Conference Presentation Summaries

Thursday

8:00 – 8:55am

Don't Miss It: Early Recognition and Diagnosis of Acute Leukemia in Clinical Practice

Presented by: Jennie Goble, DMSc, P.A.-C., M.S.

Presentation Description

Acute leukemia is a hematologic emergency that can rapidly progress without prompt diagnosis and treatment. Its initial presentation can be mistaken for common conditions, placing physician assistants at the frontline of detection. This presentation focuses specifically on the recognition and diagnostic evaluation of acute leukemias (AML and ALL). Participants will learn how to identify concerning clinical patterns, interpret key laboratory abnormalities, and initiate an appropriate and timely workup. Emphasis is placed on recognizing red flags that require urgent referral and preventing delays in care. Case-based discussions will reinforce practical decision-making relevant to PA practice.

Presentation Objectives

- Recognize the clinical presentation of acute leukemia.
- Interpret laboratory findings concerning for acute leukemia.
- Define initial diagnostic and management approach to suspected acute leukemia.
- Identify criteria for urgent escalation of care.

Presenter Bio

Jennie Goble is a Physician Assistant in the Division of Hematology at Mayo Clinic in Rochester, MN. She is also Clinical Co-Director of Development for the Mayo Clinic PA Program. She is an Assistant Professor in the College of Medicine and has a Doctorate in Medical Sciences with an Emphasis in PA Education. Jennie has been a Physician Assistant in Hematology for 16 years and has practiced in both the inpatient and hospital outpatient settings. She is a fellow member of the Academy of Educational Excellence. She speaks regionally and nationally on hematology topics. Clinical interests include acute leukemia, CAR-T, and cancer supportive care. Her passions are high quality patient care, NPPA education, and fast cars.

Irritable Bowel Syndrome: Confidently Diagnose and Manage IBS in the Primary Care Setting

Presented by: Diana Soran, DMSc, PA-C

Presentation Description

Does your stomach get uneasy when you see a patient with chronic gut issues added to your schedule? This presentation will provide clear and specific guidelines on how to diagnose and manage irritable bowel syndrome in the primary care clinic. The presentation includes details on when to do further testing or refer for specialty management. This will help clinicians feel confident when the next IBS patient arrives at the clinic.

Presentation Objectives

- Appreciate the impact IBS has on our patients' lives.
- Understand how to properly diagnose IBS and ensure other pathologies have been appropriately considered.
- Review treatment options for IBS.
- Understand when to refer for specialty management.

Presenter Bio

Diana Soran, DMSc, PA-C, brings over a decade of clinical experience to her passion for gastroenterology. After starting her career in specialized GI, she transitioned to primary care, where she maintains a heavy GI focus in her current practice, frequently managing complex IBS referrals. Beyond the clinic, Diana is the Program Director for Augsburg University's Doctor of Medical Science (DMSc) program, which launched in the fall of 2025. As a faculty member, she loves helping practicing PAs elevate their careers and engaging in research and quality improvement work, including a project on feedback and AI being presented as a workshop at this fall's MAPA conference.

9:00 – 9:55am

Common Spine Disorders and When to Refer

Presented by: Mila Larkin, PA-C

Presentation Description

Spine disorders are among the most common reasons for outpatient evaluation, yet determining when surgical referral is appropriate can be challenging. This case-based presentation will review common clinical scenarios including radiculopathy, neurogenic claudication, axial back pain and urgent spinal pathology. Real-world cases will be used to highlight key history, examination and imaging findings that guide decision-making and distinguish patients appropriate for continued conservative management from those requiring surgical evaluation.

Presentation Objectives

- Common spine disorder clinical presentations, imaging, and diagnosis.
- Understanding spine disorders and conservative management.
- When to refer and basics of surgical intervention.

Presenter Bio

Mila Larkin is a Physician Assistant specializing in spine surgery with 12 years of experience in the evaluation and management of spine disorders. She received her Master's degree in Physician Assistant Studies from Marquette University in Milwaukee, Wisconsin and subsequently joined the Twin Cities Spine Center, where she continues to practice today. She began her career as a surgical PA, assisting in the operating room and seeing patients in clinic. She also provided inpatient care through hospital rounding and call responsibilities which expanded her exposure to acute spine conditions and perioperative management. She gained extensive experience managing patients across the full spectrum of spine care, from nonoperative management through surgery and beyond. She currently serves as the Advanced Practice Provider Manager at Twin Cities Spine Center. In this role, she supports the APP team, works closely with all TC Spine surgeons, and collaborates operationally within the practice as well as across the healthcare system. She continues to see patients in clinic and assist in the operating room, staying actively engaged with evolving techniques and innovation in spine care. Her professional interests include patient education, care delivery optimization and lifelong learning.

10:00 – 10:55am

Refer or Reassure: Clearing, Catching, and Calming Fears in Pediatric Sports Clearance

Presented by: Tobias Donlon, MD

Presentation Description

Sudden cardiac arrest (SCA) is a rare but catastrophic event in youth sports. While some athletes are completely asymptomatic prior to an event, many have subtle "red-flag" history or physical exam findings that can be caught in the primary care setting. As the first line of defense, frontline clinicians are uniquely positioned to protect these young athletes. This high-yield session is designed to help clinicians confidently distinguish between true cardiac red flags and benign "mimickers." Led by a pediatric cardiologist with a specialized focus in sports and exercise cardiology, this presentation moves away from "defensive medicine" towards evidence-based, actionable screening strategies. Attendees will learn to expertly dissect patient and family histories to accurately identify the athletes at elevated risk. Ultimately, this session provides a framework to safely clear the vast majority of healthy children, while precisely targeting the rare athlete who requires specialist referral, all while minimizing costly, anxiety-inducing screening tests.

Presentation Objectives

- Recognize the clinical presentation of the most common causes of sudden cardiac death in pediatric athletes.
- Differentiate between high-risk "red-flag" and benign symptoms in pediatric athletes.
- Formulate a straightforward, guideline-based "clear vs. refer" algorithm for pre-participation sports physicals.

Presenter Bio

Dr. Tobias Donlon is a pediatric cardiologist at MHealth Fairview with a dedicated focus on pediatric sports and exercise cardiology. Backed by a certificate in sports cardiology, he is currently establishing a pediatric-specific cardiac rehab program and a specialized sports cardiology clinic. Dr. Donlon's professional interests also include medical education and championing diversity, equity, and inclusion (DEI) initiatives within pediatric healthcare.

11:00 – 11:55am

Update from NCCPA: Focus on the PANRE/PANRE-LA

Presented by: Alicia Quella, PhD, PA-C

Presentation Description

NCCPA will provide detailed information on the recertification options for PAs — the PANRE and the PANRE-LA. We will give an update for PAs in the 2030 recertification cohort, review application deadlines and assessment options. We will also provide a review of the new Provider Bridge Program and the CAQ program (highlighting the new CAQs available). In addition, we will describe the various ways PAs contribute to the work of NCCPA, grants available from the nccPA Health Foundation and updated research findings on Minnesota PAs.

Presentation Objectives

- Describe the options, resources and details on recertification for PAs: focusing on the PANRE and PANRE-LA.
- Describe the Provider Bridge Program, the CAQ program and the new CAQs available for PAs.
- Describe volunteer opportunities and PA grants available from the nccPA Health Foundation.
- Update on recent legislation guiding PA Practice, the PA Licensure Compact and title change.
- Describe the practice characteristics of Minnesota PAs.

Presenter Bio

Alicia Quella, a Minnesota PA, is the Sr. Director of Communications and PA Relations at the NCCPA. She has served as a PA Program Chair and Director and has practiced in emergency medicine and primary care. She has served as an epidemiologist and has published research on the PA workforce, global health and PA educational debt. Alicia earned her Masters of PA Studies degree and her doctoral degree in epidemiology from the University of Iowa.

Prostate Artery Embolization: A Modern, Minimally Invasive Solution for BPH

Presented by: Kayla Halleron, PA-C

Presentation Description

Explore how Prostate Artery Embolization (PAE) is transforming BPH management. This session equips PAs with practical insights into patient selection, procedural fundamentals, and real-world outcomes.

Presentation Objectives

- Recognize Prostate Artery Embolization (PAE) as an evidence-based, minimally invasive treatment option for benign prostatic hyperplasia (BPH), including appropriate patient selection and referral criteria.
- Describe the procedural steps of PAE, including vascular anatomy, access approaches, embolization technique, peri-procedural workflow, and expected post-procedure course.
- Interpret clinical outcomes of PAE by reviewing current data on symptom improvement, prostate volume reduction, complications, durability, and how PAE compares with medical therapy, TURP, and minimally invasive surgical therapies (MISTs).

Presenter Bio

Kayla is a Physician Assistant with more than 10 years of experience caring for patients. She is a member of the Minnesota Academy of PAs, the American Academy of Physician Assistants and the National Commission on Certification of Physician Assistants. She received her undergraduate degree from the University of Mary in North Dakota and her Masters in Physician Assistant Studies from the University of South Dakota. In addition to interventional radiology, she has worked in pulmonology and sleep medicine as well as in the urgent care fields. Kayla is passionate about patient education. It's always been her goal to partner with patients to help them make the best decisions about their health. She is an avid Minnesota Vikings fan, loves traveling, hiking, and enjoys spending time with her husband, family and friends.

1:30 – 2:25pm

The Scalpel vs. The Syringe: Navigating the Intersection of GLP-1s and Bariatric Surgery

Presented by: Lucian Panait, MD, MBA

Presentation Description

GLP-1 receptor agonists have transformed obesity treatment in primary care, but they have also introduced a new set of clinical questions for the growing number of patients who are surgical candidates or who present for procedures while already on these medications. This timely session, led by a bariatric surgeon with extensive experience in both surgical and pharmacologic weight loss treatment, bridges the gap between the prescribing clinician and the operating room. Attendees will gain a practical understanding of how antiobesity medications affect surgical candidacy, perioperative risk, and anesthetic management. The presentation will also address how to counsel patients on the evolving role of surgery versus pharmacotherapy, what outcomes data show about combining both approaches, nutritional and metabolic considerations unique to patients on GLP-1 agents, and how to coordinate care effectively with surgical colleagues. Case vignettes will be used to illustrate key decision points.

Presentation Objectives

- Identify perioperative risks associated with GLP-1 receptor agonists and apply current guidance on when to hold these medications prior to surgery.
- Counsel patients on the comparative and complementary roles of pharmacologic and surgical weight loss treatment.
- Understand implications of these therapies on different aspects of metabolic disease.
- Recognize nutritional and metabolic considerations in patients using GLP-1 agents who require surgical intervention.

Presenter Bio

Dr. Lucian Panait, MD, FACS, is a board-certified general surgeon and Yale University fellowship-trained bariatric and minimally invasive surgeon serving as President of the Minnesota Bariatric Center and Minnesota Hernia Center. He is a recognized leader in the surgical and medical treatment of obesity, bringing advanced expertise in laparoscopic, endoscopic, and robotic techniques to a comprehensive, patient-centered practice. Dr. Panait established the first outpatient bariatric center in Minnesota, which earned Center of Excellence accreditation from the American Society for Metabolic and Bariatric Surgery — a distinction reflecting the highest standards of safety and outcomes in obesity care. He offers patients a full spectrum of weight loss options, from the latest GLP-1 medication therapies to minimally invasive bariatric surgery, and is known for walking alongside patients through

every step of their weight loss journey. He earned his medical degree from Ovidius University in Constanta, Romania, and subsequently pursued a research fellowship in Robotic Surgery and Surgical Education through the MITAC/NASA Commercial Space Center at Virginia Commonwealth University. He completed his general surgery residency at Saint Mary's Hospital/Yale Affiliate followed by a clinical fellowship in Minimally Invasive and Bariatric Surgery at Yale University. Dr. Panait is certified by the American Board of Surgery, a Fellow of the American College of Surgeons, and holds leadership positions in both the American Society for Metabolic and Bariatric Surgery and the Society of American Gastrointestinal and Endoscopic Surgeons. He has an extensive research background with numerous peer-reviewed publications and book chapters on bariatric surgery, robotic surgery, minimally invasive techniques, and surgical simulation.

Bridging the Gap: An Interdisciplinary Approach for Comprehensive Immigrant Care

Presented by: Joel Hill, MPAS, PA-C

Presentation Description

This presentation explores the complex landscape of immigrant healthcare using an interdisciplinary lens, emphasizing the vital role of Federally Qualified Health Centers (FQHCs) as community safety nets. Participants will examine immigrant definitions and review national statistics regarding healthcare access and barriers, such as language proficiency and insurance status. Drawing on data from an established FQHC, the session details an immigrant intake examination and clinical strategies for building patient trust and navigating cultural considerations. Short videos from specific FQHC areas will be shared from conversations with behavioral health, social work, pharmacy, a resettlement agent, and an immigrant visa holder perspective.

Presentation Objectives

- Review Federally Qualified Health Centers and their medical mission.
- Examine immigrant definitions and review refugee and asylum differences.
- Identify elements of the immigrant intake examination.
- Explore an interdisciplinary approach to immigration health.

Presenter Bio

Joel Hill, MPAS, PA-C, is an Associate Clinical Professor at UW–Madison within the Department of Family Medicine and Community Health. Since 2010, he has educated physician assistant students in clinical medicine and prevention. As the Director of Community Based Learning, he provides leadership for the program's distant campuses and asynchronous education options. Additionally, he directs an online graduate and professional global health course for the SMPH Office of Global Health, preparing students for the ethical and methodological challenges of international fieldwork. Professor Hill's international work includes leading annual service-learning trips to rural villages in Southern Belize since 2011. Through a partnership with the Belize Family Life Association, he has worked to improve cervical cancer screening rates for underserved populations. His global health perspective helps him in caring for immigrant patients here in practice, primarily at the Wingra Family Medical Center, a Federally Qualified Health Center in Madison.

2:30 – 4:25pm

The Feedback Loop: Interactive Workshop on Clinical Feedback Perception — Human vs AI: Trust, Tone, and Tech

Presented by: Clinton Billhorn, PA-C, CAQ-HM and Diana Soran, DMSc, PA-C

Presentation Description

This is a two-hour interactive workshop (2 CME credits) structured as follows: a 30-minute pre-lecture to establish baseline understanding of feedback and provide a framework to equalize participants; 30 minutes to complete all components of the activity plus a survey in Qualtrics (15 minutes for the activity, 15 minutes for feedback); 30 minutes to debrief with presenters and other participants; and a 30-minute post-lecture on the current role of AI in education and feedback, rounding out the presentation and the goals of the activity participants just completed. The agenda should note below the title: "Optional: Opportunity to participate in a survey-based research study regarding the perception of AI vs. peer (human) generated feedback."

Presentation Objectives

- Learn and apply a structured feedback process that is helpful and supportive.
- Analyze the psychological impact of feedback mechanisms.
- Analyze how artificial intelligence can be used to enhance rather than replace workplace and learning environments.

2:30 – 3:25pm

Below the Belt: A Colorectal Surgeon's Guide to When Primary Care Should Pick Up the Phone

Presented by: Tiffany Panait, MD

Presentation Description

Colorectal and anorectal complaints are common conditions seen in primary care. From the patient embarrassed to mention rectal bleeding or incontinence to the one whose colonoscopy report sits in the chart without a clear next step, primary care PAs are frequently the first and sometimes only clinician a patient will consult. Yet the line between watchful waiting, in-office management, and surgical referral is not always obvious. This session, led by a board-certified colorectal surgeon, is designed to make that line clear. Using a practical, case-based approach, attendees will walk through the most common colorectal and anorectal conditions encountered in primary care — including hemorrhoids, anal fissures, fistulas, diverticular disease, and colorectal polyps and cancer — with a focus on what the surgeon actually needs from the referring clinician and when that referral should happen. Particular attention will be given to common pitfalls: the rectal bleeding attributed to hemorrhoids without further workup, the fissure treated for months without improvement, the high-risk polyp surveillance interval that gets missed, and the IBD flare that has crossed into surgical territory. Attendees will also gain insight into what happens after the referral.

Presentation Objectives

- Identify clinical presentations of common colorectal and anorectal conditions — including hemorrhoids, fecal incontinence, fissures, fistulas, diverticular disease, and colorectal neoplasia —

and distinguish those appropriate for primary care management from those requiring surgical referral.
- Apply current evidence-based guidelines for colorectal cancer screening, polyp surveillance, and workup of rectal bleeding in the primary care setting.
- Recognize high-risk findings and red flag symptoms that warrant urgent or expedited colorectal surgery consultation.
- Counsel patients on what to expect from a colorectal surgical evaluation and perioperative care.

Presenter Bio

Dr. Tiffany Panait, MD, FACS, is a board-certified colon and rectal surgeon with Voyage Healthcare, seeing patients at clinics in Maple Grove and Plymouth, Minnesota. She brings focused expertise in colorectal and anorectal conditions to a collaborative, multidisciplinary practice environment, with particular clinical interests in colon and rectal cancer, inflammatory bowel disease, anorectal disorders, and minimally invasive surgery. Dr. Panait earned her undergraduate degree from Tulane University and her medical degree from the American University of the Caribbean School of Medicine. She completed her general surgery residency at Saint Mary's Hospital/Yale School of Medicine Affiliate, and went on to complete fellowship training in Colon and Rectal surgery at Saint Francis Hospital and Medical Center. She is certified by both the American Board of Surgery and the American Board of Colon and Rectal Surgery, and is a member of the American Society of Colon and Rectal Surgeons, the American College of Surgeons, and the Association of Women Surgeons. Dr. Panait has been recognized as a Top Doctor by Mpls.St.Paul Magazine in both 2024 and 2025.

3:30 – 4:25pm

A Primary Care Guide to Modern Hernia Management and Referral

Presented by: Lucian Panait, MD, MBA

Presentation Description

Hernias are among the most common conditions encountered in primary care, yet many clinicians feel uncertain about when to reassure, when to watch, and when to refer, and what to tell patients about their options once they do. This presentation, delivered by a high-volume hernia surgeon, offers primary care PAs a practical, clinically grounded framework for managing hernia patients from the first visit through surgical follow-up. Topics covered will include how to distinguish hernia types by location and presentation, physical exam pearls for accurate identification, the evidence behind watchful waiting versus early repair, red flags for incarceration and strangulation requiring urgent action, the importance of partnering with the patient and surgeon in managing comorbidities (obesity, smoking, diabetes) to ensure surgical success, what patients should understand about mesh (including how to address common fears and misinformation), and how to set appropriate post-operative expectations for patients returning to your care after repair. The session will incorporate real-world cases.

Presentation Objectives

- Identify and differentiate common hernia types by presentation and physical examination.
- Apply evidence-based criteria for watchful waiting versus surgical referral.
- Counsel patients on hernia repair options, including mesh, and recognize signs of surgical emergency.
- Understand modern surgical techniques (e.g., robotic-assisted, abdominal wall reconstruction and tension-free repairs).

Presenter Bio

Dr. Lucian Panait, MD, MBA, FACS, is President of the Minnesota Hernia Center and Minnesota Bariatric Center, where he brings a comprehensive, patient-centered approach to the surgical treatment of hernias and related conditions. His practice spans hernia surgery, bariatric surgery, gastroesophageal reflux disease, gallbladder conditions, gastroparesis, achalasia, and other general surgery conditions, with a particular focus on robotic and minimally invasive techniques. Dr. Panait completed his general surgery residency at Saint Mary's Hospital, affiliated with Yale University School of Medicine, followed by a clinical fellowship in Minimally Invasive and Bariatric Surgery at Yale University. He also completed a research fellowship in Robotic Surgery, Telemedicine, and Surgical Education through the MITAC/NASA Commercial Space Center at Virginia Commonwealth University. He earned his medical degree from Ovidius University in Constanta, Romania. He is certified by the American Board of Surgery, a Fellow of the American College of Surgeons, and serves as a Director on the Board of Governors of the American Hernia Society. Dr. Panait has an extensive research background, with numerous peer-reviewed publications and book chapters on hernias, robotic surgery, minimally invasive techniques, and surgical simulation. He is a frequent invited lecturer at national and international conferences on hernia-related topics.

Friday

8:00 – 8:55am

Heme/Oncology Emergencies

Presented by: Jenna Richardson, PA-C

Presentation Description

Malignant Hematology: Discuss Tumor Lysis Syndrome, DIC, Leukostasis and Hyperviscosity Syndrome, Acute leukemia pearls. Solid Tumor Oncology: Discuss Immunotherapy Adverse Events, Hypercalcemia of Malignancy, Spinal Cord Compression and when inpatient chemo is warranted.

Presentation Objectives

- Recognize aggressive presentations requiring inpatient oncology treatment.
- Develop management strategies for inpatient oncology patients with various malignancy related complications.
- Understand the divisions and interplay between the various hematology and oncology teams.

Presenter Bio

Jenna Richardson is a Hospitalist PA that practices at Regions Hospital in St Paul, MN. Prior to that she worked in inpatient heme/onc at the University of Minnesota Medical Center in Minneapolis, MN for 4 years. She is a proud graduate of St Kate's MPAS Program in 2018.

Treatment Resistant Depression: Options When Depression Continues to Impact Daily Life

Presented by: Nicole Cole, PA-C

Presentation Description

Provide education of what is treatment resistant depression (TRD). How successful are typically mono therapies in TRD. Review treatment for TRD — aripiprazole, quetiapine, etc. Review new options for TRD — Vraylar, Rexulti, Caplyta. Discuss interventional treatment for TRD, including TMS and Spravato.

Presentation Objectives

- What is the definition of treatment resistant depression.
- What are 3 medication treatment options for treatment resistant depression.
- What are interventional options for treatment resistant depression.

Presenter Bio

Nicole Cole grew up in rural MN. She attended Bemidji State University for her undergraduate, graduating in 2012. She obtained her Master of Science in Physician Assistant Studies (MSPA) from University of New England in 2016. She spent her clinical year in Presque Isle, Maine, focusing on rural medicine. Upon graduating she returned to the Brainerd Lakes area. She has worked at Sagent Behavioral Health (formerly Nystrom and Associates) since 2021. She works with all mental health diagnoses but truly enjoys treating those with treatment resistant depression and seeing how drastically patients' lives can change. Outside of work she enjoys going to Timberwolves games, time outdoors with her husband, 3 boys and golden retriever. She is returning to dog sports and doing nosework

classes with her golden. She is an avid reader and started a mobile bookstore with her husband and boys in the spring of 2026 to serve the Brainerd Lakes area.

9:00 – 9:55am

The Silent Threat: Early Diagnosis and Management of MASLD

Presented by: Amanda DeVoss, MMS, PA-C

Presentation Description

Metabolic dysfunction–associated steatotic liver disease (MASLD) is an increasingly common yet often overlooked condition with serious long-term health implications. This talk explores the evolving understanding of MASLD, emphasizing the importance of early recognition, accurate diagnosis, and proactive management strategies. Attendees will gain practical insights into identifying at-risk patients, interpreting diagnostic tools, and implementing evidence-based interventions to prevent disease progression and improve outcomes.

Presentation Objectives

- Recognize the key risk factors and clinical features associated with metabolic dysfunction–associated steatotic liver disease (MASLD).
- Apply current diagnostic criteria and tools to identify MASLD early in at-risk patient populations.
- Develop evidence-based management plans, including lifestyle and pharmacologic interventions, to reduce disease progression and improve patient outcomes.

Presenter Bio

Amanda DeVoss serves as the program director for the Physician Assistant program and is an associate professor with the Department of Medicine. In addition to her academic role, DeVoss maintains a clinical practice at UW Health's Digestive Health Center, specializing in treating patients with liver disease. She is a founding, and current, member of the UW Health Metabolic Liver Clinic. DeVoss joined the UW School of Medicine and Public Health as a clinical instructor in 2010 and since then has overseen the curriculum for the didactic and clinical year students, served as course director for more than nine PA program courses, and mentored more than 100 students. Her teaching and mentorship is enriched by her 25 years of clinical experience. Prior to her arrival at UW–Madison, DeVoss completed the Schering Corporation Fellowship Program in Liver Disease for Physician Assistants at Rush-Presbyterian-St. Luke's Medical Center in Chicago. She earned her undergraduate degree in medical microbiology and immunology at UW–Madison and her Master of Medical Science in Physician Assistant Studies at Midwestern University in Downers Grove, Illinois.

Leading From Where You Are: Purpose-Driven Pathways to PA Excellence

Presented by: Amber Koehler, MPAS, PA-C

Presentation Description

"Leadership is not a title — it is a way of showing up." Regardless of whether you hold a formal leadership title or not, our profession needs PAs who are grounded in purpose to cultivate sustainable careers in healthcare. Each of us is a leader in our own way — and PAs who set the standard of excellence and invest in their own leadership skills contribute to better patient outcomes, enhanced work unit culture, and increased visibility and respect for our profession. This session will focus on key

elements of career advancement planning, including: 1) starting with why and getting clear on your purpose, 2) informal leadership and influence, 3) embracing the learning zone, 4) strategic and design thinking, and 5) alignment with organizational strategy. Participants will leave with the tools necessary to create a concrete career development plan grounded in didactic, social, and experiential components of the learning and development model, with incorporation of short-, mid-, and long-term goals.

Presentation Objectives

- Identify strategies to clarify their personal and professional "why" — purpose and values as a foundation for meaningful leadership and career decisions.
- Apply principles of informal leadership and influence to advance ideas, build alignment, and create impact regardless of formal title or role.
- Identify personal and professional benefits of operating in the "learning zone."
- Explain how principles of strategic thinking and design thinking can be leveraged by PAs to solve complex problems, innovate workflows, and test purposeful solutions in real-world settings.
- Evaluate opportunities for alignment of individual values, skills, and goals with broader organizational strategies.
- Outline the next steps in developing a concrete, personalized career development plan.

Presenter Bio

Amber Koehler is a PA who specializes in the care of patients with CLL at Mayo Clinic in Rochester. She is an Assistant Professor of Medicine and an Associate in the Division of Hematology at Mayo Clinic, as well as a founding member of the Mayo Clinic Office of NP PA–RST. She is a Senior Fellow in the Mayo Clinic Academy of Educational Excellence and a member of the Mayo Clinic Rochester NP PA Executive Team. PA Koehler is a recognized leader known for driving strategic initiatives that elevate advanced practice at both the institutional and national level, strengthen workforce engagement, and support leadership development across the career spectrum. She currently chairs the Mayo Clinic Office of NP PA–RST Recognition and Communication Committee and serves as Chair of the APSHO Education Committee. She is also a member of the didactic faculty at the Mayo Clinic PA Program. As an active voice in advanced practice leadership, workforce development, and professional growth, she frequently presents at regional, national, and international conferences on both CLL and topics related to leadership, professional development, and well-being. Her work is grounded in a passion for helping individuals thrive through purpose-driven, sustainable, and fulfilling careers in healthcare, and she is deeply invested in coaching and leadership development initiatives that support this mission.

10:00 – 10:55am

Vomit, Visit, Repeat: Understanding Cannabinoid Hyperemesis Syndrome and Breaking the Cycle

Presented by: Matt Weiseman, PA-C

Presentation Description

Daily cannabis use is rising across the country, and with it Cannabinoid Hyperemesis Syndrome (CHS). This session equips clinicians to recognize and manage the full spectrum, from a prodromal phase of persistent morning nausea and abdominal pain to disabling cyclic vomiting that drives repeat ED visits, hospitalizations, and missed work. We will review population trends in cannabis use; examine leading mechanisms; differentiate from other cyclical vomiting syndromes; and discuss evidence-based

prevention treatments for CHS and treatment alternatives for common drivers of daily use (chronic pain, anxiety/insomnia, nausea).

Presentation Objectives

- Summarize current trends in cannabis use.
- Explain proposed mechanisms of CHS.
- Differentiate CHS from key mimics (cyclic vomiting syndrome, pregnancy-related emesis, gastritis/gastroenteritis, gastroparesis, intracranial pathology) using history, exam, and targeted testing.
- Counsel patients on prevention strategies.
- Review evidence-based alternatives for common conditions driving daily cannabis use (chronic pain, anxiety/insomnia, nausea) and incorporate nonpharmacologic and pharmacologic options into care plans.

Presenter Bio

Matt Weiseman is a Physician Associate with seven years of clinical experience. He earned his PA degree from the Red Rocks PA program in Colorado and began his career in rural family medicine. He returned to Minnesota and joined the M Health Fairview health system, continuing in rural family medicine while cultivating a sub-specialization in addiction medicine. Over the last few years, Matt has led the Fairview system in helping shift addiction medicine care from specialty into Primary Care. He is actively connected to community organizations, serving on an Opioid Action Council, speaking at local high schools, and spearheading a program to place free naloxone and fentanyl test strips in primary care clinics. He is passionate about providing safe non-judgmental spaces for patients with substance use disorder, and educating about evidence-based treatments for these conditions.

Provider Distress — How Did We Get Here and How Do We Avoid It?

Presented by: Rebecca Jones, PA-C, MSPAS, CAQ-PMHC, DFAAPA

Presentation Description

This presentation will focus on defining compassion and compassion fatigue and comparing to empathy and empathic distress. By understanding these concepts and their differences we will then explore what individual and systemic risk factors are in place that lead to compassion fatigue and empathic distress. We will also explore why empathy and compassion are so important in healthcare and individual and systemic processes that can help us refreshen our compassion and empathy skills in our professional and individual lives.

Presentation Objectives

- Define compassion and compassion fatigue.
- Describe empathy and empathic distress.
- Define the benefits of empathy & compassion in healthcare.
- Describe individual, interpersonal, & systemic factors that drive provider distress.
- Describe ways to mitigate provider distress in our professional practice.

Presenter Bio

Becca Jones has been practicing as a physician assistant for 14 years with over 10 years in palliative care. Having practiced in MN, IA, and now NE she has experience working in different healthcare systems, patient populations, and specialties. She recently expanded into the pulmonary medicine specialty where she practices her palliative care skills in symptom management and navigating serious illness conversations with adult patients with advanced lung conditions. She has speaking experience in symptom management and palliative care topics at the local, state, and national levels. Outside of

work she enjoys spending time traveling and camping with her family and dog, attending her kids' dance and sporting events, playing/singing for church, and has a newfound love for hot yoga.

3:00 – 3:55pm

How to Decide if Your Patient Can Decide: A Step-by-Step Guide to Evaluating Medical Decision-Making Capacity

Presented by: Kelsey Henriquez, MPAS, PA-C

Presentation Description

Evaluating medical decision-making capacity is an important clinical skill and a core competency in geriatric care, yet it remains undertaught across medical education — and particularly within PA training. Historically, limited state scope-of-practice regulations restricted PAs from activating a Health Care Power of Attorney (HCPOA), reducing both formal training opportunities and clinical confidence in performing capacity assessments. As PA practice authority has expanded over the past several years, there is a growing and urgent need for education in this area, especially given that more than 90% of PAs care for older adults in some capacity. This session provides a practical, clinician-focused approach to evaluating medical decision-making capacity from a geriatric medicine perspective. Participants will learn a clear, step-by-step method for assessing the four essential components of capacity and will apply this framework to real-world patient cases commonly encountered in clinical practice. The session will also review relevant legislation and scope-of-practice considerations related to HCPOA activation and deactivation to support legally and ethically sound decision-making. Finally, the presentation will briefly highlight best practices in teaching this complex skill, including an example of an innovative educational approach currently used in a PA program.

Presentation Objectives

- Identify the four components of medical decision-making capacity and describe how they can be assessed in clinical practice.
- Analyze geriatric patient case examples to distinguish intact versus impaired medical decision-making capacity.
- Summarize current legislation and PA scope of practice considerations related to activation and deactivation of a Health Care Power of Attorney (HCPOA).

Presenter Bio

Kelsey Henriquez, MPAS, PA-C, is a physician assistant and teaching faculty member at the University of Wisconsin School of Medicine and Public Health. She earned her Master of Physician Assistant Studies from UW–Madison and holds a Bachelor of Science in Biomedical Sciences and Spanish for Health Professions from Marquette University. Prior to entering academic medicine, Ms. Henriquez practiced for six years as a physician assistant in family medicine and immigrant health at a federally qualified health center in Madison, Wisconsin, with a clinical focus that included women's health. Her work emphasized comprehensive primary care for diverse and underserved populations, frequently caring for patients with significant psychosocial complexity and high chronic disease burden across the lifespan, often involving ethically complex clinical decision-making. This experience shaped her interest in geriatrics-related clinical challenges and health equity within primary care. In her faculty role, Ms. Henriquez contributes to curricular development across multiple clinical domains, including coordination of the didactic geriatrics curriculum. She is actively involved in student mentorship, advising, and the development of innovative instructional methods to address under-taught yet essential clinical skills, such as evaluation of medical decision-making capacity. Her scholarly work focuses on advancing geriatrics education for physician assistant students. She was the lead author on a learner-centered

educational needs assessment evaluating geriatric preparedness among graduating PA students, aligned with American Geriatrics Society (AGS) competencies. This work identified key educational gaps, including decision-making capacity evaluation, dementia care, geriatric pharmacology, and application of the 5Ms Framework of geriatric care, and directly informed curricular redesign. This needs assessment has been published in the Wisconsin Medical Journal and presented nationally at the American Geriatrics Society Annual Scientific Meeting.

Lifestyle Medicine Jeopardy

Presented by: Ashleigh Cutt, PA-C

Presentation Description

Lifestyle medicine is a rapidly evolving specialty that applies to all disciplines of medicine. In this engaging, question-and-answer format presentation, learn how lifestyle medicine is defined, how it can be applied to your practice, and about the growing body of evidence showing how lifestyle medicine can prevent, treat, and even reverse chronic conditions.

Presentation Objectives

- Define lifestyle medicine and identify the six pillars of lifestyle medicine.
- Understand the importance of lifestyle medicine given the current state of chronic disease across the United States.
- Learn how the six pillars could be applied in your medical practice.
- Identify ways to further personal growth with the support of the American College of Lifestyle Medicine (ACLM).

Presenter Bio

Ashleigh Cutt, PA-C, is a Physician Associate with over 10 years of clinical experience in primary care. She earned her PA degree from the University of Colorado. She serves as her clinic's EPIC ally, supports quality improvement on the clinic steering committee, and is currently creating new student experiences and preceptor support within her health system. She volunteers with NCCPA in exam development, has a growing interest in lifestyle medicine, and is now branching out into medical writing. Outside the clinic, she enjoys spending time with her husband and two daughters exploring the outdoors, biking, traveling, reading, and baking bread.

4:00 – 4:55pm

End-of-Life Care in the Hospital: Addressing What Matters at a Time of Transition

Presented by: Anna Anthony, PA-C, CAQ-PMHC

Presentation Description

Hospital-based clinicians frequently care for patients in the final days to weeks of life, yet many feel underprepared or underequipped to lead effective goals-of-care discussions, manage symptoms, and coordinate transitions to hospice. This session provides a practical, case-based approach to high-quality end-of-life care in the inpatient setting. The session will introduce the REMAP framework to support clear, compassionate, and efficient communication regarding goals of care and medical decision-making. Participants will review management of common end-of-life symptoms, including pain, dyspnea, agitation, and terminal secretions, with a focus on simple, actionable strategies. Learners will

also gain practical guidance on identifying appropriate patients for hospice and facilitating smooth transitions from hospital to home, including key elements of discharge planning and prognostication. Through real-world cases and ready-to-use language, this session equips PAs across specialties with tools to provide goal-concordant, patient-centered care at the end of life, improving both patient and family experience at this impactful time of transition.

Presentation Objectives

- Apply the REMAP framework to conduct clear, compassionate goals-of-care conversations.
- Identify and manage common end-of-life symptoms in hospitalized patients, including pain, dyspnea, agitation, and terminal secretions.
- Recognize clinical signs of active dying and adjust medical interventions to prioritize comfort-focused care.
- Facilitate transitions to home hospice — including identifying eligible patients, initiating discussions, and coordinating safe discharge plans.

Presenter Bio

Anna Anthony is a Physician Assistant with specialized training in palliative care. She completed an Advanced Practice Provider Palliative Medicine Fellowship at Mayo Clinic, where she gained experience caring for seriously ill patients across all care settings. She has also completed the CAQ in Palliative Medicine + Hospice. Her clinical interests include symptom management, end-of-life care, and improving communication skills to ensure patient-centered, goal-concordant care. Before her fellowship and transition to working in palliative care, Anna worked as a hospitalist at Mayo Clinic. She completed her Master of Health Sciences from the University of Oklahoma School of Community Medicine in Tulsa, Oklahoma. Anna is now working at Regions Hospital (HealthPartners), within inpatient and emergency department palliative care. Outside of work she enjoys spending time outdoors, being creative, reading, and spending time with her husband Caleb and their dog June.

Pediatric Neurosurgery: Clinical Pearls and When to Refer

Presented by: Maggie Cutter, PA-C

Presentation Description

An overview of the anatomy and pathophysiology associated with common pediatric neurosurgical conditions (including hydrocephalus, tethered cord, and Chiari malformation). Presentation will also include warning signs/red flag symptoms that could indicate an urgent/emergent issue. Discussion of clinical exam findings that may be associated with an underlying neurosurgical concern. Brief discussion of surgical treatments for neurosurgical conditions (CSF shunts, tethered cord release, Chiari decompression, etc.).

Presentation Objectives

- Describe the anatomy and pathophysiology involved in common pediatric neurosurgical conditions, including hydrocephalus, tethered cord, and Chiari malformation.
- Identify warning signs/red flags associated with common pediatric neurosurgical conditions.
- Interpret clinical exam findings and determine when pediatric neurosurgical referral is indicated.

Presenter Bio

Maggie is a PA at Gillette Children's with over 12 years of experience working in neurosurgery. She graduated from the Idaho State University MPAS program in 2014, and began working in adult general neurosurgery at Essentia Health in Duluth. In 2016, she moved home to the Twin Cities and has been working in pediatric neurosurgery at Gillette for the last 10 years. Her work involves outpatient and inpatient care, telephone triage, and surgical assisting. Outside of work, Maggie enjoys spending time with her family, traveling, and cooking.