






# Conference Session Objectives

26<sup>th</sup> PPAG Annual Meeting & 2017 Pediatric Pharmacy Conference




Charlotte Marriott City Center

May 3-7, 2017




## WEDNESDAY, May 3, 2017 | Medication Safety & Technology

10:10 am – 10:30 am	<p><b>Less is More: The Safety of IV Medication Excipients</b>            Robyn Keen, PharmD, BCPS, BCPPS            At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Discuss common excipients in IV medications and their safety concerns</li> <li>2. Enhance pharmacotherapy regimens by reducing the amount of excipients from IV medications</li> </ol>			0180-0000-17-300-L05-P 0.33 CE hour
10:35 am – 10:55 am	<p><b>Data Management: Utilizing Data to Answer Clinical Questions</b>            Maria Sellas, PharmD            At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Identify a clinical question in need of analysis</li> <li>2. Describe the scope of the problem utilizing data analysis</li> <li>3. Develop prevention strategies utilizing technology</li> <li>4. Apply these principles to a clinical example</li> </ol>			0180-0000-17-301-L04-P 0.33 CE hour
11:00 am – 11:20 am	<p><b>The Long and Short of QT Prolonging Medications</b>            Robyn Keen, PharmD, BCPS, BCPPS            At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Identify medications known to cause QT prolongation in pediatric patients</li> <li>2. Determine the risk of QT prolongation for a patient given a medication profile</li> </ol>			0180-0000-17-302-L01-P 0.33 CE hour
11:30 am – 12:30 pm	<p><b>Why is there a Different Name on My Chemotherapy? Patient Safety in Chemotherapy Process</b>            Tara Higgins, PharmD            At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Evaluate frequency and types of medication errors occurring in the oral and intravenous chemotherapy process</li> <li>2. Analyze ASHP guidelines on preventing medication errors with chemotherapy</li> <li>3. Characterize the role of technology in reducing medication errors.</li> </ol>			0180-0000-17-303-L01-P 1 CE/1 BCPPS hour 
2:00 pm – 2:30 pm	<p><b>Maximizing Syringe Pump Safety, Minimizing Risk</b>            Alison Bloomquist, PharmD            At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Recognize the impact of syringe size and selection related to flow dynamics, flow continuity and infusion rates.</li> <li>2. Describe the appropriate use of accessory devices and syringe infusion pumps.</li> <li>3. Evaluate the importance of priming the pump and tubing when starting an infusion or changing a syringe.</li> <li>4. Discuss how syringe pump height and location can adversely impact continuous infusions.</li> <li>5. Consider tubing occlusions and the role they play in flow continuity.</li> <li>6. Share resources for clinician education on syringe infusion pump best practices.</li> </ol>			0180-0000-17-304-L05-P 0.5 CE/0.5 BCPPS hour 
2:40 pm – 3:10 pm	<p><b>Comprehensive Efforts to Reduce Alert Fatigue caused by Interruptive Clinical Decision Support</b>            Calvin Daniels, PharmD, PhD            At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Identify the types of clinical decision support available in electronic health records</li> <li>2. Evaluate alert metrics and processes to identify alert improvement opportunities</li> <li>3. Define alert fatigue and describe the features of a comprehensive approach to reduce it</li> <li>4. Describe the results of a quality improvement project to refine interruptive CDS alerts at a pediatric oncology hospital</li> </ol>	0180-0000-17-305-L05-P 0.5 CE hour	<p><b>Improving Pediatric Patient Outcomes and Medication Safety Through Quality Measures</b>            Sandra Benavides, PharmD            Shirin Madzhidova, PharmD            At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Describe how the changes in health care (fee-for-service vs reimbursement based on quality) will impact the quality and safety of care in pediatric patients.</li> <li>2. Define existing quality metrics set by various entities such as Hedis, Joint Commission, and Pharmacy Quality alliance</li> <li>3. Discuss how the pediatric HCAHPS survey will impact reimbursement.</li> <li>4. Evaluate the roles a pharmacist can play on existing pediatric quality measures in acute and ambulatory care settings.</li> </ol>	0180-0000-17-306-L05-P 0.5 CE hour
3:15 pm – 4:15 pm	<p><b>Costly Pharmacy Errors, A Root Cause Analysis</b>            Jill Morgan, PharmD, BCPS, BCPPS            Nick Fusco, PharmD, BCPS            Kristine Parbuoni, PharmD, BCPPS            At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Define root cause analysis and identify common etiologies for law suits involving medication errors and children</li> <li>2. Given a patient case with a medication error, identify the appropriate members from the health-care system to complete a root cause analysis</li> <li>3. Given a patient case with a medication error, identify steps in the medication process that lead to the medication error and create an action plan to fix the process.</li> </ol>	0180-0000-17-307-L05-P 1 CE hour	<p><b>Research from Beginning to End: A Workshop for Clinicians Interested in Starting or Getting Involved in Research</b>            Chad Knoderer, PharmD, FPPAG            Allison Chung, PharmD, FCCP, BCPPS, BCPS            Aaron Harthan, PharmD, BCPPS            At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Reiterate basic research methodologies and strategies</li> <li>2. Generate research topic ideas for themselves and/or their practice area</li> <li>3. Identify barriers for research implementation and strategies to overcome them</li> <li>4. Select optimal research paths based on feasibility</li> <li>5. Elucidate collaboration needs for pediatric research projects</li> <li>6. Discuss the PPAG PBRN project and how members can get involved</li> </ol>	0180-0000-17-309-L04-P 2 CE hour 1 hour BCPPS 
4:20 pm – 5:20 pm	<p><b>Advancements in Management of Diabetes: Let's Discuss Technology &amp; Safety</b>            Samie Sabet, PharmD, AE-C            At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Describe the evolution of insulin pumps and continuous glucose monitoring devices</li> <li>2. Identify the pros and cons associated with non-adjunctive use of continuous glucose monitoring devices</li> <li>3. Summarize the safety and efficacy data for the use of intranasal glucagon in treatment of hypoglycemia</li> <li>4. Summarize the safety and efficacy data for the use of insulin degludec in pediatric patients</li> </ol>	0180-0000-17-308-L05-P 1 CE hour		




**THURSDAY, May 4, 2017 | Medication Safety & Technology**

<p>8:00am-8:30 am</p>	<p><b>Error Reduction Strategies within an Electronic Medical Record</b>                  Nikki Lubcke, PharmD, BCOP                  At the end of this session, participants will be able to:                  1. Define rank order of error reduction strategies as defined by ISMP                  2. Apply error reduction strategies to their unique clinical practice.</p>	<p>0180-0000-17-311-L05-P                  0.5 CE hour</p>		
<p>8:35am-9:05am</p>	<p><b>Standard Concentrations for oral compounds</b>                  Jared Cash, PharmD                  At the end of this session, participants will be able to:                  1. Describe new national standard concentrations for oral compounds</p>	<p>0180-0000-17-312-L01-P                  0.5 CE/0.5 BCPPS hour</p> 		
<p>9:05 am - 10:05 am</p>	<p><b>Communicating Through the Generational Gap in Medication Safety Technology</b>                  Maryjoy Lepak, PharmD                  Kay Kyllonen, PharmD, FPPAG                  At the end of this session, participants will be able to:                  1. Discuss the learning styles of each 'generation'                  2. Develop a bridge between the generations in approaching medication safety technology.                  3. Apply specific learning styles to clinical situations which incorporate medication safety technology</p>	<p>0180-0000-17-313-L05-P                  1 CE/1 BCPPS hour</p> 		
<p>10:15 am - 11:15 am</p>	<p><b>A Haunted Trilogy: Making Medication Safety Education Less Frightening for Medical Residents</b>                  Steve Martin, PharmD                  Wyn Wheeler, PharmD, BCPPS, FCCM                  Meghan Devine, PharmD, BCOP                  At the end of this session, participants will be able to:                  1. Describe advantages between traditional and active learning strategies                  2. Identify limitations of traditional versus active learning strategies                  3. Recognize obstacles and barriers of incorporating active learning strategies                  4. Illustrate why pediatric patients have an increased risk of experiencing more frequent and severe medication errors compared to adults                  5. Employ a more engaging teaching strategy to provide medication safety education for medical providers                  6. Describe one institution's experience using an innovative active learning strategy to teach pediatric medical residents about patient safety                  7. Develop ideas for providing an exciting and highly effective teaching experience to medical providers</p>	<p>0180-0000-17-314-L05-P                  1 CE hour</p>		
<p>11:25 am- 12:25 pm</p>	<p><b>Compounding the Problem: Updates in Policy and Implications on Public Safety</b>                  Kathy Pham, PharmD                  At the end of this session, participants will be able to:                  1. Summarize key components of the Drug Quality Security Act as related to pharmacy practice.                  2. Compare sections 503A and 503B of Federal Food Drug and Cosmetic Act and contrast statutory requirements of compounding under section 503A from section 503B.                  3. Recommend best practices in compliance with federal statute and guidance.</p>	<p>0180-0000-17-315-L03-P                  1 CE hour</p> 	<p><b>One Size Doesn't Fit All: Medication Safety for Pediatric Patients in Hospitals who Serve Adults and Children</b>                  Rachel Meyers, PharmD, BCPS, BCPPS                  Katelin Kimler, PharmD, BCPPS                  At the end of this session, participants will be able to:                  1. Evaluate methods of formulary management for pediatric patients within a primarily adult medical center.                  2. Devise strategies for safe and appropriate management of adult-aged and adult-sized patients in pediatric units.                  3. Identify options for dispensing medications that are commercially available but whose price is not financially feasible for the hospital.                  4. Manage standard concentrations and syringe pump drug libraries in order to serve both pediatric and adult populations in a safe manner.</p>	<p>0180-0000-17-316-L05-P                  1 CE /1 BCPPS hour</p>

**SATURDAY, May 6, 2017 | PICU**

<p>8:00 am -8:15 am</p>	<p><b>Tranexamic Acid in Pediatric Trauma</b>                  At the end of this session, participants will be able to:                  1. Describe the role of tranexamic acid in pediatric trauma                  2. Describe the literature of tranexamic acid in critical care</p>	<p>0180-0000-17-325-L01-P                  0.33 CE hour</p>
<p>8:20 am – 8:35 am</p>	<p><b>Medication Safety Issues with Status Asthmaticus</b>                  Kelly Michienzi, PharmD                  At the end of this session, participants will be able to:                  1. Specify risks and benefits of continuously inhaled albuterol                  2. Evaluate potential for unintended drug delivery due to different drug delivery devices and variability in compounding between respiratory therapy and pharmacy.                  3. Construct EMR solutions to minimize dosing errors</p>	<p>0180-0000-17-326-L05-P                  0.33CE hour</p>
<p>8:40 am – 9:10 am</p>	<p><b>Out of the Blue: Treating Refractory Hypotension with Methylene Blue</b>                  Wyn Wheeler, PharmD, BCPPS, FCCM                  At the end of this session, participants will be able to:                  1. Identify the proposed mechanism of action of methylene blue to raise mean arterial pressure                  2. Describe available literature published demonstrating use of methylene blue in vasopressor-resistant hypotension                  3. Review patient cases to ascertain if methylene blue could be a viable treatment option for hypotension</p>	<p>0180-0000-17-327-L01-P                  0.33 CE hour</p>
<p>9:15 am – 10:15 am</p>	<p><b>Delirium in the ICU: How Do We Screen and What Treatment Works?</b>                  Michael Chicella, PharmD, BCPPS, FPPAG                  At the end of this session, participants will be able to:                  1. List the risk factors for the development of ICU delirium.                  2. Compare and contrast the different screening tools for the detection and management of ICU delirium.                  3. Develop both a pharmacological, and non-pharmacological plan, for the management of ICU delirium.</p>	<p>0180-0000-17-328-L01-P                  1 CE/1 BCPPS hour  </p>
<p>10:35am-11:35 am</p>	<p><b>New ASPEN/SCCM Critical Care Nutrition Guidelines</b>                  Elizabeth Farrington, PharmD, FCCP, FCCM, FPPAG, BCPS                  At the end of this session, participants will be able to:                  1. Discuss the impact of nutritional status on outcomes in critically ill children                  2. Identify the best practices to screen and identify patients with malnutrition or those at risk of nutritional deterioration in the PICU.                  3. Recognize how to determine the recommended energy requirement for critically ill children                  4. Discuss the optimal protein delivery strategy in the PICU and how the goals should be determined for any individual patient                  5. Determine when enteral versus parenteral nutritional support is recommended and when they should be initiated                  6. Identify the role for immunonutrition in critically ill children based on published literature in children.</p>	<p>0180-0000-17-329-L01-P                  1 CE hour</p>
<p>1:00pm-1:30pm</p>	<p><b>Tracheitis: To Treat or Not to Treat, that is the Question</b>                  Miranda Nelson, PharmD, BCPPS                  Lindsay Schmees, PharmD                  At the end of this session, participants will be able to:                  1. Identify clinical findings indicative of tracheitis.                  2. Determine which patients diagnosed with tracheitis are likely to benefit from antimicrobial therapy.                  3. Recommend an appropriate antimicrobial regimen and duration of therapy for a patient with tracheitis.</p>	<p>0180-0000-17-330-L01-P                  0.5 CE/0.5 BCPPS hour  </p>
<p>1:35pm-2:05pm</p>	<p><b>Vancomycin Nephrotoxicity: Fact or Fiction</b>                  Jeffrey Cies, PharmD, MPH, BCPS-AQ ID, Chad Knoderer, PharmD, FPPAG                  Kristen Nichols, PharmD, BCPPS, BCPS AQ-ID                  At the end of this session, participants will be able to:                  1. Review the literature associated with vancomycin nephrotoxicity in the PICU                  2. Review the literature saying vancomycin is not associated with nephrotoxicity</p>	<p>0180-0000-17-331-L01-P                  0.5 CE/0.5 BCPPS hour  </p>
<p>2:05pm-2:35pm</p>	<p><b>TEG Talks: Applying Thromboelastography (TEG®) to Improve Anticoagulation Management in Pediatric Critical Care</b>                  Steve Martin, PharmD                  At the end of this session, participants will be able to:                  1. Describe how thromboelastography (TEG®) monitoring is performed                  2. Recognize key information obtained from TEG® monitoring                  3. Determine which patient populations may benefit from the addition of TEG® monitoring                  4. Interpret PlateletMapping® Assay results to improve anticoagulation management for pediatric critical care patients</p>	<p>0180-0000-17-332-L01-P                  0.5 CE hour</p>
<p>2:35pm-3:05pm</p>	<p>DVT prophylaxis in Children</p>	
<p><b>Hot Topics in Sedation and Analgesia in the PICU</b>                  Peter Johnson, PharmD, BCPS, BCPPS, FPPAG                  Christina Cox, PharmD, BCPS, BCPPS                  Kaitlin Hughes, PharmD, BCPPS                  At the end of this session, participants will be able to:                  1. Select a first-line opioid continuous infusion in the PICU                  2. Choose a first-line sedative continuous infusion in the PICU                  3. Select optimal dosing strategies for sedatives and analgesics in obese children [i.e., fixed-dose (e.g., mcg/hr) versus weight-based dose (e.g., mcg/kg/hr)].                  4. Identify pharmacologic and non-pharmacologic approaches to prevent and treat opioid tolerance in the PICU                  5. Compare and contrast PICU sedation protocols (i.e., nursing-driven versus sedation holidays)</p>	<p>0180-0000-17-334-L01-P                  2 CE hour</p>	

**SUNDAY, May 7, 2017 | PICU**

<p>8:00am-9:00am</p>	<p><b>I Can't Breathe! Options Beyond the Status Asthmaticus Guidelines</b>                  Allison Chung, PharmD, FCCP, BCPPS, BCPS                  At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Reiterate basic research methodologies and strategies</li> <li>2. Generate research topic ideas for themselves and/or their practice area</li> <li>3. Identify barriers for research implementation and strategies to overcome them</li> <li>4. Select optimal research paths based on feasibility</li> <li>5. Elucidate collaboration needs for pediatric research projects</li> <li>6. Discuss the PPAG PBRN project and how members can get involved.</li> </ol>	<p>0180-0000-17-336-L01-P                  1 CE/1 BCPPS hour</p> 		
<p>9:05am-10:05am</p>	<p><b>Status Epilepticus: A Journey from the Emergency Room to the PICU</b>                  Lauren Buenger, PharmD, BCPS, BCPPS                  Emma Tillman, PharmD, PhD, BCNSP                  At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Determine initial therapeutic management for status epilepticus</li> <li>2. Justify the use of contemporary versus traditional antiepileptic agents in the treatment of status epilepticus</li> <li>3. Evaluate available therapies for refractory status epilepticus</li> </ol>	<p>0180-0000-17-337-L01-P                  1 CE/1 BCPPS hour</p> 	<p><b>Sedation Challenges in the Pediatric Intensive Care Unit</b>                  Jessica White, PharmD, BCPPS                  Liza Li, PharmD, BCPS                  At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Discuss challenges within each sedation phase and patient specific factors affecting sedation</li> <li>2. Define iatrogenic withdrawal and use of the Withdrawal Assessment Tool (WAT-1)</li> <li>3. Compare strategies for weaning and conversion of sedation agents</li> <li>4. Identify barriers to successful sedation wean</li> </ol>	<p>0180-0000-17-339-L01-P                  1 CE hour</p>
<p>10:10am-11:10pm</p>	<p><b>Management of Paroxysmal Sympathetic Hyperactivity (PSH): Calming the Storm after Traumatic Brain Injury in Children</b>                  Cassie Billings, BS Pharm, PharmD                  At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Identify the symptoms associated with autonomic instability after traumatic brain injury</li> <li>2. Evaluate the pharmacologic options for managing autonomic instability</li> <li>3. Formulate a treatment plan which weighs the benefits and risks of available treatment</li> </ol>	<p>0180-0000-17-338-L01-P                  1 CE/1 BCPPS hour</p> 	<p><b>Treatment of Resistant Status Epilepticus</b>                  Elizabeth Farrington, PharmD, FCCP, FCCM, FPPAG, BCPS                  At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Choose appropriate pharmacotherapy based on patient risk factors.</li> <li>2. Anticipate adverse effects know to occur with certain pharmacotherapy and be prepared to treat.</li> <li>3. Discuss how patient intravascular access would alter treatment plans</li> <li>4. Define burst suppression and how it applies to the pharmacotherapy of resistant status epilepticus</li> </ol>	<p>0180-0000-17-340-L01-P                  1 CE hour</p>
<p>11:20 am – 12:20 pm</p>	<p><b>Coke or Pepsi to CVICU Survival Guide?</b>                  Steve Martin, PharmD, BCPPS                  At the end of this session, participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Distinguish if medication choices in the CVICU are determined from literature or practitioner preference</li> <li>2. Formulate an effective plan for managing rapid cost increases of medication therapies</li> </ol>	<p>0180-0000-17-341-L01-P                  1 CE hour</p>		