants will be able to describe the differences between universal and targeted cCMV screening, recognizing the controversies in optimal testing approaches.
3. Upon completion, participants will be cognizant of strategies that can prevent cCMV infection, either through behavioral modification, enhanced awareness, and development of preconception vaccines.

Scholarly Session Questions

1. **Audience Size**

400

2. **Target audience**

Primary care pediatricians; neonatologists; public health practitioners; epidemiologists; infectious diseases physicians; vaccinologists and viral immunologists; developmental and behavioral pediatrics; neurologists

3. **Tracks**

Advocacy

Basic Science

Developmental and Behavioral Pediatrics
Epidemiology
General Pediatrics
Infectious Diseases
Neonatology
Neurology
Public Health
Well Newborn

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

1. Avoid PIDS symposium.
2. Avoid joint SPR/ASPR programming.
3. Avoid SPR and APS plenary sessions.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Drs. Kim and Moriuchi are members of the ASPR. Dr. Sung is not a member but is an international recognized expert in congenital CMV and her contribution will be essential for the success of the program.

8. **Does this submission involve one or more specialties or disciplines?**

Topic is CMV involving newborn screening, infectious diseases practice, neonatology and general pediatric/newborn care, epidemiology, neurology and neurodevelopmental outcomes, and public health.

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A.

10. **Additional comments**

We think the session is uniquely well-suited to the Honolulu meeting and will fit well with shared programming with our colleagues in the Asian Society for Pediatric Research. Dr. Moriuchi is the president of the Japanese Society for Pediatric Infectious Diseases and leads the Japan Association for Congenital Toxoplasmosis and Cytomegalovirus Infections. Dr. Kim is an executive board member of the Asia Pacific Society for Immunodeficiencies (APSID) as the chair of the registry and research working party. Dr. Fowler is an NIH-funded investigator and

recipient of the National CMV Foundation cCMV advocacy award. Dr. Dr Sung leads a clinical and research program on childhood hearing loss, and was awarded the L'Oreal-UNESCO Australia & New Zealand Women in Science Fellowship in recognition of her work in cCMV. We anticipate an engaging program with global leaders in cCMV where the expertise and approaches of four countries will be represented.

Presentation Titles and Durations

Congenital CMV Infection: Challenges and Opportunities

Mark R. Schleiss, MD

Duration of Presentation in Minutes

10

Symptomatic cCMV Disease in Korea; Insights from the Analysis of "Big Data" from the National Health Insurance System

Yae-Jean Kim, MD, PhD, FISDA

Duration of Presentation in Minutes

20

Improving the Outcome of Congenital CMV in Australia: Reducing the Effects of CMV on Child Hearing and Development

Valerie Sung, MBBS(Hons) FRACP MPH PhD

Duration of Presentation in Minutes

20

Clinical Practice Guidelines for Management of cCMV Infection in Japan 2023-24: Executive Summary of Evidence and Outcomes

Hiroyuki Moriuchi, MD, PhD

Duration of Presentation in Minutes

20

Pregnant Women's cCMV Awareness and Potential for Behavioral Intervention to Prevent Maternal Infection and cCMV Transmission

Karen B. Fowler, DrPH

Duration of Presentation in Minutes

20

(230) Proposal ID: 1932264

Not short and sweet anymore: Refractory hypoglycemia in the neonatal intensive care unit

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Bonny Jasani**

Score: **0**

Participant(s)

Mary A. Woodward, MD, FRCP(C), MSc (she/her/hers)

Position:

Assistant Professor

Organization:

Hospital for Sick Children

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Jordan Mann, RD (he/him/his)

Position:

Registered Dietitian

Organization:

The Hospital for Sick Children

Role:

Speaker

Ethnicity

Prefer not to respond

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Bonny Jasani, MBBS, MD, DM (he/him/his)

Position:

Staff Neonatologist and Assistant Professor of Pediatrics

Organization:

The Hospital for Sick Children

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Emily WY Tam, MDCM, MAS, FRCPC (she/her/hers)

Position:

Associate Professor

Organization:

The Hospital for Sick Children

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
APS, SPR

Session Description

Session Description

Historically, hypoglycemia, the commonest metabolic disturbance in neonates has well defined clinical characteristics, therapeutic thresholds and management protocols. However, over the last decade, there has been a gradual increase in a subset of infants in the neonatal intensive care unit (NICU) who have refractory hypoglycemia needing glucose infusion rates >12 mg/kg/min, prolonged NICU stay, central line access and multiple additional interventions to achieve physiological glucose targets. This session will profile through case studies the clinical characteristics, treatment interventions, nutritional considerations and long term outcomes of this unique patient population.

Learning Objectives

1. To evaluate the clinical considerations of refractory hypoglycemia and develop skills to manage it from initial stabilization to full enteral feeds using a case-based example
2. To formulate a individualized, effective and safe approach for management of refractory hypoglycemia with a focus on emerging therapies
3. Appraise the long-term development of refractory hypoglycemia in neonates

Scholarly Session Questions

1. **Audience Size**
250
2. **Target audience**

Neonatologists, Registered dietitians, Endocrinology, Neurology, neonatal/perinatal fellows, pediatric residents, neonatal nurse practitioners

3. **Tracks**

Endocrinology
Neonatology
Pediatric Nutrition
Pharmacology and Therapeutics

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

N/A

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr Jasani, Dr Woodward are early career researchers with an emerging track record in clinical research

8. **Does this submission involve one or more specialties or disciplines?**

Topic is hypoglycemia involving neonatology, endocrinology, nutrition and clinical pharmacology

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

Presentation Titles and Durations

Refractory hypoglycemia in neonates: Defining the patient population and clinical considerations

Mary A. Woodward, MD, FRCP(C), MSc

Duration of Presentation in Minutes

15

Nutritional considerations for refractory hypoglycemia in neonates: A winding road to sweet success

Jordan Mann, RD

Duration of Presentation in Minutes

30

Precision based, individualized management of refractory hypoglycemia in neonates: Newer therapeutics and beyond

Bonny Jasani, MBBS, MD, DM

Duration of Presentation in Minutes

15

Long-term outcomes of refractory hypoglycemia in neonates

Emily WY Tam, MDCM, MAS, FRCPC

Duration of Presentation in Minutes

30

(231) Proposal ID: 1929945

Controversies and Advances with Neonatal GERD: In the NICU and Beyond

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Sudarshan Jadcherla**

Score: **0**

Participant(s)

Sudarshan R. Jadcherla, MD, FRCPI, DCH, AGAF (he/him/his)

Position:

Professor of Pediatrics, Principal Investigator, and Endowed chair in Neonatology Research

Organization:

Nationwide Children's Hospital Research Institute and The Ohio State University College of Medicine

Role:

Submitter;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Jonathan L. Slaughter, MD, MPH

Position:

Professor of Pediatrics

Organization:

Nationwide Children's Hospital and The Ohio State University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Jenny Bellodas Sanchez, MD (she/her/hers)

Position:

Assistant Professor

Organization:

Nationwide Children's Hospital

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Karlo Kovacic, MD, MS (he/him/his)

Position:

Assistant Professor

Organization:

Medical College of Wisconsin

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

Symptoms related to feeding difficulties are common among convalescing infants during the neonatal ICU (NICU) stay and beyond, and the symptom-based diagnosis of GERD (gastroesophageal reflux disease) is common. Consequences of the symptom-based diagnostic label of GERD can result in multiple interventions, albeit with consequences, including increased hospitalization and economic burden. These diagnostic and treatment practices are widely prevalent and variable across institutions. Controversies persist with symptom-based management, lack of objectivity with diagnosis at the crib-side and lack of evidence for efficacy and safety of treatments. This session will address the controversies with diagnosis, clarify the objective evidence available, and present an approach to management in the NICU and beyond.

Learning Objectives

1. Describe the definition, global prevalence, economic burden and clinical trials relating to neonatal GERD.
2. Recognize the pathophysiology of neonatal GERD, the utility of available diagnostic methods and the safety and efficacy of available treatments.
3. Illustrate the natural history of GERD throughout infancy, the NASPGHAN criteria for pediatric GERD and the role of chronic tube-feeding and fundoplication in refractory GERD.

Scholarly Session Questions

1. **Audience Size**
100

2. **Target audience**
Neonatologists, Neonatal Fellows, Neonatal APN's and PA's, GI Physicians and APNs/PAs, Primary Care Pediatricians, Pulmonologist and ENT specialists
3. **Tracks**
Clinical Research
Critical Care
Epidemiology
Gastroenterology/Hepatology
General Pediatrics
Neonatology
Pediatric Nutrition
Pulmonology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
I have also submitted a workshop and another Hot Topic which if selected would need to not conflict
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes, Epidemiology, Neonatology and Gastrointestinal Medicine
9. **If your session was presented at another conference, please describe the conference and presentation.**
No
10. **Additional comments**

Presentation Titles and Durations

Epidemiology and controversies surrounding clinical trials on GERD in infants
Jonathan L. Slaughter, MD, MPH

Duration of Presentation in Minutes

30

Mechanisms, diagnosis and management of GERD in the NICU infant

Jenny Bellodas Sanchez, MD

Duration of Presentation in Minutes

30

The diagnosis of GERD beyond the NICU: A common problem

Karlo Kovacic, MD, MS

Duration of Presentation in Minutes

30

(232) Proposal ID: 1929928

Postnatal Steroids in Extremely Preterm Infants: What is Safe and Effective?

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Namasivayam Ambalavanan**

Score: **0**

Participant(s)

Brett J. Manley, MB BS, PhD (he/him/his)

Position:
Prof

Organization:
The University of Melbourne

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Christian Poets, MD

Position:
Professor

Organization:
Tübingen University Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Kristi Watterberg, MD (she/her/hers)

Position:

professor Emerita

Organization:

University of New Mexico School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Jeanie Cheong, MD

Position:

Professor

Organization:

Murdoch Children's Research Institute

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Namasivayam Ambalavanan, MD (he/him/his)

Position:
Professor of Pediatrics

Organization:
University of Alabama School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Session Description

Session Description

Extremely preterm infants are at high risk for severe respiratory distress syndrome and subsequent bronchopulmonary dysplasia. There have been multiple recent randomized trials of postnatal corticosteroids administered by different modes of delivery (inhaled, instilled, or intravenous/enteral) to improve respiratory outcomes in this population. The specific corticosteroid has also varied (budesonide, hydrocortisone, or dexamethasone) and different timings of initiation and discontinuation have been used. However, there are conflicting interpretations of the safety and effectiveness of these various agents used at different timings of initiation and by different modes of administration. This

session will bring together experts who have led recent multicenter large trials of postnatal steroids to provide a panel discussion that would provide insights to optimize the use of such therapies.

Learning Objectives

1. Determine optimal patient selection for the use of postnatal corticosteroids.
2. Determine optimal timing for the use of postnatal corticosteroids in extremely preterm infants.
3. Determine the strengths and limitations of evidence for systemic corticosteroid use among preterm infants

Scholarly Session Questions

1. **Audience Size**
300
2. **Target audience**
Trainees (students, residents, fellows) and faculty interested in care of extremely preterm infants
3. **Tracks**
Neonatology
Pharmacology and Therapeutics
Pulmonology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Currently unknown
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
We have some international expert speakers (Dr. Christian Poets from Germany; Dr. Lex Doyle or Dr. Jeanie Cheong from Australia) who are not from the United States, and belong to their local subspecialty organizations (ESPR etc) rather than the American organizations.

8. **Does this submission involve one or more specialties or disciplines?**
Primarily involves Neonatology; Secondarily involves Pediatric Pulmonology and Pharmacology.
9. **If your session was presented at another conference, please describe the conference and presentation.**
Not Applicable
10. **Additional comments**

Presentation Titles and Durations

Instilled Steroids: Does Budesonide mixed with Surfactant Reduce BPD/Death?

Brett J. Manley, MB BS, PhD

Duration of Presentation in Minutes

15

Inhaled Steroids: Safety and Efficacy of Inhaled Steroids in Extremely Preterm Infants

Christian Poets, MD

Duration of Presentation in Minutes

15

The Safety and Efficacy of Hydrocortisone for Improving Respiratory Outcomes in Extremely Preterm Infants

Kristi Watterberg, MD

Duration of Presentation in Minutes

15

The Safety and Efficacy for Dexamethasone for Improving Outcomes in Extremely Preterm Infants

Jeanie Cheong, MD

Duration of Presentation in Minutes

15

Postnatal Steroids in Extremely Preterm Infants: What is Safe and Effective?

Namasivayam Ambalavanan, MD

Duration of Presentation in Minutes

15

(233) Proposal ID: 1915252

Updates on current treatments, pathogenesis and follow-up on Kawasaki Disease

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Mark Hicar**

Score: **0**

Participant(s)

Mark Hicar, MD, PhD (he/him/his)

Position:
Associate Professor

Organization:
Jacobs School of Medicine and Biomedical Sciences at the University at Buffalo

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR, PIDS

Nilanjana Misra, MBBS, FAAP, FSCMR

Position:
Associate Professor, Pediatrics- Zucker School of Medicine

Organization:
Cohen Children's Medical Center, Northwell Health, NY

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Arthur Chang, MD (he/him/his)

Position:

Assistant Professor

Organization:

University of Nebraska College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, PIDS

Session Description

Session Description

Kawasaki disease remains the most common cause of acquired heart disease in the developed world. Unfortunately the cause of this condition remains a mystery. With the pandemic and the development of the KD-like condition

Multisystem Inflammatory Syndrome in Children, a significant amount of novel studies on KD have been published.

This session is to update the general audience on the latest developments in clinical diagnosis, clinical follow-up, epidemiology, pathophysiology and exploration of an etiology.

Learning Objectives

1. discuss recent epidemiology patterns of cases, including the effects of the pandemic.
2. discuss the most recent thoughts on pathophysiology of KD and possible etiologies
3. ... discuss the appropriate follow-up for children with and without aneurysms

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
General Pediatricians
Infectious disease, rheumatology and cardiology
3. **Tracks**
Allergy, Immunology and Rheumatology
Cardiology
General Pediatrics
Hospital Medicine
Infectious Diseases
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Dr. Chang is submitting in a session on TB from Univ of Nebraska
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
n/a

8. **Does this submission involve one or more specialties or disciplines?**

Yes, Pediatric ID and Cardiology are presenters, but it also crosses into hospital medicine and rheumatology commonly

9. **If your session was presented at another conference, please describe the conference and presentation.**

n/a

10. **Additional comments**

n/a

Presentation Titles and Durations

Update on recent studies of pathophysiology and etiology of Kawasaki Disease

Mark Hicar, MD, PhD

Duration of Presentation in Minutes

30

Current approaches to cardiac care in Kawasaki disease

Nilanjana Misra, MBBS, FAAP, FSCMR

Duration of Presentation in Minutes

30

Current studies on clinical approach and epidemiology of Kawasaki Disease

Arthur Chang, MD

Duration of Presentation in Minutes

30

(234) Proposal ID: 1932192

SPR Basic/Translational Research Assembly

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Cristina Alvira**

Score: **0**

Participant(s)

Cristina M. Alvira, MD (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Stanford University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS, SPR

Session Description

Session Description

The SPR Research Assemblies are designed to present innovating, state of the art research that is cross-disciplinary and not focused on a single clinical specialty. The session will bring together four featured platform speakers (selected from high-scoring abstracts submitted to PAS 2025, and prioritizing early career investigators) with one invited speaker, who will be an established investigator. This session will have two major goals. First, to facilitate connections between researchers united by a thematic research focus, who would normally be delegated to different PAS sessions. Second, to feature high impact/cutting research projects that complement an invited speaker presentation.

The topic details are pending based on abstract reviews, but the session will follow this format:

- Introduction of the session by the session Chair (2 min)
- Abstract Platform #1: Speaker TBD (10 min)
- Questions for abstract #1 (5 min)
- Abstract Platform #2: Speaker TBD (10 min)
- Questions for abstract #2 (5 min)
- Invited Speaker: TBD (20 min)
- Questions for invited speaker (5 min)
- Abstract Platform #3: Speaker TBD (10 min)
- Questions for abstract #3 (5 min)
- Abstract Platform #4: Speaker TBD (10 min)
- Questions for abstract #4 (5 min)
- Closing: Session Chair (3 min)

Learning Objectives

1. Identify new methodologies allowing the identification of cellular and molecular- mechanisms underlying pediatric diseases.
2. Understand how collaboration and information exchange across specialties can enhance the impact of research and result in larger discoveries.
3. Describe how a deep understanding of cellular mechanisms can be leveraged into novel therapies to diagnose or treat pediatric illness.

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

Residents, Fellows, Faculty of all levels, Physician-Scientists, Career Child Health Researchers

3. **Tracks**

Academic and Research Skills
Allergy, Immunology and Rheumatology
Basic Science
Developmental Biology
Genomics/Epigenomics
Infectious Diseases
Neonatology
Pulmonology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

SPR Presidential Plenaries
SPR Workshops
SPR Scholarly Sessions

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

We expect all speakers to be either members, or early career faculty being mentored by active members.

8. **Does this submission involve one or more specialties or disciplines?**

Yes. These sessions are designed to be multi-disciplinary and to transcend the subspecialty silos of PAS.

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

Presentation Titles and Durations

Placeholder for Introduction and Closing

Cristina M. Alvira, MD

Duration of Presentation in Minutes

5

(235) Proposal ID: 1914912

Building a roadmap to bronchopulmonary dysplasia at your institution

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Meaghan Ransom**

Score: **0**

Participant(s)

Meaghan Ransom, MD, MPH

Position:

Assistant Professor

Organization:

Monroe Carell Jr. Children's Hospital at Vanderbilt

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Audrey N. Miller, MD (she/her/hers)

Position:

Assistant Professor of Pediatrics, Division of Neonatology

Organization:

Ohio State University College of Medicine and Nationwide Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Kathleen Gibbs, MD (she/her/hers)

Position:

Professor of Clinical Pediatrics

Organization:

University of Pennsylvania/Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Sharon McGrath-Morrow, MD (she/her/hers)

Position:

Professor

Organization:

Childrens Hospital of Philadelphia

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Laurie C. Eldredge, MDPHd (she/her/hers)

Position:
Assistant Professor

Organization:
University of Washington School of Medicine and Seattle Children's
Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

Karishma Rao, MD (she/her/hers)

Position:
Clinical Assistant Professor

Organization:
Children's Mercy Hospitals and Clinics

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Prefer not to respond

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Christopher D. Baker, MD (he/him/his)

Position:
Professor

Organization:
University of Colorado School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Paul Moore, MD

Position:
Proferssor of Pediatrics and Pharmacology

Organization:
Monroe Carell Jr. Children's Hospital at Vanderbilt

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
APS, SPR

Session Description

Session Description

Bronchopulmonary dysplasia is the most common morbidity among infants born premature with implications throughout childhood and adulthood. Variation exists among academic institutions caring for infants with BPD with growing evidence to suggest the benefits of developing a longitudinal and multidisciplinary approach to management. Many institutions are interested in building a “roadmap” for managing infants with BPD but may not know how to get started, what the different models of implementation are or which key stakeholders to include. This session will provide insight into the various approaches used by centers that care for infants with BPD while addressing some of the challenges faced in building these programs.

Learning Objectives

1. Upon completion, participants will be able to describe the benefits of developing a multidisciplinary approach to BPD management.
2. Upon completion, participants will be able to identify key stakeholders and resources needed to build a BPD roadmap.
3. Upon completion, participants will be able to identify challenges in building a BPD roadmap at different institutions and develop a strategy to overcome these challenges.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
pulmonologists, neonatologists, pediatric critical care, pediatric otolaryngologists, cardiologists, developmental pediatricians, respiratory therapists, pediatric PT/OT
3. **Tracks**

Children with Chronic Conditions
Critical Care
Neonatology
Pulmonology

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Currently no conflicting events
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Yes, topic is bronchopulmonary dysplasia (BPD) involving neonatology, pulmonology, critical care, pediatric otolaryngology, radiologists, developmental pediatricians, respiratory therapists, pediatric PT/OT
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Building a roadmap: how to get started
Meaghan Ransom, MD, MPH
Duration of Presentation in Minutes
10

Creation of a BPD Unit
Audrey N. Miller, MD
Duration of Presentation in Minutes
15

Roadmap building: the multidisciplinary approach
Kathleen Gibbs, MD

Duration of Presentation in Minutes

10

Roadmap building: the multidisciplinary approach

Sharon McGrath-Morrow, MD

Duration of Presentation in Minutes

10

Considering the phases of BPD progression and disease phenotype in BPD management

Laurie C. Eldredge, MDPHD

Duration of Presentation in Minutes

10

A comprehensive care model in roadmap building with a focus on continuity of care

Karishma Rao, MD

Duration of Presentation in Minutes

10

From evolving BPD to established BPD and the transition to a home ventilator program

Christopher D. Baker, MD

Duration of Presentation in Minutes

15

Q&A

Paul Moore, MD

Duration of Presentation in Minutes

10

(236) Proposal ID: 1928178

Firearm Injury Prevention in Clinical Care

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Anireddy Reddy**

Score: **0**

Participant(s)

Anireddy R. Reddy, MD, MSHP (she/her/hers)

Position:

Assistant Professor of Anesthesiology & Critical Care

Organization:

Childrens Hospital of Philadelphia

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Laura Bricklin, MD

Position:

Pediatric Critical Care Medicine Fellow

Organization:

Childrens Hospital of Philadelphia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Priyanka Joshi, MD (she/her/hers)

Position:

Pediatric Emergency Medicine Attending

Organization:

Childrens Hospital of Philadelphia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Dorothy R. Novick, MD (she/her/hers)

Position:

Associate Clinical Professor

Organization:

Childrens Hospital of Philadelphia

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Charlotte Woods-Hill, MD MSHP

Position:
Assistant Professor

Organization:
Perelman School of Medicine at the University of Pennsylvania

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Joel Fein, MD, MPH (he/him/his)

Position:
Professor of Pediatrics and Attending in Emergency Medicine

Organization:
Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, APS, SPR

Session Description

Session Description

Pediatric firearm-related deaths are the leading cause of death in children and adolescents in the United States. Exposure to a firearm is a significant risk factor for death by homicide, suicide or accidental discharge of a weapon. Firearm safe storage counseling with gun lock distribution is an evidence-based practice to reduce firearm injury and death. The goal of this panel is to describe a large-scale institutional effort to expand safe storage counseling in clinical care as well as to describe innovative research approaches to optimize implementation. Specifically, we will share approach, challenges and lessons learned in expanding safe storage counseling across pediatric primary care, emergency medicine, hospital medicine, critical care, psychiatry, and adolescent medicine settings. We also aim to share application of implementation science methodology to both study outcomes and increase the reach of this evidence-based practice. Implementation science is the study of methods to promote the systematic uptake evidence-based practices into routine practice, with structured inquiry into the barriers and facilitators of different settings which may affect implementation. Lastly, we aim to conclude with a discussion of health providers' role in decreasing firearm injury and implications for advocacy and policy.

Learning Objectives

1. To describe the epidemiology of pediatric firearm injury and role of safe storage counseling to decrease injury
2. To describe a standardized approach to expanding safe storage and gun lock distribution across different practice settings, and discuss challenges encountered and lessons learned
3. To describe application of implementation science methodology to expand the reach of an evidence based practice to reduce firearm injury

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
The target audience is multidisciplinary pediatric health providers, inclusive of physicians (trainees included), advanced practice providers, nurses, social workers, researchers and policymakers.
3. **Tracks**
Critical Care
Emergency Medicine
General Pediatrics
Health Equity/Social Determinants of Health
Hospital Medicine
Injury Prevention
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
n/a
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes. Topic is preventing firearm injury and includes: General Pediatrics, Emergency Medicine, Hospitalist Medicine, Critical Care, Psychiatry, Adolescent Medicine, Social Work, and Health Policy researchers
9. **If your session was presented at another conference, please describe the conference and presentation.**
n/a
10. **Additional comments**

Presentation Titles and Durations

Session Introduction (Ani Reddy will additionally facilitate Q&A for 30 minutes at end of presentation)
Anireddy R. Reddy, MD, MSHP

Duration of Presentation in Minutes

10

Epidemiology of Pediatric Firearm Injury

Laura Bricklin, MD

Duration of Presentation in Minutes

5

Factors Associated with Firearm Access & Injury

Priyanka Joshi, MD

Duration of Presentation in Minutes

5

Safe Storage Counseling and Gun Lock Distribution in Clinical Care

Dorothy R. Novick, MD

Duration of Presentation in Minutes

15

Implementation Science Methodology to Optimize Uptake of an Evidence-Based Practice

Charlotte Woods-Hill, MD MSHP

Duration of Presentation in Minutes

15

Role of health providers in research and advocacy to decrease pediatric firearm injury

Joel Fein, MD, MPH

Duration of Presentation in Minutes

10

(237) Proposal ID: 1932814

New President, New Congress: What Does It Mean for Child Health Policy?: A Pediatric Policy Council State of the Art Plenary

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Matthew Mariani**

Score: **0**

Participant(s)

David Keller, MD (he/him/his)

Position:

Professor of Pediatrics and Vice Chair of Clinical Strategy and Transformation

Organization:

University of Colorado School of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS

Matt Mariani (he/him/his)

Position:

Director, Federal Advocacy

Organization:

American Academy of Pediatrics

Role:

Submitter

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Session Description

Session Description

Following the 2024 elections, new leadership in the Presidency, the U.S. Congress, and throughout the 50 states will have significant consequences for child health and child health policymaking. As the end of the first 100 days of the U.S. presidential administration approaches, join the Pediatric Policy Council to learn what early actions by the new administration and other elected officials signal for child health policy at the federal and state levels, and how academic pediatricians can advocate for the needs of children, youth, and families. This session will examine key public policies impacting the well-being of children that are likely to see the greatest change under the leadership of new elected officials, with a focus on access to care, social supports that promote equitable child health outcomes, and policies to protect the health and safety of children. Speakers will provide updates on public policies, forecast about the year ahead, and provide insights into actions child health advocates can take to improve child health policy.

Learning Objectives

1. Describe the approach of newly elected U.S. policymakers, including the new presidential administration, to key child health policy issues.
2. Explain how policy decisions impact young people.
3. Engage in dialogue about the role of pediatric academicians in advocating for child health policies.

Scholarly Session Questions

-
1. **Audience Size**
100
 2. **Target audience**
Academic pediatricians with an interest in public policy and advocacy.
 3. **Tracks**
Advocacy
 4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
 5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
 6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
 7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
We anticipate speakers will be members of the PAS societies, but we are finalizing our roster speaker to ensure it is responsive to the topics of greatest salience in the new administration.
 8. **Does this submission involve one or more specialties or disciplines?**
 9. **If your session was presented at another conference, please describe the conference and presentation.**
 10. **Additional comments**

Presentation Titles and Durations

Welcome and Introductions

David Keller, MD

Duration of Presentation in Minutes

5

(238) Proposal ID: 1922247

Clinically Informed Epigenetic Research: Providing Insights into Health and Development of Children Born Preterm

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Marie Camerota**

Score: **0**

Participant(s)

Todd Everson, PhD (he/him/his)

Position:
Associate Professor

Organization:
Emory University

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Anke Huels, PhD, MSc (she/her/hers)

Position:
Assistant Professor

Organization:
Rollins School of Public Health, Emory University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Michael S. Kobor, PhD (he/him/his)

Position:

Edwin S.H. Leong UBC Chair in Healthy Aging – a UBC President’s Excellence Chair; Professor

Organization:

University of British Columbia Faculty of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Thomas MD O'Shea, MD, MPH (he/him/his)

Position:

Professor of Pediatrics

Organization:

UNC Chapel Hill

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Marie Camerota, PhD (she/her/hers)

Position:

Assistant Professor

Organization:

The Warren Alpert Medical School of Brown University

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Session Description

Session Description

Preterm birth poses unique challenges to infant health and development, with evidence suggesting that epigenetic mechanisms play a critical role in these outcomes. Understanding early-life epigenetic changes is essential for advancing neonatal care and improving outcomes for preterm infants. This symposium will discuss modern methods and applied studies of epigenetic

alterations in this vulnerable population, highlighting key research findings from several preterm cohorts.

The symposium brings together experts in epidemiology, epigenomics, pediatrics, and neurodevelopment to discuss important advancements in pediatric epigenomic research. We will introduce methods that are being used to better understand the role of epigenetics in complex developmental processes and health outcomes among preterm infants. By focusing on clinically informed research, the symposium aims to offer insights into how these approaches are currently applied in human populations and their future clinical applications for individualized care strategies for preterm infants. Attendees will gain a comprehensive understanding of the current state of the field and future translational directions, ultimately contributing to the improvement of long-term health outcomes in preterm-born populations.

Presentation summaries are provided below:

Anke Huels will cover methods to study epigenetic mechanisms that underlie child health outcomes.

Michael Kobor will present opportunities offered by integrating epigenetic clocks into child development research.

T. Michael O'Shea will summarize associations between placenta epigenetic marks and outcomes in a multi-center cohort of individuals born extremely preterm.

Marie Camerota will discuss neonatal epigenetic patterns that are associated with health, behavior, and neurodevelopment in a multi-site study of infants born very preterm.

Learning Objectives

1. Promote the latest advancements in high-dimensional epigenomic analyses and their application in understanding complex developmental processes and health outcomes among preterm infants.
2. Understand how epigenetic patterns are associated with health and developmental outcomes for infants born preterm, highlighting key research findings from various preterm cohorts.
3. Identify opportunities to integrate epigenomics into their own clinical research questions.

Scholarly Session Questions

1. **Audience Size**
40

2. **Target audience**
Clinicians and researchers with an interest in epigenetic methods and their application to pediatric populations
3. **Tracks**
Developmental and Behavioral Pediatrics
Epidemiology
Genomics/Epigenomics
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Because this symposium is inherently interdisciplinary, we are bringing together experts from inside and outside the pediatrics field. We needed to bring in expertise from the field of biostatistics (Anke Huels), epigenomics (Todd Everson), and epigenetic clocks (Michael Kobor) paired with experts in pediatrics (Michael O'Shea) and neurodevelopment (Marie Camerota). Dr. O'Shea is a member of SPR, APA, and AAP and Dr. Camerota is under consideration for membership at SPR.
8. **Does this submission involve one or more specialties or disciplines?**
Yes -- biostatistics, epigenetics/genetics, epidemiology, behavioral and developmental pediatrics.
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**
N/A

Presentation Titles and Durations

Introduction
Todd Everson, PhD

Duration of Presentation in Minutes

10

Methodological advancements in the field of epigenetics: DNA methylation risk scores and high-dimensional mediation analyses

Anke Huels, PhD, MSc

Duration of Presentation in Minutes

15

Epigenetic clocks in childhood development

Michael S. Kobor, PhD

Duration of Presentation in Minutes

15

Perinatal epigenetic marks and postnatal outcomes in the Extremely Low Gestational Age Newborn Cohort

Thomas MD O'Shea, MD, MPH

Duration of Presentation in Minutes

15

Neonatal epigenetics, health, and neurodevelopment in the Neonatal Neurobehavior and Outcomes in Very Preterm Infants cohort

Marie Camerota, PhD

Duration of Presentation in Minutes

15

(239) Proposal ID: 1907297

Equitable Care for All Children - How are we doing and how can we improve?

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **David Turner**

Score: **0**

Participant(s)

Ndidi Unaka, MD, MEd

Position:
Clinical Professor

Organization:
Stanford University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Andrew F. Beck, MD, MPH (he/him/his)

Position:
Professor, Attending Pediatrician

Organization:
Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS, SPR

Benny L. Joyner, Jr., MD, MPH (he/him/his)

Position:

A. Conger Goodyear Professor & Chair, Department of Pediatrics;

Organization:

John R. Oishei Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian, Black or African American

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Joseph Wright, MD MPH (he/him/his)

Position:

Professor (adjunct) of Emergency Medicine, Pediatrics, Health Policy & Management

Organization:

George Washington University Schools of Medicine and Public Health

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Black or African American

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, APS

David A. Turner, MD (he/him/his)

Position:
Vice President, Competency-Based Medical Education

Organization:
American Board of Pediatrics

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

Session Description

Session Description

Inequities in healthcare delivery and health outcomes among children and adolescents are ubiquitous and longstanding. Data continue to demonstrate the role of racism and other social determinants of health as contributors to inequities. And yet, deficiencies within our practices, health care systems, and clinical learning environments contribute to health inequities in unacceptable ways.

This panel discussion, co-sponsored by the AAP, AMSPDC, and the ABP, will provide an opportunity for participants to develop a better understanding of the role of racism and other SDH on exacerbating pediatric health inequities and engage in a conversation focused on breaking down silos to facilitate equitable care for all children.

Following a brief introduction, perspectives of health system leaders, a pediatric department chair, and leaders from the AAP and ABP will be shared. The interactive conversation will include discussion of practical approaches to addressing inequities in the care of children at both the individual and system levels and how we can work to bridge the gap between drivers in health systems and educational programs to address inequities. The session will also include a discussion about the importance of a workforce that is reflective of our patient populations and the need to prioritize approaches to recruit and retain diverse pediatricians and pediatric subspecialists. We will conclude with a discussion focused on the dismantling of race-based medicine and how implementing a competency-based approach to education and learner assessment can facilitate equity in the learning environment as well as equitable care of children who are historically marginalized.

Learning Objectives

1. Describe the current landscape of inequities in the care of children.
2. Outline concrete strategies to break down silos in health systems and learning environments to address inequities in a cohesive and collaborative manner.
3. Discuss how creating a more diverse workforce and implementing CBME can serve as facilitators for equity in the learning environment and the care of children.

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Pediatricians, Pediatric Subspecialists, Faculty, Everyone involved in the care of children
3. **Tracks**
Community Pediatrics
Core Curriculum for Fellows
Diversity, Equity, and Inclusion
General Pediatrics
Health Equity/Social Determinants of Health

- Medical Education
Quality Improvement/Patient Safety
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Sunday, April 27
Monday, April 28
 5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Presenters do have other pending submissions.
 6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
 7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
n/a
 8. **Does this submission involve one or more specialties or disciplines?**
Yes, the presenters are from multiple specialties (Hospital Medicine, Pediatric Critical Care, General Pediatrics), and the content applies to everyone who cares for children.
 9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
 10. **Additional comments**
This session is co-sponsored by AAP, ABP, and AMSPDC.

Presentation Titles and Durations

Making the Case for Health Equity Within Healthcare Systems

Ndidi Unaka, MD, MEd

Duration of Presentation in Minutes

15

Child Health Outcomes: A Landscape of Inequity and Opportunity for Improvement Inside and Outside Healthcare Institutions

Andrew F. Beck, MD, MPH

Duration of Presentation in Minutes

15

Diversity as a Force Multiplier: Improving pediatric care via a diverse workforce

Benny L. Joyner, Jr., MD, MPH

Duration of Presentation in Minutes

15

Addressing Inequities in Clinical Guidance: Dismantling race-based medicine
Joseph Wright, MD MPH

Duration of Presentation in Minutes

15

Competency-Based Medical Education as a facilitator for equity in the learning
environment and to improve child health
David A. Turner, MD

Duration of Presentation in Minutes

15

(240) Proposal ID: 1919372

Bridging Heart and Gut Health: Challenging Paradigms in Neonatal Care

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Audrey Hebert**

Score: **0**

Participant(s)

Gabriel Altit, MDCM, MSc, FRCPC, FASE (he/him/his)

Position:

Neonatologist - Assistant Professor

Organization:

McGill University Faculty of Medicine and Health Sciences

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Anie Lapointe, MD, MSc (she/her/hers)

Position:

Associate Professor

Organization:

CHU Ste-Justine

Role:

Speaker

Ethnicity

Prefer not to respond

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Ravi M. Patel, MD, MSc (he/him/his)

Position:

Professor of Pediatrics

Organization:

Children's Healthcare of Atlanta and Emory University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Audrey Hebert, MD, MHSc, FRCPC

Position:

Assistant professor

Organization:

CHU de Quebec - Universite Laval

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Adam J. Lewandowski, MSt, DPhil

Position:
Associate Professor

Organization:
University of Oxford

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Valerie Y. Chock, MD, MS Epi

Position:
Professor of Pediatrics

Organization:
Stanford University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Session Description

Session Description

This session will explore the connection between cardiac and gastrointestinal health in neonates. We aim to provide a comprehensive understanding of how neonatal heart function and gut health interact and influence outcomes in neonates. Leading experts in the field discuss the latest research and clinical insights, addressing how nutrition impacts both cardiac growth and gastrointestinal function, the nuanced relationship between transfusions and NEC, and the role of breast milk in supporting both heart and gut health. This session will also introduce innovative non-invasive monitoring techniques, offering new ways to assess and optimize neonatal care.

Learning Objectives

1. Examine the relationship between nutrition and gastrointestinal outcomes in neonates with congenital heart disease
2. Explore the interplay between transfusion practices, anemia, and necrotizing enterocolitis in newborns
3. Investigate the role of nutrition and breast milk in supporting neonatal cardiac growth and function

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Neonatology
General pediatrics
Gastroenterology
Cardiology
Nutrition
3. **Tracks**

Breastfeeding/Human Milk
Cardiology
Gastroenterology/Hepatology
General Pediatrics
Neonatology
Pediatric Nutrition

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Hemodynamic Club

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr Adam Ledwadowski is an internationally recognized scientist, research and speaker. He is the deputy chief scientist at UK Biobank, an Associate Professor of Cardiovascular Science at the Nuffield Department of Population Health - University of Oxford. His research and knowledge on cardiac function and the impact of breastmilk on heart function will be an outstanding addition to this symposium.

8. **Does this submission involve one or more specialties or disciplines?**

Yes, Topic is Neonatal Cardiac and Gut health involving Neonatology, Gastroenterology, Cardiology, General Pediatrics, Nutrition and breastfeeding / Human milk.

9. **If your session was presented at another conference, please describe the conference and presentation.**

It was not presented

10. **Additional comments**

Presentation Titles and Durations

Introduction, Conclusion and Q&A
Gabriel Altit, MDCM, MSc, FRCPC, FASE
Duration of Presentation in Minutes

Redefining nutrition for neonates with congenital heart disease □ A NEC urban legend?

Anie Lapointe, MD, MSc

Duration of Presentation in Minutes

13

Transfusion and NEC: The hidden truths of classic vs. anemic NEC in newborns

Ravi M. Patel, MD, MSc

Duration of Presentation in Minutes

13

Introduction, Conclusion and Q&A Feeding fires:Tackling nutrition in neonates with hemodynamic turmoil during cooling(13 min)

Audrey Hebert, MD, MHSc, FRCPC

Duration of Presentation in Minutes

38

Heartfelt controversy: Breast milk's unseen impact on neonatal cardiac growth

Adam J. Lewandowski, MSt, DPhil

Duration of Presentation in Minutes

13

Gut instincts: The future of non-invasive monitoring for neonatal intestinal health

Valerie Y. Chock, MD, MS Epi

Duration of Presentation in Minutes

13

(241) Proposal ID: 1920069

Understanding the effects of anti-DEI legislation and climate on medical education, research, and health outcomes across the United States

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Quang-Tuyen Nguyen**

Score: **0**

Participant(s)

Alvaro Tori, MD (he/him/his)

Position:

Associate Professor of Clinical Pediatrics

Organization:

Indiana University School of Medicine

Role:

Speaker;Chair

Ethnicity

Hispanic or Latino

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Quang-Tuyen Nguyen, MD (she/her/hers)

Position:

Vice-Chair - Health Equity, Respect, and Opportunity (HERO)

Organization:

University of Utah School of Medicine

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Tyler K. Smith, MD, MPH, FAAP (she/her/hers)

Position:

Fellowship Program Director, Associate Dean of DEI, Associate

Professor of Pediatrics

Organization:

Children's Mercy Kansas City and the University of Missouri-Kansas City

School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Susan L. Gillespie, MD, PhD (she/her/hers)

Position:

Associate Professor

Organization:

Baylor College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Madeline Joseph, MD (she/her/hers)

Position:

Professor/Associate Dean for Faculty Advancement and Engagement

Organization:

University of Florida College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS

Session Description

Session Description

Since 2022, the academic community has seen a spate of anti-diversity, equity, and inclusion (DEI) legislation proposed at the state level targeting public institutions. These laws thus affect higher public education including schools of medicine, dentistry, nursing, pharmacy, and allied health sciences. To date, fourteen anti-DEI bills have been signed into law across 12 states, amidst a

backdrop of 83 bills proposed across 26 states within the past two years. These bills target institutional DEI offices, hiring and promotion processes, diversity statements, and educational curricula. Collectively, these state policy actions along with the 2023 federal Supreme Court ruling against affirmative action has chilled what had been an open and evolving conversation in medicine about access, opportunity, and well-being for students, trainees, and physicians. The laws, whether proposed or passed, have already impacted climate at the institutional and national levels and are thus affecting health service delivery and health equity outcomes across the country. The onslaught of legislation and subsequent rapid compliance requirements have also precluded efforts to estimate the impact, harm, and loss from these legislative policies and their effect on medicine.

In a setting of abrupt change and challenge, this panel explores the effect of anti-DEI state legislative policies on medical education, research, and clinical service across the United States, but specifically in Texas, Florida, Utah, and Missouri as well as strategies for healing and continued growth.

Learning Objectives

1. Contextualize the wave of anti-DEI state legislation and its impact on higher medical education, research, and service particularly in public institutions.
2. Compare and contrast how the impact of anti-DEI legislation, both passed and proposed, can differ from institution to institution.
3. Envision potential strategies for protecting scholarship, education, and service missions threatened by anti-DEI legislation.

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Trainees, faculty, and leadership.
3. **Tracks**
Academic and Research Skills
Advocacy
Diversity, Equity, and Inclusion
Health Services Research
Leadership and Business Training
Medical Education
Public Health
Wellness and Well-being

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None at this time
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
This is a DEI session that will overlap with many other areas: advocacy, research, leadership and business training, medical education, public health, wellness and well-being.
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Introduction and framework for discussion

Alvaro Tori, MD

Duration of Presentation in Minutes

30

The Assault on Equitable Care: moving forward despite institutional and professional losses within the intermountain west

Quang-Tuyen Nguyen, MD

Duration of Presentation in Minutes

15

When Diversity, Equity, and Inclusion initiatives are challenged, but no legislation exists

Tyler K. Smith, MD, MPH, FAAP

Duration of Presentation in Minutes

15

Tackling the Headwinds: advancing the mission despite anti-DEI laws

Susan L. Gillespie, MD, PhD

Duration of Presentation in Minutes

15

A Path Forward to Achieving Health Equity and Improving the Patient Experience

Madeline Joseph, MD

Duration of Presentation in Minutes

15

(242) Proposal ID: 1912469

The Evolution of Trial Methodology and the Future of Neonatal Outcomes Research

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **CARL BACKES**

Score: **0**

Participant(s)

CARL BACKES, MD

Position:

MD

Organization:

Nationwide Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Brett J. Manley, MB BS, PhD (he/him/his)

Position:

Prof

Organization:

The University of Melbourne

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Anup Katheria, M.D.

Position:

Associate Professor of Pediatrics

Organization:

University of California, San Diego School of Medicine

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Thuy Mai Luu, MDCM MSc (she/her/hers)

Position:

Clinical associate professor

Organization:

University Hospital Centre Sainte-Justine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

John Zupancic, MD ScD (he/him/his)

Position:
Associate Professor of Pediatrics

Organization:
Beth Israel Deaconess Medical Center / Harvard Medical School

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

ANNIE Janvier, MD, PhD (call me Annie)

Position:
Professor of pediatrics and clinical ethics

Organization:
Université de Montréal, CHU Sainte-Justine

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Session Description

Session Description

Clinical trials are essential to improve care. Traditionally, a clinical trial examines the effect of a new intervention on a single outcome. However, in the neonatal intensive care unit (NICU), adverse outcomes may influence one-another and accumulate. This layer of complexity is generally not captured in classic trial designs that fail to incorporate associations between outcomes, the cumulative nature of outcomes, and competing risks. New pragmatic patient-centric design methodologies, including desirability of outcome ranking (DOOR), adaptive trials with Bayesian analysis, and win ratio, account for such complexities.

Historically, longer-term outcome studies use a classification system of disabilities based on the perspectives of scientists regarding what is considered 'normal' and which disabilities are mild, moderate, or severe. Recent empiric investigations demonstrate that families do not agree with this classification and describe outcomes of importance that are not examined in most clinical trials. To that end, data obtained during most trials do not entirely capture outcomes that families deem most meaningful. This symposium will show how it is possible for such outcomes to be successfully integrated into follow-up programs and databases. Moreover, clinical trials are exceedingly costly, wherein innovative technologies can be employed to reduce waste and improve efficiency.

This session includes a diverse, interdisciplinary panel (ethicist, NICU follow-up pediatrician, neonatologists, and clinical trialists) that will explore challenges and opportunities in the design, performance, and interpretation of neonatal clinical trials. Novel trial designs, trial efficiency, and innovations in incorporating patient- and family-important outcomes in trial design and follow-up will be discussed.

Learning Objectives

1. To increase knowledge on new and innovative approaches in clinical trial design, execution and conduct.
2. To review innovative strategies on how to develop trial endpoints meaningful to families, and seamlessly integrate those outcomes into clinical trials and national databases.
3. To increase awareness of the value of including economic endpoints alongside clinical trial conduct and execution.

Scholarly Session Questions

1. **Audience Size**
150
2. **Target audience**
Health care providers involved in pediatric clinical research and clinical care.
3. **Tracks**
Academic and Research Skills
Clinical Research
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Dr. Backes has proposed a panel discussion entitled "Tiny Hearts, Big Teamwork: Creating Synergy between Neonatology and Pediatric Cardiology".
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Pediatric Clinical Trials, Neonatology, Ethics
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

The Changing Landscape of Pediatric Clinical Trials

CARL BACKES, MD

Duration of Presentation in Minutes

5

Adaptive Trial Designs: Advantages and Disadvantages Over Traditional Study Designs

Brett J. Manley, MB BS, PhD

Duration of Presentation in Minutes

15

Application of Desirability of Outcome Ranking (DOOR)- Why are we Not Using it in Pediatric Clinical Trials?

Anup Katheria, M.D.

Duration of Presentation in Minutes

15

Integrating Functional Patient Outcomes in Clinical Trial Conduct- Listening to the Patients we Serve

Thuy Mai Luu, MDCM MSc

Duration of Presentation in Minutes

15

Decreasing Economic Waste in Pediatric Trials

John Zupancic, MD ScD

Duration of Presentation in Minutes

15

A Path Forward: Re-Imagining Pediatric Clinical Trials

ANNIE Janvier, MD, PhD

Duration of Presentation in Minutes

15

(243) Proposal ID: 1929103

Beyond Clinical Trials: Clinical Research Approaches to Advance Clinical Care for Pediatric Rare Disease Conditions

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Shanlee Davis**

Score: **0**

Participant(s)

Nicole Tartaglia, MD, MS (she/her/hers)

Position:

Professor of Pediatrics, Developmental Pediatrics

Organization:

University of Colorado School of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Shanlee M. Davis, MD, PhD (she/her/hers)

Position:

Associate Professor

Organization:

University of Colorado School of Medicine

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Susan Howell, MS, CGC, MBA (she/her/hers)

Position:

Assistant Professor

Organization:

University of Colorado

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Talia Thompson, PhD (she/her/hers)

Position:

Assistant Professor

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Samantha Bothwell, MS (she/her/hers)

Position:
Biostatistician

Organization:
University of Colorado

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

While individually occurring in fewer than 200,000 persons in the US, together rare disease conditions affect 1 in 10 individuals. Generating high quality evidence to guide clinical care for rare disease conditions poses multiple challenges, including small numbers, phenotypic variability, limited preclinical data to guide hypotheses, and minimal funding. Adaptations to traditional research methods can improve the quality and feasibility of research within rare disease pediatric conditions, however addressing these challenges is often an

intimidating barrier for pediatric researchers.

In this session, interdisciplinary panelists will present real-life examples of clinical studies conducted in pediatric rare disease populations, emphasizing study design adaptations that tackle one or more challenges in pediatric rare disease clinical research. Example approaches will address small patient volumes that are geographically dispersed, phenotypic heterogeneity, medical and psychosocial complexity, and limited preclinical and clinical data to inform study design. Examples will be drawn from research in Turner syndrome, Fragile X syndrome, male Rett syndrome, Klinefelter syndrome and other rare pediatric disorders. Panelists will discuss strengths and limitations of each of their approaches with relevance to answering their scientific question(s), enhancing study feasibility, and maintaining scientific rigor. Attendees can expect to gain an introductory understanding of how to modify traditional research approaches to improve the feasibility and quality of clinical research studies in pediatric rare disease contexts.

Learning Objectives

1. Identify key challenges in conducting clinical research within pediatric rare disease conditions.
2. Describe examples of study design adaptations that address challenges in pediatric rare disease research.
3. Engage in interdisciplinary dialogue on best practices for advancing clinical care for pediatric rare disease populations through methodologically sound research.

Scholarly Session Questions

1. **Audience Size**

150

2. **Target audience**

Trainees, pediatricians, pediatric sub-specialists, and interdisciplinary researchers with an interest in conducting research in pediatric rare disease conditions

3. **Tracks**

Academic and Research Skills
Children with Chronic Conditions
Clinical Research
Developmental and Behavioral Pediatrics
Endocrinology
Genomics/Epigenomics

Health Equity/Social Determinants of Health
Health Services Research

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Speakers who are not part of affiliated organizations are necessary because interdisciplinary (not just MD/DO) perspectives are essential to conducting successful and innovative rare disease research. We have included speakers with background in psychology, genetic counseling, and biostatistics with unique perspectives to contribute to this panel.
8. **Does this submission involve one or more specialties or disciplines?**
Speakers include representatives from Developmental Pediatrics, Endocrinology, Psychology, Genetics, and Biostatistics; content is relevant and overlapping with many other pediatric disciplines as rare disease is often multisystem and life long.
9. **If your session was presented at another conference, please describe the conference and presentation.**
We presented a similar session at Society for Developmental and Behavioral Pediatrics (SDBP) in 2023 focused on the diverse/adaptive research methodologies used on our team for evaluation of developmental outcomes in sex chromosome aneuploidy (SCA) conditions -- this was very well received. For the PAS audience, we have updated this symposium to expand beyond developmental outcomes in SCA conditions to rare disease research in general and have revised the learning objectives and speakers accordingly.
10. **Additional comments**
When we entered the speaker titles and times it may not be obvious but Dr. Tartaglia's time will include the intro, her example (titled), and the moderated discussion / Q&A portion.

Presentation Titles and Durations

Minimizing burden on rare disease patient units through home and telehealth visits

Nicole Tartaglia, MD, MS

Duration of Presentation in Minutes

31

Leveraging existing data sources to study pediatric rare disease

Shanlee M. Davis, MD, PhD

Duration of Presentation in Minutes

14

Multi-Center Clinical Registries with Interdisciplinary Collaborations Drive

Progress in Rare Disease Research

Susan Howell, MS, CGC, MBA

Duration of Presentation in Minutes

14

Partnering with the community to ground inquiry and approach

Talia Thompson, PhD

Duration of Presentation in Minutes

14

Remote capture and functional analysis of behavioral and physiologic data in the home environment

Samantha Bothwell, MS

Duration of Presentation in Minutes

14

(244) Proposal ID: 1929102

Advocating for Policies to Protect Children from Potential Harm in the Digital Age

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **W. Warren BINFORD**

Score: **0**

Participant(s)

Shale L. Wong, MD, MSPH (she/her/hers)

Position:

Professor and Executive Director

Organization:

Farley Health Policy Center, University of Colorado

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian, White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS

W Warren H. BINFORD, JD, EdM (she/her/hers)

Position:

Professor & W.H. Lea Chair in Pediatric Law, Ethics & Policy

Organization:

University of Colorado School of Medicine

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Margaret Mabie, Esq. (she/her/hers)

Position:

Partner

Organization:

Marsh Law Firm

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Jacqueline Beauchere, Juris Doctor (she/her/hers)

Position:

Global Head of Platform Safety

Organization:

Snap Inc.

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Michael Salter, PhD

Position:
Director of Childlight UNSW

Organization:
University of New South Wales

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

Technological advances in the 21st century have transformed the nature and experiences of childhood in the span of one generation. As the first cohort of digital natives comes of age, evidence is growing that children's experiences in digital spaces vary across the continuum of child health and well-being. Children's experiences can be life-giving in some instances and life-ending in others. Despite the tremendous potential impact of children's experiences online, only one modest federal law has been passed in the United States to

protect children on digital platforms.

Today's young people and their parents are challenging society to work thoughtfully and quickly to ensure the next generation of digitally-immersed children have the resources, guardrails, and supports needed to ensure their health, well-being, and survival without interfering with their political, social, and participation rights, many of which are increasingly exercised in digital environments.

This panel will discuss how digital experiences are affecting children in both helpful and harmful ways from the perspectives of a researcher, a policy maker, a tech leader, and a young survivor. It will provide an overview of state, national, and international policies intended to protect and empower children from tech-facilitated harms, as well as demonstrate some of the most advanced tools being developed by major technology companies. Finally, the panel will identify potential policies and advocacy strategies that balance children's rights within an evolving capacity model to help prepare today's children for a healthy life in the 21st century.

This session is sponsored by the Pediatric Policy Council.

Learning Objectives

1. Understand the myriad ways in which child health and well-being are being affected by digital technologies.
2. Describe policies needed to better protect children from abuse, exploitation, and other harms in digital spaces.
3. Appreciate the critical advocacy role of healthcare providers in moderating children's engagement with digital technologies within a rights-based, evolving capacity framework.

Scholarly Session Questions

1. **Audience Size**

150

2. **Target audience**

All attendees: trainees, general pediatricians, pediatric subspecialists, educators, policymakers

3. **Tracks**

Adolescent Medicine

Advocacy

Child Abuse & Neglect

Developmental and Behavioral Pediatrics

Literacy
School and Community Health
Social Media & Technology
Wellness and Well-being

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Advocacy
Health Policy

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

The Lived Experience Expert is a survivor of child sex abuse material trafficking and gains her expertise from lived experience. Jacqueline Beauchere is one of the tech industry's leaders in global online safety and is providing insight into the latest technology tools available to help protect children. Prof. Michael Salter is from Australia and will be explaining the policy model Australia has developed to address these issues. Warren Binford is a legal expert who has been researching and advocating on these issues since 2005.

8. **Does this submission involve one or more specialties or disciplines?**

Child Abuse and Neglect, Public Health, General Pediatrics, Policy
Advocacy

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

The Pediatric Policy Council is sponsoring this panel. We have invited a Hawaiian legislator to present the Hawaiian perspective, but have not yet received confirmation. You will note unaccounted time we have reserved for this purpose.

Presentation Titles and Durations

Why are Child Protection Policies So Challenging in the Digital Age?

Shale L. Wong, MD, MSPH

Duration of Presentation in Minutes

5

The 21st Century Childhood: How the Digital World is Impacting Children's Health and Wellbeing and Society's Response

W Warren H. BINFORD, JD, EdM

Duration of Presentation in Minutes

14

A Young Person's Account of Tech-Facilitated Child Abuse and What They Wish Had Been Different

Margaret Mabie, Esq.

Duration of Presentation in Minutes

14

The Technology Industry's Response to Childhood Harm on Digital Platforms: Opportunities and Challenges

Jacqueline Beauchere, Juris Doctor

Duration of Presentation in Minutes

14

Regulatory and Policy Responses to Protect Child Health and Wellbeing Online: The Australian Model

Michael Salter, PhD

Duration of Presentation in Minutes

14

(245) Proposal ID: 1924847

Dysphagia in the NICU and Beyond: Controversies in Diagnosis and Management

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Sudarshan Jadcherla**

Score: **0**

Participant(s)

Katlyn McGrattan, PhD (she/her/hers)

Position:
Assistant Professor

Organization:
University of Minnesota Medical School

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Sudarshan R. Jadcherla, MD, FRCPI, DCH, AGAF (he/him/his)

Position:
Professor of Pediatrics, Principal Investigator, and Endowed chair in Neonatology Research

Organization:
Nationwide Children's Hospital Research Institute and The Ohio State
University College of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Karlo Kovacic, MD, MS (he/him/his)

Position:
Assistant Professor

Organization:
Medical College of Wisconsin

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

Symptoms related to swallowing difficulties are common among convalescing NICU infants. Diagnosis of dysphagia can be challenging, and the therapies are not widely accepted. Chronic feeding and swallowing problems persist along with frustration among the caring team. Lack of objectivity with diagnostics and therapeutic is a concern. Consequences of the symptom-based diagnosis can result in multiple interventions along with increased hospitalization, unnecessary procedures and escalates economic burden. Objective evidence-based management is lacking. This session will address the controversies with diagnosis, clarify the objective measurements, and present an approach to management in the NICU and beyond.

Specifically, we will address the definitions and controversies with diagnosis and management of oral-pharyngeal dysphagia. Next, the pathophysiologic basis of swallowing and airway protection in relation to developmental physiology will be explained. Data acquired using state of the art methods at the crib side will be presented. Finally, chronic tube feeding is a major concern for parents and providers in the NICU and beyond discharge. We will address management approaches to improve both short- and long-term feeding outcomes.

Specifically, we will clarify Dysphagia in the NICU infant from the perspectives of the Speech-Language Pathologist, the Neonatologist, and the Pediatric Gastroenterologist.

Learning Objectives

1. Describe the epidemiology/burden of dysphagia, the structure/function of the swallowing apparatus, clinical and instrumental evaluation and the role of nipple-flow and viscosity in NICU infants.
2. Comprehend different state-of-the-art methods for diagnosis, pathophysiological mechanisms and how to implement a holistic approach to improve feeding outcomes in NICU infants with feeding/swallowing difficulties.
3. Recognize the timing/approach to chronic tube feeding, controversies surrounding G-tube and/or fundoplication, post-G-tube rehabilitation and optimal follow-up for better outcomes in infants with feeding difficulties.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**

Neonatologists, Neonatal Fellows, Neonatal APNs/PAs, Allied Therapists, Gastroenterologists, Pulmonologists, Complex Care Physicians and Home Health Care Providers, Pediatricians

3. Tracks

Children with Chronic Conditions
Clinical Research
Community Pediatrics
Critical Care
Gastroenterology/Hepatology
General Pediatrics
Neonatology
Pulmonology

4. Do faith observance restrictions apply? If so, check the day(s) that should be avoided.

Not Applicable

5. Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?

I submitted a workshop and another Hot Topic Proposal

6. Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?

No

7. If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.

Katlyn McGrattan PhD, CCC, SLP from the University of Minnesota is an Assistant Professor. Her research focuses on the identification and treatment of perturbations in upper aerodigestive physiology that impede an infant's ability to successfully breathe and orally feed.

8. Does this submission involve one or more specialties or disciplines?

Dysphagia involving Speech and Language pathology, Neonatology, Gastroenterology and Nutrition

9. If your session was presented at another conference, please describe the conference and presentation.

No

10. Additional comments

Presentation Titles and Durations

Controversies with diagnosis of oral-pharyngeal dysphagia and management
Katlyn McGrattan, PhD

Duration of Presentation in Minutes

30

Why NICU babies don't eat? Evidence-based diagnosis and holistic approaches for best outcomes

Sudarshan R. Jadcherla, MD, FRCPI, DCH, AGAF

Duration of Presentation in Minutes

30

It is just a tube! Chronic feeding disorders beyond NICU

Karlo Kovacic, MD, MS

Duration of Presentation in Minutes

30

(246) Proposal ID: 1932798

Food As Medicine: Integrated and Co-located Food and Nutrition Resources in Healthcare Systems

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Deanna Reinoso**

Score: **0**

Participant(s)

Deanna R. Reinoso, MD

Position:

Assistant Professor of Clinical Pediatrics

Organization:

Indiana University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Session Description

Session Description

Food As Medicine efforts in healthcare systems require a holistic approach that includes screening for food and nutrition insecurity, referring food insecure households to resources, providing cooking and nutrition education and addressing structural disparities in neighborhood food sovereignty. Food as Medicine requires an investment in the electronic health record system, social drivers of health screening infrastructure, nutrition programming and the internal and external network of resources for households who experience food insecurity. This presentation will describe two different models of co-located food resources integrated into a health system infrastructure and the clinical workflows addressing disparities in nutrition access. Lessons learned from integration and sustainability of co-located food access resources will be presented. A co-located food pantry with "Food as Medicine" programming that has been established and sustained for 10 years will be described with practical lessons learned. Secondly, an innovative market/pantry hybrid model with an internal closed loop referral system for food insecure households identified by universal food insecurity screening in an urban public health system will be described. Achieving equitable access to food and nutrition is essential to the long-term health of children with special consideration of at-risk communities experiencing disproportionate burden of nutrition related chronic disease.

Learning Objectives

1. implement universal food insecurity screening and referral infrastructure within a health system.
2. describe a co-located food pantry model with "Food As Medicine" programming to address nutrition related chronic disease disparities.
3. evaluate lessons learned from a holistic co-located market pantry hybrid model that addresses food insecurity, neighborhood food access sovereignty and cooking/nutrition education.

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
Primary and specialty care clinical practice and health administration.
3. **Tracks**
EHR/Medical Informatics
General Pediatrics
Health Equity/Social Determinants of Health
Immigrant Health
Leadership and Business Training

Pediatric Nutrition
Public Health
Wellness and Well-being

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
none
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
9. **If your session was presented at another conference, please describe the conference and presentation.**
Only the Market/Pantry Hybrid model was presented at VITAL America's Essential Hospitals conference.
10. **Additional comments**

Presentation Titles and Durations

Food As Medicine: Integrated and Co-located Food and Nutrition Resources in Healthcare Systems

Deanna R. Reinoso, MD

Duration of Presentation in Minutes

45

(247) Proposal ID: 1921155

Cars, ambulances, helicopters, and more: Navigating the admission, transfer, and transport processes

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Deana Miller**

Score: **0**

Participant(s)

Zachary J. Pettigrew, MD, FAAP (he/him/his)

Position:

Clinical Assistant Professor of Pediatrics

Organization:

Cone Health Children's Services

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Deana Miller, MD, FAAP (she/her/hers)

Position:

Pediatric Hospitalist

Organization:

University of North Carolina

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Ruchi s. Doshi, MD MPH (she/her/hers)

Position:

Assistant Professor

Organization:

Duke University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Session Description

Session Description

Rates of direct admissions to hospitals and interfacility transfers are rising, compounded by both sicker pediatric patients and increased regionalization of pediatric care. Unfortunately, the processes behind direct admissions,

transfers, and transports are unclear and inconsistent, even within the same region. This session is designed for clinicians working in community clinics, emergency departments, or community or tertiary hospitals, as well as all trainees. It will focus on the insights and experiences of frontline physicians who recognize this was not a standard part of pediatrics training.

Join us as we use a clinical case to examine the current landscape of pediatric admissions and transports. We will demystify the transfer process and create a framework for standardizing procedures to promote high-quality, patient-centered, equitable, and efficient care. Our symposium will start with an in-depth examination of direct admissions practices. Then we will explore the different transport options—ranging from private vehicles to ambulances and helicopters. We will also review the legal implications under EMTALA and ensure that participants leave with a comprehensive understanding of their role in medical direction. Finally, we will call into the transfer center to discuss best communication practices for referring and receiving teams. By the end of the session, participants will be equipped to apply the latest evidence and best practices pertaining to admissions, transfers, and transport at their own institutions.

Learning Objectives

1. Examine the landscape and evidence surrounding the direct admission, interfacility transfers, and transport processes.
2. Propose best practices to increase safety and efficiency within the direct admission, interfacility transfers, and transport processes.
3. Appraise critical elements of communication and operations between referring and receiving teams to reduce healthcare inequities within the direct admission, interfacility transfers, and transport processes.

Scholarly Session Questions

1. **Audience Size**

75

2. **Target audience**

Pediatric hospitalists, general pediatricians, community pediatricians, emergency medicine providers, subspecialists who admit patients to the hospital, trainees

3. **Tracks**

Community Pediatrics

Emergency Medicine

General Pediatrics

Health Equity/Social Determinants of Health
Hospital Medicine

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
All Adults Belong in Adult Hospitals - Or Do They? (Ruchi Doshi)
Less Bloat, More Clarity: Optimizing Clinical Notes (Deana Miller)
Before and After the Cut: current trends and best practices in surgical comanagement for children at community hospitals (Deana Miller)
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
n/a
8. **Does this submission involve one or more specialties or disciplines?**
The topic of Direct Admission, Interfacility Transfer, and Transport involves Pediatric Hospital Medicine, Community Pediatrics, General Pediatrics, Pediatric Emergency Medicine, Pediatric Sub-specialists, and Transport Medicine.
9. **If your session was presented at another conference, please describe the conference and presentation.**
Yes, elements of this talk (specifically about transport) have been presented at PAS 2022, PHM 2022, and PHM 2024 but revamped with new data and an equity lens.
10. **Additional comments**
The time in our "Presentations & Durations" section totals 75 minutes as we have planned a 15-minute Q&A with Deana Miller at the end (email: deanahmiller@gmail.com).

Presentation Titles and Durations

Calls from the clinic: Streamlining direct admissions with an equitable lens

Zachary J. Pettigrew, MD, FAAP

Duration of Presentation in Minutes

25

Radioing in from EMS: Navigating the nuances of transport and EMTALA

Deana Miller, MD, FAAP

Duration of Presentation in Minutes

25

Calls from the Emergency Department: effective communication for safe, efficient, and equitable transfers

Ruchi s. Doshi, MD MPH

Duration of Presentation in Minutes

25

(248) Proposal ID: 1932694

Pediatric Diaper Need: Maternal and Infant Social and Structural Drivers of Health

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Deanna Reinoso**

Score: **0**

Participant(s)

Deanna R. Reinoso, MD

Position:

Assistant Professor of Clinical Pediatrics

Organization:

Indiana University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Session Description

Session Description

Recommendations for pediatric diaper need screening and diaper resource referral were first published in Pediatrics in 2013 (Smith et al., 2013) yet more than a decade later, there are minimal advancements in universal diaper need screening and resource integration into the healthcare system. This presentation will describe the first published successful integration of universal pediatric diaper need screening into existing social drivers of health screening (SDOH) infrastructure and clinical practice in a large urban Federally Qualified Health Center public health system. Evaluation of demographics, comorbid social health-related social factors and related health measures will be presented along with health equity in screening practices and public policy considerations for addressing unmet diaper need.

This cross-sectional study of pediatric diaper need demonstrates 40.9% (n=3,147/7,701) of pediatric patients from 0 to 36 months of age experience diaper insecurity. Integration of diaper need screening into the health system screening infrastructure provided diaper need screening for 46.2% (n=7,701/16,677) of unique patients. Significant co-morbidities between socioeconomic SDOH domains and unmet diaper need exist for food insecurity, housing insecurity, transportation insecurity, and financial insecurity. Universal screening and diaper insecurity prevalence will be presented with evaluation of disparities based on race, ethnicity and household preferred language. Maternal and infant health is impacted when unmet diaper need is not identified and addressed in clinical practice. Adequately addressing unmet diaper need will require health care systems to identify unmet diaper need with universal screening and implement a process to connect infants with diaper insecurity to resources and support structural policy changes.

Learning Objectives

1. integrate universal diaper need screening and resource referral for diaper insecure households into clinical workflows and healthcare systems.
2. describe the impact of unmet diaper need on maternal and infant health outcomes.
3. advocate for mitigating structural and policy interventions to address unmet diaper need as a critical pediatric social driver of health.

Scholarly Session Questions

1. **Audience Size**

-200

2. **Target audience**

Primary and specialty physicians providing pediatric or maternal health clinical care.

3. **Tracks**

Community Pediatrics
Diversity, Equity, and Inclusion
General Pediatrics
Health Equity/Social Determinants of Health
Immigrant Health
Neonatology
Public Health
Well Newborn

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
none
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Pediatric Diaper Need: Maternal and Infant Social and Structural Drivers of Health

Deanna R. Reinoso, MD

Duration of Presentation in Minutes

45

(249) Proposal ID: 1924221

Moving from Addressing Food Insecurity to Securing Nutrition Equity

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Laura Plencner**

Score: **0**

Participant(s)

Kimberly Montez, MD, MPH, FAAP (she/her/ella)

Position:

Associate Professor; Vice Chair, JEDI-Peds; Associate Dean, Justice and Belonging

Organization:

Wake Forest School of Medicine

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, SPR

Molly Krager, MD (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Children's Mercy Hospitals and Clinics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Laura Plencner, MD

Position:

Associate Professor of Pediatrics

Organization:

Children's Mercy Kansas City

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Michelle A. Lopez, MD, MPH (she/her/hers)

Position:

Associate Professor

Organization:

Baylor College of Medicine

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
Prefer not to respond

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Katherine A. Auger, MD, MSc (she/her/hers)

Position:
Professor

Organization:
Cincinnati Children's Hospital Medical Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, SPR

Session Description

Session Description

Addressing health related social needs, including food insecurity, is becoming standard of care for healthcare. Pediatricians recognize the essential role that healthy food plays in child health and the prevention of chronic medical conditions. Many institutions are already working to improve the food security of their patients and communities including food insecurity screening, referral to community organizations, direct partnership with community organizations, co-location of federal nutrition programs, onsite food resources, and legislative

advocacy.

Improving food security by ensuring children have an adequate quantity of food is an important step; to achieve optimal health and health equity, healthcare systems need to go further and strive for nutrition security. Centering healthy food, including fresh fruits and vegetables, into existing healthcare-based food programs, is an opportunity to ensure that children have stable access to nutritious food that they need to be healthy. This goal aligns with the National Strategy for Hunger, Nutrition, and Health, which calls to better integrate nutrition and health and improve access to nutrition education and obesity prevention.

This session will first review the current national and scholarly landscape of food and nutrition security as well as opportunities for healthcare systems to push their food security programs to address nutrition security. Next, we will highlight examples from the literature of healthcare systems elevating food security programs to address nutrition security on multiple levels including direct provision of food, prescriptive produce programs, and collaboration with community organizations. To conclude, we will discuss opportunities for advocacy and facilitated question and answer session.

Learning Objectives

1. Describe the difference between food security and nutrition security
2. Discuss innovative methods, using examples from the literature, for healthcare systems addressing nutrition insecurity
3. Describe strategies to move healthcare-based food security programs to addressing nutrition security.

Scholarly Session Questions

1. **Audience Size**

120

2. **Target audience**

Fellows, Faculty, and Institutional leaders in clinical, research, or administrative roles working to address health related social needs

3. **Tracks**

Advocacy

Community Pediatrics

General Pediatrics

Health Equity/Social Determinants of Health

Pediatric Nutrition

Public Health

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
PPAC Pillar Meeting
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Topic is food and nutrition security, which is relevant to general pediatricians as well as all pediatric subspecialists including cardiology, endocrinology, hospital medicine, emergency medicine, etc.
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Moving from Food Security to Nutrition Insecurity, Introduction and National Landscape

Kimberly Montez, MD, MPH, FAAP

Duration of Presentation in Minutes

20

Direct Provision of Food and Nutrition Security Services

Molly Krager, MD

Duration of Presentation in Minutes

15

Prescribing Healthy Food

Laura Plencner, MD

Duration of Presentation in Minutes

15

Collaboration with Community Organizations

Michelle A. Lopez, MD, MPH

Duration of Presentation in Minutes

15

Opportunities for Advocacy and Facilitated Question and Answer

Katherine A. Auger, MD, MSc

Duration of Presentation in Minutes

25

(250) Proposal ID: 1900767

The Impact of NICU Stress and Experience on Brain Development of Preterm Infants

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **PRAVEEN BALLABH**

Score: **0**

Participant(s)

PRAVEEN BALLABH, MD (he/him/his)

Position:

Professor

Organization:

ALBERT EINSTEIN COLLEGE OF MEDICINE

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Terrie Inder, MBChB, MD (she/her/hers)

Position:

Director, Center for Newborn Research

Organization:

Childrens Hospiyal of Orange County

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS, SPR

Robert D. White, MD (he/him/his)

Position:

Director, Regional Newborn Program

Organization:

NEWBORN ICU, Beacon Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Roberta Pineda, PhD OTR/L, CNT (she/her/hers)

Position:

Associate Professor

Organization:

University of Southern California

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Prefer not to respond

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Petra S. Huppi, MD, MD (she/her/hers)

Position:
Professor

Organization:
University Childrens Hospital

Role:

Speaker

Ethnicity
Prefer not to respond

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

The neonatal brain undergoes rapid development and is vulnerable to adverse exposures and experiences. The unfavorable environment and the associated stress of the infant in the Neonatal Intensive Care Unit (NICU) have a major impact on early brain development. Such stressful experiences affect the brain through diverse mechanisms, specifically disturbing the hippocampus, amygdala, and prefrontal cortex. This symposium will review the impact of neonatal stress and the mediators of such stress on the immature nervous

system. Further, the symposium will identify the importance of positive environmental exposures, such as skin-to-skin care, language and music, and movement. Studies in preterm animals demonstrate that prematurity and early neonatal stress reduce hippocampal volume, arrest the maturation of synapses in the dentate gyrus, and disrupt NMDA receptors. Clinical studies in preterm infants also demonstrate the impact of NICU stressors and positive sensory exposures on brain development and outcomes. Environmental influences will also be discussed in the context of the presence or absence of nurturing. NICU experience and the associated stress can be modified by the design of the NICU, enhancing sensory experiences, parent engagement, and music therapy, which will all be presented.

Learning Objectives

1. Discuss recent advances in understanding the impact of NICU stress on brain maturation and functional connectivity, as well as address the related controversies.
2. Review the influence of NICU design on improving medical and neurobehavioral outcomes of preterm infants.
3. Critically discuss the effect of enhancing sensory experiences and music therapy to promote neurological function in premature infants in the NICU.

Scholarly Session Questions

1. **Audience Size**
1000
2. **Target audience**
Neonatologists, child neurologists, researchers, pediatricians, neonatal fellows, NNPs, pediatric residents
3. **Tracks**
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Friday, April 25
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Neonatal neurology, brain club
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr. Roberta Pineda has extensively published "The Supporting and Enhancing NICU Sensory Experiences Program". She is well known for her contribution to this field.

8. **Does this submission involve one or more specialties or disciplines?**

No

9. **If your session was presented at another conference, please describe the conference and presentation.**

No

10. **Additional comments**

No

Presentation Titles and Durations

Disruption in neuronal development in premature newborns under stress and reversal with estrogen treatment.

PRAVEEN BALLABH, MD

Duration of Presentation in Minutes

15

Regional impairment in brain development in premature infants in the NICU.

Terrie Inder, MBChB, MD

Duration of Presentation in Minutes

15

Impact of NICU design on neurological outcomes in preterm infants.

Robert D. White, MD

Duration of Presentation in Minutes

15

Enhancing sensory experiences in preterm infants in the NICU to promote neurological function -- the SENSE program.

Roberta Pineda, PhD OTR/L, CNT

Duration of Presentation in Minutes

15

Music therapy and parent voice for premature infants in NICU.

Petra S. Huppi, MD, MD

Duration of Presentation in Minutes

15

(251) Proposal ID: 1930778

Indigenous Child Health: Challenges, Perspectives and Solutions

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Gary Darmstadt**

Score: **0**

Participant(s)

Gary L. Darmstadt, MD, MS (he/him/his)

Position:

Associate Dean for Maternal and Child Health, Professor

Organization:

Department of Pediatrics, Stanford University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR, PIDS

Aimee M. Grace, MD, MPH, FAAP (she/her/hers)

Position:

Director, Office of Strategic Health Initiatives

Organization:

University of Hawaii System

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Nicole Redvers, ND, MPH, DPhilc (she/her/hers)

Position:

Associate Professor, Director Indigenous Planetary Health

Organization:

The University of Western Ontario - Schulich School of Medicine & Dentistry

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

American Indian or Alaska Native

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Session Description

Session Description

The panelists will discuss challenges in Indigenous child health , including in Hawaii and in the Pacific region, and highlight indigenous knowledge and perspectives, resilience, and strength in indigenous solutions and programs. Components will include Native Hawaiian/Pacific Islander historical injustices

and health disparities; Indigenous Planetary Health; policies and colonizing practices and the effects on Indigenous communities, families and mental, behavioral, social and emotional child development; and principles of effective solutions in Indigenous child health.

Learning Objectives

1. Describe Native Hawaiian/Pacific Islander historical injustices and health disparities.
2. Describe principles, perspectives and approaches to Indigenous Planetary Health.
3. Compare and contrast principles and programs to advance indigenous child health justice and wellness.

Scholarly Session Questions

1. **Audience Size**
75
2. **Target audience**
Researchers, practitioners, advocates, and learners with an interest in health equity.
3. **Tracks**
Community Pediatrics
Environmental Health
Global Neonatal & Children's Health
Health Equity/Social Determinants of Health
Mental Health
Public Health
School and Community Health
Wellness and Well-being
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
No
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide**

an explanation of the non-member speaker selection so that PAS staff may request approval.

Dr. Nicole Redvers is a member of the Deninu K'ue First Nation and has worked with Indigenous patients, scholars, and communities around the globe her entire career. She is an Associate Professor in the Department of Epidemiology and Biostatistics, and is a Western Research Chair and Director of Indigenous Planetary Health at the Schulich School of Medicine & Dentistry at Western University. She has been actively involved at regional, national, and international levels promoting the inclusion of Indigenous perspectives in both human and planetary health research and practice. She is lead author of The Lancet Planetary Health paper on "The determinants of planetary health: an Indigenous consensus perspective." She is a commissioner on the Lancet Commission on Arctic Health, is on the steering committee for the Planetary Health Alliance at John Hopkins, and co-chairs the Association of Faculties of Medicine of Canada Planetary Health Committee. Her scholarly work engages a breadth of projects attempting to bridge the gap between Indigenous and Western ways of knowing as it pertains to individual, community, and planetary health. Dr. Redvers is the author of the paperback book, "The Science of the Sacred: Bridging Global Indigenous Medicine Systems and Modern Scientific Principles." She is uniquely qualified to talk about indigenous perspectives on planetary health and bridging Western and Indigenous knowledge and practice.

8. Does this submission involve one or more specialties or disciplines?

Yes, this session involves Community Health, Public Health, Health Equity, Global Neonatal and Children's Health

9. If your session was presented at another conference, please describe the conference and presentation.

10. Additional comments

Presentation Titles and Durations

Historical context for global inequities and perspectives on solutions in Indigenous child health

Gary L. Darmstadt, MD, MS

Duration of Presentation in Minutes

30

Indigenous child health: Native Hawaiian/Pacific Islander perspectives on justice and health care system responses

Aimee M. Grace, MD, MPH, FAAP

Duration of Presentation in Minutes

30

Indigenous Planetary Health: An Intergenerational Vision
Nicole Redvers, ND, MPH, DPhilc

Duration of Presentation in Minutes

30

(252) Proposal ID: 1926939

From innovation to implementation in the NICU: understanding the journey of artificial intelligence technology

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Brynne Sullivan**

Score: **0**

Participant(s)

Brynne A. Sullivan, MD, MSCR (she/her/hers)

Position:

Associate Professor

Organization:

University of Virginia School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Lindsey A. Knake, MD MS

Position:

Assistant Professor

Organization:

University of Iowa

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Zachary A. Vesoulis, MD MSCI

Position:

Assistant Professor

Organization:

Washington University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

John P. Campbell, MD, MPH (he/him/his)

Position:

Associate Professor

Organization:

OHSU

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Wissam Shalish, MD, PhD

Position:
Assistant Professor

Organization:
McGill University Faculty of Medicine and Health Sciences

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Prefer not to respond

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Session Description

Session Description

AI and ML technologies hold immense potential for transforming care in neonatal intensive care units (NICUs), but only if they become successfully integrated into clinical practice. The path from innovation to bedside is complex and filled with challenges. In this 90-minute session, we will guide attendees through the intricate journey of some of the few examples of AI/ML technologies that have progressed along this path. Attendees will first gain insight into the development and evaluation processes that AI/ML technologies

undergo. Speakers will identify common hurdles, including regulatory challenges, the need for robust clinical validation, and the difficulties of integrating new technology with existing systems. Finally, the session will emphasize the importance of ongoing evaluation to ensure AI-based systems deliver sustained improvements in patient outcomes.

Expert speakers, including Dr. Peter Campbell, Dr. Zach Vesoulis, and Dr. Brynne Sullivan, will provide real-world examples such as AI for ROP, seizure detection algorithms, and the HeRO System for predicting late-onset neonatal sepsis. Attendees will leave with a deeper understanding of the journey AI/ML technologies take from innovation to implementation and be better equipped to contribute to the adoption of these groundbreaking tools in clinical practice. This session is ideal for clinicians, researchers, and healthcare administrators interested in the future of AI in neonatal care.

Learning Objectives

1. Understand the path that new AI/ML technology takes before it can be used in patient care
2. Identify hurdles that prevent AI/ML technology from being integrated into clinical practice
3. Recognize important aspects of ongoing evaluation and adoption of AI-based systems to have a lasting, desired, positive impact on patient outcomes

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
Pediatricians and Neonatologists interested in learning about and discussing the process and challenges of translating artificial intelligence (AI) and machine learning (ML) based technology from the computer lab to the bedside.
3. **Tracks**
Academic and Research Skills
EHR/Medical Informatics
Neonatology
Social Media & Technology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

Pre-conference session on AI; AI/Informatics networking session;
Hemodynamics club

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Dr. Peter Campbell is an ophthalmologist and is affiliated with his specialty organizations. His expertise in AI technology for retinopathy of prematurity is highly relevant to this topic. Thus, we request approval for the benefit of the session and audience.

8. **Does this submission involve one or more specialties or disciplines?**

Topic is AI technology translation involving Neonatology, Ophthalmology, Neurology, and Informatics

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

Presentation Titles and Durations

From development to clinical practice: the journey of NICU sepsis predictive monitoring

Brynne A. Sullivan, MD, MSCR

Duration of Presentation in Minutes

20

Q&A Session, moderated by Dr. Lindsey Knake, Clinical Informatics expert

Lindsey A. Knake, MD MS

Duration of Presentation in Minutes

15

AI algorithms for seizure detection during neonatal EEG monitoring

Zachary A. Vesoulis, MD MSCI

Duration of Presentation in Minutes

20

AI technology for retinopathy of prematurity (ROP) management

John P. Campbell, MD, MPH

Duration of Presentation in Minutes

20

Introduction: The challenges that innovative technology face in healthcare
Wissam Shalish, MD, PhD

Duration of Presentation in Minutes

15

(253) Proposal ID: 1905882

Pharmacogenetic Testing for Everyone: Pro-Con Debate

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Sonya Tang Girdwood**

Score: **0**

Participant(s)

Tamorah Lewis, MD, PhD (she/her/hers)

Position:

Associate Professor

Organization:

University of Toronto Temerty Faculty of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Sonya C. Tang Girdwood, MD, PhD (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Cincinnati Children' Hospital Medical Center

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Emily J. Cicali, PharmD (she/her/hers)

Position:

Clinical Associate Professor

Organization:

University of Florida College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Laura Ramsey, PhD (she/her/hers)

Position:

Associate Professor

Organization:

Children's Mercy Hospitals and Clinics

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Benjamin Duong, PharmD (he/him/his)

Position:
Clinical Pharmacogenomics Service Manager

Organization:
Nemours Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Sara Van Driest, MD, PhD (she/her/hers)

Position:
Director of Pediatrics, All of Us Research Program

Organization:
National Institutes of Health, Office of the Director

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

Session Description

Session Description

There is tremendous interest in implementing DNA testing for medication management (i.e. pharmacogenetic testing) in children to guide choice and dosing of medications and to provide personalized or precision medicine. However, there are several barriers to pharmacogenetic testing, including uncertainty about which pediatric patients would benefit most from testing, which types of pharmacogenetic tests to order, and how to incorporate test results in prescribing practices.

In this session, pharmacogenetics experts who have implemented this testing at their institutions will address these topics through a pro-con discussion and debate. We will begin with an introduction to pharmacogenetics to ensure the audience has a solid foundation of terms that will be used during the debate. Questions we will specifically debate are: 1) Should all children have pharmacogenetic testing done at birth? 2) When prescribing a drug, should we test only the single gene associated with the drug or order comprehensive gene panel testing? 3) What is the responsibility of providers to take into account results of pharmacogenetic tests that were ordered by other providers or the patients/families? The session will conclude with a brief Q&A with all six speakers.

Learning Objectives

1. Name the benefits and challenges in providing pharmacogenetic testing in all children in the United States at birth
2. Appraise the value of single-gene testing versus comprehensive pharmacogenetic panel testing when prescribing a drug
3. Discuss the responsibility and limitations of clinicians to account for the results of pharmacogenetic tests ordered by other clinicians or patients in their prescribing

Scholarly Session Questions

1. **Audience Size**

100

2. **Target audience**

General pediatricians, pediatric subspecialists, pharmacists, clinical pharmacologists, geneticists, trainees, research staff

3. **Tracks**

Children with Chronic Conditions
Clinical Bioethics
Community Pediatrics
Developmental and Behavioral Pediatrics
General Pediatrics
Genomics/Epigenomics
Neonatology
Pharmacology and Therapeutics

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Please avoid scheduling at the same time as any other Pharmacology and Therapeutics sessions since we all have interest in P&T sessions and there are so few P&T sessions at PAS.

In addition, the following people are in proposals for other sessions:
Emily Cicali, Benjamin Duong, Tamorah Lewis, Laura Ramsey, Sonya Tang Girdwood

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Emily J. Cicali, PharmD is a Clinical Associate Professor at University of Florida College of Pharmacy. She is a member of the Clinical Pharmacogenetics Implementation and Pharmacogenomics Global Research Network. Dr. Cicali launched a virtual pharmacist-led pharmacogenetics consult clinic, MyRx, that provides services throughout the state of Florida. About half of the patients seen in the clinic are pediatric patients seeking guidance from pharmacogenetic testing to guide psychiatric medications and/or a variety of other

outpatient medications (e.g., PPIs). In addition to directing the MyRx program, Dr. Cicali is the Assistant Director for Clinical Pharmacogenetics within the UF Health Precision Medicine Program and oversees the pharmacogenetics infrastructure and day to day clinical activities. She has direct clinical experience with both single gene interpretation as well as panel-based gene test interpretations. She has a research interest in pharmacogenetics implementation and experience with several pragmatic clinical trials, most notably a PPI pilot in pediatric patients.

Benjamin Duong, PharmD is the Clinical Pharmacogenomics Service Manager at Nemours Children's Health. He is a member of the Clinical Pharmacogenetics Implementation and Pharmacogenomics Global Research Network. He has implemented one of the first clinical pharmacogenomics service in a pediatric health system that provides consultation for pediatricians in determining if pharmacogenetic testing is warranted, interpretation of the results in the perspective of the patient's need, and quality assurance of ordered/resulting through pharmacogenetic testing stewardship to minimize unnecessary testing or result misinterpretation. He engages in multidisciplinary collaboration to develop an in-house pharmacogenomics panel, pharmacogenomic clinical decision support with recommendations for drug-gene interactions, prepares educational materials for providers and patients, and participates in research (clinical trials and implementation sciences).

8. **Does this submission involve one or more specialties or disciplines?**

The speakers in this submission represent hospital medicine, general pediatrics, neonatology, pharmacy and pharmacogenetics. The topic is relevant to general pediatrics and all pediatric subspecialties.

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

Presentation Titles and Durations

Everyone in the United States should have comprehensive pharmacogenetic testing at birth: Pro

Tamora Lewis, MD, PhD

Duration of Presentation in Minutes

12

Everyone in the United States should have comprehensive pharmacogenetic testing at birth: Con

Sonya C. Tang Girdwood, MD, PhD

Duration of Presentation in Minutes

12

It is best practice to test the single gene associated with the prescribed drug rather than order comprehensive panels: Pro

Emily J. Cicali, PharmD

Duration of Presentation in Minutes

30

It is best practice to test the single gene associated with the prescribed drug rather than order comprehensive panels: Con

Laura Ramsey, PhD

Duration of Presentation in Minutes

12

Clinicians are responsible for pharmacogenetic testing results ordered by other clinicians or patients: Pro

Benjamin Duong, PharmD

Duration of Presentation in Minutes

12

Clinicians are responsible for pharmacogenetic testing results ordered by other clinicians or patients: Con

Sara Van Driest, MD, PhD

Duration of Presentation in Minutes

12

(254) Proposal ID: 1931757

Looking through the same lens: Integrating pediatric cardiology and neonatology for optimal hemodynamic care in the NICU

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Danielle Rios**

Score: **0**

Participant(s)

Patrick J. McNamara, MB, BCH, BAO, DCH, MSc (Paeds), MRCP, MRCPCH, FASE (he/him/his)

Position:
Professor of Pediatrics & Internal Medicine

Organization:
University of Iowa Stead Family Children's Hospital

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Shazia Bhombal, MD

Position:
Associate Professor

Organization:
Children's Healthcare of Atlanta/Emory University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Danielle R. Rios, MD, MS (she/her/hers)

Position:

Professor of Pediatrics

Organization:

University of Iowa Department of Pediatrics

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Soume Bhattacharya, MBBS MD (she/her/hers)

Position:

Assistant Professor, Neonatologist, Associate Scientist

Organization:

Western University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Stephanie Acosta, MD (she/her/hers)

Position:
Pediatric Cardiologist Clinical Assistant Professor

Organization:
University of Iowa Stead Family Children's Hospital

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Gabriel Altit, MDCM, MSc, FRCPC, FASE (he/him/his)

Position:
Neonatologist - Assistant Professor

Organization:
McGill University Faculty of Medicine and Health Sciences

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Prefer not to respond

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Stephanie Ford, MD (she/her/hers)

Position:
Associate Professor of Pediatrics, Neonatology Critical Care Attending

Organization:
Rainbow Babies and Children's Hospitals, Case Western Reserve
University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Session Description

Session Description

Neonatal Hemodynamics is an emerging subspecialty utilized to enhance diagnostic and therapeutic precision in NICU patients and is a high priority for Neonatology leaders. Successful implementation of a neonatal hemodynamics program requires close collaboration between neonatology hemodynamic subspecialists and pediatric cardiologists, which extends across clinical care, specialty one-year fellowships, and scientific investigation. This session brings together experts in the field to provide an overview of the elements of a successful program, keys to collaboration, and strategies to mitigate risk and

navigate programmatic challenges.

Impact of cardiac POCUS on neonatal hemodynamic care in the NICU – measurable gain or blind losses, Dr. Shazia Bhombal

- Optimizing neonatal care through utilizing cardiac POCUS programs

Implementing a successful hemodynamics program in the NICU - utopia or dystopia, Dr. Danielle Rios

- Gains of achieving implementation of a new neonatal hemodynamics program

Establishing a successful collaboration between neonatal hemodynamics and pediatric cardiology - mission impossible? Dr. Soume Bhattacharya

- Barriers to integration of neonatal hemodynamics into cardiology programs and/or implementation of hemodynamics programs

The neonatologist with an imaging probe and echocardiography machine – dangerous game or towards perfect symbiosis, Dr. Stephanie Acosta

- Successful implementation of hemodynamics care with pediatric cardiology involvement, a cardiologist's perspective

Generating new science in neonatal hemodynamics - a bridge over troubled waters, Dr. Gabriel Altit

- Building successful academic/research programs between cardiology and hemodynamics

Panel discussion and open Q&A (Moderators: Patrick McNamara and Stephanie Ford)

Learning Objectives

1. Understand the barriers to improving hemodynamic care in the NICU and develop strategies/tools to navigate them
2. Understand the elements of neonatal hemodynamics programs, how they differ from cardiac POCUS programs, and the most common pros and cons of each
3. Establish a successful collaboration between pediatric cardiology and neonatology/neonatal hemodynamics that optimizes clinical care, training, and research advancement in the field

Scholarly Session Questions

1. Audience Size

80

2. **Target audience**
Neonatology faculty and fellows, neonatal nurse practitioners
Cardiology faculty and fellows
3. **Tracks**
Cardiology
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Hemodynamics Club, our speakers will also likely be involved in other neonatal hemodynamics and pulmonary hypertension/PDA sessions, so this session should not overlap those.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Yes, this topic involves pediatric cardiology and neonatology (in addition to neonatal hemodynamics and cardiac POCUS which are considered subspecialties of neonatology)
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**
This is a session that has been requested by both pediatric cardiologists and neonatologists that I have interacted with at other conferences. We hope to provide much needed guidance to those specialties so that they can improve their hemodynamics care with or without the ability to start a true neonatal hemodynamics program in the near future.

Presentation Titles and Durations

Introduction and moderator for panel discussion
Patrick J. McNamara, MB, BCH, BAO, DCH, MSc (Paeds), MRCP, MRCPCH, FASE

Duration of Presentation in Minutes

40

Impact of cardiac POCUS on neonatal hemodynamic care in the NICU □
measurable gain or blind losses

Shazia Bhombal, MD

Duration of Presentation in Minutes

10

Implementing a successful hemodynamics program in the NICU - utopia or dystopia

Danielle R. Rios, MD, MS

Duration of Presentation in Minutes

10

Establishing a successful collaboration between neonatal hemodynamics and pediatric cardiology - mission impossible?

Soume Bhattacharya, MBBS MD

Duration of Presentation in Minutes

10

The neonatologist with an imaging probe and echocardiography machine □
dangerous game or towards perfect symbiosis

Stephanie Acosta, MD

Duration of Presentation in Minutes

10

Generating new science in neonatal hemodynamics - a bridge over troubled waters

Gabriel Altit, MDCM, MSc, FRCPC, FASE

Duration of Presentation in Minutes

10

Moderator for panel discussion

Stephanie Ford, MD

Duration of Presentation in Minutes

35

(255) Proposal ID: 1923799

Parenting as a Mental Health Crisis: Barriers and Strategies for Addressing Parental Wellness in the Pediatric Visit

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Megana Dwarakanath**

Score: **0**

Participant(s)

Megana Dwarakanath, MD, M.Ed

Position:

Clinical Assistant Professor

Organization:

UPMC Childrens Hospital of Pittsburgh

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Session Description

Session Description

This session will discuss opportunities and barriers to addressing parental wellness in pediatric care settings, especially given the Surgeon General's recent statement regarding the parental mental health crisis. Pediatric visits may be the only opportunities for parents to connect with health care providers and represent an important nexus for assessing mental health needs, discussing coping mechanisms, offering referrals to community resources, and bridging medical management.

Learning Objectives

1. Analyze current screening practices for parental well being (such as the EPDS) and their strengths and limitations.
2. Recognize and address biases in care for special populations including BIPOC parents, people who use drugs, adolescent and young adult parents.
3. Strategize a care plan for parents with resources including reproductive planning support, breast/chest feeding support, physical therapy, and behavioral health.

Scholarly Session Questions

1. **Audience Size**
30
2. **Target audience**
General pediatricians, adolescent health providers, community pediatricians in lower resource settings.
3. **Tracks**
Adolescent Medicine
Advocacy
Community Pediatrics
General Pediatrics
Well Newborn
Wellness and Well-being
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
no
8. **Does this submission involve one or more specialties or disciplines?**
Yes, involves general pediatrics, adolescent medicine, addiction medicine.
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Parenting as a Mental Health Crisis: Barriers and Strategies for Addressing Parental Wellness in the Pediatric Visit

Megana Dwarakanath, MD, M.Ed

Duration of Presentation in Minutes

90

(256) Proposal ID: 1932287

Hear All About It: Update on Over-The-Counter Contraception and STI Testing and Post-exposure Prophylaxis for STIs for Adolescents

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Lea Widdice**

Score: **0**

Participant(s)

May Lau, MD, MPH (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

University of Texas Southwestern Medical School

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Jessica Sims, MD (she/her/hers)

Position:

Adolescent Medicine Fellow

Organization:

University of Texas Southwestern Medical School

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Lea Widdice, MD (she/her/hers)

Position:

Associate Professor

Organization:

Cincinnati Children's Hospital Medical Center

Role:

Submitter;Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Matthew M. Hamill, MBChB, PhD

Position:

Assistant Professor

Organization:

Johns Hopkins University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

While birth rates among adolescents and young adults (AYA) in the United States continue to decrease, barriers remain to accessing contraception. Almost half of reported cases of bacterial sexually transmitted infections (STIs) in the U.S. occur in AYA. However, a revolution in AYA sexual and reproductive health is happening. This Hot Topic Symposium will inform participants about the recent availability of over-the-counter (OTC) contraception and STI testing, along with doxycycline post-exposure prophylaxis (Doxy PEP) for chlamydia, gonorrhea, and syphilis as it pertains to youth.

The OTC contraception presentation will be by an adolescent medicine physician. Word cloud will be used to identify audience concerns about OTC contraception. Contraindications to, side effects of, and access to OTC contraception will be discussed.

Another adolescent medicine physician will provide updates on OTC STI testing. Word cloud will be used to identify audience concerns about OTC STI testing. Pros and cons of OTC STI testing will be reviewed along with management of positive tests.

An infectious disease specialist will lecture on Doxy PEP for STI prevention. Audience-identified barriers about provision of Doxy PEP to AYAs will be displayed via word cloud. Identification of candidates for, patient counseling on, and prescribing of Doxy PEP, along with management will be explored.

After each presentation there will be a presenter-led small group discussion and case-based discussion utilizing web-based audience response system.

Sufficient time will be available for the audience to ask questions from the presenter panel and share complex patient cases for discussion with the panel.

Learning Objectives

1. Explain the current state of over-the-counter contraception and sexually transmitted infection testing and doxycycline post-exposure prophylaxis for youth.
2. Analyze information and research regarding over-the-counter contraception and sexually transmitted infection testing and doxycycline post-exposure prophylaxis for youth
3. Utilize the current research to inform practice policies around over-the-counter contraception and sexually transmitted infection testing and doxycycline post-exposure prophylaxis for youth

Scholarly Session Questions

1. **Audience Size**
45
2. **Target audience**
general pediatricians, specialists in adolescent medicine, infectious diseases, emergency medicine, public health, community medicine
3. **Tracks**
Adolescent Medicine
Community Pediatrics
Emergency Medicine
General Pediatrics
Infectious Diseases
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Lea Widdice is a pediatrician and member of the Society for Adolescent Health and Medicine and the American Sexually Transmitted Disease Association. Financial considerations preclude her from pursuing memberships in additional professional organizations. She is an adolescent medicine specialist with experience in FDA submissions for medical devices, research and manufacturing of point-of-care diagnostics, direct-to-consumer STI diagnostic tests. She has published on feasibility and acceptability of STI testing in non-traditional healthcare settings and acceptability of at-home sample collection among adolescents. She has an active clinical practice and provides primary care and specialty care to adolescents, including reproductive health care.

Mathew Hamill is an adult infectious disease specialist at Johns Hopkins School of Medicine with over 25 years of experience in sexually transmitted infection, including HIV, clinical care and research. In the United Kingdom he was the medical director of a STI clinically dedicated to adolescents. Currently, he serves as the Clinical Chief for STI services at Baltimore City Health Department. He undertakes research related to STIs, including HIV, in Baltimore, USA and Kampala, Uganda with colleagues at the Infectious Diseases Institute, Makerere University. He serves as the Clinical Core Lead for the Center for Innovative Diagnostics for Infectious Diseases based at Johns Hopkins University. He is a lecturer for the National Network of STD Prevention Centers. He is a medical lead for the CDC's adult syphilis guidelines. He has presented his research on early implementation of doxycycline post-exposure prophylaxis at the CDC's 2024 STI Prevention Conference.

8. Does this submission involve one or more specialties or disciplines?

Reproductive health involving pediatricians, infectious diseases, adolescent medicine, emergency medicine, laboratory medicine, community medicine, public health.

9. If your session was presented at another conference, please describe the conference and presentation.

Dr. Widdice and Dr. Mau presented a 15-minute Hot Topics at the Society for Adolescent Health and Medicine in March 2024. Since then, the FDA has ruled on laboratory developed test and authorized the first over-the-counter test for syphilis and the CDC published doxy PEP guidelines.

10. Additional comments

I had May Lau as chair and speaker but she is not listed as a speaker. She will provide a 4-minute introduction and facilitate the 16 minute Q&A. I added this time to the presentations of the listed speakers so it equals 90 minutes. The times will be,
May Lau Introduction 4 minutes
Jess Sims OTC Contraception 20 minutes

Lea Widdice OTC STI Testing 20 minutes

Matthew Hamill 30 minutes

May Lau facilitating questions and audience case discussions 16 minutes

Presentation Titles and Durations

Over-the-counter contraception: The time is now.

Jessica Sims, MD

Duration of Presentation in Minutes

30

Know Your Role in OTC STI Testing

Lea Widdice, MD

Duration of Presentation in Minutes

30

Stepping Up for Doxy PEP

Matthew M. Hamill, MBChB, PhD

Duration of Presentation in Minutes

30

(257) Proposal ID: 1928967

Advanced diagnostic approaches to rare diseases

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Pankaj Agrawal**

Score: **0**

Participant(s)

Pankaj B. Agrawal, MD, MMSC

Position:

Chief of Neonatology and Professor of Pediatrics and Genetics

Organization:

University of Miami Leonard M. Miller School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS, SPR

Holger Prokisch, PhD

Position:

Research Group Leader

Organization:

Tech University Munich, School of Medicine, Germany

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Ryan Doan, PhD (he/him/his)

Position:

Assistant Professor

Organization:

Boston Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Session Description

Session Description

Whole exome sequencing (WES), whole genome sequencing (WGS) (in addition to chromosomal microarrays and targeted gene panels) are increasingly being utilized in the clinical setting to determine the molecular basis of Mendelian disorders. Despite that, diagnosis for more than half the children with rare diseases continues to remain elusive. We propose the most

advanced approaches to diagnose those undiagnosed conditions. The approaches include cell free DNA sequencing prenatally, whole genome and epigenome sequencing, reanalysis of sequenced data, RNA sequencing, single cell, and somatic mosaicism studies. Those approaches are mostly available in the research settings and it is critical for clinicians to understand how they can advance diagnosis and should be considered when dealing with a patient of rare disease without a diagnosis. There are many research initiatives available from the NIH and various institutions, and some of those will be available in clinical setting in the near future. Similarly, prenatal diagnosis using cell free DNA has lot of promise based on recent research and it should become clinically available in the near future.

Learning Objectives

1. describe the limitations of current clinical diagnostic testing.
2. understand the various advanced diagnostic options to determine molecular basis of disease for patients when clinical genetic testing fails.
3. inspire the clinicians and families to keep working on their patients/families despite negative clinical testing.

Scholarly Session Questions

1. **Audience Size**
100150
2. **Target audience**
The target audience will include geneticists, researchers interested in Mendelian disorders, genetic counselors and proactive families.
3. **Tracks**
Academic and Research Skills
Advocacy
Basic Science
Clinical Research
Genomics/Epigenomics
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
genomics/epigenomics session

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
The speakers are world leaders in those topics.
8. **Does this submission involve one or more specialties or disciplines?**
Yes. Neonatology, Genetics, Genomics, basic research
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**

Presentation Titles and Durations

Rapid genome sequencing, research and reanalysis of exome and genome data

Pankaj B. Agrawal, MD, MMSC

Duration of Presentation in Minutes

30

Genetic diagnosis of Mendelian disorders via RNA sequencing

Holger Prokisch, PhD

Duration of Presentation in Minutes

30

Single cell sequencing and deciphering somatic mosaicism

Ryan Doan, PhD

Duration of Presentation in Minutes

30

(258) Proposal ID: 1920811

Surfactant administration in preterm infants: Dilemmas of method, timing and premedication

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Manoj Biniwale**

Score: **0**

Participant(s)

Manoj Biniwale, MD (he/him/his)

Position:

Director of NICU Clinical Research

Organization:

Cedars Sinai Medical Center

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Anup Katheria, M.D.

Position:

Associate Professor of Pediatrics

Organization:

University of California, San Diego School of Medicine

Role:

Chair

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

Peter A. Dargaville, MD (he/him/his)

Position:

Professorial Research Fellow in Neonatology

Organization:

Menzies Institute for Medical Research, University of Tasmania

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Kari Roberts, MD

Position:

Professor of Pediatrics

Organization:

Univ of MN

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

Tetsuya Isayama, MD, MSc, PhD (he/him/his)

Position:
Head, Division of Neonatology

Organization:
National Center for Child Health and Development

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Rangasamy Ramanathan, MBBS, MD.

Position:
Professor/Division Chief, Division of Neonatology

Organization:
Cedars Sinai Guerin Children's, Cedars Sinai Medical Center

Role:

Speaker

Ethnicity
Prefer not to respond

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS

Daniele De Luca, MD, PhD (he/him/his)

Position:
Full Professor of Neonatology

Organization:
Paris Saclay University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Brett J. Manley, MB BS, PhD (he/him/his)

Position:
Prof

Organization:
The University of Melbourne

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

In this new era of non-invasive respiratory management for preterm infants with respiratory distress, there is a consensus on the continuing need for exogenous surfactant, but, in the absence of an endotracheal tube (ETT), the ideal method of administering surfactant is not as clear. Two newer less-invasive approaches to surfactant delivery are via a thin catheter (known as LISA) and via a supraglottic airway (known as SALSA). Proponents of LISA believe that surfactant should ideally be administered directly into the trachea for best effect whereas advocates of SALSA emphasize the simplicity of the technique with reportedly similar beneficial effects.

As fewer preterm infants are intubated in the delivery room, the findings of previous studies examining the timing of surfactant administration via an ETT need to be reconsidered. Currently there is no consensus on whether surfactant should be administered in the delivery room or in the subsequent hours in the NICU. Neonatologists favoring surfactant therapy in the delivery room point to potential advantages of earlier administration even if given unselectively, whereas those administering surfactant in the NICU do so based on the apparent need after initial stabilization, and in a more controlled environment.

There is ongoing debate on whether surfactant administration using newer methods requires premedication for analgesia and sedation. Proponents of sedation claim that there is a need to relieve procedural pain from a physiologic point of view, whereas opponents believe the side effects of the medications, including apnea, hypoxia and bradycardia, may have worse consequences than the transient discomfort.

Learning Objectives

1. Review and describe the strengths and limitations of two less-invasive techniques of surfactant administration, using either a thin catheter or a supraglottic airway

2. Review current evidence and deliberate on the ideal timing of surfactant administration for preterm infants in the current era of non-invasive respiratory management
3. Compare the benefits vs harms of sedative and analgesic premedication prior to less-invasive surfactant administration

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
neonatologists, neonatal nurse practitioners, neonatal perinatal medicine fellows, pediatric residents, respiratory care practitioners, nurses
3. **Tracks**
Clinical Research
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Not at the same time of neonatology clinical trials
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Some of the speakers are international so may not be members of the above societies. they are members of European and Australian equivalent societies.
8. **Does this submission involve one or more specialties or disciplines?**
mainly neonatology
9. **If your session was presented at another conference, please describe the conference and presentation.**
n/a
10. **Additional comments**
Please note that there will be 6 speakers with 3 themes speaking pro vs Con in surfactant administration.

First speaker is just for the introduction of the topic.

Presentation Titles and Durations

Dilemmas with less invasive surfactant administration

Manoj Biniwale, MD

Duration of Presentation in Minutes

5

Surfactant is best administered less invasively via a thin catheter

Peter A. Dargaville, MD

Duration of Presentation in Minutes

12

Surfactant is best administered less invasively via a supraglottic airway

Kari Roberts, MD

Duration of Presentation in Minutes

12

The delivery room is the right place to administer surfactant

Tetsuya Isayama, MD, MSc, PhD

Duration of Presentation in Minutes

12

The NICU is the right place to administer surfactant

Rangasamy Ramanathan, MBBS, MD.

Duration of Presentation in Minutes

12

Premedication with analgesia or sedation is required for less invasive surfactant delivery

Daniele De Luca, MD, PhD

Duration of Presentation in Minutes

12

Premedication with analgesia or sedation is not required for less invasive surfactant delivery

Brett J. Manley, MB BS, PhD

Duration of Presentation in Minutes

12

(259) Proposal ID: 1932847

SPR Health Services Research Assembly

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Cristina Alvira**

Score: **0**

Participant(s)

Cristina M. Alvira, MD (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Stanford University School of Medicine

Role:

Submitter

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APS, SPR

Alyna T. Chien, MD, MS (she/her/hers)

Position:

Associate Professor, Research Director

Organization:

Boston Children's Hospital / Harvard Medical School

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA, SPR

Session Description

Session Description

The SPR Research Assemblies are designed to present innovating, state of the art research that is cross-disciplinary and not focused on a single clinical specialty. This session will bring together four featured platform speakers (selected from high-scoring abstracts submitted to PAS 2025, and prioritizing early career investigators) with one invited speaker, who will be an established investigator in the field of health services research. This session will have two major goals. First, to facilitate connections between researchers untied by a thematic research focus, who would normally be delegated to different PAS sessions. Second, to feature high impact/cutting edge health services research projects that complement an invited speaker presentation.

The topic details are pending based on abstract reviews, but the session will follow this format:

- Introduction of the session by the session Chair (2 min)
- Abstract Platform #1: Speaker TBD (10 min)
- Questions for abstract #1 (5 min)
- Abstract Platform #2: Speaker TBD (10 min)
- Questions for abstract #2 (5 min)
- Invited Speaker: TBD (20 min)
- Questions for invited speaker (5 min)
- Abstract Platform #3: Speaker TBD (10 min)
- Questions for abstract #3 (5 min)
- Abstract Platform #4: Speaker TBD (10 min)
- Questions for abstract #4 (5 min)
- Closing: Session Chair (3 min)

Learning Objectives

1. 1. Identify approaches and barriers to conducting health services research in pediatrics.
2. 2. Understand how collaboration and information exchange across specialties could result in more impactful discoveries.
3. 3. Describe cutting-edge methodologies that allows the study of large populations in pediatric health services research.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Residents, Fellows, Faculty of all levels, Physician-Scientists, Career Child Health Researchers
3. **Tracks**
Academic and Research Skills
Advocacy
Clinical Research
EHR/Medical Informatics
Health Services Research
Public Health
Quality Improvement/Patient Safety
School and Community Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
SPR Presidential Plenaries
SPR Scholarly Sessions
SPR Workshops
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
All speakers will be members of one partner organization.

8. **Does this submission involve one or more specialties or disciplines?**

Yes. These sessions are designed to be multi-disciplinary and to transcend the subspecialty silos of PAS.

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

Presentation Titles and Durations

Introduction and Closing

Alyna T. Chien, MD, MS

Duration of Presentation in Minutes

5

(260) Proposal ID: 1923078

Fever in the Traveling Child: Diagnostic Challenges and Management Strategies

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Andrea Rivera-Sepulveda**

Score: **0**

Participant(s)

Andrea Rivera-Sepulveda, MD, MSc

Position:

Associate Professor of Pediatrics

Organization:

Nemours Children's Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

SPR

Corinne L. Bria, MD MEd (she/her/hers)

Position:

Associate Professor, University of Central Florida School of Medicine

Organization:

Nemours Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Nicolas Erbrich, MD, FAAP

Position:

Associate Professor of Pediatrics

Organization:

Nemours Children's Hospital

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Kenneth A. Alexander, MD, PhD (he/him/his)

Position:

Professor of Pediatrics

Organization:

The University of Central Florida

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR, PIDS

Session Description

Session Description

This lecture aims to provide healthcare professionals with a comprehensive understanding of the diagnostic and management complexities associated with fever in children who have recently traveled. The session will include 1) an overview of the global rise in pediatric travel, the significance of fever as a common presenting symptom in returning pediatric travelers (introduction); 2) review of common infectious causes of fever in pediatric travelers based on travel destination (e.g., malaria, dengue, typhoid fever), and discussion of less common but potentially life-threatening infections (e.g., rickettsial infections, leptospirosis) (epidemiology and etiology); 3) pre-travel counseling for pediatric patients and their families, vaccination recommendations based on travel destination, and advice on prophylactic medications and protective measures to prevent common travel-related infections (preventive measures); 4) importance of a thorough travel history, including destinations, activities, exposure risks, and vaccination history, as well as laboratory investigations that include blood tests, cultures, imaging, and other diagnostic modalities, and case-based discussion of differential diagnoses (diagnostic approach); 5) initial management in an outpatient versus inpatient setting, when to initiate empiric therapy and what options to consider, and the role of specialist consultation (e.g., infectious disease specialists) in complex cases (management strategies); 6) interactive discussion of real-life cases to illustrate key points, and application of diagnostic and management strategies in various scenarios (case studies); and 7) emphasis on the importance of vigilance, early diagnosis, and appropriate management in improving outcomes for febrile pediatric travelers (recap of key points).

Learning Objectives

1. Identify critical infectious diseases associated with fever in traveling children based on the travel region.
2. Understand the initial management and treatment protocols for fever in traveling children, including when to initiate empiric therapy.
3. Discuss preventive strategies for the febrile traveling child, including vaccinations and prophylaxis.

Scholarly Session Questions

1. **Audience Size**
45
2. **Target audience**
General Pediatricians, Family Physicians, Infectious Disease Specialists, Emergency Medicine Physicians, Healthcare professionals involved in pediatric care, trainees, residents and medical students.
3. **Tracks**
Emergency Medicine
Epidemiology
Global Neonatal & Children's Health
Immigrant Health
Immunizations/Delivery
Infectious Diseases
Pharmacology and Therapeutics
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Dr. Rivera-Sepulveda will also participate in a workshop and a Hot Topic Symposia submission.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**

Topic is Infectious Disease involving Emergency Medicine, Global Health, Epidemiology, Immunization, Pharmacology and Therapeutics.

9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**
Speakers will give a 15-minute talk, followed by a 5-minute audience polling and response to enrich the discussion and provide an interactive experience for the speakers and the audience. Speakers' talks will last 20 minutes and be moderated by Dr. Rivera-Sepulveda.

Presentation Titles and Durations

The Febrile Traveler: Infections to Consider in Febrile Children Returning from Overseas

Andrea Rivera-Sepulveda, MD, MSc

Duration of Presentation in Minutes

15

Differential Diagnosis: Causes of Fever in the Traveling Child

Corinne L. Bria, MD MEd

Duration of Presentation in Minutes

20

Diagnostic Approach of the Traveling Febrile Child: Tools and Challenges

Nicolas Erbrich, MD, FAAP

Duration of Presentation in Minutes

20

Management Strategies of the Febrile Traveling Child: Treatment and Follow-up

Kenneth A. Alexander, MD, PhD

Duration of Presentation in Minutes

20

(261) Proposal ID: 1905306

Therapeutic drifts in neonatology - a cautionary tale

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **JULEE OEI**

Score: **0**

Participant(s)

Richard Martin, MD (he/him/his)

Position:

Professor

Organization:

UH Rainbow Babies & Children's Hospital

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Ju-Lee Oei, MBBS FRACP MD (she/her/hers)

Position:

Conjoint Professor

Organization:

University of New South Wales

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Josef Neu, MD (he/him/his)

Position:

Professor of Pediatrics

Organization:

University of Florida

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS, SPR

Rita M. Ryan, MD (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Case Western Reserve University

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Lina Chalak, MD, MSCS (she/her/hers)

Position:
Professor

Organization:
University of Texas Southwestern Medical School

Role:

Speaker

Ethnicity
Prefer not to respond

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS, SPR

Session Description

Session Description

Many important interventions in neonatology have evolved from ground-breaking randomised controlled trials (RCTs) that were conducted years ago in very different populations of infants to those managed in neonatal intensive care units (NICU) today. Many of these interventions have allowed increasingly sicker and smaller infants to survive, but how the interventions themselves are used have changed considerably from their original intent. In addition, the use of these interventions have led to entrenched practice and the development of staunch and immutable mindsets that have precluded further evaluation and research of the benefit, effectiveness, safety and acceptability of these

practices in contemporary practice.

We explore four areas of interest that represent significant therapeutic drift in neonatal care (steroids, nitric oxide, therapeutic hypothermia, and donor human milk) and that are now used well beyond the original intent of the randomized trials that introduced these therapies including for increasingly premature infants.

1. Introduction - What is Therapeutic Drift and the role of randomised controlled trials in neonatal practice - Richard Martin
2. Steroids - walking down the Primrose Path for steroids- Rita Ryan
3. Nitric oxide - following the Yellow Brick Road for preterm babies with respiratory failure - Ju Lee Oei
4. Cooling - To cool or not to cool, that is the question for mild HIE - Lina Chalak
5. Milk - Human donor milk as a panacea - can we change the dogma? - Josef Neu
6. Wrap up - Is therapeutic drift preventable or should it be prevented?

Learning Objectives

1. Understand how and why practice derived from clinical trials and research has evolved and is now used to treat very different infants today
2. Understand the need to consider further research to evaluate how interventions derived from past research fit the needs of today's infant in the nicu
3. Acknowledge knowledge gaps in using these interventions for the participants' own practice and to evaluate their research and clinical strategies to bridge these gaps.

Scholarly Session Questions

1. **Audience Size**
200
2. **Target audience**
Neonatologists, general pediatricians, researchers, scientists, fellows in training
3. **Tracks**
Breastfeeding/Human Milk
Clinical Research
Neonatology
Pharmacology and Therapeutics
Quality Improvement/Patient Safety

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Not applicable at the moment
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
Julee Oei
8. **Does this submission involve one or more specialties or disciplines?**
Neonatology
9. **If your session was presented at another conference, please describe the conference and presentation.**
Not applicable
10. **Additional comments**
Not applicable

Presentation Titles and Durations

Introduction. What is Therapeutic Drift and the role of randomised controlled trials in neonatal practice?

Richard Martin, MD

Duration of Presentation in Minutes

6

Following the Yellow Brick Road for treating preterm babies with inhaled nitric oxide

Ju-Lee Oei, MBBS FRACP MD

Duration of Presentation in Minutes

21

Human donor milk as a panacea - can we change the dogma?

Josef Neu, MD

Duration of Presentation in Minutes

21

Walking down the Primrose Path for steroids

Rita M. Ryan, MD

Duration of Presentation in Minutes

21

To cool or not to cool, that is the question for mild hypoxic ischemic encephalopathy

Lina Chalak, MD, MSCS

Duration of Presentation in Minutes

21

(262) Proposal ID: 1918259

Advancing Native Hawaiian/Pacific Islander (NHPI) and Filipino Child Health:
Learning from Strengths-Based Research Approaches

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Joyce Javier**

Score: **0**

Participant(s)

Blane K. Garcia, MPH

Position:

Research Program Site Manager

Organization:

Waianae Coast Comprehensive Health Center

Role:

Speaker

Ethnicity

Hispanic or Latino

Race

Native Hawaiian and other Pacific Islander

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Alyna T. Chien, MD, MS (she/her/hers)

Position:

Associate Professor, Research Director

Organization:

Boston Children's Hospital / Harvard Medical School

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA, SPR

Tumaini Rucker Coker, MD, MBA (she/her/hers)

Position:

Professor of Pediatrics

Organization:

University of Washington/Seattle Children's

Role:

Chair

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS, SPR

May Okihiro, MD (she/her/hers)

Position:

Associate Professor

Organization:

University of Hawaii, John A. Burns School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Kenny S. Ferenchak, MD, MEdT (he/him/his)

Position:
Pediatrician

Organization:
Waianae Coast Comprehensive Health Center

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Joyce R. Javier, MD, MPH, MS, FAAP (she/her/hers)

Position:
Associate Professor, Department of Health Systems Science

Organization:
Kaiser Permanente Bernard J. Tyson School of Medicine

Role:

Submitter;Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, SPR

Aimee M. Grace, MD, MPH, FAAP (she/her/hers)

Position:
Director, Office of Strategic Health Initiatives

Organization:
University of Hawaii System

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Kamuela JN Enos, MA (he/him/his)

Position:
Dir. Office of Indigenous Knowledge and Innovation for Office of VP for
Research and Innovation

Organization:
University of Hawaii at Manoa

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian, Native Hawaiian and other Pacific Islander, White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Session Description

Session Description

Native Hawaiian/Pacific Islander (NHPI) and Filipino communities thrived prior to colonialization. Their ancestors knew how to foster healthy communities with traditional values and practices anchored in the enduring relationships between people and places. Today, cultural identity and values are essential components of health and well-being. However, traditional biomedical and public health research approaches, even those that are community-based, often take a deficit approach to health and the potential interventions to improve it. To foster systemic and sustainable change in health outcomes for these communities, research priorities and culturally- relevant interventions must be identified by the community, research plans must be co-developed with communities, and researchers must shift to a strengths-based, rather than deficit approach in their partnerships with communities. In this panel presentation, we showcase three programs that have utilized these community-led approaches to advance health in NHPI and Filipino communities. We will learn about two community-led, NIH-funded, pediatric research experiences with NHPI and Filipino communities and an initiative for systems-level change to improve health across NHPI populations. The panel will conclude with an invitation to engage and empower communities in the co-development of research to truly advance sustainable health.

This session is sponsored by the Pediatric Policy Council, which combines the advocacy efforts of the Academic Pediatric Association, American Academy of Pediatrics, Association of Medical School Pediatric Department Chairs, American Pediatric Society, and the Society for Pediatric Research. This session is also connected to a community experience field trip immediately prior PAS (details will be posted at <https://www.chsor.org/>).

Learning Objectives

1. Understand approach and experience of centering NHPI and Filipino populations in community-led/community-based participatory research.
2. Understand systems-level change efforts impacting research with Native Hawaiian and Pacific Islander populations.

3. Understand policy mechanisms to leverage research to advance community health and sustainability of community-based practices.

Scholarly Session Questions

1. **Audience Size**

75

2. **Target audience**

This presentation applies to learners of all career stages, including trainees and those pursuing a wide variety of careers within medicine.

3. **Tracks**

Academic and Research Skills

Advocacy

Career Development

Community Pediatrics

Diversity, Equity, and Inclusion

Epidemiology

General Pediatrics

Health Equity/Social Determinants of Health

Health Services Research

Immigrant Health

Mental Health

Public Health

School and Community Health

Wellness and Well-being

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**

Not Applicable

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

1. Dr. Aimee Grace has been included in a Hot Topic Symposia session entitled:

“Launching Lifelong Health by Improving the Health and Wellbeing of Children: A New National Academy of Science, Engineering, Medicine Report Type of Session”

2. Dr. Kenny Ferenchuk and Dr. May Ohiro are included in the the following session: Title: No Child Health Equity Without Data Equity: Translating Data Equity into Child Health Services Research

(Proposal ID: 1914988)

3. Dr. Joyce Javier serves as the SPR Advocacy Committee Co-chair and would like to attend this state of the art plenary given the Advocacy

committee is sponsoring this session. It is titled, "Science Advocacy 101: How to be an effective advocate for pediatric research and science."

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

No

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

Kamuella Enos MA and Blane Garcia MPH are not members of these organizations. They are both integral/critical community partners in the research that will be presented during this panel presentation on the use of community-based participatory research in two underrepresented populations in research: Native Hawaiian/Pacific Islanders and Filipinos. This panel is a great opportunity given the location of the PAS meeting in Hawaii, focusing on NHPs and Filipinos (whose pediatric outcomes are often grouped with Asians, with whom they differ in geography, socioeconomic factors, and other factors).

8. **Does this submission involve one or more specialties or disciplines?**

- This presentation should receive a Cross-Disciplinary Spotlight because it draws on numerous scientific disciplines including general pediatrics, psychology, epidemiology, sociology, community groups, health services research, and indigenous health.

9. **If your session was presented at another conference, please describe the conference and presentation.**

Not applicable

10. **Additional comments**

Presentation Titles and Durations

Approach of centering NHPs in research: Experience with Community Partnerships to Advance Science for Society (ComPASS)

Blane K. Garcia, MPH

Duration of Presentation in Minutes

6

Approach of centering NHPs in research: Experience with Community Partnerships to Advance Science for Society (ComPASS)

May Okihiro, MD

Duration of Presentation in Minutes

7

Approach of centering NHPs in research: Experience with Community Partnerships to Advance Science for Society (ComPASS)

Kenny S. Ferenchak, MD, MEdT

Duration of Presentation in Minutes

7

Amplifying community voices: Enhancing Filipino youth mental health with community-led research & virtual parenting programs

Joyce R. Javier, MD, MPH, MS, FAAP

Duration of Presentation in Minutes

20

The Univ. of Hawai'i Center for Indigenous Innovation and Health Equity:
Promoting systems-level change for NHPI communities

Aimee M. Grace, MD, MPH, FAAP

Duration of Presentation in Minutes

10

The Univ. of Hawai'i Center for Indigenous Innovation and Health Equity:
Promoting systems-level change for NHPI communities

Kamuela JN Enos, MA

Duration of Presentation in Minutes

10

(263) Proposal ID: 1922049

Getting it Done and Making it Stick: Considering New Methods when Implementation Fails

Session Type: **Debate/Pro-Con Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Danielle Cullen**

Score: **0**

Participant(s)

Danielle Cullen, MD, MPH, MSHP (she/her/hers)

Position:

Assistant Professor

Organization:

Children's Hospital of Philadelphia

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Agbim Chisom, MD, MSHS (she/her/hers)

Position:

Clinical Assistant Professor

Organization:

Stanford University School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Kimberly A. Randell, MD, MSc (she/her/hers)

Position:

Professor of Pediatrics

Organization:

Children's Mercy Hospitals and Clinics

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Monica M. Prieto, MD, MSHS (she/her/hers)

Position:

Assistant Professor

Organization:

Children's Hospital of Philadelphia

Role:

Speaker

Ethnicity
Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Robyn Wing, MD, MPH (she/her/hers)

Position:
Associate Professor of Emergency Medicine & Pediatrics

Organization:
The Warren Alpert Medical School of Brown University

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Session Description

Session Description

Only 14% of evidence-based innovations are ever integrated into clinical practice, and the failure rates for these implementation efforts are high, with estimates ranging from 30-90%. This “evidence-to-practice” gap translates into inequitable and suboptimal care, increased costs, and strain on limited healthcare resources. How can clinical leaders effectively address growing calls for improved and standardized care? In the first part of this pro/con debate session we will present an example of a failed implementation effort, and

panelists who are experts in their respective fields will provide a post-mortem analysis of the failure and a description of how this might be solved through their method of choice: 1) quality improvement, 2) implementation science, and 3) human factors engineering. Each panelist will describe their method of expertise, the tools and process by which this method would “fix” the problem, and potential weaknesses. The second portion of this session will focus on areas of synergy between the methods, promoting cross-pollination of ideas and interdisciplinary work. Resources, tips, and an emphasis on team science will be integrated throughout the session. Further, we will address the potential for implementation efforts, regardless of method employed, to perpetuate rather than mitigate health disparities, offering frameworks and theories to promote intentional and robust attention to equity across all aspects of implementation. Panel participants include experts in pediatric emergency medicine and the methods presented, who have designed and led local and national efforts including grant-funded and multi-center collaborations to rigorously define and study best practices for implementation.

Learning Objectives

1. Define quality improvement, implementation science, and human factors engineering
2. Discuss how the exemplified methods diverge and intersect, and their importance in addressing the evidence-to-practice gap
3. Identify strategies to address health disparities within implementation efforts

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
clinicians who are looking to move evidence into practice, implementation scientists, quality improvement experts, trainees, public health professionals
3. **Tracks**
Academic and Research Skills
Diversity, Equity, and Inclusion
Emergency Medicine
Health Services Research
Public Health
Quality Improvement/Patient Safety
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Monday, April 28

5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

Healing-Centered Approaches to Support Child & Family Well-Being
Game On! Debating Complexities in Pediatric Advanced Airway Management

Securing the Safety Net: Challenges and Opportunities for Social Care in the ED

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

We will use examples from pediatric emergency medicine, but the topic area is broadly applicable

9. **If your session was presented at another conference, please describe the conference and presentation.**

n/a

10. **Additional comments**

Presentation Titles and Durations

Your intervention failed, now fix it

Danielle Cullen, MD, MPH, MSHP

Duration of Presentation in Minutes

10

Quality improvement: Continuous improvement is better than delayed perfection

Agbim Chisom, MD, MSHS

Duration of Presentation in Minutes

15

Implementation science: Moving from Evidence to Practice with Rigor

Kimberly A. Randell, MD, MSc

Duration of Presentation in Minutes

15

Human Factors Engineering: Empathy Science Makes the Right Thing Easy

Monica M. Prieto, MD, MSHS

Duration of Presentation in Minutes
15

Bridging the Gap
Robyn Wing, MD, MPH

Duration of Presentation in Minutes
15

(264) Proposal ID: 1932907

Toward widescale promotion of early relational health in pediatrics

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Dani DUMITRIU**

Score: **0**

Participant(s)

Nikki Shearman, PhD (she/her/hers)

Position:
Chief of Research and Innovation

Organization:
Reach Out and Read

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Christina D. Bethell, PhD, MBA, MPH (she/her/hers)

Position:
Professor, Director, Child and Adolescent Health Measurement Initiative

Organization:
JHU

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA

Mary Ann Woodruff, MD (she/her/hers)

Position:

Physician Lead for Care Transformation, Medical Director for Reach Out and Read Washington

Organization:

Pediatrics Northwest, PS

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Dani DUMITRIU, MD, PhD (she/her/hers)

Position:

Associate Professor of Pediatrics and Psychiatry

Organization:

Dani Dumitriu

Role:

Submitter;Speaker;Chair

Ethnicity
Prefer not to respond

Race
Prefer not to respond

Gender
Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
SPR

Session Description

Session Description

Promoting early relational health (ERH), meaning healthy and nurturing relationships between children and their parents/caregivers, was officialized as a priority in 2021 by a paradigm shifting AAP policy statement. In this panel discussion, we will discuss some of the national efforts toward the implementation of this action call, as well as provide insight into the state-of-the-art mechanistic laboratory work aimed at understanding what ERH is, how it forms, and how it becomes developmentally embedded in the brain.

Learning Objectives

1. Describe the importance of early relational health for child and family health and wellbeing, as well as its adversity buffering effects.
2. Define early relational health and list various measures of it.
3. List some of the national efforts toward widescale promotion of early relational health in pediatric primary care.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
General pediatricians will likely be the biggest proportion, but the topic of early relational health is relevant to all PAS attendees.
3. **Tracks**
Clinical Research
Community Pediatrics

Developmental and Behavioral Pediatrics
Diversity, Equity, and Inclusion
General Pediatrics
Health Equity/Social Determinants of Health
Mental Health
Wellness and Well-being

4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Avoid overlap with the early literacy SIG
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
n/a
8. **Does this submission involve one or more specialties or disciplines?**
General Pediatrics, Public Health, Community Engagement, Participatory Research
9. **If your session was presented at another conference, please describe the conference and presentation.**
n/a
10. **Additional comments**
n/a

Presentation Titles and Durations

Scaling promotion of early relational health across the Reach Out and Read Network

Nikki Shearman, PhD

Duration of Presentation in Minutes

15

One big doable thing: Leveraging the power of pediatric primary care to foster early relational health and child flourishing

Christina D. Bethell, PhD, MBA, MPH

Duration of Presentation in Minutes

15

Transforming pediatric primary care with families: Lessons from the Pediatrics Supporting Parents Grant in Washington State
Mary Ann Woodruff, MD

Duration of Presentation in Minutes

15

Toward precision health promotion: Individual building blocks of early relational health and their predictive power
Dani DUMITRIU, MD, PhD

Duration of Presentation in Minutes

15

(265) Proposal ID: 1933193

Team-Based Learning in Bioethics: Teaching Residents the Importance of Care for Diverse Populations while Respecting Diversity of Thought

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Ashley Fernandes**

Score: **0**

Participant(s)

Ashley K. Fernandes, MD, PhD

Position:

Prof of Pediatrics & Ethics Education

Organization:

The Ohio State University College of Medicine & Nationwide Childrens Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Sheria D. Wilson, MD, MA (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Nationwide Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Sarah Marzec, MD

Position:

Hospitalist

Organization:

Nationwide Children's Hospital

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Cara E. Texler, MD, MPH (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Ohio State University College of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA

Session Description

Session Description

Medical accrediting bodies endorse the notion that bioethics is a vital curricular component, but pedagogical barriers remain. While Team-based learning (TBL) in medical education is effective, peer-reviewed studies utilizing TBL in bioethics have been scant. Since 2015, our institution created a TBL-based ethics curriculum for pediatric residents that has been shown to increase knowledge, engagement, and satisfaction, despite initial barriers such as time and lower confidence in ethical analysis.

In this presentation, we review barriers to bioethics education, and how we overcame these through the creation of seventeen TBL sessions on a myriad of topics. The session's primary focus will specifically be on vulnerable populations, demonstrating how TBL methodology helped us successfully teach residents about family and sexual violence; the ethical care of undocumented families; and cultural humility in the context of mental health crises.

The challenge of teaching such complex topics promoting diversity was met introducing a novel tool—the “5 Box Method,” a modification of the “4 Box Method,” (Jonsen et. al.)—which, in addition to medical indications, family preferences, quality of life, and contextual factors, aver that moral decisions also demand a “two-way mirror”: we must introspect to our conscience (integrity), and also reflect back to the family's feelings (empathy). Integrity and empathy (the fifth box) allowed learners to respect diverse cultures and backgrounds, while respecting one another's different ethical views.

Finally, we introduce strategies for creating a diversity-based TBL-based ethics curriculum, hoping that the commitment to vulnerable children is accelerated through practicing ethical decision-making in an evidence-based format.

Learning Objectives

1. identify inherent barriers to teaching bioethics in medical education, and how Team-Based Learning (TBL) represents an opportunity to overcome these barriers.
2. integrate basic knowledge of Team-based learning (TBL) with an understanding of the "5 Box Method" of ethical analysis to outline a diversity-based bioethical application exercise.
3. utilize a 5-step strategy for creating a Team-based learning module focused on diversity and/or vulnerable populations to teach and practice ethical decision-making for learners.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Pediatric academicians; pediatric medical educators; attendees with interests in diversity/equity/inclusion; international medical educators; bioethicists; professionalism educators
3. **Tracks**
Advocacy
Clinical Bioethics
Diversity, Equity, and Inclusion
Health Equity/Social Determinants of Health
Immigrant Health
Medical Education
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
no
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
n/a

8. Does this submission involve one or more specialties or disciplines?

Yes. In addition to Bioethics (all speakers have advanced degrees in bioethics), they represent clinical disciplines in Medical Education, General Pediatrics, Neonatology, Hospital Medicine, and Public/Global Health.

9. If your session was presented at another conference, please describe the conference and presentation.

In 2021, a virtual poster on TBL in Bioethics was presented at PAS, which focused on effectiveness data through 2018-19. This is not the same presentation, only the same general topic, and did not present the diversity focus we have now.

In 2018, a workshop on creating a TBL in Bioethics ("train the trainer") was presented at the Association of Pediatric Program Directors was given (Atlanta, GA). It was not the same presentation, only the same general topic, and did not present the diversity focus we have now.

10. Additional comments

Our work has been published in peer-reviewed literature in 2019 and 2022:

Fernandes AK, Wilson S, Kasick R, Humphrey L, Mahan J, Spencer S. Team-Based Learning in Bioethics Education: Creating a Successful Curriculum for Residents in an Era of "Curricular Squeeze". *Med Sci Educ.* 2019 Nov 7;30(1):649-658. doi: 10.1007/s40670-019-00836-9. PMID: 34457718

Spencer SP, Lauden S, Wilson S, Philip A, Kasick R, Mahan JD, Fernandes AK. Meeting the challenge of teaching bioethics: a successful residency curricula utilizing Team-Based Learning. *Annals of Medicine.* 2022 Dec;54(1):359-368. doi: 10.1080/07853890.2021.2013523. PMID: 35114873

Presentation Titles and Durations

Introduction: The Challenge of Teaching Bioethics and How Team-based learning Rises to the Challenge

Ashley K. Fernandes, MD, PhD

Duration of Presentation in Minutes

13

What a Successful Team-based learning Bioethics Curricula Looks Like: Respecting Diversity of Persons, Topics, and Thought

Sheria D. Wilson, MD, MA

Duration of Presentation in Minutes

12

How Bioethics TBLs are Especially Suited to Topics Related to Diversity and Vulnerable Populations: 3 Case Studies

Sarah Marzec, MD

Duration of Presentation in Minutes

12

Integrating the 5-Box Method of Ethical Analysis in TBL: Teaching Empathy for the Vulnerable and Resilience in Moral Distress

Cara E. Texler, MD, MPH

Duration of Presentation in Minutes

13

(266) Proposal ID: 1916092

When does helping hurt? The intersection of obesity, GLP-1As, and eating disorders.

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Elisha McCoy**

Score: **0**

Participant(s)

Grace Nelson, MD (she/her/hers)

Position:

Assistant Professor

Organization:

University of Tennessee Health Science Center College of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Michelle Bowden, MD (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

University of Tennessee Health Science Center College of Medicine

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Adrienne Hadley Arrindell, PhD, JD (she/her/hers)

Position:

Instructor, Department of Pediatrics

Organization:

University of Tennessee Health Science Center

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Black or African American

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA

Elisha McCoy, MD (she/her/hers)

Position:

Associate Professor, Division Chief of Pediatric Hospital Medicine

Organization:

Le Bonheur Children's Hospital, UTHSC

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Session Description

Session Description

Glucagon-like peptide-1 receptor agonists (GLP-1As) are a class of drugs commonly used to treat type 2 diabetes and obesity. In adults, these medications have shown significant success, leading to weight loss, improved HbA1c levels, and various other benefits. In 2019, the first GLP-1A was approved for children with type 2 diabetes, and since then, additional GLP-1As have been approved for both diabetes and weight loss in adolescents.

However, concerns have been raised by those working with adolescents with eating disorders about potential unintended consequences of GLP-1A use. Side effects such as gastrointestinal distress, early satiety, and increased body dissatisfaction could worsen or trigger eating disorder symptoms. Unfortunately, there is currently insufficient data to identify which patients are most at risk. As healthcare providers, we must ask: Do the benefits of GLP-1As outweigh the risks in adolescents? Do we have enough data to prescribe these drugs regularly to adolescents with obesity? And what is the best approach to doing so?

This session will explore the current use of GLP-1As in both adults and adolescents, reviewing the available evidence. We will also discuss the physiological and psychosocial impacts of these medications, particularly the potential adverse effects related to eating disorders and disordered eating. Finally, we will propose an individualized approach to prescribing GLP-1As and identify future research directions to better inform clinical care.

Learning Objectives

1. Describe the use of GLP-1As in the general population and specifically their use in adolescent obesity.

2. Identify the potential physiologic and psychosocial impact that GLP-1As have on adolescents and those with eating disorders.
3. Discuss how an individualized clinical approach for use of GLP-1As in adolescents should be utilized to optimize obesity and eating disorder care.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Pediatricians, Adolescent Medicine, Hospitalists, Psychologists, Endocrinologists
3. **Tracks**
Adolescent Medicine
Community Pediatrics
Endocrinology
General Pediatrics
Hospital Medicine
Obesity
Pediatric Nutrition
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Poster session submission; Workshop submission - Advancing Leadership Skills in Communication
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Topic is Eating Disorders and GLP-1 agonists involving General Pediatrics, Hospital Medicine, Adolescent Medicine, Endocrinology, Obesity Medicine, and Psychology.

9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

Presentation Titles and Durations

GLP-1As: Background, recommendations, and current use in adults and adolescents

Grace Nelson, MD

Duration of Presentation in Minutes

20

The hidden risk: How GLP-1A's impact on physiology can fuel eating disorders

Michelle Bowden, MD

Duration of Presentation in Minutes

20

Unintentional psychosocial impacts of GLP-1A use in adolescents

Adrienne Hadley Arrindell, PhD, JD

Duration of Presentation in Minutes

20

Future directions for obesity & eating disorder care in adolescents; Question & Answer

Elisha McCoy, MD

Duration of Presentation in Minutes

30

(267) Proposal ID: 1933947

The Impacts of Climate Change on Infectious Diseases

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Aslam Khan**

Score: **0**

Participant(s)

Aslam Khan, DO (he/him/his)

Position:

Clinical Assistant Professor

Organization:

Stanford University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Session Description

Session Description

Our weather patterns are evolving and we are experiencing significant shifts in climate that have direct impact on the distribution of infectious diseases. This includes changes seen with heavy particulate air matter and environmental pollution in addition to the distribution of vectors carrying various infectious diseases. With migration of vectors to newer regions we will likely experience a rise in vector borne diseases, including dengue, chikungunya, Zika, and malaria infections. There are also patterns that will change the distribution of Enterobacteriales and concern for multi-drug resistance. This includes a rise in endemic fungal infections and we must prepare accordingly. In this session I plan to highlight the expected changes for viral infections, endemic fungi, and some bacterial pathogens. All this information is rooted in evidence and important to share and study further.

Learning Objectives

1. Participants will be aware of the direct impact climate change will have on distribution of infectious diseases
2. Upon completion, participants will understand which pathogens to be vigilant for during climate events
3. Upon completion, participants will be able to share this information with trainees, colleagues, policy makers, and their local hospital systems.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
General pediatricians, pediatric hospitalists, trainees, pediatric infectious diseases specialists, emergency room physicians, public health personnel
3. **Tracks**
Community Pediatrics
Emergency Medicine
Environmental Health
General Pediatrics
Infectious Diseases
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of**

your speakers in any other sessions that we should take into account when scheduling?

Not applicable

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**

Yes

7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**

8. **Does this submission involve one or more specialties or disciplines?**

This topic involves infectious diseases but is important for environmental health, general pediatrics, public health, emergency medicine, and community pediatrics.

9. **If your session was presented at another conference, please describe the conference and presentation.**

10. **Additional comments**

Presentation Titles and Durations

The impact of climate change on infectious diseases

Aslam Khan, DO

Duration of Presentation in Minutes

50

(268) Proposal ID: 1931375

Fever Pitch: Reevaluating the Approach to Fever and Infection for Children with Sickle Cell Disease

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Seethal Jacob**

Score: **0**

Participant(s)

Seethal A. Jacob, MD, MS (she/her/hers)

Position:

Associate Professor of Pediatrics

Organization:

Indiana University School of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Stephen Rineer, MD, MS

Position:

Assistant Professor

Organization:

University of Colorado School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Muayad Alali, MD (he/him/his)

Position:

Ped ID assistant professor

Organization:

1802 White ash dr

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

PIDS

Patrick McGann, MD PhD

Position:

Associate Professor of Pediatrics and Medicine

Organization:

The Warren Alpert Medical School of Brown University

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APS

Session Description

Session Description

Sickle cell disease (SCD) is among the most common inherited chronic illnesses, affecting more than 100,000 Americans and millions worldwide. Just decades ago, SCD was primarily a pediatric disorder with high early mortality rates mostly due to overwhelming infection from encapsulated bacteria. There have been tremendous advancements in care over the past three decades due to pivotal public health initiatives, including newborn screening, routine penicillin prophylaxis, and widespread pneumococcal and meningococcal vaccination, that have virtually eliminated early mortality in high-resource settings. Despite these advancements, strategies for fever management and infection prevention in this population have largely remained unchanged, still based upon data from the 1970s and 1980s. While these practices err on the side of caution, they result in disruption in quality of life for caregivers of young children with SCD with excessive utilization of healthcare resources, including Emergency Department visits, inpatient hospitalizations, laboratory studies, and frequent use of antibiotics, raising concerns about the efficiency and appropriateness of current practices.

This symposium will provide an in-depth exploration of the current landscape of infection risk management in pediatric SCD and challenge the current standard of care to ask how we could develop evidence-based strategies to safely and efficiently manage infectious concerns for children with SCD in this modern era. Experts will present the latest insights into infection risks, review current management guidelines, highlight important knowledge gaps and research opportunities, and discuss the implications for clinical practice.

Learning Objectives

1. Upon completion, participants will be able to describe current fever and infection management in pediatric sickle cell disease.
2. Upon completion, participants will be able to identify gaps in knowledge and clinical care related to fever and infection management in sickle cell disease.
3. Upon completion, participants will be able to describe potential areas for improvement in fever and infection management, as well as areas for further research.

Scholarly Session Questions

1. **Audience Size**
60
2. **Target audience**
General Pediatricians, Emergency Medicine, Hematology, Infectious Disease, Health Services Research, Quality Improvement
3. **Tracks**
Children with Chronic Conditions
Emergency Medicine
Health Services Research
Hematology/Oncology
Infectious Diseases
Quality Improvement/Patient Safety
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
N/A
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Yes, involves Emergency Medicine, Infectious Disease, Hematology/Oncology, and Health Services Research
9. **If your session was presented at another conference, please describe the conference and presentation.**

N/A

10. **Additional comments**

Sickle cell disease is a lifelong inherited chronic condition that disproportionately affects a minoritized, marginalized population and is subject to significant treatment, access, and research disparities. As such, topics related to this population are important to elevate in academic and research settings.

Presentation Titles and Durations

A Historical Perspective on Infection Risk and Prevention in Sickle Cell Disease

Seethal A. Jacob, MD, MS

Duration of Presentation in Minutes

20

Emergency Care: Navigating Infection Risks in Sickle Cell Disease in the ED

Stephen Rineer, MD, MS

Duration of Presentation in Minutes

20

Pneumococcal Perils: Assessing Invasive Infection Risks in the Vaccination

Era for Sickle Cell Disease

Muayad Alali, MD

Duration of Presentation in Minutes

20

Rethinking Infection Management in Sickle Cell: Evaluating Cost, Patient

Impact, and Future Directions

Patrick McGann, MD PhD

Duration of Presentation in Minutes

20

(269) Proposal ID: 1931175

Improving Pediatric Care for Children in Immigration Detention

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Elizabeth Barnert**

Score: **0**

Participant(s)

Paul H. Wise, MD, MPH

Position:
Professor

Organization:
Stanford University School of Medicine

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Janine Young, MD (she/her/hers)

Position:
Professor

Organization:
UC San Diego School of Medicine

Role:

Speaker

Ethnicity

Prefer not to respond

Race

Prefer not to respond

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Elizabeth Barnert, MD, MPH, MS

Position:

Associate Professor

Organization:

UCLA

Role:

Submitter;Speaker

Ethnicity

Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA, APS, SPR

David Keller, MD (he/him/his)

Position:

Professor of Pediatrics and Vice Chair of Clinical Strategy and Transformation

Organization:

University of Colorado School of Medicine

Role:

Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, APS

Session Description

Session Description

Although human rights and American Academy of Pediatrics standards state that no child under 18 should be detained in an US immigration detention facility, thousands of children, many with serious health conditions, are detained daily. The public has minimal access to information regarding the quality of care provided in detention. The preventable death of an 8-year-old with chronic medical disease and influenza highlights the urgent need to address healthcare standards. Despite repeated requests for medical care, her deteriorating condition was not attended to in time, emphasizing the gaps in the system.

This session will assess the current state of healthcare for children in immigration detention and explore pathways to improve care, with a focus on the role of child health professionals. Dr. Paul Wise will first provide an overview of the current landscape, including monitoring procedures in immigration detention facilities. Next, Dr. Janine Young will discuss common and serious pediatric health issues and healthcare practices at the U.S.-Mexico border, supported by case examples. Finally, Dr. Elizabeth Barnert will outline existing minimum standards for care in immigration detention. The session will be moderated by Dr. David Keller, who will lend insight into the broader U.S. safety net healthcare system supporting children seeking safe haven in the United States.

The session will then shift to group dialogue, identifying barriers and facilitators to improving care and outlining key next steps. The discussion will focus on advancing pediatricians' collective roles in four areas: 1) advocacy, 2) scholarship, 3) clinical care, and 4) medical education.

Learning Objectives

1. 1. Understand the current healthcare challenges faced by children in immigration detention, with a focus on systemic gaps in care delivery.
2. 2. Identify minimum standards of care for children in custody and strategies to improve health outcomes.
3. 3. Explore actionable steps for pediatricians in advocacy, research, clinical care, and medical education, to enhance healthcare for children in immigration detention.

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
pediatric trainees and providers interested in advocacy about migrant children, pediatric scientist providing care at the border or to refugee populations
3. **Tracks**
Academic and Research Skills
Advocacy
Children with Chronic Conditions
Community Pediatrics
Diversity, Equity, and Inclusion
General Pediatrics
Global Neonatal & Children's Health
Health Equity/Social Determinants of Health
Health Services Research
Immigrant Health
Public Health
Quality Improvement/Patient Safety
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide**

an explanation of the non-member speaker selection so that PAS staff may request approval.

N/A

8. Does this submission involve one or more specialties or disciplines?

Community Groups, General Pediatrics, and Public Health

9. If your session was presented at another conference, please describe the conference and presentation.

N/A

10. Additional comments

Presentation Titles and Durations

Monitoring Procedures in Immigration Detention Facilities

Paul H. Wise, MD, MPH

Duration of Presentation in Minutes

30

Common and Serious Pediatric Health Issues and Healthcare Practices at the U.S.-Mexico Border

Janine Young, MD

Duration of Presentation in Minutes

30

Existing Minimum Standards for Care in Immigration Detention

Elizabeth Barnert, MD, MPH, MS

Duration of Presentation in Minutes

5

Moderator (Introduction and Q&A)

David Keller, MD

Duration of Presentation in Minutes

25

(270) Proposal ID: 1915542

Empowering Health Profession Educators for a Generative AI future

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Jennifer Benjamin**

Score: **0**

Participant(s)

Jennifer C. Benjamin, MD, MS

Position:
Associate Professor

Organization:
Baylor College of Medicine

Role:

Submitter;Speaker;Chair

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP, APA, SPR

Brandon Hunter, MD

Position:
Assistant Professor

Organization:
Texas Children's Hospital

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Traci Wolbrink, MD MPH (she/her/hers)

Position:

Associate Professor

Organization:

Boston Children's hospital

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APA

Eric Gantwerker, MD, MMsc(MedEd), FACS, AFAMEE (he/him/his)

Position:

Associate Professor

Organization:

Donald and Barbara Zucker School of Medicine at Hofstra/Northwell

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race
White

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
Not a member of any of these organizations

Dennis Daniel, MD

Position:
Associate in Critical Care Medicine

Organization:
Boston Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Rahul Damania, MD, MS Ed (he/him/his)

Position:
Associate Staff, Pediatric Critical Care

Organization:
Cleveland Clinic Children's Hospital

Role:

Speaker

Ethnicity
Not Hispanic or Latino

Race
Asian

Gender
Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?
AAP

Session Description

Session Description

Generative AI has gained increased popularity with capabilities for automation, adaptability and personalized learning with the ability to transform the educational landscape. Health professions educators (HPE) need training to utilize GenAI to its fullest potential. Our trainees utilize these tools and need clear guidance on their benefits and pitfalls. Unbeknownst to HPE, these tools are integrated into frequently used browsers and academic software programs becoming ubiquitous in learning environments. These tools, due to the biased nature of data used in their training have limitations and inaccuracies. From a HPE perspective there are serious concerns for AI dependency, automation and racial bias. With so much at stake, HPE need familiarity to guide learners with ethical GenAI use, while exploring the breadth of their transformative potential.

In this interactive and engaging symposium we aim to demystify GenAI to gain a foundational understanding of GenAI through six 10-minute mini didactics. We will demonstrate examples of effective utilization of GenAI across the continuum from the bedside to academia using open-access freemium tools. We will highlight patient care utility of GenAI in retrieving scientific articles to guide clinical decisions, develop clinical reasoning skills and provide personalized learner feedback on patient communication skills using custom GPT. For education, we will highlight GenAI's ability for adaptive learning with lesson plans, simulation scenarios and automated assessments. For scholarship, we will highlight podcasting, manuscript writing, content creation with cutting-edge open-access exemplar GenAI innovations. We will conclude with the opportunity for open discussion through Q&A and provide take-home materials.

Learning Objectives

1. Define the capabilities of Generative AI tools and explore their application in the academic continuum of patient care, bed-side education and scholarship
2. Demonstrate the utility of Generative AI tools in the academic continuum of patient care, education and scholarship, while recognizing their limitations

3. Highlight exemplar examples of freemium GenAI tools that can be utilized globally by health professions educators in work-based contexts

Scholarly Session Questions

1. **Audience Size**
500
2. **Target audience**
Students, Residents, Fellows, Faculty, Clerkship Directors, Allied Health, Educators, Department Chairs.
3. **Tracks**
Academic and Research Skills
Artificial Intelligence
Career Development
Clinical Research
Critical Care
General Pediatrics
Medical Education
Social Media & Technology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
NA
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
NA
8. **Does this submission involve one or more specialties or disciplines?**
Complex Care Pediatrics, General Pediatrics, Pediatric Critical Care, Pediatric Emergency, Pediatric Otolaryngology
9. **If your session was presented at another conference, please describe the conference and presentation.**
A small portion of the presentation was presented at AMEE 2024 conference in Basel

10. **Additional comments**

We represent 4 institutions Texas Childrens, Baylor College of Medicine, Houston Texas, Boston Childrens, Harvard Medical School, Boston, Cleveland Clinic, Learner College of Medicine, Cleveland Ohio, Northwell Health, Zucker School of Medicine, New York

Presentation Titles and Durations

Introduction and AI use for patient care, innovative examples using custom GPT for clinical reasoning

Jennifer C. Benjamin, MD, MS

Duration of Presentation in Minutes

12

Introduction, Audience response poll and Demystifying Generative AI

Brandon Hunter, MD

Duration of Presentation in Minutes

10

AI tools for teaching, simulation training with exemplar examples

Traci Wolbrink, MD MPH

Duration of Presentation in Minutes

10

Guideline for Future Faculty Development of Health Profession Educators

Eric Gantwerker, MD, MMsc(MedEd), FACS, AFAMEE

Duration of Presentation in Minutes

10

Ethics in AI and Pitfalls to avoid when using AI

Dennis Daniel, MD

Duration of Presentation in Minutes

10

Using AI for assessment and evaluation

Rahul Damania, MD, MS Ed

Duration of Presentation in Minutes

10

(271) Proposal ID: 1931360

Ethical Application of Artificial Womb Technology in Patients

Session Type: **Panel Discussion**

Proposal Status: **Complete / Locked**

Submitter: **Kelly Werner**

Score: **0**

Participant(s)

Kelly M. Werner, MD, MHS (she/her/hers)

Position:

Assistant Professor of Pediatrics

Organization:

Columbia University Vagelos College of Physicians and Surgeons

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

APA

Mark R. Mercurio, MD,MA

Position:

Professor of Pediatrics

Organization:

Yale School of Medicine

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, APS

Elliott Weiss, MD, MSME (he/him/his)

Position:

Associate Professor

Organization:

Seattle Children's

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Male

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP, SPR

Session Description

Session Description

After decades of technological development, fetal lamb studies of the artificial womb have brought neonatal medicine within sight of an exciting milestone: clinical trials. Promising artificial womb technology, known as the Extra-uterine Environment for Newborn Development (EXTEND) developed at the Children's Hospital of Philadelphia, supports lambs 105-117 days gestation,

corresponding to a target human gestational age of 23-25 weeks, in a sterile fluid-filled environment called a “biobag.” The group has recently shown long-term survival and neurologic development similar to controls for fetal lambs. Artificial womb technology was presented to the the Pediatric Advisory Committee of the U.S. Food and Drug Administration in 2023. Ethical considerations of artificial womb technology have been passionately debated in the literature, including the moral status of these patients and what term to use for them, which patients to select for the first-in-human trials, parental concerns, and legal and end-of-life issues. However, to date, clinicians and bioethicists have not been able to convene and discuss these issues on a national or international scale. This session aims to bring together bioethicists, neonatologists, surgeons, and other clinicians to discuss the ethical application of this technology prior to the start of clinical trials.

Learning Objectives

1. Understand the physiology of the artificial womb and how this generates ethical questions for the care of these patients
2. Understand the concept of "moral status" and why this relates to care for patients in the artificial womb
3. Explore the ethical considerations for the first in-human trials of the artificial womb and its downstream implications for the future of medicine

Scholarly Session Questions

1. **Audience Size**
25
2. **Target audience**
Neonatologists, bioethicists, pediatric surgeons, pediatric cardiologists, clinicians from ECMO centers
3. **Tracks**
Cardiology
Clinical Bioethics
Clinical Research
Critical Care
Neonatology
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**

- None that are currently known.
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
N/A
8. **Does this submission involve one or more specialties or disciplines?**
Topic is Artificial Womb Technology involving Bioethics, Neonatology, Pediatric Surgery
9. **If your session was presented at another conference, please describe the conference and presentation.**
N/A
10. **Additional comments**
N/A

Presentation Titles and Durations

Overview of the Ethical Considerations for the Use of Artificial Womb Technology in the NICU

Kelly M. Werner, MD, MHS

Duration of Presentation in Minutes

30

Ethical Considerations in Artificial Womb Technology Related to Moral Status and the Lower Limit of Gestational Age

Mark R. Mercurio, MD, MA

Duration of Presentation in Minutes

30

A Brave New NICU: Ethical implications of paradigm-shifting technologies

Elliott Weiss, MD, MSME

Duration of Presentation in Minutes

30

(272) Proposal ID: 1918181

Epidemiology of RSV in Young Children in the United States and Globally in the Era of New Prevention Products

Session Type: **Hot Topic Symposia**

Proposal Status: **Complete / Locked**

Submitter: **Fatimah Dawood**

Score: **0**

Participant(s)

Fatimah Dawood, MD (she/her/hers)

Position:

Medical Epidemiologist

Organization:

CDC

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

Asian

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Meredith L. McMorrow, MD, MPH (she/her/hers)

Position:

Branch Chief

Organization:

Centers for Disease Control and Prevention

Role:

Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Heidi Moline, MD, MPH

Position:

Medical Officer

Organization:

U.S. Centers for Disease Control and Prevention

Role:

Speaker

Ethnicity

Not Hispanic or Latino

Race

Prefer not to respond

Gender

Prefer not to respond

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

AAP

Session Description

Session Description

Respiratory syncytial virus (RSV) is the leading cause of hospitalization in infants in the United States. Globally, >95% of RSV-associated lower respiratory tract infections and RSV-attributable deaths occur in low- and

middle-income countries. In 2023, two new prevention products were recommended to prevent severe RSV disease in young children in the United States: a monoclonal antibody (nirsevimab) for infants and young children and a maternal RSV vaccine (Abrysvo) to protect young infants through transplacental antibody transfer. This session will review the current epidemiology of RSV disease in young children and RSV prevention product use in the United States during the 2024-2025 season and summarize data on real-world effectiveness and impact of new RSV prevention products. The session will then transition to an overview of efforts to assess new RSV prevention products by the New Vaccine Surveillance Network, a CDC-funded surveillance program. Finally, the session will close with an overview of global RSV burden and current considerations for RSV prevention product introduction in low- and middle-income countries.

Learning Objectives

1. Describe the current epidemiology of RSV disease in children in the United States
2. Discuss what is known and knowledge gaps related to RSV prevention product effectiveness and impact
3. Describe global RSV burden and considerations for RSV prevention product introduction in low- and middle-income countries

Scholarly Session Questions

1. **Audience Size**
50
2. **Target audience**
Pediatricians and Pediatric Infectious Disease Specialists, Public Health Practitioners
3. **Tracks**
Epidemiology
Immunizations/Delivery
Infectious Diseases
Public Health
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
None.

6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
Yes
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
8. **Does this submission involve one or more specialties or disciplines?**
Pediatric Infectious Disease, Public Health
9. **If your session was presented at another conference, please describe the conference and presentation.**
10. **Additional comments**

Presentation Titles and Durations

Epidemiology of RSV in the United States and RSV Prevention Product Effectiveness and Impact in Children
Fatimah Dawood, MD

Duration of Presentation in Minutes

30

Assessing New RSV Prevention Products: Insights from the New Vaccine Surveillance Network
Meredith L. McMorrow, MD, MPH

Duration of Presentation in Minutes

30

Global Burden of RSV and Considerations for Prevention Product Introduction in Low- and Middle-Income Countries
Heidi Moline, MD, MPH

Duration of Presentation in Minutes

30

(273) Proposal ID: 1929804

Overcoming Oral Aversion: An Integrated Approach to Weaning Children from Feeding Tubes from Melbourne, Australia

Session Type: **State of the Art Plenary**

Proposal Status: **Complete / Locked**

Submitter: **Lisa Barrow**

Score: **0**

Participant(s)

Lisa Barrow, BSc(Hons), MPsych(Clinical), BMedSci, MBBS(Hons), MHumNut, MForMed, MAPS, FRACP (she/her/hers)

Position:

Dr

Organization:

Sunshine Hospital

Role:

Submitter;Speaker;Chair

Ethnicity

Not Hispanic or Latino

Race

White

Gender

Female

Are you a member of AAP, APA, APS, SPR, ASPN, or PIDS?

Not a member of any of these organizations

Session Description

Session Description

This session will provide a detailed exploration of the evidence-based methodology employed at our specialized clinic in Melbourne, Australia, for weaning children with complex oral aversion and feeding tube dependence to full oral feeding. We will outline the comprehensive, multidisciplinary approach that integrates the expertise of pediatricians, speech pathologists, psychologists, dietitians, and community therapists, working synergistically to create personalized, child-centered treatment plans.

A core focus will be placed on the key strategies employed during the weaning process, including oral desensitization techniques aimed at reducing sensory defensiveness, environmental assessments that address mealtime dynamics, and fostering positive family meal culture to encourage participation in oral feeding. Developmental skills analysis will be emphasized, ensuring that each child's oral motor and sensory capabilities are assessed and appropriately supported throughout the process. A review of clinical outcomes and success rates will be discussed.

The session will delve into the psychological and emotional journey of parents and caregivers, discussing their challenges, the support systems in place, and how their active involvement in the process is integral to achieving lasting success. Practical insights into caregiver coaching, emotional resilience building, and stress management will be shared.

Participants will leave with a comprehensive overview of an approach to implementing tailored feeding intervention strategies for children with oral aversion in their own clinical settings, while fostering a holistic, family-centered approach to care. This session is particularly valuable for healthcare professionals and multidisciplinary teams focused on pediatric feeding disorders, tube weaning, and the integration of family dynamics in treatment.

Learning Objectives

1. Understand the Multidisciplinary Approach: Identify the key roles of medical, behavioral, and therapeutic professionals in weaning children from feeding tube dependence to an oral diet.
2. Implement Evidence-Based Weaning Techniques: Gain insights into the methodologies and intervention strategies used to safely and effectively transition children with oral aversion to oral feeding.
3. Evaluate the Parent and Family Experience: Examine the emotional, psychological, and practical challenges faced by parents throughout weaning, and discuss ways to support them.

Scholarly Session Questions

1. **Audience Size**
100
2. **Target audience**
Experienced Pediatricians with an interest in nutrition, behaviour and transitioning the tube dependent child to oral feeding/eating.
3. **Tracks**
Children with Chronic Conditions
General Pediatrics
Global Neonatal & Children's Health
Mental Health
Pediatric Nutrition
4. **Do faith observance restrictions apply? If so, check the day(s) that should be avoided.**
Not Applicable
5. **Conflicting events: Please list no more than three events that should be avoided when scheduling. If accepted, are your or any of your speakers in any other sessions that we should take into account when scheduling?**
Nil
6. **Are all of your invited speakers members of at least one PAS society (AAP, APA, APS, SPR, ASPN, PIDS)?**
No
7. **If any speaker is not a member of at least one of these organizations (AAP, APA, APS, SPR, ASPN, PIDS), please provide an explanation of the non-member speaker selection so that PAS staff may request approval.**
International speaker - member of The Royal Australasian College of Physicians (RACP) - Paediatrics and Child Health Division
8. **Does this submission involve one or more specialties or disciplines?**
Topic is Paediatric Nutrition involving Developmental Paediatrics, Community Paediatrics, Allied Health and General Paediatrics.
9. **If your session was presented at another conference, please describe the conference and presentation.**
New presentation
10. **Additional comments**

Presentation Titles and Durations

Overcoming Oral Aversion: An Integrated Approach to Weaning Children from Feeding Tubes
 Lisa Barrow, BSc(Hons), MPsych(Clinical), BMedSci, MBBS(Hons), MHumNut, MForMed, MAPS, FRACP

Duration of Presentation in Minutes

60