Welcome colleagues! As president of The Nurse Practitioner Association New York State (The NPA), I am delighted to invite you to join us at our 33rd Annual Conference “Modernizing Healthcare”, which will commence October 18 and run through October 22. This year’s event will be held in Saratoga Springs, NY.

Here are some highlights:

**Wednesday and Thursday**
- Pre-conference learning labs offering a variety of topics

**Friday**
- 2017 Legislative Update presented by our Lobby Team
- Grand opening of the exhibit hall
- Luncheon presentation - *Peaceful Planning: Why NPs and Their Patients Need a Will and How to Strategize with Confidence*, presented by Robert Pitkofsky, Esq., NPA Legal Counsel
- Variety of clinical topics
- Regional meetings
- Networking reception

**Saturday**
- Annual membership meeting and awards presentation
- Plenary session - *Don’t Be A Claim Statistic: NP Claim Trends, Scenarios and Risk Control Recommendations*, presented by Michael Loughran, President of Aon Affinity Insurance Services in the Healthcare Division
- Luncheon presentation – *Nurse Practitioners in Private Practice – Panel Discussion* – Mary Beth Koslap-Petraco, DNP, FNP-BC, CPNP, FAANP; Laura Markwick, DNP, FNP-C; Henry Moscicki, DNP, FNP-C; and Denis Tarrant, NP

**Sunday**
- A variety of clinical topics concluding at noon

If you are not a current member, consider joining The NPA and take advantage of the member discounted conference registration fee. Since 1980 we have worked very hard for the advancement of nurse practitioners and have played a key role in shaping the profession in which you practice today. We provide assistance, services, and support to individual nurse practitioners every day. For more information about The NPA and member benefits, please visit our website at [www.TheNPA.org](http://www.TheNPA.org).

Plan to attend this premier educational event, take some time to relax and enjoy the beauty of Saratoga Springs.

I look forward to welcoming you in Saratoga Springs!

Sincerely,
David Dempsey, DNP, FNP-BC
NPA President
Dr. Scharmaine Lawson-Baker is a nationally recognized and award-winning nurse practitioner in New Orleans, Louisiana. Scharmaine decided to become a nurse practitioner (NP) after the death of her grandmother as she wanted more autonomy and the ability to care for the “whole” patient by assessing, diagnosing, and prescribing medications. The holistic approach to patient care is what drew her to becoming an NP instead of pursuing medical school.

In 2004, Scharmaine was approached to begin visiting patients in their homes who did not have a primary care provider. Dr. Lawson-Baker started with approximately 15 patients, but within three months she had 100 patients who were all homebound, elderly, and disabled. Remembering how hard it was to get a healthcare provider (NP or MD) to visit her grandmother when she was ill, gave Dr. Lawson-Baker the inspiration to officially launch her house call business in 2005, a few months before Hurricane Katrina. Advanced Clinical Consultants was the first NP-owned house call practice in the state of Louisiana. Dr. Lawson-Baker serves a large geriatric population in the comfort of their private homes, group homes, or assisted living facilities.

After Hurricane Katrina, Dr. Lawson-Baker was instrumental in caring for the sick and disabled in New Orleans, where hospitals had closed and doctors had evacuated but never returned. Her patient load went from 100 to 500 in only three months.

In 2008, Scharmaine finished her Doctor of Nursing Practice (DNP). She developed The Housecall Course, designed to assist other nurse practitioners on how to start and maintain a house call practice in their state. It’s the only one of its kind in the nation.

She is a fellow of the American Association of Nurse Practitioners (AANP), and winner of the 2013 Healthcare Hero award (New Orleans City Business magazine) and 2008 Entrepreneur of the Year award (ADVANCE for Nurse Practitioner magazine). Dr. Lawson-Baker has received numerous honors and awards for her contributions to healthcare in New Orleans since she became a family nurse practitioner in 2000.

Out of all the achievements, media opportunities, and accolades, her most important accomplishment is becoming a foster mother. At the end of the day, Scharmaine loves what she does and is continually striving to be a better person, friend, wife, and mother.
Conference Dates: October 18 – October 22, 2017

Program Global Objectives
- Determine practical and clinically oriented evidence-based practice information that addresses the roles of all providers and patients.
- Discuss clinical, pharmacological, diagnostic, and management of patient care across the lifespan.
- Discuss emerging trends in health care and practice management that assist nurse practitioners in positioning their practices for the future of health care.
- Discuss current state legislative, regulatory and practice issues affecting nurse practitioners.
- Identify risk management strategies that can be incorporated into practice.
- Understand end of life planning for family and patients.

LOCATION & ACCOMMODATIONS
The Saratoga Hilton
534 Broadway
Saratoga Springs, NY 12866
http://www.thesaratogahotel.com/

The NPA has reserved a block of rooms at the Saratoga Hilton. The room block will be held until September 10, 2017 or until the room block is filled, whichever comes first. After this date additional rooms can be reserved subject to space and rate availability. The Saratoga Hilton will make every effort to work with you in securing a room once The NPA's block has been released. Reserve early as rooms fill quickly.

To reserve your room at the Saratoga Hilton:
Reserve your room on-line –
https://aws.passkey.com/go/NursePractitionerAssn2017

Room Type and Rates:

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All rooms are subject to applicable taxes and fees.

Check-in time is 3:00 pm – Check-out time is 11:00 am.

Early Departure Fee: The Hotel will add an early checkout fee equal to one night’s room rate to any guest who checks out prior to the reserved checkout date. To avoid an early checkout fee guests should advise the Hotel at or before check-in of any change in planned length of stay.

REGISTRATION FEES

Learning Labs October 18 – October 19
4 hour learning labs are $125 each
8 hour learning labs are $250 each

Conference Fees October 20 – October 22

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<th>NPA Member</th>
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<tr>
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*Non-members are invited to join now and attend at the member rate.

CANCELLATION POLICY

Cancellation by Registrant:
- All cancellations MUST be submitted in writing:
  - Fax: 518-348-0720 or
  - Email: info@TheNPA.org or
  - Mail: The NPA, 12 Corporate Drive, Clifton Park, NY 12065
- Cancellation requests received prior to October 9, 2017 will be charged a $25 administrative fee.
- Cancellation requests received between October 10, 2017 and October 17, 2017 will be charged a $50 administrative fee. No refunds will be issued for any meal payments received as the guaranteed number for meals has already been provided to the hotel.
- Cancellation requests received between October 18, 2017 and November 18, 2017 will be charged a $75 administrative fee. No refunds will be issued for any meal payments received.
- After November 18, 2017 no cancellation requests will be refunded.

WAYS TO REGISTER

Online Registration – www.TheNPA.org - We encourage you to register on-line for immediate access to session availability.

Mail: The NPA, 12 Corporate Drive, Clifton Park, NY 12065

Please Note: When registering using the paper registration form, all required information must be completed and your payment must be included. Incomplete submissions will not be processed until all information and/or payment is complete. The NPA office will contact you for any additional information or changes that need to be made to your registration or payment information. All completed registrations will be accepted in the order in which they are received. Session assignments occur when the registration is processed and payment has been confirmed.

Fax: 518-348-0720
REGISTRATION OTHER

NPA Bucks Voucher
Remember if you earned a NPA Bucks Voucher during our membership campaign you can apply it to your learning lab and conference registration fees.

On-site Registration
On-site registration will be available if maximum session registration numbers have not been reached. Credit card, check, money order, or cash payment is required for on-site registration.

Returned Check Policy
For all checks returned to The NPA for insufficient funds an administrative fee of $35.00 will be charged.

Pre-Conference Learning Labs
Seating for some of the learning labs may be limited. Register early as seats fill quickly.

CONTINUING EDUCATION CONTACT HOURS
This activity will be submitted to Pennsylvania State Nurses Association for approval to award contact hours. Pennsylvania State Nurses Association is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation.

Up to 33 contact hours and 21.16 pharmacology contact hours (includes Wednesday through Sunday sessions) will be offered at The NPA’s 33rd Annual Conference. The sessions within the brochure will have the number of contact hours that have been submitted for review and may be subject to change.

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<td>Sunday, October 22</td>
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You will be required to sign an attestation statement indicating that you have attended the sessions you registered for. The attestation statement will be provided to you at check-in. You will be able to download your statement of credits through your professional development section of your member record on our website www.TheNPA.org 30 days after the completion of the conference. The statements of credits will serve as your certificate.

Please Note: Contact hours will NOT be awarded unless we have received your signed attestation statement.

CONFERENCE ATTIRE
Attire at the conference is business casual. The hotel and city center strive to keep rooms at a comfortable temperature, but layered clothing and comfortable shoes are highly recommended.

PRESENTER HANDOUTS
All presenter handouts and/or outlines provided by the presenters will be made available online at The NPA’s website in early October. For those registrants desiring a paper copy of the handouts for the sessions attended, it is the responsibility of the registrant to print these and bring them to the conference. To access the presenter handouts go to www.TheNPA.org and select Education from the menu, then from the dropdown list select “Presenter Handouts”.

EVALUATIONS
Evaluation forms will be available for completion online at The NPA website www.TheNPA.org. To access the Evaluations go to www.TheNPA.org and select Education from the menu, then from the dropdown list select “Conference Evaluations”.

MEETING APP
The meeting app will allow participants to communicate through email, download presenter handouts, complete evaluations online, and read about the presenters and more. You will be provided with instructions on how to download the meeting app.

TRAVEL INFORMATION

Amtrak
Amtrak offers a 10% discount off the lowest available rail fare to Saratoga Springs, NY between October 15 – October 25, 2017. To book your reservation call Amtrak at 800-872-7245 or contact your local travel agent.

Conferences cannot be booked via Internet. Please be sure to refer to Conference Fare Code X77E-969 when making your reservation. This offer is not valid on the Auto Train and Acela Service. Fare is valid on Amtrak Regional for all departures seven days a week, except for holiday blackouts. Offer valid with Sleepers, Business Class or First Class seats with payment of the full applicable accommodation charges.

Please Note: The conference fare discount is only for attendees going to the conference.

Enterprise Rent a Car
The Nurse Practitioner Association is a member of the Enterprise Rent-A-Car Business Rental Program. This program offers discounted rates for members at over 7,000 locations coast-to-coast.

To make your reservation log onto www.enterprise.com or to find a location near you. Enter Promotion Code 24H3552.

Airplane
If you are flying, the closest airport is Albany International, Albany, NY. From the airport you can either rent a car or take a taxi or uber to the Saratoga Hilton, Saratoga Springs, NY.
Wednesday, October 18, 2017

7:30 AM – 5:00 PM
Registration

7:30 AM – 9:00 AM
Continental Breakfast

8:00 AM – 5:30 PM
LL1701  This learning lab will consist of 7 different lectures
(8 CH & 7.33 PCH)  Additional fee of $250 for learning lab (includes lunch)

- What’s New with Hypertension? Treating Complex Patients in Primary Care
- Things that go BOOM! Common Dangerous Drug Interactions
- Geriatric Polypharmacy: A Pill for Every Ill?
- Coughs, Wheezes, and Respiratory Diseases: A Look at Community Acquired Pneumonia and Acute Bronchitis
- Help! My Patient Doesn’t Have Any Money!
- Derm Drugs: Everything You’re Itching to Know!
- Top 20 Most Commonly Prescribed Medications of 2016

Thursday, October 19, 2017

7:30 AM – 5:00 PM
Registration

7:30 AM – 9:00 AM
Continental Breakfast

8:00 AM – 12:15 PM
LL1703  Antibiotics: A Review of the Basics
(4 CH & 4 PCH)  Additional fee of $125 for learning lab

LL1704  Neurologic Workshop: Clinical Pearls in Neuro Assessment for the Primary Care Clinician
(4 CH & 1 PCH)  Additional fee of $125 for learning lab

LL1705  Mechanical Diagnosis Evaluations of the Spine and all the Extremity Joints
(4 CH)  Additional fee of $125 for learning lab

1:15 PM – 5:30 PM
LL1706  Psychopharmacology Review/Update
(4 CH & 4 PCH)  Additional fee of $125 for learning lab

LL1707  Pediatric and Adult Heart Sounds and Murmurs: An Interactive Workshop
(4 CH)  Additional fee of $125 for learning lab

LL1708  Female Sexual Dysfunction Across the Life Span: How to Assess, Diagnose and Manage
(4 CH & .50 PCH)  Additional fee of $125 for learning lab

Friday, October 20, 2017

7:00 AM – 5:00 PM
Registration

7:15 AM – 8:45 AM
Continental Breakfast

8:00 AM
Welcome by NPA President David Dempsey, DNP, FNP-BC

8:15 AM – 9:15 AM
A1709  Keynote: Scharmaine Lawson-Baker, DNP, FNP-BC, FAANP
The Modern Nurse Practitioner (1 CH)

9:15 AM – 10:30 AM
B1710  NPA 2017 Legislative Update (1 CH)

10:30 AM – 11:15 AM
Grand Opening of the Exhibit Hall

11:15 AM – 12:15 PM
C1711  Whatever Happened to Step 1 in the WHO Pain Ladder? NSAIDs, Acetaminophen, Adjuvant Agents
(1 CH & 1 PCH)

C1712  Managing Behaviors in Dementia Patients
(1 CH & .66 PCH)

C1713  Pertussis 2017: A Look at this Underdiagnosed Condition (1 CH & .33 PCH)

C1714  The Role of the Primary Care Clinician in HIV Care and Prevention (1 CH & .41 PCH)

C1715  Introduction to Female Sexual Function and Dysfunction during Perimenopausal and Postmenopausal Period (1 CH & .25 PCH)

C1716  Nursing: Substance Use, Drug Diversion and Recovery (1 CH)

12:30 PM – 2:00 PM
D1718  Luncheon Presentation – Peaceful Planning: Why NPs and Their Patients Need a Will and How to Strategize With Confidence (1 CH)  Additional fee of $30 for lunch

2:15 PM – 3:15 PM
E1719  Understanding the Basic Pharmacology of Medications for Type 2 Diabetes (1 CH & .75 PCH)

E1720  Basic Wound Care: Assessment, Documentation and Treatment (1 CH & .33 PCH)

E1721  Laboratory Interpretation: Challenging Cases for the Primary Provider (1 CH & .16 PCH)

E1722  Pediatric Vaccines 2017: What is New from the CDC (1 CH & 1 PCH)

E1723  Managing Patients with Breast Pain (1 CH & .25 PCH)

E1724  Cultural and Clinical Competency in Transgender Care (1 CH & .25 PCH)

E1725  Complex Wound & Skin Conditions (1 CH)

3:15 PM – 4:00 PM
Afternoon break in the Exhibit Hall
4:00 PM – 5:00 PM
F1726 Negotiating Emotional Order after Breast Cancer Treatment (1 CH)
F1727 Primary Care for the LGBTQI Client (1 CH)
F1728 Routine to Rare: Emergent Burn Care (1 CH)
F1729 Beyond Sickness: How to Create Health and Well-being for Ourselves and Our Patients (1 CH)
F1730 Treatment for Hepatitis C: New Tests, New Drugs & New Recommendations (1 CH & .33 PCH)
F1731 Diabetes Related Microvascular Complications: What Every Nurse Practitioner Should Know (1 CH & .33 PCH)
F1732 Recognizing and Treating Children’s Environmental Health Exposures (1 CH)

5:15 PM – 6:15 PM
Regional Meetings (1 CH)
G1733 Region 1 – Southern Tier, Western New York
G1734 Region 2 – Finger Lakes, Greater Rochester, Susquehanna, Tompkins Cortland
G1735 Region 3 – Lake Ontario, Mohawk Valley, Syracuse, Thousand Island
G1736 Region 4 – Adirondack, Capital, Leatherstocking Catskill, Saratoga Warren
G1737 Region 5 – Dutchess Ulster, Greater Newburgh, Lower Hudson Valley
G1738 Region 6 – Brooklyn Queens, Manhattan Bronx, Staten Island
G1739 Region 7 – Long Island

5:15 PM – 6:15 PM
Networking Reception

Saturday, October 21, 2017
7:30 AM – 5:00 PM
Registration
7:30 AM – 9:00 AM
Continental Breakfast
8:00 AM – 9:15 AM
H1740 NPA Annual Membership Meeting and Awards Presentation (1 CH)
9:15 AM – 10:15 AM
J1741 Don’t Become a Claim Statistic: NP Claim Trends, Scenarios and Risk Control Recommendations (1 CH)
10:15 AM – 11:00 AM
Morning refreshment break in the Exhibit Hall

11:00 AM – 12:00 PM
J1742 Drug Interactions: Mechanisms and Potential Clinical Outcome (1 CH & 1 PCH)
J1743 Forget about it! Differentiation and Diagnosis of Dementia (1 CH & .58 PCH)
J1744 Adult Vaccines 2017: Making Sense of the CDC Schedules (1 CH & 1 PCH)
J1745 Introducing Transgender Hormone into your Practice (1 CH & .75 PCH)
J1746 2015 Cervical Cancer Screening Guidelines: To pap or not to pap (1 CH)
J1747 Delivery of Palliative Care in the Primary Care Setting (1 CH)
J1748 Pediatric Attention Deficit Hyperactivity Disorder: Do you get it? (1 CH & .25 PCH)

12:15 PM – 1:45 PM
K1749 Luncheon Presentation – Panel Discussion: NP-Owned Practices (1 CH) Additional fee of $30 for lunch

2:00 PM – 3:00 PM
L1750 Behind the Scenes in Parkinson’s Disease (1 CH & .25 PCH)
L1751 The Clinical Breast Exam and Teaching Self-Breast Exams (1 CH)
L1752 Recognizing and Treating Women with Postpartum Affective and Anxiety Disorders (1 CH & .25 PCH)
L1753 Head Games: Recognition and Management of Pediatric Head Injuries (1CH)
L1754 Rapidly Reversible Extremity Joint Pain: Bone-on-Bone or Just Deranged? (1 CH)
L1755 Cardiac Case: What is the diagnosis? (1 CH)

2:00 PM – 5:30 PM
M1756 Opioid Prescribing: Safe Practice, Changing Lives – Update 2017
This session is presented by the Nurse Practitioner Healthcare Foundation (NPHF), a member of CO*RE. Continuing education and pharmacology credit of 3 hours is provided by the Nurse Practitioner Healthcare Foundation.

OR

3:15 PM – 4:15 PM
N1757 Cardiovascular Disease in Women: Gender Does Matter (1 CH & .50 PCH)
N1758 Guiding Secondary Stroke Prevention through Evaluation of Ischemic Stroke Etiology (1 CH & .33 PCH)
N1759 Asthma across the Lifespan for the Advanced Practice Nurse (1 CH & .41 PCH)
N1760 Introduction to Chest CT Interpretation for the Advanced Practice Provider (1 CH)
N1761 Geriatric Syndromes: What are they? How are they diagnosed and treated? How can you reduce their impact on your patients’ lives? (1 CH)
N1762 Lifestyle Counseling to help Obese Patients (1 CH)
6:30 PM – 5:30 PM
O1763 Pelvic Venous Insufficiency: Overlooked and Underdiagnosed Cause of Chronic Pelvic Pain (1 CH)
O1764 Integrating Holistic Wellness into General Practices (1 CH)
O1765 Childhood Bullying – What’s New, What’s Not (1 CH)
O1766 Transcatheter Aortic Valve Replacement and Structural Heart Innovative Therapy Update (1 CH)
O1767 The Art of Conducting an End of Life Discussion (1 CH)
O1768 Esophageal Cancer: A less common but deadly cancer (1 CH)

Sunday, October 22, 2017
8:00 AM – 12:00 PM
Registration
8:00 AM – 9:30 AM
Continental Breakfast
8:30 AM – 9:30 AM
P1770 Fibromuscular Dysplasia (FMD) - Raising Awareness and Connecting the Dots to Prevent Stroke and Aneurysm (1 CH)
P1771 The Personality Disorder Conundrum: Why is this Patient so Difficult for Me? (1 CH)
P1772 Concussion and Post-Concussion Syndrome a Comprehensive Approach to Diagnosis and Treatment (1 CH)
P1773 Heart Failure is NOT a Virus. It Doesn’t go Away: Care of the Heart Failure Patient in the Primary Care Setting (1 CH & .16 PCH)
P1774 Prostate Screening Update in Primary Care (1 CH & .33 PCH)
P1775 Irritable Bowel Syndrome: Addressing the Role of Food, Probiotics and Medication (1 CH & .25 PCH)
P1776 Unraveling the Crowded Insulin Scene: A Practical Overview of Insulin Focusing on New Insulin Preparations (1 CH & 1 PCH)

9:45 AM – 10:45 AM
Q1777 Nurse Practitioners and Abortion Care in New York State (1 CH & .50 PCH)
Q1778 Psychiatric Emergencies: Accurately Assessing and Managing the Patient in Crisis (1 CH & .25 PCH)
Q1779 ENT Trifecta: PE Tubes, Tonsillectomy, Adenoidectomy (1 CH & .16 PCH)
Q1780 Medical Cannabis Hype or Hope (1 CH & .41 PCH)
Q1781 Amplified Musculoskeletal Pain Syndrome in Children: Finding a solution to a puzzling diagnosis (1 CH)
Q1782 Advanced Heart Failure: New Medications, New Devices and New Therapies (1 CH & .50 PCH)
Q1783 Empowering the Nurse Practitioner for Salary Negotiations: Tools to Advocate for an Improved Salary Compensation Package (1 CH)

11:00 AM – 12:00 PM
R1784 The Pediatric Sepsis Continuum: Recognition and Treatment (1 CH)
R1785 Cardiac Diagnostic Testing: What to Order and When (1 CH)
R1786 Hip Dysplasia Across the Decades: From Pavlik to PAO (1 CH)
R1787 Case-based Discussion of Head and Neck Melanoma: Review of Epidemiology, Risk Factors, Identification, Treatments and Prevention (1 CH & .25 PCH)
R1788 Identification of Tics and Associated Comorbidities: Lessons Learned (1 CH & .50 PCH)
R1789 Incorporating a Holistic Nurse Practitioner Approach into Healthcare (1 CH)
R1790 Management of Violence and Aggression (1 CH & .33 PCH)
Wednesday, October 18, 2017

7:30 AM – 5:00 PM
Registration

7:30 AM – 9:00 AM
Continental Breakfast - coffee, tea, juice, fruit, yogurt, pastries, bagels, cereals

8:00 AM – 5:30 PM

**LL1701 – This learning lab will consist of 7 different lectures**
(8 CH & 7.33 PCH) Additional fee of $250 for learning lab (includes lunch)

**What’s New with Hypertension? Treating Complex Patients in Primary Care**
- Evaluate treatment options for optimal blood pressure management of patients with multiple co-morbidities.
- Utilize specific combinations of antihypertensive medications to optimize blood pressure management in complex patients.
- Evaluate potential drug/drug and drug/disease interactions when managing patients with HTN.

**Things that go BOOM! Common Dangerous Drug Interactions**
- Develop strategies for avoidance of dangerous drug interactions.
- Identify 10 medication combinations that are involved in drug interactions.
- Identify the most common CYP450 drug interactions involving common medications.

**Geriatric Polypharmacy: A Pill for Every Ill?**
- Assess medications for elder appropriateness prior to prescribing.
- Develop strategies to prescribe/discontinue medications for elderly patients who are seen in primary care.
- Apply principles of safe geriatric prescribing when managing elderly patients.

**Coughs, Wheezes, and Respiratory Diseases: A Look at Community Acquired Pneumonia and Acute Bronchitis**
- Develop an evidence based medication plan to relieve symptoms in patients who have acute bronchitis.
- Develop an evidence based medication plan to treat community acquired pneumonia.
- Identify patients who are candidates for pneumococcal vaccine.

**Help! My Patient Doesn’t Have any Money!**
- Develop cost effective prescribing strategies to manage common chronic illnesses.
- Develop cost effect strategies to manage common acute illnesses using OTCs and generic medications.
- Develop strategies to increase cost effectiveness of current medication regimen.

**Derm Drugs: Everything You’re Itching to Know!**
- Develop strategies for use of oral and topical steroids to treat common inflammatory skin conditions.
- Develop strategies to prescribe dermatologic medications used to manage common fungal infections.
- Develop strategies for use of oral and topical medications to treat viral/bacterial skin infections.

**Top 20 Most Commonly Prescribed Medications of 2016**
- Review some of the most commonly prescribed medication classes in the U.S. in 2016.
- Compare and contrast select medications in specific medication classes.
- Relate medication mechanism of action with pathophysiology of specific disease states.

*Amelie Hollier, DNP, FNP-BC, FAAN, Lafayette, LA*

**LL1702 Regulatory Compliance and Its Impact on Nurse Practitioner Coding**
(8 CH) Additional fee of $250 for learning lab (includes lunch)

This session is designed for the nurse practitioner working in New York State. With everything you have to focus on from a clinical perspective having time left to dedicate to regulatory compliance and coding/billing issues doesn’t always exist, thus leaving you and your practice exposed to significant risk. This session led by Jesse Overbay, General Counsel and Sean M. Weiss, Partner and Vice President of Compliance for DoctorsManagement, LLC, will take you from A-Z and all points in between during this full day interactive session. Don’t miss hearing the facts, understanding trends and learning what you can do to mitigate your risks of non-compliance while ensuring your revenues are at the level they need to be. Some of the topics to be covered include:

- Regulatory Compliance efforts on the part of the Government: CBRs, CERT, PATH, RAČ and ZPIC and how having an effective compliance plan in place will mitigate your risks.
- Getting back to basics for coding: NPs are looking to maximize their dollar, Modifier Application and those CPT codes from various specialties causing headaches.
- Evaluation and Management Services: Start at the beginning and understand the nuances between 95 and 97 Documentation Guidelines and then move towards understanding how Medical Necessity and the acuity of the patients presenting problems impact the overall level of service.
- OIG Compliance in the nurse practitioner practice. Incident-To and Split/Shared Services: If you bill Incident-To or Split/Shared a physician understands the risks for doing so based on the facts. This session will focus on the dos and don’ts and whether or not Incident-To Services actually makes sense for your organization.
- OIG Hot Spots for NPs: See what the OIG and The CMS have in-store for you in 2018.

*Sean Weiss, CMCO, CPMA, CPC, CPC-P, CCP-P, ACS, EM, Knoxville, TN and Jesse Overbay, JD, Knoxville, TN*
Thursday, October 19, 2017

7:30 AM – 5:00 PM
Registration

7:30 AM – 9:00 AM
Continental Breakfast - coffee, tea, juice, fruit, yogurt, pastries, bagels, cereals

8:00 AM – 12:15 PM

LL1703 Antibiotics: A Review of the Basics
(4 CH & 4 PCH) Additional fee of $125 for learning lab

A review of the fundamentals of antibiotic therapy designed to help the clinician recognize, in addition to microbiological considerations, how antibiotic pharmacodynamics and pharmacokinetics play a vital role in drug choices, dosing regimens and adherence. Within this framework we will examine both drug and patient factors that need to be considered regardless of MIC, the different types and impact of antibiotic resistance, debunk myths about static vs. cidal drugs, review the rationale for multiple “generations” of certain classes and more. We will then systematically discuss the basic and clinical pharmacology of the major classes of antibiotics used in primary care (beta lactams, macrolides, tetracyclines, sulfonamides, fluoroquinolones, etc.).

Alan P. Agins, PhD, Tucson, AZ

LL1704 Neurologic Learning Lab: Clinical Pearls in Neuro Assessment for the Primary Care Clinician
(4 CH & 1 PCH) Additional fee of $125 for learning lab

Headaches and dizziness are commonly encountered complaints or conditions in primary care or hospital-based clinics. Nurse practitioners must evaluate and diagnose patients with such issues. Diagnosis and treatment of patients with headaches, dizziness, a variety of other neurologic conditions, as well as, the latest research in pathophysiology and diagnostics will be discussed.

Wendy L. Wright, MS, RN, APRN, FNP, FAANP, FAAN, Bedford, NH

LL1705 Mechanical Diagnosis Evaluations of the Spine and all the Extremity Joints
(4 CH) Additional fee of $125 for learning lab

We will demonstrate differential diagnosis using Mechanical Diagnosis and Therapy (MDT) to improve treatment decision making choices with spine and extremity joint pain. The sole use of a mechanical assessment and treatment for orthopedic conditions, using MDT, has been well established in the literature and has been shown to be more reliable and prognostic than diagnostic imaging. The use of mechanical care, compared to traditional community care, has been shown to have a 40% cost-reduction in medical treatments by reducing the need for diagnostic studies and invasive procedures. Spinal referral is a common source of non-specific joint pain and understanding the origin of symptoms can result in more effective and appropriate care and can facilitate improved treatment options.

MDT has been shown to be effective when used at a local family planning clinic by a NP with basic MDT training who successfully identified mechanical pain originating from the neck while colleagues thought the cause was from a subcutaneous contraceptive, avoiding an expensive procedure which would not have been effective at abolishing pain. There are five key questions that the practitioner must ask to determine if pain is mechanical in nature. Additionally, the basic principles of mechanical assessment will be reviewed and demonstrated/practiced. Studies have shown that the false positive rate for MRI’s are quite high and the psychological effect on patient perception can result in poor outcomes.

Recently, there has been an increase in the number of joint replacements for the shoulder, knee, and hip; therefore, necessitating the importance of ruling out mechanical causes of joint pain, before considering referral to specialists. We will describe several joint problem areas including the shoulder, knee, and hip, along with the research as to reliability of diagnostic procedures (i.e., x-rays, MRIs). We will also share several case studies for each joint in which patients were considered candidates for total joint replacement but sought MDT as a second opinion identifying a mechanical fault that reversed their painful condition. It is clear that nurse practitioners are faced with a confusing web of treatment resources, with several having the potential to lead to serious medical diagnostics and procedures that could be unnecessary and may result in inappropriate care for their patients.

Joseph G. Maccio, MA, PT, Dip. MDT, Troy, NY
1:15 PM – 5:30 PM

**LL1706 Psychopharmacology Review/Update**
(4 CH & 4 PCH) Additional fee of $125 for learning lab

An overview of the neurobiological basis of various psychopathologies and review of the basics of psychopharmacology followed by a review and update of the basic and clinical pharmacology of the major classes of psychotropic drugs including antidepressants, antipsychotics, mood stabilizers, anxiolytics, sedatives-hypnotics and stimulants.

*Alan P. Agins, PhD, Tucson, AZ*

**LL1707 Pediatric and Adult Heart Sounds and Murmurs: An Interactive Learning Lab**
(4 CH) Additional fee of $125 for learning lab

Cardiac assessment skills are essential for every nurse practitioner, regardless of employment setting. This session is for every nurse practitioner looking to improve the identification of pediatric and adult heart sounds and murmurs. Using an interactive CD ROM, various murmurs will be discussed and heart sounds projected both acoustically and visually.

*Wendy L. Wright, MS, RN, APRN, FNP, FAANP, FAAN, Bedford, NH*

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**LL1708 Female Sexual Dysfunction Across the Life Span: How to Assess, Diagnose and Manage**
(4 CH & .50 PCH) Additional fee of $125 for learning lab

This learning lab will address basic anatomy and physiology as it relates to female sexual dysfunction. We will dispel myths, address communication barriers, as well as address office based assessment and counseling. Discuss the various over the counter products, prescription medications and sexual devices available. Case studies will be used to show common examples of dysfunctions and how to address them. Also, we will review in detail, common sexual devices and lubricants that all clinicians must become familiar and comfortable with so that they can discuss them easily with their patients. These devices will be available for hands on review and discussion. Women look to us as the experts in this subject matter, so let’s become that expert.

*Kelly Battoglia, BSN, MS, RN, OB/GYN, NP-BC, Rochester, NY*

**Please Note:** If you have registered for both the morning and afternoon learning labs on Thursday, October 19, lunch will be provided.

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  Region 1 Director
Friday, October 20, 2017

7:00 AM – 5:00 PM
Registration

7:15 AM – 8:45 AM
Continental Breakfast - coffee, tea, juice, fruit, yogurt, pastries, bagels, cereals

8:00 AM
Welcome by NPA President David Dempsey, DNP, FNP-BC

8:15 AM – 9:15 AM
A1709 Keynote: Scharmaine Lawson-Baker, DNP, FNP-BC, FAANP
The Modern Nurse Practitioner
(1 CH)

Dr. Scharmaine Lawson-Baker presents a compelling and thoughtful narrative on understanding the overall challenges that the modern nurse practitioner will encounter daily. This session will cover the highs and lows of entrepreneurship and the future nurse practitioner practice. Attendees will leave the session with a clear understanding of the NP role in entrepreneurship and insight into the future of advanced practice nursing practice.

9:15 AM – 10:30 AM
B1710 NPA 2017 Legislative Update
(1 CH)

The NPA Governmental Affairs Team will discuss activities that occurred during the 2017 legislative session. Learn the importance of being active in your professional association, participating in Capital Day and contributing to the Nurse Practitioner of New York State Political Action Committee (PAC).

Joy Elwell, DNP, FNP-BC, FAANP, NPA Governmental Affairs Committee Chair, Joshua Oppenheimer, Esq., Greenberg Traurig, LLP Associates and Jane Preston, Senior Director, Greenberg Traurig, LLP Associates

10:30 AM – 11:15 AM
Grand Opening of the Exhibit Hall – morning break – beverages and light snack

11:15 AM – 12:15 PM
C1711 Whatever happened to Step 1 in the WHO Pain Ladder? NSAIDs, Acetaminophen, Adjuvant Agents
(1 CH & 1 PCH)

For approximately the past decade and a half, it seems as if the medical establishment had forgotten that there was actually a first step in the WHO pain treatment ladder, jumping straight to steps 2 and 3 using opioids a first choice for treating all types of pain. With the recent and growing push back on rampant opioid use, WHO Step 1 re-emerges as a good place to start the process of pain management. This session will be a discussion of Step 1 options including non-opioid analgesics such as NSAIDs and acetaminophen (including new FDA warnings and options for reducing risk), adjuvant agents (antidepressants, antiepileptics, topicals, etc.) and a reminder of the non-pharmacological options (heat, ice, exercise, weight loss, etc.).

Alan P. Agins, PhD, Tucson, AZ

C1712 Managing Behaviors in Dementia Patients
(1 CH & .66 PCH)

Dementia related behaviors present many challenges. Frequently, behaviors mask underlying illnesses, compounded by the general physical decline and disease of aging. In this session, we will discuss the etiology, assessment tools, keys to diagnosis and documentation, pharmacotherapy and long term management of various behaviors that are frequently experienced in those patients with dementia.

Jody F. Agins, MSN, RNP, FNP/GNP-BC, Tucson, AZ

C1713 Pertussis 2017: A Look at this Underdiagnosed Condition
(1 CH & .33 PCH)

Pertussis is thought to affect approximately 1 to 3 million individuals yearly in the United States yet only 25,000 cases are diagnosed and reported annually. This lecture will focus on the signs and symptoms, diagnosis and treatment of this highly contagious condition. In addition, prevention strategies will be explored.

Wendy L. Wright, MS, RN, APRN, FNP, FAANP, FAAN, Bedford, NH

C1714 The Role of the Primary Care Clinician in HIV Care and Prevention
(1 CH & .41 PCH)

This presentation will provide an overview of the most current issues in HIV screening, diagnosis, and management and the role of the primary care clinician in managing patients with HIV infection. The presentation will also review and discuss the latest information on HIV prevention, including HIV pre-exposure prophylaxis (PrEP) for individuals at risk for HIV infection.

Jeffrey Kwong, DNP, MPH, ANP-BC, AAHIVS, AANP, New York, NY
C1715 Introduction to Female Sexual Function and Dysfunction during Perimenopausal and Postmenopausal Period  
(1 CH & .25 PCH)
This presentation will focus on women during the perimenopausal and postmenopausal period as that is a significant life stage that brings with it sexual questions and concerns. Typically, women are approaching a time in their life or their relationship where the children are either moving out or going to college all while their hormones and bodies are experiencing changes that could easily be perceived as significant as when we went through puberty. Every aspect of one’s life and body can experience changes so significant that women often find themselves confused about their life and what they used to consider normal or took for granted as normal. Partners and patients can experience medical comorbidities that affect one’s sex drive, orgasm and create pain with intercourse. We will review how to assess, diagnose and treat interest and arousal disorders, orgasm disorders and genito-pelvic pain disorders. Our focus in this talk will be on this life stage and the sex products/toys/lubes currently available. We will address each type of product in regards to its application to the concerns or dysfunctions that can occur in this life stage of development. Products will be available for viewing and discussion.
Kelly Battaglia, BSN, MS, RN, OB/GYN, NP-BC, Rochester, NY

C1716 Nursing: Substance Use, Drug Diversion and Recovery  
(1 CH)
Substance use, drug diversion, and recovery are important topics in today’s nursing profession. Reasons for increased risk for nurses’ substance use and increased risk of drug diversion will be discussed along with the warning signs that may indicate the practices of an impaired nurse. While impaired practice and substance use cannot be tolerated in the healthcare workplace recovery, nurses are able to recover from substance use and practice safely in their profession. Resources will be identified to assist with nurses obtaining and maintaining recovery from substance use.
Nancy Rogers, MS, RN-BC, CASAC, CNE, Darien Center, NY

12:30 PM – 2:00 PM

D1718 Luncheon Presentation – Peaceful Planning: Why NPs and Their Patients Need a Will and How to Strategize With Confidence  
(1 CH) Additional fee of $30 for lunch
Nurse practitioners assist patients on a daily basis with difficult medical issues. Sometimes you are an active part of their decision making on life and death decisions. In this essential role, it is important for you to have the basic knowledge about end of life legal planning for your family and your patients. NPA’s Corporate Counsel, Robert Pitkofsky, walks you through basic estate planning, including the need to plan, overcoming objections to planning, and reducing the mystery in the purpose of wills, trusts, powers of attorney, and other estate planning documents. His goal is to empower you and your patients with the information necessary to consider important end-of-life issues.
Robert L. Pitkofsky, Esq., The NPA’s Corporate Counsel

2:15 PM – 3:15 PM

E1719 Understanding the Basic Pharmacology of Medications for Type 2 Diabetes  
(1 CH & .75 PCH)
It’s one thing to simply choose medications from the recommendation lists in the ADA and AACE treatment guidelines, but it’s another thing to truly understand where those drugs work, how they work and if they’re the best choice for a particular patient. This session starts with an examination of the etiology and pathophysiology of Type 2 diabetes that provides a backdrop for understanding the rationale for use of select agents as well as the basic and clinical pharmacology of the major classes of non-insulin medications for treating the disease (biguanides, TZDs, gliptins, GLP-1 agonists, sulfonylureas, SGLT2 inhibitors, etc).
Alan P. Agins, PhD, Tucson, AZ

E1720 Basic Wound Care: Assessment, Documentation and Treatment  
(1 CH & .33 PCH)
This presentation will define wounds (pressure ulcers, venous, arterial, diabetic, deep tissue injury and skin tears). We will also cover wound assessment and documentation as well as discuss the principles of wound healing and selected treatment options available.
Jody F. Agins, MSN, RNP, FNP/GNP-BC, Tucson, AZ

E1721 Laboratory Interpretation: Challenging Cases for the Primary Provider  
(1 CH & .16 PCH)
Challenging cases involving anemia, WBC and LFT abnormalities will be presented by an experienced nurse practitioner. Learn to decipher and make sense of various laboratory abnormalities.
Wendy L. Wright, MS, RN, APRN, FNP, FAANP, FAAN, Bedford, NH

E1722 Pediatric Vaccines 2017: What is New from the CDC  
(1 CH & 1 PCH)
This presentation will describe the most current immunization recommendations from the Centers for Disease Control and Prevention (CDC) for children. The best available evidence for vaccine preventable diseases will be analyzed. A review of recently revised indications will be discussed. Interpretation of the pediatric immunization schedules will be reviewed using an interactive case study format.
Mary Beth Koslap Petraco, DNP, PNP-BC, CPNP, FAANP, Massapequa Park, NY

Or lunch on your own
E1723 Managing Patients with Breast Pain  
(1 CH & .25 PCH)  
Approximately 70% of all women will experience breast pain at some point in their lives. This means that any nurse practitioner who provides care to women will be faced with managing patient’s breast pain symptoms and allaying patient fears regarding breast pain as a sign of breast cancer. We will review the causes of breast pain, how to evaluate breast pain and how to treat patients with breast pain and when to send patients for additional testing and imaging. We will discuss patient self-help tips that may provide relief of symptoms as well as non-pharmacologic, complementary and alternative, and pharmacologic interventions that may be helpful.  
Debra A. Walz, MS, RN, WHNP-BC, AOCNP, RNFA, Marcy, NY

E1724 Cultural and Clinical Competency in Transgender Care  
(1 CH & .25 PCH)  
There are many barriers to care for transgender individuals, including access to competent healthcare providers. There is limited or absent content in medical and nursing school educational programs. More than half of all medical schools’ curriculum does not routinely encompass LGBT health issues; this contributes to decreased access to care, as 19% of transgender people report being refused care and 50% report having to teach their provider about transgender care. In addition, evidence based guidelines regarding primary care for this population is scarce. This presentation helps to lower the barrier by discussing cultural issues encountered by transgender patients as well as clinical issues that pertain to transgender care, including hormone therapy.  
Laura Markwick, DNP, FNP-C, Pittsford, NY

E1725 Complex Wound & Skin Conditions  
(1 CH)  
This program is intended to advance the knowledge of health care providers in management of complex wound and skin conditions seen in the pediatric population. Treatment of these conditions is addressed from causation, specialized critical care management, and discharge treatment. This lecture provides basic complex wound care management interventions, practical application of current therapies, and expected clinical patient outcomes.  
Debbie Harrell, MSN, RN, NE-BC, Cincinnati, OH

4:00 PM – 5:00 PM

F1726 Negotiating Emotional Order after Breast Cancer Treatment  
(1 CH)  
Extensive research regarding cancer treatment has promoted better outcomes in treating the disease, yet there is a significant gap in the literature regarding the survivorship process. As the population of breast cancer survivors grows and lives longer, the care of extended breast cancer survivors has become increasingly prominent in health care settings other than oncology specialty clinics, making it imperative for the health care community to understand the process of survivorship from the perspective of the women who are in the midst of this lifelong process. Nurse practitioners play an important role in the primary care of breast cancer survivors as credible authorities providing vital information and care to this population. Classic grounded theory was used to capture the intricate processes and perspectives of 12 women who had completed initial treatment for breast cancer. The findings revealed the basic social process of negotiating emotional order that describe how breast cancer survivors perceive their illness and decide to take action. From the data a cyclical five stage latent process of negotiating emotional order emerged consisting of: 1) Losing Life Order, 2) Assisted Life Order, 3) Assuming Life Order 4) Accepting the Things You Cannot Control, and, 5) Creating Emotional Order. This study’s findings may help healthcare providers who care for breast cancer survivors understand the depth and perpetual emotional impact that breast cancer survivors endure. This research presentation will aid in the nurse practitioners’ understanding of the psychological impact that breast cancer has upon survivors.  
Jennifer Klimek Yingling, PhD, RN, ANP-BC, FNP-BC, Utica, NY

F1727 Primary Care for the LGBTQI Client  
(1 CH)  
Providing primary care across the lifespan for the Lesbian, Gay, Bi-Sexual, Transgender, Queer/questioning, Intersex (LGBTQI) population can be challenging and may even be daunting to some providers. This presentation will provide a review of how to obtain a relevant health status of the LGBTQI client, identify potential health problems that may affect this population in and outside the bedroom, and create a plan of care with the client’s individual needs in mind. These strategies will be discussed and explored through interactive, unfolding case studies.  
Justin M. Waryold, DNP, NP-C, Patchogue, NY & Kelly C. Walker, DNP, CNM, Port Jefferson, NY

F1728 Routine to Rare: Emergent Burn Care  
(1 CH)  
This program is intended to advance the knowledge of health care providers in pediatric burn care management. Treatment of burn injured children is addressed from the care at the scene, during transport and care in the emergency room. This lecture provides basic burn care management interventions, practical application of current therapies, and expected clinical patient outcomes.  
Debbie Harrell, MSN, RN, NE-BC, Cincinnati, OH
F1729 Beyond Sickness: How to Create Health and Well-being for Ourselves and Our Patients
(1 CH)

We will illuminate a path for nurse practitioners to move beyond treating and managing disease to awakening and empowering your patients to take control of their health by putting them in a position to prevent and reverse chronic disease. We will review the current reality of sick care and how to break the cycle of the erosion of health that impacts our patient and ourselves. Creating a healthy mindset and mindfulness are central to acquiring healthier habits and redesigning our lives so we can advance beyond sickness to physical, emotional and mental health and by doing so ensure improved clinical outcomes, healthier patients and healthier practices under MACRA and MIPS, the new ‘value based’ reimbursement methodology for health professionals.

Mark Nelson, MD, FACC, MPH, COPE Certified Health Coach, Practice Wellness Consultant, Troy, NY

F1730 Treatment for Hepatitis C: New Tests, New Drugs & New Recommendations
(1 CH & .33 PCH)

According to the CDC, approximately 3.2 million people are living with Hepatitis C (HCV). However, nearly three-quarters of these people don’t know that they are infected. Chronic HCV is responsible for approximately 40% of all liver disease and is the leading cause of liver transplantation in the United States. In New York State, it is estimated that over 200,000 people are living with HCV and most do not know their status. Until recently, there have been limited options to treat HCV. However, recent advances in treatment options have made HCV curable. This session will explain the epidemiology of HCV, discuss laboratory testing and diagnosis of HCV infection, and design a therapeutic regimen and monitoring plan for the treatment of HCV.

Hilda Ortiz-Morales, NPc, DHA, AAHIVS, AACRN, Cortlandt Manor, NY

F1731 Diabetes Related Microvascular Complications: What Every Nurse Practitioner Should Know
(1 CH & .33 PCH)

Microvascular complications associated with diabetes are heterogeneous with an array of clinical symptoms. Diagnosis, treatment, and prompt referral are essential in minimizing their devastating effects. This presentation will review microvascular complications related to diabetes, in particular Nephropathy, Neuropathy, and Retinopathy. Common and difficult to diagnose entities will be evaluated. Diagnostic criteria and appropriate referral will be discussed, as per the most recent ADA guidelines.

Eileen Egan, DNP, FNP-C, CDE, Mineola, NY

F1732 Recognizing and Treating Children’s Environmental Health Exposures
(1 CH)

Childhood environmental exposures - where they live, learn and play - can lead to long-term health consequences. They’re also largely preventable. Learn how acute and chronic exposures to indoor contaminants, air pollution, flooding, extreme heat and chemical contaminants can affect children’s health, and how to recognize, treat and prevent associated health impacts.

Rebecca Ofrane, MPH, New York, NY

5:15 PM – 6:15 PM

Regional Meetings
(1 CH)

Regional meetings provide members an opportunity to hear from your Regional Director and/or Regional Leaders. Learn more about the Association and the enhanced regional model. This session also provides members an opportunity to share information and concerns within their geographic area. Non-members are invited to attend a regional meeting to learn more about The Nurse Practitioner Association New York State, our regions and the local groups within each region.

G1733 Region 1 – Southern Tier, Western New York
G1734 Region 2 – Finger Lakes, Greater Rochester, Susquehanna, Tompkins Cortland
G1735 Region 3 – Lake Ontario, Mohawk Valley, Syracuse, Thousand Island
G1736 Region 4 – Adirondack, Capital, Leatherstocking Catskill, Saratoga Warren
G1737 Region 5 – Dutchess Ulster, Greater Newburgh, Lower Hudson Valley
G1738 Region 6 – Brooklyn Queens, Manhattan Bronx, Staten Island
G1739 Region 7 – Long Island

6:15 PM – 7:15 PM

Networking Reception

This is an opportunity to network with your colleagues, reconnect with friends, build new friendships and share a few laughs.

Light hors d’oeuvres will be served. Cash bar available.
Saturday, October 21, 2017

7:30 AM – 5:00 PM
Registration

7:30 AM – 9:00 AM
Continental Breakfast – coffee, tea, fruit, yogurt, pastries, bagels, cereals

8:00 AM – 9:15 AM
H1740 NPA Annual Membership Meeting and Awards Presentation
(1 CH)
David Dempsey, DNP, FNP-BC, President and Stephen Ferrara, DNP, FNP-BC, FAANP, Executive Director for The Nurse Practitioner Association New York State will present on the current state of the association, accomplishments and plans for the future of the association.

You will also hear from candidates running for office for The NPA Board of Directors. In accordance with NPA by-laws, a vote of these candidates if running unopposed on a slate will be taken at the membership meeting.

Presentation of awards will conclude the annual membership meeting.

9:15 AM – 10:15 AM
I1741 Don’t Become a Claim Statistic: NP Claim Trends, Scenarios and Risk Control Recommendations
(1 CH)
This program will explore current malpractice claims data against New York nurse practitioners contrasted to the experience of nurse practitioners across the country. We will review the nature of claims, injuries and outcomes from both a risk and a fiscal perspective. Also reviewed will be claim scenarios pulled from our database as a didactic tool to help nurse practitioners identify professional risk exposures as well as tools they can use to minimize these risks.

Michael Loughran, President, Aon Affinity Insurance Services, Health Care Division, Nurses Service Organization

10:15 AM – 11:00 AM
Morning refreshment break in the Exhibit Hall – beverages and light snack

11:00 AM – 12:00 PM
J1742 Drug Interactions: Mechanisms and Potential Clinical Outcome
(1 CH & 1 PCH)
A review of the types of drug interactions and their potential clinical impact, includes pharmacokinetic interactions (absorption, protein binding, CYP350, etc.) and pharmacodynamics interactions (additive, antagonistic, etc.) between prescription drugs, OTC drugs as well as with supplements, foods, beverages, lifestyles.

Alan P. Agins, PhD, Tucson, AZ

J1743 Forget about it! Differentiation and Diagnosis of Dementia
(1 CH & .58 PCH)
Every 66 seconds someone in the United States develops Alzheimer’s Dementia…1 in 9 adults over the age of 65 is living with this disease. Dementia predominantly affects elderly people and is expected to rise significantly with “Silver Tsunami” (“The Grey/Gray Tsunami”). The Centers for Medicare and Medicaid Services recognizes that knowledge through education provides enhanced, effective care quality, which should begin at diagnosis. In this session, we will review guidelines that will assist in understanding causes of dementia, diagnosis, assessment, and treatments available to slow progression.

Jody F. Agins, MSN, RNP, FNP/GNP-BC, Tucson, AZ

J1744 Adult Vaccines 2017: Making Sense of the CDC Schedules
(1 CH & 1 PCH)
This presentation will describe the most current immunization recommendations from the Centers for Disease Control and Prevention (CDC) for adults. The best available evidence for vaccine preventable diseases will be analyzed. A review of recently revised indications will be discussed. Interpretation of adult immunization schedules will be reviewed using an interactive case study format.

Mary Beth Koslap Petraco, DNP, PNP-BC, CPNP, FAANP, Massapequa Park, NY

J1745 Introducing Transgender Hormone into your Practice
(1 CH & .75 PCH)
This session is designed to demystify transgender hormone therapy for adults, a service which can be provided safely by clinicians working in primary care and reproductive health. This session will include an overview of protocols for the provision of transgender hormone therapy. Also discussed will be dosing, titration, effects and side effects of the three medications used in male to female and female to male transgender hormone therapy.

Leia Raphaelidis, FNP-BC, Ithaca, NY

J1746 2015 Cervical Cancer Screening Guidelines: To pap or not to pap
(1 CH)
Review the various published pap smear guidelines and the role of HPV in cervical cancer. Evidence based discussion of the rationale for current screening guidelines.

Michele Ambor-Hutz, MS, WHNP, Eden, NY
J1747 Delivery of Palliative Care in the Primary Care Setting
(1 CH)
Palliative care is a hot topic in health care today, and is part of the Medicaid redesign in NYS known as Delivery System Reform Incentive Payment (DSRIP). Currently most expert palliative care is offered only to hospital inpatients. While outpatient palliative care is being developed around the country, it is far from established as a reliable resource; therefore, it falls to the primary care practitioner to provide basic palliative care to patients with chronic illness and/or advanced age. Additionally, some DSRIP projects are calling for the delivery of palliative care within primary care. What does this mean? How can we provide good palliative care within an office visit? This presentation will address practical strategies for addressing palliative care needs, including and beyond use of the Medical Orders for Life Sustaining Treatment (MOLST) form. The approach to the patient with palliative care needs will be discussed and patient resources will be explored. This session will also include information on billing for the palliative care appointment.

Jane Schantz, MS, FNP-BC, ACHPN, Ithaca, NY

J1748 Pediatric Attention Deficit Hyperactivity Disorder: Do you get it?
(1 CH & .25 PCH)
Attention deficit hyperactivity disorder (ADHD) is one of the most commonly diagnosed, and often misunderstood, childhood psychiatric problems. The disorder brings a significantly increased risk for school dropout, early substance abuse, juvenile delinquency, and life-long depression. Even though ADHD can be successfully managed with evidence-based strategies, many healthcare providers are unaware of the recommendations that exist or are unsure how to employ them in general practice.

This presentation will discuss how nurse practitioners can positively impact the lives of ADHD children once “they get” how to translate evidence-based guidelines to clinical practice.

Mashelle Jansen, DNP, FNP-C, Groton, NY

12:15 PM – 1:45 PM

K1749 Luncheon Presentation – Panel Discussion: NP-Owned Practices
(1 CH) Additional fee of $30 for lunch
In this moderated panel discussion, hear from nurse practitioners in various specialties throughout New York who currently own their own practice. The discussion will include their challenges, successes, suggestions, and recommendations for future NP practice. The attendee will gain understanding and insight into running an independent practice and compare/contrast approaches.

Mary Beth Koslap-Petraco DNP, PNP-BC, CPNP, FAANP, Owner, Pediatric Nurse Practitioner House Calls/PNP, Massapequa Park, NY
Laura Markwick, DNP, FNP-C, Owner, NP Family Care of Rochester, FNP, Rochester, NY
Henry E. Moscicki, DNP, FNP-C, Owner, Genesee Health Care, FNP-C, Batavia, NY
Denis Tarrant, NP, Owner, Manhattan House Calls, PLCC, Manhattan, NY

Or lunch on your own

2:00 PM – 3:00 PM

L1750 Behind the Scenes in Parkinson's Disease
(1 CH & .25 PCH)
Parkinson's disease (PD) is a common neurodegenerative disorder demonstrating age related prevalence with 1% of the population affected over the age of 60 and 4% at age 85. Its prevalence is second only to Alzheimer’s Disease. The significance of this disease is tremendously affecting function, quality of life and caregiver burden. The impact includes major financial burdens and health care costs. Although it’s cause remains unknown it is very important that nursing practitioners increase awareness of this complex disease and it’s management. It is important to understand associated pathophysiology, motor and non-motor symptomology, timely diagnosis, management, common challenges, medication modalities along with new and promising treatments. Mitigating complications is essential in caring for this patient population, especially when hospitalized. Also important, is an understanding of current research that is being done for PD.

Anna Marie Wellins, DNP, ANP-C, M.Ed., Water Mill, NY

L1751 The Clinical Breast Exam and Teaching Self-Breast Exams
(1 CH)
Not all health organizations recommend clinical breast exams (CBE) or self-breast exams (SBE) as part of routine annual care or patient self-care due to the chance of false positive results that may require follow-up testing. Yet the goal of a thorough CBE and SBE is to find as many cancers as possible at their earliest stage to initiate early and successful intervention, NOT reduce false positive results. We will review how to integrate a comprehensive CBE into a well woman exam while at the same time teaching your patients how to and when to do SBE.

Debra A. Walz, MS, RN, WHNP-BC, AOCNP, RNFA, Marcy, NY

L1752 Recognizing and Treating Women with Postpartum Affective and Anxiety Disorders
(1 CH & .25 PCH)
This presentation will review common disorders manifested in the postpartum period. These disorders include generalized anxiety, obsessive compulsive disorder, depression and mood lability. A review of postpartum endocrine changes as well as the potential effect of breastfeeding and hormonal contraception will be discussed. Finally, recognition and treatment recommendations will be presented.

Laura Kelly, PhD, APN, Wall, NJ
L1753 Head Games: Recognition and Management of Pediatric Head Injuries
(1CH)
It is imperative that all nurse practitioners caring for children recognize the signs and symptoms of a concussion identify when a patient requires higher level of care including imaging, and knowledge on how to effectively manage a patient who has suffered a significant head injury. This presentation will outline what defines a concussion, how to identify a patient that has suffered a significant head injury, along with instruction and guidance on managing a patient who has been diagnosed with a concussion.
Heather Martin, DNP, RN, PNP-BC, Rochester, NY

L1754 Rapidly Reversible Extremity Joint Pain: Bone-on-Bone or Just Deranged?
(1 CH)
We will provide differential diagnosis using Mechanical Diagnosis and Therapy (MDT) to improve treatment choice with extremity joint pain. Recently, there has been an increase in the number of joint replacements for the shoulder, knee, and hip; therefore, necessitating the importance of ruling out mechanical causes of joint pain before considering referral to specialists. We will describe several joint problem areas including the shoulder, knee, and hip, along with the research as to reliability of diagnostic procedures (i.e., x-rays, MRIs). We will also share several case studies for each joint in which patients were considered candidates for total joint replacement but sought MDT as a second opinion identifying a mechanical fault that reversed their painful condition. Literature supports that physical therapists’ clinical assessment, management, and diagnostic capabilities are similar and as effective as orthopedic fellows, assistant surgeons, and surgeons, and has the ability to enhance conservative care options. The sole use of a mechanical assessment and treatment for orthopedic conditions, using MDT, has been well established in the literature and has been shown to be more reliable and prognostic than diagnostic imaging. The use of mechanical care, compared to traditional community care, has been shown to have a 40% cost-reduction in medical treatments by reducing the need for diagnostic studies and invasive procedures. It is clear that nurse practitioners are faced with a confusing web of treatment resources, with several having the potential to lead to serious medical diagnostics and procedures that could be unnecessary and may result in inappropriate care for their patients.
Joseph G. Maccio, MA, PT, Dip. MDT, Troy, NY

L1755 Cardiac Case: What is the Diagnosis?
(1 CH)
This presentation includes an actual case scenario from a rapid response. Assessment and workup for a patient with chest pain will be reviewed. There is a surprise element to the presentation. The actual diagnosis will eventually be revealed and the pathophysiology and management of the diagnosis will be reviewed in-depth.
Jibran Majeed, CCRN, ACNP-BC, Brooklyn, NY

2:00 PM – 5:30 PM
M1756 Opioid Prescribing: Safe Practice, Changing Lives – Update 2017
This program discusses pain from a contextual perspective, patient selection and risk assessment associated with opioid use for acute and chronic pain, the initiation and modification of ER/LA therapy, ongoing monitoring, and patient and caregiver education. The CDC Guideline for prescribing opioids for chronic pain, as well as immediate release opioids, cannabis, and addiction treatment will also be discussed. The curriculum was developed to meet the New York State requirement for 3 hours of CE in pain management, palliative care, and addiction and is compliant with the FDA Blueprint for ER/LA Opioid Analgesic REMS education by the Collaborative for REMS Education (CO*RE). This session is presented by the Nurse Practitioner Healthcare Foundation (NPHF), a member of CO*RE.
The Nurse Practitioner Healthcare Foundation is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation. Continuing education and pharmacology credit of 3 hours is provided by the Nurse Practitioner Healthcare Foundation.
Attendees must complete an Assessment and Evaluation on-site in order to receive their Certificate of Attendance.

OR
3:15 PM – 4:15 PM
N1757 Cardiovascular Disease in Women: Gender Does Matter
(1 CH & .50 PCH)
This presentation will examine the crucial differences in early detection and health promotion of women versus men in cardiovascular disease. ‘Knowing your numbers’, prevention and incorporating this knowledge into nurse practitioner practice in the clinical setting, as well as educating our patient population.
Maria A. Gallo, MSN, RN, ANP-BC, North Port, NY

N1758 Guiding Secondary Stroke Prevention through Evaluation of Ischemic Stroke Etiology
(1 CH & .33 PCH)
Ischemic stroke accounts for 80% of all strokes and carries a high risk of recurrence. Understanding the diagnostic evaluation of ischemic stroke to identify suspected etiology is essential in preventing recurrent stroke. At the conclusion of this presentation participants will understand how stroke etiology is determined through diagnostic testing, identify various etiologies of stroke, and enhance their practice through identification of prevention strategies that are specific to stroke etiology. Included in the presentation will be advice on advanced evaluation of cryptogenic stroke.
Ann M. Leonhardt Caprio, MS, RN, ANP-BC, West Henrietta, NY
N1759 Asthma across the Lifespan for the Advanced Practice Nurse
(1 CH & .41 PCH)

Asthma is a common presenting patient complaint in the primary care office. This presentation will include asthma as a chronic inflammatory disease, asthma triggers, signs and symptoms, assessment, and management. The pharmacologic management in both acute and chronic presentations with a case based correlation of care will be presented. Asthma guidelines and outcome measures, with the role of the asthma educator will complete the total picture of asthma care. Children, adult, pregnant and older adult populations will be discussed as well as special considerations of Vitamin D and magnesium, and the obese patient.

Patrice A. Hood, DNP , ANP-BC, FNP-BC, AAE-BC, CDE, Deer Park, NY

N1760 Introduction to Chest CT Interpretation for the Advanced Practice Provider
(1 CH)

Introduction to an approach to interpreting Chest CTs including an overview of basic thoracic anatomy, planes of imaging, orientation, and basic pathologies.

Deborah Stein, RN, ACNP-BC, CCRN, New York, NY

N1761 Geriatric Syndromes: What are they? How are they diagnosed and treated? How can you reduce their impact on your patients’ lives?
(1 CH)

Geriatric syndromes, such as dizziness, falls, urinary incontinence and frailty, are conditions commonly experienced by elderly patients. They are associated with poor health outcomes, functional decline, and loss of independence, and may result in hospitalization, debility and mortality. Yet, these syndromes are frequently overlooked or misdiagnosed and go undertreated by healthcare providers pressed for time and focused on acute problems and chronic disease management. Based on a review of the current literature, and the presenter’s years of clinical experience, this lecture will cover several geriatric syndromes including falls, urinary incontinence, dizziness, delirium, dementia, sleep problems, frailty and polypharmacy. Lecture, discussion, and case study presentation, enhanced by video clips, will be presented to assist the primary care provider confronted with these syndromes, which are often difficult to diagnose, to better identify and treat these syndromes, and to reduce their burden on their patients.

Siobhan Sundel, DNP, GNP-BC, ANP, New York, NY

N1762 Lifestyle Counseling to Help Obese Patients
(1 CH)

Lifestyle change is necessary to help our overweight patients maintain weight loss. This lecture will teach technique to help you motivate your patients to achieve long term weight loss. In addition, strategies to improve nutrition and exercise compliance will be discussed.

Michael Kaplan, DO, ABIM, ABOM, Smithtown, NY

4:30 PM – 5:30 PM

O1763 Pelvic Venous Insufficiency: Overlooked and Underdiagnosed Cause of Chronic Pelvic Pain
(1 CH)

Approximately one third of all women will suffer from pelvic pain during their lifetime. Pelvic venous insufficiency (PVI) is one of many causes of chronic pelvic pain and must be considered among the differential diagnosis. Nurse practitioners in a wide variety of settings are likely to encounter patients with chronic pelvic pain and are in a key position to recognize PVI. Identification of risk factors and causes of PVI will be discussed, including signs and symptoms reviewed with case studies and imaging. Strategies regarding appropriate referral for evaluation and definitive treatment will be described.

Doreen Elitharp, MS, RN, ANP-C, Eastport, NY

O1764 Integrating Holistic Wellness into General Practices
(1 CH)

This presentation will review the history of Holism, principles, and practices that we can use on a daily basis for ourselves and our clients to promote wellness and healing as an alternative or adjunct treatment.

Sherie Richards Ramsgard, MSN, FNP, NPP, Syracuse, NY

O1765 Childhood Bullying – What’s New, What’s Not
(1 CH)

While the deadly consequences of bullying have put this topic center stage in both media and research, the reality is that most practitioners deal with the less obvious antecedents and consequences of childhood bullying on a regular basis. This presentation aims to enhance the identification and management of bullying, using a multidisciplinary approach.

Mary Muscari, PhD, MSCr, CPNP, PMHCNS-BC, AFN-BC, Hawley, PA

O1766 Transcatheter Aortic Valve Replacement and Structural Heart Innovative Therapy Update
(1 CH)

This presentation is an overview of innovative therapies currently FDA approved and available for treating structural heart and valvular diseases. Discussion will include aortic stenosis and transcatheter aortic valve replacement/TAVR; mitral regurgitation and transcatheter mitral valve repair/MITRALICIP; hypertrophic cardiomyopathy/ HOCM and alcohol septal ablation; PFO/ASD CVA risk and closure; and left atrial appendage closure/watchman device. Disease process and progression, treatment options, procedural indications and considerations will be discussed.

Rosemary Hansen, RN, A-GNP, DNP, North Tonawanda, NY
01767 The Art of Conducting an End of Life Discussion  
(1 CH) 
This presentation will review how to engage in an end of life discussion with a family when preparing for a loved one’s demise. Too often nurse practitioners find themselves in a situation where the patient is nearing death and the need for preparing the family will arise, but the NP does not know how to do so. Some NP’s avoid the topic, some are blunt and come across as not caring, and some are afraid. The topic of death and dying is not always a comfortable topic and most don’t want to talk about it, but families are relying on the health care providers that they trust, the NP, to help guide them during this difficult time. Unfortunately, this topic is not taught in schools and is not practiced during training, but yet, we as NP’s are expected to successfully have this delicate conversation with our patients and their families. This is an evidence based presentation to help provide NP’s with conducting end of life conversations with patients and their families. 

Jennifer Muilenburg, MS, RN, ANP-C, Smithtown, NY

01768 Esophageal Cancer: A Less Common but Deadly Cancer  
(1 CH) 
The purpose of this presentation is to increase awareness of Esophageal Cancer and provide nurse practitioners with valuable clinical knowledge. Esophageal cancer (EsC) is the eighth most common malignancies worldwide. Although EsC is not considered a common cancer in the United States, 18,000 new cases are diagnosed each year and roughly 15,000 people die from this disease annually. The most common types of EsC are squamous cell carcinoma and adenocarcinoma of the esophagus. Over the past few decades there has been a dramatic increase in the incidence of adenocarcinoma of the esophagus in United States, whereas the rate of squamous cell of the esophagus has remained relatively stable. This epidemiologic change is linked to the increase of Barrett’s Esophagus. EsC is four times more common in men than in women. Patients with EsC have no obvious clinical features and are very often diagnosed at moderate or later stage. The overall 5-year survival rate is less than 20%.

Esophageal cancer is a devastating disease. Although some patients can be cured, the treatment for esophageal cancer is protracted, diminishes quality of life, and is lethal in a significant number of cases. Esophageal cancer stage is based on depth of tumor invasion, involvement of regional lymph nodes, and the presence of metastatic disease. Obtaining accurate pre-treatment staging and then subsequently providing stage-appropriate treatment is crucial in optimizing esophageal cancer outcomes.

Mary McGreal, DNP, RN, ANP-C, CCRN, CMC, Woodside, NY
Comprehensive Approach to Diagnosis and Treatment
(1 CH)

This presentation will introduce FMD, which is often termed “The most common uncommon disease you’ve never heard of”. The presenter will give her unique experience, diagnosis and life with FMD. An overview will include describing the pathophysiology; types; artery involvement; etiology; and, epidemiology of FMD. Common symptoms, diagnosis, imaging and treatment strategies including medical therapy, vascular procedures, education, lifestyle modification and living with FMD, as well as research and resources will be discussed.

Jean Murphy-Gustavson, DNP, RN, ANP-BC, Lindenhurst, NY

P1771 The Personality Disorder Conundrum: Why is this Patient so Difficult for Me?  
(1 CH)

Personality disorders present a challenging and complex backdrop to patients and their clinical presentation. Personality disorders are defined by rigid maladaptive pattern of responding to interpersonal interactions and experiences. Often patients with these disorders are mismanaged in the health care system because of our lack of understanding related to the origin and symptoms of the disorders. This presentation will review the personality disorders focusing on the prevalence, sociocultural factors, genetics and experienced factors. The DSM V criteria for the most prevalent disorders will be reviewed. A case study will be presented for group discussion.

Grace Saidel Wlasowicz, PhD, RN, PMHNP-BC, Webster, NY

P1772 Concussion and Post-Concussion Syndrome a Comprehensive Approach to Diagnosis and Treatment
(1 CH)

The session will address how our knowledge and treatment of concussion has change over the past 20 years and how new evidence into the pathophysiology of the brain, and initial and ongoing evidence-based treatment has implications not only for the present but also the long term effects of concussion. The evolving science is leading to a movement away from a primarily symptom-based assessment to include a more comprehensive approach to identify physical findings and subtle deficits that were often overlooked in a symptom-based approach.

Diane Olejar, MSN, ANP-BC, Rochester, NY

P1773 Heart Failure is NOT a Virus. It Doesn’t go Away: Care of the heart failure Patient in the primary care setting
(1 CH & .16 PCH)

The goal of Heart Failure (HF) management is to help the HF patient to feel better and live longer by partnering with the PCP and family to achieve this goal.

Utilizing Evidence Based Medical Therapy (EBMT) based upon the ACCF/AHA Guidelines for HF is the cornerstone of treatment. Engage the patient with education, recognize the signs and symptoms indicating any decompensation. Early intervention by the provider, patient and family will prevent hospitalization for acute decompensated HF.

This presentation will highlight the 2015 ACCF/AHA Guidelines for HF and focus on early recognition of decompensation. Proactive early management prevents hospitalization and allows the HF patient to indeed feel better and live longer.

Shelley Wojtaszczuk, BSN, MS, FNP-C, CHFN, Arcade, NY

P1774 Prostate Screening Update in Primary Care
(1 CH & .33 PCH)

Prostate cancer accounts for 19% of the new male cancer cases in the United States. It is the third leading cause of cancer mortality estimated at 8% in 2017. Risk factors include males 50 years of age and older, African American males, family history; diet high in animal fat and dairy products, geographic and environmental factors. When should primary care providers screen for prostate disease and using what methods? Recommendations are confusing between different societies and guidelines. Currently US Preventive Services Task Force USPSTF does not recommend PSA screening for prostate cancer due to harm of false positive readings and unnecessary treatments. American Cancer Society recommends annual screening if PSA level is greater than 2.5.Yet a single PSA measurement of greater than 1.6 ng/ml in men 45 to 49 years was associated with a 5.14% greater risk of dying of prostate cancer within 25 years of testing. The goal of this presentation is to provide nurse practitioners with the diagnostic skills. The use of PSA, digital rectal exam and latest information on the role of biomarkers and medication and treatments for prostate cancer will be reviewed. Primary care providers need to understand a reasonable process and environmental factors. When should primary care providers screen for prostate disease and using what methods? Recommendations are confusing between different societies and guidelines. Currently US Preventive Services Task Force USPSTF does not recommend PSA screening for prostate cancer due to harm of false positive readings and unnecessary treatments. American Cancer Society recommends annual screening if PSA level is greater than 2.5. Yet a single PSA measurement of greater than 1.6 ng/ml in men 45 to 49 years was associated with a 5.14% greater risk of dying of prostate cancer within 25 years of testing. The goal of this presentation is to provide nurse practitioners with the diagnostic skills. The use of PSA, digital rectal exam and latest information on the role of biomarkers and medication and treatments for prostate cancer will be reviewed. Primary care providers need to understand a reasonable process in prostate cancer screening to prevent unnecessary testing while decreasing the mortality risk of our male patients from this disease.

Maureen C. Roller, DNP, RN, ANP-BC, Glen Head, NY

P1775 Irritable Bowel Syndrome: Addressing the Role of Food, Probiotics and Medication
(1 CH & .25 PCH)

Irritable Bowel Syndrome (IBS) is one of the most common gastrointestinal conditions encountered by primary care and gastrointestinal nurse practitioners. Management of IBS can be frustrating and difficult for the patient as well as the health care provider. In the last several years, new treatment options have evolved. There is increasing interest in dietary modification and probiotics as a benefit to manage symptoms such as a Low FODMAP or a Low Gluten diet. The Pharmacologic/
Complementary/Alternative approach to symptom management is evolving. Nurse practitioners must be knowledgeable in the symptom management of IBS to deliver safe and therapeutic treatment.

*Lenore Lamanna, EdD, RN, ANP-C, Smithtown, NY*

**P1776 Unraveling the Crowded Insulin Scene: A Practical Overview of Insulin Focusing on New Insulin Preparations**

(1 CH & 1 PCH)

This presentation will describe the role of insulin in the treatment of diabetes with a brief overview of commonly known insulin preparations. A more in-depth review of newer insulin preparations will include their pharmacokinetics, prescribing recommendations, adverse effects, contraindications, and cost.

*Patricia Garnica, MS, RN, ANP-BC, CDE, CDTC, Manhasset, NY*

9:45 AM – 10:45 AM

**Q1777 Nurse Practitioners and Abortion Care in New York State**

(1 CH & .50 PCH)

This one-hour presentation will review the current and proposed state practice acts regulating the provision of abortion care by nurse practitioners as well as provide an overview of providing medication abortion care.

*Caroline M. Hewitt, DNS, RN, WHNP-BC, ANP-BC, Bronxville, NY & Lisa Maldonado, MA, MPH, New York, NY*

**Q1778 Psychiatric Emergencies: Accurately Assessing and Managing the Patient in Crisis**

(1 CH & .25 PCH)

This presentation will help the participant in recognizing and assessing psychiatric problems promptly and accurately, intervene safely, and initiate appropriate treatment and resultant disposition decisions. Real life case scenarios will be provided and discussed.

*Sherie Richards Ramsgard, MSN, FNP, NPP, Syracuse NY*

**Q1779 ENT Trifecta: PE Tubes, Tonsillectomy, Adenoidectomy**

(1 CH & .16 PCH)

Myringotomy with or without PE tube placement, tonsillectomy, and adenoidectomy are among the most common surgical procedures that children undergo. We will review these three procedures in detail, indications, current recommended criteria, non-surgical alternatives, when to refer to specialist, surgical considerations, risks and benefits, recovery and follow up.

*Keri Comerford, MS, RN, FNP-C, Rochester, NY*

**Q1780 Medical Cannabis Hype or Hope**

(1 CH & .41 PCH)

Medical cannabis use and acceptance has outpaced medical practitioner knowledge on the subject. In January 2017 nurse practitioners were added to the list of practitioners who can recommend medical cannabis as a treatment option for their patients with qualifying conditions in New York.

Medical cannabis is legal in twenty-eight states plus the District of Columbia with an additional sixteen states authorizing an ingredient of the plant called CBD. It is estimated that more than two million Americans legally use cannabis for medical purposes yet there is no standardized educational program for nurses who serve these patients.

Nurse practitioners need to understand the science behind the endocannabinoid system; their role regarding legal access and use by patients; and the clinical use of cannabis for treating the qualifying conditions in New York.

*Eileen Konieczny, RN, New Paltz, NY*

**Q1781 Amplified Musculoskeletal Pain Syndrome in Children: Finding a Solution to a Puzzling Diagnosis**

(1 CH)

Amplified musculoskeletal pain syndrome (AMPS) is a very painful and often debilitating medical condition. It can present as localized or diffuse pain and can often be difficult to diagnose. This lecture will describe the pathophysiology of AMPS and, through case studies, will detail the varying presentations and treatment approach. Resources will be given to aid clinicians as to where and how to refer patients for treatment.

*Barbra Murante, MS, RN, PNP-BC, Rochester, NY*

**Q1782 Advanced Heart Failure: New Medications, New Devices and New Therapies**

(1 CH & .50 PCH)

You’ve got your heart failure patient on an ACE-1, a beta-blocker, an aldosterone-inhibitor and a loop-diuretic. His ICD has been upgraded and he now has the benefit of CRT. He’s completed phase II cardiac rehab and is following a low sodium diet. And he is still short of breath. Now what?

Of the 5.7 million adults in the U.S. that have heart failure, about 10% have advanced heart failure. The condition is considered advanced when conventional heart therapies and symptom management strategies no longer work. This discussion will touch briefly on getting the most out of standard heart failure treatment, new medications, new devices, when to refer for advanced therapies such as left ventricular assist devices (LVADs) and heart transplant, and when to refer to palliative care.

*Mary Beth Earley, CHFN, MSN, ANP-BC, Pittsford, NY*

**Q1783 Empowering the Nurse Practitioner for Salary Negotiations: Tools to Advocate for an Improved Salary Compensation Package**

(1 CH)

Nurse practitioners are often underpaid and overworked for their expert care and skill set. The curriculum in NP education does not prepare the practitioner to be knowledgeable related to coding, billing, reimbursement, and the costs of doing business. Often, the NP is restricted to salary based on geographical norms and supply and demand. This presentation will provide information to the working NP who is interested in pursuing
R1784 The Pediatric Sepsis Continuum: Recognition and Treatment (1 CH)

Sepsis is defined as a systemic inflammatory response syndrome (SIRS) in the presence of a suspected or known infection. Severe sepsis remains one of the leading causes of death in children, with 4,300 deaths annually and resulting in costs of $1.97 billion. In a concerted effort to combat these alarming statistics, during the spring of 2013 the governor of New York State signed historic legislation mandating that hospitals institute protocols for the early identification and management of patients with severe sepsis and septic shock. In light of recent state regulatory changes as well as the life-threatening nature of this disease process, it is essential that nurse practitioners within New York State who work with children across the care continuum are educated on the latest information regarding pediatric sepsis.

Julie Albright Gottfried, DNP, RN, CNS, CCRN, CPNP-PC, Rochester, NY

R1785 Cardiac Diagnostic Testing: What to Order and When (1 CH)

This presentation will discuss the various cardiac diagnostic testing, including EKG’s, echocardiograms, halter and event monitors, stress testing (exercise, pharmacological, nuclear stress tests, stress echocardiogram), MUGA’s, MRI’s, CT scans, PET scans and cardiac catheterizations. The indications for ordering each diagnostic test will be discussed and case studies will be used to help participants determine the appropriateness for a cardiac workup. In addition, pictures of normal and abnormal studies will be presented. Case studies will be used to guide participants through the process of deciding what to order when and then to follow through with abnormal results.

Colleen Walsh-Irwin, DNP, RN, ANP-BC, East Northport, NY

R1786 Hip Dysplasia Across the Decades: From Pavlik to PAO (1 CH)

Hip dysplasia is a diagnosis that affects the lives of both children and adults. Treatments vary greatly based on age, age of presentation and skeletally maturity. Come learn the causes of hip dysplasia and common treatments for both children and adults. We will also explore some of the other childhood hip diagnoses that lead to hip surgery in adolescents and adults.

Suzanne Hilt, MS, RN, CPNP, Fairport, NY

R1787 Case-based Discussion of Head and Neck Melanoma: Review of Epidemiology, Risk Factors, Identification, Treatments and Prevention (1 CH & .25 PCH)

Melanoma has increased in incidence over the last 30 years. Though melanoma accounts for only 1% of skin cancers, it can be lethal if undetected. This presentation will be a comprehensive review of head and neck melanoma including epidemiology, risk factors, identification, current treatments and prevention. With recent advances in treatment there are more options available to patients than in the past.

Jacqueline Doucette, MS, FNP, Rochester, NY

R1788 Identification of Tics and Associated Comorbidities: Lessons Learned (1 CH & .50 PCH)

Tics are relatively common in childhood, occurring in approximately 10% of children and outgrown in adulthood for the majority of individuals. The common comorbidities of ADHD, anxiety and OCD, as well as behavioral rigidity, are often bigger concerns than the tics themselves and continue into adulthood. This presentation will focus on describing and diagnosing tics and Tourette syndrome, as well as validated tools for diagnosing ADHD, anxiety and Obsessive Compulsive Disorder. Medication approaches toward treatment of all of these conditions will be discussed as well, including potential interactions and undesired side effects.

Amy Vierhile, DNP, RN, PPCNP-BC, Fairport, NY

R1789 Incorporating a Holistic Nurse Practitioner Approach into Healthcare (1 CH)

Lisa Andersson, Graduate of Birchtree Holistic Nursing Certification Program and alumni of NYU’s Master’s Holistic Nurse Practitioner Program will share her journey and experience with you including utilizing aromatherapy in an acute rehabilitation hospital, inpatient pain management as well as working within the Swedish healthcare system. Learn ways to identify and implement healing methods in order to improve patient satisfaction in a challenging healthcare system, as well as develop self-care techniques to survive those things that cannot be changed.

Lisa Andersson, ANP-BC, AHN-BC, Saratoga Springs, NY

R1790 Management of Violence and Aggression (1 CH & .33 PCH)

Aggressive behavior and violence toward self and others is a concern that is worthy of attention in psychiatric inpatient settings. It is estimated that 58% of violent attacks on psychiatric units are deemed to be serious and 78% are directed at nursing staff. In this presentation we will explore recognition of early signs and risk factors for aggression and violence, likely causes of aggression and violence, assessment of risk for aggression and violence, interventions and management, communication, de-fusion strategies, de-escalation techniques, prevention of violence, debriefing, responses to violence, current guidelines, and NYS law regarding assault on a nurse.

Rochelle Kepes, NPP-BC, Nyack, NY
# The NPA by Regions, Local Groups and Counties -

(Please select the appropriate box)

- **Regular NP** – Holds or is eligible for New York State NP certification (license)
  - 1 Year Membership $190
  - 2 Year Membership $340 (Save $40)

- **Student** – Enrolled in NP program and not yet eligible for NYS NP certification (license)
  - 1 Year Membership $75

- **Retired** – No longer practicing and gainfully employed
  - 1 Year Membership $75

*Pursuant to Federal Law, we are required to inform you that 13.2% of your dues may be used for lobbying and related expenses, which are not tax deductible.*
By submitting this registration form, I agree that The NPA, the Saratoga Hilton and the Saratoga Springs City Center and any of their officers, staff members, agents or employees are not responsible for and are released from all liability as to any injury, loss, illness or damage that may occur to me as a result of my participation in The NPA’s 33rd Annual Conference. I give this acknowledgement freely and knowingly and that I am, as a result, able to participate in The NPA’s 33rd Annual Conference and I do hereby assume responsibility for my own well-being. I also agree not to allow any other individual to participate in my place.

Name ________________________________________________
Credentials ___________________________________________ 
Email ________________________________________________
Home Address _________________________________________
City _________________________________________________
State ________________________________ Zip ___________
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Payment Method
☐ Check/Money Order
☐ Mastercard
☐ Visa
☐ Discover
☐ AMEX

Cardholder’ name and address if different from member information above
Cardholder’s Name ________________________________________
Street Address _______________________________________________
City _______________________________________________________
State ________________________________ Zip ___________

Credit Card # _____________________________________________
Exp. Date: ____________________ CVV Code: __________________
Signature _____________________________________________

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**Pre-Conference Learning Lab Fees**

**Wednesday – 10/18/17**
8:00 am – 5:30 pm  LL1701 or LL1702 $250 $______

**Thursday – 10/19/17**
8:00 am – 12:15 pm  LL1703 or LL1704 or LL1705 $125 $______
1:15 pm – 5:30 pm  LL1706 or LL1707 or LL1708 $125 $______

**Conference Registration Fees**

**NPA Member**

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<td>3 Day Conference (Fri., Sat., Sun.)</td>
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**NPA Student Transition** $280 $280 $______
Only applicable to those who are currently NPA Student Transition Members

**NPA Student** $190 $190 $______

**NPA Retired Member** $250 $250 $______

**Non-Member**

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*Non-members are invited to join now and attend at member rates.*

**Luncheon Rate**

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**Join or Renew as a NPA Member**

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**Total Learning Labs (Wed and/or Thurs)** $______

**Total Conference Registration Fees** + $______
**Total Luncheon Fees** + $______
**Total Membership Dues** + $______
**Grand Total (all)** = $______

*Important: Please fill out Conference Registration Form on Page 24*
Please circle **YES or NO** where indicated and for those sessions that have multiple choices, please circle only one selection for the session you wish to attend within that time frame.

You will not be registered for any sessions that are not circled.

**Wednesday, October 18, 2017**

8:00 AM – 5:30 PM (additional fee $250) .................. LL1701  LL1702

**Thursday, October 19, 2017**

8:00 AM – 12:15 PM (additional fee of $125) .......... LL1703  LL1704  LL1705
1:15 PM – 5:30 PM (additional fee of $125) .......... LL1706  LL1707  LL1708

**Friday, October 20, 2017**

8:00 AM – 9:15 AM ........................................ A1709  Keynote: Scharmaine Lawson-Baker, DNP, FNP-BC, FAANP ......................................... Yes  No

9:15 AM – 10:30 AM ........................................ B1710  NPA 2017 Legislative Update ................................. Yes  No

11:15 AM – 12:15 PM ........................................ C1711  C1712  C1713  C1714  C1715  C1716

12:30 PM – 2:00 PM ........................................ D1718  Lunch (additional fee of $30) Peaceful Planning ................................................. Yes  No

2:15 PM – 3:15 PM ........................................ E1719  E1720  E1721  E1722  E1723  E1724  E1725

4:00 PM – 5:00 PM ........................................ F1726  F1727  F1728  F1729  F1730  F1731  F1732

5:15 PM – 6:15 PM ........................................ G1733  G1734  G1735  G1736  G1737  G1738  G1739

**Saturday, October 21, 2017**

8:00 AM – 9:15 AM ........................................ H1740  Annual Membership Meeting ......................... Yes  No

9:15 AM – 10:15 AM ........................................ I1741  Don’t Be a Claim Statistic ................................. Yes  No

11:00 AM – 12:00 PM ...................................... J1742  J1743  J1744  J1745  J1746  J1747  J1748

12:15 PM – 1:45 PM ........................................ K1749  Lunch (additional fee of $30) Private Practice Panel Discussion ......................................... Yes  No

2:00 PM – 3:00 PM ........................................ L1750  L1751  L1752  L1753  L1754  L1755

2:00 PM – 5:30 PM ........................................ M1756  Opioid Prescribing ........................................ Yes  No

**OR**

3:15 PM – 4:15 PM ........................................ N1757  N1758  N1759  N1760  N1761  N1762

4:30 PM – 5:30 PM ........................................ O1763  O1764  O1765  O1766  O1767  O1768

**Sunday, October 22, 2017**

8:30 AM – 9:30 AM ........................................ P1770  P1771  P1772  P1773  P1774  P1775  P1776

9:45 AM – 10:45 AM ...................................... Q1777  Q1778  Q1779  Q1780  Q1781  Q1782  Q1783

11:00 AM – 12:00 PM .................................. R1784  R1785  R1786  R1787  R1788  R1789  R1790
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