



Queen's
UNIVERSITY

HEALTH SCIENCES
Continuing Professional
Development

2024

Pediatrics Update

November 27, 2024 | 8 AM - 12 PM

Agenda

- 8:00 AM** **Breakfast & Registration**
- 8:30 AM** **Welcome Remarks**
Dawa Samdup, MBBS, MD, FRCPC, Associate Professor, Department of Pediatrics, Queen's University
- 8:35 AM** Quick Hit:
Obesity & GLP-1 inhibitors: Referral criteria and when to suspect metabolic syndrome
David Saleh, MD, FRCPC, Assistant Professor in Pediatric Endocrinology and Metabolism, Department of Pediatrics, Queen's University
- 8:45 AM** **Common eye problems in the pediatric population**
Yi Ning J. Strube, MD, MS, FRCSC, DABO, Assistant Professor, Department of Ophthalmology, Queen's University; Pediatric Ophthalmology and Adult Strabismus, Director of Pediatric Ophthalmology, Queen's University
- 9:25 AM** **Nephrology Charcuterie: A review of 3 core topics**
 - Acute Kidney Injury
 - Pediatric Hypertension
 - Etiologies of Hematuria and Proteinuria**Robert Myette**, MD, Pediatric Nephrologist at the Children's Hospital of Eastern Ontario (CHEO)
- 10:05 AM** **Nutrition Break**
- 10:20 AM** Quick Hit:
Review criteria to diagnose type 1 diabetes (or when to suspect)
David Saleh, MD, FRCPC, Assistant Professor in Pediatric Endocrinology and Metabolism, Department of Pediatrics, Queen's University
- 10:30 AM** **Care of the Premature Infant in your Office**
Sarah McKnight, MD FRCPC, Neonatologist and Assistant Professor of Pediatrics, Department of Pediatrics, Queen's University
- 11:10 AM** **What a growth chart might not tell us: hidden micro-nutrient deficiencies**
Paula Troncoso, MD, Assistant Professor, Department of Pediatrics, School of Medicine, Queen's University
- 11:50 AM** **Closing Remarks**
- 12:00 PM** **Program Ends - Lunch**

Learning Objectives

Quick Hit: Obesity & GLP-1 inhibitors: Referral criteria and when to suspect metabolic syndrome

At the conclusion of this session, participants will be able to:

1. Review the diagnostic criteria for metabolic syndrome in the pediatric population and when to consider GLP-1 inhibitor use and/or referral to a specialist.

Pediatric Ophthalmology: Most common eye problems in the pediatric population

At the conclusion of this session, participants will be able to:

1. Review some of the most common pediatric eye conditions (including strabismus and allergic conjunctivitis) and determine when referrals are warranted.
2. Discuss important historical or physical exam findings that can help distinguish between infectious or non-infectious causes of red eye.

Nephrology Charcuterie: A review of 3 core topics

At the conclusion of this session, participants will be able to:

1. Review the most common causes of acute kidney injury in the pediatric population, with suggested investigations, and when to refer.
2. Define pediatric hypertension and review when further investigations might be warranted.
3. Discuss the possible etiologies of hematuria and proteinuria, what investigations to perform, and when to consider referral.

Quick Hit: Review criteria to diagnose type 1 diabetes (or when to suspect)

At the conclusion of this session, participants will be able to:

1. Review when to clinically suspect and confirm a new diagnosis of Type 1 diabetes and how to manage this.

Care of the premature infant in your office

At the conclusion of this session, participants will be able to:

1. Review the typical growth and developmental trajectory of premature infants, including which growth charts to use and for how long.
2. Discuss current recommendations for iron replacement in premature infants.
3. Integrate current vaccination recommendations for this population into your clinical practice.
4. Review common medical concerns that may be unique to premature infants, and what to screen for during well-baby visits.
5. Identify when to fortify feeds, and for how long to continue fortification of feeds.

What a growth chart might not tell us: hidden micro-nutrient deficiencies

At the conclusion of this session, participants will be able to:

1. Review some of the most common nutrient deficiencies in children and their clinical manifestations.
2. Discuss risk factors for nutrient deficiencies and who to consider screening.

Planning Committee

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