

Advancing the science and practice of regional anesthesia and pain medicine



ASRA-ASA Ultrasound-Guided Regional Anesthesia Education Portfolio Cadaver Course

Saturday, November 7—Sunday, November 8, 2015 Northwestern Center for Advanced Surgical Education (N-CASE), Chicago, IL

COURSE GUIDE

Course Overview

This course is a two-day learning opportunity with a strong practical focus delivering information of take-home value that can be put to immediate benefit in clinical practice. During this intensive weekend, each topic is covered with an introductory lecture followed by extensive opportunity for hands-on practice using live models and cadavers. Attendees are supported by expert clinicians who share their knowledge and experience in this interactive, small group learning environment.

Highlights

- · Cadaver and live model hands-on and highly interactive educational formats
- Limited to 70 attendees in working groups of maximum 7
- Renowned faculty
- Comprehensive course curriculum
- Approved ABA® MOCA® Self-Assessment Activity
- Satisfies requirements for the ASRA-ASA Ultrasound-Guided Regional Anesthesia (UGRA) Education and Clinical Training Portfolio

Educational objectives

After participating in this educational activity, participants should be able to:

- Discuss the basic principles of ultrasound imaging, equipment, functionality, aseptic technique, and local anesthetic selection for ultrasound-guided regional anesthesia.
- Identify and describe the surface and ultrasound anatomy.
- Apply peripheral nerve block ultrasound scanning and needling techniques.
- Perform peripheral nerve blocks with superior dexterity.
- Assess billing and economic issues related to ultrasound-guided regional anesthesia.
- Fulfill knowledge base and technical skills requirements for the Ultrasound-Guided Regional Anesthesia (UGRA) Education and Clinical Training Portfolio.
- Claim ABA MOCA self-assessment CME credit.

Target audience

This course is designed for physician regional anesthesia practitioners currently using or wishing to use ultrasound technology in the administration of regional nerve blocks. The course is designed to meet the varied educational needs from those just starting to use ultrasound-guidance in regional anesthesia to the more practiced clinician with a broader experience base.



Top 5 Course Essentials

Locations

Educational Sessions
Northwestern Center for Advanced
Surgical Education (NCASE)
240 East Huron Street

Chicago, IL 60611 Tel: 312.503.4034

Recommended Hotel

Hyatt Chicago Magnificent Mile 633 North Saint Clair Street Chicago, IL 60611

Tel: 312.787.1234



NCASE Security Access

Everyone entering the NCASE building must be preregistered; on-site registration is not possible. Attendees must show photo ID on arrival and have a picture taken onsite to receive an access badge. The NCASE building will be accessible beginning at 7 am each morning.

Educational Materials and Presentations

Educational support materials are available to learners on the <u>ASRA website</u> and accessible with the password <u>ASRACCRA15</u>. Materials are available to meeting participants prior to, during, and after the meeting (up to one year) for educational purposes only. Access to particular content is provided based on meeting registration and is password protected. Distribution is limited, and none of the materials should be further distributed or reproduced.

Evaluations and CME Certificates

Your opinion matters! Evaluate sessions and faculty and obtain your CME certificate by accessing the online system before **November 23rd** at www.surveymonkey.com/r/ASRACCRA15. See page 12 for more information on CME credits and certificates.

Attendance Policies

- Registration fees are refundable, minus a \$100 processing fee, if cancellation is received in writing no later than three (3) weeks prior to the event commencement. After this date, under no circumstances will refunds or credits be granted.
- Attendee substitutions are allowed if notification is made in writing no later than three (3) weeks prior to the event commencement. A \$100 processing fee will be charged. After this date, under no circumstances will substitutions be granted.
- No refunds or credits will be given to "no shows."
- All event activities (including educational sessions, meal functions, exhibit hall, etc.) are exclusively
 reserved for registered attendees. Nonregistered guests (e.g., children, family members, colleagues) are
 not allowed in event areas. Badges provided at registration are required for entrance into all functions and
 will be strictly enforced.
- ASRA reserves exclusive rights to photograph and/or record (audio and video) all event proceedings and
 participants for use in marketing materials, presentations, and course content reproductions (online or
 other). Photography and/or recording by individuals is not permitted in the scientific, educational, and
 business meetings during any ASRA event, unless specifically preauthorized by ASRA. Individuals granted
 such privileges shall be properly registered at the event and issued the proper proof of privileges (press
 badge or other).
- ASRA reserves the right to modify the event's schedule or program as necessary. ASRA reserves the right
 to cancel this event, in which case a full refund of the registration fee will be provided. ASRA is unable to
 refund any attendee expenses (flight, hotel, etc.) in the case of ASRA cancellation.
- ASRA and meeting organizers accept no liability for personal accidents or loss of or damage to private property of participants, either during or indirectly arising from this workshop. Participants are advised to take out their own personal health and travel insurance for their trip.
- ASRA fully complies with the legal requirements of the Americans with Disabilities Act and the rules and regulations thereof. If any participant in this educational activity has a special need, please contact us at the American Society of Regional Anesthesia and Pain Medicine, 239 Fourth Avenue, Suite 1714, Pittsburgh, PA 15222, 855.795.ASRA (toll free in U.S.), 412.471.2718, asrameetings@asra.com.



ASRA Leadership

Leadership

President: Oscar A. de Leon-Casasola, MD **President-Elect:** Asokumar Buvanendran, MD

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Brian Sites. MD

Oscar de Leon-Casasola, MD (ex-officio)

Scientific/Education Planning Committee

Timur J.P. Ozelsel, MD, DESA, University of Alberta, Edmonton, Alberta, Canada Ban Tsui, MD, University of Alberta, Alberta Canada

Course Faculty



Derek Dillane, MB BCh, FCARCSI

Derek Dillane, MB BCh, FCARCSI, joined the University of Alberta in 2006 where he completed a Clinical and Research Fellowship in regional anesthesia. He is currently an associate professor at the University of Alberta and director of the fellowship program in regional anesthesia and pain medicine. His clinical research interests involve the use of ultrasound in regional anesthesia with a particular focus on education and training techniques. He has taught and led ultrasound-guided regional anesthesia in numerous workshops in the United States and Canada for both ASRA and the Canadian Anesthesiologists' Society (CAS). He is

currently the chair of the Regional Anesthesia Section of the CAS.

Carlo Franco, MD



Carlo Franco, MD, is the chairman of Regional Anesthesia at JHS Hospital of Cook County Chicago and professor of Anesthesiology and Anatomy at Rush University Medical Center, Chicago, IL. Dr. Franco received his degree in General Surgery and Anatomy from the University of Valparaiso in Chile. He immigrated to the USA in 1985 and served as visiting professor of Anatomy at the Medical College of Ohio in Toledo, OH, 1985-86 and 1988-89. Dr. Franco completed his Anesthesiology Residency at Sinai Hospital of Detroit, Detroit, MI, 1990-94, and was recruited to Cook County Hospital of Chicago (now JHS Hospital of Cook County) by Dr. Alon Winnie in 1994. He has introduced some new anatomy-based nerve

block techniques.





Andrew Gray, MD, PhD

Andrew Gray, MD, PhD, is professor of Clinical Anesthesia at the University of California, San Francisco where he directs the regional anesthesia program at San Francisco General Hospital. He has written over 20 articles on ultrasound guided regional anesthesia, two textbooks, and now pursues investigations on safety with the help of the Carl Koller Research Award from ASRA.



Antoun Nader, MD

Antoun M. Nader, MD, is a professor in the department of anesthesiology and orthopedics at the Feinberg School of Medicine, Northwestern University in Chicago, IL. He is the section chief for regional anesthesia and acute pain management at Northwestern Memorial Hospital and the medical director for acute pain medicine. He is also the fellowship co-director for the adult and pediatric regional anesthesia and acute pain management fellowship at McGaw Medical center, Northwestern University. Dr Nader is board certified

in anesthesiology, with a subspecialty certification in pain management. He is a member of the American Society of Anesthesiology, ASRA, and the Association of University Anesthesiologists. With interests in neuroanesthesiology and pain management, he is engaged in numerous activities, including authorship, editorial work, grant review, lecturing for many societies. During his medical career in pain management, he has authored and coauthored more than 150 original peer-reviewed articles, editorials, reviews, books, commentaries, case reports and technical notes. He is very involved in the development of Institutional Pathways for regional anesthesia and pain management protocols that have resulted in publications in major anesthesia journals.



Timur Ozelsel, MD, DESA

Timur Ozelsel, MD, DESA, the son of a Turkish father and a German mother, was born in Baton Rouge, LA, and grew up in between the USA and Germany. All of his medical training as well as fellowships in ICU and Cardiac Anesthesia were completed in Germany before moving to Canada in 2007. Dr. Ozelsel is now enjoying a great practice in his two other fellowships, regional anesthesia and liver transplantation. He is happily married and father of three healthy and energetic children, all of who are his main passion in life when he is not at work.



Francis Salinas, MD

Francis Salinas, MD, has been at Virginia Mason Medical Center since 1998. He is board certified in anesthesiology, internal medicine, and perioperative trans-esophageal electrocardiography. He is fortunate and grateful to be able to practice both regional anesthesia and cardiac anesthesia on a daily basis. He was fortunate to learn regional anesthesia from some of the giants of the specialty, such as Dr. Gale Thompson, Dr. Manni Batra, Dr. Mike Mulroy, and Dr. Joseph Neal. Through their love of regional anesthesia and mentorship, he has learned the foundations of anatomy and physiology, pharmacology, and evidenced-based medicine.

Dr. Salinas believes that regional anesthesia provides tremendous perioperative benefits to patients in terms of better analgesia, decreased opioid related side effects, and enhanced functional recovery, and

it contributes significantly to decreases in perioperative morbidity and perhaps even decreases in mortality. The appropriate application of perioperative regional anesthesia also provides tremendous benefits to the specialty. By providing state-of-the-art analgesia, physicians are able to contribute to the concept of the perioperative surgical home and clearly increase the visibility and importance as true perioperative physicians.

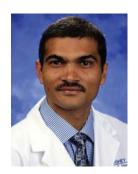


Santhanam Suresh, MD

Santhanam Suresh, MD, is chair of the Department of Anesthesiology and Director of the Pain Management Team at Ann & Robert H. Lurie Children's Hospital of Chicago. He is an Arthur C. King Professor of Anesthesiology and Pediatrics at Northwestern University Feinberg School of Medicine. Dr. Suresh received his medical degree from the University of Madras in India. He completed his residency in pediatrics at Cook Country Hospital in Chicago, residency in anesthesiology at Loyola University Medical School in Chicago, and fellowship in pediatric anesthesiology at Children's Memorial Hospital in Chicago. His major

area of research is in postoperative pain control and management of chronic pain in children and adolescents. He is internationally recognized for his innovations in the use of nerve blocks for postoperative pain control in infants and children.





Sanjib Das Adhikary, MD

Sanjib Das Adhikary, MD is an anesthesiologist with a Fellowship in Acute Pain and Regional Anesthesia. He deals with regional anesthesia procedures and acute pain management cases daily in his clinical practice. He teaches ultrasound guided regional anesthesia to residents and faculty regularly as a part of his daily job and also during different workshops. Since 2009 he has been an instructor for advanced ultrasound guided regional Anesthesia workshops at ASRA meetings and Canadian Anesthesiologists' Society annual meetings. He is also academic coordinator for the annual ultrasound guided regional anesthesia cadaver

course organized by Department of Anesthesiology, Penn State College of Medicine in Hershey, PA. He enjoys learning and sharing the knowledge of ultrasound-guided procedures.



Adam Amundson, MD

Adam Amundson, MD, attended medical school at the University of Minnesota and residency and fellowship in regional anesthesia at Mayo Clinic in Rochester, MN. As a Mayo Clinic anesthesiology consultant, his educational interests involve the development of an online curriculum to improve preprocedural education and technical skill advancement among residents learning regional anesthesia. He has also been active in teaching ultrasound-guided workshops at the annual ASA meeting and other conferences. In his free time, he enjoys spending time with his wife and two little boys.





Gregory Applegate, DO

Gregory Applegate, DO, is an assistant professor of Anesthesiology at the Case Western Reserve University School of Medicine and is an anesthesiologist at University Hospitals Case Medical Center. He received his osteopathic medical degree from the Ohio University College of Osteopathic Medicine and completed his anesthesia residency at University Hospitals Case Medical Center. Dr. Applegate completed a fellowship in Regional Anesthesia and Acute Pain Medicine at Walter Reed Army Medical Center. He has participated in numerous regional anesthesia and cadaver-based anatomy workshops.



Sara Suk Kwan Cheung, MBBS

Sara Cheung, MBBS, is an associate consultant in Pamela Youde Nethersole Eastern Hospital in Hong Kong. Graduating from the University of Hong Kong in 2004, she completed her anesthesia residency training and became a fellow of the Hong Kong College of Anaesthesiologists in 2011. In 2014, she came to the University of Alberta to complete a Regional Anesthesia Fellowship program, during which she acquired extensive experience on peripheral and neuraxial blocks. She also assisted in the publication of two peer-reviewed letters and three book chapters for a book on regional anesthesia, as well as several chapters for

another upcoming regional anesthesia textbook.



Sean Dobson, MD, PhD

Sean Dobson MD, PhD, is an assistant professor of Anesthesiology at Wake Forest University School of Medicine. He completed his residency and fellowship in regional anesthesia at Duke University Medical Center. He served in the United States Navy at Naval Medical Center Portsmouth, where he was the Division Officer of Acute Pain Management assisting in the care of wounded warriors. He was deployed to Afghanistan as a forward resuscitative Anesthesiologist in 2012 in support of Operation Enduring Freedom. He was chosen by the anesthesiology residents at Wake Forest to receive the 2015 Golden Apple Teaching Award.



Michael Foss, FANZCA, FFPMANZCA

Michael Foss, MBChB, FANZCA, FFPMANZCA, completed his anaesthetic training in New Zealand (Dunedin/Waikato) and Australia (the Alfred hospital) in 2014. He was a regional anaesthesia fellow at Waikato Hospital in 2013 and completed his Pain Medicine physician training in 2015. Currently, Dr. Foss is working as the regional anaesthesia and acute pain medicine fellow at the University of Alberta, and he has been appointed director of the Waikato Inpatient Pain Service commencing August 2016.



Justin Long, MD, FAAP

Justin Long, MD, FAAP, is an instructor in Pediatric Anesthesiology at Ann & Robert H. Lurie Children's Hospital of Chicago and serves on the regional anesthesia team within his department. He is most interested in safety of regional anesthesia in children, particularly as it relates to performance of regional anesthesia in the sleeping patient. He has done work the Pediatric Regional Anesthesia Network database to expand understanding of regional anesthesia in the pediatric population.





Jason McVicar, MD, FRCPC

Jason McVicar, MD, FRCPC, completed his medical training at the University of Manitoba and Anesthesiology residency training at the Queen's University. He completed a fellowship in Regional Anesthesia and Pain Medicine at Toronto Western Hospital. He is a staff anesthesiologist at The Ottawa Hospital affiliated with the University of Ottawa. He specializes in the use of ultrasound-guided regional anesthesia in the management of acute and pain. He has an interest in global health and has worked for Médecins Sans Frontières.



Kristopher Schroeder, MD

Dr. Kristopher Schroeder, MD, serves as associate professor and director of Regional Anesthesia and Acute Pain Management at the University of Wisconsin School of Medicine and Public Health. His areas of research interest include perioperative acute pain management, regional anesthesia, airway management, thermoregulation, and education.



Rakesh Sondekoppam, MD

Rakesh Sondekoppam, MD, is on the faculty in the Department of Anesthesiology and Perioperative Medicine at the Western University, London, Ontario, Canada. He joined the department as faculty after completing two years of fellowship training in regional anesthesia. He is currently an active member of the regional anesthesia and acute pain service team and continues to be involved in resident and fellow training at the London Health Sciences Centre.



Heather Ting, MD

Dr. Ting's MD was conferred by Dalhousie University, Halifax, Nova Scotia, followed by her anesthesia residency at Memorial University in St. John's, Newfoundland. Subsequently, she moved to Edmonton, Alberta to acquire pediatric and regional anesthesia fellowships. She has since been practicing in Edmonton. Besides working full time, she is involved in the residency training committee for regional anesthesia at University of Alberta. Outside of her professional work, she loves travelling, scuba diving, and horse back riding.



Ban Tsui, MD (planning committee only)

Ban Tsui, MD, has the primary interest and objective of his research to transform regional anesthesia from an "art" into a reliable and reproducible "science" by further exploring the basic scientific and clinical aspects of electrophysiological signal monitoring and integrating this with the latest advances in ultrasound. Dr. Tsui has a strong interested in mentoring and motivating residents and anesthesiologists fellows to incorporate research into their clinical practice. Dr. Tsui has received Clinical Scholar funding from the Alberta Heritage Foundation for Medical Research (AHFMR) since 2002. Dr. Tsui is the recipient of the 2014 Dr. R.A. Gor-

don Research Award from the Canadian Anesthesiologists' Society (CAS). He has previously received funding from the Canadian Institutes of Health Research (CIHR) and multiple awards from CAS.



Disclosure and Resolution of Personal Conflicts of Interest

activities. Those in control of the educational content disclose all relevant relationships (financial or other) with any commercial interest that they or their spouse/partner have had within the past In accordance with the ACCME's Standards for Commercial Support and related policies, ASRA is committed to ensuring balance, independence, objectivity, and scientific rigor in its CME/CPD 12 months. If an individual refuses to disclose, they are disqualified from participating. Disclosure information is evaluated and conflicts of interest resolved. Disclosure is made to participants prior to the activity. Participants are asked to evaluate the objectivity and independence. Off-label or investigational use of a therapeutic product is also disclosed.

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Course Program

Saturday, I	November 7, 2015	
7:00 am	Registration and Breakfast	
7:15 am 7:20 am 7:40 am	Welcome and Introduction Lecture: Basic Ultrasound and Needling Approaches Day 1 Pre-Test: Upper and Lower Extremity Blocks	Timur Ozelsel, MD Andrew Gray, MD Timur Ozelsel, MD Derek Dillane, MD
8:00 am	Lecture: Sonoanatomy and Techniques for Upper and Lower Blocks	Santhanam Suresh, MD
9:30 am	Break and Group Assignment Learners will be in small working groups categorized as A or B. The course struenables all learners to address each focused content area via both hands-on livescanning and cadaver needling.	
9:45 am	Group A: Hands-On Live Model Scanning (sonoanatomy) Group B: Cadaver and Meat Phantom Needling (single shot and selected continuou catheter techniques) and Anatomy Station	S
	1st Rotation: Upper Extremity Above Clavicle: Interscalene, Supraclavicular 2nd Rotation: Upper Extremity Below Clavicle: Infraclavicular, Axillary	
10:55 am	Break to Next Station	
11:00 am	Group A: Hands-On Live Model Scanning (sonoanatomy) Group B: Cadaver and Meat Phantom Needling (single shot and selected continuou catheter techniques) and Anatomy Station	S
	1st Rotation: Lower Extremity Supine Position: Femoral, Saphenous, Ankle 2nd Rotation: Lower Extremity Prone Position: Sciatic, Popliteal	
12:15 pm	Lunch Lecture: Ultrasound Physics, Artifacts, Pitfalls, and Complications Part 1	Andrew Gray, MD
1:15 pm	Group A: Cadaver and Meat Phantom Needling (single shot and selected continuous catheter techniques) and Anatomy Station Group B: Hands-On Live Model Scanning (sonoanatomy)	
	1st Rotation: Upper Extremity Above Clavicle: Interscalene, Supraclavicular 2nd Rotation: Upper Extremity Below Clavicle: Infraclavicular, Axillary	
	Break to Next Station	
2:30 pm	Group A: Cadaver and Meat Phantom Needling (single shot and selected continuous and Anatomy Station Group B: Hands-On Live Model Scanning (sonoanatomy)	s catheter techniques)
	1st Rotation: Lower Extremity Supine Position: Femoral, Saphenous, Ankle 2nd Rotation: Lower Extremity Prone Position: Sciatic, Popliteal	
3:45 pm	Break	
4:00 pm	Lecture: Clinical Applications and Evidence Based Medicine in Ultrasound Regional Anesthesia for Upper and Lower Extremity Blocks	Francis Salinas, MD
6:00 pm	Day 1 Post-Test and Q&A: Upper and Lower Extremity Blocks	Timur Ozelsel, MD Derek Dillane, MD
6:15 pm	Day 1 Adjournment	



7:00 am	Breakfast Lecture: Ultrasound Physics, Artifacts, Pitfalls, and Complications Part 2	Andrew Gray, MD								
7:30 am	Day 2 Pre-Test: Truncal Blocks	Timur Ozelsel, MD Derek Dillane, MD								
7:45 am	Lecture: Sonoanatomy and Techniques for Truncal and Parvertebral Blocks	Derek Dillane, MD								
8:45 am	Group A: Hands-On Live Model Scanning (sonoanatomy) Group B: Cadaver and Meat Phantom Needling (single shot and selected continuous catheter techniques) and Anatomy Station									
	1st Rotation: Ilioinguinal, Lateral Femoral Cutaneous Nerve Block, Transversus Abdom Rectus Sheath Block 2nd Rotation: Paravertebral Blocks	inis Plane (TAP),								
10:15 am	Break to Next Station									
10:20 am	Group A: Cadaver and Meat Phantom Needling (single shot and selected continuous ca and Anatomy Station Group B: Hands-On Live Model Scanning (sonoanatomy) 1st Rotation: Ilioinguinal, Lateral Femoral Cutaneous Nerve Block, Transversus Abdom									
	Rectus Sheath Block 2nd Rotation: Paravertebral Blocks	illis Flane (IAF),								
11:50 am	Break									
12:00 pm	Lunch Lecture: Clinical Applications and Evidence Based Medicine in Ultrasound Regio Truncal and Paravertebral Blocks	nal Anesthesia for Antoun Nader, MD								
1:30 pm	Day 2 Post-Test and Q&A: Truncal Blocks	Timur Ozelsel, MD Derek Dillane, MD								
2:00 pm	Billing and Documentation in Different Jurisdictions Andrew Gray, MD (California) Santhanam Suresh, MD (Illinois) Francis Salinas, MD (Washington) Timur Ozelsel, MD (Canada)									



Continuing Medical Education/Continuing Professional Development

To receive your CME certificate:

- 1. Access the online system before **November 23rd** by visiting <u>www.surveymonkey.com/r/ASRACCRA15</u>.
- 2. Complete the anonymous online evaluation.
- 3. Indicate the number of hours you attended (credit will be verified against registration).
- 4. Your certificate will be sent to the e-mail address provided within 2 weeks of completing the online process.
- 5. Thank you for your feedback!

Accreditation and Credit Designation Statements

ASRA is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.



ASRA designates this live activity for a maximum of 17 AMA PRA Category 1 CreditsTM. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Credit Breakdown

Day	Maximum Credits
Saturday	10
Sunday	7
Total Credits:	17

The American Board of Anesthesiology (ABA)

Self-Assessment CME Credits: This activity helps fulfill the self-assessment CME requirement for Part II of the Maintenance of Certification in Anesthesiology Program (MOCA) of The American Board of Anesthesiology (ABA). Please consult the ABA website, www.theABA.org, for a list of all MOCA requirements.



Maintenance of Certification in Anesthesiology Program® and MOCA® are registered certification marks of The American Board of Anesthesiology.®

Credit Reporting to the ABA: ASRA is an ABA approved provider and as a service to ASRA members and participants, CME credits are reported to the ABA. Participants must include their correctly formatted ABA ID number (3456-7890) during the online evaluation and credit claim process available at the conclusion of the activity. Once the online evaluation and credit claim process is closed, certificates will be issued and credits reported to the ABA. After this time, participants may request their CME certificate by contacting <u>asrameetings@asra.com</u>, but ASRA will no longer report credits to the ABA, which will then be the individual participant's responsibility.

ASRA-ASA Ultrasound-Guided Regional Anesthesia (UGRA) Education and Clinical Training Portfolio

The Ultrasound-Guided Regional Anesthesia Education and Clinical Training Portfolio is a joint ASRA - ASA initiative designed for anesthesiologists who wish to distinguish themselves in the field and provide evidence of training and experience. The portfolio guides participants through a comprehensive educational and training experience that fulfills current recommendations for ultrasound-guided regional anesthesia (UGRA). This ASRA course has been approved for knowledge base and technical skills components of the portfolio. For more information and approved sessions, visit the <u>ASA website</u>.



International Credits

The Royal College of Physicians and Surgeons of Canada has agreements based on the mutual recognition of credit points with the American Medical Association for live educational events. You may submit your CME certificate directly for credit recognition of this accredited group learning activity (Section 1) as defined by the Maintenance of Certification program of The Royal College of Physicians and Surgeons of Canada. For more information, visit: www.royalcollege.ca

European Accreditation Council for Continuing Medical Education (UEMS-EACCME): The UEMS-EACCME has agreements based on the mutual recognition of credit points with the American Medical Association for live educational events. Each medical specialist should claim only those hours of credit that he/she actually spent in the educational activity. The EACCME is an institution of the European Union of Medical Specialists (UEMS): www.uems.net

Commercial Support Disclosure

This course is supported, in part, by educational grants and in-kind support from industry. All support is managed in strict accordance with the ACCME's Standards for Commercial Support. Appropriate acknowledgement of all supporting organizations is made to participants prior to the educational activity in the program guide, on the event website, and with signage during the meeting.

ASRA would like to thank the following companies for their generous support.

Educational Grants

B. Braun Medical FUJIFILM Sonosite GE Healthcare Halyard Health

In-Kind Support — Durable Equipment

GE Healthcare FUJIFILM Sonosite

In-Kind Support — Disposable Supplies

Pajunk Teleflex



Guidelines Regarding Industry Representative Participation and In-Kind Support

Industry Support

This course is supported, in part, by in-kind contributions from industry (donations of durable equipment and/or disposable supplies). ASRA would like to thank all the companies for their support of this educational activity.

Disclosure

Attendees may view the full list of supporting companies in the printed program guide and activity website.

Industry Representative/Technician Participation

In addition to the in-kind support provided, ASRA has requested that technicians from multiple supporting companies be present to demonstrate the operational aspects and proper functioning of the devices only.

Strict Compliance with the ACCME's Accreditation Criteria and Standards for Commercial Support

- 1. ASRA is responsible for all decisions regarding the educational elements (planning, content, faculty selection, presentation, evaluation, etc.). Industry representatives in no way influence any portion of the CME activity; including how the in-kind support will be used or allocated to the educational sessions.
- 2. Industry employees shall be easily identifiable by their company and meeting badges.
- 3. The industry representative shall only contribute technical information about the use of the equipment.
- 4. The industry representative shall NOT expand their input into areas of clinical medicine, such as:
 - a. No indications for use
 - b. No comparisons between competing products
 - c. No comparisons between the device, invasive surgery, and/or medical treatment.
- 5. ASRA's faculty and staff provide strict supervision to ensure proper professional behavior by industry representatives.
- 6. ASRA reserves the right to physically limit the technician's access to the educational setting; requesting the technician's participation only when questions arise or further assistance is needed.

Attendee Feedback

Attendees are encouraged to communicate any concerns of commercial influence or bias directly to faculty, staff members at the registration desk, and via the online evaluation.



Cutting-Edge Information at Your Fingertips Get the ASRA Apps Today!



- Quick access to drugspecific summary information
- Based on the ASRA
 Anticoagulation Evidence Based Guidelines for Regional Anesthesia
- Recommendations based on block and intervention type
- Available for \$3.99



- Search by drug or procedure
- Includes generic and brand names as well as antidepressants & herbals
- Provides mechanisms of action
- Based on the brand new 2015 Guidelines for Pain Procedures
- Available for \$3.99

Praise for ASRA Coags v. 1:

"Great for anyone doing blocks..." mbm29414, April 16, 2014

"Easy to use and has all the rules to live by when you put needles in people for a living. Invaluable." — Em88956, September 25, 2014

"Awesome app! We need more apps like this in the field of medicine." — MD southeast, April 19, 2014



- Quick and easy way to execute a pre-procedure timeout
- Based on ASRA's "A Checklist for Performing Regional Nerve Blocks"
- In-line switching to ASRA Coags Regional
- Access to full PDF publication built in
- Available for \$1.99



- Step-by-step instructions
- Weight-based calculations
- Cyclically timed reminders for pulse recheck, CPR, drug dosing, and more
- Differential path-ways for pulseless and pulsatile toxicity events.
- Available for \$3.99

ASRA Coags Regional, ASRA Coags Pain, and ASRA Timeout are available on iTunes for iOS and Google Play for Android. ASRA LAST is available on iTunes for iOS.

Get the ASRA Apps Bundle and Save!

ASRA Coags Regional, Timeout, and Last on iTunes for just \$7.99.

The information contained in the ASRA apps is based on published data and expert opinion. It is to be used as a recommendation only. Clinical judgment by a physician is required in every situation. User assumes all responsibility for decisions made in concert with the use of apps.

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American Society of Regional Anesthesia and Pain Medicine Advancing the Science and Practice of Regional Anesthesia and Pain Medicine





41st Annual Regional Anesthesiology & Acute Pain Medicine Meeting

March 31-April 2, 2016 | The Roosevelt New Orleans, Louisiana

Submit Your Abstract by December 31st, 2015!

Whether you are new to the field or a seasoned expert, in private or academic practice, the 2016 meeting has something for you! The highly interactive program includes pro/con debates, panel discussions, audience-led sessions, in-depth workshops with low attendee-to-faculty ratios, and fun networking opportunities.

Highlights

- Neuraxial anesthesia in the most difficult patients
- High-fidelity simulation for thoracic epidurals, thoracic paravetebral blocks, & intercostal blocks
- Audience-led session on current practice in a value-based world
- Updates on the new MOCA 2.0 program
- Latest research on new and upcoming drugs
- PBLD topics range from managing oral anticoagulants to building a successful private practice
- Using bedside ultrasound to diagnose acute respiratory complications
- How the perioperative surgical home might fit into your practice
- Much more!