

- **The Digital Clinician**

- **Presenter: Dipu Patel, DMSc, ABAIM, MPAS, PA-C** - Professor and Vice Chair for Innovation, Doctor of Medical Science Program, School of Health and Rehabilitation Sciences, University of Pittsburgh

Upon completion of this activity, participants should be able to:

- Evaluate current and emerging AI/digital health tools relevant to clinical practice.
- Analyze how these tools influence clinical decision-making, workflow efficiency, documentation processes, and patient-provider relationships.
- Implement strategies to integrate these tools into clinical practice while maintaining empathy, ethical standards, and clinical excellence.

- **Updates in Heart Transplant, VAD and Cardiogenic Shock**

- **Presenter: Amanda Hopwood-Brophy, MPAS, PA-C** - APP Surgical Supervisor, Cardiac Transplant and LVAD Programs, UPMC Heart and Vascular Institute, UPMC Presbyterian Shadyside

Upon completion of this activity, participants should be able to:

Cardiogenic Shock case Studies

- Apply lessons learned from cardiogenic shock management to evaluate and guide clinical decision-making in similar patient scenarios.
- Demonstrate effective and accurate documentation practices when managing patients in cardiogenic shock.
- Integrate current evidence-based approaches to bloodless medicine into the care of VAD/transplant patients.

Updates in cardiac transplant/VAD/cardiogenic shock

- Assess the role and clinical utility of satellite VAD/transplant evaluation clinics in optimizing patient access and care coordination.
- Interpret UPMC cardiac transplant and VAD program outcomes to inform quality improvement and clinical practice.

- **Theranostics**

- **Presenter: Jacqueline Ligorski, CRNP, FNP-BC, AGACNP-BC, AOCNP** - Oncology Radiation Oncology, Theranostics Program and Trial Coordinator, UPMC Shadyside

Upon completion of this activity, participants should be able to:

- Describe the principles, evolution, and clinical significance of theranostics in modern medical practice.
- Differentiate the indications, mechanisms of action, administration processes, radiation-safety considerations, and patient-education needs for the three FDA-approved medications used in the treatment of Prostate Cancer and Neuroendocrine Tumors (NET).
- Apply key programmatic considerations—including workflow planning, radiation-safety procedures, and integration of clinical trial protocols—when implementing or managing a clinical theranostics program.

- **Precepting Tips and Tricks**

Presenters:

Julie Dubis, DMSc, MPAS, PA-C - Director of Simulation, Assistant Professor and Clinical Coordinator, Physician Assistant Residential Program, School of Health and Rehabilitation Sciences, University of Pittsburgh

Hayden Mulligan, MPAS, PA-C - Assistant Professor, Physician Assistant Students Hybrid Program, School of Health and Rehabilitation Sciences, University of Pittsburgh

Upon completion of this activity, participants should be able to:

- Demonstrate the value of effective precepting by analyzing common barriers and selecting strategies to address them.
- Apply practical, time-efficient clinical teaching strategies to prepare and orient students, promote progressive learner growth, and deliver constructive, actionable feedback in real-world patient care settings.
- Implement approaches that support learner success and preceptor well-being by managing struggling learners effectively and utilizing available institutional preceptor support resources.

- **From Surviving to Thriving: A Review of Post Intensive Care Syndrome (PICS)**

- **Presenter: Kathryn Geary, MSN, FNP-C, CRNP** - Critical Illness Recovery Center, UPMC Mercy Health Center

Upon completion of this activity, participants should be able to:

- Analyze current trends in ICU survivorship to identify patterns that influence post-discharge outcomes.
- Define Post-Intensive Care Syndrome (PICS) and distinguish its core clinical features in critically ill patients.
- Evaluate the components and risk factors of PICS to determine patients at heightened risk for developing the syndrome.
- Implement evidence-based strategies to prevent PICS across the continuum of critical care.
- Describe the structure and function of Post-ICU clinics/Critical Illness Recovery Centers and assess their role in supporting ICU survivors.

- **Little People, Big Support: Demystifying Pediatric Palliative Care**

- **Presenter: Heather Valente, MSPA, PA-C** - Physician Assistant, Expert, Division of Palliative Medicine and Supportive Care, UPMC Children's Hospital of Pittsburgh

Upon completion of this activity, participants should be able to:

- Differentiate key components of pediatric palliative care and articulate its clinical importance in supporting patients and families.
- Identify and classify the four pediatric disease trajectories that warrant referral to pediatric palliative care.
- Assess the impact of pediatric palliative care on patients and their families and apply this understanding to guide clinical decision-making.

- **APP Life Without the Burn: Your Financial Freedom Roadmap**

Presenter: Carrie McMahon, MHPE, MPAS, PA-C- Assistant Professor, Shenandoah University, Founder of RX for Wealth

Upon completion of this activity, participants should be able to:

- Distinguish professional burnout by recognizing its common signs and evaluating contributing factors in healthcare settings.
- Analyze how financial stress contributes to burnout among APPs and assess its impact on professional well-being and performance.
- Implement effective financial strategies—including budgeting, debt elimination, and investing—to reduce money-related stress and support personal resilience.

- **Opioid Use and the Gut-Brain Axis**

Presenter: Ireland O'Brien, MPH, PA-S – Student, Physician Assistant Program, Carlow University

Upon completion of this activity, participants should be able to:

- Define opioid use disorder by describing its diagnostic features, illustrate the neurobiology underlying opioid use, and assess clinical indicators of opioid withdrawal and tolerance.
- Explain the basic function of the gut-brain axis and analyze how opioid use alters gut microbiome interactions.
- Evaluate the clinical implications of disruptions to the gut microbiome and illustrate their potential physiologic and behavioral effects.

- **Acute Respiratory Distress Syndrome**

Presenters:

Elise Fullerton CRNP-BC – Nurse Practitioner, Senior, Pulmonary and Critical Care Medicine, Pulmonary Partners, UPMC Passavant

Lindsay Busch PA-C - Physician Assistant, Expert, Director of APP Education and Career Development for Pulmonary Partners, Pulmonary and Critical Care Medicine, Pulmonary Partners, UPMC Passavant

Upon completion of this activity, participants should be able to:

- Differentiate Acute Respiratory Distress Syndrome (ARDS) using the Berlin Criteria to accurately identify qualifying diagnostic features.
- Identify direct and indirect precipitating factors of ARDS to support timely clinical recognition.
- Distinguish the phases and severity classifications of ARDS to guide appropriate diagnostic and therapeutic decision-making.
- Interpret characteristic imaging findings associated with ARDS to improve diagnostic accuracy.

- Analyze arterial blood gases (ABGs) and ventilator parameters to optimize ventilator management strategies for ARDS patients.
- Describe the physiologic mechanisms underlying prone positioning to justify its use in appropriate clinical scenarios.
- Evaluate fluid status and volume management strategies to effectively support hemodynamic stability in ARDS.
- Explain the therapeutic role of corticosteroids in ARDS and apply evidence-supported steroid regimens when clinically indicated.
- Implement current evidence-based recommendations for ventilatory and medical management to enhance outcomes in patients with ARDS.

• Child Maltreatment

Presenter: Rachel Speaker, CRNP, FNP-C, Child Advocacy Center, UPMC Children's Hospital of Pittsburgh

Upon completion of this activity, participants should be able to:

- Identify injury patterns that indicate a high concern for physical child abuse.
- Differentiate presenting symptoms that raise suspicion for abusive head trauma in infants.
- Describe the essential components required to complete an effective ChildLine report.

• *Clostridioides difficile* Diagnostic Criteria Stewardship

Presenter: Jessica L. Spragg, DNP-CRNP – Passavant Nursing Directors, UPMC Passavant

Upon completion of this activity, participants should be able to:

- Differentiate the microbiology and epidemiology of *Clostridioides difficile* infection (CDI) to support accurate clinical assessment and prevention strategies.
- Distinguish active CDI from asymptomatic colonization using clinical, laboratory, and epidemiologic indicators.
- Compare hospital-acquired CDI (HA-CDI) and community-acquired CDI (CA-CDI) to guide appropriate diagnostic and reporting pathways.
- Implement evidence-based infection prevention practices to reduce transmission and ensure appropriate reporting of CDI according to institutional and public health standards.

• These are the breaks: Approach to Pediatric Fractures from a Metabolic Bone Standpoint

Presenter: Christa Ward MPAS, PA-C - Associate Clinical Director of Pediatric Endocrinology, Lead APP for Pediatric Divisions of Endo, Adolescent Med, Pulm, Genetics, and ID, University of Rochester Medical Center

Upon completion of this activity, participants should be able to:

- Differentiate pediatric osteoporosis from other causes of low bone density to support accurate clinical characterization.
- Implement an evidence-based diagnostic work-up for a child presenting with multiple fractures.
- Coordinate timely referral of children with confirmed or suspected pediatric osteoporosis to the appropriate subspecialists.

- **Radiation Therapy Beyond Cancer: Applications to Benign Conditions with a focus on Osteoarthritis**

Presenter: Christen Cawley, MPAS, PA-C - Physician Assistant, Senior, Radiation Oncology, Hillman Cancer Center, UPMC Passavant

Upon completion of this activity, participants should be able to:

- Analyze the key components of the inflammatory process to improve clinical decision-making.
- Explain the rationale and mechanisms underlying the use of radiation therapy in benign disorders.
- Evaluate the current evidence supporting the use of low-dose radiation therapy (LDRT) in osteoarthritis.
- Apply risk assessment, recognize limitations, and determine appropriate patient selection for benign radiation therapy.

- **Transfusion Parameters**

- **Presenter: Brian Cenci, MSN, CRNP-Expert, FNP-C, AOCNP** - Nurse Practitioner, Expert, Medical Oncology/Hematology, Hillman Cancer Center, UPMC Passavant

Upon completion of this activity, participants should be able to:

- Apply evidence-based criteria to determine when red blood cell transfusion is clinically indicated.
- Implement a single-unit red blood cell transfusion strategy to effectively conserve blood product utilization.
- Recognize signs and symptoms of common transfusion reactions during and after blood product administration.

- **Hospital Quality and the APP**

Presenter: Jamie DeAngelis, MSN, CRNP - Improvement Specialist, Intermediate, UPMC Quality, Health Services Division, UPMC

Upon completion of this activity, participants should be able to:

- Apply UPMC's system-wide quality initiatives to evaluate and guide hospital performance.
- Describe the purpose and operational role of Quality Oversight Improvement (QOI) teams in supporting organizational quality goals.
- Demonstrate effective provider documentation practices that support accurate coding, appropriate risk adjustment, and improved patient-care metrics.

- **Gaining Stakeholder Buy-In & Perfecting a Pitch - *From Idea to Approval***

Presenter: Amy L. Haller, MBA, MPAS, PA-C - Vice Chair for Professional Development and Continuing Education, Associate Professor, Department of Physician Assistant Studies, School of Health and Rehabilitation Sciences, University of Pittsburgh

Upon completion of this activity, participants should be able to:

- Analyze key stakeholders and prioritize their interests to inform message strategy.
- Construct a concise and compelling pitch that clearly communicates value and intended outcomes.
- Anticipate potential objections and formulate effective, evidence-based responses.
- Demonstrate confident, professional communication when engaging decision-makers.
- Adapt messaging to meet the needs of both executive and clinical audiences, ensuring clarity and relevance.

- **Childhood Lead Poisoning and the Importance of Prevention and Testing**

- **Presenter: Andi Fair, MSN, CRNP, WHNP-BC, FNP-BC** - UPMC Children's Community Pediatrics, Children's Express Care

Upon completion of this activity, participants should be able to:

- Analyze short- and long-term consequences of childhood lead poisoning to guide clinical decision-making
- Evaluate common sources of lead exposure and deliver anticipatory guidance to families to reduce risk.
- Integrate evidence-based strategies for preventing childhood lead poisoning into their clinical practice.

- **Transjugular Intrahepatic Portosystemic Shunts (TIPS)**

Presenter: Theresa Celendar, MPAS, PA-C – Physician Assistant, Expert, Department of Interventional Radiology, UPMC Passavant

Upon completion of this activity, participants should be able to:

- Describe TIPS, including its clinical indications and contraindications, to support appropriate patient selection.
- Evaluate patients for TIPS candidacy by performing an appropriate pre-procedural workup, including calculation and interpretation of mortality risk scores.
- Outline the procedural steps of TIPS placement and recognize key intraprocedural endpoints that indicate technical completion.

- Manage patients following TIPS placement and identify common post-procedure complications requiring clinical intervention.
- Implement appropriate post-TIPS surveillance and follow-up strategies to monitor shunt function and patient outcomes.

- **True Orthopedic Emergencies: Acute Compartment Syndrome and Cauda Equina Syndrome**

- **Presenter: Timothy Heusey, PA-C** - Physician Assistant, Senior, Tri-Rivers Musculoskeletal Centers, UPMC Passavant

Upon completion of this activity, participants should be able to:

- Rapidly identify clinical signs and symptoms concerning for compartment syndrome and cauda equina syndrome to support timely clinical decision making.
- Explain and prioritize the need for rapid response and definitive treatment to prevent irreversible neurologic or musculoskeletal damage.
- Apply appropriate clinical terminology related to compartment syndrome and cauda equina syndrome when communicating with interprofessional team members.
- Differentiate compartment syndrome and cauda equina syndrome from similar clinical conditions that do not pose the same level of emergent risk.

- **Non-Traditional APP Careers: Beyond Clinical Practice-Industry Trends, Opportunities, & Skill Translation**

- **Presenter: Alexandra Bartow, MBA, MSN, ACNP** - Private Healthcare Consultant

Upon completion of this activity, participants should be able to:

- Analyze key 2026 trends driving demand across healthcare and related industries.
- Identify leading non-clinical sectors and roles aligned with clinicians' skills and experience.
- Translate clinical experience into effective resume and interview language for non-clinical roles.

- **Peripheral Vascular Disease & Acute Arterial Occlusion**

- **Presenter: Carol Madia, PA-C** - Expert, Physician Assistant, Vascular Surgery, Passavant, UPMC

Upon completion of this activity, participants should be able to:

- Identify patients with peripheral artery disease (PAD) using appropriate clinical findings and diagnostic criteria.
- Assess the extent and severity of PAD to inform clinical decision-making.

- Recommend appropriate treatment options for patients with PAD based on disease severity and patient-specific factors.
- Identify atrial fibrillation as the most common embolic source of acute lower-extremity arterial occlusion.
- Recognize pain as the symptom most closely associated with time of occlusion.

- **With Great Power, Comes Great Responsibility: On the Frontier of APP Liability and Risk**

- **Presenter: Benjamin Reynolds, PA-C** - Chief Advanced Practice Officer, UPMC; Director, UPMC Office of Advanced Practice Providers; Co-Director, University of Pittsburgh Center for Interprofessional Practice and Education; Clinical Assistant Professor of Surgery, University of Pittsburgh Medical School

Upon completion of this activity, participants should be able to:

- Examine trends in APP liability, including malpractice, vicarious liability, and the shift toward APPs as independent defendants.
- Evaluate the impact of expanding autonomy on accountability, team dynamics, patient safety, and institutional risk.
- Analyze civil and criminal case studies to understand the human toll on both providers and patients.
- Identify strategies to mitigate liability and navigate lawsuits, including transition-to-practice, competence guardrails, escalation culture, and practical steps for first-time defendants.

- **A Tick Talk - Tick Borne Diseases in PA 2026**

- **Presenter: Libby Emharth, MPAS, PA-C** - Physician Assistant, Senior, University of Pittsburgh Division of Infectious Diseases

Upon completion of this activity, participants should be able to:

- Diagnose relevant tick-borne diseases encountered in clinical practice in Pennsylvania.
- Select and order appropriate diagnostic testing based on clinical suspicion of tick-borne disease.
- Differentiate indications for varying treatment durations for common presentations of tick-borne infections in Pennsylvania and apply this knowledge when developing patient-specific treatment plans.
- Identify complications associated with inappropriate doxycycline use and implement patient and pharmacy education strategies to optimize treatment outcomes.