AMERICAN BURN ASSOCIATION
52ND ANNUAL MEETING
ORLANDO
MARCH 17–20, 2020
DOING MORE

The ABA has come a long way in the past few years. Our focus has been on our mission and ensuring we are doing more of the right thing for our patients and our members.

DOING MORE
to create educational programs & online learning.

DOING MORE
for research with writing workshops.

DOING MORE
to improve quality and certification.

DOING MORE
with prevention efforts.
BOARD OF TRUSTEES

PRESIDENT
William G. Cioffi, Jr., MD, FACS
Rhode Island Hospital
Providence, RI

PRESIDENT-ELECT
William L. Hickerson, MD, FACS
Firefighters’ Regional Burn Center
Memphis, TN

FIRST VICE-PRESIDENT
Lucy Wibbenmeyer, MD, FACS
University of Iowa Hospitals and Clinics
Iowa City, IA

SECOND VICE-PRESIDENT
Kevin K. Chung, MD, FCCM
Uniformed Services University
Bethesda, MD

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MetroHealth Medical Center
Cleveland, OH

PROGRAM CHAIR
Robert C. Cartotto, MD, FRCSC
Sunnybrook Health Sciences Centre
Toronto, ON, Canada

SECRETARY
Leopoldo C. Cancio, MD, FACS
US Army
San Antonio, TX

MEMBERSHIP OFFICERS
Vincent A. Gabriel, MD, MSc, FRCP(C)
University of Calgary
Calgary, AB, Canada

Elizabeth Dideon Hess, LCSW
Private Practice Therapist
Allentown, PA

Lisa Forbes, MSc, OT Reg(MB), BT-C
Winnipeg Health Sciences Centre
Winnipeg, MT, Canada

Jody M. Rood, RN, BSN
Regions Hospital Burn Center
St. Paul, MN

PAST PRESIDENTS
Steven E. Wolf, MD, FACS
University of Texas Medical Branch
Galveston, TX

Linwood R. Haith, MD, FACS, FCCM
The Nathan Speare Regional Burn Treatment Center
Crozer-Chester Medical Center
Upland, PA

Michael D. Peck, MD, ScD, FACS
Arizona Burn Center
Phoenix, AZ

FUTURE ABA MEETINGS

Chicago, IL  April 6–9, 2021
Las Vegas, NV  April 5–8, 2022
Dallas, TX  May 16–19, 2023
Chicago, IL  April 9–12, 2024
# Past Presidents

<table>
<thead>
<tr>
<th>Year</th>
<th>Name</th>
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<tbody>
<tr>
<td>1969</td>
<td>Curtis P. Artz, MD*</td>
</tr>
<tr>
<td>1970</td>
<td>Boyd W. Haynes Jr., MD, FACS*</td>
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<tr>
<td>1971</td>
<td>John A. Moncrief, MD*</td>
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<tr>
<td>1972</td>
<td>Robert M. McCormack, MD, FACS*</td>
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<tr>
<td>1973</td>
<td>Charles R. Baxter, MD, FACS*</td>
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<tr>
<td>1974</td>
<td>Bruce G. Macmillan, MD*</td>
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<tr>
<td>1975</td>
<td>John A. Boswick Jr., MD, FACS*</td>
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<tr>
<td>1976</td>
<td>Basil A. Pruitt Jr., MD, FACS</td>
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<tr>
<td>1977</td>
<td>William W. Monafo Jr., MD, FACS*</td>
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<tr>
<td>1978</td>
<td>Alan R. Dimick, MD, FACS</td>
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<tr>
<td>1979</td>
<td>Duane L. Larson, MD, FACS*</td>
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<tr>
<td>1980</td>
<td>Arthur D. Mason Jr., MD*</td>
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<tr>
<td>1981</td>
<td>Charles E. Hartford, MD, FACS</td>
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<td>1982</td>
<td>John F. Burke, MD, FACS*</td>
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<td>1983</td>
<td>Francis C. Nance, MD, FACS</td>
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<tr>
<td>1984</td>
<td>P. William Curreri, MD, FACS</td>
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<tr>
<td>1985</td>
<td>J. Wesley Alexander, MD, ScD, FACS*</td>
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<tr>
<td>1986</td>
<td>Martin C. Robson, MD, FACS</td>
</tr>
<tr>
<td>1987</td>
<td>Joseph A. Moylan, MD, FACS*</td>
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<tr>
<td>1988</td>
<td>David M. Heimbach, MD, FACS*</td>
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<tr>
<td>1989</td>
<td>C. Gillon Ward, MD, FACS</td>
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<tr>
<td>1990</td>
<td>Thomas L. Wachtel, MD, FACS*</td>
</tr>
<tr>
<td>1991</td>
<td>Fred T. Caldwell Jr., MD, FACS*</td>
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<tr>
<td>1992</td>
<td>Roger E. Salisbury, MD, FACS</td>
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<td>1993</td>
<td>Glenn D. Warden, MD, FACS</td>
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<td>1994</td>
<td>David N. Herndon, MD, FACS</td>
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<td>1995</td>
<td>Robert H. Demling, MD, FACS</td>
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<td>1996</td>
<td>Andrew M. Munster, MD, FRCS, FACS*</td>
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<tr>
<td>1997</td>
<td>William F. McManus, MD, FACS*</td>
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<tr>
<td>1998</td>
<td>Edwin A. Deitch, MD, FACS</td>
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<td>1999</td>
<td>Cleon W. Goodwin, MD, FACS</td>
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<td>2000</td>
<td>John L. Hunt, MD, FACS</td>
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<td>2001</td>
<td>Ronald G. Tompkins, MD, ScD, FACS</td>
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<tr>
<td>2002</td>
<td>Jeffrey R. Saffle, MD, FACS</td>
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<tr>
<td>2003</td>
<td>Marion H. Jordan, MD, FACS*</td>
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<td>2004</td>
<td>Lynn D. Solern, MD, FACS</td>
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<td>2005</td>
<td>Richard L. Gamelli, MD, FACS</td>
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<tr>
<td>2006</td>
<td>Gary F. Purdue, MD, FACS*</td>
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<tr>
<td>2007</td>
<td>David G. Greenhalgh, MD, FACS</td>
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<td>2008</td>
<td>Richard J. Kagan, MD, FACS</td>
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<td>2009</td>
<td>G. Patrick Kealey, MD, FACS</td>
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<tr>
<td>2010</td>
<td>Robert L. Sheridan, MD, FACS</td>
</tr>
<tr>
<td>2011</td>
<td>Sidney F. Miller, MD, FACS*</td>
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<tr>
<td>2012</td>
<td>Nicole S. Gibran, MD, FACS</td>
</tr>
<tr>
<td>2013</td>
<td>Tina L. Palmieri, MD, FACS, FCCM</td>
</tr>
<tr>
<td>2014</td>
<td>Palmer Q. Bessey, MD, FACS, MS</td>
</tr>
<tr>
<td>2015</td>
<td>David H. Ahrenholz, MD, FACS</td>
</tr>
<tr>
<td>2016</td>
<td>Edward E. Tredget, MD, MSc, FRCS(c)</td>
</tr>
<tr>
<td>2017</td>
<td>Michael D. Peck, MD, ScD, FACS</td>
</tr>
<tr>
<td>2018</td>
<td>Linwood R. Haith, MD, FACS, FCCM</td>
</tr>
<tr>
<td>2019</td>
<td>Steven E. Wolf, MD, FACS</td>
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*Deceased

Visit the ABA Resource Center to pick up your commemorative 2020 Annual Meeting pin
## PAST MEMBERSHIP OFFICERS (BOARD OF TRUSTEES)

<table>
<thead>
<tr>
<th>Years</th>
<th>Name</th>
<th>Years</th>
<th>Name</th>
</tr>
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<tbody>
<tr>
<td>1975–1977</td>
<td>Elizabeth Sheehy, RN, MEd</td>
<td>1997–2000</td>
<td>Jane Shelby, PhD</td>
</tr>
<tr>
<td>1980–1982</td>
<td>Peter A. Brigham, MSW*</td>
<td>2000–2004</td>
<td>Michele Gottschlich, PhD, RD</td>
</tr>
<tr>
<td>1983–1985</td>
<td>Elizabeth A. Bayley, RN, PhD</td>
<td>2003–2007</td>
<td>Patricia W. Gillespie, RN, MS</td>
</tr>
<tr>
<td>1986–1988</td>
<td>Beth Helvig, RN, MS, CETN</td>
<td>2006–2010</td>
<td>Mary Jo Baryza, PT, MS, PCS</td>
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## PAST 2ND VICE PRESIDENTS (BOARD OF TRUSTEES)

<table>
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<tr>
<th>Years</th>
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<tr>
<td>1990–1991</td>
<td>Carlos Blanco, MD</td>
<td>2000–2002</td>
<td>Daniel L. Traber, PhD*</td>
</tr>
<tr>
<td>1997–1998</td>
<td>John P. Remensnyder, MD, FACS*</td>
<td>2014–2017</td>
<td>Ernest J. Grant, RN, BSN, MSN, PhD, FAAN</td>
</tr>
</tbody>
</table>

*Deceased
GENERAL INFORMATION

2020 ANNUAL MEETING HIGHLIGHTS

• Enjoy the large volume and breadth in education forum offerings with content across three days aimed at all subspecialties—39 sessions covering medical/critical care, surgery, psychosocial, reintegration and aftercare, translational sciences, rehabilitation, nursing, mass casualty planning, ethics, QI, and more!

• Hear from inspirational keynote speaker, burn survivor John O’Leary at the Presidential Plenary on Thursday at 8:00 am as well as an update on the National Trauma Research Action Plan.

• Plenary Session: Burn Wildfire Disaster Response: Views Through Different Lenses—Wednesday 4:15 pm.

• Friday—Seven lunch sessions, covering broad topics including: global outreach, nutrition, certification, verification, and prevention.

• Special SIG educational sessions with guest speakers and CEUs: 10 SIG meetings will be offering CEUs for attendees.

• New Member and First Time Attendee Welcome Breakfast—Wednesday at 7:00 am.

• ABA Business Meeting: Learn about the many exciting changes in the ABA—Friday at 4:15 pm; All ABA Members are invited to attend.

NEW THIS YEAR

• Video Session: How I Do It—view and discuss multidisciplinary video from surgery, to nursing, to pressure garment fitting, to airway management and beyond—Thursday at 4:15 pm.

• Point of Care Ultrasound (POCUS) in Burn Care Course—new pre-conference program.

• New mobile app with more features and easier to use. All the information you need at your fingertips.

• Local Burn Center Tour—This year there will be multiple tours throughout the day on Tuesday. A bus will leave the Gaylord every 30 minutes starting at 10:00 am. The last bus will leave at 1:30 pm.

• Closing Celebration & After Party—New format! This year’s theme is ACROSS THE SEVEN SEAS! Prizes will be awarded for the best team and individual costumes. The fun closing celebration will be held on the lawn, then join us afterwards indoors for a DJ and more dancing at the After Party!

EXHIBIT HALL HOURS

Tuesday, March 17
3:00 pm–7:00 pm
5:00 pm–7:00 pm | Opening Reception

Wednesday, March 18
9:30 am–7:00 pm
5:30 pm–7:00 pm | Wine & Cheese Reception

Thursday, March 19
9:30 am–2:00 pm

REGISTRATION HOURS

Sunday, March 15
4:00 pm–6:00 pm

Monday, March 16
7:00 am–6:00 pm

Tuesday, March 17
7:00 am–6:00 pm

Wednesday, March 18
6:00 am–6:00 pm

Thursday, March 19
6:00 am–4:30 pm

Friday, March 20
7:00 am–4:30 pm

SPEAKER READY ROOM

The Speaker Ready Room is located in Sanibel 2. All presenters must visit the room and upload their presentations to the AV system at least the day before the presentation is to be made. Please make sure your presentation is in its final form as once it is uploaded, no changes can be made.

Please do not bring your computer into your session.

The Speaker Ready Room will be open during the following hours and staffed with a technician to assist with any questions.

Tuesday, March 17
7:00 am–6:00 pm

Wednesday, March 18
7:00 am–6:00 pm

Thursday, March 19
7:00 am–5:00 pm

Friday, March 20
7:00 am–2:00 pm

ABA MOBILE APP

Download the ABA Mobile App to view all session information, abstracts, speakers, authors and room locations. Search ABA2020 in the app store to download. The password is: ABA2020
TYPES OF SESSIONS

Correlatives
The Correlative Sessions showcase new, cutting-edge research on clinical management, basic science and other burn care issues through multiple short presentations by investigators of accepted abstracts. These presentations are followed by a question and answer period allowing for an exchange of ideas and additional learning. Abstracts are grouped by topic with sessions running concurrently.

Objectives:
• Discuss the results of cutting-edge scientific clinical management or basic science research and other burn issues.
• Identify opportunities to improve care of the burn injured patient.

Plenary Sessions
The Plenary Sessions provide opportunities for all attendees to learn about topics of interest to the multi-disciplinary team of burn care professionals.

Educational Forums
Concurrently running sessions that provide more in depth education on specific topics. These may have target audiences or be multi-disciplinary in focus. Any attendees with interest in the topic are welcome to attend.

Symposia
The Symposia are small group interactive sessions to allow peer learning. Moderators are instructed to come prepared to introduce at least four problems areas and to facilitate discussion around solutions. Participants should come prepared to participate with their own burn unit practice successes, failures and questions. Symposia are limited to 50 attendees and are seated on a first-come, first-served basis, so get there early if you want to attend. Light breakfast and coffee are included with Symposia.

Objectives:
• Discuss important issues within the burn field.
• Identify practice successes, failures and questions related to your burn unit.

Poster Rounds
Poster Rounds provide an opportunity to explore a topic in-depth with a small group of researchers facilitated by experts in the field. Each researcher in the topic area will briefly present their work for the group.

Objectives:
• Discuss the results of cutting-edge scientific clinical management or basic science research and other burn issues.
• Identify opportunities to improve care of the burn injured patient.

CE CREDIT INFORMATION

Contact hours are awarded after verification of an individual’s full attendance and successful completion of an online evaluation form. Please see specific educational activities for details on CE hours and accreditation status.

The American Burn Association is Accredited by the following organizations:

Physician Credit (CME)
The American Burn Association is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. The American Burn Association takes responsibility for the content, quality, and scientific integrity of this CME activity.

The American Burn Association designates this live activity for a maximum of 37 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Nursing Credit (CNE)
American Burn Association is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation.

The American Burn Association designates this live activity for a maximum of 37 CNE contact hours. Nurses should only claim credit commensurate with the extent of their participation in the activity.

Other Organizations

This program has been approved for 37 total hours of CPEUs by the Commission on Dietetic Registration.

The American Burn Association is authorized to assign 1,917 AOTA CEUs for this course. The assignment of AOTA CEUs does not imply endorsement of specific course content, products, or clinical procedures by the AOTA.

This program has been approved by the National Association of Social Workers (Approval #88775310-2652) for 9 continuing education contact hours.

This conference is approved for 35 hours of continuing education. The APA Division 22 (Rehabilitation Psychology) is approved by the American Psychological Association to sponsor continuing education for psychologists. The APA Division 22 maintains responsibility for the program and its content. For more information about Division 22 or to inquire about membership, please visit www.div22.org.

This program has been submitted to the following organizations for approval to award contact hours:
• Florida Board of Physical Therapy Practice

OBTAINING CE CREDIT

CE credit is awarded based on participation in the learning activities. CME credits can be claimed online at https://www.cteusa.com/amburn_ceu. Credit is calculated on a quarter hour basis.
COMMITTEE MEETINGS

Committees support the mission of the ABA. In 2020, newly appointed committee members are invited to attend and observe the meetings. For a list of the 2019–2020 Committee members visit www.ameriburn.org.

<table>
<thead>
<tr>
<th>MONDAY, MARCH 16</th>
<th>Time</th>
<th>Location</th>
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<tbody>
<tr>
<td>Burn Therapist Certification Committee</td>
<td>9:00 am–12:00 pm</td>
<td>Sarasota 1</td>
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<tr>
<td>Nursing Certification Committee</td>
<td>9:00 am–12:00 pm</td>
<td>Sarasota 2</td>
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<tr>
<td>Burn Science Advisory Panel</td>
<td>9:00 am–12:00 pm</td>
<td>Tampa 2</td>
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<tr>
<td>Burn Prevention Committee</td>
<td>9:00 am–2:00 pm</td>
<td>Osceola 4</td>
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<tr>
<td>International Outreach Committee</td>
<td>10:00 am–12:00 pm</td>
<td>Osceola 3</td>
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<tr>
<td>Research Committee</td>
<td>12:00 pm–2:00 pm</td>
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<tr>
<td>Membership Advisory Committee</td>
<td>12:00 pm–4:00 pm</td>
<td>Osceola 2</td>
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<tr>
<td>Ad Hoc Reconstruction Committee</td>
<td>1:00 pm–3:00 pm</td>
<td>Osceola 6</td>
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<tr>
<td>Quality &amp; Burn Registry Committee</td>
<td>1:00 pm–3:00 pm</td>
<td>Osceola 3</td>
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<tr>
<td>ABLS Committee</td>
<td>1:00 pm–3:00 pm</td>
<td>Sarasota 2</td>
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<tr>
<td>Elderly Care Committee</td>
<td>1:00 pm–3:30 pm</td>
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<tr>
<td>Organization &amp; Delivery of Burn Care Committee</td>
<td>1:00 pm–4:00 pm</td>
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<td>Rehabilitation Committee</td>
<td>2:00 pm–4:00 pm</td>
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<td>Government Affairs Committee</td>
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<td>Ethical Issues Committee</td>
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<td>EHR Ad Hoc Committee</td>
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<td>Aftercare Reintegration Committee</td>
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<tr>
<td>Verification Committee</td>
<td>3:00 pm–6:00 pm</td>
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<tr>
<td>Education Committee</td>
<td>4:00 pm–5:30 pm</td>
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<tr>
<th>TUESDAY, MARCH 17</th>
<th>Time</th>
<th>Location</th>
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<tbody>
<tr>
<td>Board of Trustees Meeting</td>
<td>8:00 am–2:30 pm</td>
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<tr>
<td>Archives Committee</td>
<td>3:30 pm–5:00 pm</td>
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<tr>
<td>JBCR Editorial Meeting</td>
<td>12:15 pm–1:45 pm</td>
<td>Naples 1</td>
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# SPECIAL INTEREST GROUP (SIG) MEETINGS

SIG meetings provide an opportunity for the exchange of ideas, networking with colleagues, and information sharing. SIG meetings are included in your registration and all ABA meeting participants are encouraged to attend. For SIG descriptions, visit www.ameriburn.org.

## MONDAY, MARCH 16

<table>
<thead>
<tr>
<th>SIG Meetings</th>
<th>Time</th>
<th>Location</th>
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<tbody>
<tr>
<td>Burn Foundation SIG: Who’s Next in Line? Succession</td>
<td>6:00 pm–8:00 pm</td>
<td>Naples</td>
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<tr>
<td>Planning for Burn Foundations and Burn Care Professionals</td>
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<tr>
<td>Canadian SIG</td>
<td>6:00 pm–11:00 pm</td>
<td>Miami</td>
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## TUESDAY, MARCH 17

<table>
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<tr>
<th>SIG Meetings</th>
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<th>Location</th>
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<tr>
<td>OT/PT SIG: Acute Phase Burn Rehabilitation: Keys to Successful Early Interventions</td>
<td>7:30 am–12:00 pm</td>
<td>Osceola A</td>
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<tr>
<td>Reconstructive SIG</td>
<td>7:30 am–11:00 am</td>
<td>Osceola 1-2</td>
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<tr>
<td>Nutrition SIG</td>
<td>8:00 am–10:00 am</td>
<td>Osceola 5</td>
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<tr>
<td>Nursing SIG</td>
<td>8:00 am–10:00 am</td>
<td>Osceola B</td>
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<tr>
<td>Burn Camp SIG</td>
<td>8:00 am–10:00 am</td>
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<tr>
<td>Research SIG: Current Models in Burn Research: Pros and Cons</td>
<td>8:00 am–10:00 am</td>
<td>Osceola 6</td>
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<tr>
<td>Pediatric SIG: Challenges in Managing Complex Pediatric Burns</td>
<td>10:00 am–12:00 pm</td>
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<tr>
<td>Quality Burn Registry SIG</td>
<td>10:00 am–12:00 pm</td>
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<tr>
<td>Burn Prevention/Epidemiology SIG: Fire and Burn Safety in the Aging Population</td>
<td>10:00 am–12:00 pm</td>
<td>Osceola 4</td>
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<tr>
<td>Pharmacy SIG</td>
<td>10:00 am–1:00 pm</td>
<td>Osceola 5</td>
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<tr>
<td>Burn Survivor and Reintegration/Psychosocial SIG: Trauma Informed Assessments with Adolescents; Suicide Assessments, Treatment and Reintegration for Adolescents</td>
<td>11:00 am–1:00 pm</td>
<td>Osceola 1-2</td>
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<tr>
<td>Disaster SIG</td>
<td>12:00 pm–2:00 pm</td>
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<tr>
<td>Fire Fighters SIG: Grant Opportunities</td>
<td>12:00 pm–5:00 pm</td>
<td>Osceola 4</td>
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<tr>
<td>Fluid Resuscitation SIG</td>
<td>1:00 pm–3:00 pm</td>
<td>Osceola 1-2</td>
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<tr>
<td>Bioengineering/Biophysics SIG: Bioengineering and Commercialization</td>
<td>1:00 pm–3:00 pm</td>
<td>Tampa 2</td>
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<tr>
<td>APRN/PA SIG: The Role of the APRN/PA During Burn Mass Casualty Incident</td>
<td>2:00 pm–4:00 pm</td>
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<tr>
<td>Anesthesiology/Respiratory SIG</td>
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<td>Osceola 5</td>
</tr>
<tr>
<td>Elderly SIG: Long-term Outcomes of Elderly</td>
<td>3:00 pm–5:00 pm</td>
<td>Tampa 2</td>
</tr>
<tr>
<td>Burn Physicians SIG</td>
<td>3:00 pm–5:00 pm</td>
<td>Tampa 3</td>
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</table>
The Richard M. Fairbanks Burn Center at Eskenazi Health combines intensive patient-centered care with the most advanced medical techniques and equipment available. It is verified by the American Burn Association and the American College of Surgeons and is the only verified adult burn center in Indiana.
## PROGRAM OVERVIEW

### MONDAY, MARCH 16
- 7:30 am–5:00 pm ABLS Course
- 7:30 am–5:00 pm Acute Burn Care Course
- 9:00 am–6:00 pm Committee Meetings
- 6:00 pm–11:00 pm SIG Meetings

### TUESDAY, MARCH 17
- 7:30 am–4:00 pm ABLS Instructor Course
- 7:30 am–5:00 pm Point of Care Ultrasound Course **New!**
- 7:30 am–5:00 pm SIG Meetings
- 8:00 am–2:30 pm Board of Trustees Meeting
- 10:00 am–1:30 pm Burn Center Tours
- 12:00 pm–1:30 pm Board & Committee Chair Luncheon
- 1:00 pm–5:00 pm Burn Center Leadership Boot Camp
- 1:00 pm–5:00 pm Fundamentals of Burn Care Course
- 4:15 pm–5:45 pm ABuRN Town Hall
- 5:00 pm–7:00 pm Opening Reception in the Exhibit Hall

### WEDNESDAY, MARCH 18
- 6:30 am–7:45 am Sunrise Symposia
- 7:00 am–7:45 am New Member Breakfast
- 8:00 am–9:30 am Opening Ceremony, Awards & Presidential Address
- 9:30 am–10:00 am Break with Exhibitors
- 10:00 am–12:00 pm Correlatives & Educational Forums
- 12:00 pm–2:00 pm Lunch in the Exhibit Hall
- 12:30 pm–1:30 pm Poster Rounds
- 2:00 pm–4:00 pm Educational Forums
- 4:15 pm–5:30 pm Plenary Session: Burn Wildfire Disaster Response: Views Through Different Lenses
- 5:30 pm–7:00 pm Reception in Exhibit Hall
- 7:00 pm Sponsored Symposium: Pioneering Innovative Treatments for Burn Patients with Purion® Processed Placental Allografts
- 7:00 pm Sponsored Symposium: A New Decade of Laser Scar Revision

### THURSDAY, MARCH 19
- 6:30 am–7:45 am Sunrise Symposia
- 8:00 am–9:30 am Presidential Plenary Session
- 9:30 am–10:00 am Break with Exhibitors
- 10:00 am–12:00 pm Correlatives & Educational Forums
- 12:00 pm–2:00 pm Lunch in the Exhibit Hall
- 12:30 pm–1:30 pm Poster Rounds
- 2:00 pm–4:00 pm Educational Forums
- 4:15 pm–5:30 pm Year in Review
- 4:15 pm–5:30 pm Changing Places
- 4:15 pm–6:00 pm Video Session **New!**
- 6:00 pm–7:30 pm Sponsored Symposium: RECELL® Advanced Techniques

### FRIDAY, MARCH 20
- 6:30 am–7:45 am Top 3 Sunrise Symposia
- 6:30 am–7:45 am Burn Fellowship Breakfast
- 8:00 am–9:30 am Plenary Session: Top 5 Abstracts
- 10:00 am–12:00 pm Correlatives
- 10:00 am–12:00 pm Best in Category Posters
- 12:15 pm–1:45 pm Educational Forums with Lunch
- 2:00 pm–4:00 pm Educational Forums
- 4:15 pm–5:00 pm Business Meeting
- 7:00 pm–10:00 pm Closing Celebration
- 10:00 pm–12:00 am “After Party”
## DETAILED PROGRAM SCHEDULE

### MONDAY, MARCH 16

<table>
<thead>
<tr>
<th>Event</th>
<th>Time</th>
<th>Location</th>
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<tbody>
<tr>
<td>ABLS Course</td>
<td>7:30 am–5:00 pm</td>
<td>Miami</td>
</tr>
<tr>
<td>ABC: Acute Burn Care Course</td>
<td>7:30 am–5:00 pm</td>
<td>Naples</td>
</tr>
<tr>
<td>Committee Meetings</td>
<td>9:00 am–6:00 pm</td>
<td>See page 6.</td>
</tr>
<tr>
<td>SIG Meetings</td>
<td>6:00 pm–11:00 pm</td>
<td>See page 7.</td>
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### TUESDAY, MARCH 17

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<thead>
<tr>
<th>Event</th>
<th>Time</th>
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<tbody>
<tr>
<td>ABLS Instructor Course</td>
<td>7:30 am–4:00 pm</td>
<td>Miami</td>
</tr>
<tr>
<td>Point of Care Ultrasound in Burn Care Course</td>
<td>7:30 am–5:00 pm</td>
<td>Naples</td>
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<tr>
<td>SIG Meetings</td>
<td>7:30 am–5:00 pm</td>
<td>See page 7.</td>
</tr>
<tr>
<td>Burn Center Tours</td>
<td>10:00 am–1:30 pm</td>
<td>Transportation Lobby</td>
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<tr>
<td>Board and Committee Chair Luncheon</td>
<td>12:00 pm–1:30 pm</td>
<td>Sarasota</td>
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<tr>
<td>Fundamentals of Burn Care: Critical Care</td>
<td>1:00 pm–5:00 pm</td>
<td>Osceola B</td>
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<tr>
<td>Burn Center Leadership Boot Camp</td>
<td>1:00 pm–5:00 pm</td>
<td>Osceola A</td>
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<tr>
<td>ABuRN Multi-center Burn Research Town Hall</td>
<td>4:15 pm–5:45 pm</td>
<td>Osceola 1-2</td>
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<tr>
<td>Opening Reception &amp; Networking in the Exhibit Hall</td>
<td>5:00 pm–7:00 pm</td>
<td>Exhibit Hall EF</td>
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### WEDNESDAY, MARCH 18

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<tr>
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<th>Time</th>
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<tr>
<td>Sunrise Symposia</td>
<td>6:30 am–7:45 am</td>
<td>See page 19.</td>
</tr>
<tr>
<td>New Member/First Time Attendee Breakfast</td>
<td>7:00 am–7:45 pm</td>
<td>Orange Blossom Ballroom</td>
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<tr>
<td>Opening Ceremony &amp; Presidential Address</td>
<td>8:00 am–9:30 am</td>
<td>Osceola CD</td>
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<tr>
<td>Correlative I - Clinical Sciences: Critical Care 1</td>
<td>10:00 am–12:00 pm</td>
<td>Osceola A</td>
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<tr>
<td>Correlative II - Clinical Sciences: Nutrition and Metabolism</td>
<td>10:00 am–12:00 pm</td>
<td>Sarasota</td>
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<tr>
<td>Correlative III - Public Health/Epidemiology 1</td>
<td>10:00 am–12:00 pm</td>
<td>Osceola 1-3</td>
</tr>
<tr>
<td>Correlative IV - Psychological and Psychosocial</td>
<td>10:00 am–12:00 pm</td>
<td>Osceola 4-6</td>
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<tr>
<td>Correlative V - Nursing</td>
<td>10:00 am–12:00 pm</td>
<td>Osceola B</td>
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<tr>
<td>Fire Fighter I Session: Energy Storage Systems</td>
<td>10:00 am–12:00 pm</td>
<td>Orange Blossom Ballroom</td>
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<tr>
<td>Rehabilitation Workshop: Providing Therapy in the Critical Care Setting – How Do We Do It and What Has Changed?</td>
<td>10:00 am–12:00 pm</td>
<td>Miami</td>
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<td>Lunch in the Exhibit Hall</td>
<td>12:00 pm–2:00 pm</td>
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<tr>
<td>Poster Rounds 1</td>
<td>12:30 pm–1:30 pm</td>
<td>Exhibit Hall EF</td>
</tr>
<tr>
<td>Forget Naughty, We are Going to Get N(a)STI: Part 1</td>
<td>2:00 pm–4:00 pm</td>
<td>Osceola B</td>
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<tr>
<td>Burn Reconstruction</td>
<td>2:00 pm–4:00 pm</td>
<td>Miami</td>
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<tr>
<td>Ask the Masters: A Case Based Discussion of Decision Making in Combined Thermal and Mechanical Trauma</td>
<td>2:00 pm–4:00 pm</td>
<td>Osceola 4-6</td>
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<tr>
<td>What the Burn Provider Needs to Know About Sepsis: Current Literature, Special Considerations, Case Discussions and Future Directions</td>
<td>2:00 pm–4:00 pm</td>
<td>Osceola 1-3</td>
</tr>
<tr>
<td>Vascular Endothelial Dysfunction in Thermal Injury</td>
<td>2:00 pm–4:00 pm</td>
<td>Osceola A</td>
</tr>
</tbody>
</table>
### Becoming an Expert Burn Therapist - Learning to Enhance Your Professional Reasoning and Clinical Decision Making Through Complex and Comprehensive Rehabilitation Case Management

2:00 pm–4:00 pm  
Orange Blossom Ballroom

### Working with Self-inflicted Burn Patients and Families at the Burn Center

2:00 pm–4:00 pm  
Sarasota

### Burn Wildfire Disaster Response: Views Through Different Lenses

4:15 pm–5:30 pm  
Osceola CD

### Wine & Cheese Reception with Exhibitors

5:30 pm–7:00 pm  
Exhibit Hall EF

### Sponsored Symposium: Pioneering Innovative Treatments for Burn Patients with Purion® Processed Placental Allografts

7:00 pm  
Osceola A

### Sponsored Symposium: A New Decade of Laser Scar Revision

7:00 pm  
Osceola B

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#### THURSDAY, MARCH 19

**Sunrise Symposia**  
6:30 am–7:45 am  
See page 27.

**Presidential Plenary - John O’Leary and Update on NTRAP**  
8:00 am–9:30 am  
Osceola CD

**Correlative VI - Translational Sciences: Critical Care and Metabolism**  
10:00 am–12:00 pm  
Osceola A

**Correlative VII - Clinical Sciences: Wounds and Scars 1**  
10:00 am–12:00 pm  
Osceola B

**Correlative VIII - Prevention**  
10:00 am–12:00 pm  
Sarasota

**Correlative IX - Quality Improvement**  
10:00 am–12:00 pm  
Osceola 1-3

**Correlative X - Rehabilitation**  
10:00 am–12:00 pm  
Osceola 4-6

**Fire Fighter II Session: Sleep, Work, and Health**  
10:00 am–12:00 pm  
Orange Blossom Ballroom

**Ethics Workshop: Beyond the Basics of Bioethics**  
10:00 am–12:00 pm  
Miami

**Lunch in the Exhibit Hall**  
12:00 pm–2:00 pm  
Exhibit Hall EF

**Poster Rounds 2**  
12:30 pm–1:30 pm  
Exhibit Hall EF

**Forget Naughty, We are Going to Get N(a)STI: Part 2**  
2:00 pm–4:00 pm  
Osceola B

**One Size Does Not Fit All: Applying the 2018 Society of Critical Care Medicine Guidelines for Pain, Agitation, Delirium, Immobility, and Sleep to Burn Patients**  
2:00 pm–4:00 pm  
Osceola A

**Bubbles and Bandages: Trauma-Informed Practice and Pediatric Psychosocial Care in the Burn Center**  
2:00 pm–4:00 pm  
Sarasota

**Scope - Standards - Certification: What’s New in Burn Nursing**  
2:00 pm–4:00 pm  
Osceola 4-6

**Utilizing Community Partnerships for Better Burn Care Outcomes: Working with the Fire Service, Burn Foundations, Burn Survivors, and Other Community Partners**  
2:00 pm–4:00 pm  
Osceola 1-3

**Operation Minute's Notice: Hot Wash Assistant Secretary of Preparedness Response (ASPR) Regional Disaster Health Response System Pilot Disaster Exercise: Challenges in Burn Disaster Preparedness**  
2:00 pm–4:00 pm  
Orange Blossom Ballroom

**When and How to Splint the Pediatric Burned Hand**  
2:00 pm–4:00 pm  
Miami

**The Year in Review: The Top Journal Publications**  
4:15 pm–5:30 pm  
Osceola 1-3

**Changing Places**  
4:15 pm–5:30 pm  
Osceola 4-6

**Video Session: Burn Care: How I Do It**  
4:15 pm–6:00 pm  
Osceola A

**Sponsored Symposium: RECELL® Advanced Techniques**  
6:00 pm–7:30 pm  
Osceola B
FRIDAY, MARCH 20

Top 3 Sunrise Symposia Repeated 6:30 am–7:45 am  See page 34.
Burn Fellowship Breakfast 6:30 am–7:45 am Osceola 4
Top 5 Abstracts 8:00 am–9:30 am Osceola B
Correlative XI - Clinical Sciences: Critical Care 2 10:00 am–12:00 pm Osceola A
Correlative XII - Clinical Sciences: Wounds and Scars 2 10:00 am–12:00 pm Osceola B
Correlative XIII - Public Health/Epidemiology 2 10:00 am–12:00 pm Osceola 1-3
Correlative XIV - Reconstruction 10:00 am–12:00 pm Osceola 4-6
Correlative XV - Translational Sciences: Wounds and Scars 10:00 am–12:00 pm Orange Blossom Ballroom
Correlative XVI - Pain and Pruritis 10:00 am–12:00 pm Miami
Best in Category Posters 10:00 am–12:00 pm Sarasota
Burn Prevention Workshop: Fearless Burn Prevention Messaging: 12:15 pm–1:45 pm Sarasota
Best Practices in Design & Delivery
Verification Review Committee Update: The Why, How and 12:15 pm–1:45 pm Miami
What of Verification
ABA Global Health Committee Focus: Update on Burn 12:15 pm–1:45 pm Osceola 1-3
Care in the Americas
Lessons Learned from Mass Casualty Drills - Local 12:15 pm–1:45 pm Osceola A
Opportunities for Engaging the Medical Community
The Use and Value of Health Economics in Burn Care 12:15 pm–1:45 pm Osceola B
Burn Therapist Certification: Program Update, Tips for 12:15 pm–1:45 pm Orange Blossom Ballroom
Success and Discussion with BT-C Certified Therapists
Monitoring Nutrition in Burn Patients 12:15 pm–1:45 pm Osceola 4-6
Outcome Measures: Current Trends and Applications in 2:00 pm–4:00 pm Osceola B
Burn Care
It’s Not All About the Patient, What About the Staff? Part III 2:00 pm–4:00 pm Miami
MAC Forum: Effective Meeting Strategies for Burn Rounds 2:00 pm–4:00 pm Osceola 4-6
Controversies in Modern Burn Care: The Pro/Con Debates 2:00 pm–4:00 pm Osceola 1-3
Survivorship in Discharge and Aftercare Planning: Engaging 2:00 pm–4:00 pm Orange Blossom Ballroom
Families and Burn Survivors as Burn Team Members
Implementing Quality Improvement in the Burn Centre: 2:00 pm–4:00 pm Osceola A
A Symphony in Five Parts
Haunting Ethical Cases: Application of Ethical Principles 2:00 pm–4:00 pm Sarasota
Business Meeting 4:15 pm–5:00 pm Osceola 1-3
Closing Celebration 7:00 pm–10:00 pm Coquina Lawn
After Party 10:00 pm–Midnight Hall E
DAILY SCHEDULE OF CE OFFERINGS

COMMITTEE MEETINGS
See page 6.

SIG MEETINGS
See page 7.

COURSES

ABLS COURSE | CS-001
7:30 am–5:00 pm | Miami

The Advanced Burn Life Support Course is a 7-hour course for physicians, nurses, physician assistants, nurse practitioners, therapists, paramedics and anyone who may come into contact with a burn injured patient within the first 24 hours. The course provides guidelines in the assessment and management of the burn patient during the first 24 hours post injury. Following a series of lectures, case studies are presented for group discussions. You will be given the opportunity to work with a simulated burn patient to reinforce the assessment, stabilization, and transfer to a burn center using ABA criteria. Final testing consists of a written exam and a practical assessment.

As a result of attending this activity, the learner should be able to:
- Evaluate a patient with a serious burn.
- Define the magnitude and severity of the injury.
- Identify and establish priorities of treatment.
- Manage the airway and support ventilation.

ABC: ACUTE BURN CARE COURSE | CS-002
7:30 am–5:00 pm | Naples

The ABC is targeted to early career providers. It is a hands-on, simulation course introducing the clinical skills required to assess and manage common complications in adult and pediatric patients with burn injuries. Skills such as wound management, skin substitute selection and placement, and escharotomy will be taught. The goal of the course is to improve the standard of burn care by educating providers with a need-driven curriculum that addresses common deficiencies in burn care as identified in a national multidisciplinary needs assessment. The course is not intended to serve as a substitute for burn fellowship training or situations that require clinical reasoning beyond the one-day course content. It is the expectation that providers that participate in the course will gain an understanding and an introduction to the clinical skills required to assess and manage common complications in adult and pediatric patients with burn injuries.

As a result of attending this activity, the learner should be able to:
- Assess and apply basic wound dressing skills.
- Define common causes of failed resuscitation in burn care.
- Perform an escharotomy and basic wound care on a burn simulator.
FRIDAY, MARCH 20 | 7:00 PM–11:00 PM | COQUINA LAWN

Celebrate the close of the 52nd ABA Annual Meeting with old friends and new! Calling all captains, mermaids, pirates, and sea life! Celebrate smooth sailing through this year’s Annual Meeting with our Across the Seven Seas closing celebration. Enjoy the oceanic atmosphere of the Gaylord Palms and try the signature celebration cocktail dressed in your best-sea inspired attire.

New! Prizes will be awarded to the best individual and team costumes.

FRIDAY, MARCH 20 | 10:00 PM–MIDNIGHT | HALL E

We’ll be under the stars until 10:00 pm, but then we have to turn down the music outside… So instead join us indoors for the After Party! Keep the dancing going with a live DJ and private bar set up just for ABA attendees. Late night snacks will be served and the fun will continue!
SIG MEETINGS
See page 7.

COURSES

ABLS INSTRUCTOR COURSE | CS-003
7:30 am–4:00 pm | Miami
The ABLS Instructor course is offered to physicians, nurses, physician assistants, nurse practitioners, and paramedics who have successfully completed the ABLS course, are members of the ABA, and have an interest in teaching with a commitment to serve as an instructor for at least 2 ABLS courses per year. Following a lecture on “How to Teach,” students will present a 5-minute mini-lecture on an assigned topic, lead a group discussion of case studies, and a patient assessment stabilization scenario. Visit www.ameriburn.org/abls for all of the requirements to become an ABLS instructor.

As a result of attending this activity, the learner should be able to:

• Define teaching and learning.

• Explain the relationship of the definitions of teaching and learning to a philosophy of teaching.

• Describe four teaching strategies and their application to the instructional sessions included in the ABLS Course.

• Describe three components of the lecture.

POINT OF CARE ULTRASOUND IN BURN CARE COURSE | CS-004
7:30 am–5:00 pm | Naples
Point of Care Ultrasound (POCUS) is a useful diagnostic technique in the care of critically-ill patients. This all-day session is an entry-level course on bedside heart and lung ultrasonography and is designed for physicians, advanced practice critical care nurses, and physician assistants. A pre-course, on-line teaching module will introduce participants to basic POCUS principles and how to obtain and visualize standard cardiac and lung images. The session will be run by several experienced anesthesiologist instructors and will be restricted to the first 20 registrants to ensure small group teaching. Short didactic sessions will be followed by much longer hands-on image acquisition using live human models. In the morning, we will focus on cardiac image acquisition and assessment of global heart function, intra-vascular volume status, valvular activity, and identification of pericardial effusions. Following lunch (included), we will delve into lung ultrasound, with a focus on assessment of atelectasis, pleural effusions and ARDS. A post-course assessment of new POCUS skills will be offered at the end of the day.

EDUCATIONAL FORUMS

FUNDAMENTALS OF BURN CARE: CRITICAL CARE | F-094
1:00 pm–5:00 pm | Osceola B
Course Directors: Anjay Khandelwal, MD; Amy Gloger, MSN, RN, CCRN; Samuel P. Mandell, MD, MPH
Fundamentals of Burn Care: Critical Care is a course specifically intended for the newer burn care provider (< 5 years of experience). The multi-disciplinary course will cover the basics of burn critical care management including resuscitation, hypermetabolic response, ventilator strategies, nutrition, antimicrobial therapy/sepsis and pitfalls in burn critical care. The course will include didactics, breakout sessions, simulations and panel discussion to ensure maximal learning potential.

As a result of attending this activity, the learner should be able to:

• Formulate simple and complex resuscitation plans and goals for burn patients.

• Discuss various management strategies for diminishing the hyper-metabolic response.

• List basic nutritional goals and formulas for burn patients.
• Describe signs and symptoms of sepsis in the burn patient and discuss basic antimicrobial therapy.

1:00 pm–1:05 pm Course Overview
Amy Gloger, MSN, RN, CCRN

1:05 pm–1:25 pm Standard Ventilator Techniques Are Best for Burns
Damien W. Carter, MD

1:25 pm–1:45 pm “Advanced” Ventilator Techniques Are Better in Burns
Callie M. Thompson, MD

1:45 pm–2:00 pm Panel Discussion

2:00 pm–2:10 pm Evidence-based Sedation in Burn Patients
Samuel P. Mandell, MD, MPH

2:10 pm–2:20 pm Sedation at the Bedside, the Nursing Perspective
Emily Snyder

2:40 pm–2:50 pm Panel Discussion

2:50 pm–3:00 pm Break

3:00 pm–4:00 pm Fluid Resuscitation Small Group Simulations

4:00 pm–4:20 pm Managing Sepsis in Burn Patients
Chiaka Akarichi, MD

4:20 pm–5:00 pm Sepsis Small Group Simulations

BURN CENTER LEADERSHIP BOOT CAMP | F-095

1:00 pm–5:00 pm | Osceola A
Course Directors: David Harrington, MD; J. Bradley Wiggins, RN, BSN

Running a burn center is not only about taking care of patients but is also about being an administrator, a manager, and a leader. Many practitioners are put in leadership positions in burn centers without sufficient training in team building and leadership. Leadership skills, in all disciplines and on all levels, can increase productivity and effectiveness.

As a result of attending this activity, the learner should be able to:
• Identify and describe teamwork principles.
• Apply leadership and communication skills.
• Describe and apply principles of quality improvement and assessment.

1:00 pm–1:10 pm Introduction
David T. Harrington, MD; Brad Wiggins, RN, BSN

1:10 pm–1:45 pm A “How to guide” for Mentorship
Amalia Cochran, MD

1:45 pm–2:20 pm Pediatric Burn Centers – What Is Soooo Different?
Rajan Thakkar, MD

2:20 pm–3:03 pm Quality Improvement – Ask the Expert Q&A
Panel – For Rehabilitation
Ingrid Parry, MS, PT, BT-C

2:20 pm–3:03 pm Quality Improvement – Ask the Expert Q&A
Panel – For Nursing
Lois Remington, BSN, RN

2:20 pm–3:03 pm Quality Improvement – Ask the Expert Q&A
Panel – For Physicians
Sharmila Dissanaike, MD

3:30 pm–3:35 pm Stand and Stretch

3:35 pm–4:15 pm Verification – My Recipe for the Special Verification Sauce
John Kevin Bailey, MD

4:15 pm–4:50 pm Accommodating Change, New Technology and Innovation
Kristy Gauthier, MSN, RN

4:50 pm–5:00 pm Wrap-up
David Harrington, MD; Brad Wiggins, RN, BSN

ABuRN MULTI-CENTER BURN RESEARCH TOWN HALL | F-096

4:15 pm–5:45 pm | Osceola 1-2
Course Director: James H. Holmes IV, MD

The ABuRN Multi-Center Burn Research Town Hall is supported and directed by the ABA Burn Science Advisory Panel (BSAP). It is a forum for all clinical trial researchers and participants in the ABA to learn about current and pending multi-center clinical trials, as well as present potential clinical trial proposals/protocols that are in development.

4:15 pm–4:30 pm Current Status of ABuRN Clinical Trials
James H. Holmes, IV, MD

4:30 pm–5:15 pm Presentations of Commencing or Upcoming Clinical Trials

5:15 pm–5:30 pm New ABuRN Business
James H. Holmes, IV, MD

5:30 pm–5:45 pm Open Floor Discussion
James H. Holmes, IV, MD
ABA THANKS OUR 2020 SPONSORS

### DIAMOND

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ABA’s new platform to participate in SIGs and connect with colleagues.
my.ameriburn.org

Calling Burn Fellows, Residents and Medical Students interested in a career in burns!

NEW THIS YEAR, THE ABA WILL BE HOSTING A BURN FELLOWSHIP BREAKFAST

Friday, March 20 | 6:30 am–7:45 am | Osceola 4

Learn about careers in burns and the paths to get you where you want to be. We will discuss fellowships and the ABA’s plans for a verified fellowship program; the benefits of a career as a burn surgeon; and exciting new and emerging technologies in burn care. Plus, a chance to network with others who share your interests and are making the same career decisions, as well as experienced burn surgeons who can talk about their journey.

This event is supported by a grant from Avita.
SUNRISE SYMPOSIA

6:30 am–7:45 am

S-101  Controversies in the Management of Fluid Resuscitation and Electrolyte Disorders in Burn Patients
Moderators: Todd A. Walroth, PharmD, BCPS, BCCCP; Renata Fabia, MD, PhD; Asia N. Quan, PharmD, BCPS, BCCCP
Tampa 1

S-102  Burn Center Nursing & Physician Leadership: How to Build and Nurture Your Dream Team
Moderators: Callie M. Thompson, MD; Alicia Grubbs, MSN, RN, NE-BC; Kelli Yukon, RN, MSN
Tampa 2

S-103  How Do You Engage Adolescent Burn Survivors in an Age of Distractions?
Moderators: Daniel W. Chacon, BA; Kristen C. Quinn, CMHC
Tampa 3

S-104  Spiritual Needs and the Burn Patient: Moving from Disorientation to Reorientation
Moderators: Sandra L. King, MA; Monica L. Gerrek, PhD; Amy Acton, RN, BSN
Naples 1

S-105  Adjunctive Medications for Pain and Sedation for Inpatients, Outpatients and During the Transition from Inpatient to Outpatient Care
Moderators: Allison N. Boyd, PharmD, BCCCP; Samuel P. Mandell, MD, MPH
Naples 2

S-106  The Burn Unit Staffing Roller Coaster - Unique Staffing Challenges
Moderators: Rudi Shlomovitch, BA; Laura Vey, BScNRN; J. Bradley Wiggins, RN, BSN
Naples 3

S-107  Burn Prevention: Worth Its Weight in Gold
Moderators: Stephanie Campbell, MS, RN, CCRN-K; Karla S. Klas, BSN, RN, CCRP
Destin

S-108  Therapy Dosing and Intervention in the Multidisciplinary Care Environment:
Examining Available Evidence, Practice Standards, and Protocols
Moderators: Derek O. Murray, N/A, PT, BT-C; Brooke Murtaugh, OTD, OTR/L, BT-C
Gainesville

S-109  Troubleshooting Recruitment and Retention Challenges in Burn Research
Moderators: Olivia Stockly, BS; Craig G. Crandall, PhD; Audrey E. Wolfe, MPH; Gabrielle G. Grant, BA
Daytona

S-110  New ABA Verified Burn Fellowship Criteria
Moderators: Steven E. Wolf, MD; Kathleen S. Romanowski, MD; Sebastian Q. Vrouwe, MD
Captiva

S-111  Top Five Challenges in the Care of the Obese Burn Patient
Moderators: Charles Yowler, MD; Amanda P. Bettencourt, PhD, APRN, CCRN-K, ACCNS-P; Jennifer Kennedy, MS, OTRL; David M. Hill, PharmD, BCPS, BCCCP; Audrey O’Neil, DPT
St. George 108

S-112  Special Nutrition and Medication Considerations in the Elderly Burn Patient
Moderators: Kate Pape, PharmD, BCPS, BCCCP; Danielle Toepfer, RD, CNSC; Caran Graves, RD, MS, CNSC
St. George 104
PLENARY

OPENING CEREMONY & PRESIDENTIAL ADDRESS | P-191
8:00 am–9:30 am | Osceola CD
Presented by: William G. Cioffi, Jr., MD, FACS, ABA President

Join us for the opening ceremony to kick-off the 52nd ABA Annual Meeting. Meet the winners of some of ABA’s most prestigious awards and hear from ABA President, William G. Cioffi, Jr., MD about the future direction of the ABA and how the organization and our members can continue to impact burn care in the years to come.

As a result of attending this activity, the learner should be able to:

• List advances in the field of burn care that are being facilitated by the ABA.
• Describe major accomplishments made by leaders in the field.
• Explain why members of the ABA should be advancing governance, leadership and research.

CORRELATIVES

CORRELATIVE I - CLINICAL SCIENCES: CRITICAL CARE 1 | C-151
10:00 am–12:00 pm | Osceola A
Moderators: Sharmila Dissanaike, MD; Howard Smith, MD

1 The Impact of No Next of Kin Decision Makers on End-of-life Care
2 Impact of Multimodal Analgesia on Critically Ill Burn Patients
3 Early Acute Kidney Injury (AKI) Following Major Burns
4 The Effects of Rapid Rewarming on Tissue Salvage in Severe Frostbite Injury
5 The Predictive Capacity of ASA PS in Burn Patients
6 Complete Blood Count and Derived Indices: Evolution Pattern and Prognostic Value in Adult Burned Patients
7 Artificial Intelligence and Machine Learning as a Predictive Tool for Acute Kidney Injury in Trauma and Severely Burned Patients
8 The Adoption of Rescue Colloid During Resuscitation Decreases Fluid Administered and Returns End Organ Perfusion

CORRELATIVE II - CLINICAL SCIENCES: NUTRITION AND METABOLISM | C-152
10:00 am–12:00 pm | Sarasota
Moderators: Steven E. Wolf, MD; Kate Wallace, MS, RD, CNSC

9 The Potential for Mitochondrial Respiration and Circulating mtDNA Levels for Early Diagnosis of Sepsis in Burn Patients
10 Hypoglycemic Episodes Predict Length of Stay in Patients with Acute Burns
11 Tube Feeding Through Surgery, Impact on Glucose Control in Burn Patients
12 Effective Treatment of Malnourished Pediatric Burn Patients
13 Macronutrient Intake and Wound Healing in Critically Ill Burn Patients
14 Do Calorie Counts Alter Care or Outcomes in Burn Patients?
15 Nutrition Therapy in the Burn Care Setting: What Is Best Achievable Practice?
16 Clinical Outcomes in Patients with Diabetes, Prediabetes, and No Diabetes Following Acute Burn Injury

CORRELATIVE III - PUBLIC HEALTH/EPIDEMIOLOGY 1 | C-153
10:00 am–12:00 pm | Osceola 1-3
Moderators: James C. Jeng, MD; Laura Garner, BSN, RN

17 The Impact of Modifiable Comorbid Conditions on Long-term Patient Reported Outcomes in Burn Survivors
18 Stop the Burn: A Smoking and Home Oxygen Safety Initiative with Use of Firebreaks
19 Epidemiology of Acute Burn Admissions at a Referral Center in Nepal: A Comparison Between Direct Admissions and External Referrals
20 The Global Burn Registry: A Work in Progress
21 Racial Disparities in Outcomes After Burn Injury in a Universally Insured Military Population
22 16-year State-wide Population-based Analysis of Burn and Inhalation Injury – Demographics, Injury Characteristics, Management, and One-year Outcomes
23 Triage and Transfer to a Regional Burn Center - Impact of a Mobile Phone App
24 Geospatial Localization of Adult Burn Injuries and Associated Housing Factors in a Major Urban Metropolis

CORRELATIVE IV - PSYCHOLOGICAL AND PSYCHOSOCIAL | C-154
10:00 am–12:00 pm | Osceola 4-6
Moderators: Elizabeth Dideon Hess, LCSW; Kimberly Roaten, PhD, CRC

25 Social Integration in the First 2 Years After Moderate to Severe Burn Injury: A Burn Model System National Database Study
26 Brief Psychological Intervention for Distress Reduction in Inpatient Burn Survivors: A Pilot Study
27 Utilization of an Ethics Service in a Large Urban Burn Center
28 Childhood Burn Injuries: The Uninjured Sibling Perspective
29 Symptoms of PTSD in a Burn Outpatient Clinic: Prevalence and Engagement Challenges for the Burn Team
30 Does Peer Support Facilitate Social Integration Following Burn Injury?
31 Patients in Need: Are We Identifying and Helping Them?
32 Major Psychiatric Illness and Drug Dependence Both Influence Burn Outcomes, but Not in the Same Way

CORRELATIVE V - NURSING | C-155
10:00 am–12:00 pm | Osceola B
Moderators: Annette Matherly, MS, RN, CCRN; Kelli Yukon, RN, MSN
33 Effectiveness of Caregiver-oriented Transitional Care Program (CTCP) in Promoting Preparedness of Caregivers for Home Care of Burn Patients
34 Family Needs of Adult & Pediatric Burn Patients
35 Wound Improvement Project: Improving Skill Sustainment and Confidence
36 Developing Burn Specific Documents in the Electronic Medical Record
37 Identifying Vulnerable Children: Burn Pediatric Warning Scores and ICU Designation
38 A Retrospective Review Evaluating the Institution of Nurse Clinic Visits for the Treatment of Burn Patients Being Managed at Home
39 Nurses Can Resuscitate
40 Implementation of a Nursing-driven Volume-based Enteral Feeding Protocol

EDUCATIONAL FORUMS

FIRE FIGHTER I SESSION: ENERGY STORAGE SYSTEMS | F-160
10:00 am–12:00 pm | Orange Blossom Ballroom
Course Director: Chris Bowles, FF
Energy storage systems bring a unique hazard to our homes and businesses. Lithium ion batteries store energy from solar and other power generating sources and represent a potential fire hazard with catastrophic consequences. This session will examine fire risks posed by various energy storage systems.

As a result of attending this activity, the learner should be able to:

- Identify the inherent risks that energy storage systems present to the public in the form of fire.
- Conduct firefighting operations in and around buildings that included this hazard potential.

10:00 am–12:00 pm Energy Storage Systems
Paul Rogers

REHABILITATION WORKSHOP: PROVIDING THERAPY IN THE CRITICAL CARE SETTING – HOW DO WE DO IT AND WHAT HAS CHANGED? | F-161
10:00 am–12:00 pm | Miami
Course Directors: Matthew Godleski, MD; Miranda Yelvington, MS, OTR/L, BT-C, BCPR; Renee Warthman, MS, OTR/L, BT-C

There are many challenges to providing rehabilitation therapy services in the critical care setting, but also new opportunities to advance practices to allow for safe, early interventions during periods of intensive care. This session will review current technologies, scientific studies regarding mobilization in critical care, and practical approaches and guidance for implementing new therapy protocols. The session will be led by a multidisciplinary team of presenters to provide a holistic view of both the barriers and potential of therapy during the early time period following burn injury.

As a result of attending this activity, the learner should be able to:

- Describe recent advances in the safe mobilization of critically ill patients.
- Discuss new techniques and protocols for therapy in the intensive care unit.
- Describe the measurements and equipment used in the intensive care unit.

10:00 am–10:10 am Introduction
Matthew Godleski, MD
10:10 am–10:25 am Making Moves in the ICU: What’s Safe?
Jack Rasmussen, MD
10:25 am–10:40 am Working Together: Nursing and Therapy in the Critical Care Setting
Jenny Janisko, MSN, RN
10:40 am–10:55 am Let’s Move: Early Mobilization in the Pediatric Burn Population
Hilary Smith-Chong
10:55 am–11:10 am Early Mobility in the Surgical/burn ICU: A Quality Improvement Project
Kelley Crawford
11:10 am–11:25 am How Low Can You Go?
Arek J. Wiktor, MD
11:25 am–11:40 am Medications and the Impact on Burn Rehabilitation Therapy
Jennifer Brandt, PharmD
11:40 am–12:00 pm Panel Discussion
BURN RECONSTRUCTION | F-163

2:00 pm–4:00 pm | Miami
Course Directors: Sigrid A. Blome-Eberwein, MD; Daniel N. Driscoll, MD

The different aspects of burn reconstruction will be presented and discussed in a modular format, concentrating on one basic and overview topic (how to develop a reconstructive plan for an individual burn survivor), followed by a basic technique topic (local flaps) followed by two special subjects (hand and reconstruction in the elderly), followed by a module on new or adjunct technology (rehabilitation techniques like RF or ultrasound) followed by a burn survivor perspective on reconstruction.

As a result of attending this activity, the learner should be able to:

- Discuss the wide reaching scope of burn reconstruction.
- Describe how to develop a reconstructive plan for a burn survivor.
- Explain delegating the various aspects of burn reconstruction to the appropriate specialist.
- Describe how to perform some aspect of burn reconstruction as presented.

2:00 pm–2:30 pm Burn Reconstruction- general Principles and Common Hand Burn Reconstruction Procedures
Sigrid A. Blome-Eberwein, MD; Rajiv Sood, MD

2:30 pm–3:00 pm How to Approach a Severe Hand Contracture Post Burn, Different Approaches, Clinical Cases
David Wainwright, MD

3:00 pm–3:25 pm What to Do to Avoid a Flap. Hand Reconstruction When Micrsurgery Is Not an Option
Carlos Sereday, MD

3:30 pm–4:00 pm Pediatric Hand Burn Reconstruction with Special Consideration for Timing During Growth
Daniel N. Driscoll, MD

WHAT THE BURN PROVIDER NEEDS TO KNOW ABOUT SEPSIS: CURRENT LITERATURE, SPECIAL CONSIDERATIONS, CASE DISCUSSIONS AND FUTURE DIRECTIONS | F-165

2:00 pm–4:00 pm | Osceola 1-3
Course Directors: Steven Kahn, MD; Laura S. Johnson, MD

This session will focus on understanding Sepsis-3 criteria/guidelines and how they apply to the management of the burn patient. The course will cover the history of the sepsis revisions including consensus statements regarding burns. We will cover the most current literature regarding resuscitation of the septic patient (most up-to-date recommendations of fluids, steroids, antibiotics, monitoring, etc). We will cover unique considerations for the burn patient, share some tips and tricks for CMS compliance, strategies for navigating the electronic medical record, success with sepsis alert tools, and avoiding false sepsis triggers and wasted resources.

As a result of attending this activity, the learner should be able to:

- Explain Sepsis-3 and the SOFA score.
- Discuss unique considerations for diagnosing sepsis in the burn patient and the most current literature on resuscitation and treatment of the septic patient.
- Recognize and prevent false positive sepsis triggers.
BECOMING AN EXPERT BURN THERAPIST - LEARNING TO ENHANCE YOUR PROFESSIONAL REASONING AND CLINICAL DECISION MAKING THROUGH COMPLEX AND COMPREHENSIVE REHABILITATION CASE MANAGEMENT | F-167

2:00 pm–4:00 pm | Orange Blossom Ballroom
Course Directors: Ingrid Parry, MS, PT, BT-C; Bernadette Nedelec, BScOT(c), PhD, BT-C

How does a clinician become an “expert”? Learn common frameworks for professional reasoning and decision making that can be applied in the rehabilitation of burn survivors during the progression of a clinician from novice to expert. Experienced BT-C therapists will present interesting and complex cases in a variety of rehabilitation domains demonstrating the logical and progressive flow of reasoning required to achieve certification.

As a result of attending this activity, the learner should be able to:
- Differentiate between novice and expert professional reasoning.
- Describe how to apply the Canadian Practice Process Framework and the International Classification of Functioning, Disability and Health framework to the evaluation and treatment of burn survivors.
- Recognize logical and proficient flow of professional reasoning and decision making that is required for Burn Therapist Certification through case examples in various domains of burn rehabilitation.
- Discuss advanced level interventions that are applied in the rehabilitation of burn survivors for a variety of practice domains.

2:00 pm–2:20 pm | Introduction and Using ICF Framework for Evaluation and Treatment
Ingrid Parry, MS, PT, BT-C

2:20 pm–2:40 pm | Professional Reasoning from Novice to Expert
Bernadette Nedelec, BScOT(c), PhD, BT-C

2:40 pm–3:00 pm | Case Presentation: When Reality Does Not Meet Expectation
Mandy Yelvington, MS, OTR/L, BT-C, BCPR

3:00 pm–3:20 pm | Case Presentation: Co-managing a Burn Case with Community Therapists
David Lorello, PT, DPT, BT-C

3:20 pm–3:40 pm | Case Presentation: When Nothing Goes as Expected How to Manage a Complex Burn Case
Renee Warthman, MS, OTR/L, BT-C

3:40 pm–4:00 pm | Question and Answers
Ingrid Parry, MS, PT, BT-C

VASCULAR ENDOTHELIAL DYSFUNCTION IN THERMAL INJURY | F-166

2:00 pm–4:00 pm | Osceola A
Course Directors: Lauren T. Moffatt, PhD; Jeffrey W. Shupp, MD

The burn care community continually challenges the dogma of burn shock resuscitation. To better inform future clinical care, new evidence and understanding of endothelial dysfunction must be further researched and integrated into our understanding of burn shock pathophysiology. This educational forum is designed to inform learners of the current translational research in endotheliopathy and how it could apply to advance in burn clinical care.

As a result of attending this activity, the learner should be able to:
- Describe and define endotheliopathy.
- List potential future directions for research in endothelial dysfunction.

2:00 pm–2:30 pm | Introduction and Background on Endotheliopathy
Rosemary Kozar

2:30 pm–2:45 pm | Endotheliopathy in Septic Shock
Kevin K. Chung, MD

2:45 pm–3:00 pm | Endotheliopathy in Hemorrhagic Shock
Charles Wade, PhD

3:00 pm–3:15 pm | Endotheliopathy in Burn Shock
Robert Cartotto, MD

3:15 pm–3:45 pm | Moving from Bench to Bedside: Implications of Endothelial Dysfunction on Burn Shock Resuscitation
Leopoldo C. Cancio, MD

3:45 pm–4:00 pm | Q&A

Describe what is necessary for CMS documentation and compliance related to sepsis and discuss strategies to optimize the EMR regarding sepsis for the burn patient.

2:00 pm–2:15 pm | Intro to Sepsis and Current Guidelines
Steven Kahn, MD

2:15 pm–2:35 pm | Sepsis and the Burn Patient
Jeffrey W. Shupp, MD

2:35 pm–3:35 pm | Sepsis Case Presentations
Laura S. Johnson, MD

2:35 pm–3:35 pm | Panel of Experts
Kevin K. Chung, MD; David G. Greenhalgh, MD; Heather Evans, MD; Steven Kahn, MD; Jeffrey W. Shupp, MD

3:35 pm–4:00 pm | Sepsis—Future Directions
Kevin K. Chung, MD

VASCULAR ENDOTHELIAL DYSFUNCTION IN THERMAL INJURY | F-166

2:00 pm–4:00 pm | Osceola A
Course Directors: Lauren T. Moffatt, PhD; Jeffrey W. Shupp, MD

The burn care community continually challenges the dogma of burn shock resuscitation. To better inform future clinical care, new evidence and understanding of endothelial dysfunction must be further researched and integrated into our understanding of burn shock pathophysiology. This educational forum is designed to inform learners of the current translational research in endotheliopathy and how it could apply to advance in burn clinical care.

As a result of attending this activity, the learner should be able to:
- Describe and define endotheliopathy.
- List potential future directions for research in endothelial dysfunction.
WORKING WITH SELF-INFLICTED BURN PATIENTS AND FAMILIES AT THE BURN CENTER | F-168
2:00 pm–4:00 pm | Sarasota
Course Directors: Kristen C. Quinn, CMHC; Kimberly Roaten, PhD, CRC; Brent W. Smith, PhD, LP

This session will begin with a holistic discussion of the multi-faceted treatment of adult and adolescent patients with self-inflicted burn injuries. National data regarding prevalence will be presented as well as research findings regarding pre-morbid characteristics and outcomes. The presenters will provide information about best practices when treating adult and pediatric patients with self-inflicted injuries. The forum will also include discussion of the impact of caring for this unique patient population on the providers and strategies for supporting the burn team.

As a result of attending this activity, the learner should be able to:

- Identify specific factors related to care provider moral injury and supporting staff when caring for this patient population.
- Identify tools to use to support family members post a loved one’s self-inflicted burn injury.
- Describe risk factors associated with self-inflicted burns in pediatric populations and list important components of psychosocial treatment for this population.
- Describe strategies for identifying, assessing, and reducing suicide risk among adult patients using evidence-informed practices. Discuss patterns of physical and psychological outcomes for individuals with self-inflicted burn injuries.

2:00 pm–2:10 pm  Topic Introduction
Kristen C. Quinn, CMHC

2:10 pm–2:40 pm  Suicide Assessment, Presentation on National Data Regarding Self-Inflicted vs Non Self-Inflicted Injuries
Kim Roaten, PhD, CRC

2:40 pm–3:20 pm  Treatment of Adolescent and Pediatric Patients Following a Self-Inflicted Injury, Safety Planning
Brent W. Smith, PhD, LP

3:20 pm–3:40 pm  Family Interventions Following the Self-Inflicted Burn Injury of a Loved One
Gretchen James

3:40 pm–3:50 pm  Impact on the Burn Team; Moral Injury
Kristen C. Quinn, CMHC

3:50 pm–4:00 pm  Facilitated Panel Q&A
Kristen C. Quinn, CMHC

OSCEOLA CD

Presidential Plenary

THURSDAY, MARCH 19 | 8:00 AM–9:30 AM

Join us for our keynote speaker, John O’Leary, as he discusses what we can do to further improve the lives of those affected by burn injury.

This program was developed in partnership with the Phoenix Society for Burn Survivors.
FORGET NAUGHTY, WE ARE GOING TO GET N(A)STI
2:00 pm–4:00 pm | Osceola B
Course Directors: Anjay Khandelwal, MD; Sara Higginson, MD

Necrotizing soft tissue infections remain one of the more difficult disease processes to manage and still carry a high mortality rate. Many of the management aspects still represent a challenge for clinicians including accurate and timely diagnosis, antimicrobial therapies and surgical management. This multi-format course will provide a comprehensive overview of the etiology, microbiology and surgical management, including surgical reconstruction of a variety of NSTIs as well as similar conditions such as Levamisole induced vasculitis.

As a result of attending this activity, the learner should be able to:

• Discuss the etiology and classification of necrotizing soft tissue infections.
• Evaluate and assess necrotizing soft tissue infections and formulate a medical and surgical management plan.
• List other conditions that mimic necrotizing soft tissue infections.
• Describe the surgical management for necrotizing soft tissue infections.

PART 1 | F-162
Agenda: Wednesday
2:05 pm–2:30 pm Definitions/Classifications
   Anjay Khandelwal, MD
2:30 pm–2:50 pm Microbiology and Antimicrobial Therapy
   Melissa Reger, PharmD, BCPS
2:50 pm–3:10 pm Diagnosis and Diagnostic Challenges
   Sharmila Dissanaike, MD
3:15 pm–3:50 pm Diagnostic Case Presentations
   Sharmila Dissanaike, MD; Anjay Khandelwal, MD; Sara Higginson, MD
3:50 pm–4:00 pm Questions/Wrap-Up

PART 2 | F-262
Agenda: Thursday
2:00 pm–2:05 pm Welcome and Introduction
   Anjay Khandelwal, MD; Sara Higginson, MD
2:05 pm–2:30 pm Acute Operative Management/Skin Sparing Techniques
   Tam N. Pham, MD
2:30 pm–2:55 pm Principles of Coverage and Reconstruction
   Sai R. Velamuri, MD
2:55 pm–3:00 pm Introduction to Case Presentations
   Sara Higginson, MD; James Hwang, MD
3:00 pm–3:50 pm Acute and Reconstruction Case Presentations/
   Panel Discussion
   James Hwang, MD; Sai R. Velamuri, MD;
   C. Scott Hultman, MD, MBA; Travis Perry, MD
3:50 pm–4:00 pm Questions/Wrap-Up
   Nicole M. Kopari, MD

TWO-DAY COURSE
PLENARY

BURN WILDFIRE DISASTER RESPONSE: VIEWS THROUGH DIFFERENT LENSES | P-192

4:15 pm–5:30 pm | Osceola CD
Presented by: Tina L. Palmieri, MD

Burn disasters are complex and involve more than just the burn team. This session will examine the response and impact of wildfires from multiple perspectives, including fire fighters, physicians, veterinarians, burn survivors, and environmentalists to identify the immediate, intermediate, and long-term implications to humans, animals, and the environment. This session is not a mere description; rather, it is designed to leverage the experience of multiple groups to better describe the impact of the wildfires.

As a result of attending this activity, the learner should be able to:

- Identify the lessons learned about the impact of wildfires on initial triage.
- Compare and contrast the incidence and types of injuries sustained by humans and animals in a wildfire.
- Describe triage and post-incident system lessons learned from wildfires.

4:15 pm–4:20 pm Introduction
Tina L. Palmieri MD

4:20 pm–4:40 pm The Wildfire Disaster Response: A Fire Service Perspective
Josh Rubinstein, Fire Captain/Paramedic (ret)
Cosumnes Fire Department

4:40 pm–5:05 pm The Wildfire Disaster Response: Human and Animal Comparison
Jamie Peyton, DVM and Tina L. Palmieri MD

5:05 pm–5:25 pm A Survivor’s Perspective
Chad Carothers

5:25 pm–5:30 pm Conclusion and Questions

STAY CONNECTED

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SPONSORED SYMPOSIA

PIONEERING INNOVATIVE TREATMENTS FOR BURN PATIENTS WITH PURION® PROCESSED PLACENTAL ALLOGRAFTS

7:00 pm | Osceola A
Speaker: Paul Glat, MD; Marc Matthews, MD; Michelle Massee

This symposium will focus on clinical experience backed by published scientific evidence supporting the use of EpiBurn®, a Purion processed placental allograft, in the treatment of challenging adult and pediatric burn patients.

A NEW DECADE OF LASER SCAR REVISION

7:00 pm | Osceola B
Speaker: Thomas Beachkofsky, MD

As pioneers in IPL and CO2 laser technology for scar revision, Lumenis has helped change the lives of thousands afflicted with traumatic burns. Learn about Lumenis’ Hope For Scars legacy of proven results, and what’s to come. Review the newest clinical evidence behind energy based procedures for scar revision, and how early-stage laser intervention and combination therapies may lead to better outcomes.
SUNRISE SYMPOSIA

6:30 am–7:45 am

S-201  Inhalation Injury  Tampa 1
Moderators: Todd F. Huzar, MD; Kevin K. Chung, MD; Ronald Mlcak, PhD, RRT

S-202  Youth Firesetter Intervention Programs  Tampa 2
Moderators: Kara Garrett, AS, YFIS, CPST; Debra Jones, RN, TNCC, CNIII; Paul Schwartzman, MS, LMHC

S-203  It’s all about Teamwork: Nursing and Therapy Collaboration for Optimizing Function with Dressings and Treatment  Tampa 3
Moderators: Cassandra O’Rourke, OTR/L, BCP; Trudy Boulter, OTR/L, CHT, BT-C; Emily Eschelbach, BSN, RN

S-204  Grassroots Advocacy and Burns  Naples 1
Moderators: Tom Flamm, FF; Dan Dillard; Amalia Cochran, MD

S-205  Preparation and Integration of Learners in a Burn Service Rotation  Naples 2
Moderators: Robert Ball, MD; Gaurav Garg, MD; Kristy Gauthier, MSN, RN

S-206  Finding the Sweet Spot: The Management of Hyperglycemia and Diabetes in Burn Patients  Naples 3
Moderators: Todd A. Walroth, PharmD, BCPS, BCCCP; Allison N. Boyd, PharmD, BCCCP; Beth A. Shields, MS, RD, LD, CNSC

S-207  Big Burn Center to Small Town: Providing Multidisciplinary Follow Up for Successful Transition for Our Rural Patients  Destin
Moderators: Callie M. Thompson, MD; Elisha G. Brownson, MD; Lucy Wibenmeyer, MD; Kristen C. Quinn, CMHC

S-208  Use of Medical Improvisation to Improve Communication and Empathy  Gainesville
Moderators: David Lorello, PT, DPT, BT-C; Elizabeth Dideon Hess, LCSW

S-209  Moral Distress: How do we Recognize and Deal with It?  Daytona
Moderators: Monica L. Gerrek, PhD; Mikki Rothbauer, MSW, LICSW; Tammy Coffee, RN, MSN, APRN

S-210  Managing Pain for Skin Graft Donor Site  Captiva
Moderators: Dhaval Bhavsar, MD; Anthony Kovac, MD; Audrey O’Neill, DPT

S-211  Scenarios in Effective Experimental Design and Practical Use of Statistics  St. George 108
Moderators: Lauren T. Moffatt, PhD; Deborah Carlson, PhD

S-212  The Elderly: When and When Not to Operate on Them  St. George 104
Moderators: Soman Sen, MD; Oliver Schirokauer, PhD, MD; Herbert Phelan, III, MD
PLENARY

PRESIDENTIAL PLENARY | P-291
8:00 am–9:30 am | Osceola CD

The Presidential Plenary session will feature Annual Meeting paper awards, a keynote by John O’Leary, and an update on the National Trauma Research Action Plan.

As a result of attending this activity, the learner should be able to:
• Describe how burn care professionals are making an impact.
• Discuss what we can do to further improve the lives of those affected by burn injury.
• Explain the importance of burn research in the National Trauma Research Action Plan.

CORRELATIVES

CORRELATIVE VI - TRANSLATIONAL SCIENCES: CRITICAL CARE AND METABOLISM | C-251
10:00 am–12:00 pm | Osceola A
Moderators: Lauren T. Moffatt, PhD; Susan L. Smith, PhD, APRN-C, RNFA
41 Changes of Mitochondria-related Gene Expression Profile Associated with Burn-induced Cardiomyopathy
42 CFTR Mediates Enteric Bacterial Translocation Post Severe Burn via ERK and Inflammatory Signaling
43 Activation of CCL2/CCR2 Signaling Axis Is Responsible for Spinal Cord Inflammation and Loss of Muscle Mass in Mice After Burn Injury
44 Defects in Mitophagy Response in Burns Involved in Poor Regeneration Capacity
45 Unravelling the Unique Burn-induced Temporal Alterations in Adipose Tissue Metabolism
46 Inhibition of Lipolysis with Acipimox Targets Post-burn White Adipose Browning by Altering Macrophage Polarity
47 Burn-induced Ileal Extracellular Matrix Upregulation Associated with Epithelial to Mesenchymal Transition
48 Burn Injury Impedes Late Erythropoiesis via Decreased Alpha Hemoglobin Stabilizing Protein and siglec1

CORRELATIVE VII - CLINICAL SCIENCES: WOUNDS AND SCARS 1 | C-252
10:00 am–12:00 pm | Osceola B
Moderators: John Kevin Bailey, MD; Callie M. Thompson, MD
49 Indocyanine Green Angiography in the Surgical Evaluation of Partial Thickness Burn Wounds
50 Assessment of Skin Graft in Pediatric Burn Patients Using Machine Learning Is Comparable to Human Expert Performance
51 Negative Pressure Wound Therapy for Small- to-medium-sized Paediatric Thermal Burns: A Randomized Controlled Trial (SONATA in C)
52 Developing a Topical Antibiotic in the Burn Unit
53 Regulation of Glycolysis and the Warburg Effect in Keloids
54 Validation of Infrared Thermography for Prediction of 21-day Burn Wound Healing
55 Melanocytes in Hypopigmented Burn Scar Can Be Stimulated to Produce Melanin
56 Reduced Length of Stay with Autologous Skin Cell Suspension Reduces Burn Injuries

CORRELATIVE VIII - PREVENTION | C-253
10:00 am–12:00 pm | Sarasota
Moderators: Anjay Khandelwal, MD; Jennifer B. Radics-Johnson, MBA
57 Cool Running Water First Aid Decreases Skin Grafting Requirements in Pediatric Burns: A Cohort Study of 2495 Children
58 The Homelessness Crisis and Burn Injuries: A Cohort Study
60 Contact Hand Burns in Children: Still a Major Prevention Need
61 Tap Water: Still Burning After All These Years
62 Impact of the Affordable Care Act on Post-discharge Services After Burn Injury
63 Assessing the Quality and Reliability of Patient Information Regarding First-aid Burn Care on Youtube
64 E-cigarette and Vaporizer-related Burn Injury: Demographics and Injury Patterns

CORRELATIVE IX - QUALITY IMPROVEMENT | C-254
10:00 am–12:00 pm | Osceola 1-3
Moderators: Lucy Wibbenmeyer, MD; Alan D. Rogers, MBChB, MSc, MMed
65 Fourteen Years of Worldwide Teleconsultation Support for Burn Patient Care
66 The Effect of Transfer on Outcomes in Burns
67 Tissue Plasminogen Activator Protocol for Frostbite in Rural and Remote Areas
68 Application of the Modified Hospital Length of Stay Predictor
69 Outbreak of Carbapenem-polymyxin-quat-resistant Acinetobacter Baumannii Associated with Mafenide Acetate Shortages: An Interdisciplinary Approach to Eradication

70 Chlorhexidine Gluconate for Burn Wound Cleansing: Reduction in Multi-drug Resistant Organism Acquisition

71 Early Donor Site Harvesting in Burn Patients

72 Frailty Assessment in the Burn Population: A Single Center Retrospective Review

CORRELATIVE X - REHABILITATION | C-255
10:00 am–12:00 pm | Osceola 4-6
Moderators: Lisa Forbes, BScOT(c), BT-C; Matthew Godleski, MD

73 Objective Measurement of Adherence with Splint Use After Burn Injury

74 The Effectiveness of Serial Casting in Obtaining Maximum Range in Burn Scar Contracted Joints

75 Burn Survivors Can Exercise for 30 Min, Even in the Heat, Without a Risk of Excessive Hyperthermia

76 The Effect of Splinting of Metacarpophalangeal Joints After Skin Grafting: A Review of the ACT Database

77 Functional Outcomes in Patients with Hand Burns Receiving Long Term Hand Therapy

78 Optimising Compression for the Management of Acute Hand Burn Edema

79 Maximizing Safe Positioning of Upper Extremities After Axillary Burn Injuries to Prevent Contractures and Maintain Function

80 Burn Rehabilitation: How Do You Minimize Delays?

EDUCATIONAL FORUMS

FIRE FIGHTER II SESSION: “SLEEP, WORK, AND HEALTH” | F-260
10:00 am–12:00 pm | Orange Blossom Ballroom
Course Director: Chris Bowles, FF
Speaker: David Rainey, MD, MPH, MEd

Sleep and work constitute the majority of our adult lives, yet their critical roles in health and wellbeing are often overlooked. In our 24/7 culture the importance of sleep is often trivialized, and even derided as “unproductive time” by those in business, politics, and paradoxically even healthcare. Scientific research has demonstrated that sleep is much more than simply a suspension of activity, but rather a vital and active process of recovery, reorganization, and rejuvenation that is essential for optimal functioning while awake. Understanding the science of sleep can help us optimize sleep strategies for what our circumstances may require.

As a result of this activity, the learner should be able to:
- Understand the function of sleep and sleep regulation
- Explain sleep deprivation and the impact on job performance, health, and wellbeing
- Identify sleep strategies and practices that can help optimize sleep for various circumstances

ETHICS WORKSHOP: BEYOND THE BASICS OF BIOETHICS | F-261
10:00 am–12:00 pm | Miami
Course Directors: Monica L. Gerrek, PhD; Todd F. Huzar, MD

Burn care providers are not expected to be experts in ethics, nor should they be. However, a limited understanding of bioethical principles and concepts often leads to confusion about how to apply them and can result in unnecessary ethical quandaries. The purpose of this workshop is to provide learners with the information they need to better utilize bioethical principles and concepts in patient care to optimize ethical decision making. In addition to the four principles of bioethics, topics covered will include informed consent, end-of-life decision making, surrogate decision making, and decision making for pediatric patients among others.

As a result of attending this activity, the learner should be able to:
- Explain and use bioethics terminology correctly.
- Discuss how to better navigate medical decision making with patients and surrogates.

10:00 am–10:07 am Introduction/Disclosures/Objectives
Monica L. Gerrek, PhD

10:07 am–10:25 am Bioethical Principles
Oliver Schirokauer, PhD, MD

10:25 am–10:50 am Patient Decision Making
Oliver Schirokauer, PhD, MD; Todd F. Huzar, MD

10:50 am–11:20 am Surrogate Decision Making
Monica L. Gerrek, PhD; Todd F. Huzar, MD

11:20 am–11:50 am End-of-Life Decision Making
Oliver Schirokauer, PhD, MD; Todd F. Huzar, MD

11:50 am–11:55 am Moral Distress
Monica L. Gerrek, PhD

11:55 am–12:00 pm Wrap-Up
Monica L. Gerrek, PhD; Todd F. Huzar, MD; Oliver Schirokauer, PhD, MD
ONE SIZE DOES NOT FIT ALL: APPLYING THE 2018 SOCIETY OF CRITICAL CARE MEDICINE GUIDELINES FOR PAIN, AGITATION, DELIRIUM, IMMOBILITY, AND SLEEP TO BURN PATIENTS

F-263

2:00 pm–4:00 pm | Osceola A
Course Directors: Todd A. Walroth, PharmD, BCPS, BCCCP; Allison N. Boyd, PharmD, BCCCP; Samuel P. Mandell, MD, MPH

The 2018 Clinical Practice Guidelines for the Prevention and Management of Pain, Agitation/Sedation, Delirium, Immobility, and Sleep Disruption in Adult Patients in the ICU provide a foundation for standardization of these disorders in critically ill patients. However, these guidelines do not specifically address the burn patient population and literature in this area is limited. The purpose of this session is to summarize the guidelines and to extrapolate these recommendations to burn patients accounting for inherent limitations in this population.

As a result of attending this activity, the learner should be able to:

- Summarize the recommendations included in the 2018 PADIS Guidelines.
- Compare and contrast available burn-specific literature for each section of the 2018 PADIS Guidelines.
- Apply the information from the 2018 PADIS Guidelines and literature review to the burn patient population in a standardized manner.

2:05 pm–2:35 pm Trauma-Informed Practice
Karen Kraus
2:35 pm–3:15 pm Developmentally Informed Care
Alexis Castro, MS, CCLS
3:15 pm–3:50 pm Transition to the Outpatient Setting and Beyond the Hospital
Shelley A. Wiechman, PhD

SCOPE - STANDARDS - CERTIFICATION: WHAT’S NEW IN BURN NURSING | F-265

2:00 pm-4:00 pm | Osceola 4-6
Course Directors: Gretchen J. Carrougher, MSN, RN; Sarah Bernardy, RN, BSN, CCRN; J. Bradley Wiggins, RN, BSN

The ABA Professional Certification Committee members are actively working to achieve a pathway to Burn Nurse Certification. There are many moving parts to this process and we need to work together to get to the finish line! From competencies, to the scope of practice, to standards of care, all of which will lead to our ultimate goal of Burn Nurse Certification. We invite all nurses to join us in an active discussion as we continue on our journey!!

As a result of attending this activity, the learner should be able to:

- Discuss current Scope of Burn Nursing Practice Statement and Standards.
- Discuss implementation of the BNCI competencies.
- Describe the current state of Burn Nurse Certification process.

2:00 pm–2:45 pm Scope and Standards for Burn Nursing
Gretchen J. Carrougher, MSN, RN
2:45 pm–3:30 pm Utilization of Standards - Q&A with ABA Professional Certification Committee
Sarah Bernardy, RN, BSN, CCRN
3:30 pm–4:00 pm Burn Nurse Certification: An Update
Gretchen J. Carrougher, MSN, RN

BBUBBLES AND BANDAGES: TRAUMA-INFORMED PRACTICE AND PEDIATRIC PSYCHOSOCIAL CARE IN THE BURN CENTER | F-264

2:00 pm–4:00 pm | Sarasota
Course Director: Alexis Castro, MS, CCLS

Supporting children and families throughout their burn treatment is often challenging. This session will provide a framework for how trauma, adverse childhood experiences, and development impact a child’s coping with treatment. Techniques and tools to facilitate developmentally appropriate care will be shared. The impact of a child’s coping style and a parent’s role in the child’s adjustment will be discussed as they relate to transitioning to the outpatient setting. Promoting post traumatic growth and resiliency will also be discussed.

As a result of attending this activity, the learner should be able to:

- Define the role of child life specialist and how the role supports the mission of the multidisciplinary burn team.
- Describe trauma and the physiological responses to trauma.
- Describe the core principles of trauma informed care and developmentally informed care, including ways to incorporate these principles into daily practice.
- List non pharmacological techniques for providing developmentally appropriate care with the goal of decreasing pain and increasing opportunities for patient mastery and development of positive coping skills.

2:05 pm–2:35 pm Introduction/Background & Interactive Activity #1
Karen Kraus
2:35 pm–3:15 pm Developmentally Informed Care
Alexis Castro, MS, CCLS
3:15 pm–3:50 pm Transition to the Outpatient Setting and Beyond the Hospital
Shelley A. Wiechman, PhD

30 | #ABA52
UTILIZING COMMUNITY PARTNERSHIPS FOR BETTER BURN CARE OUTCOMES: WORKING WITH THE FIRE SERVICE, BURN FOUNDATIONS, BURN SURVIVORS, AND OTHER COMMUNITY PARTNERS

F-266

2:00 pm–4:00 pm | Osceola 1-3

Course Directors: Jennifer B. Radics-Johnson, MBA; Tom Flamm, FF

The needs of burn centers are numerous and diverse. Patients are not only looking for positive surgical outcomes, but may also be looking for psychological healing, emotional support, ways to give back, and knowledge about how to prevent future burn injuries. With limited time and resources, burn centers are stretched thin to meet all of their patients’ needs. This course will help burn centers recognize opportunities for collaboration and partnerships to assist with better burn patient outcomes and prevention of burn injuries, as well as provide examples of successful partnerships and collaborations between burn centers and community partners.

As a result of attending this activity, the learner should be able to:

• Describe how to identify community partners to assist with needs of burn centers and their patients and community.
• Discuss opportunities for collaboration and partnerships to assist with better long-term burn patient outcomes and prevention of burn injuries.

2:00 pm–2:10 pm
Welcome, Overview of Course Agenda, Learning Objectives, Course Summary
Jennifer B. Radics-Johnson, MBA; Tom Flamm, FF

2:10 pm–2:20 pm
What Are Partnerships and Collaborations, and Why Are They Important?
Dan Dillard

2:20 pm–2:35 pm
Collaborations and Partnerships with the Fire Service

2:35 pm–2:50 pm
Collaborations and Partnerships with Burn Foundations
Daniel W. Chacon, BA

2:50 pm–3:05 pm
Collaborations and Partnerships with Burn Camps
Tonas Kalil, DPT

3:05 pm–3:20 pm
Collaborations and Partnerships with Burn Survivors
Mona Kreuger, MSW

3:20 pm–3:35 pm
Collaborations and Partnerships in Prevention Education
Stephanie Campbell, MS, RN, CCRN-K

3:35 pm–4:00 pm
Panel Discussion and Q&A
Jennifer B. Radics-Johnson, MBA

OPERATION MINUTE’S NOTICE: HOT WASH ASSISTANT SECRETARY OF PREPAREDNESS RESPONSE (ASPR) REGIONAL DISASTER HEALTH RESPONSE SYSTEM PILOT DISASTER EXERCISE: CHALLENGES IN BURN DISASTER PREPAREDNESS | F-267

2:00 pm–4:00 pm | Orange Blossom Ballroom

Course Directors: Colleen M. Ryan, MD; James C. Jeng, MD

This interactive session provides a summary of and opportunities for critical discussions of the processes, events and actions related to a burn surge mass casualty exercise in Massachusetts in the summer of 2019 sponsored by the Assistant Secretary of Preparedness Response’s Regional Disaster Health Preparedness Pilot Project. The aims of the session are to seek input into the challenges identified by the exercise from experts in the field and from the burn community and to understand interactions between the state, regional and federal levels and the role of the American Burn Association regions and central office in disaster situations.

As a result of attending this activity, the learner should be able to:

• Describe the role of the ABA regions in a burn surge disaster situation.
• Describe the role of and resources available at the ABA central office in burn surge disaster situations.
• Describe the role of the federal government in a burn surge disaster situation.
• List the challenges involved and resources available to respond to a burn surge event that overwhelms local resources.

2:00 pm–2:15 pm
ASPR Regional Disaster Health Response System: Operation Minute’s Notice
Colleen M. Ryan, MD

2:15 pm–2:25 pm
Crisis Standards of Care: Our Duty
James C. Jeng, MD

2:25 pm–2:35 pm
Development of ABA Burn Center Triage Base Tables for Seriously Strained Situations
Randy D. Kearns, DHA, MSA

2:35 pm–3:15 pm
Introduction to Tabletop and Exercise
Colleen M. Ryan, MD

3:15 pm–3:45 pm
Secondary Triage Tabletop Exercise Panel
Moderator
James C. Jeng, MD

3:15 pm–3:45 pm
Secondary Triage Tabletop Exercise Panel: Western Burn Region Coordinator
Annette Matherly, MS, RN, CCRN

3:15 pm–3:45 pm
Secondary Triage Tabletop Exercise Panel: Northeast Burn Region Coordinator
Kathe Conlon, BSN, RN, MSHS

3:15 pm–3:45 pm
Secondary Triage Tabletop Exercise Panel: Midwest Burn Region Co-coordinator
Mark Johnston, RN, BSN, TCRRN; Judy Placek, APRN
3:15 pm–3:45 pm  Secondary Triage Tabletop Exercise Panel: Southern Burn Region Coordinator  Kathryn Mai, MPH, BSN, RN

3:15 pm–3:45 pm  Secondary Triage Tabletop Exercise Panel: Great Lakes Burn Region Coordinator  Cindy Wegryn

3:45 pm–4:00 pm  Summary and Future Directions  Colleen M. Ryan, MD

WHEN AND HOW TO SPLINT THE PEDIATRIC BURNED HAND | F-268
2:00 pm–4:00 pm | Miami
Course Director: Stephanie J. Wicks, BAppSc

Burns scar contracture involving the hand is one of the most challenging areas to manage for burns therapists. Principles and methods of splinting the hand, from the acute stage of wound healing and throughout scar development to maturation will be presented for management of these burns in children. Outcome data related to the efficacy and safety of splinting in a paediatric cohort will be presented and attendees will have the opportunity to learn how to fabricate splints and design a splinting regime aimed at preventing common hand contractures.

As a result of attending this activity, the learner should be able to:

• Describe the current evidence related to splinting of palmar burns and list important design and safety considerations in splinting this area.

• Design and fabricate a 3-point palmar extension splint for use in paediatric patients, using both POP and thermoplastic materials.

• Prescribe a splinting regime for a palmar burn, using the 3-point palmar extension splint, aimed at preventing contracture while minimising risk of complications.

2:00 pm–2:15 pm  Historical Perspectives – Splinting of the Paediatric Hand Past to Present  Michael Serghiou, OTR, MBA, BT-C; Jonathan Niszczak, MS, OTR/L, BT-C

2:30 pm–2:45 pm  Use of Casting in the Acute Setting to Promote Healing and Prevent Contracture  Trudy Boullier, OTR/L, CHT, BT-C; Claire Toose, BAppSc

2:15 pm–2:30 pm  Application of Dressings to Promote Healing and Prevent Contracture and Small Group Facilitation of Practical Skills  Madeleine Jacques

2:45 pm–3:00 pm  A Retrospective Review of Outcomes Using End of Range Positioning to Manage Burn Scar Contractures to the Palm  Stephanie J. Wicks, BAppSc

3:00 pm–4:00 pm  Small Group Facilitation of Skills

THE YEAR IN REVIEW: THE TOP JOURNAL PUBLICATIONS | F-269
4:15 pm–5:30 pm | Osceola 1-3
Course Director: Tina L. Palmieri, MD

A favorite session among attendees. Editors from each of the top publications in burn care present and discuss major advances in published burn research throughout the past year. Journals represented include: Journal of Burn Care & Research; Wound Repair and Regeneration; Journal of Trauma and Acute Care Surgery; and Burns.

As a result of attending this activity, the learner should be able to:

• Describe new techniques in burn care (surgical/wound care/critical care).

• Discuss what other countries are researching in burn care.

4:15 pm–4:20 pm  Introduction

4:20 pm–4:35 pm  Journal of Burn Care & Research  David Herndon, MD

4:35 pm–4:45 pm  Wound Repair & Regeneration  David G. Greenhalgh, MD

4:45 pm–4:55 pm  Journal of Trauma and Acute Care Surgery  David Harrington, MD

4:55 pm–5:10 pm  Burns  Steven E. Wolf, MD

5:10 pm–5:20 pm  Burns Open  David G. Greenhalgh, MD

5:20 pm–5:30 pm  Questions & Answers

CHANGING PLACES | F-270
4:15 pm–5:30 pm | Osceola 4-6
Course Director: Jason Woods, FF

Today fire fighters are asked to continue adapt to whatever threats pose a life hazard to the communities that they serve. On June 12, 2016 a lone gunman opened fire in the Pulse Nightclub killing 49 people and wounding 53 others before being killed by police. The stresses faced by first responders throughout the course of their careers including incidents involving children, acts of violence, the inherent dangers of firefighting along with other potentially traumatic events can have a cumulative impact on their mental health and well-being. In this year’s Changing Places we will explore the effects that acts of mass violence have on the behavioral health of our nation’s first responders.

As a result of attending this activity, the learner should be able to:

• Discuss the stresses faced by first responders throughout the course of their career.

• Describe the effects of acts of mass violence on the behavioral health of first responders.

4:15 pm–5:30 pm  Panel Discussion  Jeff Orange, FF; Bryan Davis, FF; Jimmy Reyes, FF
**VIDEO SESSION: BURN CARE: HOW I DO IT | F-271**

**4:15 pm–6:00 pm | Osceola A**

Course Directors: Robert Cartotto, MD; Ingrid Parry, MS, PT, BT-C

Burn care providers may approach the same clinical problem using different techniques and strategies. Video is an ideal way to demonstrate a technique and convey information about a specific approach to a clinical problem in burn care. In this session, burn care providers will present a 5-7 minute video recording, of a technique involving care and treatment of a burn patient, using the theme of “How I Do It”. This session will be multidisciplinary in nature and will feature technical descriptions of treatments and interventions provided by many members of the burn team. Each video session will be followed by Q&A and discussion with the audience.

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<tr>
<th>Time</th>
<th>Session Title</th>
<th>Presenter(s)</th>
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<td>4:15 pm–4:25 pm</td>
<td>Demonstration of the Burns Algorithm in Simulation</td>
<td>Konstantinos Gasteratos, MD</td>
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<td>4:25 pm–4:38 pm</td>
<td>Techniques for Optimizing Mobility in the Burn Unit</td>
<td>Lynn Fossen, PT, DPT</td>
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<td>4:38 pm–4:48 pm</td>
<td>Facilitating School Re-entry for International Patients Through the Use of Video</td>
<td>Brent Smith, PhD, LP</td>
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<td>4:48 pm–4:59 pm</td>
<td>Excision and 1:1 Autografting Hand/forearm/foot Burns with Cyanoacrylate Glue Application</td>
<td>Jake Laun, MD</td>
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<td>4:59 pm–5:09 pm</td>
<td>The 3 P’s: Assessment of Burn Wound Viability During Surgical Debridement While Using a Tourniquet or Epinephrine Tumescence</td>
<td>Robert Cartotto, MD</td>
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<td>5:09 pm–5:20 pm</td>
<td>How I Do It: Silver Antimicrobial Foam Dressings for Facial Burns</td>
<td>Kristin Friedl, RN, DNP, AGACNP-BC</td>
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<td>5:20 pm–5:31 pm</td>
<td>Silver Impregnated Vest Dressing for Burn and Exfoliative Wounds</td>
<td>Jake Laun, MD</td>
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<td>5:31 pm–5:40 pm</td>
<td>Pressure Garments: “I’ve Got You Where I Want You, Now I Want to Keep You.”</td>
<td>Michelle Dwertman, MSPT, BT-C</td>
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<td>5:40 pm–5:53 pm</td>
<td>Modernizing the Mechanics of Surgical Excision and Grafting</td>
<td>Peter Grossman, MD</td>
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<td>5:53 pm–6:00 pm</td>
<td>Fiberoptic Intubation Through a Specialized Laryngeal Mask Airway: A Strategy for Managing Difficult Airway in the Major Burn Patient</td>
<td>Bryan Carter, MD</td>
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**SPONSORED SYMPOSIA**

**RECELL® ADVANCED TECHNIQUES – AVITA MEDICAL**

**6:00 pm–7:30 pm | Osceola B**

RECELL® hands-on educational symposia. Learn advanced clinical skills in an interactive session featuring the RECELL System.
TOP 3 SUNRISE SYMPOSIA

6:30 am–7:45 am

S-301 Controversies in the Management of Fluid Resuscitation and Electrolyte Disorders in Burn Patients
Moderators: Todd A. Walroth, PharmD, BCPS, BCCCP; Renata Fabia, MD, PhD; Asia N. Quan, PharmD, BCPS, BCCCP
Captiva

S-302 Inhalation Injury
Moderators: Todd F. Huzar, MD; Kevin K. Chung, MD
Daytona

S-303 It’s All About Teamwork: Nursing and Therapy Collaboration for Optimizing Function with Dressings and Treatment
Moderators: Cassandra O’Rourke, OTR/L, BCP; Trudy Boulter, OTR/L, CHT, BT-C; Emily Eschelbach, BSN, RN
Tampa

BURN FELLOWSHIP BREAKFAST

6:30–7:45 am | Osceola 4
Calling Burn Fellows, Residents and Medical Students interested in a career in burns!

Learn about careers in burns and the paths to get you where you want to be. We will discuss fellowships and the ABA’s plans for a verified fellowship program; the benefits of a career as a burn surgeon; and exciting new and emerging technologies in burn care. Plus, a chance to network with others who share your interests and are making the same career decisions, as well as experienced burn surgeons who can talk about their journey.

PLENARY

TOP 5 ABSTRACTS | P-391

8:00 am–9:30 am | Osceola B
Presented by: Robert Cartotto, MD; Ingrid Parry, MS, PT, BT-C

The correlative sessions run concurrently which encourages attendees to move around and listen to abstract presentations that are most important and relevant to them. Subsequently, attendees don’t have the opportunity to hear all of the presentations and may miss important topics. The top five abstracts, based on the scores of reviewers, will be presented at the Plenary to allow all attendees to hear the highest rated abstracts presented during the meeting.

8:00 am–8:10 am Welcome and Introduction from the Program Chair
Robert Cartotto, MD

8:10 am–8:25 am Top Line Results of the DETECT Enzymatic Debridement Multicenter Randomized Controlled Trial
William Hickerson, MD

8:25 am–8:40 am Safety of Early Post-operative Range of Motion in Burn Patients with Newly Placed Hand Autografts
William Dewey, PT, CHT

8:40 am–8:55 am Randomized, Controlled, Within-patient, Single-blinded Study to Evaluate the Efficacy of Corticosteroid Injections for the Treatment of Hypertrophic Scar in Adult Burn Survivors
Bernadette Nedelec, BScOT(c), PhD, BT-C
**CORRELATIVES**

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<td>Retrospective Review of Burn Resuscitation Outcomes Between 4 mL and 2 mL as a Starting Guide for Parkland Formula</td>
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<td>CORRELATORS: William Norbury, MD; Claudia Malic, MD</td>
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<tr>
<td>105</td>
<td>The Impact of Flap Timing and Mechanism of Injury on Flap Complications in Acute Burn Patients</td>
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<td>106</td>
<td>Heads or Tails? Scalp versus Non-scalp Donor Sites for Split-thickness Skin Grafting of Burns: A Systematic Review and Retrospective Review</td>
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<tr>
<td>107</td>
<td>Esterified Hyaluronic Acid Matrix in Lower Extremity Wound Reconstruction</td>
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<td>108</td>
<td>An Evidence Based Laser Therapy Algorithm for the Treatment of Burn Scars</td>
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<td>109</td>
<td>Vascular Composite Allotransplantation in Burn Reconstruction: Systematic Review and Meta-analysis</td>
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<td>10:00 am–12:00 pm</td>
<td>**CORRELATIVE XV - TRANSLATIONAL SCIENCES: WOUNDS AND SCARS</td>
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<tr>
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<td>110 Self-reported Health Measures in Burn Survivors Undergoing Burn Surgery Following Acute Hospitalization</td>
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<td>111 Predicting Restoration of Joint Function in the Contracted Burned Hand: The Benefit of the Soft Tissue to Skeletal Ratio</td>
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<td>112 Improvements in Burn Hypertrophic Scar After Fractional Ablative Laser Scar Revision</td>
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<td>**BEST IN CATEGORY POSTERS</td>
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<tr>
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<td>114 Galectin-1 Is Overexpressed in Post-Burn Hypertrophic Scar</td>
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<td>116 Short Wave Infrared Light Imaging Distinguishes Superficial from Deep Burns</td>
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<td>117 Light or Dark Pigmentation of Engineered Skin Substitutes Containing Melanocytes Protects Against UV-Induced DNA Damage in Vivo</td>
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<td>118 Comparison of Contact and Scald Burns in a Porcine Model</td>
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<td>119 A Nitric Oxide Releasing Bio-active Wound Dressing for Burn Wound Infection Treatment</td>
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<td>120 Terahertz Spectral Imaging for Burn Depth Determination in an in Vivo Porcine Scald Model</td>
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<td>**CORRELATIVE XVI - PAIN AND PRURITIS</td>
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<td>121 The Opioid Dependence Paradox in Among Patients with Burn Injury</td>
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<td>122 Prevalence and Associated Predictors for Patients Developing Chronic, Neuropathic Pain Following Burns</td>
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<td>123 Burn Patients’ Pain Experiences and Perceptions at a Regional Burn Center</td>
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<td>124 Virtual Reality for Reducing Pain and Perioperative Anxiety in Pediatric Burn Patients</td>
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<td>126 Multimodal Analgesia and Discharge Opioid Requirements in Burn Patients</td>
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<td>127 Does Socioeconomic Status Impact Opioid Requirements in Burn Injured Patients with Methamphetamine Abuse?</td>
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<td>128 The Effects of Acupuncture on Pain on the Burn Service</td>
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<td><strong>LUNCH EDUCATIONAL FORUMS</strong></td>
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<td>**BURN PREVENTION WORKSHOP: FEARLESS BURN PREVENTION MESSAGING: BEST PRACTICES IN DESIGN &amp; DELIVERY</td>
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<td>12:15 pm–1:45 pm</td>
<td>Burn centers, fire departments, and support organizations have unique opportunities to deliver burn prevention messaging to the community. This session will review current prevention messaging best practices, including how to create positive, accurate, and consistent messaging, how to vet programs and materials, and how to adapt your approach to your audience. Other topics of discussion will include eliminating scare tactics and utilizing language that is compatible with low health literacy.</td>
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• Explain how to design evidence-based burn prevention messages for materials and programming.

12:15 pm–12:45 pm  
Best Practices in Prevention Messaging & Delivery  
Stephanie Campbell, MS, RN, CCRN-K; Karla S. Klas, BSN, RN, CCRP; Rebecca Coffey, PhD, MSN, CNP

12:45 pm–1:15 pm  
Tips & Tricks for Real Life Application  
Stephanie Campbell, MS, RN, CCRN-K; Karla S. Klas, BSN, RN, CCRP; Rebecca Coffey, PhD, MSN, CNP

1:15 pm–1:45 pm  
Q&A/Group Discussion  
Stephanie Campbell, MS, RN, CCRN-K; Karla S. Klas, BSN, RN, CCRP; Rebecca Coffey, PhD, MSN, CNP

VERIFICATION REVIEW COMMITTEE UPDATE: THE WHY, HOW AND WHAT OF VERIFICATION | F-362
12:15 pm–1:45 pm | Miami
Course Directors: Sharmila Dissanaike, MD

Verification helps ensure your burn center meets the highest standards of comprehensive burn care, all the way from prevention through acute inpatient care to rehabilitation, outpatient reconstruction, and psychosocial needs. The ABA offers a robust quality benchmarking program that is constantly updated to reflect improvements in all aspects of burn care. This interactive session will allow you to have all your questions answered and help ensure your verification is successful.

As a result of attending this activity, the learner should be able to:
• Explain the benefits of becoming an ABA verified burn center.
• Describe the steps necessary to undertake verification.
• Explain the most important components of a successful verification visit.
• Describe changes in the PRQ format implemented this year.

ABA GLOBAL HEALTH COMMITTEE FOCUS: UPDATE ON BURN CARE IN THE AMERICAS | F-363
12:15 pm–1:45 pm | Osceola 1-3
Course Directors: Michael Peck, MD; James Gallagher, MD

This year for the ABA Global Health Forum we will focus on the activities in the Americas. Burn care professionals from North America as well as from the region will discuss the state of burn care, partnerships, successful programs, burn NGOs to be aware of, and the activities of the Federacion Latino Americana de Quemaduras.

As a result of attending this activity, the learner should be able to:
• Describe the community of burn care in the Americas and outline partnerships, programs, and activities of the local professional organization.
• Define the current activities and opportunities for collaboration between stakeholders to improve care in the Americas.
• Define the elements of collaboration to sustainably improve burn care in the Americas.
• Describe what they believe they and the ABA can do to best partner to improve burn care in the Americas.

LESSONS LEARNED FROM MASS CASUALTY DRILLS - LOCAL OPPORTUNITIES FOR ENGAGING THE MEDICAL COMMUNITY | F-364
12:15 pm–1:45 pm | Osceola A
Course Directors: Laura S. Johnson, MD; Callie M. Thompson, MD

Mass casualty incident (MCI) drills have evolved over the years from tabletop exercises to high fidelity simulations with realistic simulated patients and complex multi-institutional scenarios. Regardless of the format, they can expose educational gaps in the training of our colleagues outside of the burn community. As part of a larger dialogue about the burn community’s responsibility for disaster preparedness, this session will use several recent MCI drills as lead points for an audience response driven multidisciplinary case-based discussion of ongoing opportunities for educating our colleagues in burn care.

As a result of attending this activity, the learner should be able to:
• Recognize common MCI drill deficits in burn scenario development and execution.
• Identify common burn knowledge gaps in non-burn colleagues.
• Describe how to develop a framework to address knowledge gaps in non-burn colleagues through disaster drill creation and execution.

12:15 pm–12:25 pm  
Introduction to Session and Speakers  
Laura S. Johnson, MD

12:25 pm–12:40 pm  
Disaster Drill Creation & Execution  
Laura S. Johnson, MD

12:40 pm–12:55 pm  
Facilitated Small Group Discussions

12:55 pm–1:05 pm  
Opportunities for Collaboration Within Your Institution  
Callie M. Thompson, MD
THE USE AND VALUE OF HEALTH ECONOMICS IN BURN CARE | F-365

12:15 pm–1:45 pm | Osceola B
Course Directors: William L. Hickerson, MD; Narayan Iyer, PhD; Stacey Kowal

This session will provide foundational education on health economics and economic modeling. Directors will review health economics tools and NBR data available for inpatient burn care, with information on how tools can benchmark burn center performance, track patient outcomes and inform value analysis committee evaluations. The session will present recent application of economic modeling and NBR-derived insights in burn care research to: understand the nuanced relationship between patient characteristics and outcomes (LOS, procedures), current treatment patterns, inpatient costs across patient types and unique interventions as well as projected impact of new interventions on burn center resource use and overall costs.

As a result of attending this activity, the learner should be able to:

- Describe health economics and its role in the US healthcare environment.
- Explain the potential uses and benefits from health economics investigations in burn care.
- Evaluate examples of the use of real-world evidence and economic modeling in burn care as they relate to LOS, resource use, new interventions (VAC process), care pathway/procedures, estimating costs/savings.
- Discuss how to utilize health economics as another mechanism for understanding value of new treatments and to support any care/process improvements within their burn centers.

12:15 pm–12:35 pm  Introduction – BARD Vision for Burn Care
Narayan Iyer, PhD

12:35 pm–12:55 pm  Tips to Succeed: Common Mistakes, Solutions and Exceptional Examples
Lisa Forbes, BScOT(c), BT-C

12:55 pm–1:45 pm  My Experience Applying for BT-C - The International Perspective
Stephanie J. Wicks, BAppSc

12:55 pm–1:45 pm  My Experience Applying for BT-C - A Comparison to Other Certifications
Renee Warthman, MS, OTR/L, BT-C

MONITORING NUTRITION IN BURN PATIENTS
F-367

12:15 pm–1:45 pm | Osceola 4-6
Course Directors: Kate Wallace, MS, RD, CNSC; Danielle Toepfer, RD, CNSC

There are many strategies for monitoring nutrition provision for burn patients. This session will review literature on the principles of nutrition monitoring and will share best practices regarding metabolic cart studies and urinary urea nitrogen measurements (UUN).

As a result of attending this activity, the learner should be able to:

- Define metabolic cart studies and UUN measurements.
• Interpret results of metabolic cart studies and UUN to adjust nutrition needs for burn patients.

12:15 pm–1:00 pm  Strategies for Monitoring the Adult Burn Patient Using Indirect Calorimetry and Nitrogen Balance Studies  
Beth A. Shields, MS, RD, LD, CNSC

1:00 pm–1:35 pm  Monitoring Nutrition in the Pediatric Burn Patient  
Terri Capello

### EDUCATIONAL FORUMS

#### OUTCOME MEASURES: CURRENT TRENDS AND APPLICATIONS IN BURN CARE | F-368

2:00 pm–4:00 pm | Osceola B
Course Directors: Lynne Benavides, OTR/L, CHT; Jeffrey C. Schneider, MD; Betsey Ferreira, MSPT

There are many outcome measures utilized in health care. This session will offer the learner information on the trends and application of outcome measures in burn rehabilitation therapy, with focus on relationship of measures to the World Health Organization International Classification of Functioning (ICF) framework, including what qualities constitute a good outcome measure, what are the domains of mobility and hand function; and how outcome measures are used in practice to enhance documentation as well as to demonstrate evidence-based practice.

As a result of attending this activity, the learner should be able to:

• Describe the use of outcome measures in the context of the ICF.
• Discuss the principles of sound outcome measures, including reliability, validity and how to choose the right metric.
• Discuss which outcome measures are most effective for use in burn rehabilitation in areas of impairment, activity, and participation.

2:00 pm–2:20 pm  Intro of the ICF in the Context of Outcomes  
Lynne Benavides, OTR/L, CHT

2:20 pm–2:40 pm  Patient Reported Outcome Measures: How to Evaluate Their Psychometric Properties and Applications in the Real World?  
Lewis Kazis, ScD

2:40 pm–3:00 pm  Mobility Outcome Measurements  
David Lorello, PT, DPT, BT-C

3:00 pm–3:20 pm  Hand Function Outcomes  
Bernadette Nedelec, BScOT(c), PhD, BT-C

3:20 pm–3:40 pm  Review of Activity/participation Outcomes  
Colleen M. Ryan, MD

3:40 pm–4:00 pm  Panel Discussion/ Q&A on How to Utilize Metrics in Practice

### IT’S NOT ALL ABOUT THE PATIENT, WHAT ABOUT THE STAFF? PART III | F-369

2:00 pm–4:00 pm | Miami
Course Directors: Tammy Coffee, RN, MSN, APRN; Robert Smith, PhD

Team work is essential for patient safety as well as staff well-being. This session will review key elements of team development through a series of fun and engaging activities. Each activity will highlight specific skills and strategies to improve communication and team building.

As a result of attending this activity, the learner should be able to:

• Identify the components of a multi-team system that must work together effectively to ensure patient safety.
• Identify tools and strategies that can improve a team’s communication.
• Discuss how situation monitoring affects team processes and outcomes, explain situation awareness, and identify undermining conditions.
• Describe how mutual support affects team processes and outcomes; discuss specific strategies to foster mutual support.

2:00 pm–2:15 pm  Introduction  
Robert Smith, PhD

2:15 pm–2:30 pm  Review of Tools  
Tammy Coffee, RN, MSN, APRN

2:30 pm–2:45 pm  Activities/debrief Tactile Tango  
Robert Smith, PhD; Tammy Coffee, RN, MSN, APRN

2:45 pm–3:00 pm  Activities/debrief Cup Flip  
Robert Smith, PhD; Tammy Coffee, RN, MSN, APRN

3:00 pm–3:15 pm  Activities/debrief Pasta Palace  
Robert Smith, PhD; Tammy Coffee, RN, MSN, APRN

3:15 pm–3:30 pm  Activities/debrief Egg’cellent Transport  
Robert Smith, PhD; Tammy Coffee, RN, MSN, APRN

3:30 pm–3:45 pm  Activities/debrief Trauma Tots  
Robert Smith, PhD; Tammy Coffee, RN, MSN, APRN

3:45 pm–4:00 pm  Summary/Remarks  
Robert Smith, PhD; Tammy Coffee, RN, MSN, APRN
MAC FORUM: EFFECTIVE MEETING STRATEGIES FOR BURN ROUNDS | F-370
2:00 pm–4:00 pm | Osceola 4-6
Course Directors: Vincent Gabriel, MD; Annette Matherly, MS, RN, CCRN; Caran Graves, RD, MS, CNSC

Most burn centers carry out a regularly scheduled meeting to review the current inpatients clinical care and medical needs. In this forum, the learner will review common strategies utilized by burn centers for both bedside rounds and cases presented in multidisciplinary meeting. Effective communication techniques will be discussed along with review of current literature in management and organizational behavior. The role of the nurse as communication manager will be discussed.

As a result of attending this activity, the learner should be able to:
• Discuss methods of planning and carrying out an effective team meeting.
• Compare communication strategies for sharing clinical information.
• Review burn unit team communication strategies and consider areas for evolution.

2:00 pm–2:10 pm Introduction & Poll Question #1
Caran Graves, RD, MS, CNSC; Annette Matherly, MS, RN, CCRN; Vincent Gabriel, MD

2:10 pm–2:20 pm Video: Ross Tilley Burn Team, Sunnybrook Hospital

2:20 pm–2:35 pm Team Rounds
Amalia Cochran, MD

2:35 pm–2:45 pm Video: Arizona Burn Team, Maricopa Integrated Health System

2:45 pm–3:00 pm Communicating Effectively in Team Rounds
J. Bradley Wiggins, RN, BSN

3:00 pm–3:10 pm Video: The Ohio State University Burn Team, Wexner Medical Center

3:10 pm–3:25 pm Creating Non-threatening Environments for Communication
Kimberly Roaten, PhD, CRC

3:25 pm–4:00 pm Poll Question #2 and Panel Discussion
Caran Graves, RD, MS, CNSC; Annette Matherly, MS, RN, CCRN; Vincent Gabriel, MD

CONTROVERSIES IN MODERN BURN CARE: THE PRO/CON DEBATES | F-371
2:00 pm–4:00 pm | Osceola 1-3
Course Directors: Victor C. Joe, MD; Robert Cartotto, MD

Not all therapeutic decisions in burn care are informed by large prospective randomized studies. There are often opposing approaches to the same clinical problem. Burn care providers often disagree about various therapeutic interventions for the burn patient. This session will highlight four controversial areas in burn treatment.

Experts from the burn team will debate four resolutions, defending their stances on a particular care plan or strategy. Audience polling will be used to identify the attendee’s biases before the debate and their positions after the debate to see if the presented arguments change opinions.

As a result of attending this activity, the learner should be able to:
• Identify the advantages and disadvantages of two opposing therapeutic approaches to the same clinical problem.
• Choose the most appropriate evidence-based therapeutic approach to a clinical problem.

2:00 pm–2:15 pm Cultured Epidermal Autografts Should Be Used for Patients with > 70% TBSA Burns to Achieve Optimal Outcomes: Pro
William L. Hickerson, MD

2:15 pm–2:30 pm Cultured Epidermal Autografts Should Be Used for Patients with > 70% TBSA Burns to Achieve Optimal Outcomes: Con
Robert Cartotto, MD

2:30 pm–2:45 pm A Patient over the Age of 70 with > 50% TBSA Burns Should Be Made Comfort Care: Pro
David G. Greenhalgh, MD

2:45 pm–3:00 pm A Patient over the Age of 70 with > 50% TBSA Burns Should Be Made Comfort Care: Con
Angela Gibson, MD, PhD

3:00 pm–3:15 pm Nurse And/or Therapist-driven Protocols Improve Patient Outcomes and Should Be Utilized in the Burn Unit: Pro
Amy Gloger, MSN, RN, CCRN

3:15 pm–3:30 pm Nurse And/or Therapist-driven Protocols Improve Patient Outcomes and Should Be Utilized in the Burn Unit: Con
Amanda P. Bettencourt, PhD, APRN, CCRN-K, ACCNS-P

3:30 pm–3:45 pm Full Thickness Burns That Require Excision to Fat Should Be Temporized (i.e., Staged) with Allograft Prior to Autografting: Pro
Sharmila Dissanaike, MD

3:45 pm–4:00 pm Full Thickness Burns That Require Excision to Fat Should Be Temporized (i.e., Staged) with Allograft Prior to Autografting: Con
Victor C. Joe, MD

SURVIVORSHIP IN DISCHARGE AND AFTERCARE PLANNING: ENGAGING FAMILIES AND BURN SURVIVORS AS BURN TEAM MEMBERS | F-372
2:00 pm–4:00 pm | Orange Blossom Ballroom
Course Directors: Pam Peterson, RN, BSN; Karen Badger, MSW, PhD, LISW-S

Psychosocial burn recovery requires interprofessional team expertise and patient and family inclusion. An early start in aftercare planning can help the team understand
the challenges, worries, strengths, resources, coping skills, goals, and hopes of families and patients assists with building a compassionate understanding of their experiences and assess readiness to plan and discuss reintegration and aftercare needs and resources. Engagement strategies are presented with a specific focus on family experiences as survivors of the burn injury and ways through which they can be supported and empowered to be prepared to assist the burn survivor with aftercare and social reintegration needs.

As a result of attending this activity, the learner should be able to:

• Describe strategies to engage with burn patients and families and build relationships early to assist with individualized aftercare planning.

• Discuss potential challenges and needs families of burn survivors may experience during the burn survivor’s hospitalization and after discharge and identify mechanisms to include them in patient-entered aftercare planning.

• Examine current practice and integrate motivational interviewing strategies to develop compassionate understanding of patient and family experiences, assess strengths and abilities, and identify aftercare support needs.

Providing safe, evidenced based, high quality burn care may be challenging in the complex healthcare environments within which burn centers function, however it is essential that burn professionals undertake quality and safety initiatives to improve patient outcomes. This education forum is an insightful journey into implementing Quality Improvement (QI) in the burn center. It will shine a light from the past to the future on the ABA registry program journey and the newly developed ABA Burn Care Quality Platform and quality programs. It will take a dive into implementation science and human factors to identify strategies and resources to implement successful and sustainable QI changes in the burn center, and finally, this education forum will connect dots and point out differences between traditional research methodologies and QI, and explore the publication of QI work. To produce a masterpiece, QI requires multidisciplinary effort and intellect which focuses on unifying movements or changes with balance and formal discipline. A true Ode to Joy.

As a result of attending this activity, the learner should be able to:

• Describe how to apply new skills and knowledge to develop and implement healthcare improvement projects in burn care.

• Identify models and strategies for disseminating evidence and leading innovation.

• Apply new strategies to engage with stakeholders to conduct improvement.

• Discuss implementation science as a way to help improve burn care.

IMPLEMENTING QUALITY IMPROVEMENT IN THE BURN CENTRE: A SYMPHONY IN FIVE PARTS | F-373

2:00 pm–4:00 pm | Osceola A
Course Directors: Yvonne Singer, RN, BN, PGD, CF; Jamie Heffernan, MSN, RN; Alan D. Rogers, MBChB, MSc, MMed

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• Discuss implementation science as a way to help improve burn care.

2:00 pm–2:05 pm The Prelude: Introduction
Yvonne Singer, RN, BN, PGD, CF

2:05 pm–2:20 pm The Sonata: Previous ABA Registry Programs
Palmer Q. Bessey, MD, MS; David Harrington, MD

2:20 pm–2:50 pm The Adagio: Quality Improvement
Alan D. Rogers, MBChB, MSc, MMed

2:50 pm–3:25 pm The Minuet: Implementing change and QI
Yvonne Singer, RN, BN, PGD, CF; Jamie Heffernan, MSN, RN

3:25 pm–3:50 pm Presto: future ABA Registry Efforts
Palmer Q. Bessey, MD, MS

3:50 pm–4:00 pm Encore: Q&A
Yvonne Singer, RN, BN, PGD, CF; Palmer Q. Bessey, MD, MS; David Harrington, MD; Alan D. Rogers, MBChB, MSc, MMed; Jamie Heffernan, MSN, RN
HAUNTING ETHICAL CASES: APPLICATION OF ETHICAL PRINCIPLES | F-374

2:00 pm–4:00 pm | Sarasota
Course Directors: Callie M. Thompson, MD; Ariel Aballay, MD

Burn injuries present numerous clinical and ethical challenges to all members of the burn team. Challenging ethical cases can haunt burn caregivers for years after the fact. Cases will be presented that raise unique challenges and provide opportunities to discuss how the core ethical principles of beneficence, nonmaleficence, autonomy, and justice should be applied. Exploring the ethical questions these cases raised with uninvolved individuals can provide a new perspective and stimulate thought-provoking discourse.

As a result of attending this activity, the learner should be able to:

• List the four core ethical principles; beneficence, nonmaleficence, autonomy, and justice.

• Consider ethical conundrums in burn care within a basic ethical framework.

• Describe how to develop a practical approach to resolve ethical issues.

• List the ethical resources available in the hospital setting.

2:00 pm–2:10 pm
Haunting Ethical Cases: Ethical Frameworks for Discussion
Callie M. Thompson, MD

2:15 pm–3:30 pm
Round Table Discussion
Ariel Aballay, MD; Monica L. Gerrek, PhD; Todd F. Huzar, MD; Callie M. Thompson, MD; Julie Caffrey, DO; Bradley Rogers; Linda Gibbons, MS, RN, NEA-BC

3:30 pm–4:00 pm
Haunting Ethical Cases: Large Group Discussion, Wrap Up
Ariel Aballay, MD

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To all our amazing ABLS Instructors!

Thank you for your dedication and support to the ABLS Program. We greatly appreciate all you do!
# POSTER SESSIONS

Exhibit Hall – EF

## POSTER SESSION I: ABSTRACTS # 500–670
- Clinical Sciences: Critical Care 1
- Clinical Sciences: Critical Care 2
- Clinical Sciences: Wounds and Scars 1
- Clinical Sciences: Wounds and Scars 2
- Public Health/Epidemiology 1
- Public Health/Epidemiology 2
- Psychological and Psychosocial 1
- Psychological and Psychosocial 2
- Quality Improvement 1
- Quality Improvement 2
- Nursing 1
- Outpatient Care 1
- Prevention 1
- Rehabilitation 1
- Translational Sciences: Critical Care, Wounds and Scars 1
- Translational Sciences: Critical Care, Wounds and Scars 2
- Clinical Sciences: Nutrition and Metabolism

**Poster Set-up (for Wednesday Rounds)**
Tuesday, March 17 | 12:00 pm–2:00 pm

**Poster Viewing Hours**
Tuesday, March 17 | 3:00 pm–7:00 pm
Wednesday, March 18 | 9:30 am–2:00 pm

**Rounds with Professors and Authors**
Wednesday, March 18 | 12:30 pm–1:30 pm

**Poster Dismantle**
Wednesday, March 18 | 2:00 pm–3:00 pm

## POSTER SESSION II: ABSTRACTS # 700–870
- Clinical Sciences: Critical Care 3
- Clinical Sciences: Critical Care 4
- Clinical Sciences: Wounds and Scars 3
- Clinical Sciences: Wounds and Scars 4
- Public Health/Epidemiology 3
- Public Health/Epidemiology 4
- Psychological and Psychosocial 3
- Psychological and Psychosocial 4
- Quality Improvement 3
- Quality Improvement 4
- Nursing 2
- Outpatient Care 2
- Prevention 2
- Rehabilitation 2
- Translational Sciences: Critical Care, Wounds and Scars 3
- Reconstruction
- Pain and Pruritis

**Poster Set-up (for Thursday Rounds)**
Wednesday, March 18 | 3:00 pm–5:00 pm

**Poster Viewing Hours**
Wednesday, March 18 | 4:00 pm–7:00 pm
Thursday, March 19 | 9:30 am–2:00 pm

**Wine & Cheese Reception with Authors**
Wednesday, March 18 | 5:30 pm–7:00 pm

**Rounds with Professors and Authors**
Thursday, March 19 | 12:30 pm–1:30 pm

**Poster Dismantle**
Thursday, March 19 | 2:00 pm–3:00 pm

## BEST IN CATEGORY POSTERS

**Sarasota**
Friday, March 20 | 10:00 am–12:00 pm

**Moderators:** Cynthia L. Reigart, RN, MSN; J. Bradley Wiggins, RN, BS
**Judges:** Robert C. Cartotto, MD; Ingrid Parry, MS, PT, BT-C; Lauren Moffat, PhD; Vincent Gabriel, MD

Best in Category posters will be selected by the poster moderators. All posters with blue ribbons should be left in the exhibition hall. Staff will move them. The Best in Category presentation will be done in the Orange Blossom Ballroom on Friday at 10:00 am using the electronic poster that was submitted. Each presenter will stand at the podium and have 2 minutes to present the overview of the poster. The top three will be selected by the Chairs of the Program, Research, and Membership Advisory Committees.
### POSTER SESSION I: ABSTRACTS # 500-670

**Clinical Sciences: Critical Care 1 | R-121**  
Moderators: Soman Sen, MD; Steven Kahn, MD  
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<tr>
<th>Session</th>
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<td>500</td>
<td>Intracranial Injuries and the Effect of Fluid Resuscitation in Burn Patients</td>
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<td>Burn Center Referral of Patients with Suspected Stevens-Johnson Syndrome (SJS)/Toxic Epidermal Necrolysis (TEN)</td>
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<td>502</td>
<td>Use of Hydrocortisone, Vitamin C, and Thiamine to Treat Burn Sepsis: A Case Series</td>
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<td>503</td>
<td>Cardiac Arrhythmias and Dysfunction in Pediatric Burns</td>
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<td>504</td>
<td>Venous Thromboembolism Chemoprophylaxis in Burn Patients: A Literature Review and Single-institution Experience</td>
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<td>505</td>
<td>Burn Sepsis: Does the Initial Vitamin C Level Matter?</td>
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<td>506</td>
<td>Anticoagulation After Thrombolytic Treatment for Frostbite: A Case Series</td>
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<td>507</td>
<td>Outcomes After the Administration of Hydroxocobalamin</td>
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<td>508</td>
<td>Fungal Infections in Burn Patients from 2014-2019: A 5-year Retrospective Review</td>
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<td>Fungal Infections After Blast and Thermal Injury</td>
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**Clinical Sciences: Critical Care 2 | R-122**  
Moderators: Nicole S. Gibran, MD; Victor C. Joe, MD  
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<td>Incidence of Extubation Failure in a Burn Intensive Care Unit: Examination of Contributing Factors</td>
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<td>Point-of-care 3-dimensional Body Mapping for Determining Total Body Surface Area in Severely Burned Patients</td>
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<td>Single Center Experience with Venous Thromboembolism Prophylaxis for Obese Burn Patients</td>
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<td>Simplified Approach to Incorporating Glycemic Response Within a Continuous Insulin Infusion Algorithm to Improve Incidence of Hypoglycemia in a Single Burn Center</td>
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<td>Post-burn Malnutrition and Associated Cardiomyopathy</td>
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<td>Compliance with a Restrictive Blood Transfusion Strategy: Do We Actually Follow Scientific Evidence?</td>
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<td>Mortality from Inhalation Injury in Oxygen Dependent Patients Exceeds Prediction from Prognostic Models</td>
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<td>ALDEN Based Determination of Culprit Drugs in Stevens-Johnson Syndrome: A 15-year Single Center Review</td>
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<td>Relationship of Microbiome, Antimicrobial Resistance, and Wound Closure in &gt;90% Burn Patients</td>
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<td>Retrospective Pilot Study to Examine Potential Predictors of a Standardized Scoring System for Smoke Inhalation Injury</td>
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**Clinical Sciences: Wounds and Scars 1 | R-123**  
Moderators: David G. Greenhalgh, MD; Alan D. Rogers, MBChB, MSc, MMed  
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<td>Skin Graft Donor-site Morbidity: A Systematic Literature Review</td>
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<td>Silkworm Silk as an Alternative to Two Common Epidermal Substitutes for the Treatment of Acute Superficial Burns</td>
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<td>The Use of Enzymatic Debridement in Large Burns Two Years of Experience</td>
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<td>525</td>
<td>Autologous Skin Cell Suspension May Enhance Healing of Burn Wounds and Skin Graft Donor Sites in Elderly Burn Patients</td>
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<td>Antiseptic Wound Dressings Made of Bacterial Nanocellulose</td>
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<td>527</td>
<td>Eschar Removal by Bromelain Based Enzymatic Debridement in Burns: European Consensus Guidelines Update</td>
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<td>Feasibility and Safety of Enzymatic Debridement for the Prevention of Surgical Escharotomy in Circumferential Deep Burns at the Distal Upper Extremity</td>
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<td>529</td>
<td>Collagen Plus Alginate Wound Dressing for the Treatment of Split-thickness Skin Graft Donor Sites: A Cost-effectiveness Study</td>
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Clinical Sciences: Wounds and Scars 2 | R-124
Moderators: Yuk Ming Liu, MD, MPH; Howard G. Smith, MD

530 Osteomyelitis Increases the Rate of Amputation in Patients with Type 2 Diabetes and Lower Extremity Burns
531 Sex-based Differences in the Skin: Is It Just a Female Problem?
532 Early Debridement and Cultured Allogenic Keratinocyte Dressing Prevent Hypertrophic Scarring in Infants with Deep Dermal Burns
533 Establishment and Effects of a Method for Wound Repair in Patients with Extensive Deep Burns Using Fresh Skin Allografts and Autologous Micrograft
535 Intermediate Skin Substitutes Are Unnecessary in Small ( < 10% TBSA) Burns
536 Road Rash: Understanding a Challenging Form of Burn Injury
537 Transplantation of Fresh Scalp Allograft in Repairing Extensive Deep Burn Wounds in Children
538 Successful Wound Closure in Patients with Large Total Body Surface Area (TBSA) Calciphylaxis with Aggressive Medical and Surgical Therapy

Public Health/Epidemiology 1 | R-125
Moderators: Brett Arnoldo, MD; Amanda P. Bettencourt, PhD, APRN, CCRN-K, ACCNS-P

540 Healthcare Resource Utilization and Costs of Care Among Pediatric Patients with Thermal Burns Undergoing Inpatient Autografting in a Managed Care Population
541 Gender Disparities Among Burn Surgery Leadership
542 Lessons Learned from Implementation and Management of Skin Allograft Banking Programs in Low- and Middle-income Countries: A Systematic Review
543 Acute Carpal Tunnel Syndrome from a Solar Panel Electrical Injury: A Case Report and Literature Review
544 Examining the Characteristics of Eligible Burn Survivors Who Did Not Consent to Participate in a Longitudinal National Database
545 The Association of Plastic Surgery Facility Volume with Inpatient Burn Outcomes
546 Impact of the Affordable Care Act on Burn Outcomes
547 Long-term Outcomes of Chemical Burn Injuries: A Burn Model System National Database Study
548 The Economics of Burn Injuries Among Children Aged 0-4 Years
549 Differences in Treatment of Stevens-johnson Syndrome and Toxic Epidermal Necrolysis at Burn Centers and Non-burn Centers

Public Health/Epidemiology 2 | R-126
Moderators: Vincent Gabriel, MD; Kathe Conlon, BSN, RN, MSHS

550 Real World Treatment Trends for Patients TBSA ≤ 20%: Evaluating Important Shifts in Care and Budget Impact of ASCS Adoption
551 Mixed Methods Assessment of Pediatric Scald Burns
552 Ten Year Mortality Trends in Stevens Johnsons Syndrome and Toxic Epidermal Necrolysis Trends in a Single Burn Center
553 Work-related Burn Injuries Among Burn Patients in a Tertiary Care Burn Facility, 2013 – 2018
554 Severity of Gasoline Burns: A Retrospective Review
555 The Prevalence of Patients with Homelessness or Housing Instability in Patients Admitted to an Urban Burn Intensive Care Unit
556 Hospital Length of Stay for Patients with Small and Medium Burns Impacted by Distance to Burn Center
557 Use of Online Clinical Guidelines for Burn Care in the Deployed Environment: A Model for Care in Rural or Remote Locations
558 Relationship Between Patient Characteristics and Number of Procedures as Well as Length of Stay for Patients Surviving Severe Burn Injuries: Analysis of the American Burn Association National Burn Repository
559 Seasonal Variation in Hospitalizations for Burn Injuries
Psychological and Psychosocial 1 | R-127
Moderators: Mikki Rothbauer, MSW, LICSW; Radha K. Holavanahalli, PhD

560  So Much More Than Just a Good Time: A Qualitative Look at a Burn Camp Experience
561  Impact of Support Group for Teen Burn Survivors
562  “A Long process:” a Qualitative Analysis of Burn Survivors’ Treatment and Recovery Process
563  Therapy Dog Visits in a Burn Unit: The Positive Effects on Patients and Staff
564  Use of the Pediatric Quality of Life Measure in the Burn Camps Population
565  Suicidality After Burn Injuries: A Systematic Review
566  Representation and Consequences of Guilt in Parents of Young Children with Unintentional Burns
567  A Qualitative Exploration of Social Workers as Members of Burn Care Teams
568  Appearance Related Concerns Among Pediatric Burn Patients

Psychological and Psychosocial 2 | R-128
Moderators: Kristen C. Quinn, CMHC; Pam Peterson, RN, BSN

570  Who Benefits the Most from Burn Camps?
571  Perspectives on Research Participation Feedback: Results from Burn Survivor Focus Groups
572  Examination of Gender Differences in Return to School and PROMIS-25® Outcomes for Pediatric Burn Survivors
573  Frequency of Burn Injuries in Children with Autism Spectrum Disorders and Attention Deficit/hyperactivity Disorder and Implications on Treatment Compliance
574  Assessment of the Relationship Between Mental Illness and Inpatient Length of Stay
575  Determining Risk Factors Associated with Development of Depression Following Burn Injury
576  Firefighter Post-injury Return to Work: A Balance of Dedication and Obligation
577  The Intersection Between Burns and Psychiatric Disorders
578  Childhood Burn Injuries: The Parent Perspective

Quality Improvement 1 | R-129
Moderators: Richard B. Lou, MD; Kathleen Hollowed, RN, MSN

580  Factors Affecting Research Productivity of Burn Surgeons: Results from a Survey of American Burn Association Members
581  Basecamp: Burn Efficiency Care Pathway
582  Bridging the Gap Between Inpatient and Outpatient Burn Care Compliance: Incentive Programs for Pediatric Burn Patients
583  Impacting the Length of Stay of Burn Patients in the Emergency Department
584  Maintaining Success in Patient Safety and Quality Metrics Through Teamwork and Contextual Modification
585  Preventing Occipital Pressure Injuries in Patients Admitted to the Burn ICU
586  Scalp Burn Injury Associated with Hair Highlight Treatment
587  DVT Screening in Lower Extremity Burns
588  Defining Components of a Professional Practice Model (PPM) That Drives Growth and Promotes Cultural Change in a Large Regional Referral Burn Center
589  Enhancing Care Providers’ CAUTI (Catheter-associated Urinary Tract Infection) Knowledge, Skills and Attitudes in the Burn Intensive Care Unit (BICU) and Burn Special Care (BSC) Environments

Quality Improvement 2 | R-130
Moderators: Palmer Q. Bessey, MD, MS; Nicole O. Bernal, MD

590  Is There a Burn Center Community Standard on How to Best Manage Pediatric Burn Patients?
591  Cost Savings in Operative Burn Care
592  Prevention of CAUTIs in a Burn ICU
Poster Sessions

593  Ambient Room Temperature in a Burn Intensive Care Unit - A Quality Improvement Project
594  Improving the Accuracy of Discharge Wound Care Instructions in a Teaching Facility
595  Mapping the Literature of Burns and Ethics
596  ICU Sedation Practices for Mechanically Ventilated Burn Patients Following Guideline Implementation
597  Opioid-limiting Mandate Did Not Increase Readmissions for a Single Burn Center
598  Protection Against Thermal Stress in Humans: Application of “Cooling Wear” Under Heated Conditions in Burn Centers
599  Critical Burn Injury in Young Children: A New Challenge of Success

Nursing 1 | R-131
Moderators: Sarah Bernardy, RN, BSN, CCRN; Angela Rabbitts, MS, RN
600  Nursing Standard of Practice: Assessment & Assistance with Bedside Escharotomy
601  A Simple Dressing for Prevention of Central Line Infections in Pediatric Burn Patients
602  Managing Hypothermia in the Surgical Burn Patient
603  Fluid Considerations: Enhancing Burn Nurse Competency
604  Comparing Disinfection of Different Dosages of Vaporized Hydrogen Peroxide in Burn Ward
605  Integrative Nursing for Burn Patients: Necessity for Bridging Gaps in Spiritual Care
606  Establishing a Deep Sedation Program: Challenges and Successes from a Nursing Management Perspective
607  Reducing Burnout Related to Night Shift Calls to Physicians – a Process Improvement Project
608  The Impact of a Nurse Morbidity and Mortality Meeting
609  Development and Implementation of the Burn Nurse Mentor Role

Outpatient Care 1 | R-132
Moderators: Karen J. Kowalske, MD; Derek O. Murray, N/A, PT, BT-C
610  Small Pediatric Burns Can Be Safely Managed on an Outpatient Basis
611  Screening Adults for Depression and Suicidality in an Outpatient Burn Center
612  Assessing the Impact of Burns on Children Aged 5-18 Years: A Narrative Review of Health Outcomes Literature
613  Thriving During Development of a Large, Advanced Burn and Wound Clinic - The Realization of Successful Change Management
614  Staff Nurse Retention in a Growing Advanced Burn and Wound Clinic Through Implementing a Hiring Best Practice: Peer Interview as a Successful Change Process Managerial Approach
615  Bacterial Nanocellulose as Cooling Agent
616  Quantification of Nutritional Intakes in Burn Outpatients
617  Changing Onboarding to Increase Retention

Prevention 1 | R-133
Moderators: Dan Dillard; Karla S. Klas, BSN, RN, CCRP
620  Impacting Teen Parents with Early Education for Burn and Fire Prevention
621  Successfully Advocating to Make Microwave Ovens “child-resistant” to Protect Young Children from Severe Scalds
622  Seasonal Impact on Burn Admissions in a Desert Burn Unit
623  The Benefits of Burn Awareness Week in a Large Metro Area Hospital
624  Car Seat Heater Burns: A Case Report Intended to Raise Awareness
625  Death Due to Fractal Wood Burning: An Emerging Public Health Problem
626  Causes and Injury Patterns of Elderly Burn Patients

Rehabilitation 1 | R-134
Moderators: Miranda Yelvington, MS, OTR/L, BT-C, BCPR; Matthew Godleski, MD

630 Fear Avoidance Beliefs and Behaviours of Burn Survivors: A Mixed Methods Approach
631 Mobilization of Patient with Inhalation Burn Injury Requiring VV ECMO: A Case Study
632 Heterotopic Ossification Related Contractures: Success with Bodyweight Stretches
633 ‘Living Well’ After Burn Injury: Using Case Report Mapping to Illustrate Life Changing Contributions from the burn Model System Research Program
634 Use and Benefits of Using Acrylic Splints Inside the Pressotherapy Glove in Pediatric Burned Hands, Six Years Retrospective Review
635 Compression Garments with Silicone Improve Hypertrophic Scars Compared to Compression Garments Alone: A Retrospective Study
636 Case Report on Continuous Passive Motion (CPM) Therapy on Hand Burns in a Patient with a Large Total Body Surface Area (TBSA) Burn
637 Disparities in Discharge Disposition: A Burn Model Systems National Database Study
638 Auricular Splinting Following Severe Facial Burn Injury and Reconstruction
639 Face Masks - The Negative Impression Makes a Positive Impact

Translational Sciences: Critical Care, Wounds and Scars 1 | R-135
Moderators: Charles Wade, PhD; John T. Schulz, MD, PhD

640 Mussel-inspired Polydopamine-assisted Bromelain Immobilization onto Electrospun Fibrous Membrane for Potential Application as Wound Dressing
641 Insulin Inhibits NLRP3 Inflammasome via Inducing Autophagy During Diabetic Wound Healing
642 The Use of Laser Speckle Contrast Imaging in Assessing Depth and Progression of Burn Wounds
643 The Use of Topical Exogenous Nutrient Supplementation to Improve Graft Take on an Avascular Wound Bed
644 Enzymatic Debridement of Porcine Burn Wounds via a Novel Protease, SN514
645 Topical Application of a Novel Powdered Scaffold for Rapid Treatment of Skin Injuries
646 Impact of Inflammation on Wound Healing
647 Development of a Cerium (III) Nitrate-containing Electrospun Dressing for Mitigating Delayed Eschar Removal
648 Direct Comparison of Fractional Carbon Dioxide Lasers Systems: Ablative Well Properties and Healing

Translational Sciences: Critical Care, Wounds and Scars 2 | R-136
Moderators: Rajan Thakkar, MD; Dorothy M. Supp, PhD

650 Exploring the Mechanism of Wound Healing in Rats of Different Ages Using a Burn Model
651 NLRP3 Activation Induced by Neutrophil Extracellular Traps Sustains Inflammatory Response in the Diabetic Wound
652 Topical Delivery of Fidgetin-Like 2 siRNA to Enhance Cell Migration for Burn Wound Healing in a Swine Model
653 Capillary Suction Device-a Novel Approach to Negative Pressure Wound Therapy
654 Investigation of Germ Patency of a Polylactic Acid-based Membrane for the Treatment of Burns
656 Inter- and Intra-user Reliability of Skin Graft Thickness as a Function of Instrument
657 Preliminary Study on the Effect of Various Antimicrobial Formulations Containing Silver Oxynitrate on Reducing Pseudomonas Aeruginosa Using an in-vivo Porcine Burn Wound Model

Clinical Sciences: Nutrition and Metabolism | R-137
Moderators: Elizabeth Lu, RD, LD; Kate Wallace, MS, RD, CNSC

660 Prevalence, Risk Factors, and Clinical Consequence of Enteral Feeding Intolerance in the Critically Ill: An Analysis of a Multicenter, Multi-year Database
661 Dietitian Order-writing in a Burn Intensive Care Unit
662 Clinical Outcomes from Prospective Randomized Trials on the Proportion of Carbohydrates versus Fat in
Poster Sessions

**Posters**

**Poster Session II: Abstracts #368-528**

**Clinical Sciences: Critical Care 3 | R-221**

Moderators: Amalia Cochran, MD; Kevin K. Chung, MD

- A Comparison of Pediatric Burn Injuries Based on Cultural Environment
- Outcome Evaluation of High Dose Ascorbic Acid Infusion in Adult Burn Patients
- Acute Burn Treatment and Mechanical Ventilation
- Evaluating the Risk Factors and the Time-course of High Intraocular Pressures in Severely Burned Patients
- Lessons Learned from a Mass Disaster: Successful Institutional Planning and Preparedness
- Evaluation of Burn Resuscitation Practices at a Large Burn Center
- Frostbite and Drugs of Abuse: Friend or Foe?
- Factors Associated with Early vs. Late AKI in Burn Patients
- Enteral Nutrition Initiation During Periods of Vasopressor Requirements and Elevated Lactate Levels
- 24 Hour Patterns of Vital Signs as Predictors of Blood Infection in Pediatric Burn Patients

**Clinical Sciences: Critical Care 4 | R-222**

Moderators: William L. Hickerson, MD; Anthony J. Baldea, MD

- Use of Airway Pressure Relief Ventilation (APRV) in Burn Patients with and Without Inhalation Injury
- A Retrospective Review of Enoxaparin Dosing Practices in Burn Patients
- Title: Monitored Anesthesia Care (MAC) Burn Dressing Changes Even in Critically Ill Patients Is Incredibly Safe
- Delayed Spinal Cord Injury from Electrical Burns: Case Reports
- IL-6 and Soluble IL-6 Receptor – Two Sides of the Same Coin
- Early Ambulation for Enhanced Recovery After Burn Surgery: A Systematic Review and Meta-analysis
- Increased Mortality in Burn Center Admissions with Stenotrophomonas Maltophilia
- Using the VDR to Safely Transport Critically Ill Burn Patients to the OR

**Clinical Sciences: Wounds and Scars 3 | R-223**

Moderators: Tina L. Palmieri, MD; Joshua S. Carson, MD

- Scalds and Contact Burns: Are They Really Different?
- Treatment of Hypertrophic Burn and Wound Scars Using a Novel Cold Laser System
- An Experience with a Biodegradable Temporizing Matrix in a Metropolitan Burn Center
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<td><strong>Moderators: Tam N. Pham, MD; Sebastian Q. Vrouwe, MD</strong></td>
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<td>**Public Health/Epidemiology 3</td>
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<td><strong>Moderators: Claudia Malic, MD; Jody Rood, RN, BSN</strong></td>
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Poster Sessions

Quality Improvement 4 | R-230
Moderators: Julie Caffrey, DO; Jack Rasmussen, MD
790 Venous Thromboembolism Prophylaxis in Burn Patients: Analyzing the Effectiveness of a Standardized Protocol
791 Institutional Experience Using a Treatment Algorithm for Electrical Injury
792 A Retrospective Review of the Utilization of Burn Admission Criteria
793 Development and Validation of a Burn Center Discharge Readiness Checklist to Identify Patients at High Risk of 30 Day Readmission
794 Assessment of Nursing Knowledge and Preparedness for Nuclear Disaster
795 Factors Associated with Time to Initial Debridement in a Pediatric Burn Center
796 Use of a Synthetic Matrix Instead of Allograft for Temporizing a Major Burn
797 Estimated Blood Loss in Burns: A Quality Metric That Defies Measurement?
798 Introduction of Bedside Echocardiography by Mid-level Providers into Burn Intensive Care
799 Free Transportation for Socioeconomically Disadvantaged Burn Patients: Quality Improvement Project

Nursing 2 | R-231
Moderators: Kathleen Hollowed, RN, MSN; Annemarie O’Connor, MSN, APRN, FNP-BC
800 Incorporating Medical Simulation into Nursing Burn Competencies: Adding a New Degree of Realism to the Nursing Burn Competency Experience
801 Improving Pain HCAHPS in the Burn Population
802 Increasing Collaboration and Communication in Burn Resuscitations Through Education and Simulation
803 Utilizing the Revised Baux Score as a Trigger for Advanced Care Planning with the Palliative Care Team
804 Successful Implementation of Acupuncture for Hospitalized Burn Patients
805 A Retrospective Review of Factors Influencing Post-hospital Discharge Follow-up in Patients with Burn Injuries and Necrotizing Soft Tissue Infections
806 Hip Hip Heels Raised: A Pressure Injury Prevention Initiative
807 Implementation of an Evidence-based Wound Care Process at a Regional Burn Center Reduces Hospital Acquired Infections
808 Utilizing High Fidelity Simulation in Advanced Burn Life Support Scenarios
809 Culture Change in the Burn Unit: A Comprehensive Pressure Injury Reduction Strategy

Outpatient Care 2 | R-232
Moderators: Lynne Benavides, OTR/L, CHT; Philip Chang, MD
810 Routine Psychosocial Screening and Follow-up of Adult Burn Patients in an Outpatient Clinic
811 Comparison of an Enzymatic Debrider with Antibiotic Ointment in the Outpatient Care of Minor Partial Thickness Burns
812 Standardization of Burn Pain Control in the Outpatient Burn Population
813 Burn Care in the Patient’s Home: Development of a Secure HIPPA Compliant Process to Share Photographs with the Provider
814 Do Patients Receive Reliable Outpatient Occupational Therapy After Hand Burns
815 Outpatient Opioid Use in Burn Injuries Following Hospital Discharge: A Single Institution Evaluation
816 Geographic Analysis of the Outpatient Burn Population of an Urban Burn Center
817 A Proactive Feeding Regimen on Meeting Caloric Goals with Continuous Enteral Nutrition Support: A Quality Improvement Project
818 A Themed Approach to Decreasing CAUTI
Prevention 2 | R-233
Moderators: Stephanie Campbell, MS, RN, CCRN-K; Bruce Friedman, MD

820 Transgender Patients with Assault by Burn
821 Burn Injury Prevention: A New Focus on the Older Population
822 Smoking on Home Oxygen and Burn Related Injuries: a Single Center Experience
823 Airbag Burns: An Unnecessary Consequence of Motor Vehicle Safety
824 Burn Strong Initiative: A Burn Center's Response to Fire Department Needs
825 Electrical Injuries as a Result of Solar Panels: A New Trend
826 Geographic Mapping to Target Adult Burn Prevention for an Urban Burn Center

Rehabilitation 2 | R-234
Moderators: Bernadette Nedelec, BScOT(c), PhD, BT-C; David Lorello, PT, DPT, BT-C

830 Voice Activated Tool: A Successful Assistance for Patients with Limited Hand Function
831 Optimal Timing for Range of Motion to Upper Extremities Following Split Thickness Skin Autografting: A Five Year Retrospective Review
832 Trends for Treatment of Complex Hand Burns in the Acute Setting
833 The Importance of Trajectory Curves for the Implementation of Outcome Benchmarks in a Clinical Setting
834 Early Ambulation Initiative Following LE Grafts in Comparison to Our Center's Traditional Standard of Care: A Retrospective Data Review
835 Annual Burn Competencies for Burn Therapist: Maximizing Patient Outcomes with Ongoing Education
836 Custom Fabricated Open Anterior Ankle Foot Orthosis to Promote Early Mobility with Lower Extremity Grafts
837 Clinical Experience Using Functional Outcome Measures in the Outpatient Burn Center
838 An Economical Alternative to Static Progressive Splinting of the Elbow
839 Early Ambulation After a Lower Limb Burn Is Associated with Reduced Length of Stay: A Quantitative Longitudinal Study

Translational Sciences: Critical Care, Wounds and Scars 3 | R-235
Moderators: Kuzhali Muthumalaiappan, PhD; Lauren T. Moffatt, PhD

840 Myostatin Deficiency Inhibits Muscle Wasting and Improves Bacterial Clearance and Survival in Septic Mice
841 Fractional CO2 Laser Increases in Vitro Intradermal Delivery of Vitamins in Human Skin
842 A Novel Polyurethane-based Composite Cultured Skin and a Bespoke Bioreactor in a Porcine Wound Model
843 A Study on Changes of Pancreatic Structure and Function After Severe Burns and Its Mechanism
844 The alpha-7 Nicotinic Acetylcholine Receptor Mediates a Uniquely Human Response to Burn Injury
845 Serum S100 Calcium-binding Protein B (S100B) Is Elevated in Severe Burn
846 Effects of Ceragenins on Pseudomonas Aeruginosa Biofilm Formation in Burn Wounds in a Porcine Model

Reconstruction | R-236
Moderators: C. Scott Hultman, MD, MBA; Edward Tredget, MD

851 Hidradenitis Suppurativa: Our Institutional Experience over the Last 6 Months with Improved Definitive Management and Quality of Life
852 A Novel Approach to Treating Minor Burn Scar Contractures in Children Using Laser Surgical Cuts
853 Microblading in Patients with Facial Burn Injuries
854 Modified Millard Forked-flap for Complete Nasal Stenosis After Smoking While on Home Oxygen
855 Reconstruction of Severe Burns to the Breast in Pediatric Patients: A Ten-year Experience
856 A Pilot Study of a Point-of-care Wound Bed Assay to Predict Graft Take
857 Reconstruction of the Pediatric Upper Extremity Following High Voltage Electrical Burn Injury
Pain and Pruritus | R-237
Moderators: Jennifer Brandt, PharmD; Todd A. Walroth, PharmD, BCPS, BCCCP

860 Impact of Orally Administered Tramadol Combined with Self-selected Music on Adult Outpatients with Burns Undergoing Dressing Change: A Randomized Controlled Trial

861 Analgesia After Burns: A Case Series and Development of a Multimodal Analgesic Enhanced Recovery Pathway

862 Challenges and Lessons Learned from Opioid Pharmacogenetic Studies in Burn Patients

863 Drug Addiction and Opioid Use in the Acute Burn Patient

864 Perioperative Multimodal Analgesia Reduces Opioid Use Following Skin Grafting in Burn Patients

865 Assessing Opioid Administration in Pediatric Burn Patients with Nonsurgical Management

866 Meeting the Challenge of Analgesia in a Pregnant Woman with Burn Injury Using Subanesthetic Ketamine: A Case Report

867 The Effect of Financial Reward on Opioid Use After Thermal Injury to the Upper Extremity

868 Guideline for Discharge Opioid Prescription Management in Adult and Pediatric Burn Patients

869 Opioid Utilization in Pediatric Burn Patients

Poster Sessions

Congratulations to the 2020 ABA Leadership Awardees

ABA LIFETIME ACHIEVEMENT AWARD
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Weill Cornell Medical College,
New York Presbyterian Hospital
New York, NY

HARVEY STUART ALLEN DISTINGUISHED SERVICE AWARD
J.A. Jeevendra Martyn, MD, FRCA, FCCM
Shriners Hospitals for Children
Boston, MA

ABA SPECIAL ACHIEVEMENT AWARD
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University of Washington Medicine
Regional Burn Center
Seattle, WA

JOHN A. MONCRIEF AWARD
San Jose Firefighters Burn Foundation
San Jose, CA

ABA BURN PREVENTION AWARD
Rebecca A. Coffey, PhD, MSN, CNP
The Ohio State University
Wexner Medical Center
Columbus, OH

BARBARA KNOTHE BURN THERAPIST ACHIEVEMENT AWARD
Elizabeth Rivers, OT, RN
(posthumously)
Regions Burn Center
St. Paul, MN

CURTIS P. ARTZ DISTINGUISHED SERVICE AWARD
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University of Alberta
Edmonton, AB
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AMERICAN BURN ASSOCIATION
53RD ANNUAL MEETING
CHICAGO
APRIL 6-9, 2021
Best Hemostasis & Wound Healing
Product for Wound Care
Magnitude time and cost savings validated by world class surgeons from Level 1 & 2 burn and trauma centers

- Rapid hemostasis & healing for burn & trauma surgery
- Upon contacting blood, turns into a gel to seal & protect the wound
- Water soluble for easy removal by irrigation, leaves no residue behind
- 100% natural, no animal-derived, foreign human or added chemical materials
- Very cost effective

Power to Control Bleeding
Power to Heal

BEST-IN-CATEGORY-IV WINNER
in Burn Surgery at 2019 ABA Annual Meeting
Visit us at booth #627

Hemostasis

<table>
<thead>
<tr>
<th>40% TBSA DPT/FT¹ Burn</th>
<th>TIME</th>
<th>COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donor Site</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BloodSTOP® IX</td>
<td>5-10 mins</td>
<td>$250</td>
</tr>
<tr>
<td>Traditional Treatment²</td>
<td>1-2 hours</td>
<td>$2,500</td>
</tr>
<tr>
<td>Skin Graft Site</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BloodSTOP® IX</td>
<td>10-15 mins</td>
<td>$20,500</td>
</tr>
<tr>
<td>Traditional Treatment²</td>
<td>2 hours</td>
<td>$190,000</td>
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</table>

Healing

<table>
<thead>
<tr>
<th>Donor Site</th>
<th>TIME</th>
<th>COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>BloodSTOP® IX</td>
<td>7 days</td>
<td>$500</td>
</tr>
<tr>
<td>Traditional Treatment²</td>
<td>28 days</td>
<td>$25,000</td>
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</table>

<table>
<thead>
<tr>
<th>Skin Graft Site – Total Stay</th>
<th>TIME</th>
<th>COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>BloodSTOP® IX</td>
<td>21 days</td>
<td>$109,668</td>
</tr>
<tr>
<td>Traditional Treatment²</td>
<td>59.4 days</td>
<td>$791,687</td>
</tr>
</tbody>
</table>

1. TBSA: Total body surface area; DPT: Deep partial thickness; FT: Full thickness
2. Traditional treatment usually consists of: petroleum dressing for donor site healing; epi-
   coiled collagen & silica based compression dressing, suture ligation, and electrocautery
   for hemostasis of DPT/FT burn; dermal substitutes, silver products, and anti-microbial for
   healing of DPT/FT burn.

Without BloodSTOP® IX, covered by second dressing, bleeding stopped

BloodSTOP® IX covered by second dressing, still oozing

Left: (A) Intraoperative application of BloodSTOP® IX onto donor site post harvest
(B) Dressing takedown 7 days post intervention, healed

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