

# **Neurologic Disorders**

Posterior Strokes: A Dizzying Differential

10/28/2021 | 12:30:00 PM - 12:50:00 PM

Faculty: Roderick Fontenette, MD, FACEP

Recognition and diagnosis of the less common posterior stroke may often times be tricky. During this case-based approach, the speaker will review the subtle clues that will help you pick up the posterior stroke without delay.

- Review the symptoms that differentiate a posterior stroke from an anterior stroke.
- Describe potential diagnoses that may masquerade as a posterior stroke.
- Review treatment options for the posterior stroke.



### **Neurologic Disorders**

Psych - All the Voices You NEED to Hear

10/25/2021 | 8:30:00 AM - 8:50:00 AM

Faculty: Leslie Zun, MD

The volume of patients presenting to emergency department for evaluation of psychiatric issues has been dramatically increasing. The role of the ED is not only to provide medical screening of these patients but also to determine the need for additional evaluation. In rapid fire succession, presenters will leave you with pearls on a variety of psych ailments. Speakers will also explain how to recognize, how to treat & how to avoid any potential pitfalls. Once you've been through this course, you'll feel a sense of calm.

- Discuss the medical clearance process & what is actually needed.
- Review the use protocols in the evaluation of the psychiatric patients.
- Describe a variety of acute psychiatric issues & the current medical literature regarding their evaluation.

### **Neurologic Disorders**

Stop the Pounding: Update on Headache Assessment & Treatment

10/25/2021 | 2:00:00 PM - 2:20:00 PM

Faculty: Matthew S. Siket, MD, FACEP

Patients with a headache often present a conundrum to the emergency physician. The National Quality Forum is now looking at inappropriate imaging in these patients. The speaker will explore who needs imaging, discuss current guidelines for acute migraine treatment, and review the management of other headache syndromes.

- Apply an algorithm for appropriate use of imaging in patients with headache.
- Review the current guidelines for acute migraine therapy.
- Review management of trigeminal neuralgia, cluster headaches and post-LP headaches.



# **Neurologic Disorders**

Knocked Out in 2021: Concussion Updates

10/26/2021 | 8:00:00 AM - 8:20:00 AM

Faculty: Andrew D. Perron, MD, FACEP

The literature on concussion has grown exponentially over the past decade. Chronic traumatic encephalopathy (CTE), brain remodeling, return to play guidelines, & the connection of concussion to other diseases (e.g. ALS) are only beginning to be understood. Whether working in the ED or on the sidelines, the emergency physician should be aware of literature-based information on this controversial topic.

- Explain the most updated model of brain injury & remodeling.
- Review the current iterations of concussion, including traumatic encephalopathy, Parkinson's, & ALS.
- Discuss how to care for the concussed patient both acutely with consideration of acute & longterm sequelae.

### **Neurologic Disorders**

Needle In a Haystack: Who Needs the LP?

10/26/2021 | 9:00:00 AM - 9:50:00 AM

Faculty: Roderick Fontenette, MD, FACEP; Trevor Lewis, MD

Subarachnoid hemorrhage (SAH) is a potentially deadly but uncommon diagnosis & continues to create debate & discussion. Will a CT or CTA suffice or does the patient need an LP? This ACEP Connect session will equip you with the latest evidence & practical information you need the next time a patient presents with the worse headache of their life.

- Discuss the best evidence related to tools for diagnosing SAH.
- Describe how to estimate whether your CT-negative patient has a SAH.
- Demonstrate how to orally present the relevant data related to SAH & CT results to patients.



### **Neurologic Disorders**

COVID Confusion: Neurologic Complications of COVID-19

10/26/2021 | 10:00:00 AM - 10:20:00 AM

Faculty: Matthew S. Siket, MD, FACEP

Our knowledge of COVID-19 continues to evolve. In this course, up to date literature will be reviewed regarding neurologic consequences of COVID-19. In addition, new treatment modalities will be discussed.

- Describe up to date neurologic complications from COVID-19
- Discuss new treatment strategies related to COVID-19 neurologic complications
- Identify long term neurologic sequelae of COVID-19

## **Neurologic Disorders**

TIA Management: Don't Just Do Something, Stand There

10/26/2021 | 10:30:00 AM - 10:50:00 AM

Faculty: David Zodda, MD, FACEP

A significant proportion of patients presenting to the ED with a stroke will have resolution of their symptoms. Should we be intervening in patients with rapidly improving neurologic exams. This high-yield & brief session will review the current treatment options for TIA in the ED.

- Differentiate between TIA & ischemic stroke in the ED in a expedited manner.
- Discuss treatment options for the TIA patient.
- Describe when you should consider ischemic stroke treatment & when you should not in the patient with evolving neurologic deficits.



# **Neurologic Disorders**

Non-Traumatic Back Pain: Why It Should Tighten Your Sphincter

10/26/2021 | 12:30:00 PM - 12:50:00 PM

Faculty: Tomas Diaz, MD

Back pain is one of the most common symptoms that bring patients to the ED. The vast majority of cases have minor pathology that will improve with time, but a few patients harbor life- or limb-threatening problems that, if not diagnosed properly & rapidly, can lead to paralysis or death. How does the busy clinician find the needle in the haystack? The speaker will review strategies to assess & diagnose these patients so you don't miss that difficult to identify condition.

- Identify the important causes of back pain that, if undiagnosed, can lead to spinal cord or cauda equina compression.
- Discuss the historical & epidemiological features that are "red flags" for a serious cause of back pain.
- Discuss the physical examination findings that one should document in the record & which findings drive further work-up.

### **Neurologic Disorders**

Spinal Pathology: Striking the Right "Cord" With Your Diagnostic Skills

10/26/2021 | 1:00:00 PM - 1:20:00 PM

Faculty: Andrew D. Perron, MD, FACEP

Clinicians are presented with a myriad of neurological signs and symptoms every day in the ED. Spinal cord pathology is the one area that clinicians are afraid of missing due to the presence of conditions that lead to long term morbidity and mortality, and are treatable. Join the speaker in developing an approach to examining the patient with potential spinal cord pathology; all the way from trauma to infection, acquiring the correct approach for imaging of the spine, and how to initiate treatment in those conditions that truly need emergent therapy.

- Develop an approach to managing patients with potential spinal cord disease that includes both important historical factors and the physical examination.
- Provide an overview of spinal cord pathology that presents emergently to the ED.
- Review the latest guidelines in therapy for emergent spinal cord conditions.



### **Neurologic Disorders**

Whole Lotta Shakin' Goin' On: Update on Seizure & Status Management

10/26/2021 | 1:30:00 PM - 1:50:00 PM

Faculty: Roderick Fontenette, MD, FACEP

The seizure patient in the ED is always a concern to the physician. Is it a recurrent or first time seizure? Is it noncompliance or a serious intracranial pathology? What is the imaging that should be pursued? What are the latest guidelines for managing the patient with status epilepticus? The speaker will discuss the myriad of questions associated with seizures in the ED in an evidence-based format.

- Review the latest guidelines from the American Epileptic Society on the treatment of status epilepticus.
- Discuss indications for laboratory and imaging work-up in the seizure patient.
- Apply the algorithm for when to initiate anti-epileptic therapy in the ED.

### **Neurologic Disorders**

Cranial Nerve Conundrums: When is It an Emergency?

10/26/2021 | 4:30:00 PM - 5:20:00 PM

Faculty: Trevor Lewis, MD, FACEP

Subtle cranial nerve dysfunction can be the tip of a neurologic disaster. When do patients with facial paralysis need brain imaging? Do all third nerve palsies result from posterior communicating artery aneurysm? Which patients with vertigo require neuro-imagining? Using a case-based format, the speaker will reveal how subtle cranial nerve findings can be the tip of a neurologic iceberg catastrophe.

- Review the anatomy & function of the cranial nerves.
- Describe subtle cranial nerve findings that may represent significant neurologic pathology.
- Review what cranial nerve findings require further work & imaging.



# **Neurologic Disorders**

Medical Mimics: Medical Causes of Psychiatric Symptoms

10/27/2021 | 8:30:00 AM - 8:50:00 AM

Faculty: Jacob Avila, MD

Your "crazy" patient could actually be dying. This course will help you learn how to identify common medical diseases that can masquerade as primary psychiatric disease. Through case-based scenarios, the speaker will provide you the key findings that can you help to differentiate medical from psychiatric, which will be a load off of both of your minds.

- Identify key features of psychiatric diseases as well as their medical counterparts.
- Review how these diseases can actually represent a reversible medical condition.
- Discuss the latest evidence on the diagnosis & treatment of these diseases.

# **Neurologic Disorders**

Life-Threatening Headaches in the ED: Evaluation & Management

10/27/2021 | 12:30:00 PM - 12:50:00 PM

Faculty: Nida F. Degesys, MD

Most headaches, 90%, are relatively benign primary headaches --migraine, tension, and cluster. The other 10% are secondary headaches, caused by separate underlying processes, with vascular, infectious, or traumatic etiologies, and they are potentially life-threatening. This speaker will cover important pathophysiologic features of the most common types of life-threatening headaches, the key historical and physical examination information emergency clinicians must obtain, the red flags that cannot be missed, and the current evidence for best-practice testing, imaging, treatment, and disposition of these high risk causes of headaches.

- Recognize the signs and symptoms of the most common life-threatening secondary causes of headaches.
- Employ an evidence-based strategy for evaluating undifferentiated headache patients in the emergency department.
- Develop evidence-based emergency treatment approaches to patients with life threatening causes of headache.



### **Neurologic Disorders**

Ptosis, Tingling & Other Neuro Nuggets

10/27/2021 | 1:00:00 PM - 1:20:00 PM

Faculty: Evie Marcolini, MD, FACEP

The speaker will cover an expert approach in recognizing and managing subtle neurologic emergencies. Less common, but universally challenging, neurological ailments including Guillain-Barre syndrome, multiple sclerosis, and botulism will be discussed. Latest diagnostic modalities and treatment approaches will be rapidly reviewed highlighting how to avoid missing the diagnosis and delaying critical therapy.

- Review the clinical presentation of a variety of neurologic issues in the ED including MS, GBS, and botulism.
- Describe the appropriate evaluation of these neurologic conditions.
- Understand the conditions that require emergent therapy to improve outcomes.

### **Neurologic Disorders**

Stroke Chameleons: Neuro Findings You Can't Miss

10/27/2021 | 3:30:00 PM - 3:50:00 PM

Faculty: Nida F. Degesys, MD

Serious conditions can be missed on initial emergency department visits due to subtle neurologic signs that are not readily apparent on the standard, rapid neurologic exam. This lecture focuses on tips and tricks to pick up these subtle neurologic deficits and avoid missing deadly diagnosis and subsequently.. lawsuits!

- Differentiate true weakness from functional weakness
- Assess the cranial nerves to detect subtle palsies
- Understand the cerebellar exam to detect strokes



### **Neurologic Disorders**

Vertigo Skills Workshop

10/27/2021 | 4:30:00 PM - 5:20:00 PM

Faculty: Evie Marcolini, MD, FACEP

Vertigo is a common & troubling symptom for patients. It's also one of the symptoms in which bedside tests can diagnose the underlying cause while bedside maneuvers can treat them. During this small group workshop, the presenter will describe these various diagnostic tests & therapeutic maneuvers. You've heard all the terms – Dix-Hallpike, Epley, BPPV, the roll test. (This workshop is limited to 50 participants.)

- Discuss the pathophysiology of benign paroxysmal positional vertigo (BPPV).
- Describe the diagnostic Dix-Hallpike test.
- Describe the therapeutic Epley maneuver.
- Describe the head impulse test to diagnose vestibular neuritis.

### **Neurologic Disorders**

What Do You Mean Dizzy?

10/28/2021 | 9:00:00 AM - 9:50:00 AM

Faculty: Emily Rose, MD, FACEP

Seeing the chief complaint of "dizziness" on a patient chart often evokes a visceral response from the emergency physician. The speaker will show how to quickly categorize dizziness into one of four subtypes. The diagnosis & treatment of benign paroxysmal positional vertigo (BPPV), which is the most common cause of vertigo, will be emphasized. Video clips will be used to demonstrate various diagnostic tests (e.g. Hallpike test, head thrust test) & various therapeutic maneuvers (e.g. Epley maneuver, bar-b-que roll). Turn frustration with this patient complaint into patient & physician satisfaction.

- Describe a systematic approach to categorize a patient's dizziness into one of four subtypes.
- Describe the distinction between peripheral & central vertigo in order to maximize patient safety
  & not miss cerebellar stroke.
- Discuss how to diagnose BPPV & how to treat it at the bedside.



### **Neurologic Disorders**

Stroke Care 2021: State of the Art

10/28/2021 | 10:00:00 AM - 10:50:00 AM

Faculty: Zack Repanshek

Diagnostic & therapeutic interventions for patients with ischemic symptoms continues to evolve. Using a case-based approach, the speaker will explore the latest data regarding selection criteria for IV tPA, endovascular therapy for large vessel occlusion ischemic strokes, & EMS routing policies for suspected acute stroke. The controversies regarding thrombolytic agents in acute stroke also will be explored.

- Discuss the differences between the ACEP Clinical Policy for tPA, the FDA guidelines, & the AHA/ASA guidelines.
- Describe the imaging selection criteria for treatment with IV tPA versus endovascular therapy.
- Describe current controversies in the emergency management of acute stroke patients & the implications.
- Discuss how to optimize care of the ischemic stroke patient regardless of stroke center designation.

### **Neurologic Disorders**

Demystifying Neurological Technology - Shunts, Pumps & Stimulators

10/28/2021 | 12:00:00 PM - 12:20:00 PM

Faculty: Wan-Tsu Wendy Chang, MD

With improved treatment of neurological conditions and increased lifespan of the population, the number of patients presenting to your ED with implanted neurological technology will likely increase. Just because they had neurosurgery, doesn't mean you have to be afraid of their tech! This session will provide pearls and pitfalls in caring for your next patient with a shunt, pump, or stimulator.

- Review pearls in the evaluation of patients with ventricular shunts.
- Discuss critical management of patients with malfunctioning intrathecal pumps.
- Describe common pitfalls in the care of patients with neurostimulators



# **Neurologic Disorders**

De-escalation in the ED: Treating Agitation

10/28/2021 | 12:30:00 PM - 12:50:00 PM

Faculty: Emily Rose, MD, FACEP

The treatment of agitated patients in the emergency department is evolving. Recent expert consensus documents have modified the approach to treating these patients. These documents include emphasizing the need for early vitals, glucose & oxygenation assessments, use of agitation scales & use of verbal deescalation, & tailoring the choice of medications to the underlying psychiatric or medical etiology. The speaker will present these guidelines & challenges to treating the agitated patient in the emergency department.

- Explain the role of verbal de-escalation in the treatment of psychiatric patients.
- Describe the choice of treatment modalities for psychiatric patients in the emergency setting.
- Review the latest expert consensus guidelines for treatment of agitation.