

Midwest Conference Program Guide—Monday, March 26, 2018

Please note: There have been changes to Tuesday, March 27th schedule at 945 and 1115 (see schedule below)

	Comments	Objectives
Monday March 26, 2018 8-9 am		
<p>Keynote: Keeping our Promise to Patients: Guided by Why</p> <p><i>Christine Schulman</i> AACN President</p> <p>All Levels</p>	<p>This presentation explores how our personal and professional WHYs help us navigate the worlds in which we live and work. We reflect upon real life experiences and why they influence the choices we make, the work we do, and the paths we follow. Writings from Daniel Pink, Simon Sinek, Kevin Cashman, and Victor Frankl connect WHYs with personal mastery, drive, and excellence. Attendees will contemplate the ways in which their everyday WHYs influence their pursuits of excellence.</p>	<ol style="list-style-type: none"> 1. Discuss the importance of reconnecting with WHY. 2. Provide examples of how WHY has helped achieve excellence and meaning. 3. Describe how an individual can use WHY as a tool to create a better future for health care.
Monday March 26, 2018 915-1030 am		
<p>Acute Management of Cerebral Perfusion Pressure</p> <p><i>Ryan Keiler</i></p> <p>All Levels</p>	<p>This presentation will cover key concepts related to ways in which critical care nurses can maintain optimal cerebral perfusion pressure through their interventions, understanding of patient physiology, and relate this to actual clinical case studies.</p>	<ol style="list-style-type: none"> 1. Describe cerebral vasculature and ventricular drainage system and its effect on cerebral perfusion pressure. 2. Describe critical care interventions utilized to optimize cerebral perfusion pressure. 3. Correlate interventions to optimize cerebral perfusion pressure.
<p>New Modalities in Heart Failure Management</p> <p><i>Stacie Ward</i></p> <p>All Levels</p>	<p>Updates in HF management including medical and interventional therapies and evaluation of these therapies for out patient monitoring.</p>	<ol style="list-style-type: none"> 1. Identify new medical and interventional modalities in treatment of heart failure 2. Understanding timing/intervention and appropriate referrals for these therapies. 3. Evaluate responsiveness to therapies.
<p>Inflammation of Critical Illness and Injury: The “Oooh-La-La” Response</p> <p><i>Christine Schulman</i></p> <p>All Levels</p>	<p>Inflammatory responses are intended to limit injury and promote healing. But, compensatory mechanisms, prolong resuscitation, and lead to complications. Specific inflammatory responses and consequences in burn injuries reviewed. Case studies discuss new treatment strategies to limit damage caused by an over-zealous inflammatory response. Shock physiology and resuscitation are essential. This benefits nurses experienced in care for critically ill, trauma and burn patients.</p>	<ol style="list-style-type: none"> 1. Review the underlying physiology of the inflammatory response following trauma 2. Discuss post-traumatic inflammatory responses seen with specific injuries 3. Identify current research based interventions intended to modulate the immune response and minimize damage from inflammatory processes

<p>Pancreatitis: Emphasis on Pathophysiology, Causes and Treatment <i>Afshin Khaizer, MD</i> All Levels</p>	<p>Top causes of Pancreatitis will be discussed. Presentation emphasis will be on pathophysiology, and causes. Unusual causes and new options for treatment are reviewed.</p>	<ol style="list-style-type: none"> 1. Identify causes of Pancreatitis 2. Diagnosis of pancreatitis will be reviewed 3. Discuss treatment options including newer options
<p>Monday March 26, 2018 11-1215 pm</p>		
<p>Famous Trauma Deaths: An Update <i>Daria Ruffolo</i> All levels</p>	<p>This session reviews historical medical care of four presidents. An overview of assassination attempts on Presidents Garfield, McKinley and Reagan, Eisenhower suffering from severe heart disease and chronic diverticulitis, and trauma management of Princess Diana post crash. Review of standards of care, optimized, location of care and how staff, supplies and facilities impacted these patients.</p>	<ol style="list-style-type: none"> 1. Identify the historical management of injury and disease 2. Describe the importance of quick and effective intervention 3. Discuss the significance of continued update and use of evidence based interventions in critical care
<p>Opioid Briefing and Provider Safeguards <i>Dennis Wichern and Dan Gillen, DEA</i> All levels</p>	<p>The course will include current drug and drug overdose updates in addition to provider safeguards in response to the current opioid epidemic.</p>	<ol style="list-style-type: none"> 1. Explain which drugs are driving the opioid epidemic. 2. Describe different drug destruction methods that are available to patients. 3. Describe various safeguards that a provider can utilize to safeguard their patients and themselves.
<p>Teaching Critical Thinking for Preceptors <i>Christine Schulman</i> All Levels</p>	<p>Progressive and Critical Care nurses work in complex environments, managing multiple priorities in caring for patients. Unfortunately, the tools for teaching critical thinking are not clearly defined. We will provide preceptor tools to help orientees think critically. Critical thinking as a process for making clinical decisions is defined. Examples encourage clarity, accuracy, precision, depth, and logic. “What If” and “Do Over” are demonstrated to help a novice nurse reflect and learn.</p>	<ol style="list-style-type: none"> 1. Define “critical thinking” in nurses. 2. Describe techniques to facilitate critical thinking for a specific clinical situation. 3. Practice the types of reflective questions that help guide an orientee’s clinical judgment.
<p>Patient Safety and Quality Improvement: What is this and WHY is this important? <i>Candice Krill</i> All Levels</p>	<p>This presentation will address current initiatives in patient safety and quality improvement in critical care. Four metrics will be addressed – prevention of CLABSI, CAUTI, Sepsis, and Pressure Ulcers. Effective interventions for preventing hospital acquired conditions will also be discussed.</p>	<ol style="list-style-type: none"> 1. Discuss the national platform for quality improvement and patient safety. 2. Identify four issues related to patient safety and quality improvement that affect patients in critical care areas. 3. Review effective interventions for preventing hospital acquired complications

Monday March 26, 2018 115-230pm

<p>The Tank, the Pump, and the Pipes (TPP). Are You Down with TPP? Patient Hemodynamics in Jeopardy</p> <p><i>Alex Johnson</i></p> <p>All Levels</p>	<p>This presentation is designed to update attendees regarding the most up-to-date information in hemodynamic monitoring and sepsis using a fun and interactive approach. Best practices, emerging trends, and cutting-edge approaches will be discussed. Real-life clinical examples and a case study approach will help facilitate any application to bedside practice.</p>	<ol style="list-style-type: none"> 1. Discuss updates in sepsis identification, resuscitation, and compliance 2. Review emerging trends in the science of hemodynamic and blood flow monitoring 3. Identify application and implementation strategies for sepsis and hemodynamic monitoring practices utilizing clinical examples or case study approach
<p>Polypharmacy and the Elderly: A Bag Full of Pills</p> <p><i>Daria C. Ruffolo</i></p> <p>All levels</p>	<p>Review physiological, psychological and social elements that put the elderly at risk for use of polypharmacy-prescription and OTC. Overview of rationale for lack of compliance with medication administration and how we can better serve this fragile population with regard to their medications</p>	<ol style="list-style-type: none"> 1. Describe patients at risk for ineffective medication management 2. Discuss polypharmacy and adverse drug reaction as it impacts the elderly 3. Identify medications and practices that put the elderly patient at risk for over-under medication and prevention techniques
<p>Guided by WHY: When the Progressive Care Patient Becomes Critical</p> <p><i>Alethea Sment</i></p> <p>All levels</p>	<p>To meet changing needs of today's acute and critical-care patients, the progressive-care nurse must have a broad understanding of the spectrum of patient acuity, keen nursing assessment skills, and the ability to critically think and act to meet the needs of complex patients. Using a case study approach, nursing assessments and monitoring needed to care for the most complex patients for complex needs of the most critical progressive-care patient, including cardiac issues, respiratory distress and renal failure.</p>	<ol style="list-style-type: none"> 1. Discuss the role of the progressive care RN in early recognition of increased acuity needs of the patient along the continuum 2. Identify critical care disease processes seen in progressive care patients, such as cardio/ respiratory /renal compromise 3. Describe nursing interventions for progressive care patients with increasing critical care needs
<p>What is the Sense? Case study Approach to Assuring Proper Pacer and ICD Function</p> <p><i>Beth Hammer</i></p> <p>All Levels</p>	<p>Nurses must understand programmed pacing parameters to accurately determine appropriate device function. Lack of understanding can result in misinterpreting a properly functioning device. This session is designed to increase understanding and confidence in assessing appropriate sensing of temporary and implanted pacemakers/ICDs. Rhythm strips and EKG examples are presented to re-create frequently seen scenarios in the clinical setting. Key concepts discussed will include over and under sensing, post ventricular atrial refractory period (PVARP), atrial and ventricular tachycardias.</p>	<ol style="list-style-type: none"> 1. Identify over and under sensing during temporary pacing and adjust sensitivity appropriately. 2. Identify role of PVARP in preventing pacemaker mediated tachycardia. 3. List two criteria used by implanted devices to detect tachycardias.

Monday March 26, 2018 245-4 pm

<p>Obstetric Emergencies and the Critical Care Setting</p> <p><i>James Keller, MD</i></p> <p>Proficient</p>	<p>This will be a discussion of the most common obstetric emergencies which could involve the critical care nurse. The focus will be on obstetric implications which may not be well known to those outside of the obstetric arena</p>	<ol style="list-style-type: none"> 1. Describe the treatment of severe hypertension in pregnant/post-partum patient. 2. Initiate therapy for post-partum hemorrhage 3. 3. Evaluate a pregnant patient involved in a traumatic event
<p>Why Create an Ethical Climate in Critical Care?</p> <p><i>Linda L. Olson</i></p> <p>All levels</p>	<p>The environment is an important determinant of outcomes such as work satisfaction and quality patient care. Ethical climate in healthcare consists of the way healthcare employees perceive ethical issues and concerns are identified, discussed, and decided. A measure of ethical climate has been used as a research and educational tool to foster a work environment that promotes and facilitates ethical practice and mitigates moral distress.</p>	<ol style="list-style-type: none"> 1. Describe the concept of ethical climate. 2. Discuss the importance of creating an ethical work environment. 3. Identify research that has found links between ethical climate and moral distress.
<p>Pause Principles and Mindful Moments to Enhance Your Nursing Practice</p> <p><i>Linda M. Bay</i></p> <p>All Levels</p>	<p>The purpose of this presentation is to introduce nurses to mindfulness and invite nurses to care for themselves and build resilience. Mindfulness matters in today's hectic world, and this presentation talks about the "why" of mindfulness and how to incorporate small moments into your practice that can make a big difference.</p>	<ol style="list-style-type: none"> 1. Include level for educational content (Define and describe mindfulness and discuss the effects of mindfulness) 2. Apply mindfulness to stress reduction and resilience building for nurses 3. Identify resources to begin a journey of mindfulness that matters
<p>Why did this happen? Identification and Management of Clinical Risk factors that trigger Arrhythmias</p> <p><i>Beth Hammer</i></p> <p>All Levels</p>	<p>Multiple clinical risk factors are linked to cardiac arrhythmias commonly seen across care settings. Direct care nurses can influence many of these factors and with early intervention decrease the likelihood of occurrence. Risk factors associated with common atrial and ventricular arrhythmias are reviewed in this session. A case study approach is used to help participants apply immediate and long-term interventions to manage and prevent atrial and ventricular arrhythmias.</p>	<ol style="list-style-type: none"> 1. Identify multiple clinical risk factors for atrial and ventricular arrhythmias. 2. Explain how clinical risk factors can trigger specific arrhythmias. 3. Explain immediate and long-term interventions to prevent specific arrhythmias.

Midwest Conference Program Guide—Tuesday, March 27, 2018

Please Note: There has been a change to the speakers' schedules for Tuesday March 27th at 945 am and 1115 am Please see schedule below.

	Comments	Objectives
Tuesday, March 27, 2018 7-8am		
Too Much Zanc: Interpreting Lab Values of Infection <i>Kristen Luttenberger</i> All Levels	ZANC is the combination of Zosyn and Vancomycin IV that many patients receive when entering an ER. Sepsis guidelines stress importance of early goal directed therapy with antibiotics, other sources are concerned about overuse/misuse of antibiotic therapy and development of super bugs. The purpose is to evaluate the overall patient condition and labs to determine appropriate treatment.	<ol style="list-style-type: none"> 1. Discuss systemic inflammatory response syndrome and recent septic guideline 2. Interpret differences between bacterial, viral, inflammatory, and/or normal responses in laboratory specimens. 3. List treatment modalities of active infections based on analysis of abnormal laboratory findings.
Tuesday, March 27, 2018 815-915 am		
KEYNOTE: Leading Transformation <i>Linda Deering Dean</i> All Levels	This program is intended to help Professional Nurses understand the need for healthcare transformation and their role in leading rapid change.	<ol style="list-style-type: none"> 1. Identify pressures impacting healthcare settings across the nation. 2. Understand need to implement change. 3. Identify key attitudes and actions that nurses exhibit as leaders during change
Tuesday, March 27, 2018 945-11 am		
3D Correlative Anatomy and Assessment of the Brain-Part I <i>Linda Littlejohns</i> All levels	This 3D anatomy and assessment presentation will use the Anatomage software to demonstrate structures in a manner that a text book cannot project in a multidimensional interactive presentation. We travel the vasculature, dissect structures and get insight into some of the reasons for pathology seen in neuro assessment. The use of case studies will further enhance the experience.	<ol style="list-style-type: none"> 1. Demonstrate normal anatomy of the brain, brainstem, cerebellum and blood vessels. 2. Discuss the pathology of stroke and trauma as it relates to blood supply and critical structures in the brain 3. Describe the signs and symptoms seen in both patient populations and tie the assessment to the anatomy through case studies and audience participation
Patient Safety: Disruptive Innovations and Liberating Structures <i>Linda Ptack</i> All Levels	This presentation focuses on creative innovations for thinking outside the box to problem solve patient safety issues and improve patient outcomes.	<ol style="list-style-type: none"> 1. Explain a TRIZ and how it can be used to identify opportunities for improvement. 2. Identify indicators of patients at risk for deterioration. 3. Discuss behaviors of proactive versus reactive response to at risk patients. 4. Describe positive deviance and its' relationship to improving patient outcomes

<p>Pathophysiology of Pulmonary System and Respiratory Failure</p> <p><i>Kristen Luttenberger</i></p> <p>Proficient Level</p>	<p>Overview of the pulmonary system for the critical care and progressive care nurses inclusive of diagnostic findings, clinical presentation, and overall management of acute and chronic respiratory failure. Quick and easy ABG interpretation strategies will be discussed along with ventilator strategies.</p>	<ol style="list-style-type: none"> 1. Discuss anatomy, physiology, and pathophysiology of the pulmonary system 2. Explain acute and chronic respiratory failure along with ABG interpretation 3. Describe ventilator settings, weaning parameters, and ventilator complications
<p>Surviving Sepsis: Every Second Counts</p> <p><i>Nicole Kupchik</i></p> <p>All Levels</p>	<p>Overview of Sepsis statistics, leading organizations steering sepsis guidelines & management. The role of CMS & The Surviving Sepsis Campaign. Current identification tools and the limitations (SIRS, SOFA, qSOFA). Overview of Sepsis Guidelines and high level treatment strategies.</p>	<ol style="list-style-type: none"> 1. Discuss highlights from the latest 2017 Sepsis Guidelines 2. Describe current strategies on antibiotic therapy 3. Discuss the use & limitations of lactate & procalcitonin labs
<p>Tuesday, March 27, 2018 1115 a-1230 p</p>		
<p>3D Correlative Anatomy and Assessment of the Brain-Part II</p> <p><i>Linda Littlejohns</i></p> <p>All levels</p>	<p>This 3D anatomy and assessment presentation will use the Anatomage software to demonstrate structures in a manner that a text book cannot project in a multidimensional interactive presentation. We travel the vasculature, dissect structures and get insight into some of the reasons for pathology seen in neuro assessment. The use of case studies will further enhance the experience.</p>	<ol style="list-style-type: none"> 1. Demonstrate normal anatomy of the brain, brainstem, cerebellum and blood vessels. 2. Discuss the pathology of stroke and trauma as it relates to blood supply and critical structures in the brain 3. Describe the signs and symptoms seen in both patient populations and tie the assessment to the anatomy through case studies and audience participation
<p>Myocardial Mysteries: Case Studies of MI Mimics</p> <p><i>Judy Giovannelli</i></p> <p>All Levels</p>	<p>Prompt identification of Acute Coronary Syndrome is essential, however not all patients who present with symptoms of chest pain are due to an acute myocardial infarction. By reviewing the patient symptoms and presentation, a differential diagnosis will be determined. Essential critical thinking skills, risk factors, diagnostic tests, treatment options, and interventions in acute situations of chest pain mimicking acute coronary syndrome are reviewed.</p>	<ol style="list-style-type: none"> 1. Review case studies of patients presenting with chest pain mimicking acute coronary syndrome 2. Identify diagnostic criteria to aid in determining mimics of acute coronary syndrome 3. Discuss appropriate treatment options for patients presenting with mimics of acute coronary syndrome
<p>Pulmonary Diseases</p> <p><i>Kristen Luttenberger</i></p> <p>Proficient Level</p>	<p>The purpose of this session is to review the pathophysiology, diagnosis, and management strategies of multiple pulmonary diseases frequently encountered by the critical and progressive care nurses.</p>	<ol style="list-style-type: none"> 1. Diagnose and manage multiple pulmonary disease processes of critical & progressive care patients 2. Deduce pulmonary function tests 3. Solve and evaluate pulmonary critical-care
<p>Non-Invasive Hemodynamics: How do I</p>	<p>Importance of proper volume administration, Sepsis Guidelines for fluid administration, the Bellami</p>	<ol style="list-style-type: none"> 1. Discuss the benefits/disadvantages of isotonic resuscitation fluids

<p>know if my patient needs fluids?</p> <p><i>Nicole Kupchik</i></p> <p>All Levels</p>	<p>Curve. The consequence of over-resuscitation, which fluids to use. The passive leg raise test, how to do it, contraindications. How to know if your patient is a fluid responder, various types of non-invasive technologies including ultrasound, Bioreactance, capnography, continuous digit cardiac output devices</p>	<ol style="list-style-type: none"> 2. Describe the concept of stroke volume responsiveness 3. Discuss current non-invasive technologies including ultrasound, Bioreactance, & continuous digit cardiac output devices 4. Describe a new FDA approved vasopressor for use in vasodilatory shock
<p>Tuesday, March 27, 2018 130-245 pm</p>		
<p>Managing a Neuro Mystery</p> <p><i>Linda Smith</i></p> <p>All Levels</p>	<p>Patients presenting with neurological symptoms may be difficult to diagnose and misdiagnosed. A case study will reveal signs and symptoms and pathophysiology. Nursing care priorities are determined for immediate care and longer term care to provide the best possible patient outcomes.</p>	<ol style="list-style-type: none"> 1. Recognize the signs and symptoms of a myasthenia crisis. 2. Describe the collaborative care of a patient exhibiting myasthenia crisis. 3. Discuss the nursing care of a patient in myasthenia crisis. 4. Enhance skills for group problem solving.
<p>De-escalation Skills</p> <p><i>James Horvath</i></p> <p>Beginner Level</p>	<p>Violence and assault are increasingly more common in healthcare settings and towards healthcare workers. The ability to identify risk factors for violence and aggression are crucial steps to the proactive management of these risks. Recommendations for best responding to agitated persons empowers healthcare workers to de-escalate when possible.</p>	<ol style="list-style-type: none"> 1. Understand methods used to identify potentially aggressive persons in healthcare setting. 2. Comprehension of risk factors that contribute to persons escalating, becoming aggressive/threatening. 3. Recommendations and approaches to de-escalating aggressive persons.
<p>Acute and Chronic Renal Failure</p> <p><i>Kristen Luttenberger</i></p> <p>All Levels</p>	<p>The purpose of this session is to review diagnosis, management, and treatment strategies for acute and chronic renal failure patients.</p>	<ol style="list-style-type: none"> 1. Describe acute and chronic renal failure 2. List electrolyte abnormalities with kidney failure 3. Describe different types of dialysis
<p>Thinking Outside the Box with Refractory Ventricular Fibrillation (LUCAS device)</p> <p><i>Nicole Kupchik</i></p> <p>All Levels</p>	<p>Current state of Cardiac arrest in the US & causes of ventricular fibrillation. Strategies for treating Vfibr: High quality CPR, components of effective defibrillation, CPR quality feedback. Barriers to Cardiac Cath Lab activation, the use of mechanical chest compression devices, PCI & Coronary Intervention, the 12 Lead ECG, use of ECMO to support the myocardium through PC. Future areas of research, what direction are we headed</p>	<ol style="list-style-type: none"> 1. Discuss current treatment strategies for Ventricular Fibrillation 2. Describe the use of mechanical chest compressions, ECMO & PCI for Refractory Ventricular Fibrillation 3. Discuss barriers to Cardiac Cath Lab activation for Refractory Vfibr
<p>Tuesday, March 27, 2018 3-415 pm</p>		

<p>Pain Management: Challenges in the ICU for Opioid Naïve and Tolerant Patients</p> <p><i>June Oliver</i></p> <p>All Levels</p>	<p>Discuss the top ICU patient distressors, sources of pain and impact of unrelieved pain. Review the principles to choose effective medication combination. Assess for undiagnosed neuropathic pain, opioid tolerance and genetic variations. Identify Opioid tolerance interventions including dose increases, maximize nonopioids, and ketamine subanesthetic infusions. Opioid overdose crises overview & risk factors.</p>	<ol style="list-style-type: none"> 1. Discuss occurrence and impact of uncontrolled pain 2. List principles of multimodal pain management 3. Discuss possible etiologies, assessment an intervention for difficult to control pain. 4. Discuss opioid overdose and withdrawal assessment and management
<p>Compassion Fatigue In Health Care</p> <p><i>James Horvath</i></p> <p>Beginner Level</p>	<p>Critical Care Nurses and all healthcare workers are at considerable risk of developing Compassion Fatigue during the course of careers. Compassion Fatigue is detrimental to quality of life, job satisfaction, and nurse turnover. Education of Compassion Fatigue definitions, signs and symptoms, and risk factors is an essential preliminary to addressing the negative impacts experienced by healthcare workers.</p>	<ol style="list-style-type: none"> 1. Accurate define “Compassion Fatigue,” as well as it’s two primary components. 2. Identify several signs and symptoms a healthcare worker may be experiencing Compassion Fatigue 3. Identify methods and activities which help alleviate Compassion Fatigue as well as foster hope and career meaningfulness.
<p>SIADH DKA and Diabetes</p> <p><i>Kristen Luttenberger</i></p> <p>All Levels</p>	<p>The purpose of this session is to review the endocrine system and the diagnosis, management, and treatment strategies for patients experiencing SIADH, DKA, and Diabetes.</p>	<ol style="list-style-type: none"> 1. Review organs of the endocrine system inclusive of hormones released and mechanism of action 2. Deduce assessments, diagnostic findings, clinical presentations, and management strategies of critical care and progressive care patients with SIADH, DI, diabetes, DKA, and HHS. 3. Describe complications of diabetes as in hypoglycemia, the Somogyi effect, and Dawn phenomenon.
<p>Innovative Therapies for Massive and Submassive Pulmonary Embolism</p> <p><i>Nicole Kupchik</i></p> <p>All Levels</p>	<p>The incidence & risk factors of pulmonary embolism. Symptoms of pulmonary embolism. Current treatment strategies for PE. Interventional radiology & surgical procedures for massive PE</p>	<ol style="list-style-type: none"> 1. Discuss risk factors for DVT & pulmonary embolism 2. Describe symptoms of pulmonary embolism 3. Discuss diagnostics to consider with pulmonary embolism 4. Discuss standard & innovative treatments