Implementation of a Quality Improvement and Outcome Program in an Urban Hospital System. **PD**

*Elizabeth Diep, MSN, RN, Kaiser Permanente, Pasadena, CA*
*Donald Shaul MD, Joyce Crocker RN and Mark Lindberg*

Among the pediatric surgical facilities, there are few who participate in a formal quality improvement and surgical outcome registry. We seek to describe the processes, challenges, and successes of our facility in participating in the ACS NSQIP Pediatric registry. As the exemplary facility, we spearhead many efficiency processes to mitigate the financial and resource burden for participating in a quality program. Our efforts would be duplicated and served as a diving board for our sister facilities who are looking to participate. We are in the unique position of creating and establishing processes so that others may follow our example. We understand that our journey to implementing a quality improvement program is not unique and that many pediatric surgical centers face the same barriers and challenges in providing reliable and accurate outcomes data.

1. Identify the barriers in starting and participating in a quality improvement program.
2. Identify tools and strategies for successful implementation of a Peds NSQIP program
3. Discuss potential benefits of having a formal quality improvement program and outcomes data.

Improving OR Start Times - The Role of the Pediatric Perioperative NP. **PD**

*Karen Capusan, MSN, CPNP-PC, Cohen Children’s Medical Center, New Hyde Park, NY*
*Melissa Duffy, MSN, CPNP-PC*

The Pre-Surgical Testing (PST) program at Cohen Children’s Medical Center launched in 2012. We evaluate approximately 7,000 patients per year who are scheduled for outpatient and inpatient surgeries from all pediatric surgical services. The PST program providers are pediatric and family nurse practitioners. The combination of clinical knowledge and experience makes NPs uniquely qualified to identify high risk patients scheduled for surgery. Other institutions may consider NPs in their postoperative areas to improve OR start times and more generally patient safety.
1. Learn the history of the development of nurse practitioners.
2. Learn about the unique roles nurse practitioners participate in.
3. Identify how nurse practitioners can improve patient safety in the perioperative period.

10:40 AM – 10:50 AM  
**Maternal Characteristics of Children Admitted in Surgical Ward. PD**  
*Mamatha Pai, PhD, Manipal College of Nursing, Manipal, India*

Children with various diseases get admitted to the pediatric surgery ward. Depending on the severity of the illness children are being treated. Even though there is the use of modern technologies in the treatment of the surgical conditions, the role of maternal factors in the etiology of the disease is still not clear. Genetic and environmental factors were reported as the risk factors for some of the diseases. However, the data in the developing country is limited. This study is aimed to study the maternal characteristics of children with surgical conditions.

1. Explain the maternal characteristics of children with surgical condition.
2. Outline the health status of the mothers during pregnancy.
3. Enumerate the medications taken by the mother during pregnancy.

10:50 AM – 11:00 AM  
**The Perioperative Experience of Pediatric Patients with Autism Spectrum Disorder at Boston Children’s Hospital: A Parents Perspective. PD**  
*Danielle Perry, BSN, RN, CPAN, Boston Children’s Hospital, Boston, MA  
Debra Lajoie JD, PhD, MSN, RN*

The purpose of this qualitative study is to understand the experiences of parents of children with a diagnosis of ASD in the perioperative environment at BCH.

1. Identify strategies to improve the patient with ASD/parent experience in the perioperative environment
2. Identify ways to prepare perioperative setting to accommodate pediatric patients with ASD.
3. Identify the feelings/concerns of parents of children with ASD in the surgical setting.

11:00 AM – 11:10 AM  
**Development of an Evidence-Based Practice Guideline for Nurse Practitioner Led Outpatient Clinic (OPC) Initiation of Propranolol for Treatment of hemangiomas in Qatar…First in Middle East. PD**  
*Nanita Lim-Sulit, DNP, CPNP, Sidra Medicine, Doha, Qatar  
Collette Donnelly, MSc, BSC, RN, Dip N, Post Grad Diploma, APNP,  
Cathy Clarkson, Reeanna Alianza, RN, BSN Laura O’shea, RGN, RCN, BSc in General Nursing (hons), Higher Diploma in Children’s Nursing  
Rosalie Tolentino, RN, BSN*
Infantile hemangiomas are common benign tumors occurring in the endothelial lining of blood vessels, often forming a red birthmark in children. The behavior of each individual hemangioma is unpredictable. Some may disappear with treatment, and some may disappear on their own. Medical treatment can shrink some of these birthmarks. Propranolol has become the preferred first-line medical treatment for hemangiomas. The ability to apply the philosophical prospective of change to projects goals and theory into practice is necessary when nursing discipline uses the expanding knowledge of EBP guideline to have change in practice.

The learner will be able:
1. To provide an overview of the best practice management of hemangioma worldwide.
2. To present the Sidra Medicine OPC way to treat hemangioma in comparison to other Qatar facilities
3. To provide an opportunity to view statistics & photographs of hem

11:10 AM – 11:20 AM Exploration Level of an Adolescent’s Decision to Pursue Bariatric Surgery: A Systematic Review. PD

Marya Garcia, DNP, RN, PCNS-BC Children’s Health, Dallas, TX
Jennifer L. Watt, MSN, RN, CNS, CNRNN

There is a limited understanding of an adolescent’s decision to pursue bariatric surgery. This review seeks to gain further insight into an adolescent’s motivation to pursue bariatric surgery as a treatment for their obesity.

1. The purpose of this activity is to enable the learner to discuss bariatric surgery for adolescents
2. The purpose of this activity is to enable the learner to describe various motivations to lead an adolescent to pursue bariatric surgery.
3. The purpose of this activity is to enable the learner to verbalize the need for future research.

11:20 AM – 11:30 AM Rectal Bleeding in a 15-month-old Child - Findings and Implications. PD

Danuta (Donna) Nowicki, RN, MN, CPNP/PC, Children’s Hospital Los Angeles, Los Angeles, CA
Dean Anselmo, MD, Joseph M. Miller, MD, Lori K. Howell, MD, Chadi Zeinati, MD

Pediatric Surgical providers are often involved in the Identification and Treatment of AVMs dependent on the location of the lesion. Initial evaluation of these anomalies requires an understanding of the lesion, its pathogenesis, and clinical course of the disease. Being familiar with the classification system for these anomalies also lends to identification of possible associated lesions which may change the course of treatment. Understanding diagnostic modalities prevents the ordering of unnecessary imaging and streamlines the work-up for these patients. Familiarity with the genetic component of this anomaly facilitates appropriate referral to specialized centers as well as guides surveillance for these children and counseling for their families.
1. The audience will be able to describe and list pathogenesis of AVMs.
2. The audience will be able to list and discuss current radiologic methods and concurrent genetic evaluation for diagnosing AVMs.
3. The audience will be able to list 2 current treatment modalities for AVMs.

11:30 AM – 11:40 AM

Implementation of a Standardized Pathway to Treat Pediatric Acute Perforated Appendicitis to Decrease Length of Stay and IV Antibiotic Exposure. PD

Meghan Faulkner, CPNP-AC, Robert Wood Johnson University Hospital, New Brunswick, NJ
Courtney Resciniti, RN, MSN, CPNP-AC

Treatment of perforated appendicitis continues to vary from surgeon to surgeon, as well as institution to institution. The treatment of these patients remains an ongoing hot topic in the pediatric surgical literature. In order to standardize the treatment plan of these patients in our institution we have developed and implemented a perforated appendicitis pathway and protocol.

1. Identify patients appropriate for perforated appendicitis pathway based on clinical presentation and data, as well as operative findings.
2. Discuss subjective and objective physical exam findings pertinent to deciding for patient discharge.
3. Determine those patients at risk for developing complications related to perforated appendicitis, including abscess, sepsis, and ileus.

11:40 AM – 12:00 PM

A Walk Through Time - Pediatric Surgical Nursing History

Raquel Pasarón, DNP, APRN, FNP-BC, Nicklaus Children’s Hospital, Miami, FL
Ellen O’Donnell, MSN, RN, CPNP-PC

This session describes the history of pediatric surgical nursing with a focus on the struggles in attaining specialty status. There is a general lack of historical knowledge and publications regarding the unique history of pediatric surgical nursing.

1. Describe the history of pediatric surgical nursing and how the role has evolved over the years.
2. Recount the historical development of pediatric surgery as a separately recognized surgical specialty and how this is interrelated with pediatric surgical nursing.
3. Discuss APSNA’s role in the future of pediatric surgical nursing.