

Updates on Neonatal Sepsis

Clinical Report Update: Management of Neonates >35 weeks with Suspected/Proven Early-Onset Bacterial Sepsis

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Lunch & Learn: May 30, 2019

12:30-13:30

*Frio Regional Hospital,
Conference Room*

Employees register with Cassandra Onofre @ cassandra.onofre@myfrh.com

Non-employees visit www.methodistpedioutreach.com and register as instructed. Questions? Call 210-575-7550.

FREE! Lunch Provided!

Objectives:

- 🍉 Discuss maternal risk factors associated with early onset neonatal sepsis in infants born at or greater than 35 weeks gestation,
- 🍉 Identify appropriate antibiotic therapy,
- 🍉 Recognize when additional lab testing and extended antibiotic therapy is needed,
- 🍉 Describe multiple approaches to management of neonatal sepsis,
- 🍉 Recognize the association between maternal risk factors and the potential for early-onset sepsis in the late preterm and term infant,
- 🍉 Identify the most common risk factors of early-onset neonatal sepsis,
- 🍉 Recognize antibiotic treatment as appropriate based on maternal risk factors, lab values, and clinical presentation of the infant, and
- 🍉 Recognize when a lumbar puncture may be necessary.

PHYSICIAN ACCREDITATION STATEMENTS:

UNT Health Science Center is accredited by the American Osteopathic Association to award continuing medical education to physicians.

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of UNT Health Science Center INCEDO and Methodist Children's Hospital. UNT Health Science Center is accredited by the ACCME to provide continuing medical education for physicians.

PHYSICIAN CREDIT DESIGNATION:

UNT Health Science Center has requested that the AOA Council on Continuing Medical Education approve this program for 1 hours of AOA Category 2A CME credits. Approval is currently pending. UNT Health Science Center designates this live activity for a maximum of 1 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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