

Pediatrics QuickREF for 2026 Learning Objectives

** Learning Objective 29: Coagulation Disorders

Page 23, Deep Dive > Management

<i>Text currently reads:</i>	<i>Text should read:</i>
<ul style="list-style-type: none"> Hemophilia A and B—factor replacement cornerstone: 	<ul style="list-style-type: none"> Hemophilia A and B—factor replacement is cornerstone:

** Learning Objective 03: Eating Disorders

Page 68, Deep Dive > Evaluation

<i>Text currently reads:</i>	<i>Text should read:</i>
<ul style="list-style-type: none"> Obtain amenstrual history. Inquire about medication substance use (including ipecac), water loading, and a history of syncope or stress fractures. 	<ul style="list-style-type: none"> Obtain a menstrual history. Inquire about medication substance use (including ipecac), water loading, and a history of syncope or stress fractures.

* Learning Objective 39: Gender-Diverse Care

Page 94, Quick Quiz

<i>Text currently reads:</i>	<i>Text should read:</i>
<p>Questions</p> <ol style="list-style-type: none"> When do many youth first voice gender related distress in US practice? A 15-year-old reports school bullying and family nonacceptance. What should this prompt at the visit? If puberty suppression starts before natal puberty and is followed directly by gender-affirming hormones, what must be discussed beforehand? What is gender dysphoria? A 14-year-old asks you to use a different name and pronouns; how should you proceed in conversation and documentation? What minimum SMR stage is required before initiating puberty blockers (gonadotropin-releasing hormone [GnRH] analogs)? Should you order labs or imaging to diagnose gender dysphoria? A teen discloses active suicidal ideation with a plan. What is the appropriate next step? What bone health measures should accompany counseling for youth on puberty blockers? 	<p>Questions</p> <ol style="list-style-type: none"> When do many youth first voice gender related distress in US practice? A 15-year-old reports school bullying and family nonacceptance. What should this prompt at the visit? If puberty suppression starts before natal puberty and is followed directly by gender-affirming hormones, what must be discussed beforehand? What is gender dysphoria? What are the effects of gender-affirming hormones? A 14-year-old asks you to use a different name and pronouns; how should you proceed in conversation and documentation? What minimum SMR stage is required before initiating puberty blockers (gonadotropin-releasing hormone [GnRH] analogs)? Should you order labs or imaging to diagnose gender dysphoria? A teen discloses active suicidal ideation with a plan. What is the appropriate next step?

<p>10) Parents request “conversion therapy” to change their teen’s gender identity. What should you advise?</p> <p>11) What are the typical age thresholds for gender-affirming surgeries?</p>	<p>10) What bone health measures should accompany counseling for youth on puberty blockers?</p> <p>11) Parents request “conversion therapy” to change their teen’s gender identity. What should you advise?</p> <p>12) What are the typical age thresholds for gender-affirming surgeries?</p>
--	--

**** Learning Objective 18: Immunizations**
Page 119, Deep Dive > Vaccination Schedule

<p><i>Text currently reads:</i></p> <ul style="list-style-type: none"> 2, 4, and 6 months of age: Give DTaP vaccine and either PCV15 or PCV20. 	<p><i>Text should read:</i></p> <ul style="list-style-type: none"> 2, 4, and 6 months of age: Give DTaP and IPV vaccine and either PCV15 or PCV20 (the 3rd dose of IPV can be given between 6-18 months.
---	--

**** Learning Objective 18: Immunizations**
Page 119, Deep Dive > Vaccination Schedule

<p><i>Text currently reads:</i></p> <ul style="list-style-type: none"> Give 2 doses, separated by ≥ 4 weeks, in children 6 months to 8 years of age who have received < 2 doses prior to July 1, 2025. 	<p><i>Text should read:</i></p> <ul style="list-style-type: none"> Give 2 doses, separated by ≥ 4 weeks, in children 6 months to 8 years of age who have received < 2 doses prior to July 1st of the given year.
---	--

*Learning Objective 26: Neonatal Cyanosis/Respiratory Distress

Page 164, Deep Dive > Evaluation > Table 1

Table currently shows:

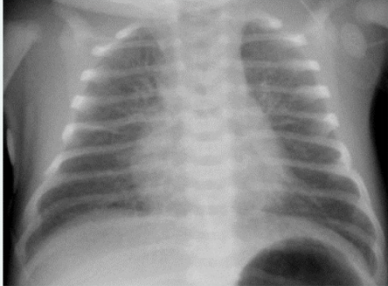



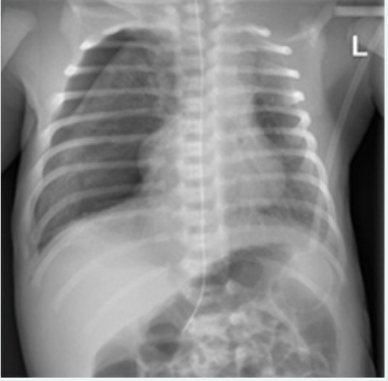

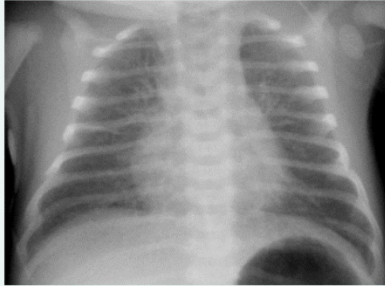


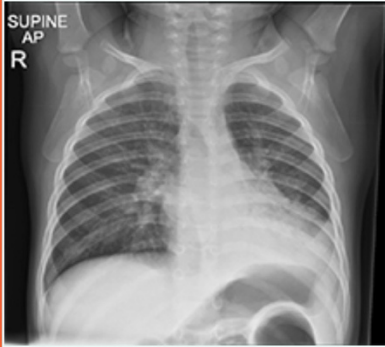
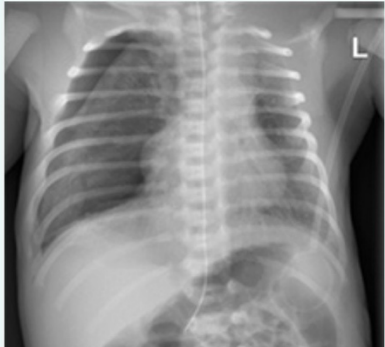

Table 1: Chest X-Ray Features of Neonatal Pulmonary and Cardiac Disease		
Pulmonary Causes		
 <p>Transient Tachypnea of the Newborn Source: MedStudy archives</p>	 <p>Respiratory Distress Syndrome Source: MedStudy archives</p>	 <p>Meconium Aspiration Syndrome Source: MedStudy archives</p>
 <p>Pneumonia (left lower lobe) Source: Hellerhoff, CC BY-SA 3.0</p>	 <p>Pneumothorax (right) Source: Hellerhoff, CC BY-SA 4.0</p>	 <p>Congenital Diaphragmatic Hernia (left) Source: Hellerhoff, CC BY-SA 4.0</p>

Table should show:

Table 1: Chest X-Ray Features of Neonatal Pulmonary and Cardiac Disease		
Pulmonary Causes		
 <p>Transient Tachypnea of the Newborn Source: MedStudy archives</p>	 <p>Respiratory Distress Syndrome Source: MedStudy archives</p>	 <p>Meconium Aspiration Syndrome Source: MedStudy archives</p>
 <p>Pneumonia (left lower lobe) Source: Medstudy archives</p>	 <p>Pneumothorax (right) Source: Hellerhof, CC BY-SA 4.0</p>	 <p>Congenital Diaphragmatic Hernia (left) Source: Hellerhof, CC BY-SA 4.0</p>

**** Featured Reading 04: Opioid Prescribing**

Page 268, Deep Dive > Introduction

Text currently reads:	Text should read:
<ul style="list-style-type: none"> The guideline provides 12 key action statements based on evidence from randomized controlled trials, high-quality observational studies, and expert opinion. 	<ul style="list-style-type: none"> The guideline provides 9 key action statements based on evidence from randomized controlled trials, high-quality observational studies, and expert opinion.

***These changes have been updated in the digital product.**

****These changes have been updated in both the digital and audio products.**