

## **PedSAP 2017 Book 2 (Pediatric Emergencies)**

**Total Available Hours:** 11.5

**BCPPS test deadline:** 11:59 p.m. (Central) on September 15, 2017.

**ACPE test deadline:** 11:59 p.m. (Central) on May 14, 2020.

### **Pediatric Emergencies I (Module 1) – Credit Hours: 3.5**

#### **Chapter: Toxicology Overview**

##### **Learning Objectives**

1. Analyze the role of poison control centers in providing assistance in poisoning cases.
2. Evaluate commonly available xenobiotics and household chemicals that are harmful to children in a single dose.
3. Apply knowledge of toxidromes in designing a treatment plan for the acutely poisoned patient.
4. Apply knowledge of risk-benefit in evaluating the use of GI decontamination in acutely poisoned patients.
5. Justify the role of qualitative versus quantitative toxicology testing in the treatment of acutely poisoned patients.

#### **Chapter: Acetaminophen Exposure**

##### **Learning Objectives**

1. Use data on pediatric acetaminophen exposures in the United States to develop strategies to reduce unintentional exposures.
2. Evaluate clinical manifestations to determine acetaminophen exposure and severity in a pediatric patient.
3. Apply the general approach for treating patients with toxic acetaminophen exposures, including the role of acetylcysteine.
4. Justify acetylcysteine dose adjustments in the pediatric patient with acetaminophen toxicity.

### **Pediatric Emergencies II (Module 2) – Credit Hours: 4.5**

#### **Chapter: Pediatric Resuscitation**

##### **Learning Objectives**

1. Apply updates from the 2015 pediatric resuscitation guidelines to case-based scenarios.
2. Distinguish optimal agent selection for standard and rapid sequence intubation.
3. Develop a therapeutic plan for fluid resuscitation in patients presenting with different types of shock.
4. Account for adverse drug effects from different resuscitation therapies, and devise a plan for alternative management, when necessary.
5. Justify controversial resuscitation management approaches according to the available literature.

## **Chapter: Management of Burn Injuries**

### **Learning Objectives**

1. Apply physical examination findings to classify burns and calculate body surface area (BSA) burned.
2. Design a plan for initial resuscitation of the pediatric burn patient, computing fluid volumes according to the amount of BSA burned and degree of burn.
3. Distinguish burn injuries that require an escharotomy from those requiring debridement.
4. Develop a plan for optimal treatment using burn wound dressings and topical antibiotics.

## **Clinical and Practice Updates I (Module 3) – Credit Hours: 3.5**

### **Chapter: Interactive Case: Use of Intravenous Lipid Emulsion in Poisoning**

#### **Learning Objectives**

1. Distinguish ILE use for intravenous poisoning versus oral poisoning and local anesthetics versus non-local anesthetics.
2. Evaluate current recommendations for ILE use in local anesthetics and non-local anesthetics poisoning, according to the literature that supports each recommendation, to determine the available literature supporting each recommendation.
3. Account for known laboratory interferences and adverse clinical effects documented after ILE use in the care of poisoned patients.
4. Evaluate the benefit-risk for the dosing of ILE and justify its use in current practice.

### **Chapter: Recorded Webcast: Medication Errors**

#### **Learning Objectives**

1. Classify the most common types of medication errors in pediatrics.
2. Analyze the medication use process for high risk practices in both inpatient and outpatient settings.
3. Evaluate systems that may mitigate medication errors by trending data or by triggers.
4. Justify implementation of potential solutions to decrease medication errors in pediatric patients.

### **Chapter: On-demand Webcast: Adolescent Suicide and Substance Abuse**

#### **Learning Objectives**

1. Identify risk factors that contribute to risk-taking behavior and the increasing incidence of suicide in adolescents
2. Evaluate evolving drug abuse trends in the adolescent population.
3. Assess for the commonly abused psychoactive substances in the adolescent population.
4. Justify the pharmacist's role in identifying, monitoring, and providing supportive services to the adolescent population.