

2017 Agenda

Time & Room

Friday, December 1, 2017

7:00-8:30 **Registration**

Gulfstream

8:30-8:40 **Logistics**

8:40-8:50 **Welcome Wendy Pomerantz, MD, MS, FAAP**

Salons A-D

8:50-9:00 **Introduction of Keynote Speaker Amy Hill, MS**

9:00-10:00 **Keynote Speaker: Karen Sheehan, MD, MPH**

Promote Health Equity, Prevent Violence

While New York City and Los Angeles have seen significant reductions in violence, Chicago has seen a significant increase over the last several years. The precise reason for this upsurge in violence is not entirely clear. However, it is not a stretch to appreciate using traditional injury prevention strategies, may be one approach to impacting this deadly epidemic.

Participants in this session will learn to:

1. Describe how the burden of violence in Chicago disproportionately impacts youth of color;
2. Define the socioecological approach to youth violence prevention;
3. Discuss how addressing health equity is a tool to prevent violence;
4. Apply a multilevel approach to youth violence prevention;
5. Identify strategies to sustain interventions.

10:00-10:15 **Break**

10:15-11:30 **Presentation Session: Sliding, Biking, Walking, And Falling: A New Look at a Kid's World of Injury**

Salons A-D **Abstract Presentations, Moderators: Charles Pruitt, MD, FAAP and Teresa Riech, MD, MPH, FAAP, FACEP**

The rich world of the developing child is rife with hazards and, sometimes, injuries. These epidemiologic reviews of common childhood injuries shed new light on some typical mechanisms of injury. During this session we will look in depth at predictable age related injuries but from new perspectives with resultant novel and interesting outcomes. Join us as we dig deeper into the data concerning a kid's world of injury; you just might be surprised by what we find!

Participants in this session will learn to:

1. Recognize the unique risk to the child when sliding in a parent's lap;
2. Examine the influence of legislation and sociodemographics on helmet use;
3. Recognize the changing epidemiology of auto vs. pedestrian injuries;
4. Determine the effects of how and where falls occur on the seriousness of injury;
5. Discuss the variations in severity and mechanism of injury for falls in the youngest population.

Moderators: Charles Pruitt, MD, FAAP

President, Utah Chapter, American Academy of Pediatrics
Medical Director, Child Advocacy - Primary Children's Hospital
Associate Professor - University of Utah, Department of Pediatrics
Division of Pediatric Emergency Medicine

Teresa Riech, MD, MPH, FAAP, FACEP

Medical Director, Pediatric Emergency Department,
OSF Saint Francis Medical Center and Children's Hospital of Illinois, Peoria, IL
Clinical Assistant Professor of Emergency Medicine and Pediatrics,
University of Illinois College of Medicine, Peoria

Agenda, cont.

Time & Room

Presenters: **The mechanisms and injuries associated with playground slides in young children: increased risk of lower extremity injuries with riding on laps**
Charles Jennissen, MD, Iowa City, IA
Pediatric bicycling injury and helmet usage: Illinois Trauma Registry Data
Raquel Weston, MD, Jacksonville, FL
Epidemiology of pedestrian injuries and fatalities in the United States, 2006-2015
Lois Lee, MD, MPH, Boston, MA
Traumatic brain injuries after building falls: kids still can't fly, even in non-urban areas
Kirsten Loftus, MD, Cincinnati, OH
Pediatric falls ages 0-4: understanding demographics, mechanisms, and injury severities
Sofia Chaudhary, MD, Atlanta, GA

11:30-12:30 **Lunch**

Atrium

12:30-2:00 **Infant safety: keeping our most vulnerable population safe at home and on the road.**

Salons A-D **Abstract Presentations, Moderators: Steve Rogers, MD and Nicholas Saenz, MD**

Despite a steady decrease in the number of Sudden Infant Death Syndrome (SIDS) cases, National Center for Health Statistics (NCHS) data shows SIDS remains the highest cause of infant death for children under one year old. Most of these deaths take place in the crib. Outside of the crib, CDC data shows car crashes involving children improperly restrained in motor vehicles is the number one cause of death for children. This session will cover the most recent advances and information regarding infant safety. Cutting edge research and programs will be described that help improve the safety of infants during sleep and while in cars.

Participants in this session will learn to:

1. Describe the impact of hospital based child passenger safety programs;
2. Identify community pediatric practice child passenger safety education programs;
3. Recognize the importance of renewed investment in prevention strategies for Sudden Unexpected Infant Deaths (SUID);
4. Describe how promoting successful breastfeeding while discouraging bed sharing is possible and may reduce SUIDs;
5. Recognize opportunities to increase safe sleep knowledge and practice among male caregivers.

Moderators: Steve Rogers, MD, MS-CTR

Attending Physician - Division of Emergency Medicine
Director - Emergency Mental Health Services
Connecticut Children's Medical Center
Research Scientist
Connecticut Children's Injury Prevention Center
Associate Professor
University of Connecticut School of Medicine

Nicholas Saenz, MD, FACS, FAAP

University of California at San Diego
Professor of Surgery
Division of Pediatric Surgery

Presenters: Child passenger safety champions: expanding child safety seat resources at a children's hospital

Margaret (Meg) McCabe, BA, CPST, Boston, MA

Valet parking attendant child restraint system injury prevention program identifies populations at risk for critical misuse

Ibrahim Abd El-Shafy, MD, Long Island, NY

Car seat checks in the community pediatrician's office

Dina Burstein, MD, MPH, CPSTI, Providence RI

Increasing proportional contribution of SUID to mortality among those less than 20 years - United States, 2000-2014

Douglas Roehler, PhD, MPH, Chicago, IL

Preliminary analysis of infant safe sleep data in a Midwestern home visiting program

Sheena Hussain, MPH, Chicago, IL

Identifying paternal perceptions of infant safe sleep

Beverly Miller, MEd, Little Rock, AR

Agenda, cont.

Time & Room

2:00-2:15 **Break**

2:15-2:45 **Keynote Speaker: Joseph Tepas, III, MD: From blast to B-Con: 100 years after the Halifax explosion can children transition from injury victims to life savers?**
Salons A-D

On December 6, 1917, a Norwegian collier departing Halifax harbor collided with SS Mont Blanc, a French ship loaded with munitions. The collision ignited an explosion that destroyed most of downtown Halifax, Nova Scotia. The Mont Blanc was blown to pieces which rained down on the area as soot and shrapnel. Common injuries of those not incinerated by the 5000°C heat of 246 tons of burning benzol were lacerations, burns, and blunt trauma. Among the 1600 fatalities were 579 children. Having already committed himself to improvement of surgical care of infants and children, Dr. William Ladd led one of the medical response teams from Boston. As a century ago, injury remains the most common cause of childhood death. Analysis of mass casualty experiences at Sandy Hook, CT and Aurora, CO suggest that immediate hemorrhage, as was so in Halifax, was a potentially preventable cause in almost half of victims. Stimulated by the Hartford Consensus, the American College of Surgeons, in concert with other national organizations is deploying a short course (B-Con), designed to teach immediate bleeding control measures to the lay public, including interested junior high school students. Based on European and Canadian experience with understanding and retention of complex processes of cardiopulmonary resuscitation, promulgation of simplified training in emergent bleeding control will transform a segment of the population that traditionally has been at greatest risk of mass casualty events from bystanders to life savers.

Participants in this session will learn to:

1. Describe the experience of the Halifax Explosion;
2. Review the event's relationship to the initiation of the discipline of Pediatric Surgery;
3. Discuss causative factors in terms of modern quality improvement;
4. Review current data regarding validity of BLS training of middle school students;
5. Describe the B-Con project as currently being promulgated.

3:00-4:30

Salons A-B **PI Meeting Wendy Pomerantz, MD, MS, FAAP**

Salons C-D **PC Meeting, Lyse Deus**

6:00-7:30 **Welcome Reception**

Terra & Aqua

7:30-10:00 **Board Meeting**

Gulf Stream

Saturday, December 2, 2017

7:00-8:00 **IAMSBI RT Investigator Meeting**

Gulf Stream

7:00-8:00 **Breakfast**

Atrium

8:00-8:05 **Good Morning**

Salons A-D

8:05-8:15 **Pioneer Award Presentation and Introduction of Keynote Speaker Mike Hirsh, MD**

8:15-9:15 **Award Winner and Keynote Speaker: Daniel Webster, ScD, MPH: Pathways and obstacles to preventing gun violence among youth**

This presentation will examine epidemiologic data and trends on homicides, suicides and unintentional shooting deaths involving youth and evidence relevant to the prevention of these deaths. Strategies designed to reduce youths' exposure to firearms as well as interventions designed to reduce youths' risk-taking behavior with firearms will be discussed. Public health approaches to reducing youth-involved gun violence will be critically examined with the best available data. Recommendations will be offered for effective policies, programs and practices.

Participants in this session will learn to:

1. Describe the basic epidemiology (risk factors, common circumstances) of firearm homicide, suicide, and;
2. Identify common ways that youth gain unsupervised access to firearms;
3. Explain common public health approaches to reducing firearm injuries and deaths;

Agenda, cont.

Time & Room

4. Analyze the evidence behind public health and other strategies directed at firearm violence involving youth;
5. Identify obstacles to successful interventions to reduce gun-related injuries and violence involving youth;
6. Synthesize available evidence to propose promising directions for firearm injury prevention.

9:15-9:30 **Break**

9:30-10:45 **Guns, safety, and neglect: childhood challenges 2017.** Abstract Presentations, Moderators: Marie Crandall, MD, MPH, FACS and Terri McFadden, MD, FAAP
Salons A-D

Injuries are among the most under-recognized public health problems facing the United States today. About 20 children die every day from a preventable injury – more than die from all diseases combined. Injuries requiring medical attention or resulting in restricted activity affect approximately 20 million children and adolescents and cost \$17 billion annually in medical costs. While unintentional injuries, particularly motor vehicle injuries are the most significant cause of death in children from 1 to 19 years, SUID causes greater than 2/3 of the deaths of children 1 to 12 months old and child abuse and youth violence are also significant contributors to child mortality and morbidity. Child abuse and neglect is highly prevalent with self-report data suggesting that at least 1 in 7 children have experienced child abuse and/or neglect in the last year. Youth violence is also a significant public health concern with homicide as the second leading cause of death for young people between the ages of 15 and 24. In a 2013 nationwide survey, about 24.7% of high school students reported being in a physical fight in the 12 months before the survey and 17.9% of high school students in reported taking a weapon to school in the 30 days before the survey. From child abuse to youth violence, violence prevention and intervention efforts that focus on only one form of violence can be broadened to address multiple, connected forms of violence and increase public health impact as experiencing one form of violence can increase families' and individuals' risk for others.

Participants in this session will learn to:

1. Recognize the effectiveness of a community-based firearm and ammunitions storage program with respect to improving safe storage practices;
2. Describe the association between violence risk index and likelihood of gun carrying behaviors among urban youth;
3. Identify at least two factors, which affect child abuse and neglect professionals' determination of parental neglectful behaviors;
4. Describe the effectiveness of a gun safety education program to improve pediatrician comfort in discussing gun safety with patients and their families;
5. Identify differential media reporting of main causes of unintentional death of children in Chicago.

Moderators: Marie Crandall, MD, MPH, FACS

Professor of Surgery
Director of Research, Department of Surgery
Associate Program Director, General Surgery Residency
University of Florida College of Medicine Jacksonville

Terri McFadden, MD, FAAP

Associate Professor of Pediatrics
Director of Primary Care Initiatives
PARTNERS for Equity in Child and Adolescent Health
Emory University School of Medicine
Medical Director, Primary Care
Children's Healthcare of Atlanta at Hughes Spalding

Presenters: Evaluation of a community-based safe firearm and ammunition storage intervention

Chelsie Gallagher, BS Seattle, WA

Gun carrying among freshmen and sophomores in Chicago, New York City and Los Angeles, public schools: the youth risk behavior survey, 2007-2013

Samaa Kemal, MD, MPH, Philadelphia, PA

Effectiveness of the Asking Saves Kids gun violence prevention campaign in an urban pediatric Clinic

Nina Agrawal, MD, New York, NY

Deadly silence: differential media reporting of unintentional child deaths in Chicago

Douglas Roehler, PhD, MPH, Chicago, IL

Child abuse and neglect experts' determination of when a child being left home alone constitutes child neglect

Erin Evans, BS, Iowa City, IA

10:45-11:00 **Break**11:00-12:00 **Teenagers...what are we going to do?** Abstract Presentations, Moderators: Michele Nichols, MD and Joelle Donofrio, MD
Salons A-D

CDC Injury Prevention statistics show motor vehicle crashes are the leading cause of death for United States teens. Insurance Institute for Highway Safety (IIHS) Fatality Facts that state the risk of motor vehicle crashes is higher among 16-19-year-olds than among any other age group bares out and goes on to say, per mile driven, teen drivers ages 16 to 19 are nearly three times more likely than drivers aged 20 and older to be in a fatal crash. Right behind motor vehicle crashes, suicide claims more teen lives than any other disease. Centers for Disease Control and Prevention statistics show it is the second leading cause of death for children 12-18 years old.

This session highlights four studies, which focus on some of the hurdles our teenagers face in today's world. One study focuses on the reality of teen suicide—it is happening. The study looks at disparities in sex, race/ ethnicity, and mental health history, and the differences between urban and suburban suicide. Teen injury associated with alcohol is not uncommon. An electronically delivered parenting skills intervention was offered for those adolescents who screened positive for alcohol or drug use. Text-message based skill intervention may be a tool that can be used to educate and motivate parents. Teens are often eager to get behind the wheel of a car and parents can seek age waivers to allow their 14 and 15-year-old teens to be licensed early. A real question is if we are putting teens at higher risk for fatality with these waivers. Adolescents who are seen in a Level 1 trauma center are often screened for alcohol/ drugs. One study looked at Injury Free sites to see how effectively teens are being screened at these trauma sites and how often intervention is being offered.

Participants in this session will learn to:

1. Identify youth suicide as a real concern and the difference between urban and suburban victims;
2. Describe parenting technology that can be accessed for intervention within the teen-parent dyad;
3. Recognize that age waivers for youth 14 and 15 years old to be licensed to drive places these youth at higher risk of death, especially if the automobile occupants are unrestrained;
4. Recognize that teens need to be screened for alcohol/ drugs more consistently in trauma centers and offered intervention more consistently as well when screening is positive;
5. Identify some of the help available to parents.

Moderators: Michele Nichols, MD

Professor of Pediatrics
Pediatric Emergency Medicine
Co-Medical Director, Regional Poison Control Center
Children's of Alabama
University of Alabama at Birmingham

Joelle Donofrio, DO, FAAP, FACEP

EMS Medical Director, Rady Children's Hospital of San Diego
Associate EMS Fellowship Director, UCSD
Assistant Professor of Clinical Medicine, UCSD School of Medicine

Presenters: Is an age waiver worth a teens' life?

Dawn Porter, BS, Little Rock, AR

Screening, brief intervention, and referral to treatment practices at Injury Free Coalition for Kids Sites

Christina Parnagian, BS, Providence, RI

Acceptability of an electronically delivered parenting skills intervention for parents of alcohol or drug positive pediatric trauma patients

Julie Bromberg, MPH, CCRP, Providence, RI

Chicago vs Suburban Cook County suicide deaths among 10-24-year-olds, 2005-2010

Ernika Quimby, MD, Philadelphia, PA

12:00-1:00 **Lunch**
Atrium

1:00-2:30 **Workshops**Salon D **Providers ungagged at last about “gunsense”- so what do we say and how and when do we say it?**

Gun violence kills 8 children every day. 90 Americans die daily overall. 63% of these deaths are firearm suicides. More Americans have died from firearms domestically since the assassination of Martin Luther King Jr., April 4, 1968, than have died in all the wars we have fought as a nation since the Revolutionary War. We, as Injury Prevention specialists, need to do whatever we can to heighten awareness of the gravity of the situation and to emphasize that taking responsibility for managing our gun ownership rights, guaranteed by the 2nd amendment, is critical to our survival as a nation, “Living with guns” (~350 million in US homes, or 45% of all the world’s firearms) is what this session is about.

Participants in this session will learn to:

1. Describe the importance of asking patients about their gun-owning and storage practices;
2. Recognize the essence of “Gunsense;”
3. Identify the dos and don’ts of communicating with patients;
4. Discuss how Injury Prevention Centers can take a lead in Firearm Injury Prevention discussions;
5. Identify ways to track and pool data for future investigation as to the impact of discussions with patients.

Moderator: Michael P. Hirsh, MD, FACS, FAAP

Surgeon-in-Chief, UMASS Memorial Children’s Medical Center (UMMCMC)
 Professor of Surgery and Pediatrics
 UMASS Medical School (UMMS)
 Chief, Division of Pediatric Surgery and Trauma (UMMCMC)
 UMASS Memorial Health Care System (UMMHC)
 Medical Director of the Worcester Division of Public Health
 Co-Principal Investigator, Injury Free Coalition for Kids of Worcester

Presenters: Key arguments led to the end a six-year process to stop the gag order prohibiting doctors from talking to the patients about firearms

Judith Schaechter, MD, MPH Miami FL.

Now that we have been empowered by the 11th Circuit’s decision- how do we proceed?

Mary Aitken, MD, MPH, Little Rock, AR.

Best practices employed to engage providers and patients in the discussion of gun storage, ownership, and safety

Pina Violano, PhD, MSPH, RN, New Haven, CT and Mike Hirsh, MD, Worcester, MA.

Brady Campaign & Center to Prevent Gun Violence and the Injury Free Partnership Possibilities

Robert Disney, BA, Washington DC

Salon C **From nothing to everything: developing a comprehensive children’s hospital injury prevention program**

In 2012, Doernbecher Children’s Hospital had complete turnover of the staff of its Tom Sargent Safety Center. Collaboration between a new medical director, program manager and volunteer-turned-staff member allowed the program to reinvent itself in a mindful and deliberate manner. Using principles of quality improvement, community organizing and advocacy, the program established a strategy and vision. In 5 years, the program has grown to provide direct service to over 2000 patients in both inpatient and outpatient settings, in all areas of primary and secondary injury prevention, as well as thousands more in the community. This workshop will share key lessons learned in program development, building effective teams, and how we can most effectively provide services to meet the needs of our patients. Program components discussed will include: • Safety Store • Child Passenger Safety (CPS) Fitting Station and Community Events • Inpatient CPS Consultation • Special Needs Transportation Consultation • Newborn Safety Program (CPS, Safe Sleep, and Home Safety) • Secondary Injury Prevention for Patients

After introducing the Doernbecher program, we will employ a novel learning tool, the American Academy of Pediatrics Project Planning Vision and Values, participants will map out potential partners and threats, establish a road map, and plan. We will conclude with a discussion to answer questions and establish follow up plans.

Participants in this session will learn to:

1. Identify key components of a comprehensive hospital based injury prevention program;

2. Discuss the necessary roles of injury prevention staff within a program;
3. Describe a successful model that includes both inpatient and outpatient consultation, standing and on-demand services, hospital staff collaboration and education;
4. Discuss the role of authentic partnerships in the development and function of a successful program;
5. Discuss the importance of a shared programmatic culture in achieving mutual success.

Moderator: Ben Hoffman, MD

Professor of Pediatrics CPST-I
 Medical Director, Tom Sargent Safety Center
 Doernbecher Children's Hospital

Presenters: Ben Hoffman, MD, Adrienne Gallardo, MA

Salon B

Honing Leadership skills to further grow your injury prevention program

Leadership courses are popular among corporate entities, and these same lessons and principles can be applied to growing and sustaining injury prevention programs. Based on the popular book / course "The Leadership Challenge" by Kouzes & Posner, this workshop will provide an overview on basic concepts in leadership including the 5 practices and 10 commitments of effective leadership. Moderators and participants will then discuss examples of how these concepts have applied to their injury prevention programs as well as brainstorm how these ideas might be used to further grow and enhance individual injury prevention programs. Leaders from Injury Free sites in various stages of growth from the newly rejuvenated to the long-standing stalwarts will also share their tips on how to evolve to the next level for your program.

Participants in this session will learn to:

1. Describe the 5 practices and 10 commitments of effective leadership as explained by Kouzes & Posner;
2. Identify and apply K&P leadership skills to further enhance injury prevention program and/or overcome a current problem;
3. Recognize what it takes to grow and sustain an injury prevention program;
4. Select at least 1 K&P commitment of effective leadership to practice in the months following the Injury Free conference;
5. Support other Injury Free sites in their growth and development.

Moderator: Maneesha Agarwal, MD

Assistant Professor of Pediatric Emergency Medicine
 Emory University School of Medicine
 Children's Healthcare of Atlanta

Presenters: Maneesha Agarwal MD, Sofia Chaudhary MD, Wendy Pomerantz MD, MS, FAAP, Dawne Gardner, MBA, Kathy Monroe, MD

2:45-4:15

Workshops

Salon C

How to make a difference: a novel approach to teaching what every pediatrician needs to know about legislative advocacy

Pediatricians bear witness every day to the limits of law and policy to protect children. It has been repeatedly shown that legislation is the most powerful agent to change behavior around injury prevention in general, and for child passenger safety in particular. Pediatricians must utilize our expertise and experience to help spur change in our communities, and this should begin in residency training. How can you effectively teach your learners the knowledge, skills and attitudes necessary to become effective advocates for kids? This workshop will employ hands-on, individual, small group, and large group work to empower attendees to become more effective advocates for injury prevention policy in their communities. We will begin by identifying problems, interests and issues that each participant feels impacts their community. We will then use a nationally recognized tool (the American Academy of Pediatrics Community Pediatrics Training Initiative Project Planning Tool) to walk through the initial steps of developing an approach to meet the needs of the community, using a law to require rear-facing car safety seats until 2 years of age as an example. Participants will be divided into small groups to work through a guided exploration on the Project Planning Tool, culminating in the development and sharing of plans for how to effectively communicate with both the community and media outlets, as well as legislators, practice in writing a newspaper op-ed, and the basics of the legislative process and how to prepare and deliver testimony.

This workshop will be fun, fast, active, collaborative, and practical! You will leave both energized and prepared to be a more effective teacher and advocate for kids in your community!

Participants in this session will learn to:

1. Describe a longitudinal curriculum that activates learners to identify and develop a policy advocacy opportunity in response to a community health need;
2. Discuss steps necessary to develop and propose policy change;
3. Identify and collaborate with community partners;
4. Identify and collaborate with legislators/changemakers;
5. Demonstrate skills that effectively communicate with community, media representatives and legislators;
6. Employ a nationally recognized tool to develop a curriculum that can be implemented at their institution.

Moderator: Ben Hoffman, MD

Professor of Pediatrics
Medical Director, Tom Sargent Safety Center
Doernbecher Children's Hospital

Salon B

Getting your work on paper and then to presentation: How to write a scientific abstract

Moderator: Marlene Melzer-Lange, MD

Writing a scientific abstract is an important skill to learn, but also can be a daunting task. Showcasing your program or research study at professional meetings is dependent upon your abstract being accepted. Clear, high-quality and concise abstracts are the key to success. The basic format typically includes: Background (including objectives of program/study), Methods, Results, and Conclusions. In this workshop, first we will explain the content that should be included in each of these sections. Next we will review various examples of abstracts of differing quality. Then we will divide into small groups to practice writing each section of the abstract. Participants will be asked to bring some information, data, or a working abstract related to a program/study to use for their abstract writing practice. For those participants who do not have specific data, study examples will be provided.

Participants in this session will learn to:

1. Describe the format behind writing a scientific abstract;
2. Identify the skills necessary to clearly state the objectives, methods, and results of your abstract;
3. Practice writing a medically scientific abstract;
4. Compare and contrast abstract content;
5. Understand qualities of clear objectives.

Moderator: Marlene Meltzer-Lange, MD

Professor of Pediatrics, Medical College of Wisconsin
Children's Hospital of Wisconsin

Presenters: Abstracts are important!

Marlene Melzer-Lange, MD, Milwaukee, WI

Understanding Differences: Program, Program Evaluation and Research Abstracts

Dina Burstein, MD, MPH, CPSTI, Providence, RI

Common Abstract Foibles

Pina Violano, PhD, MSPH, RN, New Haven, CT

Secrets of Reviewing Abstracts

Lois Lee, MD, MPH, Boston, MA

Salon D

Developing an effective suicide prevention program at your Injury Free site

Suicide is the second leading cause of death among children greater than 10 years of age. Suicide is preventable. Injury Free site can be an integral part of suicide prevention efforts in their communities. This workshop will describe the information needed to understand suicide epidemiology in your state/region and how that compares to national statistics. We will review and highlight evidence based suicide prevention resources including the Suicide Prevention Resource Center, CDC, NIMH/NIH and the American Foundation for Suicide Prevention. Finally, we will identify possible funding sources to help support your suicide prevention activities.

Participants in this session will learn to:

1. Recognize the epidemiology of youth suicide and need for prevention programs;
2. Identify reliable sources of information about suicide and prevention programs;
3. Describe prevention strategies and explore how they can be implemented;
4. Identify potential funding sources for suicide prevention;
5. Develop suicide prevention partnerships with community, state and national organizations.

Moderator: Steve Rogers, MD, MS-CTR

Attending Physician - Division of Emergency Medicine
 Director - Emergency Mental Health Services
 Connecticut Children's Medical Center
 Research Scientist
 Connecticut Children's Injury Prevention Center
 Associate Professor
 University of Connecticut School of Medicine

Presenters: Prevention strategies and how they can be implemented as programs and research at an Injury Prevention Center, Garry Lapidus, PA-C, MPH
Community, state and national programs and partnerships, Marisa Giarnella- Porco, LCSW

5:30-6:30 **Reception**
 Terra & Aqua

6:30-9:00 **Dinner**
 Gulf Stream

Sunday, December 3, 2017

8:00-9:00 **IAMSBIRT Investigator Meeting**

Gulf Stream

9:00-9:30 **Business meeting**

Gulf Stream

9:30-11:00

Salons A-D

Poster Presentations: This interactive poster session will have presenters provide the plenary session with a 2-3 minutes synopsis of their work with a few minutes of group discussion following each presentation. Following the presentation in the plenary session, poster session attendees will walk poster to poster in an arranged fashion so that all the presenter's posters will be viewed. Also, posters will remain visible throughout the day so that further questions by attendees can be brought forward to the researcher. Session moderators will lead the group.

Participants in this session will learn to:

1. Recognize why enforcement is such a critical component of safety legislation effectiveness;
2. Identify motor vehicular hyperthermia;
3. Describe the potential reach of Facebook Live containing child passenger safety messages for parents;
4. Identify children at risk for window falls;
5. Describe how to use large data sets to understand factors associated with bicyclist- MVCs;
6. Recognize how an educational consult and life jacket program affected knowledge, attitudes, and self-reported behaviors regarding child drowning and safety strategies at swimming pools.

Moderators: Mike Gittelman, MD

Professor, Clinical Pediatrics
 Division of Emergency Medicine
 Co-Director, Comprehensive Children's Injury Center
 Cincinnati Children's Hospital
 Cincinnati, OH

Jessica Naiditch, MD
 Trauma Medical Director
 Dell Children's Hospital
 Austin, TX

- Presenters:** **Enforcement of off-road vehicle laws in youth,**
 Evelyn Qin, BA, Iowa City, IA
- Not even for a minute: development of a children's board book on motor vehicular hypothermia,**
 Joe Schaffner, MPA, CPST
- Beyond the inspection station: promoting child passenger safety through Facebook live,**
 Victoria Salow, MPH, CHES, Chicago, IL
- Baby safety showers: an innovative opportunity for injury prevention education for expectant parents,**
 Sarah Lazarus, DO, Atlanta, GA
- STOP at 4: a campaign to end window falls in Oregon**
 Amber Kroeker, MPH CPST, Portland OR
- Recreational off-highway vehicle exposure, safety behaviors and crash experiences of Iowa Future Farmers of America Members**
 Pam Hoogerwerf, BS, Iowa City, IA
- Risk factors for bicyclist-motor vehicle crashes in New Haven, Connecticut**
 Pina Violano, PhD, MSPH, RN, New Haven, CT
- Child passenger safety online course**
 Jessica St Onge, BS, CPST, Milwaukee, WI
- Furniture falls resulting in traumatic brain injuries: little tumble, big problem**
 Wendy Pomerantz, MD, MS, FAAP, Cincinnati, OH
- Risk factors for Pedestrian-Motor Vehicle Crashes in New Haven, Connecticut**
 Kirsten Bechtel, MD, New Haven, CT
- Interacting with driver educators using the Novice Driver Triad**
 Deena Liska, MA, CPST-I, Milwaukee, WI
- Addressing water safety through a life jacket education program: a new approach for children ages 1 to 4 at swimming pools**
 Tiffaney Isaacson, BS, Phoenix, AZ

11:00-11:15 **Break**

11:15-12:00 **Posters with author attendance**
 Salons A-D