Department of Pediatrics
UNIVERSITY OF WISCONSIN
SCHOOL OF MEDICINE AND PUBLIC HEALTH

Pediatrics Research Week

Program Guide

2024 Odell Lecturer, Bruce Klein, MD, professor, division chief, Division of Infectious Diseases

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Schedule Overview

Events highlighted in grey will be held in person in HSLC 1345 or the HSLC Atrium.

MONDAY

8–9 a.m.
via Zoom

An Unexpected Journey

Speaker: John Williams, MD, department chair, Division of Infectious Diseases

12–1 p.m.
via Zoom

The Oak and the Birch: Sturdiness and Scrappiness in Times of Turbulence and Uncertainty

Moderator: Sarah Webber, MD, Division of Hospital Medicine and Complex Care

Panelists: Anthony Garcia-Prats, MD, MSc, PhD, Divisions of General Pediatrics and Adolescent Medicine and Global Pediatrics; Taylor House, MD, Division of Nephrology; Christian Capitini, MD, Division of Hematology, Oncology, Transplant, and Cellular Therapy

TUESDAY

8–9 a.m.
via Zoom

Research Team Leadership: A Panel Discussion About Building Teams, Promoting Learning, and Coordinating Projects

Moderator: Brad Kerr, researcher II, Division of General Pediatrics and Adolescent Medicine

Panelists: Lydia Bliss, research specialist, Division of General Pediatrics and Adolescent Medicine; Otto Kletzien, PhD, scientist I, Division of Hematology, Oncology, Transplant, and Cellular Therapy; Bridget Johnson, BAN, RN, CCRC, clinical research manager, Pediatric Clinical Research Coordination

12–1 p.m.
via Zoom

Kickstart Your Scholarly Work with AI by Your Side: From Hypothesis to Publication

Speakers: Criss Ebby, MD, fellow, Division of Hospital Medicine and Complex Care

Yair Bannett, MD, MS, Developmental-Behavioral Pediatrician, Stanford University; Madhuri Prasad, MD, fellow, Pediatric Hospital Medicine, Emory University School of Medicine; Bayley Bennett, MD, fellow, Emory University School of Medicine

WEDNESDAY

8–9 a.m.
via Zoom

Building a Foundation in Scholarly Work: A Resident Panel on the PUBLISH Pathway

Moderator: Emily Ruedinger, MD, MEd, associate residency program director

Panelists: Alex Wolf, MD, resident; Rory Bade, MD, resident; Carlee Blakemore, MD, resident; Ryan Lindstrom, MD, resident

12:15–3:15 p.m.
HSLC 1345 or
via Zoom

Fellow Capstone Research Presentations

THURSDAY

7:30–8:30 a.m.
HSLC 1345 or
via Zoom

Odell Lectureship

Partnership with Families and Communities to Address Health

Speaker: Jill Denson, PhD, Division of General Pediatrics and Adolescent Medicine

8:30–8:50 a.m.
HSLC 1345 or via Zoom

2025 Odell Research Recipient and Presentation

Physics & Scanners & Brains, Oh My! My Journey in Imaging Early Brain Development

Speaker: Douglas Dean III, PhD, Division of Neonatology and Newborn Nursery

8:50–9:10 a.m.
HSLC 1345 or
via Zoom

2025 Ellen R Wald Research Recipients and Presentations

Finding Joy Through Process

Speaker: Sarah Webber, MD, Division of Hospital Medicine and Complex Care

Uncovering the Hidden Drivers of Childhood Asthma and Rhinitis

Speaker: Sima Ramratnam, MD, MPH, Division of Allergy, Immunology, and Rheumatology

9:40–11 a.m.
HSLC 1345 or via Zoom

Ellen R. Wald Faculty Research Forum

11:10–12 p.m.
HSLC 1345 or via Zoom

Research Resources

1–2:30 p.m.
HSLC 1345

Research Week Platform Presentations

2:30–3:30 p.m.
HSLC Atrium

Poster Viewing and Reception

Fellow Capstone Presentations

Wednesday, May 14 | 12:15–3:15 p.m. | HSLC 1345 & Zoom

Time	Speaker	Title
12:15 p.m.	Ellen Selkie, MD, MPH	Welcome
12:20 p.m.	Caleb Kitcho, MD, fellow, Division of Critical Care	Physician-Attorney Conflicts in End-of-Life Decisions
12:35 p.m.	Ann Chacko, DO, fellow, Division of Neonatology and Newborn Nursery	Lung Ultrasound Score to Assess Extubation Success in Neonates on Invasive Mechanical Ventilation
12:50 p.m.	Cris Ebby, MD, fellow, Division of Hospital Medicine and Complex Care	Improving Healthcare Communication: Large Language Models for Summarizing and Translating Medical Notes
1:05 p.m.	Josh Gollub, MD, fellow, Division of Neonatology and Newborn Nursery	Mitigating Acceleration Forces During Neonatal Transport Using a Novel Spring
1:20 p.m.	Tyler Legro, DO, fellow, Division of Cardiology	Prevalence and Method of Diagnosis of Critical Congenital Heart Disease in Wisconsin Newborns Between 2014–2022
1:35 p.m.	Break	
1:50 p.m.	Victoria Nicksic, MD, fellow, Division of Endocrinology and Diabetes	Stress in Teens with Chronic Health Conditions: A Qualitative Study
2:05 p.m.	Scott Leopold, MD, fellow, Division of Critical Care	Central Venous Catheter Complications and Practice Variation Following the Glenn Operation
2:20 p.m.	Tasneem Chair, MD, fellow, Division of Pulmonology and Sleep Medicine	Sleep Disordered Breathing (SDB) in Trisomy 18 and Trisomy 13
2:35 p.m.	Andrew Bigham, MD, fellow, Division of Critical Care	Are We Too Supportive? A Ventilator Weaning QI Project in the PICU

Ellen R. Wald Faculty Research Forum

Thursday, May 15 | 9:40–11 a.m. | HSLC 1345 & Zoom

Time	Speaker	Title
9:40 a.m.	Benjamin Spector, MD, MS, assistant professor, Division of Nephrology	Epigenetic Insights: Unraveling Mechanisms in Kidney Transplantation
10 a.m.	Megan Yanny, MD, assistant professor, Division of General Pediatrics and Adolescent Medicine	Primary Care Provider's Attire – Parent Perceptions and "Professionalism"
10:20 a.m.	DeMarco Bowen, MD, MPH, assistant professor, Division of Hospital Medicine and Complex Care	Moving Toward Action: Training Residents to Respond to Discrimination Using Simulation
10:40 a.m.	Claudette Adegboro, MD, assistant professor, Division of Neonatology and Newborn Nursery	The Tiny Baby Movement – Building a Clinical Care Program for Extremely Preterm Infants Born at 22 Weeks' Gestation

Research Resources

Thursday, May 15 | 11:10 a.m. – 12 p.m. | HSLC 1345 & Zoom

Time	Speaker(s)	Title
11:10 a.m.	Bridget Johnson, BAN, RN, CCRC, clinical research manager, Pediatric Clinical Research Coordination Cassie Nelson, BSN, RN, clinical research supervisor, Pediatric Clinical Research Coordination	Pediatric Clinical Research Coordination (PCRC) Program: Who We Are and How to Use Us
11:25 a.m.	Jens Eickhoff, PhD, distinguished scientist, Department of Biostatistics and Med Informatics	The Biostatistics Support Core for the Department of Pediatrics
11:40 a.m.	Becky Bound, research program associate director Tina Palas, research administration (pre-award) manager	Research Resources in the DOP: Research Administration from Proposal Prep to Award Closeout

Platform Presentations

Thursday, May 15 | 1 – 2:30 p.m. | HSLC 1345 & Zoom

Time	Speaker	Title
1 p.m.	Leela Shah, PhD candidate, Neuroscience	Leveraging MRI Relaxometry to Examine Relationships between the Area Deprivation Index and White Matter Myelination in Infants and Children
1:15 p.m.	Lydia Bliss, research specialist, Division of General Pediatrics and Adolescent Medicine	Transgender and Gender Diverse Youths' Experiences with Transgender Influencers
1:30 p.m.	Courtney Gaberino, MD, fellow, Division of Allergy, Immunology, and Rheumatology	Effects of Mepolizumab and Systemic Corticosteroids on Airway Gene Expression Patterns Post-Exacerbation in Urban Children with Asthma
1:45 p.m.	Jadin Heilmann, clinical research coordinator, incoming medical student, Center for Human Genomics and Precision Medicine	Advancing Rare Disease Diagnostics Through Multidisciplinary Collaboration: Insights from the University of Wisconsin Undiagnosed Disease program
2 p.m.	Emily Forster, MD, resident	Optimizing Outpatient Follow-Up of Non-Emergent Neonatal Echocardiography by Altering the Role of the Echocardiographer
2:15 p.m.	Karen Pletta, MD, professor, Division of General Pediatrics and Adolescent Medicine	Parent Perceptions of Virtual Scribe and Artificial Intelligence (AI) Scribe Use in Pediatric Medical Visits

Platform Presentations

Leveraging MRI Relaxometry to Examine Relationships between the Area Deprivation Index and White Matter Myelination in Infants and Children

Shah, L., Bond, E., Planalp, E., Frye, C., Kecskemeti, S., Alexander, A., Dean, D.

Background: Early life adversity (ELA) refers to exposure to negative experiences during childhood. Prior studies have related ELA to poorer physical health and neurodevelopmental outcomes, implicating ELA as a critical area of study to improve pediatric health. Moreover, existing neuroimaging and behavioral literature has established clear associations between ELA and neurodevelopmental outcomes later in life. One measure of adversity, the Area Deprivation Index (ADI), is a comprehensive measure that combines factors such as household income, housing conditions, and employment outcomes to quantify the adversity an individual faces based on their census-tract level location of residence.

Design: The present study aimed to quantify the relationship between ELA as quantified by the ADI and pediatric white matter myelination in a sample of infants and children aged 0-10 years old (n =43). White matter myelination was quantified within regions previously associated with ELA in adolescents and adults using longitudinal relaxation rates (R1) calculated from images acquired using the MPnRAGE magnetic resonance imaging acquisition protocol. ADI was calculated based on participants' primary address at the time of visit.

Results: A region-of-interest linear mixed effects analysis revealed that, controlling for age, higher ADI scores were associated with lower R1 values in several white matter regions, including the internal capsule, corona radiata, cingulate gyrus, fronto-occipital fasciculus, superior longitudinal fasciculus, uncinate fasciculus, and corpus callosum. Given the widespread impact of ADI on R1, we next conducted a voxel-based analysis of the entire white matter skeleton, which revealed significant associations between ADI and R1 in bilateral clusters across the white matter skeleton.

Conclusions: The implicated regions have been associated with cognitive, emotional, and motor functions, suggesting that the ADI significantly predicts white matter myelination in pediatric populations in functionally relevant regions. Future work should explore which components of the ADI drive this relationship and if these ADI-associated myelin changes relate to developmental outcomes, and extend these analyses to a larger, nationally representative sample to corroborate these findings.

Transgender and Gender Diverse Youths' Experiences with Transgender Influencers

Bliss, L., Green, S., Selkie, E.

Background: Transgender and gender diverse (TGD) individuals often turn to social media to fulfill a variety of social, emotional, and informational needs. This is especially true for TGD youth, who use social media more than their cisgender peers, particularly as a tool for exploring their gender identity. A significant portion of popular social media content is created by influencers–individuals with large online followings that are especially popular among younger audiences. This qualitative study aimed to examine how TGD youth engage with and are affected by content made by TGD influencers.

Methods: TGD adolescents were recruited through a local pediatric gender health clinic and via outreach to community groups and organizations serving TGD youth in Wisconsin. Semi-structured interviews explored participant experiences with TGD influencer content, including their perspectives on the content presented in two pre-selected influencer videos. Interviews were qualitatively coded in an iterative process to extract common themes.

Results: The study included 31 TGD adolescents aged 13 to 20 (M = 15.94, SD = 1.59), with 61% assigned female at birth and 39% assigned male at birth. Participants identified as male (n = 15, 48%), female (n = 8, 26%), non-binary (n = 9, 29%), agender (n = 3, 10%), and genderfluid (n = 1, 3%), and identities were not mutually exclusive. Thematic analysis revealed that youth had both positive and negative experiences with TGD influencer content. Positive experiences primarily focused on identity and informational support. Participants described influencer content as supporting gender identity discovery, exploration, and validation. Informational support largely focused on the perceived helpful qualities of influencer content, including offering firsthand perspectives from those with lived experiences, providing practical guidance, and informing decisions about transitioning. Negative experiences were associated with exposure to transphobia, misinformation and disinformation, internet controversy, and distressing news and political content.

Conclusions: These findings suggest that engaging with TGD influencer content can be valuable for educating youth and providing emotional support surrounding gender identity and transitioning, while also carrying the risk of exposing youth to harmful content. This research highlights the benefits of online resources for marginalized youth, while emphasizing the need for safeguards against potential harms.

Effects of Mepolizumab and Systemic Corticosteroids on Airway Gene Expression Patterns Post-exacerbation in Urban Children with Asthma

Gaberino, C., Dill-McFarland, K., Bacharier, L., Gill, M., Stoke, J., Liu, A., Cohen, R., Kumar, R., Lang, A., Khurana Hershey, G., Sherenian, M., Zoratti, E., Teach, S., Kattan, M., Becker, P., Togias, A., Busse, W., Altman, M., Jackson, D.

Background: Systemic corticosteroids are standard-of-care treatment for asthma exacerbations; however, little is known about whether corticosteroid effects on airway inflammatory pathways differ when added to biologic therapies targeting type 2 inflammation.

Methods: 290 urban children (6-17 years) with exacerbation-prone eosinophilic asthma were randomized (1:1) to q4 week placebo or mepolizumab injections added to guideline-based care for 52 weeks. Nasal lavage samples were collected at baseline (before treatment), post-exacerbation (5-10 days after starting systemic corticosteroids), and on treatment for RNA-sequencing. Differentially expressed genes (DEGs) were assessed using mixed effects modeling (significance threshold FDR<0.05).

Results: 100 participants were evaluated following 174 exacerbation events (placebo:106, mepolizumab:68). In the placebo group, there were no significant DEGs comparing on treatment to before treatment timepoints and 5871 significant DEGs (2568 increased, 3303 decreased) comparing post-exacerbation to on treatment timepoints. In the mepolizumab group, there were 1441 significant DEGs (726 increased, 715 decreased) comparing on treatment to before treatment timepoints and 1382 significant DEGs (567 increased, 815 decreased) comparing post-exacerbation to on treatment timepoints. Mepolizumab reduced expression of eosinophil-associated genes (CCL23, GATA1, CLC, PRSS33, PTGDR2) on treatment, with a larger decrease post-corticosteroid (FDR<0.05). Mepolizumab did not significantly alter expression of mast cell/T2 cytokine-related genes (HDC, CPA3, GATA2, IL4/5/13) on treatment; however, expression significantly decreased post-corticosteroid (FDR<0.05). Mepolizumab increased expression of genes associated with epithelial/airway inflammation (CFTR, ERBB2, BMP3) on treatment; however, expression returned to baseline post-corticosteroid (FDR<0.05).

Conclusions: We identified differentially expressed genes related to systemic corticosteroid effects, DEGs related only to mepolizumab treatment, and clusters of functionally related genes with additive effects of mepolizumab plus systemic corticosteroids. Mepolizumab enhances the actions of oral corticosteroids on eosinophil related pathways in relation to exacerbations. Oral corticosteroids additionally down-regulate mast cell/T2 cytokine pathways and reverse the up-regulation of epithelial inflammatory pathways that occurred during mepolizumab treatment.

Advancing Rare Disease Diagnostics Through Multidisciplinary Collaboration: Insights from the University of Wisconsin-Undiagnosed Disease Program

Heilmann, J.M., Hall, A.L., Keppler-Noreuil, K., Pavelec, D., Shao, X., Legare, J.M., Steiner, R.D., Arkin, L.M., Churpek, J.E., Garland, C.B., Levy, H., Kwon, J.M., McAdams, R.M., Petty, E.M., Ralphe, J.C., Seaborg, K.A., Seroogy, C.M., Stepien, K.E., Cristian, I., Wheeler, P.G., Grob, R., Chang, Q., Meyn, M.S., Webb, B.D.

Background: The University of Wisconsin-Undiagnosed Disease Program (UW-UDP), recognized as an Undiagnosed Disease Network Diagnostic Center of Excellence, was established in 2020 to provide diagnostic clarity for patients with suspected rare genetic disorders who remain undiagnosed despite extensive clinical testing, including exome sequencing (ES). Through collaboration with clinicians and researchers, we employ advanced genomic technologies to enhance diagnostic precision and uncover novel disease mechanisms. We also aim to advance health equity by reaching underrepresented, rural, and underinsured communities and addressing the social, emotional, and practical challenges of living with undiagnosed diseases.

Methods: The UW-UDP enrolls patients and families into our IRB-approved research study. Enrollees receive short-read and/or long-read genome sequencing (GS), and in some cases RNA sequencing (RNA-seq), optical genome mapping (OGM), and other functional studies.

Results: To date, the UW-UDP has received >250 referrals and has enrolled 120 families. 9% reside in rural areas, and 24% live in highly disadvantaged areas. 91.6% had prior ES without diagnosis. We identified disease-causing variants in 35.4% of analyzed cases. Key findings include: 1) Identification of variants in newly recognized disease genes; 2) Detection of intronic variants through GS; 3) Detection of variants in noncoding RNA; 4) Elucidation of structural rearrangements using long-read GS and OGM; and 5) Functional insights gained from RNA-seq. Notably, the UW-UDP has identified multiple ultra-rare and/or novel disorders associated with pathogenic variants in genes including AFG3L2, AGO1, CAPZA2, EMC1, HECTD1, RNU4-2, SPTAN1, and VPS50 as well as two patients who have two or three rare genetic conditions.

Conclusions: Through a comprehensive, research-driven approach that uses advanced molecular analyses, the UW-UDP has diagnosed over a third of patients suspected of a genetic disorder. Utilizing emerging technologies like long-read GS, RNA-seq, and OGM improves diagnostic rates and enables the practice of precision medicine through tailored genetic counseling and targeted interventions. Looking forward, the UW-UDP aims to expand its reach and impact by integrating new technologies, exploring the impact of social determinants of health on outcomes, and deepening collaboration to set new standards for diagnosing and managing rare diseases.

Optimizing Outpatient Follow-up of Non-Emergent Neonatal Echocardiography by Altering the Role of the Echocardiographer

Forster, E., Hokanson, J., Allen, C.

Background: Neonatal echocardiograms are frequently performed in the newborn nursery and neonatal intensive care unit to identify clinically significant heart disease. However, many of these studies identify issues where need for or timing of follow-up may not be immediately clear to the primary care provider, newborn hospitalist or neonatologist. Although they might not be directly involved in the care of newborns with non-emergent echo findings, the cardiologist reading the echocardiogram might be in the best position to determine optimal follow-up. Traditionally, cardiologists viewed their role in this setting to describe the anatomy but not to provide clinical recommendations unless they were directly involved in the patient's care. In the hopes of optimizing that follow-up care, we chose to use the echocardiogram's report not only to describe the anatomy, but also to include clinical recommendations for follow-up.

Methods: We chose a plan-do-study-act process commonly recommended for continuing improvement. Baseline data was collected using final newborn echocardiogram reports with non-emergent findings performed in the Newborn Nursery and Neonatal Intensive Care Unit. Babies were excluded if they had any heart disease that would require intervention or weighed less than 2 kilograms at the time of the echo.This data was collected 20 weeks prior to the first intervention, 10 weeks after the first intervention (reporting cardiologists agreement to include follow up recommendations in their report), and 10 weeks after the second intervention (modification of the echo reporting system to include standardized follow-up statements determined by the cardiologists). Providers who order neonatal echocardiograms and the nursing staff charged with coordinating follow-up were surveyed on their satisfaction with the echo reporting process before the first intervention and ten weeks after the second intervention.

Results: The baseline data included 127 echocardiograms that met the indicated criteria, of which 38/127(29.9%) included follow up recommendations. In the ten weeks after the first intervention, 55 echocardiograms met inclusion criteria, of which 30/55(54.5%) included follow up recommendations. In the ten weeks after the second intervention, 85 echocardiograms met inclusion criteria, of which 54/85(63.5%) included follow up recommendations (Table 1).
Although most providers who order neonatal echocardiograms and the scheduling nurses reported overall satisfaction with the echocardiographic reporting process prior to project initiation, their satisfaction did improve after implementation.

Conclusions: In this project we hoped to improve overall care of newborns with non-critical echocardiographic findings by expanding the role of the echocardiographer beyond anatomic description to clinical recommendation. Even with incomplete adoption of clinical recommendations, we were able to show increased satisfaction with the overall echo reporting system among those providers ordering neonatal echocardiograms and those nurses charged with coordinating follow-up care of the babies in question.

Parent Perceptions of Virtual Scribe and Artificial Intelligence (AI) Scribe Use in Pediatric Medical Visits

Pletta, K., Kotleski, K., Stockwell, R., Niedzielak, G., Babal, J., Kerr, B.

Background: Virtual scribes assist physicians with documentation in the electronic medical record (EMR) and are associated with decreased EMR time and improved physician well-being. A gap exists in our understanding of parent perspectives on use of technology-based medical scribe approaches at pediatric medical visits. This study explored parent perceptions of virtual scribe use in past pediatric medical visits and views of potential artificial intelligence (AI) scribe use.

Design/Methods: Semi-structured qualitative interviews were conducted with parents of children ages 0-17 who have pediatrician primary care providers (PCPs) with virtual scribes at a Midwestern clinic system. Purposeful sampling was used to recruit across insurance types, including at least 33% of participants on Medicaid, and to ensure even participant distribution across 11 PCPs. Participants were asked to reflect on perceptions of pediatric visits where the pediatrician worked with a virtual scribe. Participants were also asked about their perceptions of potential AI scribe use. Interviews were conducted by 3 trained interviewers, recorded and transcribed. Thematic analysis was conducted using Dedoose software.

Results: Interviews were completed by 33 participants, including 76% females (Table 1) with mean age 40.30 (SD = 11.33). Two themes emerged regarding virtual scribes. First was Importance of Connection with the Provider. Most participants described how virtual scribe use enhanced this connection and increased focus on the patient, but some noted concerns. In the second theme, Noticeability of the Scribe, participants described low levels of awareness of the virtual scribe and intersections with their comfort. Two themes emerged regarding AI scribes. First was Valuing Human Information Processing, in which many participants described some accuracy and privacy concerns with AI for which they would place greater trust in a human. The second theme was AI as a Reliable Workforce, which involved discussions of decreased cost, bias, and possibility of absence. Representative quotes are shown in Table 2.

Conclusions: Parents often described enhanced pediatrician connection and focus on the patient at visits with virtual scribe presence. Regarding AI scribes, it would be helpful to evaluate parents' experiences, such as with accuracy and privacy issues, to guide best practices.

Poster Presentations

Thursday, May 15 | 2:30 – 4:30 p.m. | HSLC Atrium

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Altiti DJ, **Blanchar JM**, Lui NN, Salemi SE, Hu R, Marro SG, Webb BD

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Poster #5
Understanding Yoga Videos on TikTok: How Useful Are They?
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Poster #6
Sex Differences in Hippocampal and Plasma Neurosteroids Following Neonatal Hypoxia Ischemia
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Poster #10
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Poster #11
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Poster #12
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Poster #13
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Poster #14
MRI Injury Patterns Following Severe Traumatic Brain Injury in Children
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Poster #15
An Adaptive Framework for Machine Learning Assisted Brain Tissue Segmentation
Casey C, Grimaldo A, De Abreu E, Gouvea A, Sutter E, Dean III D, McAdams R, Gillick B

Poster #16
Sleep Disordered Breathing in Edward Syndrome (Trisomy 18) and Patau Syndrome (Trisomy 13)
Chair T, Matthews C, Barreda C, Seaborg K

Poster #17
Impact of a Pediatric Endocrinology Curriculum on Knowledge in Rwandan Residents
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Poster #18
Parenting Newborns: Building Bonds, Breaking Stigma
Clemens J, Caniza R, Ellenbecker C, Mathur M

Poster #19
Interrater Reliability of the Hammersmith Infant Neurological Examination in Infants with Early Brain Injury: Global, Subsection, and Item-Level Analysis Across Age and Severity
Collins KM, Konieczka K, Collins JD, Breuer S, Piper W, Gillick BT

Poster #20
Evaluation of Infant Motor Development Following Perinatal Injury to Somatosensory Versus Motor Cortex
DeGrave P, Gauthier D, Casey C, Gillick B

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Prenatal ZIKV Exposure Does Not Impact the Timing of Primary CMV Infection in a Translational Macaque Model
Eckes F, Shah A, Razo E, Krabbe N, Hayes J, Mohr E

Poster #23
Outcomes Following Non-Invasive Respiratory Support Failure in Moderate Preterm Infants
Elliott J, Brady J, Christensen M, Wentela K, Eickoff J, Peebles P, Kaluarachchi D

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The Sexually Differential Role of Ntrk2 in the Survival and Function of the Hippocampal Somatostatin Expressing Interneurons Following Neonatal Hypoxia-Ischemia
Erkus YC, Bicki E, Camci F, Cetin F, Cagatay NS, Yildirim M, Valdes-Arciniega TJ, Yapici S, Sousa A, Risgaard R, Ferrazzano P, Cengiz P

Poster #25
Social Media Use Motivations and Activities in Adolescent Well-Being: A Longitudinal Study of Low-SES Youth
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Association of Host CDHR3 rs6967330 Genotype with Rhinovirus Infections in Children from 1997-2018
Gao Y, Choi T, Devries M, Tetreault K, Gangnon R, Bacharier L, Busse W, Camargo C, Cohen R, DeMuri G, Fitzpatrick A, Gergen P, Grindle K, Gruchalla R, Hartert T, Hasegawa K, Hershey G, Holt P, Homil K, Jartti T, Kattan M, Kercsmar C, Kim H, Laing I, Le Souef P, Liu A, Mauger D, Pappas T, Lee K, Patel S, Phipatanakul W, Pongracic J, Seroogy C, Sly P, Tisler C, Wald E, Wood R, Lemanske R, Jackson D, Bochkov Y, Gern J, Wilson J

Poster #27
Baby Badger Network: Implementation of Genomic Testing in Neonatal Intensive Care Units Across Wisconsin
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Poster #28
Respiratory Illness During the First Two Years of Life and Relationship to Agrarian Lifestyle
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Poster #29
Adolescents and Young Adults' Mental Health Posts on Social Media
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Poster #30
Palliative Care Through the Eyes of Children with Kidney Disease: A Cross-Sectional Survey
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Hubbard S, Liu N, Grunow I, Lamming D, Webb BD

Poster #32
When Your Treatment Seems to Be Working, Don't Be Too Sure
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Poster #33
Exploring the Relationship Between Central-Line Associated Bloodstream Infections and Line Maintenance Bundle Compliance at American Family Children's Hospital
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Poster #34
Yoga Videos on TikTok: Are They Useful for Learning?
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Poster #35
Fever, Pain, and a Foggy Mind: A Case of Staphylococcus Simulans Pyelonephritis
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Poster #36
The Association of Socioeconomic Status and Neighborhood Characteristics with Skin Barrier Integrity and Atopic Dermatitis in Infancy
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Poster #37
Mpox Virus (MPXV) Vertical Transmission and Fetal Demise in a Pregnant Rhesus Macaque Model
Krabbe N, Mitzey A, Razo E, Zeng X, Bekiares N, Moy A, Kamholz A, Daggett G, VanSleet G, Morgan T, Capuano S, Simmons H, Basu P, Weiler A, Friedrich T, Mohr E

Poster #38
Central Venous Catheter Complications and Practice Variation in Patients Following the Glenn Operation
Leopold S, Hagen S, Munjal N, Wilhelm M, Al-Subu A

Poster #39
MARS2 Deficiency Impairs Neurogenesis and Oxidative Phosphorylation in a hiPSC Model of COXPD25
Liu NN, Hu R, Salemi SE, Marro SG, Webb BD

Poster #40
Optimizing Paraformaldehyde Inactivation for IFN-γ ELISpot Analysis in MPXV-Infected Pregnant Rhesus Macaques
Lutz S, Krabbe N, Mitzey A, Mohr E

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