



2012 Scientific Assembly Course Descriptions

Emergency Imaging

Advanced Bedside Echocardiography Lab

MO-13; MO-52 / 3 Hours

Faculty: J. Christian Fox, MD, RDMS, FACEP (Moderator); Seric Cusick, MD; M. Rusty Oshita, MD; Shane M. Summers, MD; Warren Wiechmann, MD

Monday, October 8 / 8:00 AM - 10:50 AM; 3:00 PM - 6:00 PM

Focused cardiac ultrasound is an essential diagnostic test that emergency physicians should be comfortable performing at the bedside. This lab is designed for emergency physicians with a strong fundamental proficiency with EM bedside ultrasound who would like to improve their echocardiography skills. (*This lab is limited to 25 participants.*)

Advanced Radiology Series: Reading a Chest CT Like a Pro

TH-280 / 1 Hour

Faculty: Phillips Perera, MD, RDMS, FACEP

Thursday, October 11 / 9:00 AM - 9:50 AM

Chest CTs have become the radiologic test of choice in the initial evaluation of pulmonary embolus and aortic dissection. The speaker will review an approach to interpreting chest CTs and present cases that will highlight typical and subtle findings that can make the difference in patient management.

Avoiding Unnecessary X-Rays: Evidence-Based Rules for Radiography

WE-244 / 30 Minutes

Faculty: Charlotte Derr, MD, FACEP

Wednesday, October 10 / 4:00 PM - 4:25 PM

Does your patient have a healthy glow after his or her trip to the radiology suite? Have you been as prudent and thoughtful with your radiologic study and plain film requests? The speaker will summarize the strongest evidence to help clinicians understand the high- and low-risk criteria for ordering plain radiographs. Case study examples will incorporate rules for ankle/foot, knee, chest, pelvis, skull, and abdominal radiographs.

Bedside Echocardiography: When Seconds Count

TH-300 / 1 Hour

Faculty: Cliff A. Rice, MD

Thursday, October 11 / 11:00 AM - 11:50 AM

The benefits of quick-look echocardiography during resuscitations are numerous and life-saving. Do you start fluids or vasopressors, defibrillate, continue chest compressions, or withhold care? All are options that would be facilitated by this important radiologic procedure. The speaker will present the most recent evidence supporting the use of bedside echocardiography during cardiac resuscitation, emphasizing the ability to distinguish between PEA with and without mechanical activity, and rapid assessment of cardiac output.

Critical Care Emergency Ultrasound

MO-69 / 1 Hour

Faculty: Cliff A. Rice, MD

Monday, October 8 / 5:00 PM - 6:00 PM

In 2012, the practicing emergency physician needs to be able to utilize ultrasound effectively in the evaluation of the critically ill patient. The speaker will highlight the use of ultrasound

to perform a FAST scan, to dynamically monitor and measure the IVC in the setting of hypovolemic shock, and to detect pericardial effusion and perform ultrasound guided pericardiocentesis. (*This course is a prerequisite to the "Critical Care Emergency Ultrasound Lab."*)

Critical Care Emergency Ultrasound Lab

TU-89; TU-124; TU-149 / 2 Hours

Faculty: Cliff A. Rice, MD (Moderator); Jason D. Bothwell, MD; Tim D. Heilenbach, MD; Brooks T. Laselle, MD; Geoff Sanz, MD; Jonathan Theoret, MD

Tuesday, October 9 / 8:00 AM - 9:50 AM; 12:30 PM - 2:20 PM; 3:00 PM - 4:50 PM

In 2012, the practicing emergency physician needs to be able to utilize ultrasound effectively in the evaluation of the critically ill patient. This hands-on practical lab will highlight the use of ultrasound to perform a FAST scan, to dynamically monitor and measure the IVC in the setting of hypovolemic shock, and to detect pericardial effusion and perform ultrasound-guided pericardiocentesis. (*Prior attendance in "Critical Care Emergency Ultrasound" is required. This lab is limited to 25 participants.*)

C-Spine Imaging: Making Sense of Who to X-Ray, CT Scan or MRI

TU-163 / 1 Hour

Faculty: Peter Viccellio, MD, FACEP

Tuesday, October 9 / 5:00 PM - 6:00 PM

Between NEXUS, Canadian C-spine rules, and recent studies on C-spine CT, it is more confusing than ever to know who needs imaging and what kind. It's even more confusing with children. The speaker will discuss the clinical rules regarding who needs imaging. The speaker will then use evidence-based medicine to clarify which imaging modality (x-ray, CT, MRI, flexion/extension views) emergency physicians should use to evaluate patients with potential C-spine injuries.

I Didn't Know You Could Ultrasound That!

TH-274 / 1 Hour

Faculty: Cliff A. Rice, MD

Thursday, October 11 / 8:00 AM - 8:50 AM

Ultrasound is frequently used for many life-threatening diagnoses in the ED. However, the useful application of ED ultrasound is wider than you think. The speaker will highlight emerging and innovative uses for ultrasound diagnostics in the ED, including peritonsillar abscess evaluation, joint effusions, fractures, and foreign body localization.

Don't Blink: Plain Film Diagnoses You Cannot Afford to Miss

TH-312 / 1 Hour

Faculty: Robert J. Tubbs, MD

Thursday, October 11 / 12:00 PM - 1:00 PM

Expertise in interpreting plain film radiography remains a vital skill for emergency physicians. Most often, they are the first to interpret plain films and they receive the official radiologist interpretation at a later time. A deadly diagnosis occasionally can be made based on plain film radiography alone. Using case studies, the speaker will review scenarios of five dangerous radiographic diagnoses that were missed by the initial interpretation.

Pitfalls Series: Pitfalls in Pediatric Chest and Abdominal Radiology

TH-295 / 1 Hour

Faculty: Robert J. Tubbs, MD

Thursday, October 11 / 10:00 AM - 10:50 AM

Pediatric pulmonary and abdominal radiology interpretation can be problematic for

emergency physicians. Is that an infiltrate? Is that a mass and is it supposed to be there? Abnormalities can be subtle, and they are often unrecognized or confused with normal variants. Using a case-based format, the speaker will review commonly missed diagnoses in chest and upper airway radiography. By the end of the session you will be better at differentiating pathology from normal variants, subtle pneumothoraces, pneumonia, pneumomediastinum, and abnormal abdominal masses and pathology.

Procedural Ultrasound

TU-145 / 1 Hour

Faculty: Arun Nagdev, MD

Tuesday, October 9 / 3:00 PM - 3:50 PM

The use of ultrasound by emergency physicians to help perform procedures is becoming more frequent. Some of these may soon be considered standard of care and some are useful in selected situations. The speaker will discuss procedural applications for ultrasound that the emergency physician can easily incorporate into daily clinical practice. (*This course is a prerequisite to the "Procedural Ultrasound Lab."*)

Procedural Ultrasound Lab

WE-181; WE-214; WE-238 / 2 Hours

Faculty: Arun Nagdev, MD (Moderator); Jacob C. Miss, MD; Resa E. Lewiss, MD; Christine Riguzzi, MD; Craig A. Sisson, MD, FACEP; Charlotte R. Wills, MD

Wednesday, October 10 / 8:00 AM - 9:50 AM; 12:30 PM - 2:20 PM; 3:00 PM - 4:50 PM

The use of ultrasound by emergency physicians to help perform procedures is becoming more frequent. Some of these may soon be considered standard of care and some are useful in selected situations. This procedural lab will provide hands-on experience with practical EM ultrasound applications. (*Prior attendance in "Procedural Ultrasound" is required. This lab is limited to 25 participants.*)

Pulmonary Ultrasound: Who Needs a Chest X-Ray?

TU-98 / 1 Hour

Faculty: Michael B. Stone, MD, RDMS

Tuesday, October 9 / 9:00 AM - 9:50 AM

Pulmonary ultrasound is a novel non-invasive pulmonary imaging technique that can provide rapid diagnosis and expedite therapeutic intervention. The speaker will review the diagnostic applications for pulmonary ultrasound. Ultrasound images of pulmonary pathology including pneumothorax, hemothorax, and CHF will be presented. The use of pulmonary ultrasound to differentiate CHF from COPD also will be discussed. The speaker also will review the "Slide Sign," the "Comet-tail Artifact," and other important diagnostic signs.

Reading a Head CT: What Every Emergency Physician Needs to Know

MO-36 / 1 Hour

Faculty: Andrew D. Perron, MD, FACEP

Monday, October 8 / 1:30 PM - 2:20 PM

The evaluation of head CT scans is quickly becoming a necessity for emergency physicians. The speaker will discuss the nuances of reading head CT scans and illustrate invaluable pearls. A refresher of normal anatomy will be complemented by a case-based review of commonly missed pathologic conditions. These case studies include trauma, fractures, hemorrhage, infarcts, edema, hygroma, and shear injuries. The speaker also will discuss methods to avoid errors associated with reading head CT scans.

Reading a Trauma CT

MO-48 / 1 Hour

Faculty: Andrew D. Perron, MD, FACEP

Monday, October 8 / 3:00 PM - 3:50 AM

The CT scan in trauma has become the standard of care in ruling out splenic, liver, aortic, pulmonary, intracranial, and aortic injury. The presenter will review the major findings that must be looked for on the trauma CT. Tips to rapidly and efficiently review the CT as well as a review of differentiating bleeding in different organs from normal tissue will be provided.

Ten Most Commonly Missed Radiographic Findings in the ED

TU-155 / 1 Hour

Faculty: Maria E. Moreira, MD

Tuesday, October 9 / 4:00 PM - 4:50 PM

As an emergency physician, you need to know the most commonly missed radiographic findings that can lead to morbidity and malpractice. The speaker will highlight the most commonly missed x-ray and CT findings by emergency physicians. The speaker also will discuss strategies for reading these films so that you don't miss one of these on your next shift.

Venous Ultrasound in the ED: From Access to DVT Detection

TU-157 / 1 Hour

Faculty: John L. Kendall, MD, FACEP

Tuesday, October 9 / 4:00 PM - 4:50 PM

During this course, the speaker will describe the use of ultrasonography in the ED to locate and evaluate venous anatomy for catheter placement and identification of thrombus. Participants will observe how to use bedside ultrasonography in the evaluation of a patient with possible deep venous thrombosis (DVT), incorporating the compression-decompression method. The speaker also will describe the use of ultrasonography for vascular access, as recommended for patient safety. (*This course is a prerequisite to the "Venous US in the ED: DVT Skills Lab."*)

Venous US in the ED: DVT Skills Lab

WE-182; WE-216; WE-239 / 2 Hours

Faculty: John L. Kendall, MD, FACEP (Moderator); Brandon H. Backlund, MD; Andrew J. French, MD; Nicole Hurst, MD; Daniel Kim, MD; Molly E.W. Thiessen, MD

Wednesday, October 10 / 8:00 AM - 9:50 AM; 12:30 PM - 2:20 PM; 3:00 PM - 4:50 PM

During this hands-on lab, participants will practice vascular access and identify the deep venous system in the legs. Compression-decompression ultrasonography will also be performed on healthy models. (*Prior attendance in "Venous Ultrasound in the ED: From Access to DVT Detection" is required. This lab is limited to 25 participants.*)

MO = Monday TU = Tuesday WE = Wednesday TH = Thursday