

AAPA  
CONFERENCE  ON DEMAND  
2020 Pediatric Track  
Total AAPA Category 1 CME Credits: 17.0

---

### Asthma Update

AAPA Category 1 CME: 1.25

**Description:** The 2019 and 2020 GINA Asthma Guidelines change not only the definition of asthma but the way we are to treat asthma. This session explores these guidelines and how they relate to primary and urgent care. A plan is developed for the treatment of the asthma patient along with a plan for treating the exacerbations that are common to patients with asthma. The session outlines the red flags for patients with severe asthma and ways to treat the severe asthmatic in both the outpatient and the emergency setting. This session ends with tips and tricks from 20 years of treating asthma.

#### Learning Objectives:

At the end of this session, the participant should be able to:

- Recall and restate the 2020 GINA Asthma Guidelines for the treatment of asthma and asthma exacerbations
  - Apply the knowledge learned to the typical asthma patient seen in the outpatient and urgent care setting
  - Summarize the way the new GINA Asthma Guidelines effect the way we treat asthma that is mild to moderate as well as severe and difficult-to-treat asthma
  - Review pearls of asthma care that includes inhaler technique, spacer use and the concurrent treatment of comorbid conditions that affect asthma
- 

### Broadening the 'Spectrum' of Our Care: Key Evidence Based Pearls to Ease the Examination of Children with Autism Spectrum and Developmental Disorders

AAPA Category 1 CME: 1.25

**Description:** Children with (autism spectrum disorder) ASD and developmental disabilities (DD) often require more frequent medical care and experience more difficulties during the history and physical examination than neurotypical peers. Communication difficulties are universally present in children with ASD/DDs, resulting in challenges related to anxiety, sensory input, and social interaction. Clinicians can use proactive interventions to improve communication and prevent undue stress, anxiety, and future aversion to medical care in the ASD/DD population. Specialized communication tools and distractive items may assist the clinician with obtaining a history or performing an exam, especially when attempting to gain the cooperation of children with ASD and DD. This session outlines evidence-based history and physical exam techniques that are not typically taught in medical education, that can be used to improve the interplay between the clinician and ASD/DD patient during history and physical exam.

#### Learning Objectives:

At the end of this session, the participant should be able to:

- Categorize the unique sensory needs of children with autism spectrum disorder (ASD) and developmental disabilities (DD)

AAPA  
CONFERENCE  ON DEMAND  
2020 Pediatric Track

Total AAPA Category 1 CME Credits: 17.0

---

- Identify the responses that children with ASD/DDs experience during physical exams, highlighting challenges related to anxiety and specific phobias
  - Apply behavioral techniques to assist with the use of instruments/procedures that are often problematic in the examination of children with ASD/DDs
  - Describe the common components and demonstrate the proper usage of coping kits, visual communication tools, and anxiolytic adjunctive modalities
  - Discuss current research on evaluating children with ASD/DDs, delineating components that may prove useful to clinicians and parents/caregivers
- 

### Classification, Treatment, and Management of Epilepsy in Children

AAPA Category 1 CME: 1.25

**Description:** There are challenges to providing comprehensive care for children with epilepsy, particularly those with intractable epilepsy. These challenges include quality of life, epilepsy diets, use of cannabidiol (CBD), surgical options, and psychosocial/mental health and neurocognitive functioning. This session discusses care of children with epilepsy and practical solutions for addressing the aforementioned challenges relevant to providing comprehensive epilepsy care. It is vitally important to recognize and treat epilepsy in a timely manner because failure to treat/manage epilepsy may lead to developmental and cognitive delays, brain damage, and death.

#### Learning Objectives:

At the end of this session, the participant should be able to:

- Identify epilepsy and intractable epilepsy
  - Recognize atypical presentations of seizures, epilepsy syndromes, and genetic predispositions
  - Recognize when to start treatment and drug choices for newly diagnosed epilepsies
  - Describe options in addition to anti-epileptic drugs (AEDs) and their applications for intractable epilepsy
  - Recognize when patients need to be reevaluated and referred to epilepsy centers
- 

### Coordination of Primary and Specialty Care for Uninsured Children with Complex Medical Conditions

AAPA Category 1 CME: 0.75

**Description:** Collaboration between primary care and subspecialty PAs provides a unique opportunity to maximize access to medical care for uninsured children with complex medical conditions. Sufficient insurance coverage may be lacking for children who are refugees, undocumented, have Green Card status, or who have a lapse in previously existing coverage. Families of these children may be reluctant to seek care due to financial or psychosocial stressors. Language barriers, poverty, and stigma of disease can all contribute to delays in optimal care of the uninsured child. Through an effective grasp of community resources and charity care programs and developing a relationship network with local

AAPA  
CONFERENCE  ON DEMAND  
2020 Pediatric Track  
Total AAPA Category 1 CME Credits: 17.0

---

providers, barriers to care may be overcome with the efforts of a resourceful team. A PA and a social worker with over a decade of combined experience in caring for children with socioeconomic obstacles in both primary care and subspecialty settings will share their perspectives on this critical issue.

**Learning Objectives:**

At the end of this session, the participant should be able to:

- Identify barriers to care of the uninsured child with complex medical needs
  - Recognize community and governmental services available to assist with securing medical coverage for the uninsured child
  - Describe practical tools for collaboration between pediatric subspecialties and primary care/general pediatrics
- 

**Early Prevention: Beginning Chronic Disease Prevention in Childhood**

AAPA Category 1 CME: 1

**Description:** Adverse childhood experiences, or ACEs, have been associated with the development of adult chronic diseases, such as diabetes mellitus, substance use disorder, hypertension, depression, and more. PAs encounter more than 400 million patients per year and educate students in over 200 programs. With this broad reach, PAs are in a prime position to identify early risk factors of chronic disease development, as well as provide early treatment and/or referral for at risk patients. This session provides PAs with the underlying pathophysiology of childhood adversity and its role in chronic disease development, review screening recommendations for pediatric and adult populations, as well as review opportunities for early intervention and chronic disease prevention.

**Learning Objectives:**

At the end of this session, the participant should be able to:

- Define adverse childhood experiences (ACEs)
  - Explain the epidemiology of ACEs
  - Describe the pathophysiology of ACEs in chronic disease development
  - Review screening recommendations for at risk adult and pediatric populations
  - Discuss primary, secondary, and tertiary prevention strategies for chronic disease development secondary to ACEs
- 

**Emergency Medicine Update: A Case-Based Review of Recent Impactful Literature**

AAPA Category 1 CME: 1

**Description:** This case-based session reviews the current emergency medicine literature. New literature is published continuously across numerous journals. While review of this research is critical to maintaining evidence-based practice, limited time and access are potential barriers to staying up-to-date. The presenter has filtered the vast quantity of recent emergency medicine literature to present

AAPA  
CONFERENCE  ON DEMAND  
**2020 Pediatric Track**  
Total AAPA Category 1 CME Credits: 17.0

---

the most relevant articles for practice. Some presented content is also highly applicable to outpatient acute care. Topics includes chest pain disposition, anticipatory guidance on concussions, bag-mask ventilation during intubation, a clinical prediction rule for febrile infants, point-of-care ultrasound, and management of pediatric vomiting and diarrhea. Participating in this session empowers clinicians to make evidence-based decisions in frequently encountered emergency medicine and acute-care situations.

**Learning Objectives:**

At the end of this session, the participant should be able to:

- Utilize the HEART score to make disposition decisions in cases of potential acute coronary syndrome
- Provide anticipatory guidance on concussion recovery and treatment
- Appraise the utility of a clinical prediction rule for the management of febrile infants under 90-days-old
- Outline the role of bag-mask ventilation during intubation
- Discuss the role of point-of-care ultrasound in diagnosing selected ocular complaints and performing lumbar punctures

**Primary Track:** EMER - Emergency Medicine

---

**Ethical Implications of Vaccine Hesitancy**

AAPA Category 1 CME: 1

**Description:** Vaccine refusal is common in today's world. This represents not only an individual health risk but also a public health risk, as the integrity of herd immunity is threatened. PAs must consider the ethical principles involved in vaccination and develop an appropriate approach to discuss these issues with vaccine-hesitant parents.

**Learning Objectives:**

At the end of this session, the participant should be able to:

- Discuss common motivations for vaccine hesitancy
  - Identify the ethical principles involved in vaccine administration and hesitancy
  - Formulate an ethical response that the PA can utilize to respond to vaccine-hesitant parents
-

AAPA  
CONFERENCE  ON DEMAND  
2020 Pediatric Track  
Total AAPA Category 1 CME Credits: 17.0

---

**Food Allergy Update (With a Focus on Peanut Allergy)**

AAPA Category 1 CME: 1.25

**Description:** We will examine the current guidelines for the evaluation and treatment of food allergy with a focus on peanut allergy. In the past two years the recommendations for the administration of peanut protein into the diet of infants and children has changed dramatically. We will discuss these guidelines and practical ways you can encourage the proper introduction of peanut protein into the infants and toddlers in your practice.

**Learning Objectives:**

At the end of this session, the participant should be able to:

- Identify the indication for allergy testing for foods, aeroallergens and insects in the pediatric and adult population
  - Analyze the new guidelines for the introduction and administration of peanut protein into the diets of infant and toddler patients
  - Uncover the understanding of how early introduction of food proteins might offer protection against later food sensitization
- 

**Iron Deficiency Anemia (IDA): New Developments in Diagnosis and Treatment**


AAPA Category 1 CME: 1.25

**Description:** Prevention of and screening for iron deficiency anemia (IDA) will be reviewed briefly followed by a review of diagnostic approaches that emphasize important features of the history, physical examination, and laboratory tests widely available to both generalists and subspecialists. Treatment strategies with specific case correlations for those scenarios considered to be routine (e.g., mild IDA, clear etiology), as well as approaches for more complex patients with severe or refractory IDA will be discussed. A step-wise approach for selection of oral iron preparations, dosing, and administration schedule will be reviewed, as well as patient follow-up and response criteria for successful therapy. Strategies for effective patient education and correction of the underlying etiology will also be highlighted. Finally, indications and considerations for intravenous iron therapy will be described, including a review of currently available formulations, risks and benefits, and important cost considerations.

**Learning Objectives:**

At the end of this session, the participant should be able to:

- Recognize causes and clinical presentations of iron deficiency anemia (IDA) by age group and sex
  - Recall the conventional IDA diagnostic tests and treatment approaches
  - Describe limitations of past and current IDA management practices
  - Use novel treatment strategies with oral and/or intravenous iron to improve outcomes of patients with IDA
-

AAPA  
CONFERENCE  ON DEMAND  
2020 Pediatric Track  
Total AAPA Category 1 CME Credits: 17.0

---

### **My Tummy Hurts: Pediatric Abdominal Pain Needing a Surgical Consult**

AAPA Category 1 CME: 1

**Description:** One of the first things taught within pediatrics curriculum is that kids are not little adults. Not only are their body systems different and their treatments necessitate consideration of their size, but they also are not able to communicate their symptoms in the same ways as adults. Consequently, the art of diagnosis for pediatric patients requires a different skill set. When a pediatric patient is brought to the clinic by their parents with a chief complaint of abdominal pain, the differential diagnosis is broad. This session focuses on key etiologies of pediatric abdominal pain, which require surgical consultation and intervention. We will discuss pyloric stenosis, malrotation and volvulus, intussusception, appendicitis, and testicular torsion. There are fundamental aspects of the history and physical exam that clarify the differential and inform selection of diagnostic studies. With these tools a definitive diagnosis can be made and treatment can be initiated.

#### **Learning Objectives:**

At the end of this session, the participant should be able to:

- Identify key differences in the history of pediatric patients with abdominal pain
  - Identify physical exam findings pertaining to surgical etiologies of pediatric abdominal pain
  - Choose the appropriate diagnostic imaging and laboratory tests to aid in the diagnosis of pediatric abdominal pain
  - Recognize common causes of pediatric abdominal pain necessitating surgical treatment
- 

### **Pearls of Pediatric Pulmonology**


AAPA Category 1 CME: 1.25

**Description:** This session is a review of general pediatric pulmonology topics with updates on recent guidelines and medications including RSV prophylaxis, cystic fibrosis, obstructive sleep apnea, and asthma.

#### **Learning Objectives:**

At the end of this session, the participant should be able to:

- State indications and criteria for RSV prophylaxis
  - Review pathophysiology of cystic fibrosis and learn the new genetic modifying drugs available for patients
  - Identify the newest developments in asthma therapy including the latest GINA recommendations
  - Describe morbidity associated with pediatric OSA and appropriate interventions
-

AAPA  
CONFERENCE  ON DEMAND  
2020 Pediatric Track  
Total AAPA Category 1 CME Credits: 17.0

---

**Pediatric Lower Extremity Trauma: Pearls, Pitfalls and the Physis**

AAPA Category 1 CME: 0.5

**Description:** Pediatric lower extremity trauma is a common presenting complaint in the emergency department, urgent care centers and family practice environment. Understanding how to evaluate, treat and when to refer a child with a lower extremity injury is paramount in caring for these young patients. This session covers a systematic approach to the physical exam, reading x-rays and how to treat the most common pediatric lower extremity injuries including injury to the growth plate. This topic is critical to anyone who regularly sees pediatric patients as part of their patient panel.

**Learning Objectives:**

At the end of this session, the participant should be able to:

- Recognize common pediatric fractures using a basic history and physical exam
  - Order and interpret x-rays of the lower extremity
  - Treat or refer appropriately
- 

**Pediatric Upper Extremity Trauma: Pearls, Pitfalls and the Physis**

AAPA Category 1 CME: 0.75

**Description:** Pediatric upper extremity trauma is a common presenting complaint in the emergency department, urgent care centers and family practice environment. Understanding how to evaluate, treat and when to refer a child with an upper extremity injury is paramount in caring for these young patients. This session covers a systematic approach to the physical exam, reading x-rays and how to treat the most common pediatric upper extremity injuries including injury to the growth plate. This topic is critical to anyone who regularly sees pediatric patients as part of their patient panel.

**Learning Objectives:**

At the end of this session, the participant should be able to:

- Recognize common pediatric fractures using a basic history and physical exam
  - Order and interpret x-rays of the upper extremity
  - Treat or refer appropriately
- 

**Pediatric Urology: The Nuts and Bolts for Any Pediatric Provider**

AAPA Category 1 CME: 1.25

**Description:** The session covers pertinent clinical information on a variety of pediatric urological topics that are frequently encountered during routine pediatric visits. It will also include pediatric urologic emergencies, their care, and management. You will be guided along a detailed genitourinary examination, including adequate evaluation for circumcision.

AAPA  
CONFERENCE  ON DEMAND  
2020 Pediatric Track  
Total AAPA Category 1 CME Credits: 17.0

---

**Learning Objectives:**

At the end of this session, the participant should be able to:

- Describe the presentation and initial evaluation of common pediatric urologic conditions
  - Recognize pediatric urological emergencies, such as testicular torsion and paraphimosis, and employ proper management
  - Perform a detailed genitourinary examination with emphasis on scrotal and penile anatomy
  - Discuss management of phimosis, undescended testicles, hydrocele, labial adhesions, varicocele, and other encountered pediatric urologic conditions
- 

**Polycystic Ovary Syndrome (PCOS) in Adolescents**

AAPA Category 1 CME: 1

**Description:** This session discusses the diagnosis and management of polycystic ovary syndrome (PCOS) in adolescents. PCOS is a common endocrine disorder, associated with complications of both reproductive and metabolic health, in women of reproductive age with estimated prevalence as high as 20%. PCOS manifests during adolescence, but is often undiagnosed until adulthood when individuals present with complications of PCOS such as infertility and insulin resistance. Clinical presentation of PCOS during adolescence include hirsutism, severe acne, and/or irregular menses, which have been found to have a significant negative impact on quality of life at a vital time for social, emotional and physical development. Knowledge of adolescent-specific practice guidelines, and understanding evidence behind the guidelines, will support PAs who play a key-role in caring for adolescents with PCOS and help mitigate long-term complications of this complex condition.

**Learning Objectives:**

At the end of this session, the participant should be able to:

- Discuss the epidemiology, pathophysiology, and clinical manifestations of polycystic ovary syndrome (PCOS) in adolescents
  - Describe adolescent specific practice guidelines for the diagnosis and management of PCOS
  - Explain the evidence supporting adolescent specific practice guidelines for the diagnosis and management of PCOS
  - Select the appropriate diagnostic testing for adolescents who present with signs/symptoms of PCOS
  - Prepare an appropriate treatment plan for the management of PCOS in an adolescent patient
- 

**Vector-Borne Infections: A Moving Target**

AAPA Category 1 CME: 1.25



AAPA  
CONFERENCE  ON DEMAND  
2020 Pediatric Track

Total AAPA Category 1 CME Credits: 17.0

---

**Description:** PAs are often the first medical professionals to see patients with vector-borne diseases (VBDs). Correct diagnosis and prompt treatment can be vital because some VBDs can be quickly deadly or have lasting health implications. Symptoms are similar to those of other infectious diseases and to other VBDs. Children may present a different constellation of symptoms than adults. This session covers regional and national vector-borne diseases, symptoms, and diagnostic dilemmas. Prevention strategies, with guidance on those that do NOT work, are important to understand. Tick attachment times are crucial. Powassan, a viral pathogen, infects within 15 minutes of attachment, so traditional tick check guidance isn't helpful where it circulates. While Lyme disease is most recognized, its geographic range is limited. Another VBD produces a bull's eye rash with which it is often confused. Test limitations and understanding VBD dynamics are crucial and will be included.

**Learning Objectives:**

At the end of this session, the participant should be able to:

- Discuss existing and emerging vector-borne diseases (VBD), including symptoms, treatment and age-related presentation differences
  - Explain geographic nuances of VBD incidence and the challenges associated with diagnoses
  - Recognize the importance of prompt and proper treatment for non-viral VBDs
  - Describe the importance of preventative measures and how best to communicate these to patients
  - Recognize when prophylactic treatment is NOT indicated
-