

STATEMENT OF NEED

This activity is designed to help clinicians learn how to manage patients undergoing complex surgery so they emerge faster, with less pain, nausea and vomiting; and hasten the return of functional status.

TARGET AUDIENCE

Anesthesiologists, hospitalists, intensivists, pain management physicians; CRNAs.

CREDIT

Duke University Health System Department of **Clinical Education and Professional** Development designates this live activity for a maximum of 15 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Approved by the American Association of Nurse Anesthetists for 15 CE Credits; Code Number 1031516, Expiration Date April 2, 2016.

This activity has been planned and implemented by the Duke University Health System Department of Clinical Education and Professional Development and destinationCME for the advancement of patient care. The Duke University Health System Department of Clinical Education and Professional Developme is accredited by the American Nurses Credentialing Center (ANCC), the Accreditation Council for Pharmacy Education (ACPE), and the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing education for the health care team



FACULTY

Brendan Carvalho, MD, FRCA John E. Ellis, MD Stanford University Medical Center University of Pennsylvania

Douglas B. Coursin, MD University of Wisconsin Bobbie-Jean Sweitzer, MD The University of Chicago Medicine

Karen B. Domino, MD University of Washington Steven G. Venticinque, MD University of Texas at San Antonio

MEETING SCHEDULE

CAMP

The Ritz-Carlton, Rancho Mirage

http://destinationcme.com/Registration

If you prefer to register by fax or mail,

The course fee is **\$995** for physicians

electronic conference syllabus,

\$100 will be retained to cover

and nurse anesthetists, and includes the

continental breakfasts and refreshment

administrative expenses should you

cancel your registration in writing by January 31, 2016. \$200 will be retained

for cancellations February 1-29, 2016.

There will be no refunds after February

please complete and return the enclosed

(Palm Springs, CA) March 31-April 2, 2016

REGISTRATION

Register online at:

registration form.

breaks.

29, 2016.

Rancho Mirage

Thursda	y, March 31, 2016	
7:00am	Continental Breakfast	
7:30am	When the ICU and OR Meet	Douglas B. Coursin, MD
8:15am	Anesthesia for Major Spine Surgery	Karen B. Domino, MD
9:00am	Transfusion Therapy in Perioperative Patients	Douglas B. Coursin, MD
9:45am	Coffee Break	Develop P. Coursin MD
10:15am 11:00am	Perioperative Endocrinopathies How to Avoid a Lawsuit After a Bad Outcome	Douglas B. Coursin, MD Karen B. Domino, MD
11:45am	Critical Care Ultrasonography for in Perioperative	Steven G. Venticinque, MD
nsoam	Practice	Steven d. Ventielinque, mb
12:30pm	Questions and Answers	John E. Ellis, MD & Faculty
1:00pm	Adjourn	
5:30-	Welcome Reception	
7:00pm		
Friday, A	April 1, 2016	
7:00am	Continental Breakfast	
7:30am	Closed Claims: New Findings and Lessons Learned	Karen B. Domino, MD
8:15am	What's new with the 2014 ACC/AHA guidelines for	Bobbie-Jean Sweitzer, MD
	cardiac evaluation for non-cardiac surgery?	
9:00am	All that Glitters is not a Golden Recommendation	Douglas B. Coursin, MD
9:45am	Coffee Break	
10:15am	Which patients are too high risk for ambulatory	Bobbie-Jean Sweitzer, MD
	surgery?	
11:00am	The disruptive technology of Sedasys-a primer for	Karen B. Domino, MD
	anesthesiologists	
11:45am	Labor Analgesia: Modern Technology and Strategies	Brendan Carvalho, MD,
	to Enhance Maternal and Fetus Outcomes	FRCA
12:30pm	Questions and Answers	John E. Ellis, MD & Faculty
1:00pm	Adjourn	
Saturday	y, April 2, 2016	
7:00am	Continental Breakfast	
7:30am	Do I really have to worry about OSA?	Bobbie-Jean Sweitzer, MD
8:15am	Management of the Morbid Obesity Parturient: Special	Brendan Carvalho, MD,
	Techniques and Drug Doses	FRCA
9:00am	Strategies to Optimize Cesarean Delivery Anesthesia	Brendan Carvalho, MD,
	and Analgesia	FRCA
9:45am	Coffee Break	
10:15am	Cardiac Output Monitors: Operational Review and	Steven G. Venticinque, MD
	Critical Appraisal	
11:00am	The Anesthesia Machine: Review and Update	Steven G. Venticinque, MD
11:45am	Wellness in Anesthesia Providers	John E. Ellis, MD
12:30pm	Questions and Answers	John E. Ellis, MD & Faculty
1:00pm	Adjourn	,
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ACCOMMODATIONS

Step into The Ritz-Carlton, Rancho Mirage – the only 5-star hotel resort in Rancho Mirage (Palm Springs, CA)- for a unique desert experience. Simply put, every vantage point at The Ritz-Carlton is a postcard-worthy view: the mystifying beauty of a sea of palm trees against a backdrop of majestic snow-capped mountains will take your breath away.



We have secured a block of rooms exclusively for course registrants, at the following special group rates applicable 3 days before and 3 days after the meeting, subject to availability:

Run of House: \$369 per night++ single or double occupancy



You must register and pay for the conference in order to receive the special group rates. Reservation instructions will be provided in your registration confirmation. Reservations must be made prior to February 29, 2016 to secure this rate. Limit one room per registrant.

Please book early as the room blocks are likely to sell out before this date.

DESTINATION INFORMATION

Rancho Mirage, nestled between Cathedral City and Palm Desert, has cemented a solid reputation as the preferred 5-star luxury destination for those seeking top-of-the-range relaxation. You can expect to sample some of the finest golf courses on the continent, luxurious spas and first class dining experiences right in this Palm Springs oasis.

For more information, we invite you to visit the following websites:

www.ranchomirageca.gov whereisranchomirage.com

Anesthesia Camp, Rancho Mirage (2016) is jointly provided by the Duke University Health System Department of Clinical Education & Professional Development and destinationCME.

UPCOMING

GRAND CAYMAN January 27-30, 2016 January 25-28, 2017

RANCHO MIRAGE (PALM SPRINGS, CA) March 31-April 2, 2016 March 30- April 1, 2017

www.destinationCME.com



ANESTHESIA CAMP



Rancho Mirage Palm Springs, CA The Ritz-Carlton March 31-April 2, 2016 ACTIVITY CO-DIRECTOR Brian Ginsberg, MB BCh Associate Professor, Department of Anesthesiology Duke University Medical Center

Rancho

ACTIVITY MEDICAL DIRECTOR

John E. Ellis, MD Adjunct Professor Perelman School of Medicine at the University of Pennsylvania

Jointly provided by:







Jointly provided by the Duke University Health System Department of Clinical Education & Professional Development and destinationCME

The Ritz-Carlton, Grand Cayman March 31-April 2, 2016 **Registration Form** Online registration available at <u>destinationcme.com/Registration</u> Please clearly PRINT information: First Name:______MI:_____Ast Name:_____

Telephone Number: Fax#:(Degree: MD DO CRNA Other		
Note: CME/CE certificates will be issued via email. Mailing Address:	Organization:	Specialty:	
Mailing Address:			<u> </u>
City:State:Zip Code: Telephone Number:Fax#: Course Fees	Note: CME/CE certificates will be issued via er	maii.	
Telephone Number:	Mailing Address:		
Course Fees	City:	State:	Zip Code:
	Telephone Number: <u>()</u>	Fax#:()
Payment and Billing Information: MasterCard Visa Discover Amex Card Number: Expiration Date (MM/YYYY): Card 3-digit or 4-digit verification number: Signature: Signature: Billing address is same as mailing address First Name: MI: Last Name: Organization: Billing Address:			
Payment and Billing Information: MasterCard Visa Discover Amex Card Number: Expiration Date (MM/YYYY): Card 3-digit or 4-digit verification number: Signature:	🗌 \$25.00 Optional Printed Syllabus (Registrants w	vill receive free online acces	ss to all educational materials prior to meetin
Payment and Billing Information: MasterCard Visa Discover Amex Card Number: Expiration Date (MM/YYYY): Card 3-digit or 4-digit verification number: Signature: Signature: Billing address is same as mailing address First Name: MI: Last Name: Organization: Billing Address:			
Expiration Date (MM/YYYY):Card 3-digit or 4-digit verification number: Signature: Billing address is same as mailing address First Name:MI:Last Name: Organization: Billing Address:			TOTAL:
Signature:			TOTAL:
Billing address is same as mailing address First Name:	Payment and Billing Information:		
First Name:MI: Last Name: Organization: Billing Address:	Payment and Billing Information:	Amex Card Number:_	
Organization:	Payment and Billing Information: MasterCard Visa Discover A Expiration Date (MM/YYYY):	Amex Card Number:Card 3-digit or 4-digit v	
Billing Address:	Payment and Billing Information: MasterCard Visa Discover A Expiration Date (MM/YYYY): Signature:	Amex Card Number:Card 3-digit or 4-digit v	
	Payment and Billing Information: MasterCard Visa Discover A Expiration Date (MM/YYYY): Signature: Billing address is same as mailing address	Amex Card Number:_ Card 3-digit or 4-digit v	verification number:
City:Zip Code: Country:	Payment and Billing Information: MasterCard Visa Discover A Expiration Date (MM/YYYY): Signature: Billing address is same as mailing address	Amex Card Number:_ Card 3-digit or 4-digit v 	verification number:
	Payment and Billing Information: MasterCard Visa Discover A Expiration Date (MM/YYYY):	Amex Card Number:_ Card 3-digit or 4-digit v 	verification number:

Please fax form to (815) 301-8148 OR mail with check to: destinationCME LLC 1700 East 56th Street, Suite 3801 Chicago, IL 60637

