

**PROSA2018 CONFERENCE DAY 1 (Thursday 29<sup>th</sup> of November 2018)**

Central Theme: PATIENT-CENTERED, COMFORT-DIRECTED PROCEDURAL CARE

TIME	TITLE / CONTENT	CHAIR/SPEAKER		
07.30-08.45	Registration – Coffee – Breakfast (exhibition hall)			
08.45-09.00	Welcome and Introduction (15 min)	Piet Leroy		
<b>9.00-12.00 Room: Lecture Hall – Theme: The meaning of procedural pain and fear for children, parents and professionals</b>		<b>Egidio Barbi (chair)</b>		
09.00-09.25	Procedural burden in children with cognitive impairment – a parent’s perspective (30 min)	Vera Tomassen		
09.25-09.45	A child with cancer: is procedural pain worse than the disease? – a parent’s perspective (30 min)	Bibi van der Velden		
09.45-10.30	Short- and Long term effects of Procedural Pain and Fear in children (45 min)	Anna Taddio		
10.30-11.15	Professional skills for Establishing Trust and Alleviating Fear in children (45 min)	Baruch Krauss		
11.15-11.45	Open Forum (Q&A) (30 min)	<i>All speakers</i>		
<b>12.00-13.15</b>	<b>Lunch WORKSHOP 1 (75 min)*</b> Max 45 persons	<b>Lunch WORKSHOP 2 (75 min)*</b> Max 45 persons	<b>Lunch WORKSHOP 3 (75 min)*</b> Max 45 persons	<b>Lunch WORKSHOP 4 (75 min)*</b> Max 45 persons
	Topic: ‘No More Tears’: Patient Integrated models for optimal procedural comfort and success	Topic: Managing patient comfort during routine Vascular Access procedures.	Topic: Managing patient comfort during common Emergency Procedures	Topic: Developing and Starting a Pediatric Sedation Program
	Room: <i>tbd</i>	Room: <i>tbd</i>	Room: <i>tbd</i>	Room: <i>tbd</i>
	Faculty: Anna Taddio,	Faculty: Giorgio Cozzi, Paolo Valerio, Fritzi Russ	Faculty: Baruch Krauss, Julia Hoeffe, Cyril Sahyoun	Faculty: Egidio Barbi, Mark Roback, Keira P. Mason
<b>13.30-15.30 Room: Lecture Hall – Theme: Goal-directed PSA Pharmacology – Part 1: Common Procedures in Daily Practice</b>		<b>Annick De Jaeger (chair)</b>		
13.30-13.55	Procedural Analgesia: How to treat procedural pain effectively (topically, locally and systemically) (25 min)	Giorgio Cozzi		
13.55-14.20	Nitrous oxide sedation (with/without IN fentanyl): indications & contraindications (25 min)	Julia Hoeffe		
14.20-14.45	Oral, mucosal and intranasal drugs: are there many routes to Rome? (25 min)	Piet Leroy		
14.45-15.15	Intravenous sedatives: a practical overview (30 min)	Mark Roback		
15.15-15.30	Open Forum (Q&A) (15 min)	<i>All Speakers</i>		
15.30-16.00	Coffee Break with exhibitors (exhibition hall) (30 min)			
<b>16.00-18.00 Room: Lecture Hall – Theme: High Quality Procedural Care – From Theoretical Concept to Practice</b>		<b>Cyril Sahyoun (chair)</b>		
16.00-16.45	Goal-directed Procedural Care: defining quality, efficacy and patient-centered outcomes (40 min)	Mark Roback		
16.45-18.00	Interactive case discussions between audience and full faculty pannel (75 min)	Piet Leroy, Cyril Sahyoun & Keira P. Mason		
18.00-19.00	Social meeting - Reception - Entertainment			

\*For more information: see below

**PROSA2018 CONFERENCE DAY 2 (Friday 30<sup>th</sup> of November 2018)**

Central Theme: HIGH QUALITY PROCEDURAL SEDATION AND ANALGESIA

TIME	TITLE / TOPIC				CHAIR/SPEAKER
7.15-8.15	Breakfast Breakout Drug Pannels (MEET THE EXPERTS - 60 minutes) [ <i>Specific Registration &amp; Extra Fee required / Breakfast Included</i> ]				
	<b>DEXMEDETOMIDINE</b>	<b>KETAMINE</b>	<b>PROPOFOL</b>	<b>NITROUS OXIDE</b>	<b>MIDAZOLAM</b>
	Faculty: Mohamed Mahmoud, Paolo Valerio	Faculty: Mark Roback, Piet Leroy	Faculty: Egidio Barbi,	Faculty: Julia Hoeffe, Felix Kreier	Faculty: Michael Brackhahn
7.30-8.30	<i>Registration – Coffee (Exhibition Hall)</i>				
<b>8.30-12.00 Room: Lecture Hall – Theme: Goal-directed PSA Pharmacology – Part 2: Major Procedures in Daily Practice</b>					<b>Felix Kreier (chair)</b>
8.30-9.00	Major Puncture Procedures (Oncology and Organ Biopsies) (30 min)				Mark Vogt
9.00-9.30	Major Endoluminal Procedures (Nasogastric Tube – Urinary Catheter – Endoscopy) (30 min)				Egidio Barbi
9.30-10.00	Major wound care (30 min)				Annick De Jaeger
10.00-10.30	<i>Coffee Break with exhibitors (exhibition hall) (30 min)</i>				
10.30-11.15	Safety of Procedural Sedatives in young children: is neurotoxicity an issue? (45 min)				Laszlo Vutskits
11.15-11.45	Open Forum (Q&A) (30 min)				<i>All Speakers</i>
12.00-13.15	<b>Lunch WORKSHOP 5 (75 min)*</b> Max 45 pers	<b>Lunch WORKSHOP 6 (75 min)*</b> Max 45 pers	<b>Lunch WORKSHOP 7 (75 min)*</b> Max 45 pers	<b>Lunch WORKSHOP 8 (75 min)*</b> Max 45 pers	
	Topic: Beyond the drugs	Topic: Capnography Practical Exercises	Topic: Sedation Strategies for Radiologic Imaging Procedures	Topic: Sedation Strategies for special needs children	
	Faculty: Sara de Bulpaep	Faculty: Bhavani Kodali	Faculty: Keira P. Mason, Linda Schuiten	Faculty: Egidio Barbi, Michele Vranken	
<b>13.30-15.30 Room: Lecture Hall – Theme: Procedural Sedation Safety</b>					<b>Eva Schaffrath (chair)</b>
13.30-14.15	Adverse Events in Sedation? Etiology and strategies to improve safety. (40 min)				Keira P. Mason
14.15-14.45	Procedural Sedation and the Pediatric Airway: interactions and precautions (30 min)				Mohamed Mahmoud
14.45-15.15	Pre-sedation fasting: what is the evidence? (30 min)				Mark Roback
15.15-15.30	Open Forum (Q&A) (20 min)				<i>All speakers</i>
15.30-16.00	<i>Coffee Break with exhibitors</i>				
<b>16.00-17.30 Room: Lecture Hall – Theme: Implementation and Professional Education challenges</b>					<b>Keira Mason</b>
16.00-16.30	Professional skills and competencies for high quality procedural sedation/analgesia (30 min)				Piet Leroy
16.30-17.00	Interprofessional Collaboration, Education and Research: Time for European Collaborative network				Cyril Sahyoun
17.00-17.30 (18.00 ?)	Pediatric Procedural Sedation in Europe: Quo Vadis? Conference summary and debate				Francis Veyckemans

\*For more information: see below

## WORKSHOP Content Summary

### Workshop 1: 'No more Tears'

- Many claim offering a patient-centered service when dealing with distressing procedures in children. But how much choice do we really grant to children and their parents? And how can we make patients/parents competent for making appropriate choices that contribute to optimal procedural perceptions and experiences?
- Anna Taddio developed with her team a method for active knowledge translation so that children/parents themselves can learn which methods work best for them. From the University of Toronto Website: "In the past, we've burdened the health-care provider with everything," says Taddio. "But I think it's better to show the kids and then they can choose how to best cope. In the end, Taddio says it's all about medical community acknowledging the existence of pain and working with patients to reduce its impact during injections and other procedures. Treating pain has many benefits," she says. "It not only prevents unnecessary suffering, it ensures we are delivering the best care possible, improves everyone's satisfaction with the experience, and improves health because people are more likely to participate in positive health behaviours like getting vaccinated and going to a doctor to get a blood test to look for high cholesterol and these sorts of things." (<https://www.utoronto.ca/news/no-more-tears-publicly-funded-research-u-t-s-anna-taddio-taking-pain-out-vaccinations-canada>)

### Workshop 2: Managing patient comfort during routine Vascular Access procedures.

- Simple techniques of distraction
- Correct use of topical anesthetics (location, timing, tips – tricks, logistical challenges)
- Misconceptions (e.g. emla generates more failure of IV access)
- Other techniques (cooling, J-tip, subcutaneous infiltration of buffered lidocaine with a 30G needle, Buzzy,...): evidence, experiences, practices...
- Additional elements for discussion: role of expertise in the technique of vascular access as such, no junior trainees for difficult access patients? Use of interesting tools as vein viewer system in anticipated difficult access, as help to guide the puncture and as distraction...

### Workshop 3: Managing patient comfort during common ER procedures.

- Suggested procedures to discuss/to use for discussion: Wound care and suturing; Non-complex forearm fracture; Abscess drainage
- Points for discussion: patient approach; optimal local/topical techniques; when to use sedation? Which sedation (important point to discuss: indications versus limitations of nitrous oxide)
- Key questions a professional should ask him/herself before starting procedures: (1) Is the child in pain before (i.e. in need for acute pain management). (2) Environmental setting. (3) Adaptive distraction possible? (4) How painful is the procedure anticipated by you, the family/child? (4) Use of topical analgesics. (5) Most optimal additional sedative (anxiolysis or deep sedation?)

### Workshop 4: Developing and Starting a Pediatric Sedation Program.

- Existing guidelines; main guideline principles
- How to guarantee 24/24 7/7 coverage?
- Multidisciplinary Service instead of 'Anesthesiology *versus* Non-anesthesiology'; which professionals may be involved in a Sedation Program?
- Who should run the service? Which sedation level by whom?
- Auditing and Quality: how to define good sedation quality

**Workshop 5: Beyond the drugs – practical exercises**

- How to apply principles of hypnosis? Comfort talk?
- Role and examples of Virtual Reality (which children? Which settings? Which procedures?)
- Use of Smartphone apps
- Controlling the scene/Controlling the process

**Workshop 6: Capnography – practical exercises**

- Practical applications of capnography during deep sedation
- Typical curves for normal ventilation, types of hypoventilation, partial and total airway obstruction,...
- Meaning of capnometry

**Workshop 7: Sedation for radiologic imaging**

- Which children will need sedation? Which may benefit from non-pharmacology?
- How can preparation/education of parent/child to elective procedures avoid sedation? Even in young children? Use of Simulation/Preparation/Mock scanner...
- Best practice for < 3-6 months; 6m-5 yrs; > 5 yrs
- Propofol? Dexmedetomidine (IV? IN? Doses?)
- Patient-centered sedation care on a radiology department. What is needed?

**Workshop 8: Sedation in special care kids.**

- For example: autism spectrum disorder, severe anxiety, hyperactivity, mental retardation,...
- How to involve parents/caretakers?
- Which drugs might be more optimal?