Pennsylvania Coalition of Nurse Practitioners
Annual Education Conference

Oct. 23, 2020
PCNP is the state organization that promotes and protects the practice of over 15,000 Certified Registered Nurse Practitioners (CRNPs) in Pennsylvania. Formed in the 1980’s by only 3 forward thinking NPs, PCNP now has 17 regional groups across the Commonwealth! Each regional group offers networking opportunities and has a representative on the PCNP Executive Board that meets quarterly to discuss issues and set organizational goals. Member dues are used to support our central office, executive staff and maintain a Government Relations Specialist who represents us in Harrisburg.

What is the PCNP Annual Conference?

The Pennsylvania Coalition of Nurse Practitioners holds an annual conference targeted at providing NPs in Pennsylvania with quality educational and networking opportunities to enhance their careers and grow professionally. Using a mix of national speakers and member experts, the conference features timely topics in healthcare and practice.

This year’s event will be virtual!

PCNP proudly offers the largest nurse practitioner educational conference in the state, and is dedicated to providing a dynamic event for attendees.

Course Objectives

Following the program, the participant will be better able to:

• Integrate evidence-based knowledge into clinical practice.
• Apply current pharmacotherapeutics into clinical practice.
• Verbalize understanding of current policies affecting NPs both regionally and nationally, including how to effect change.

Accreditation/Continuing Education

This education activity will be submitted to the American Association of Nurse Practitioners for approval.
Why Attend?

1. Earn Continuing Education Credits for the required hours of recertification.
2. The 2020 PCNP Virtual Conference comes at a reduced cost -$50 - save yourself time and money when attending this year!
3. Access from anywhere - no need to travel or leave your home. PCNP will come right to your home, virtually!
4. Ensure you never miss a session or a handout - all the materials are available to you.
5. If you miss this one, you’ll have to wait a WHOLE YEAR for the next PCNP conference!
6. You can attend in your pajamas. A virtual conference is the ultimate “come as you are” experience!

What Do Past Attendees Say?

- Excellent conference with exceptional speakers.
- This conference has a great variety of current topics with knowledgeable speakers from all over!
- As an NP student, attending the PCNP conference has given me the opportunity to network with experts!
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tr>
<td>9:00 a.m.</td>
<td>Opening Remarks</td>
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<td>Adele Caruso, DNP, CRNP, FAANP</td>
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<td>9:10 a.m.-10:30 a.m.</td>
<td>Business Meeting and Awards; Pennsylvania is Ready: Going Forward</td>
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<td>Adele Caruso, DNP, CRNP, FAANP</td>
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<td>10:35 a.m.-11:35 a.m.</td>
<td>Keynote: Value-Added of Nurse Practitioner Care: New Research Findings</td>
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<td>Linda Aiken, PhD, FAAN, FRCN</td>
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<td>11:40 a.m.-12:40 p.m.</td>
<td>Lessons Learned During COVID-19</td>
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<td>Amesh Adalja, MD</td>
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<td>12:40 p.m.-1:10 p.m.</td>
<td>Break</td>
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<td>1:10 p.m.-2:10 p.m.</td>
<td>Lipid Update 2020: Current Guidelines and the Best is Yet to Come</td>
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<td>Caroline deRichemond, MSN, CRNP, CLS, FNLA</td>
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<td>2:15 p.m.-3:15p.m.</td>
<td>Cancer Survivorship Diagnosis and Treatment Effects Across Healthcare Settings</td>
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<td>Kathleen Sacharian, MSN, CRNP, AOCNP</td>
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<td>3:20 p.m.-4:20 p.m.</td>
<td>Parkinson’s Disease: More than Just Tremors</td>
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<td>Kathleen Gray, DNP, FNP-C</td>
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<td>4:25 p.m.-5:25 p.m.</td>
<td>Clinical Skills are Not Enough: Empowering Nurse Practitioner Leadership</td>
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<td>Michelle Kelly, PhD, CRNP, CNE</td>
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## Conference Schedule
### Bonus Recorded Sessions

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<tr>
<th>Rapid Fire Sessions</th>
<th>Recorded Full Sessions</th>
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<tr>
<td><strong>Sepsis 2020: Evidence-Based Management of Adult Sepsis and Septic Shock</strong> Jane Guttendorf, DNP, CRNP, ACNP-BC, CCRN</td>
<td><strong>2020 Pediatric Immunizations: Current Guidelines and Updates</strong> Allyson Favuzza, DNP, CRNP, FNP-C</td>
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<td><strong>MRI of the Prostate: Role in the Diagnosis and Management of Prostate Cancer</strong> Adele Caruso, DNP, CRNP, FAANP</td>
<td><strong>Preeclampsia in Pregnancy: Overview and Acute Management of Eclamptic Seizure</strong> Robert Bauer, RN, MSN, CRNP, AG-ACNP-BC</td>
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<td><strong>Is PrEP Right for You? The Basics of HIV Pre-exposure Prophylaxis</strong> Crystle Harcar, DNP, NP-C</td>
<td><strong>Care and Management of the Transgender and Non-Binary Patient in the Primary Care Setting</strong> Dane Menkin, CRNP</td>
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<td><strong>9/11 World Trade Center Illnesses: An Overview of Certified WTC-Related Health Conditions, WTC Health Program and the Victim Compensation Fund</strong> Jean Marie Osborne, DNP, ANP-C</td>
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<td><strong>Identifying Interactions between Prescription Medications and Herbal Supplements</strong> Lorraine Bock, DNP, CRNP, FAANP</td>
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<td><strong>Self Preservation of the Healer</strong> Jennifer DiMedio, DNP, CRNP, FNP-BC</td>
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<td><strong>Using Malpractice Claims Data to Identify Risks in NP Practice</strong> Jennifer Flynn</td>
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<td>Poster Sessions</td>
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<td><strong>Implementation of a Comfort Menu after Total Knee Arthroplasty</strong></td>
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<td>Linda Lee, DNP</td>
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<td><strong>At Your Cervix: Pearls of Clinical Practice</strong></td>
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<td>Nicole Dreibelbis, MSN, WHNP-BC</td>
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<td><strong>Understanding Mitochondrial Disease in Children and Adults</strong></td>
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<td>Beth Heuer, DNP, CRNP, CPNP-PC</td>
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<td><strong>The Impact of Caring: Elevating Nursing Professionals to Impact and Improve Outcomes</strong></td>
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<td>Anne Dabrow Woods, DNP, RN, CRNP, ANP-BC, AGACNP-BC, FAAN</td>
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<td><strong>Telehealth, Entrustable Professional Activities, and Core Competencies in Nurse Practitioner Education</strong></td>
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<td>Kathleen Sheikh, Ph.D, FNP-BC, CNE</td>
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<td><strong>Preventing Anthracycline-Induced Cardiotoxicity: The Effect of Angiotensin-Converting Enzyme Inhibitors</strong></td>
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<td>Catherine Kobza, BSN, RN, CCRN</td>
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<td><strong>Increasing College Students’ Access to Screening for Sexually Transmitted Infections</strong></td>
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<td>Gretchen Kenny-Bernatowicz, DNP, CRNP</td>
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<td><strong>Low Back Pain in Pancreatic Cancer</strong></td>
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<td>Brande Dietrich-McLean, MSN, FNP-C, DNP</td>
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<td><strong>Utilizing Bronchial Hygiene Measures to Reduce Mucus Plugging in Ventilated Patients</strong></td>
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<td>Janice Schuld, MSN, CRNP, ANP-BC, CRRN</td>
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<td><strong>When Safety Leads to Harm: Paradigm Shifts in COVID-19 Ventilation</strong></td>
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<td>Angela Wang, MSN, AGACNP-BC, CCRN</td>
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Session Information

Keynote: Value-Added of Nurse Practitioner Care: New Research Findings
Linda Aiken, PhD, FAAN, FRCN
Our keynote sessions this year will lead participants to become informed about advances in research on the value-added of nurse practitioner care. Participants will also consider how new research findings can be used to inform better policy and decision-making.

Lessons Learned During COVID-19
Amesh Adalja, MD

Lipid Update 2020: Current Guidelines and the Best is Yet to Come
Caroline deRichemond, MSN, CRNP, CLS

Level of Understanding: Intermediate
The Multi society Guideline on the Management of Blood Cholesterol from the American College of Cardiology and American Heart Association, was published in 2018. It updates the 2013 guidelines and emphasizes a more intensive approach based on recent controlled studies and expert consensus. The guideline endorses a heart-healthy lifestyle beginning in childhood to reduce lifetime risk for ASCVD. For secondary prevention, patients at very high risk may be candidates for adding non-statin medications ezetimibe or PCSK9 inhibitors to statin therapy. The AHA/ACC risk calculator first triages patients into 4 risk categories. Those at intermediate risk deserve a focused clinician-patient discussion before initiation of statin therapy. Among intermediate-risk patients, identification of risk-enhancing factors and coronary artery calcium testing can assist in the decision to use a statin. The new guideline gives more attention to percentage reduction in low-density lipoprotein cholesterol as a treatment goal and to long-term monitoring of therapeutic efficacy.

Cancer Survivorship Diagnosis and Treatment Effects Across Healthcare Settings
Kathleen Sacharian, MSN, CRNP, AOCNP | Susan Zuk, MSN, CRNP, AOCN

Level of Understanding: Intermediate
Almost 17 million people in the United States are considered cancer survivors, which for this presentation includes adult survivors of childhood cancers, adults living with cancer, and those who completed cancer treatment. For these patients, cancer, and its treatment effects, create many comorbidities. As the number of cancer survivors rises, it is imperative that NPs be familiar with the sequelae of specific cancers and their treatment, as well as the management of late and chronic side effects. It is especially important as we continue to develop our understanding of long-term needs of cancer survivors given the continuous, frequent advances in cancer therapies. We will discuss clinical trends in cancer care that influence survivorship care in all settings. Topics include surveillance for recurrence, screening for new cancers, risk reduction strategies, psychosocial, financial, and the wide range of physical effects from cancer and its treatment and strategies to coordinate care across settings.
Parkinson’s Disease: More than Just Tremors
Kathleen Gray, DNP, FNP-C
Level of Understanding: Intermediate
Parkinson’s Disease (PD) was first described in 1817 by an English physician named James Parkinson in a pamphlet titled “An Essay on Shaking Palsy.” Parkinson’s Disease is a chronic, progressive, neurologic disorder characterized by motor and non motor symptoms. The pathogenesis of the disease involves the degeneration of dopaminergic neurons in the substantia nigra. The number of PD cases in individuals greater than 50 years continues to increase with an average age of onset at 60 years of age. The direct and indirect costs associated with PD exceed $20 billion annually in United States. The medication costs average $2500 annually. In addition, 2%-7% of individuals in long-term care settings have a diagnosis of PD Nurse practitioners (NP) who work in long-term care primary care and geriatrics will care for this patient population and need to have knowledge about the special needs of patients with PD.

Clinical Skills are Not Enough: Empowering Nurse Practitioner Leadership
Michelle Kelly, PhD, CRNP, CNE
Level of Understanding: Intermediate
Professional nursing organizations have identified leadership skills as an essential for the current health care environment. The Nurses on Boards Coalition views nurse involvement at the community, local, state and national level as critical to improving the health of our nation. Nurse practitioners are uniquely placed to influence population health through patient health advocacy, and development of public policy. Nurse Practitioners are active in leadership roles in health care organizations. To do this successfully, nurse practitioners need socialization to leadership skills, advocacy training and role mentoring. Leadership as a component of our professional role development may be deemphasized by educators focused on assuring clinical excellence, yet today’s health systems expect this skill nurse practitioners. This presentation will provide an overview of leadership theory and skills relevant to practicing nurse practitioners. Examples and suggested methods for enhancing leadership socialization in nurse practitioners of all levels and specialties will be highlighted.

Sepsis 2020: Evidence -Based Management of Adult Sepsis and Septic Shock
Jane Guttendorf, DNP, CRNP, ACNP-BC, CCRN
Level of Understanding: Intermediate
This session will present an evidence-based approach to the diagnosis and management of sepsis and septic shock. We will review the epidemiology of sepsis to highlight the impact of sepsis locally, nationally and globally. We will review principles of pathophysiology particularly as it pertains to treatment. Diagnostic standards will include identification and evaluation of clinical criteria for the diagnosis of sepsis and septic shock, and defining organ dysfunction. We will define the current evidence-based treatment guidelines for sepsis and septic shock. This acute care session primarily targets participants with interest in management of acute and critically ill patients in urgent care, emergency departments and acute care settings. However, sepsis is widespread, often affecting patients before in-hospital care is initiated; and sepsis carries a significant burden of morbidity and mortality, making this content applicable to APRNs across a wide-range of inpatient and pre-clinical settings.
Session Information

**MRI of the Prostate: Role in the Diagnosis and Management of Prostate Cancer**
Adele Caruso, DNP, CRNP, FAANP  
*Level of Understanding: Advanced*

MRI with and without targeted-biopsy is an alternative to standard trans-rectal US guided-biopsy for prostate cancer detection and is utilized in the form of MRI Fusion prostate biopsies. One study showed superiority in detection of clinically significant prostate cancer with MRI targeted-biopsy group, 38% versus 26% in the standard-biopsy group. Therefore, use of MRI in risk assessment with an elevated PSA before biopsy and MRI targeted-biopsy was deemed superior to the current standard. The role of MRI of the prostate is emerging in the management strategy of active surveillance for prostate cancer. However, whether prostate MRI can be used as substitute for a biopsy is not proven. Research regarding MRI-BIRADS score assignment and MRI stability over time was not predictive for disease progression. If the biopsy would have been omitted, approximately 33% of higher-grade cancers would be missed when assessing for disease progression. Presently, repeat biopsy remains the standard.

**Is PrEP Right for You? The Basics of HIV Pre-exposure Prophylaxis**
Crystle Harcar, DNP, NP-C  
*Level of Understanding: Intermediate*

There were an estimated 1.1 million people in the United States with HIV at the end of 2012. Approximately 14%, or 1 in 7, did not know they had HIV. There has been great progress in the prevention and treatment of HIV, however there is still much to be done.

There are currently two FDA approved medications for the prevention of HIV, Truvada and Descovy. When taken correctly, pre-exposure prophylaxis is highly effective in the prevention of HIV. Studies have shown that PrEP has been able to reduce the risk of getting HIV from sex by 99% if taken correctly. Studies have also shown PrEP has decreased chances of getting HIV from injection of drugs by 74% when taking correctly. It is important for healthcare providers to understand the efficacy, risks, side effects, and usage of PrEP in order to help decrease the percentage of people becoming infected with HIV.

**2020 Pediatric Immunizations: Current Guidelines and Updates**
Allyson Favuzza, DNP, CRNP, FNP-C  
*Level of Understanding: Intermediate*

This session will provide an overview of the pediatric immunization schedule as set forth by the Advisory Committee on Immunization Practices (ACIP). Recent updates for 2020 and current evidence will be discussed. Nurse practitioners will be charged with improving immunization practices in their local communities. Collaborative methods to overcome barriers such as access to care and ability to pay will be addressed. Attendees will also gain necessary skills to approach vaccine hesitancy.

**Preeclampsia in Pregnancy: Overview and Acute Management of Eclamptic Seizure**
Robert Bauer, RN, MSN, CRNP, AG-ACNP-BC
Session Information

Level of Understanding: Intermediate
Preeclampsia complicated 2-8% of pregnancies globally. In United State, rate of preeclampsia was at 25% from 1984-2004. Across the world in developing countries maternal death from preeclampsia is 26% (Latin American and Caribbean) and 9 % (Africa and Asia). Bedside maternal death complications from preeclampsia and hypertensive disorders in pregnancy can vary from fetal demise to effects on various organ systems of the maternal body (Vascular, Hematological, Renal and Hepatic). Eclamptic seizure is among the more severe disorders of the disease of preeclampsia. It is the convulsive manifestation. This lecture will provide and overview of the different types of hypertensive disorders in pregnancy, diagnostic criteria, pathophysiology, organ specific changes, management in preeclampsia, as well as acute management of the eclamptic patient.

Care and Management of the Transgender and Non-Binary Patient in the Primary Care Setting
Dane Menkin, CRNP
Level of Understanding: Introductory
This session is for any clinician or future clinician with an interest in providing gender-affirming care to trans and non-binary patients. There will be a brief fundamental review of terminology with the majority of the session spent on how to prescribe and manage transgender patients.

9/11 World Trade Center Illnesses: An Overview of Certified WTC-Related Health Conditions, WTC Health Program and the Victim Compensation Fund
Jean Marie Osborne, DNP, ANP-C
Level of Understanding: Intermediate
September 11th, 2020 marks the 19th anniversary of the deadliest terrorist attack on U.S. soil. It is estimated that approximately 400,000 were exposed to toxins at ground zero and as a result of those exposures have developed 9/11 related illnesses. To date, the federal government has deemed 68 cancers to be directly related to September 11th terrorist attacks, along with many other illnesses and by the end of 2019 well over 10,000 people were diagnosed with a 9/11-related cancer. This program will provide an overview of the WTC program, the James Zadroga 9/11 Health and Compensation Act, Enrollment Process, Certified Conditions, Locations of Clinical Centers of Excellence and/or the Nationwide Provider Network, Medical Monitoring, Victims Compensation Fund, and Related Research Findings.

Identifying Interactions between Prescription Medications and Herbal Supplements
Lorraine Bock, DNP, CRNP, FAANP
Level of Understanding: Introductory
Over $20 billion dollars is spent annually by consumers in the US to buy herbs, supplements, vitamins and mineral in the hopes of improving their health or avoiding having to take traditional medications. The belief is that since these products are “natural” that there is less risk and harm when taken. Unfortunately, these non-pharmaceuticals are not harmless and when combined with prescribed medications can put patients at high risk for interactions and untoward side effects. This presentation will talk about the most commonly used supplements, their uses, potential side effects, and what the potential interactions can be when used in
conjunction with some of the most commonly prescribed medications.

**Self Preservation of the Healer**
Jennifer DiMedio, DNP, CRNP, FNP-BC

*Level of Understanding: Introductory*

This session delves into the complexity of what it means to be a nurse practitioner in a healing profession. We dissect the daily expectations of the nurse practitioner, the demands of the financially driven healthcare industry, and how overextending ourselves can negatively affect our overall well-being, resulting in burnout. We will discuss strategies to navigate, empower, and preserve our spiritual, emotional, and physical well-being and translating wisdom into caring for patients, families, and peers. We will gain new perspectives on our role of preserving the healer. Dr. Jennifer DiMedio’s personal and professional journey provides insight and thoughtful considerations to support you in your nurse practitioner career.
### Speaker Information

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<tr>
<th>Name</th>
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<tr>
<td><strong>Linda Aiken,</strong> PhD, FAAN, FRCN</td>
<td>Currently employed as a professor at the University of Pennsylvania School of Nursing. Linda is the Director of the Center for Health Outcomes and Policy Research.</td>
<td>Conducting primary research outcomes of nurse practitioner care.</td>
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<td><strong>Amesh Adalja,</strong> MD</td>
<td>Dr. Adalja is a Senior Scholar at the Johns Hopkins University Center for Health Security. His work is focused on emerging infectious disease, pandemic preparedness, and biosecurity.</td>
<td>Tasked with developing guidelines for the treatment of plague, botulism, and anthrax in mass casualty settings and the system of care for infectious disease emergencies and as an external advisor to the New York City Health and Hospital Emergency Management Highly Infectious Disease training program, as well as on a FEMA working group on nuclear disaster recovery. He is currently a member of the Infectious Diseases Society of America’s (IDSA) Precision Medicine working group and is one of their media spokespersons; he previously served on their public health and diagnostics committees. He is a graduate of the American University of the Caribbean School of Medicine, and he obtained a bachelor of science degree in industrial management from Carnegie Mellon University. Dr. Adalja is a native of Butler, Pennsylvania, and actively practices infectious disease, critical care, and emergency medicine in the Pittsburgh metropolitan area, where he also serves on the City of Pittsburgh’s HIV Commission and on the advisory group of AIDS Free Pittsburgh.</td>
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<td><strong>Robert Bauer,</strong> RN, MSN, CRNP, AG-ACNP-BC</td>
<td>Currently employed in the Department of Critical Care Medicine of UPMC and works primarily at UPMC Magee Women’s Hospital Adult Medical, Surgical and OB ICU. A member of a 5 APP 24/7 covered ICU service. Has been working there since July 2016. Previous NP Roles at UPMC McKeesport with Hospitalist Medicine and Emergency Medicine. BLS/ACLS Instructor. Member of Magee Rapid Response Team Committee. Enrolled in University of Pittsburgh DNP program.</td>
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<td><strong>Lorraine Bock,</strong> DNP, CRNP, FAANP</td>
<td>Dr. Bock is a dynamic speaker who has been presenting her expertise to the healthcare community for more than 20 years. She excels in motivating practitioners to move outside their comfort zone and learn new methods for helping patients optimize their health and be comfortable in their own skin. She earned her NP certification at the University of Pennsylvania and her DNP at Robert Morris University. She served at the first Director of Legislative Health Services for the Pennsylvania General Assembly and is the PCNP Immediate Past President. Her expertise comes from working in the field for more than 20 years and studying with some of Pennsylvania’s most respected experts in the field of herbal medicine and complimentary alternative healthcare.</td>
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Speaker Information

Adele Caruso, DNP, CRNP, FAANP

Adele Caruso is a Penn Provider with a special focus in Urologic Oncology, specifically, renal, bladder, prostate and testis cancers. In clinical practice, Dr. Caruso is acknowledged for work on a shared decision-making model for small renal masses, bladder cancer therapies and QI initiatives. She is an author for the genitourinary chapter on bladder cancer published by the Society for Urologic Nurses, SUNA Core Curriculum for Urologic Nursing and upcoming chapter on chemoradiation in Chemotherapy and Immunotherapy in Urologic Oncology: A Guide for the APP. She represents an advanced practice voice as an author for the Urology Times, a national publication. Dr. Caruso is PCNP’s President, our organization which promotes and protects the practice for more than 15,000 NPs and leading the charge for Full Practice Authority. She works tirelessly on this initiative and others to remove barriers to NP practice, advance the NP profession and improve access to quality healthcare.

Jennifer DiMedio, DNP, CRNP, FNP-BC

Jennifer E. (Mento) DiMedio DNP, CRNP, FNP-BC is a nationally-certified family nurse practitioner specializing in family practice and adult and pediatric hospice/palliative care. She is a graduate of The Chester County Hospital School Of Nursing class of 1992, earned her Bachelor of Science in Nursing from Immaculata University, her Master of Science in Nursing/Family Nurse Practitioner certification from Wilmington University in 1999 and earned her Doctorate of Nursing Practice from Maryville University in 2015. She is a clinical associate in the Department of Biobehavioral and Health Sciences for the University Of Pennsylvania School Of Nursing, previously served as adjunct faculty for Immaculata University Graduate Nursing Department, and contributor and editor for Springhouse and W.B. Saunders publishing. She has been practicing as a Family Nurse Practitioner for over 21 years. Before becoming a family nurse practitioner, she worked as a registered nurse in the areas of medical-surgical Hematology/Oncology and the Emergency Department.

Caroline deRichemond, MSN, CRNP, CLS

Caroline deRichemond, MSN, CRNP, CLS is an Advanced Practice Provider with Geisinger Cardiology in Northeastern Pennsylvania. She is a board certified Clinical Lipid Specialist Diplomate, Accreditation Council for Clinical Lipidology. She is appointed to Northeastern Regional Board Member of the National Lipid Association and also serves on the National Lipid Association Cardiovascular Imagine Committee.

Weekly she sees patients in the Lipid Clinic in Geisinger Northeast. She is part of the system wide Lipid working group, working closely with the Genomics Center with patients who have been diagnosed with inherited lipid disorders. The balance of her time is seeing Cardiology patients in the outpatient clinic and inpatient setting.
Speaker Information

Allyson Favuzza, DNP, CRNP, FNP-C  
Dr. Allyson Favuzza currently practices as a nurse practitioner in pediatric primary care. Her career is deeply rooted in her experience with underserved populations at community health centers. As the medical director of the first in the nation NCQA recognized School-Based Medical Home, she was instrumental in the successful implementation of school-based immunization clinics. Dr. Favuzza served as the lead clinician providing immunizations to thousands of students, many of whom were severely underimmunized or unimmunized completely. Dr. Favuzza has extensive experience with pediatric immunization administration including provision of catch-up vaccinations to refugee populations. Her doctoral research was focused on increasing the uptake of the human papillomavirus vaccine in primary care settings. Dr. Favuzza believes that proper education of both patients and clinicians is key to decrease vaccine hesitancy and expand immunization coverage rates.

Kathleen Gray, DNP, FNP-C  
Dr. Kathleen Gray is an Associate Professor at Jefferson College of Nursing, DNP Program. She has 20 years of experience in family medicine and works currently for St. Luke’s Star Wellness Clinic in Bethlehem, PA. Her clinical experience is as a family nurse practitioner in the care of patients across the lifespan. In her practice she manages patients with multiple complex chronic disease states and strives to keep patients stable while optimizing their quality of life. Dr. Gray was a 2019 Edmond J. Safra Visiting Nursing Scholar at the Parkinson’s Foundation. She completed 50 hours of training in the management of Parkinson’s disease at the University of Pennsylvania Movement Disorder Clinic in Philadelphia, Pennsylvania. She lives with her husband, has three grown daughters and three grandchildren. She enjoys tennis and golf and going to the beach.

Jane Guttendorf, DNP, CRNP, ACNP-BC, CCRN  
Dr. Jane Guttendorf is an acute care nurse practitioner, and a faculty member at the University of Pittsburgh, School of Nursing, where she currently serves as Coordinator of the Adult-Gerontology ACNP Program. She has been working in critical care since she began as a staff nurse, and have held roles including clinical educator and clinical nurse manager before focusing my career as an Acute Care Nurse Practitioner. As an ACNP, I spent 4 years with the inpatient Cardiology service at UPMC Presbyterian, and the last 20 years in Critical Care Medicine. I maintain an active clinical faculty practice as an acute care nurse practitioner with the University of Pittsburgh, Department of Critical Care Medicine, working in the Surgical and Cardiothoracic ICUs at UPMC Presbyterian. My clinical interests include cardiovascular, thoracic and surgical critical care; heart and lung transplantation; respiratory failure, ECMO, management of multi-system organ dysfunction, sepsis, and shock.
**Crystle Harcar, DNP, NP-C**

My name is Crystle Harcar. I have been a nurse since 2006, obtaining my ASN first, followed by my BSN in 2008 from La Roche University (previously La Roche College). I went on to obtain my Doctor of Nursing Practice in Family Nurse Practitioner from Robert Morris University in 2013 and my Masters in Nursing Education in 2019, also from Robert Morris University. I have worked in women’s health for the past 13 years. I currently work at Adagio Health, which provides reproductive health care and prenatal services as well as STI screening and treatment services for men and women.

**Dane Menkin, CRNP**

Dane is a family nurse practitioner who is nationally recognized for providing LGBTQ care with a focus on gender-affirming care for trans and non-binary children, adolescents and adults. He is the recipient of the 2019 AANP award for excellence for PA. He is a member of WPATH and serves on the Board of Directors of The Jim Collins Foundation.

**Michelle Kelly, PhD, CRNP, CNE**

Dr. Kelly is a pediatric and neonatal nurse practitioner whose research focuses on the health and neurodevelopmental outcomes of children born preterm. Her publications and national professional presentations demonstrate her passionate advocacy for supporting the future health of children born preterm and increasing health care provider understanding of the health issues of this population. She has held executive board positions in the Pennsylvania Delaware Valley Chapter of NAPNAP, and the Alpha Nu Chapter of Sigma Theta Tau International. Dr. Kelly coordinates the pediatric nurse practitioner program at the M. Louise Fitzpatrick College of Nursing.

**Jean Marie Osborne, DNP, ANP-C**

Dr. Osborne is an Associate Professor at The Barbara H. Hagan School of Nursing at Molloy College in Rockville Centre, NY. She has been associated with Molloy College as a faculty member since 2007. She started her educational pursuit in 1994 at Molloy College in Rockville Centre, NY earning a Bachelors of Science in Nursing. She obtained her Master’s of Science as an Adult Nurse Practitioner in 2007, a Post Masters Certificate in Nursing Education in 2012 and a Doctorate of Nursing Practice from Case Western Reserve University in Cleveland, Ohio in 2016. Dr. Osborne has continually been Board Certified since 2007 and is currently practicing as an Adult Nurse Practitioner in Brooklyn, NY for the New York City Fire Department (FDNY) as a City Medical Specialist for the World Trade Center Cancer Care Division of the Bureau of Health Services.
Kathleen Sacharian, MSN, CRNP, AOCNP

With over 18 years of oncology nursing experience in both academic and community healthcare settings, Kathleen has worked as an oncology staff nurse, research nurse, and nurse practitioner. She developed a successful, best practice recommended NP-led, consultative Cancer Survivorship Program at Main Line Health where she implemented a novel process to create personalized Survivorship Care Plans which significantly reduced preparation time by the clinician. She has participated in her institutions Cancer Committee, Breast Leadership Committee, and is a member of the National Cancer Survivorship Provider Network. She works to promote for advocacy for the NP profession as part of her role as Oncology Clinical Specialist at the Oncology Nursing Society. At a time of frequent advances in oncology practice, she strives to enhance educational and professional development resources for nurse practitioners, as well as, encourage collaboration across healthcare roles and specialties to improve patient care.
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