Advance Program

Critical Care Congress

REGISTER EARLY TO SECURE YOUR TOP CHOICES IN COURSES AND ACCOMMODATIONS AT THE LOWEST RATES
To register, see page 30, visit www.sccm.org/Congress or contact SCCM Customer Service at +1 847 827-6888.

February 20-24, 2016
Orange County Convention Center
Orlando, Florida, USA
50% of patients in the ICU will develop some stage of Acute Kidney Injury (AKI)

Everything is at least 2-3 times worse with Moderate to Severe AKI

Acute Kidney Injury is an increasingly common and potentially devastating complication in hospitalized individuals. Studies suggest that approximately half of all patients admitted to the ICU will develop some stage of Acute Kidney Injury. If a patient develops an AKI complication during hospitalization, short-term and long-term consequences could be twice as severe, such as length of stay (LOS), hospital cost, 30-day readmissions and hospital mortality.

<table>
<thead>
<tr>
<th></th>
<th>No AKI</th>
<th>Moderate</th>
<th>Severe</th>
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<tr>
<td>LOS3: Total postoperative length of stay (days/patient)</td>
<td>5 days</td>
<td>11 days</td>
<td>18 days</td>
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<tr>
<td>Hospital Cost3: Total postoperative cost (US$/patient)</td>
<td>$18,500</td>
<td>$38,900</td>
<td>$52,600</td>
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<tr>
<td>30-Day Readmissions4: Percent of postoperative patients</td>
<td>9.3%</td>
<td>21.8%</td>
<td>28.6%</td>
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<tr>
<td>Hospital Mortality3: Percent of postoperative patients</td>
<td>26.0%</td>
<td>5x - 11x Greater</td>
<td>2x - 3x Greater</td>
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The challenge is that acute kidney injury (AKI) is difficult to identify early and delays in recognizing AKI can lead to irreversible damage and high mortality.

Now you can identify, stratify and mitigate your risk of acute kidney injury (AKI)

The NephroCheCk® Test: A Renal “Alarm System”

The NephroCheCk® Test quantitatively measures two urinary biomarkers - tissue inhibitor of metalloproteinase 2 (TIMP-2) and insulin-like growth factor binding protein 7 (IGFBP-7) - and combines them into a single AKIRisk™ Score. Both biomarkers are thought to be involved in G1 cell-cycle arrest during the earliest phases of injury to the kidney.

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Intended Use and Indications for the NephroCheCk® Test System

The NephroCheCk® Test System is intended to be used in conjunction with clinical evaluation in patients who currently have or have had within the past 24 hours acute cardiovascular and or respiratory compromise and are ICU patients as an aid in the risk assessment for moderate or severe acute kidney injury (AKI) within 12 hours of patient assessment. The NephroCheCk® Test System is intended to be used in patients 21 years of age or older.

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Critical Connections
The Complete News Source for Critical Care Professionals

Volume 14, Number 5 October/November 2015

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From the Editor...

This special issue of Critical Connections highlights the many exciting activities planned for the Society of Critical Care Medicine’s (SCCM) 45th Critical Care Congress, to be held February 20 to 24, 2016, in Orlando, Florida, USA. We hope you plan to join us.

The Society’s annual Congress is the largest multiprofessional critical care event of the year, bringing together more than 6,000 critical care clinicians from around the world. This five-day event will offer opportunities to explore breakthroughs in research, share creative and stimulating ideas, make valuable connections, and obtain inspired perspectives from all members of the multidisciplinary, multiprofessional critical care team.

Keeping with tradition, all components of this stellar program were designed to highlight the most up-to-date, evidence-based developments in critical care medicine. Take advantage of the superb offerings, which include cutting-edge educational sessions, hands-on workshops, captivating symposia, and compelling plenary sessions. Regardless of your profession or role in the critical care team, you will find opportunities to enhance your practice at this year’s Congress.

Sandra L. Kane-Gill, PharmD, MS, FCCM, is an Associate Professor of Pharmacy and Therapeutics, University of Pittsburgh, School of Pharmacy, Pittsburgh, Pennsylvania, USA, and Critical Care Medication Safety Pharmacist at UPMC.
INTENSIVISTS

Join Advanced ICU Care, and discover opportunities in Tele-ICU where your critical care and communication expertise will drive evidence-based care and patient safety.

Spotlight on Sepsis

Sepsis is a devastating disease. Between 230,000 and 370,000 people die of sepsis annually in the United States, making it the third most common cause of death in the country. Unfortunately, the incidence of sepsis worldwide is even higher, leaving a trail of destruction across the globe.

And yet, if you mentioned sepsis to the average lay person even a few years ago, you would likely have been met with a blank stare. Sadly, the low public profile of sepsis has been remarkably disproportionate to the misery it causes, both to patients and families alike. In many places, sepsis has been all but invisible. For instance, the World Health Organization website lists the top 10 causes of death across a host of parameters throughout the world. The word “sepsis” literally does not show up on any list a single time because syndromes are not considered to be a cause of death.

This has historically been frustrating to many of my colleagues who tirelessly work on behalf of the millions of septic patients worldwide. While other diseases have had visible spokespersons (Michael J. Fox), successful campaigns (Race for the Cure) or YouTube videos gone viral (the Ice Bucket Challenge), sepsis has had…well…none of these. I mention these other disease states not to compare the burden of sepsis to Parkinson’s disease or breast cancer or ALS—obviously a counterproductive exercise as each is horrific in its own right. Rather, I bring these examples up because the sepsis community aspires to match the success seen in raising the public profile of these other diseases—success that assuredly could accelerate our fight against this deadly disease.

Despite this challenging history, over the last few years, the tide is quickly turning. We are currently witnessing before our eyes a “tipping point” in the worldwide fight against sepsis and the raising of public consciousness required to make sepsis the public health priority it deserves to be. And at every step of the way, the Society of Critical Care Medicine (SCCM) is taking the lead in this fight.

There are so many exciting initiatives ongoing that I could fill an entire issue of Critical Connections with the great work being done by my colleagues at SCCM. But I will instead highlight just a few with apologies to those who I deeply respect but have no room to mention. The cornerstone of our anti-sepsis efforts has been the Surviving Sepsis Campaign. With three iterations of our guidelines out and a fourth on the way, there are tens of thousands of patients (if not more) who are participating in the campaign worldwide. The evidence is clear: mortality from sepsis is decreasing, and higher compliance with the Surviving Sepsis Campaign bundles is associated with decreased mortality. The National Quality Forum took the Surviving Sepsis bundles and directly incorporated them into the first national quality metric on sepsis (and one of the first on critical care). Around the time you read this, public reporting of compliance with elements of the bundles will become required by the Centers for Medicare & Medicaid Services. While there will be some effort associated with this reporting, it is incredibly exciting that sepsis is moving front and center on the national stage in the United States, since there is every reason to believe that reporting will lead to better compliance, which, in turn, will lead to better care and better outcomes for septic patients.

And now the Surviving Sepsis Campaign is expanding. In collaboration with the Hellman Foundation, a pilot project is underway on combating sepsis in resource-limited countries. The approach that needs to be taken will be drastically different, but a project in the Ruhango District in the Southern Province of Rwanda on early recognition and treatment of sepsis has the potential to not only impact people in the local community but also to be scalable and have far reaching benefits in other resource-limited environments.

Yet, that’s not all. In February at our annual meeting (spoiler alert!), a new definition of sepsis and septic shock will be unveiled. This effort—the result of a joint SCCM and European Society of Intensive Care Medicine effort that will be endorsed by societies throughout the world—will be an evidence-based definition informed by a “big data” analysis of multiple databases combined with expertise from around the globe. This dovetails perfectly with a new SCCM partnership with the experts in the Centers for Disease Control and Prevention to help come up with a nationwide surveillance program for sepsis. In addition, key leaders at SCCM were recently invited to a consensus conference at the National Institute of Child Health and Human Development at the National Institutes of Health on pediatric multiple organ dysfunction, with an emphasis on sepsis that seems likely to spur exciting new discoveries in the fight against pediatric sepsis.

If you told me a few years ago that all of this could possibly occur in a one-year span, I would have thought you were crazy. And yet, here we are. Sometimes, when one is in the middle of making history, it is difficult to take a step back to appreciate everything that is going on. So, I urge each of you to take some time to savor the progress we have made on so many fronts in combatting sepsis. And then, let’s dive in together to recognize, treat and fight this horrific disease so more and more patients will successfully survive sepsis and thrive long-term!

Craig M. Cooper smith, MD, FCCM, is a professor of surgery and Vice Chair of Research, Emory University School of Medicine; Associate Director of the Emory Critical Care Center; and director of the surgical/transplant intensive care unit at Emory University Hospital.

@SCCMPresident.
Home to multiple groups of hard working volunteers, the ICU Management Business Line has a variety of productive endeavors. This Business Line encompasses Billing and Coding, the NP/PA e-Learning Task Force, the Tele-ICU Committee, the Ethics Committee, and the Grenvik Family Award for Ethics and ICU Design Citation Award Committees. This Business Line is led by SCCM Council members Lewis J. Kaplan, MD, FCCM, and Sandra L. Kane-Gill, PharmD, MS, FCCM, and staff partners Diana Hughes, CAE, and Colette Punda.

Billing and Coding supports member education throughout the year through the Coding Corner feature in Critical Connections, as well as durable courses at Congress and publications addressing concerns for providers of all specialties, including specific regulations governing advanced practice providers (APPs).

Relatedly, the NP/PA e-Learning Task Force has been tremendously productive this year. Drawing on a vast pool of individual expertise, this group has identified existing SCCM resources and grouped them in a curriculum-like fashion that focuses on basic and advanced concepts key to APP success in critical care. They also launched a very successful course in 2015 and another one is being planned for 2017. The efforts of this task force were considered necessary to meet the ongoing needs of our membership. This task force will be transformed into a standing committee in 2016.

As telemedicine expands in unexpected ways, the Tele-ICU Committee continues to explore and publish on issues in regulation, billing, and technology to support how SCCM members utilize and benefit from this growing approach to ICU safety, quality and outreach.

Serving in a pivotal role, the Ethics Committee shoulders some of the most difficult aspects of critical care. This group provides case studies, webcasts and publications that provide guidance and support member understanding of deployable ethical concepts that impact daily care.

The ICU Management Business Line proudly hosts two award-based committees whose work is often challenging from a complexity and time standpoint, but each year they reliably bring you the most worthy individuals, teams or designs in their domains.

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LEARN all you need to know with Self-Directed Multiprofessional Critical Care Board Review Course (MCCBRC). Experience the same didactic sessions from the 2015 live version of the course at your own pace. Physicians, nurses and pharmacists are eligible to receive 41.75 hours of continuing education credit.

REVIEW the full gamut of critical care topics in Comprehensive Critical Care: Adult, the most complete critical care textbook for any learner in adult practice.

ASSESS your knowledge with Self-Assessment in Adult Multiprofessional Critical Care, a collection of over 300 questions, answers and rationales from the top 20 critical care focus areas. Available in interactive, print and eBook formats.

EVALUATE your critical care knowledge while receiving maintenance of certification credit with the Advanced Knowledge Assessment in Adult Critical Care, composed of 150 questions and rationales with accompanying study materials.

ENHANCE your learning experience by purchasing the Comprehensive Adult Board Prep Bundle. The bundle is available in print and electronic versions and includes Self-Directed MCCBRC, the Comprehensive Critical Care: Adult textbook/eBook, and both versions of the self-assessment (print/eBook and interactive).

For more information, visit www.sccm.org/adultboardreview.
Critical Care Congress

New and Expanded

Pre- and Post-Congress Educational Sessions
Participate in pre- or post-Congress educational sessions. Each course is packed with essential clinical information to keep you well informed on various critical care topics. This year’s courses include: Advanced Practice Providers in the ICU: Finances and Productivity, Adult Airway Management in the Critically Ill, Advances in Veterinary Critical Care, Critical Care Pharmacy Preparatory Review and Recertification Course, Critical Care Ultrasound, Critical Care Ultrasound – Pediatric, Current Concepts in Adult Critical Care, Current Concepts in Pediatric Critical Care, ECMO Management, Fundamentals Faculty Academy, Hemodynamic Monitoring: From Cardiovascular Physiology to Applied Intensive Care Medicine, and Mechanical Ventilation: Strategies and Implementation. For course details, see pages 8 and 9.

Research Snapshot Theaters and ePosters
Research Snapshot Theaters will showcase Research Snapshot award winners and authors of accepted abstracts and the top case reports. Authors will present their submissions, and sessions will be moderated by noted faculty and experts. Presentations will be held in designated sections of the Exhibit Hall on Sunday, February 21 through Tuesday, February 23, 2016. All abstracts will be on display in the Poster Hall. In addition, attendees will have the opportunity to view all posters in an electronic format via computers, screens and other mobile views. These ePosters will be searchable and will include enhanced information to provide the most recently available critical care research.

Social Media
Meet with members of SCCM's Social Media Task Force in the Social Media Lounge located in the Exhibit Hall, booth #118. Explore social media trends and discover new ways to use social media professionally. If you are active on social media, post to Twitter with hashtag #CCC45 and help capture the excitement of Congress! Be sure to check out the running Twitter wall in the Exhibit Hall.

SCCM Futures Booth
Join us January 21 to 25, 2017, in Honolulu, Hawaii, USA, for the 46th Critical Care Congress. Stop by the SCCM Futures Booth, #120, and step into the Aloha life. Accessorize in true island style and snap a selfie! Post to Twitter with hashtag #CCC46 and encourage your colleagues to join you in the Hawaiian sunshine.

Sightseeing Activities
Experience some of central Florida’s exciting theme park attractions. SCCM is offering discounted admission tickets to Walt Disney World® Resort and Universal Orlando Parks. See page 32 for more details.

Back by Popular Demand

Congress On Demand
Full Congress attendees gain access to Congress On Demand for continued learning after the live event. Congress On Demand contains the audio recordings and slides from hundreds of individual presentations drawn from the concurrent, joint and plenary educational sessions, as well as breakfast symposia. Your subscription to this resource is included in your Congress registration fee. On Demand will be available approximately 10 days after Congress ends.

Educational Symposia
Learn about clinical breakthroughs and advances in patient care during educational symposia. Supported by an educational grant from Merck, the session Improving Clinical Outcomes and Pathogen-Directed Therapy for Serious Bacterial Infections in the Critical Care Setting will take place on Monday, February 22, 2016, at 6:30 a.m. This session is complimentary for all Congress registrants, and no additional registration is needed to attend.

Congress App
Access the Congress schedule and much more from the palm of your hand. With apps built specifically for the iPad®, iPhone® and Android™, you can search for sessions, speakers, business meetings, exhibitors, and abstracts. The app will be available for download in early 2016.

CME/CE and MOC Credit
Continuing education (CE), continuing medical education (CME) and maintenance of certification (MOC) credits are available to Congress attendees. Attendees should claim credit commensurate with the extent of their participation in the activity. For your convenience, CME/CE stations will be located near the registration area so you can complete evaluations and forms on site.

Plenary Sessions
Attend thought-provoking presentations that promote innovative developments in critical care. Plenary sessions are held at unopposed times with presentations given by distinguished, world-renowned leaders in the critical care field. Speakers include:

Derek C. Angus, MD, MPH, FRCP, MCCM
Chair, Department of Critical Care Medicine
Distinguished Professor and Mitchell P. Fink Endowed Chair
Department of Critical Care Medicine, University of Pittsburgh
University of Pittsburgh Medical Center Health System
Pittsburgh, Pennsylvania, USA

Brian L. Ertstad, PharmD, BCPS, MCCM
Professor and Head
The University of Arizona College of Pharmacy
Department of Pharmacy Practice and Science
Tucson, Arizona, USA

Maureen A. Harvey, MPH, MCCM
Critical Care Educator and Consultant
Glenbrook, Nevada, USA

Jay A. Johannigman, MD, FACS, FCCM
Professor of Surgery
Director of the Division of Trauma, Critical Care and Acute Care Surgery
United States Air Force Reserve
University of Cincinnati College of Medicine
Cincinnati, Ohio, USA

James S. Merlino, MD, FACS, FASCRS
President and Chief Medical Officer of the Strategic Consulting Division
Press Ganey Associates, Inc.
Chicago, Illinois, USA

Lewis A. Rubinson, MD, PhD
Medical Director
Critical Care Resuscitation Unit
R Adams Cowley Shock Trauma Center
Associate Professor of Medicine
University of Maryland School of Medicine
Baltimore, Maryland, USA

Jean-Louis Vincent, MD, PhD, FCCM
Professor of Intensive Care Medicine, Université Libre de Bruxelles
Head, Department of Intensive Care Medicine
Erasme University Hospital
Brussels, Belgium

Congress Highlights
Popular Congress Events and Sessions

Fellowship Program Directors’ Luncheon
Critical care fellowship program directors are invited to participate in the Fellowship Program Directors’ Luncheon, to be held Monday, February 22, 2016, from 12:15 p.m. to 1:30 p.m. at the Orange County Convention Center. This year’s luncheon will address fellowship program use of simulation to provide training in non-procedural areas as well as methods for measuring competence using simulation. Nationally recognized experts will present and lead the discussion. This is a ticketed session and requires advance registration and an additional fee to attend.

Educational Symposia
Learn about clinical breakthroughs and advances that lead to better patient care during these thought-provoking presentations. Each session is presented by leading experts in critical care and offers a thorough analysis of the developments and controversies affecting most ICU environments. These industry-supported sessions are complimentary for all Congress registrants and no additional registration is needed to attend.

Abstract Presentations and Poster Hall Events (Non-CE Sessions)

Poster Displays and ePosters
Abstracts of original scientific research findings will be on display in the Poster Hall, which will be open Sunday, February 21, through Tuesday, February 23, 2016. In addition to the standard Poster Hall, attendees will have the opportunity to view all posters in an electronic format via computers, screens and other mobile views. ePosters will be searchable and will include enhanced information to provide the most recent critical care research available.

Star Research Presentations
These presentations (previously known as Oral Presentations) will be scheduled, unopposed, for two hours on Sunday, February 21, 2016. They will highlight the top 64 abstracts submitted. The abstracts presented during these sessions will not be on display in the Poster Hall but can be found as ePosters.

Research Snapshot Theaters
Research Snapshot award winners and authors of accepted abstracts and the top case reports will present their submissions with time for questions and answers. Sessions will be moderated by noted faculty and experts to facilitate the exchange of ideas and commentary. Presentations will be held in designated sections of the Exhibit Hall on Sunday, February 21 through Tuesday, February 23, 2016.

Abstract Awards Presentation
Winners of SCCM’s abstract-based awards will be recognized during a ceremony on February 21, 2016.

Pre-Congress Educational Sessions

Arrive in Orlando early and participate in Pre-Congress educational sessions. Each course is packed with essential clinical information to keep you well informed on various critical care topics. Course prices vary.

Friday, February 19 and Saturday, February 20, 2016

Full-Day Courses Breakfast and lunch are included in the registration fee.

Advances in Veterinary Critical Care
*Hold in partnership with the American College of Veterinary Emergency and Critical Care*
This course is designed for veterinary emergency and critical care practitioners, residents and interns. It will focus on veterinary cardiac disease and anaesthesia/anaesthesia. The first day talks will be given by the winner of the 2015 Jack Mann Scientific Achievement award. Topics to be covered include: cardiac function, treatment of congestive heart failure, cardiac arrhythmias, and pulmonary hypertension, in addition to cardiac imaging modalities. Day two topics will include the selection and use of anesthetic, analgesic, and anxiolytic drugs in the veterinary ER and ICU, in addition to anesthetic planning for critically ill patients. The second day will culminate in a mock exam for those preparing to sit for the ACVECC boards.

Critical Care Ultrasound – Pediatric
Learn how to perform and interpret pediatric ultrasound imaging during this comprehensive two-day course. Extensive faculty coverage ensures a significant hands-on experience for each participant.

Critical Care Ultrasound
Gain the realistic training needed to perform and interpret ultrasound imaging during this two-day comprehensive course. Participants benefit from guided, focused skill stations, featuring live models and interactive presentations to reinforce key learning points.

Current Concepts in Adult Critical Care
Enhance and update your critical care knowledge by attending this two-day multidisciplinary course, which highlights a variety of topics applicable to the ICU setting. The interactive format will include presentations on select topics, such as: decoding patient safety and quality in the ICU, controversies in traumatic brain injury, emerging infectious diseases, envisioning the future of critical care practice, management of the burn-injured patient, and an update in emergency airway management.

The registration fee includes a copy of the 2016 edition of *Current Concepts in Adult Critical Care* and access to the On Demand version of the course.

Current Concepts in Pediatric Critical Care
Attain expert knowledge and bring home new information and approaches for your pediatric critical care practice. This two- day interactive course will focus on clinical challenges immediately pertinent to the critical care practitioner and provide insight into new and controversial topics. This year, topical areas will include updates on new and cutting-edge approaches to traumatic brain injury, trauma, and stroke. The sessions will also include a range of additional topics, along with the opportunity to watch and engage with experts as they debate the appropriate timing of tracheostomies in the pediatric ICU, and whether the choice of ventilator mode matters.

The registration fee includes a copy of the 2016 edition of *Current Concepts in Pediatric Critical Care* and access to the On Demand version of the course.
Pre-Congress Educational Sessions

Congress Advance Program Register today at www.sccm.org/congress October/November 2015

visit www.sccm.org/Congress.

Florida, USA. Round-trip transportation between Orlando and Tampa will be provided.

South Florida Heath Center for Advanced Medical Learning and Simulation in Tampa.

and economic and ethical considerations. This course will be held at the University of South Florida Heath Center for Advanced Medical Learning and Simulation in Tampa, Florida, USA. Round-trip transportation between Orlando and Tampa will be provided with limited transportation back to Orlando. For hotel and travel details, see page 31 or visit www.sccm.org/Congress.

ECMO Management

Beverages are included in the registration fee.

Full-Day Courses Breakfast and lunch are included in the registration fee.

This half-day course will cover information on airway anatomy, management of the difficult airway, anatomic surprises, airway devices and pharmacologic support. The afternoon will consist of skill stations for direct laryngoscopy, percutaneous and surgical cricothyroidectomy, channelled and non-channelled airway devices, and King airway insertion and removal.

Fundamentals Faculty Academy

This single-day course will introduce intensivists and other intensive care unit clinicians to Fundamental Critical Care Support (FCCS), Pediatric Fundamental Critical Care Support (PFCCS) and Fundamental Disaster Management (FDM). Offered for both those interested in bringing FCCS, PFCCS or FDM to their institutions and individuals from institutions currently hosting a Fundamentals course, leading course consultants and developers will share strategies for ways to improve how the course is provided within a variety of environments. In addition, each registrant will be able to choose a complimentary version of Self-Directed FCCS, Self-Directed PFCCS, or Self-Directed FDM.

Current issues, challenges, and strategies for ways to improve the course will be presented.

American College of Critical Care Medicine

Join your colleagues in several American College of Critical Care Medicine (ACCM) activities. Support members as they are inducted into the College during the Convocation and Society of Critical Care Medicine (SCCM) Awards Ceremony, and network with the ACCM leadership during the business meeting. As an organization dedicated to creating a greater understanding of critical care, ACCM emphasizes quality management in the practice and administration of care, communication and public opinion. Become more involved with the ACCM and SCCM during these events.

ACCM Convocation and SCCM Awards Ceremony

Monday, February 22, 2016; 6:00 p.m. – 8:00 p.m.

Hyatt Regency Orlando.

Members and guests are invited to attend the ACCM Convocation and SCCM Awards Ceremony, where new Fellows will be inducted into the College, and award and grant recipients will be honored. Come support your colleagues during this prestigious occasion.

David N. Herndon, MD, MCCM, will receive the 2016 ACCM Distinguished Investigator Award, ACCM’s highest recognition given to an individual whose scientific and educational contributions to the art and science of critical care demonstrate career commitment. Join your colleagues in congratulating Hemdon and plan on attending his address, “Modulation of the Hypercatabolic Response to Burn Injury” on Tuesday, February 23, 2016 during the Research Spotlight Session in the Orange County Convention Center.

ACCM Business Meeting

Tuesday, February 23, 2016; 12:00 p.m. – 12:30 p.m.

Orange County Convention Center

The leadership of the ACCM will announce election results for the 2016-2017 Board of Regents and summarize ACCM activities over the past year. This is a great opportunity to meet with board members and network with ACCM Fellows.

Become a Fellow of the American College of Critical Care Medicine

Tuesday, February 23, 2016; 12:30 p.m. – 1:30 p.m.

Orange County Convention Center

Attend this year’s session to obtain information on joining your colleagues and becoming a Fellow of this distinguished body. You can also stop by the Critical Connections Cafe or contact Carol Prendergast at cprendergast@sccm.org to obtain information. Apply online at www.sccm.org/ACCM. Applications are due March 15, 2016.

Fellows of the College are eligible to nominate other Fellows for the designation of Master of Critical Care Medicine (MCCM). Contact Carol Prendergast to obtain the award criteria or visit www.sccm.org/ACCM. Nominations are due April 15, 2016.

ACCM Town Hall

Tuesday, February 23, 2016; 3:00 p.m. – 4:30 p.m.

Orange County Convention Center

All Congress attendees are invited to attend the ACCM Town Hall. Jean-Louis Vincent, MD, PhD, FCCM, and Marie Baldisseri, MD, MPH, FCCM, will present a pro/con debate, Fluid: Friend or Foe? Wendy Ricketts Greene, MD, FACS, FCCM, and A. Joseph Layon, MD, FACP, will address the topic, Oxygen: Too Much or Not Enough?
Session by Topic Area

**ADMINISTRATION**
- Critical Care Needs and Capacity Building in Limited Resource Settings P. 24
- The Naked Patient: Privacy in the Setting of Big Data P. 23
- New American College of Critical Care Medicine Guidelines P. 18
- Preparing for a Deadly Infectious Disease in My Unit P. 24
- Project Dispatch: Strategies for Promoting Patient- and Family-Centered Care in the ICU P. 18

**CARDIOVASCULAR AND RESUSCITATION**
- Bench-Pressing in the ICU: Which Vasopressor Agent Should I Choose for My Patient? P. 18
- How to Build a Successful Extracorporeal Membrane Oxygenation Program in Your Institution P. 19
- Monitoring Resuscitation P. 25
- Optimizing Post-Cardiac Arrest Care P. 21
- Pro/Con Debates: Fluid - Friend or Foe? Oxygen – Too Much or Not Enough? (ACCM Town Hall) P. 22

**ENDOCRINE/RENAAL**
- De-resuscitation: Reversal When the Fluid Comes Back P. 17
- It’s Hot: Not Every Fever an Infection? P. 23
- Secretagogues, Hormones and Uncoupling in Chronic Critical Illness: Science and Therapy P. 21
- Why Is There So Much Acute Kidney Injury? P. 24

**ETHICS/END OF LIFE**
- Shared Decision Making and Decision Analysis in the ICU P. 22
- When Expectations and Desires Meet Reality: Guiding Surrogates Through Critical Illness P. 17

**GI/NUTRITION**
- Advancing Nutrition Therapies in the ICU P. 21
- Critical Care Issues in Hepatic Failure P. 16
- Nutrition Support in Special Populations P. 25

**HEMATOLOGY AND IMMUNOLOGY**
- Are Blood Transfusions Necessary? P. 19
- Assessing and Reversing Coagulopathy P. 20
- Human Microbiome: A Driver of the Immune System P. 21
- Immunomodulation in the Critically Ill P. 25
- Therapeutic Apheresis in the Critical Care Unit P. 24

**INFECTIOUS DISEASE**
- Aerosolized Antibiotics in the ICU: Where Do They Fit? P. 22
- The Difficult Task of Treating Multidrug-Resistant Acinetobacter baumannii P. 18
- Experimental Extracorporeal Therapies for the Treatment of Bloodstream Infections P. 22
- Response: Research: What We Learned, or Should Learn, from Research Efforts During the Ebola Outbreak P. 25

**NEUROSCIENCE**
- Acute Stroke in the ICU: New Methods of Rescue P. 20
- Controversies in Neurocritical Care P. 18
- Goal-Directed Hemodynamic Therapy in Acute Neurological Disorders P. 21
- The Goldilocks Dilemma: Electroencephalography Monitoring in the ICU P. 21
- Peering into the Crystal Ball: Updates on Neuroprognostication for Common ICU Situations P. 22

**PEDIATRICS**
- Approaches to Acute Brain Injury in Children P. 16
- Managing Comfort in the Pediatric ICU: Does Comfort Come at the Expense of Withdrawal or Delirium? P. 21
- Neurocognitive and Psychological Outcomes After Critical Illness in Childhood P. 25
- Pediatric Pulmonary Hypertension: The Changing Landscape P. 18
- Precision Pharmacodelivery in the Pediatric ICU: The Role of Kinetics Analysis and Modeling P. 19

**PHARMACOLOGY**
- Ketamine Use in the ICU: Re-emergence of Special K P. 17
- Resuscitation Fluid Controversies P. 16
- This Is Jeopardy: Answers and Questions with Anticoagulant Reversal P. 24

**PLENARY**
- Critical Care Air Transport: A Decade of Critical Care in the Air P. 18
- Fusing Clinical Care with Clinical Research: The Future of the Randomized Controlled Trial in a Self-Learning Healthcare System P. 16
- The Future of Critical Care Medicine P. 17
- Patient Experience in a Value-Based World P. 19
- Post-ICU Syndrome: Truth About Consequences, Right Care, Right Now… and Later P. 21
- Treating Lethal Infection in the ICU P. 24
- Value-Based Medicine: Dollars and Sense P. 22

**PROFESSIONAL DEVELOPMENT**
- Advanced GRADE: Making the Most of Guideline Development P. 17
- Become a Fellow of the American College of Critical Care Medicine (Non-CE Session) P. 22
- Beyond Procedural Simulation in Critical Care Fellowships (Fellowship Directors’ Luncheon) P. 19
- Optimizing Therapeutic and Social Media in Critical Care P. 21
- Training the Next Generation of Critical Care Practitioners: State of the Critical Care Union P. 22
- Transitioning from Training to First Job: Oh Boy, I Wasn’t Ready for This! P. 18

**PULMONARY**
- Clinical Challenges in Mechanical Ventilation P. 24
- Clinician Pro/Con: Paralysis and Prone Positioning in Acute Respiratory Distress Syndrome P. 19
- Critical Care and Emergency Research Networks P. 16
- Inhaled Therapies in the ICU P. 23
- Mechanical Ventilation: Physiology in Action P. 22
- Update on the PETAL Network: Prevention and Early Management of Acute Lung Injury P. 23

**QUALITY AND PATIENT SAFETY**
- ABCDEF Bundle Improvement Collaborative: Is the Sum Greater Than the Parts? P. 20
- The Agency for Healthcare Research and Quality’s National Implementation of Comprehensive Unit-Based Safety Program (CUSP) to Reduce Catheter-Associated Urinary Tract Infection (CAUTI) P. 19
- Creating Your Own Simulation Curriculum (Critical Care Societies Collaborative Session) P. 16
- No Good Deed Goes Unpunished: The Pros and Cons of Pay for Performance P. 20
- THRIVE: Supporting Survivors After Critical Illness P. 16
- Towards Value-Based Critical Care: Aligning Financial Incentives to Improve Delivery P. 23
- Unleashing the Power of Big Data: Leveraging Existing Clinical Data in Critical Care Research P. 25

**SURGERY AND TRAUMA**
- I Don’t Need a Stinking Operating Room: Safety of Surgery at the bedside P. 19
- Lessons Learned in Iraq and Afghanistan: What Should Be Applied to Civilian Trauma Practice? P. 18
- Management of the Acute Care Surgical Patient P. 25
- So You Think You’re Smarter than a Fellow P. 20

**YEAR IN REVIEW**
- Year in Review: Anesthesiology P. 23
- Year in Review: Clinical Pharmacology and Pharmacy P. 20
- Year in Review: Emergency Medicine P. 23
- Year in Review: Internal Medicine P. 23
- Year in Review: Neurosciences P. 23
- Year in Review: Nursing P. 23
- Year in Review: Pediatrics P. 23
- Year in Review: Research P. 20
- Year in Review: Surgery P. 20
**FRIDAY, FEBRUARY 19, 2016**

8:00 A.M. - 5:00 P.M.

**PRE-CONGRESS EDUCATIONAL SESSION**

Advances in Veterinary Critical Care - Day 1: Cardiology in the Critical Patient

**Moderator:** Benjamin Brainard

**LEARNING OBJECTIVES**
- Review the use of echocardiography to evaluate cardiac function and volume status in the critical veterinary patient
- Discuss novel therapies for treatment of congestive heart failure and cardiac arrhythmias
- Examine the diagnostic and therapeutic approach for pulmonary hypertension in veterinary species
- Recognize the utility of advanced imaging modalities (eg, magnetic resonance imaging) for assessment of cardiac function in veterinary species

8:00 a.m. - 8:45 a.m.
- Canine Heart Disease: Etiologies and Therapeutics
  John E. Rush
  8:45 a.m. - 9:30 a.m.
- Critical Care Thoracic Ultrasound
  Teresa C. DeFrancesco
  9:30 a.m. - 10:15 a.m.
- Echocardiography in the ER and ICU
  Teresa C. DeFrancesco
  10:15 a.m. - 10:30 a.m.
- Break
  10:30 a.m. - 11:15 a.m.
- Pulmonary Hypertension: Diagnosis and Management
  John E. Rush
  11:15 a.m. - 12:00 p.m.
- Cardiac Biomarkers: Proper Use in the ER and ICU
  Teresa C. DeFrancesco
  12:00 p.m. - 1:00 p.m.
- Lunch
  1:00 p.m. - 1:45 p.m.
- Feline Heart Disease: Etiologies and Therapeutics
  Teresa C. DeFrancesco
  1:45 p.m. - 2:30 p.m.
- ER Arrhythmias: Which Ones Are Killers?
  John E. Rush
  2:30 p.m. - 3:15 p.m.
- Fulminant Heart Failure: Strategies for When Laxis Isn’t Enough
  John E. Rush
  3:15 p.m. - 3:30 p.m.
- Break
  3:30 p.m. - 4:15 p.m.
- Cardiology Case Files: The Dyspneic and the Syncopal
  John E. Rush, Elizabeth Rozanski
  4:15 p.m. - 5:00 p.m.
- IVECCS 2015: Absorbs in Review
  Linda J. Barton

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This schedule is subject to change. Visit www.sccm.org/congress for the most up-to-date schedule.
Schedule of Events

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8:00 A.M. - 5:30 P.M.

* PRE-Congress EDuCAtionAL SESSiON

Critical Care Pharmacy Preparatory Review and Recertification Course - Day 1 (see page 15 for Day 2)
Moderator: Amy Dzierba

LEARNING OBJECTIVES
• Review disease states and therapeutics
• Provide a framework to prepare for the specialty certification examination in critical care pharmacy
• Develop thought processes needed to solve patient care problems in each topic

8:00 a.m. - 9:30 a.m.
> Shock Syndromes and Sepsis
Ishaq Lat, Seth R. Bauer
9:30 a.m. - 10:15 a.m.
> Supportive and Preventive Medicine
Amy L. Dzierba
10:15 a.m. - 10:30 a.m.
> Break
10:30 a.m. - 11:30 a.m.
> Practice Management: Medication Safety and Protocol Development
Lisa Hall Zimmerman, Henry Cohen

11:30 a.m. - 12:30 p.m.
> Cardiovascular Critical Care
Erik E. Abel
12:30 p.m. - 1:30 p.m.
> Fluids, Electrolytes, Acid-Base Disorders and Nutrition Support
Roland N. Dickerson
3:00 p.m. - 3:45 p.m.
> Principles of Estimating Renal Clearance, Acute Kidney Injury, and Renal Replacement in the Critically Ill Patient
Michael L. Bentley
3:45 p.m. - 4:00 p.m.
> Break
4:00 p.m. - 5:30 p.m.
> Pulmonary Disorders
Ishaq Lat, Amy L. Dzierba

7:30 A.M. - 5:30 P.M.

* PRE-Congress EDuCAtionAL SESSiON

Critical Care Ultrasound - Day 1 (see page 15 for Day 2)
Moderators: Mark P. Hamlin, Jose L. Diaz-Gomez

LEARNING OBJECTIVES
• Demonstrate a foundation of ultrasound knowledge
• Practice acquisition of high-quality images via hands-on exercises
• Demonstrate image interpretation and utilization of ultrasound as a diagnostic tool
7:30 a.m. - 7:45 a.m.
> Welcome and Introduction
7:45 a.m. - 8:15 a.m.
> Pretest
8:15 a.m. - 9:00 a.m.
> Basic Physics and Knobology
9:00 a.m. - 9:45 a.m.
> Basic Windows and Views
9:45 a.m. - 10:00 a.m.
> Break
10:00 a.m. - 12:00 p.m.
> Skill Stations
1. Apical Views
2. Parasternal Views
3. Subcostal Views
12:00 p.m. - 1:00 p.m.
> Lunch and Clinical Cases
1:00 p.m. - 1:30 p.m.
> Basic Evaluation of Left Ventricular (LV) Function and Cardiac Output
1:30 p.m. - 2:00 p.m.
> Evaluation of Pneumothorax, Pleural Effusions and Thoracentesis
2:00 p.m. - 2:30 p.m.
> Vascular Ultrasound
2:30 p.m. - 2:45 p.m.
> Break
2:45 p.m. - 4:45 p.m.
> Skill Stations
1. Lung: Pleural Effusions and Thoracentesis
2. Vascular Ultrasound
3. Left Ventricular Function
4:45 p.m. - 5:30 p.m.
> Clinical Cases

8:45 A.M. - 7:00 P.M.

* PRE-Congress EDuCAtionAL SESSiON

Critical Care Ultrasound Pediatric - Day 1 (see page 15 for Day 2)
Moderators: Thomas Conlon, Erik Su

LEARNING OBJECTIVES
• Demonstrate a foundation of ultrasound knowledge
• Practice acquisition of high-quality images via hands-on exercises
• Demonstrate image interpretation and utilization of ultrasound as a diagnostic tool
8:45 a.m. - 9:30 a.m.
> Welcome and Pretest
9:30 a.m. - 10:15 a.m.
> Knobology, Physics and Artifacts
10:15 a.m. - 10:45 a.m.
> Focused Assessment with Sonography in Trauma (FAST)/Abdominal Examination
10:45 a.m. - 11:30 a.m.
> Vascular Access and Guided Procedures
11:30 a.m. - 12:30 p.m.
> Lunch and Cases
12:30 p.m. - 2:30 p.m.
> Skill Stations
1. FAST/Abdomen
2. Vascular Procedures
3. Ultrasound Guided Procedures
2:30 p.m. - 2:45 p.m.
> Break
2:45 p.m. - 3:30 p.m.
> Evaluation of Pneumothorax, Effusions, and Diaphragm
3:30 p.m. - 4:15 p.m.
> The Cardiac Examination
4:15 p.m. - 4:45 p.m.
> Volume Assessment
4:45 p.m. - 5:00 p.m.
> Break
5:00 p.m. - 7:00 p.m.
> Skill Stations
1. Apical Views
2. Parasternal Views
3. Subcostal Views
Congress Advance Program
Register today at www.sccm.org/congress

October/November 2015

SATURDAY, FEBRUARY 20, 2016

8:00 A.M. - 12:00 P.M.

* PRE-CONGRESS EDUCATIONAL SESSION

Advanced Practice Providers in the ICU: Finances and Productivity
Moderator: Rob Grabenkort, Marilyn Hravnak

LEARNING OBJECTIVES
- Develop approaches to assess the costs and revenue capture of advanced practice providers (APPs) in the ICU
- Improve knowledge of optimal billing practices with APP/intensivist teams
- Determine how relative-value units (RVUs) are applied and used to track issues APP/intensivist productivity.
- Evaluate productivity for non-revenue-producing personnel in the ICU
- Demonstrate synthesis of finance and productivity information through case study application

8:00 a.m. - 8:45 a.m.
- Financial Aspects of APPs in the ICU: Balancing Costs and Revenues
  Walter A. Boyle
  8:45 a.m. - 9:30 a.m.
- Who Bills for What? Delineating Billing Choices Within Scenarios
  George A. Sample
  9:30 a.m. - 10:15 a.m.
- RVUs: What They Mean and How to Use Them to Leverage Productivity
  David L. Carpenter
  10:15 a.m. - 10:30 a.m.
- Break
  10:30 a.m. - 11:15 a.m.
- Creation of a Productivity Tool for Non-Revenue Producers
  Jacqueline T. Steuer
- Interactive Financial Case Studies
  Maureen A. Madden, Walter A. Boyle, George A. Sample, David L. Carpenter, Jacqueline Y. Steuer

8:00 A.M. - 5:00 P.M.

* PRE-CONGRESS EDUCATIONAL SESSION

Adult Airway Management in the Critically III
Moderators: Daniel Diedrich, Gregory Kerr

LEARNING OBJECTIVES
- Describe the anatomy of the human airway
- Discuss how to manage an emergency airway
- Identify the medications used during airway management
- Review the new devices available for airway management and practice proper usage
- Perform percutaneous and surgical cricothyotomy and practice proper technique

8:00 a.m. - 8:45 a.m.
- Airway Anatomy
  David W. Barbara
  8:45 a.m. - 9:30 a.m.
- Management of the Difficult Airway
  John C. Klick
  9:30 a.m. - 10:15 a.m.
- Anatomic Surprises
  Adam S. Evans
  10:15 a.m. - 10:30 a.m.
- Break
  10:30 a.m. - 11:15 a.m.
- Airway Devices You Should Know About
  Shreyajit Kumar
  11:15 a.m. - 12:00 p.m.
- Pharmacologic Support: Sedation and Paralysis
  Jonathan Hastie
  12:00 p.m. - 1:00 p.m.
- Lunch
  1:00 p.m. - 1:30 p.m.
- Skill Station: Direct Laryngoscopy
  Gregory E. Kerr, Jonathan Hastie
  1:30 p.m. - 2:00 p.m.
- Skill Station: King Airway Insertion and Removal
  Nathan J. Smischney
  2:00 p.m. - 2:30 p.m.

Continued

SATURDAY, FEBRUARY 20

8:00 A.M. - 5:00 P.M.

* PRE-CONGRESS EDUCATIONAL SESSION

Current Concepts in Adult Critical Care – Day 2
(see page 11 for Day 1)
Moderators: Edward Bittner, Jennifer LaRosa

LEARNING OBJECTIVES
- Discuss updates on diagnostic and treatment options in critical illness
- Debate controversial topics
- Examine patient safety and quality improvement initiatives in the ICU

8:00 a.m. - 8:45 a.m.
- Fluid Management in the Critically Ill: Changing Paradigms
  Michael J. Connor
  8:45 a.m. - 9:30 a.m.
- Knowing When You’re Over Your Head: Considerations for Community Critical Care Practitioners and the Role of Telemedicine
  Corey Scarf
  10:15 a.m. - 10:30 a.m.
- Break
  10:30 a.m. - 11:15 a.m.
- Advanced Cardiopulmonary Life Support Controversies
  Michael F. O’Connor
  11:15 a.m. - 12:00 p.m.
- Best Rounding Practices in the ICU
  Henry A. Shaffer
  12:00 p.m. - 1:00 p.m.
- Lunch
  1:00 p.m. - 1:45 p.m.
- Emerging Infectious Diseases
  Jorge Luis Hidalgo
  1:45 p.m. - 2:30 p.m.
- Attorney Case Discussion
  James Szable
  2:30 p.m. - 3:15 p.m.
- Seamless Transitions
  Steven Greenberg
  3:15 p.m. - 3:30 p.m.
- Break
  3:30 p.m. - 4:15 p.m.
- Post-ICU Syndrome
  Michele C. Bala
  4:15 p.m. - 5:00 p.m.
- Toxicology: New and Emerging Threats
  Steven Seifert
  5:15 p.m. - 6:00 p.m.

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**Schedule of Events**

**8:00 A.M. - 5:00 P.M.**

**PRE-CONGRESS EDUCATIONAL SESSION**

**Current Concepts in Pediatric Critical Care – Day 2**

*(see page 11 for Day 1)*

**Moderator:** James Killinger, David Turner

**LEARNING OBJECTIVES**

- Discuss updates on diagnostic and treatment options in pediatric critical illness
- Debate controversial topics in pediatric critical care
- Examine patient safety and quality improvement and outcome in the pediatric ICU

**8:00 a.m. - 8:35 a.m.**

- **Quality and Safety: Are We Using the Correct Metrics?**
  - Derek S. Wheeler, Remi Hueckel, James Killinger
  - David A. Turner
  - 9:40 a.m. - 9:45 a.m.

- **The Changing Landscape of Education in the Pediatric ICU**
  - David A. Turner
  - 9:40 a.m. - 10:15 a.m.

- **Inflammatory Disorders of the Brain in the Pediatric ICU**
  - Jeffrey Edwards, Robert J. Graham, Ana Lia Graciano, David A. Turner
  - 10:15 a.m. - 10:30 a.m.

- **Panel Discussion**
  - Michael J. Bell, Ayse A. Arikan
  - 11:40 a.m. - 12:00 p.m.

- **Wrap-Up and Course Evaluation**
  - Jean-Louis Teboul, Michael R. Pinsky
  - 4:30 p.m. - 5:00 p.m.

**LEARNING OBJECTIVES**

- Examine patient safety and quality improvement and outcome in the pediatric ICU
- Debate controversial topics in pediatric critical care
- Examine patient safety and quality improvement and outcome in the pediatric ICU

**8:00 A.M. - 5:00 P.M.**

**PRE-CONGRESS EDUCATIONAL SESSION**

**Fundamentals Faculty Academy**

**Moderator:** Gregory Botz

**LEARNING OBJECTIVES**

- Discuss how to integrate lectures into skill stations for each Fundamentals course
- Apply case studies to different education models
- Practice the skills needed to provide an improved learner experience

**8:00 a.m. - 8:20 a.m.**

- **Welcome and Introduction**
  - Dennis E. Amundson
  - 8:20 a.m. - 8:40 a.m.

- **Fundamental Critical Care Support Overview**
  - Keith Killu
  - 9:00 a.m. - 9:20 a.m.

- **Pediatric Fundamental Critical Care Support Overview**
  - Karl L. Serrao
  - 9:20 a.m. - 9:40 a.m.

- **Fundamental Disaster Management Overview**
  - Mary J. Reed
  - 9:40 a.m. - 9:55 a.m.

- **Break**
  - 9:55 a.m. - 10:15 a.m.

- **Case Study: Introduction**
  - Babak Sarani
  - 10:15 a.m. - 10:35 a.m.

- **Case Study 1: Small Institution Model**
  - Babak Sarani
  - 10:35 a.m. - 10:55 a.m.

- **Case Study 2: Online Learning Model**
  - Michael D. Christian
  - 10:55 a.m. - 11:15 a.m.

- **Case Study 3: Large Institution Model**
  - Mohan R. Mysores
  - 11:15 a.m. - 11:35 a.m.

- **Case Study 4: Integrated Education Model**
  - Ayan Sen
  - 11:35 a.m. - 12:00 p.m.

- **Lunch - The Mechanics of Running a Course: The Value of Simulation in Learning**
  - Gregory H. Botz
  - 12:30 p.m. - 1:00 p.m.

- **Lunch - The Mechanics of Running a Course: The Value of Simulation in Learning**
  - Michael R. Pinsky
  - 12:00 p.m. - 1:00 p.m.

- **Lunch**
  - 12:00 p.m. - 1:00 p.m.

- **Break**
  - 1:00 p.m. - 1:30 p.m.

- **Fundamental Critical Care Support Overview**
  - Jean-Louis Teboul
  - 1:30 p.m. - 1:50 p.m.

- **Pediatric Fundamental Critical Care Support Overview**
  - Michael D. Christian
  - 1:50 p.m. - 2:10 p.m.

- **Panel Discussion**
  - Michael J. Bell, Ayse A. Arikan
  - 2:10 p.m. - 2:30 p.m.

- **Wrap-Up with Questions and Answers**
  - Jean-Louis Teboul, Michael R. Pinsky
  - 4:30 p.m. - 5:00 p.m.

**8:00 A.M. - 5:00 P.M.**

**PRE-CONGRESS EDUCATIONAL SESSION**

**Fundamentals Faculty Academy**

**Moderator:** Gregory Botz

**LEARNING OBJECTIVES**

- Discuss basic principles of cardiovascular physiology
- Review current technologies of ICU cardiovascular monitoring
- Participate in virtual bedside case study scenarios

**8:00 a.m. - 8:15 a.m.**

- **Introduction**
  - Michael R. Pinsky
  - 8:15 a.m. - 8:45 a.m.

- **Vascular Pressure Monitoring: Applications and Pitfalls**
  - R. Phillip Dellinger
  - 8:45 a.m. - 9:15 a.m.

- **Indicator Dilution-Derived Cardiac Output and Advanced Analytic Variables**
  - Jean-Louis Teboul
  - 9:15 a.m. - 9:45 a.m.

- **Cardiac Output by Arterial Pressure Waveform Analysis**
  - Greg S. Martin
  - 9:45 a.m. - 10:15 a.m.

- **Noninvasive Measures of Arterial Pressure and Cardiac Output**
  - Maxine Cennons
  - 10:15 a.m. - 10:30 a.m.

- **Break**
  - 10:30 a.m. - 11:15 a.m.

- **Ultrasound-Based Hemodynamic Monitoring**
  - Colin K. Grissom
  - 11:15 a.m. - 12:00 p.m.

- **Functional Hemodynamic Monitoring**
  - Michael R. Pinsky
  - 12:00 p.m. - 1:00 p.m.

- **Lunch**
  - 1:00 p.m. - 4:30 p.m.

- **Break**
  - 1:00 p.m. - 3:00 p.m.

- **Case-Based Demonstration: Acute Respiratory Distress Syndrome**
  - Greg S. Martin, Maxime Cennons
  - 1:00 p.m. - 3:40 p.m.

- **Case-Based Demonstration: Cardiogenic Shock**
  - R. Phillip Dellinger, Colin K. Grissom
  - 1:00 p.m. - 4:30 p.m.

- **Case-Based Demonstrations: Septic Shock**
  - Michael R. Pinsky, Jean-Louis Teboul
  - 3:15 p.m. - 3:30 p.m.

- **Break**
  - 3:45 p.m. - 4:00 p.m.

- **Wrap-Up with Questions and Answers**
  - Jean-Louis Teboul, Michael R. Pinsky
  - 4:30 p.m. - 5:00 p.m.

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Schedule of Events

8:00 A.M. - 5:00 P.M.

**PRE-CONGRESS EDUCATIONAL SESSION**

**Mechanical Ventilation: Strategies and Implementation**

Moderators: Richard Oeckler, Steven Holets

LEARNING OBJECTIVES
- Discuss technological advancements in mechanical ventilators
- Explain common problems related to patient-ventilator interaction
- Apply current mechanical ventilation strategies

8:00 a.m. - 8:45 a.m.
- What Is Safe Mechanical Ventilation? (see page 12 for Day 1)
  - Rolf D. Hubmayr, MD
  - Break

9:30 a.m. - 10:15 a.m.
- Noninvasive Ventilatory Support
  - Bernardo J. Selim

11:15 a.m. - 12:00 p.m.
- Patient Ventilator Asynchrony: Is There an Elephant in the Room? (PEEP?)
  - David A. Kaufman

12:00 p.m. - 1:00 p.m.
- Lunch

1:00 p.m. - 1:45 p.m.
- Hands-On Workshop: Monitoring the Lung - Respiratory Mechanics and Safe Ventilation
  - Rolf D. Hubmayr

2:30 p.m. - 3:15 p.m.
- Hands-On Workshop: Open Lung Strategies - Setting PEEP
  - Dean Hess

3:30 p.m. - 4:15 p.m.
- Hands-On Workshop: Ventilator Asynchrony - Recognition and Solutions
  - David A. Kaufman

4:30 p.m. - 5:15 p.m.
- Hands-On Workshop: Ventilator Asynchrony
  - John J. Marini

8:00 A.M. - 5:30 P.M.

**PRE-CONGRESS EDUCATIONAL SESSION**

**Critical Care Pharmacy Preparatory Review and Recertification Course - Day 2** (see page 12 for Day 1)

Moderator: Simon Lam

LEARNING OBJECTIVES
- Review disease states and therapeutics
- Provide a framework to prepare for the specialty certification examination in critical care pharmacy
- Develop thought processes needed to solve patient care problems in each topic

8:00 a.m. - 9:30 a.m.
- Neurocritical Care
  - Gretchen M. Brophy, Aaron M. Cook

9:30 a.m. - 10:30 a.m.
- Sedation, Pain, Analgesia, Delirium, and Neuromuscular Blockers
  - Kimberly Varney Gill

10:30 a.m. - 11:00 a.m.
- Research Design and Literature Evaluation
  - Ishaq Lat

11:00 a.m. - 11:45 a.m.
- Acute Cardiac Care
  - Scott T. Benken

11:45 a.m. - 12:30 p.m.
- Hepatic Failure/Gastrointestinal/Endocrine Emergencies
  - Seth R. Bauer

12:30 p.m. - 1:45 p.m.
- Lunch

1:45 p.m. - 2:30 p.m.
- Toxicology
  - Steven E. Pass

3:30 p.m. - 4:30 p.m.
- Infectious Diseases I
  - Eric W. Mueller

4:30 p.m. - 5:30 p.m.
- Infectious Diseases II
  - Simon W. Lam

7:30 A.M. – 5:30 P.M.

**PRE-CONGRESS EDUCATIONAL SESSION**

**Critical Care Ultrasound - Day 2** (see page 12 for Day 1)

Moderators: Mark P. Hamlin, Jose L. Diaz-Gomez

LEARNING OBJECTIVES
- Demonstrate a foundation of ultrasound knowledge
- Practice acquisition of high-quality images via hands-on exercises
- Demonstrate image interpretation and utilization of ultrasound as a diagnostic tool

7:30 a.m. – 8:30 a.m.
- Focused Assessment with Sonography in Trauma (FAST) Examination

8:00 a.m. - 8:30 a.m.
- Basic Evaluation of Right Ventricular Function

8:30 a.m. - 9:00 a.m.
- Pulmonary Embolism: Diagnosis and Physiology

9:00 a.m. - 9:30 a.m.
- Intravascular Volume Assessment

9:30 a.m. - 10:15 a.m.
- Break

Critical Care Ultrasound - Day 2, Continued

9:45 a.m. - 11:45 a.m.
- Clinical Cases

11:45 a.m. – 12:45 p.m.
- Lunch and Clinical Cases

12:45 p.m. – 1:15 p.m.
- Tamponade: Diagnosis and Physiology

1:15 p.m. – 1:45 p.m.
- Echocardiographic Approach to Shock

1:45 p.m. – 2:15 p.m.
- Break

2:15 p.m. – 4:10 p.m.
- Skill Stations

4:10 p.m. – 4:45 p.m.
- Posttest

4:45 p.m. – 5:30 p.m.
- Clinical Cases

7:00 A.M. – 8:00 A.M.

**PRE-CONGRESS EDUCATIONAL SESSION**

**Critical Care Ultrasound Pediatric - Day 2** (see page 12 for Day 1)

Moderators: Thomas Conlon, Erik Su

LEARNING OBJECTIVES
- Demonstrate a foundation of ultrasound knowledge
- Practice acquisition of high-quality images via hands-on exercises
- Demonstrate image interpretation and utilization of ultrasound as a diagnostic tool

7:00 a.m. – 7:30 a.m.
- Welcome and Review/Q&A

7:30 a.m. – 9:30 a.m.
- Skill Stations
  - 1. Lung
  - 2. Volume Status
  - 3. Ask an Expert

9:45 a.m. – 10:15 a.m.
- Left Ventricular Function

10:15 a.m. – 10:45 a.m.
- Right Ventricular Function

10:45 a.m. – 11:15 a.m.
- Approach to Shock and Tamponade

11:15 a.m. – 12:15 p.m.
- Lunch and Cases

12:15 p.m. – 2:15 p.m.
- Skill Stations
  - 1. Putting It Together: Shock
  - 2. Ventricular Function
  - 3. Ask an Expert

2:15 p.m. – 2:45 p.m.
- Break

2:45 p.m. – 3:00 p.m.
- Administration

3:00 p.m. – 3:30 p.m.
- Posttest

3:30 p.m. – 4:00 p.m.
- Bedside Ultrasound: Moving Forward

4:00 p.m. – 5:00 p.m.
- Panel Discussion and Closing Remarks

This schedule is subject to change. Visit www.sccm.org/congress for the most up-to-date schedule.
SUNDAY, FEBRUARY 21, 2016

8:00 A.M. - 9:30 A.M.  
OPENING SESSION
Welcome

2016 Presidential Address
Todd Dorman, MD, FCCM  
Senior Associate Dean for Education  
Coordination Associate Dean Continuing Medical Education  
Professor & Vice Chair for Critical Care  
Department of Anesthesiology & Critical Care Medicine  
Joint Appointments in Medicine, Surgery and the School of Nursing  
Johns Hopkins University School of Medicine  
Baltimore, Maryland, USA

PLENARY SESSION
Fusing Clinical Care with Clinical Research: The Future of the Randomized Control Trial in a Self-Learning Healthcare System
Derek C. Angus, MD, MPH, FRCP, MCCM  
Chair, Department of Critical Care Medicine  
Distinguished Professor and Mitchell P. Fink Endowed Chair, Department of Critical Care Medicine, University of Pittsburgh and University of Pittsburgh Medical Center Health System  
Pittsburgh, Pennsylvania, USA

LEARNING OBJECTIVES
- Examine the challenges of developing a single versus multicontroller trial
- Define the controversy between adopting single versus multicontroller trial results into practice
- Justify cultural clinical change based on single versus multicontroller trial results to your own ICU providers

9:00 A.M. - 10:30 A.M.
Exhibit and Poster Hall Open

9:00 A.M. - 3:45 P.M.
Exhibit and Poster Hall Open

10:30 A.M. - 11:30 A.M.
Resuscitation Fluid Controversies
Moderator: Dijlal Annane
LEARNING OBJECTIVES
- Discuss advantages and disadvantages of using saline solutions for resuscitation
- Review advantages and disadvantages of albumin use
- Describe the impact of stanches on resuscitation
- Saline: Salt Brines Are For Turkeys  
  Sean M. Bagshaw
- Albumin: Has Anything Changed Since the SAFE Study?  
  Susan E. Hinds
- Stanches: Have We Given Up Too Soon?  
  Dijlal Annane

10:30 A.M. - 12:30 P.M.
Approaches to Acute Brain Injury in Children
Moderator: Stuart Friess
LEARNING OBJECTIVES
- Identify approaches to implement pathways to prevent secondary insults in the pediatric ICU
- Review current approaches in the management of acute brain injury in children after cardiac arrest
- Describe the approach to the acute management of pediatric stroke
- Discuss current approaches and benefits to electroencephalographic (EEG) monitoring in the pediatric ICU
- Predict possible applications for intracranial monitoring beyond traumatic brain injury
- Improving Secondary Injury Detection and Prevention After Severe Traumatic Brain Injury  
  Patrick M. Kochanek
- Return of Spontaneous Circulation Is Just the Beginning: Post-Arrest Care to Minimize Secondary Brain Injury  
  Alexis Ann Toppin
- Pediatric Stroke Management in the ICU  
  Richard Renton
- Is EEG Monitoring a Neuroprotective Strategy?  
  Nicholas Abend
- Intracranial Monitoring Beyond Traumatic Brain Injury  
  Stuart Friess

10:30 A.M. - 12:30 P.M.
CRITICAL CARE SOCIETIES COLLABORATIVE JOINT SESSION
Building Critical Care Competencies through Simulation Training
Moderator: Craig Coopersmith
LEARNING OBJECTIVES
- Understand complex curriculum development that tests knowledge while it also trains clinical and nonclinical skills concurrently
- Review how to use your simulators to teach needed competencies to critical care providers, trainees and active faculty
- Identify how to integrate institutional quality improvement projects with simulation findings
- Creating Critical Care Competencies Using Simulation Scenarios  
  Michael A. Pisa
- Creating a Teaching Template Emphasizing Critical Care Competencies  
  Jose L. Pascual
- Simulation Center Versus In Situ Simulations  
  Erin K. Hennessery
- The Post-Simulation Debrief: More Important Than the Simulation?  
  Tensing Maa
- Using an Institutional Safety Reporting System to Operationalize Findings During Simulations  
  Christopher Feree

10:30 A.M. - 12:30 P.M.
Critical Care and Emergency Care Research Networks
Moderator: Greg Martin
LEARNING OBJECTIVES
- Review current research priorities, projects and programs in each consortium
- Discuss the research data obtained
- Explore the impact of the specific research at the bedside
- The Office of Emergency Care Research  
  Jeremy J. Brown
- ARDSnet and PETAL  
  Roy G. Brown
- The Canadian Critical Care Trials Network  
  Deborah J. Cook
- Collaborative Pediatric Critical Care Research Network  
  Robert F. Tamburo
- Conversing with the Experts: Panel Discussion  
  Jeremy J. Brown, Deborah J. Cook, Roy G. Brown, Robert F. Tamburo

10:30 A.M. - 12:30 P.M.
Critical Care Issues in Hepatic Failure
Moderator: Rahul Nanchal
LEARNING OBJECTIVES
- Summarize both acute liver failure (ALF) and acute-on-chronic liver failure (ACLF)
- Describe current advances in extracorporeal liver support for ALF and ACLF
- Outline strategies for the prevention and treatment of infections in ALF and ACLF
- Management of Hepatic Encephalopathy in ALF and ACLF  
  David J. Kramer
- Coagulation Disorders in ALF and ACLF  
  Constantine Karvellas
- Advances in Extracorporeal Liver Support for Hepatic Failure  
  Ram Subramanian
- Renal Dysfunction in Hepatic Failure  
  Kai Singbartl
- Infections Complications in ALF and ACLF  
  Jody C. Olson
- Conversing with the Experts: Panel Discussion  
  David J. Kramer, Constantine Karvellas, Ram Subramanian, Kai Singbartl, Jody C. Olson

10:30 A.M. - 12:30 P.M.
THRIVE: Supporting Survivors After Critical Illness
Moderators: Mark Mikkelsen, Carol Thompson
LEARNING OBJECTIVES
- Describe recovery after critical illness and how we as a community can promote a culture of resilience
- Review the experiences of survivors of critical illness
- Examine the evidence for ICU follow-up clinics
- Contrast the adult experience with the pediatric experience for transitions in care after critical illness
- Detail the accomplishments and objectives of the THRIVE Task Force
- Why We Need THRIVE  
  Theodore J. Iwashyna
- The Survivors’ Perspective and Panel Discussion  
  Mark E. Mikkelsen
- Lost in Transition: The Evidence in Support of ICU Follow-Up Clinics  
  Hannah Wunsch
- Learning from Others: What We Can All Take from the Pediatric Experience  
  Neethi Pinto
- Models of In-Person Support: Panel Discussion  
  James C. Jackson
- THRIVE: Where We Are and Where We Are Going  
  Carol L. Thompson

SUNDAY, FEBRUARY 21
### SUNDAY, FEBRUARY 21

#### 10:30 A.M. - 12:30 P.M.
**What Is a Full-Time Equivalent in the ICU? Who Should Work There and How Much?**

**Moderator:** Jonathan Sevransky

**LEARNING OBJECTIVES**
- Review the United States critical care workforce
- Define different staffing models in the United States
- Describe the effect of telemedicine on ICU staffing patterns
- Compare the United States staffing models with international models

- Burden of Critical Care: How Much Do We Work?
- Telemedicine as a Method to Staff ICUs
- The Role of Advanced Practice Providers in the ICU
- International Critical Care Staffing: Is It Different?

**10:30 A.M. - 12:30 P.M.**
**When Expectations and Desires Meet Reality: Guiding Surrogates Through Critical Illness**

**Moderator:** Daleen Penoyer

**LEARNING OBJECTIVES**
- Examine the expectations of surrogates of critically ill patients
- Review patient-centered outcomes in the short- and long-term after critical illness
- Dissect clinicians’ abilities to prognosticate what the future holds for the critically ill patient
- Learn how experts in the field guide surrogates through critical illness and navigate the uncertainty that exists when attempting to align expectations, desires and reality

- What Critically Ill Patients and Their Surrogates Expect and Desire
- What Patients Actually Experience in the Short and Long Terms
- How Well Do Critical Care Providers Prognosticate?
- How Do We Support and Assist Surrogates When None of this Aligns?

**11:30 A.M. - 12:30 P.M.**
**De-resuscitation: Reversal When the Fluid Comes Back**

**Moderator:** Azra Bihorac

**LEARNING OBJECTIVES**
- Characterize the science of fluid loading and compartmental shifting in critical illness
- Review therapies for intravascular volume removal
- Employ methods for fluid mobilization in the wake of resuscitation to prevent morbidity

- Pathophysiology of Volume Excess: From Mobilization to Therapy
- Extracorporeal Therapies
- Diuresis in Deresuscitation

**11:30 A.M. - 12:30 P.M.**
**Ketamine Use in the ICU: Re-Emergence of Special K**

**Moderator:** Bryce Robinson

**LEARNING OBJECTIVES**
- Introduce ketamine as an agent for status epilepticus
- Discuss the use of ketamine for operative sedation and postoperative pain control
- Examine the use of ketamine for ICU sedation

- Antiepileptic Uses of Ketamine
- Ketamine for Perioperative Sedation and Analgesia

**1:00 P.M. - 1:30 P.M.**
**Abstract Award Ceremony**

#### 2:00 P.M. - 2:45 P.M.
**PLENARY SESSION**

**LIFETIME ACHIEVEMENT AWARD WINNER**

**The Future of Critical Care Medicine**

**Jean-Louis Vincent, MD, PhD, FCCM**

Professor of Intensive Care Medicine

Université Libre de Bruxelles

Head, Department of Intensive Care

Erasme University Hospital

Brussels, Belgium

**LEARNING OBJECTIVES**
- Understand how personalized medicine will allow us to individualize therapies
- Discuss how to organize the workforce and encourage staff commitment to the specialty
- Envision how modern technology will impact on critical care practice

#### 3:45 P.M. - 5:45 P.M.
**Advanced GRADE: Making the Most of Guideline Development**

**Moderator:** Mark Nunnally

**LEARNING OBJECTIVES**
- Apply the Grades of Recommendation Assessment, Development and Evaluation (GRADE) approach to a variety of levels of evidence
- Organize data using the GRADE Guideline Development Tool
- Discuss common problems when applying GRADE to guideline development

- GRADE Challenges: Commonly Encountered Conundra with the GRADE Process
- Application of GRADE: Case Reports
- GRADE and Beyond: Tools and Applications for the Guideline Development Process

#### 3:45 P.M. - 5:45 P.M.
**Star Research Presentations**
MONDAY, FEBRUARY 22, 2016

6:00 A.M. - 8:00 A.M.
• BREAKFAST SYMPOSIAS
  Improving Clinical Outcomes and Pathogen Directed Therapy for Serious Bacterial Infections in the Critical Care Setting
Moderator: Marin Kollef
  - Epidemiology and Current Guidelines for Multidrug-resistant Bacterial Infections
  Keith S. Kaye
  - Strategies for Implementing a Pathogen-directed Approach to Tailoring Therapies
  Marin H. Kollef
  - New and Emerging Therapeutic Options for Treatment
  Jason M. Pogue

8:15 A.M. - 9:00 A.M.
• PLENARY SESSION
• WILLIAM SHOEMAKER HONORARY LECTURE
Critical Care Air Transport: A Decade of Critical Care in the Air
Jay Johannigman, MD, FACS, FCCM
Professor of Surgery
Director of the Division of Trauma, Critical Care and Acute Care Surgery
United States Air Force Reserve
University of Cincinnati College of Medicine
Cincinnati, Ohio, USA

LEARNING OBJECTIVES
• Review the most common reasons for dying from wounds
• Understand the impact on physiology of hyperbaric conditions and aeromedical transport
• Discuss the role of aeromedical transport on future public health issues, war injuries and illness

9:00 A.M. - 10:00 A.M.
Break

9:00 A.M. - 3:15 P.M.
Exhibit and Poster Hall Open

10:00 A.M. - 11:00 A.M.
Lessons Learned in Iraq and Afghanistan: What Should Be Applied to Civilian Trauma Practice?
Moderator: Jay Johannigman
LEARNING OBJECTIVES
• Describe techniques of field care and volume resuscitation that can be applied to civilian trauma care
• List multidisciplinary damage control training needs optimal for general surgeons dealing with multisystem trauma in deployed, rural, or austere locations
• Describe at least three principles of long-distance medical evacuation for the critically injured patient
• Explain principles of successful rehabilitation of massively injured patients in the civilian setting
  - Blood and Blood Product Resuscitation
  Martin A. Schreiber
  - Damage Control Resuscitation
  John B. Holcomb
  - Converging with the Experts: Panel Discussion
  Martin A. Schreiber, John B. Holcomb

10:00 A.M. - 12:00 P.M.
Controversies in Neurocritical Care
Moderator: Kevin Sheth
LEARNING OBJECTIVES
• Contrast the utilities of hypertonic saline with mannitol in the setting of cerebral edema
• Discuss the advantages and disadvantages of anticonvulsant medications in seizure prophylaxis after acute brain injury
• Explore the evidence for decompressive hemicraniectomy for malignant MCA infarct
  - Hypertonic Saline: Pros
  Thomas P. Bleck
  - Hypertonic Saline: Cons
  Paul Alan Nyquist
  - Seizure Prophylaxis
  Gretchen M. Brophy
  - Hemicraniectomy for Severe Brain Swelling Must Be Done
  Alex B. Valadka
  - Hemicraniectomy for Severe Brain Swelling Should Not Be Done
  Shelly D. Timmons
  - Converging with the Experts: Panel Discussion
  Thomas P. Bleck, Paul Alan Nyquist, Gretchen M. Brophy, Alex B. Valadka, Shelly D. Timmons

10:00 A.M. - 12:00 P.M.
The Difficult Task of Treating Multidrug-Resistant Acinetobacter baumannii
Moderator: Ram Subramanian
LEARNING OBJECTIVES
• Evaluate the literature describing monotherapy versus combination therapy for the treatment of multidrug-resistant Acinetobacter baumannii (MDR-Ab)
• Discuss the optimal colistin dosing in patients with and without renal failure, based on research and its pharmacokinetic profile
• Compare and contrast current and emerging antibiotic pharmaceutical agents
  - Monotherapy Versus Combination Therapy: What Does the Evidence Support?
  Mazen Kheirbek
  - An Old Drug Revisited: The Role of Colistin
  Lama Nazer
  - Emerging Antibiotic Treatments
  Steven E. Pass

10:00 A.M. - 12:00 P.M.
In-Training Session: Transition from Training to First Job: Oh Boy! I Wasn’t Ready for This!
Moderators: Upal Bhalala, Elizabeth Hunt
LEARNING OBJECTIVES
• Discuss how to deliver bad news
• Identify how to deal with a difficult family
• Describe how to approach organ donation
• Delivering Bad News: How Bad Could It Go?
  Marc J. Popovich
• Dealing With a Difficult Family: How Difficult Could It Be?
  Vinay M. Nadkarni
• Organ Donation: Not My Cup of Tea
  Kristin Nelsen

10:00 A.M. - 12:00 P.M.
New American College of Critical Care Medicine Guidelines
Moderator: Stephen Pastores
LEARNING OBJECTIVES
• Outline the process to develop guidelines
• Identify the most important recommendations in each guideline
• Demonstrate how the guidelines apply to practice
  - Management of the Potential Organ Donor in the Intensive Care Unit
    Gerald F. Paff
  - Critical Care Delivery: The Importance of Process of Care and ICU Structure to Improve Outcomes
    Barry J. Weid
  - Guidelines for Stress Ulcer Prophylaxis in Adult Critically Ill Patients
    Henry Cohen
  - Guidelines for the Appropriate Use of Bedside General and Cardiac Ultrasonography by the Intensivist
    Mahmoud A. Elbarbary

10:00 A.M. - 12:00 P.M.
Pediatric Pulmonary Hypertension: The Changing Landscape
Moderator: Lisa Kohr
LEARNING OBJECTIVES
• Describe basic management principles of children with pulmonary hypertension
• Explain the role of inhaled therapies and emerging therapies for pulmonary hypertension
• Discuss development of a medication treatment plan for pulmonary hypertension
  - Basic Science of Pediatric Pulmonary Hypertension
    Jeffrey R. Fine
  - Medications and Novel Therapies for Short- and Long-Term Management
    Eric Abel
  - Pediatric Pulmonary Arterial Hypertension: Beyond Infancy
    Andrew T. Costanzo
  - Quality of Life and Pulmonary Hypertension
    Lisa Kohr
  - Transplant and Pulmonary Hypertension
    Samuel B. Goldfarb
10:00 A.M. - 12:00 P.M.
Sepsis and the Elderly
Moderator: Mitchell Levy
LEARNING OBJECTIVES
• Discuss how sepsis differs in the elderly, from basic science to epidemiology (bench to bedside)
• Review how sepsis is now a disease of the elderly and how it could impact our current thought processes on the disease
• Describe how elderly patients' response to sepsis differs from that of younger cohorts (basic science)
• Identify how the research impacts nursing care of elderly patients with sepsis
> Clinical Manifestations: Recognizing the Sepsis Phenotype in the Elderly
  Rahul Nanchal
> From Mice to Men: Pathophysiology of Immunosenescence
  Philip A. Efron
> Critical Care Nursing of the Elderly Septic Patient
  Mary Ann Barnes-Daly
> Conversing with the Experts: Panel Discussion
  Rahul Nanchal, Philip A. Efron, Mary Ann Barnes-Daly

11:00 A.M. - 12:00 P.M.
Clinician Pro/Con: Paralysis and Proning in ARDS
Moderator: John Marini
LEARNING OBJECTIVE
• Examine ARDS ventilator management from opposing perspectives
> Paralysis: Yes, Proning: No
  Robert C. Hyzy
> Proning: Yes, Paralysis: No
  Ivor S. Douglas
> Conversing With the Experts: Panel Discussion
  Robert C. Hyzy, Ivor S. Douglas

11:00 A.M. - 12:00 P.M.
I Don’t Need a Stinking Operating Room: Safety of Surgery at the Bedside
Moderator: Kevin McConnell
LEARNING OBJECTIVES
• Discuss when to perform a bedside procedure
• Determine when a backup is needed for intensivists performing bedside procedures
• Review best practices for credentialing of bedside procedures
> Is the Checklist Enough?
  Jesse J. Diaz
> What Procedure and When?
  Douglas F. Naylor, Jr.

11:00 A.M. - 12:00 P.M.
The Agency for Healthcare Research and Quality’s (AHRQ’s) National Implementation of the Comprehensive Unit-Based Safety Program (CUSP) to Reduce Catheter-Associated Urinary Tract Infections (CAUTI)
Moderator: William Miles
LEARNING OBJECTIVES
• Discuss the results of SCCM’s partnership with the Cohort 9 Initiative to reduce CAUTI in the ICU
• Examine strategies to gain physician acceptance of CAUTI prevention
• Identify successful outcomes related to using a critical care CNS/MD dyad and the State Hospital Association leads
> Cohort 9 ICU CAUTI Project Report
  Kristine A.K. Lombardozzi
> Physician Successes and Barriers
  William S. Miles
> Clinical Nurse Specialist/Physician Partnership/State Hospital Association Success
  Julia Retelski

12:15 P.M. - 1:30 P.M.
Fellowship Directors’ Luncheon
Beyond Procedural Simulation in Critical Care Fellowships
Moderator: Aaron Joffe
LEARNING OBJECTIVES
• Review the results of a Program Directors’ survey regarding the utilization of non-procedural simulation training for fellows
• Demonstrate the utility of simulation for teaching disclosure and delivery of bad news
• Identify advantages and disadvantages of traditional laboratory-based and newer in situ simulation paradigms in critical care training
• Discuss how to use your simulations to assess competence in critical care
> Welcome and Review of Fellowship Program Director Survey Results
  Aaron M. Joffe
> The Art of Racing in the Rain: How to Deliver Bad News
  Erin K. Kross
> In Situ Simulations: C’mon, I Just Spent All This Money on My Sim Center
  Tenseng Maa
> How Do I Know if My Simulation is Working? Measuring Clinical Competence with Simulation
  Jose L. Pascual
> Panel Discussion

1:30 P.M. - 2:15 P.M.
PLENARY SESSION
AKE GRENVIK HONORARY LECTURE
Patient Experience in a Value-Based World
James Merlino, MD, FACS, FASCRS
President and Chief Medical Officer of the Strategic Consulting Division
Press Ganey Associates, Inc.
Chicago, Illinois, USA
LEARNING OBJECTIVES
• Define the patient experience and understand its relationship to healthcare operations
• Understand how healthcare reform and the Affordable Care Act are driving an improved patient experience
• Recognize the physician’s role in an enhanced patient experience

2:15 P.M. - 3:15 P.M.
Break

3:15 P.M. - 4:15 P.M.
How to Build a Successful Extracorporeal Membrane Oxygenation (ECMO) Program at Your Institution
Moderator: Heidi Dalton
LEARNING OBJECTIVES
• Discuss physiology and indications for ECMO
• Describe the necessary requirements (institutional support and multidisciplinary team) for developing an ECMO program
• Describe the methods of tracking the success of the ECMO program’s goals and outcomes
> An Overview of ECMO Physiology, Indications and the Extracorporeal Life Support Organization
  Pauline K. Park
> Building a Stabilize and Support ECMO Program
  Lillian Su
> Building a Stabilize and Transfer Program
  Heidi J. Dalton

3:15 P.M. - 4:15 P.M.
LAERDAL AWARD
Laerdal Award Session
Moderator: TBD

3:15 P.M. - 4:15 P.M.
Precision Pharmacodelivery in the PICU: Role of Kinetics Analysis and Modeling
Moderator: Elizabeth Farrington
LEARNING OBJECTIVES
• Discuss the pathophysiologic alterations in drug disposition and transport with studies involving both animal models and clinical samples
• Demonstrate the utility of simulation for teaching disclosure and delivery of bad news
• Discuss the rationale behind a new definition for sepsis
• Review the new definition of sepsis
> The Pathophysiologic Mechanisms of Variability to Drug Response in Critical Ill Conditions
  Elizabeth A. Farrington
> Pharmacokinetics and Pharmacodynamics Modeling in Pediatrics
  Jennifer L. Morris
> Pharmacokinetics of Drugs in Critically Ill Children Supported by ECMO
  James D. Fortenberry

3:15 P.M. - 4:15 P.M.
SCCM/ESCIM JOINT SESSION
Sepsis Redefined
Moderators: Craig Coopersmith, Daniel DeBacker
LEARNING OBJECTIVES
• Discuss the rationale behind a new definition for sepsis
• Review the new definition of sepsis
> Why Do We Need a New Definition?
  Clifford S. Deutschman
> Quick Sequential Organ Failure Assessment (qSOFA)
  Christopher W. Seymour
> Septic Shock
  Manu Shankar-Hari
> What is the New Definition?
  Mervyn Singer
Schedule of Events

MONDAY, FEBRUARY 22

3:15 P.M. - 3:30 P.M.

Traumatic Brain and Spinal Cord Injury: What’s New?
Moderator: Evie Marcolini
LEARNING OBJECTIVES
- Review new modalities in cellular monitoring and treatment of intracranial pressure treatment
- Discuss current available therapies to predict and enhance neurologic recovery after traumatic brain and spinal cord injury
- Compare the previous and newest guidelines for the management of acute spinal cord injury, including changes to steroid recommendations
- Traumatic Brain Injury: Current Concepts and Barriers to Best Practices
  Shelly D. Timmons
- Management of Intracranial Hypertension
  Kristine H. O’Phelan
- Just Not Waking Up, Will it Ever Happen? Tests and Strategies
  Thomas P. Bleck
  Alex B. Valadka
- Conversing With the Experts: Panel Discussion
  Shelly D. Timmons, Kristine H. O’Phelan, Alex B. Valadka, Thomas P. Bleck

3:15 P.M. - 4:15 P.M.

Year in Review: Research
Moderator: Alejandro Rabinstein
LEARNING OBJECTIVES
- Discuss the most recent developments in the main fields of critical care research
- Recognize priorities for future research in critical care
- Basic and Translational Research
  Raghav Michael
- Clinical and Epidemiologic Research
  Norma Michelle Smalls-Manyet
- ICU Quality and Patient Safety
  Marilyn Havranek

3:15 P.M. - 5:30 P.M.

ABCDEF Bundle Improvement Collaborative: Is the Whole Greater Than the Sum of the Parts?
Moderator: Carol Thompson
LEARNING OBJECTIVES
- Identify the gaps in the current critical care delivery system
- Examine the relationship between improving teamwork/communication and patient outcomes
- Identify the benefits of empowering family as members of the healthcare team
- Discuss how improving teamwork/communication can decrease the incidence of delirium
- Explain the ABCDEF Bundle Improvement Collaborative mission and methods
  Gaps Between Processes, People and Patients
  E. Wesley Ely
  The Teamwork and Communication Connection
  Brenda T. Pun
- Adding the “F” Word to the ABCDEF Bundle
  Mary Ann Barnes-Daly

Continued ➤

4:30 P.M. - 5:30 P.M.

Acute Stroke in the ICU: New Methods of Rescue
Moderator: Thomas Bleck
LEARNING OBJECTIVES
- Review recent studies evaluating emergent thrombectomy after acute ischemic stroke
- Discuss the criteria for acute stroke thrombectomy and thrombectomy
- Explore the use of CT and MR imaging to facilitate the evaluation of approaching candidates for thrombectomy independent of time criteria alone
- Critique cases of “unknown” patients with neurologic deficits after surgery or other ICU patients
- Acute Stroke Thrombolyis and Thrombectomy: Criteria and New Studies
  Kevin N. Sheth
- Time Versus Tissue: Using New Imaging Modalities
  Neeraj Badjatia
- Case Discussion

4:30 P.M. - 5:30 P.M.

Assessing and Reversing Coagulopathy in the ICU
Moderator: William Dager
LEARNING OBJECTIVES
- Explain the role of viscoelastic coagulation monitoring in assessing for the presence and severity of coagulopathy
- Discuss the reversal of coagulopathy due to novel anticoagulants
- Summarize the utility of various tests to assess for platelet dysfunction
- Measuring Coagulopathy: Serum-Based Testing Versus Viscoelastic Coagulation Testing
  Martin A. Schreiber
- Reversal of Novel Anticoagulants
  Mitchell J. Daley
- Evaluating for and Treating Platelet Dysfunction
  Ryan Zarychanski

4:30 P.M. - 5:30 P.M.

Early Interventions in Sepsis Management: Where are we after EGDT, ProCESS, ARISE and ProMISe?
Moderator: Dhillon Annane
LEARNING OBJECTIVES
- Review the impact of current trials on sepsis management
- Discuss different therapeutic approaches for the patient in septic shock
- Assess the potential implications of different therapeutic approaches for sepsis
  What Do the Trials of Early Goal-Directed Therapy Tell Us?
  David Tom Huang
  Don’t Throw the Baby Out With the Bathwater
  Greg S. Martin
  Are We Just Kidding Ourselves?
  Charles Malanson

4:30 P.M. - 5:30 P.M.

Moderator: Sandra Kane-Gill
LEARNING OBJECTIVES
- Identify risk factors and biomarkers predictive of acute kidney injury (AKI)
- Describe the implementation of an automated alert system to detect drug-associated AKI
- Explain the potential role of biomarkers for the early detection of drug-associated AKI
- Evaluate the cost of drug-associated AKI
- Risk Factors and Predictors of Drug-Associated AKI
  Brian L. Erstad
- Striving for Early Detection of Drug-Associated AKI
  Neeraj Badjatia
- Can Ninja Work in the ICU?
  Stuart L. Goldstein

4:30 P.M. - 5:30 P.M.

So You Think You’re Smarter Than a Fellow
Moderator: Craig Lilly
LEARNING OBJECTIVES
- Discuss how performance measures are selected
- Review how performance measures can distort care
- Describe how to deliver great care while still reporting on measures
- Demystifying the Selection of Performance Metrics
  Jeremy M. Kahn
- The Good, The Bad and the Ugly When Selecting Performance Measures: The Case of Sepsis Measures
  Michael Roehl
- Threading the Needle: Meeting Metrics, Managing Patients
  Michael D. Howell

4:30 P.M. - 5:30 P.M.

Year in Review: Clinical Pharmacology and Pharmacy
Moderator: Ishaq Lat
LEARNING OBJECTIVES
- Review current fluid management strategies
- Discuss current antibiotic de-escalation strategies
- Describe current ventilator management strategies
- Fluid Resuscitation: When is Enough Enough?
  Kevin O. Bui
- Antibiotic Resistance: Enough Already, Stop the Antibiotics
  Lama Nazer
- I Can’t Breathe: Vent Management: Who’s Right
  Brian K. Walsh

6:00 P.M. - 8:00 P.M.
ACCM Convention and SCCM Awards Ceremony

This schedule is subject to change. Visit www.sccm.org/congress for the most up-to-date schedule.
8:15 A.M. - 9:00 A.M.

PLENARY SESSION

MAX HARRY WEIL MEMORIAL LECTURE

Post-ICU Syndrome: Truth About Consequences, Right Care Right Now...and Later

Maureen A. Harvey, MPH, MCCM
Critical Care Educator and Consultant
Glenbrook, Nevada, USA

LEARNING OBJECTIVES

• Define post-ICU syndrome
• Analyze methods to prevent post-ICU syndrome

9:00 A.M. - 10:00 A.M.

Break

9:00 A.M. - 2:00 P.M.

Exhibit and Poster Hall Open

10:00 A.M. - 11:00 A.M.

Goal Directed Hemodynamic Therapy in Acute Neurologic Disorders

Moderator: Robert Stevens

LEARNING OBJECTIVES

• Discuss physiologic rationale and clinical/radiologic evidence supporting hemodynamic augmentation in ischemic stroke
• Review data on hemodynamic therapies in patients with subarachnoid hemorrhage
• Discuss evidence supporting specific hemodynamic strategies in moderate and severe traumatic brain injury
• Review rationale and studies supporting hemodynamic therapy in acute traumatic and non-traumatic spinal cord injury
• Hemodynamic Augmentation in Ischemic and Intracerebral Hemorrhagic Stroke
  Alejandro A Rabinstein
• Hemodynamic Optimization in Aneurysmal Subarachnoid Hemorrhage
  Alex B. Valadka
• Hemodynamic Optimization in Traumatic Brain Injury
  Robert D. Stevens
• Hemodynamic Strategies for Spinal Cord Injury
  Kristine H. O’Phelan

10:00 A.M. - 11:00 A.M.

Human Microbiome: A Driver of Immune System

Moderator: Judith Hallman

LEARNING OBJECTIVES

• Discuss how microbial components contribute to normal physiology and disease predisposition
• Review how changes of intestinal or lung microflora affect outcomes in critical illness
• Describe how changes of microbiome affect functions of immune cells

10:00 A.M. - 11:00 A.M.

Optimizing Twitter and Social Media in Critical Care

Moderator: Christopher Carroll

LEARNING OBJECTIVES

• Review Twitter and other social media platforms
• Discuss how social media platforms can be used by critical care professionals
• Identify how to optimize the social media experience
• Describe how social media is being used at the Critical Care Congress
• Twitter: Isn’t it Just a Way to Get into Big Trouble Really Fast?
  Elizabeth H. Mack
• Who to Follow, How to Participate and How the Europeans Do it Better
  Tamas Szakmany
• It’s Your Meeting: Social Media Highlights and Data
  Mike Harter

10:00 A.M. - 11:00 A.M.

Secretagogues, Hormones and Uncoupling in Chronic Critical Illness: Science and Therapy

Moderator: Patrick Nelligan

LEARNING OBJECTIVES

• Discuss the basic science of chronic critical illness and endocrinopathy
• Evaluate clinical data on endocrine therapies
• Formulate theories of endocrine management based on hypothalamic hormone therapy
• Bench to Bedside: Endocrine Therapies with Promise
  Neal E. Van den Bergh
• Chronic Critical Illness and Endocrinopathy: Outcomes in Endocrine Therapy
  Djalal Amnaire

10:00 A.M. - 12:00 P.M.

Advancing Nutrition Therapies in the ICU

Moderator: Maureen Harvey, RN, MPH, MCCM

LEARNING OBJECTIVES

• Summarize the new SCCM/A.S.P.E.N. guidelines, their limitations and how they should be applied to critically ill patients
• Identify the most common obstacles to implementation of nutrition therapy and devise ways to overcome them
• Examine therapies aimed at minimizing muscle catabolism and atrophy in the critically ill
• Evaluate recent publications concerning nutrition education and discuss options for improving nutrition education for the future intensivist

10:00 A.M. - 12:00 P.M.

The Goldilocks Dilemma: EEG Monitoring in the ICU

Moderator: Thomas Bloek

LEARNING OBJECTIVES

• Review which patients would benefit from continuous EEG monitoring
• Discuss the impact of electrographic seizures on survival and neurologic outcomes
• Determine whether quantitative EEG trends allow intensivists to identify seizures at bedside and direct care
• Identify how aggressively to treat seizures, anticonvulsant medication efficacy, and anticonvulsant medication adverse effects
• Summarize recent guidelines on EEG monitoring in critically ill patients and adherence feasibility
• Who Should We Monitor Intensively? Does it Impact Outcomes?
  Nicholas Aberg
• Do I Need a Neurologist? Quantitative EEG in the ICU
  Alexis Ann Topjian
• How Much Treatment is too Much Treatment?
  Neeraj Badjatia
• Should We Follow the Rules? Can We Do What the Guidelines Say?
  Paul Alan Nyquist
• Up-to-Speed and Ready-to-Feed? Exploring Ways to Improve Nutrition Education for Future Physicians
  Christy M. Lawson
• Conversing with the Experts: Panel Discussion
  Mary S. McCarthy, Beth Taylor, Brian L. Erstad, Christy M. Lawson

10:00 A.M. - 12:00 P.M.

Optimizing Post-Cardiac Arrest Resuscitation

Moderator: Elizabeth Hunt

LEARNING OBJECTIVES

• Review the 2015 update of guidelines on resuscitation from ILCOR/AHA
• Discuss the role and optimization of post-resuscitation cooling
• Identify gaps in knowledge that limit the guidelines and recommendations
• Describe how to build a resuscitation team and implement these guidelines
• What's New and What's Gone in the 2015 Guidelines
  Anita Griswold
• Building Your Team: Who Has the Best Response Team?
  Elizabeth Hunt
• Optimal Monitoring
  Robert M. Sutton
• What Is the Role for Cooling?
  Alejandro A Rabinstein
• What's on the Horizon in Resuscitation Research?
  Vinay M. Nadkarni

Tuesday, February 23
TUESDAY, FEBRUARY 23

10:00 A.M. - 12:00 P.M.

Surviving Sepsis Campaign: Screening Every patient, Every Shift, Every Day—Sepsis on Wards
Moderator: Sean Townsend

LEARNING OBJECTIVES
- Discuss how to implement a screening protocol for every shift, every patient, every day
- Review strategies on how to engage the multidisciplinary team
- Determine when and how to spread beyond pilot units for sepsis screening on the wards
- Review data on compliance and learn about mortality reduction

- Pitfalls and Wins: Staff Buy-In for Sepsis Screening on Hospital Wards
  - Christa A. Schorr
- System Sepsis Improvement: Many Hospitals, One Initiative
  - Stephen Knych
- Hospitalists Leading, Promoting and Supporting House-Wide Sepsis Detection and Intervention
  - Andrew Cohen
- Show Me the Data!
  - Mitchell M. Levy
- Strategies in Using Rapid Response Teams to Verify Positive Screen
  - Richard J. Beale

11:00 A.M. - 12:00 P.M.

Experimental Extracorporeal Therapies for the Treatment of Bloodstream Infections and Sepsis
Moderator: Jean-Louis Vincent

LEARNING OBJECTIVES
- Describe strategies for removal of bacteria, viruses and endotoxins
- Provide an update on clinical trials of endotoxin and cytokine removal in patients with sepsis
- Demonstrate the role of activated leukocytes in sepsis

- CytoSorbents Filter for Removal of Pro-Inflammatory Cytokines
  - Kai Singibarti
- Aethion Hemopurifier Cartridge for Virus Removal
  - Naveen M. Bajpai
- Coupled Plasma Filtration-Adsorption
  - Thomas Rimmelé
- Immobilized Polymyxin B Filter for the Removal of Endotoxin in Patients with Severe Sepsis
  - R. Phillip Dellinger

11:00 A.M. - 12:00 P.M.

Mechanical Ventilation: Physiology in Action
Moderator: Rahul Nanchal

LEARNING OBJECTIVES
- Review physiology pertinent to mechanical ventilation
- Discuss the interaction of mechanical ventilation with various organ systems in normal and disease states
- Identify complexities of abdominal circulatory and respiratory interactions during mechanical ventilation

- What Are All These Pressures and Volumes?
  - Steven R. Holts
- Circulatory Effects
  - Michael R. Pinsky
- Mechanical Ventilation: Abdominal/Chest Wall Interactions
  - Dean R. Hess
- Putting It All Together: Abdominal Respiratory Circulatory Interactions During Ventilation
  - Rahul Nanchal

11:00 A.M. - 12:00 P.M.

Peering into the Crystal Ball: Updates on Neuroprognostication for Common ICU Situations
Moderator: Kevin Sheth

LEARNING OBJECTIVES
- Diagram an algorithmic, evidence-based approach to predicting functional outcome after cardiac arrest
- Name common outcome calculators available for prognosticating outcome after ischemic and hemorrhagic stroke
- Describe the relationship between neuroimaging findings and severe traumatic brain injury outcome

- Update on Neuroprognostication after Cardiac Arrest
  - Christopher G. Zumsteg
- Update on Neuroprognostication after Ischemic and Hemorrhagic Stroke
  - David Hwang
- Update on Neuroprognostication after Traumatic Brain Injury
  - Suzanne Muehlischlegel

11:00 A.M. - 12:00 P.M.

Shared Decision-Making and Decision Analysis in ICU
Moderator: Dan Thompson

LEARNING OBJECTIVES
- Discuss steps and components of medical decision-making
- Review the use of reliable, balanced, and evidence-based information for decision-making
- Identify methods and opportunities to activate patient/surrogate involvement in decision-making

- Introduction to Medical Decision-Making
  - Nina K. Sanders
- Models of Shared Decision-Making
  - David W. Crippen
- Decision Aids for Patients/Surrogates
  - Joanna L. Harrison

11:00 A.M. - 12:00 P.M.

Training the Next Generation of Critical Care Practitioners: State of the (Critical Care) Union
Moderator: Lena Napolitano

LEARNING OBJECTIVES
- Discuss steps and components of medical decision-making
- Review the use of reliable, balanced, and evidence-based information for decision-making
- Identify methods and opportunities to activate patient/surrogate involvement in decision-making

- Physician Perspective
  - Lena M. Napolitano
- Pharmacist Perspective
  - Anthony W. Brannah
- Nurse Perspective
  - Ruth M. Kleinpell

12:00 P.M. - 2:00 P.M.

SCCM Business Meeting

12:00 P.M. - 12:30 P.M.

ACCM Business Meeting

12:30 P.M. - 1:30 P.M.

Become a Fellow of the American College of Critical Care Medicine
Moderator: TBD

LEARNING OBJECTIVE
- Define the eligibility criteria for fellowship in the American College of Critical Care Medicine

2:00 P.M. - 2:45 P.M.

PLERIY SESSION

Value-Based Medicine: Dollars and Sense
Brian L. Erstad, BCPS, MCCM, PharmD
Professor and Head
The University of Arizona College of Pharmacy
Department of Pharmacy Practice and Science
Tucson, Arizona, USA

LEARNING OBJECTIVES
- Review the risk factors that contribute to the cost of drug therapy
- Describe the problems and difficulties with interpreting conclusions from medical literature into bedside practice
- Discuss methods to assess cost of care at the local level

2:45 P.M. - 3:15 P.M.

Break

3:00 P.M. - 4:30 P.M.

ACCM TOWN HALL

Pro/Con Debates: Fluid: Friend or Foe? Oxygen: Too Much or Not Enough?
Moderator: Michaela West

LEARNING OBJECTIVES
- Debate the use of fluids in critically ill patients
- Debate the use of oxygen in critically ill patients

- Fluid Friend
  - Jean-Louis Vincent
- Fluid Foe
  - Marie R. Baldisseri
- Fluid Rebuttal
  - Jean-Louis Vincent, Marie R. Baldisseri
- Oxygen: Too Much?
  - Wendy Rickertts Greene
- Oxygen: Not Enough?
  - A. Joseph Layon
- Oxygen Rebuttal
  - Wendy Rickertts Greene, A. Joseph Layon

3:15 P.M. - 4:15 P.M.

Aerosolized Antibiotics in the ICU: Where Do They Fit?
Moderator: Dean Hess

LEARNING OBJECTIVES
- Identify optimal characteristics of antibiotics and nebulization systems for aerosolized administration in mechanically ventilated patients
- List the antibiotics that are reported in the literature to have activity against common ICU pathogens
- Discuss the clinical use and relevance of aerosolized antibiotics in specific patient populations

- Bioavailability: Pharmacokinetics of Aerosolized Antibiotics
  - Eric W. Mueller
- Delivery of Aerosolized Drugs
  - Stephen Knych
- Clinical Use of Aerosolized Drugs
  - Ivor S. Douglas
3:15 P.M. - 4:15 P.M.
Hot Topics and Late-Breaking Science I
Moderator: TBD

3:15 P.M. - 4:15 P.M.
Update on the PETAL Network: Prevention and Early Treatment of Acute Lung Injury
Moderators: Robert Hyzy, Pauline Park
LEARNING OBJECTIVES
• Summarize the goals and direction in federally funded trials in Acute Respiratory Distress Syndrome (ARDS) and Incipient Lung Injury
• Review current and upcoming PETAL research
• Discuss the importance of multispecialty collaboration in the PETAL network
> From ARDSNet to PETAL
Roy G. Broxer
> New PETAL Multicenter Trials
Daniele B. Talbot
> Multispecialty Partnering in Critical Care Research: From ED to ICU
Derek C. Angus

3:15 P.M. - 4:15 P.M.
Year in Review: Emergency Medicine
Moderator: Isaac Tawil
LEARNING OBJECTIVES
• Review recent studies from the emergency medicine and intensive care literature
• Discuss the impact of these studies on application to current practice
> Cardiac Arrest and Post-Arrest Advances
Scott D. Weingart
> Emergency Department Critical Care Advances
Clifford G. Reid

3:15 P.M. - 4:15 P.M.
Year in Review: Neurosciences
Moderator: Paul Nyquist
LEARNING OBJECTIVES
• Review the new changes in treatment standards for acute stroke
• Discuss new developments in the treatment of acute neurologic disorders
• Describe new developments in the clinical science of neurocritical care
> Updates in Interventions for Acute Stroke
Jordan Bonomo
> Updates in Acute Neuroscience
Eve G. Marcolini

3:15 P.M. - 4:15 P.M.
Year in Review: Nursing
Moderator: Lisa Kohr
LEARNING OBJECTIVES
• Review the year’s critical care studies relevant to critical care nursing
• Evaluate the literature using an evidence-based approach
• Discuss how to apply the information gained to clinical nursing practice
> Pediatric Critical Care Nursing
Karin E. Reuter-Nice
> Adult Critical Care Nursing
Samantha A. Gamble Fier

3:15 P.M. - 4:15 P.M.
Year in Review: Pediatrics
Moderator: Derek Wheeler
LEARNING OBJECTIVES
• Discuss the top basic science research publications
• Review the top clinical/translational research publications
• Identify the top quality improvement/education/PIGU administration publications
> Basic Science
Stephen T. Mastrogeorge
> Clinical/Translational Science
Scott L. Weiss
> Quality Improvement/PICU Administration/Education
Elizabeth H. Mack

3:15 P.M. - 5:30 P.M.
Divergent Views of Personalized Medicine in Critical Illness
Moderator: Frederick Moore
LEARNING OBJECTIVES
• Discuss biologic diversity as demonstrated via genomic, proteomic, metabolomic, and lipidomic analysis
• Review how unique genomic and proteomic expression profiles underlie differences in disease risk, severity, natural history and outcomes
• Use mechanistic knowledge generated via systems biology to discover novel and effective therapies for life-threatening illnesses encountered in the ICU
> Genetic Diversity in Sepsis
Hector R. Wang
> Using Genomics to Understand Acute Respiratory Distress Syndrome Risk and Severity
Nuala Meyer
> Genomic and Proteomic Analysis in Ischemic Stroke
Robert D. Stevens
> Gene and Protein Expression in Acute Kidney Injury
Azra Bhurani
> Diversity of Immunologic Function in Critical Illness
Richard S. Hinchcliff

3:15 P.M. - 5:30 P.M.
Year in Review: Anesthesiology
Moderator: Jose Pascual
LEARNING OBJECTIVES
• Review the progress made by SCCM’s 2014 and 2015 Vision Grant recipients
• Discuss updates to the 2015 Distinguished Investigator Award’s research
> Long-Term Decline of Acquired Immunity after Sepsis in Humanized Mice
Kristysztof Laudanaki
> Dysfunctional High Density Lipoprotein in Severe Sepsis
Felisem Guirge
> Modulation of the Hypercatabolic Response to Burn Injury
David N. Hendrom

4:30 P.M. - 5:30 P.M.
Inhaled Therapies in the ICU
Moderator: Dean Hess
LEARNING OBJECTIVES
• Describe the use of the lungs for delivery of medications
• Discuss the use of therapeutic gases for treatment in the ICU
• Summarize the advantages and disadvantages of using the lung as the target for treatment
> Trace Gases During Mechanical Ventilation
Dean R. Hess
> Inhaled Anesthetic Agents in the ICU
Gregory E. Kerr
> Inhaled Vasodilators: Nitric Oxide and Prostacyclins
Richard A. O’Connor

4:30 P.M. - 5:30 P.M.
Toward Value-Based Critical Care: Aligning Financial Incentives to Improve Critical Care Delivery
Moderator: Mark Mikkelsen
LEARNING OBJECTIVE
• Review the healthcare policy mandate that is driving the value-based care movement
• Examine cost-effective critical care workforce and staffing strategies to employ in our hospitals
• Detail strategies to improve knowledge translation as it relates to patient-centered outcomes
• Discuss the roles of standardization and innovation as strategies to improve critical care delivery
• Determine how the evidence should be applied to guide regional delivery of critical care
> How Incentives (and Disincentives) Can Be Used to Improve the Quality of Critical Care
Jeremy M. Kahn
> Cost-Effective Critical Care Delivery: What Does It Look Like?
Scott D. Weingart
> Bridging the Quality Gap: Aligning What We Should Do with What We Actually Do
Damon C. Stark
> Standardization or Innovation: Prioritizing Strategies to Transform Critical Care Delivery
Bradford D. Winters
> Critical Care Delivery at the 30,000-Foot Level: How Should a Region Design Critical Care?
Hannah Wünsch

4:30 P.M. - 5:30 P.M.
It’s Hot! Not Every Fever Is an Infection
Moderator: Gretchen Brophy
LEARNING OBJECTIVES
• Define the various causes of hyperthermia in ICU patients
• Apply the latest data to the prevention and treatment of hyperthermic emergencies
Continued...
WEDNESDAY, FEBRUARY 24, 2016

8:15 A.M. - 9:00 A.M.
* PLENARY SESSION
* PETER SAFAR MEMORIAL LECTURE
Treating Lethal Infectious Disease in the ICU

Lewis A. Rubinson, MD, PhD
Medical Director, Critical Care
Resuscitation Unit
R. Adams Cowley Shock Trauma Center
Associate Professor of Medicine
University of Maryland School of Medicine
Baltimore, Maryland, USA

LEARNING OBJECTIVES
• Describe why ICUs have been disproportionately impacted in the past and are likely to be so during future outbreaks of serious novel pathogens
• List the ways novel pathogens may be transmitted in ICUs, and describe key questions which must be answered to keep critical care responders safe while caring for infected patients
• Discuss key critical care leadership functions which must be undertaken to ensure patient care and health care worker safety are optimized during an evolving outbreak.

9:00 A.M. - 9:30 A.M.
Break

9:30 A.M. - 10:30 A.M.
Critical Care Needs and Capacity Building in Limited Resource Settings

Moderator: Ndidiama Musa

LEARNING OBJECTIVES
• Outline the importance and challenges of enhancing critical care as a fundamental element of healthcare systems in low-middle income countries
• Delineate solutions to closing the critical care health system’s gap in limited resource settings
• Describe critical care training opportunities in low-middle income countries
• Demonstrate the role of global partnerships, including SCCM, in building critical care capacity in low-middle income countries
  > Why Enhance Critical Care in Limited Resource Settings?
Niranjan Kissoon
  > Examples of Critical Care Capacity Building in Limited Resource Settings
Peter Andrew Meaney
  > Surgical Critical Care in Resource Limited Environments
Mary J. Reed

9:30 A.M. - 10:30 A.M.
Preparing for a Deadly Infectious Disease in My Unit

Moderator: Lewis Rubinson

LEARNING OBJECTIVES
• Review cost implications
• Discuss preparation and logistics
• Identify public relation implications
  > Preparing the Nursing Staff: Keeping Competencies
Melissa Hubbard
  > Preparing for Deadly Infectious Diseases: The National Institutes of Health’s Role
Henry Merson
  > Preparing the ICU: Engaging Hospital Administration for Resources
Jonathan E. Sevransky

9:30 A.M. - 10:30 A.M.
Therapeutic Apheresis in the Critical Care Unit

Moderator: Aryeh Shander

LEARNING OBJECTIVES
• Demonstrate basic understanding of the principles of apheresis
• Define indications for which therapeutic apheresis procedures are recommended
• Identify patients in clinical practice who may benefit from therapeutic apheresis
  > Technical Considerations of Therapeutic Apheresis Procedures
Christina Anderson
  > Indications for Therapeutic Apheresis
Ryan Zarychanski
  > Treatment of Thrombocytopenia-Associated Multiple Organ Failure (TAMOF)
James D. Fortenberry

9:30 A.M. - 10:30 A.M.
This Is Jeopardy: Answers and Questions with Anticoagulation Reversal

Moderator: Jeffrey Barletta

LEARNING OBJECTIVE
• Describe different strategies for managing excessive bleeding given various patient case scenarios
  > Bleeding Jeopardy
William E. Dager, Lena M. Napolitano, Gourang P. Patel

9:30 A.M. - 10:30 A.M.
Why Is There So Much Acute Kidney Injury?

Moderator: Azra Bihorac

LEARNING OBJECTIVES
• Explore different reasons for high mortality in Acute Kidney Injury (AKI)
• Recognize epidemiology factors in AKI
• Relate iatrogenic sources of AKI outcomes
  > Why Do Kidneys Fail?
Lakhmir S. Chawla
  > Acute Kidney Injury: More Than Just a Bad Outcome
Robert Star
  > Iatrogensis Perfecta
Rajit Basu

9:30 A.M. - 11:30 A.M.
Clinical Challenges in Mechanical Ventilation

Moderator: Rolf Hubmayr

LEARNING OBJECTIVES
• List advantages and limitations of allowing spontaneous breathing compared with sedation
• Discuss criteria for selecting patients with hypoxemia for treatment with noninvasive ventilation
• Describe potential advantages of high-flow nasal oxygen in preventing intubation
• Review technical challenges of ambulating mechanically ventilated patients
  > Large Tidal Volumes During Spontaneous Breathing: Sedate or Tolerate?
Barry J. Weled
  > Hypoxic Respiratory Failure: When Is Noninvasive Ventilation Appropriate?
Dean R. Hess
  > High-Flow Oxygen by Nasal Cannula: Action and Limitations
Steven R. Holets
  > Mobilization of the Mechanically Ventilated Patient: How Fast and How Far?
Rhonda Wyskiel
  > Converging with the Experts: Panel Discussion
Barry J. Weled, Dean R. Hess, Steven R. Holets, Rhonda Wyskiel
9:30 A.M. - 11:30 A.M.  
**Unleashing the Power of Big Data: Leveraging Existing Clinical Data in Critical Care Research**  
*Moderator: Timothy Buchman*  
**LEARNING OBJECTIVES**  
- Describe the advancement of high-quality scientific inquiry through data science  
- Review information on leveraging existing clinical data sources  
- Discuss data solutions in order to answer clinical and epidemiological questions  
- Leveraging Publically Available Data Sets: Using Large Healthcare Data Sets  
  - Hannah Wunsch  
- Leveraging Electronic Health Records and Local Data Sets to Answer Clinical Questions in Critical Care  
  - Theodore K. Shroyer  
- The Use of Genomic and Biomarker Data to Achieve More Accurate Patient Predictions  
  - Hector R. Wong  
- Feasibility of Critical Care Registry “Big Data” of the Future: How to Get Started  
  - Timothy G. Buchman  

9:30 A.M. - 11:30 A.M.  
**Favorable Outcomes: Overcoming Obstacles to Recognizing and Treating Severe Sepsis**  
*Moderator: Frederick Moore*  
**LEARNING OBJECTIVES**  
- Discuss sepsis in the prehospital environment and strategies to optimize outcomes  
- Review how to optimize outcomes from sepsis in the emergency department  
- Create a successful sepsis program in the hospital, especially in the post-PROCESS era  
- Determine how to individualize care and optimize long-term outcomes  
- Optimizing Prehospital Recognition and Therapy  
  - Christopher W. Seymour  
- Optimizing Outcomes in the Emergency Department  
  - Stephen J. Pearson  
- Creating a Successful Sepsis Program in Your Hospital  
  - R. Phillip Dellinger  
- One Size Fits All, or Can We Personalize Care?  
  - Phyllis A. Ehrenfeld  
- What Is Happening to My Patient with Sepsis After Discharge? Optimizing Post-Discharge Outcomes  
  - Sean R. Townsend  

10:30 A.M. - 11:30 A.M.  
**Neurocognitive and Psychological Outcomes After Critical Illness in Childhood**  
*Moderator: Mary Hartman*  
**LEARNING OBJECTIVES**  
- Review the most recent data on psychological outcomes after critical illness in childhood  
- List the factors associated with worse psychological outcome after pediatric ICU discharge  
- Discuss the factors associated with worse health-related quality of life after pediatric ICU discharge  
- Identify current knowledge gaps and areas for future investigation in nonmortal outcomes  
- School-Age Neurodevelopmental Outcomes Following Early Childhood Critical Illness  
  - Sirin Ober  
- Mental Health Sequelae After Critical Illness in Childhood  
  - Mary E. Hartman  
- Is Survival Enough: Posttraumatic Stress After Pediatric Critical Illness  
  - Lara P. Nelson  
- Health-Related Quality of Life After Critical Illness in Childhood  
  - R. Scott Watson  

10:30 A.M. - 11:30 A.M.  
**Nutrition Support in Special Populations**  
*Moderator: Beth Taylor*  
**LEARNING OBJECTIVES**  
- Discuss the newest insights in providing nutritional support of critically ill patients with sepsis, renal failure and liver failure  
- Review issues related to feeding critically ill obese patients  
- Describe the pro-inflammatory signaling pathways of adipocytes that affect the response to sepsis  
- Provide insight into the pathophysiological mechanisms of obesity-dependent susceptibility to sepsis  
- Feeding the Septic Patient  
  - Beth Taylor  
- Feeding Considerations in Patients with Renal and Hepatic Failure  
  - Michael J. Connor  
- Feeding the Critically Ill Obese Patient  
  - Daren K. Heyland  
- Role of Adipose Tissue and Obesity in Susceptibility to Inflammation and Infection  
  - Gail Cresci  
- Conversing with the Experts: Panel Discussion  
  - Michael J. Connor, Daren K. Heyland, Gail Cresci, Beth Taylor  

10:30 A.M. - 11:30 A.M.  
**Response Research: What We Learned, or Should Learn, from Research Efforts During the Ebola Outbreak**  
*Moderator: Derek Angus*  
**LEARNING OBJECTIVES**  
- Describe the research advances made during the 2014 Ebola outbreak  
- Identify the importance of patient level data to informing public health responses to disasters or pandemics  
- Discuss novel research strategies and designs to allow more effective research during disasters, pandemics or outbreaks in the future  
- Overview of Research Outcomes During the Ebola Outbreak  
  - Robert A. Fowler  
- ICU: The Interface Between Clinical Research and Public Health Response  
  - Lewis A. Rubinson  
- The Future of Response Research: INFACT/ISARIC  
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   - Rate: $233 Single/Double

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- **Discount Code:** NMLRV

### Car Rental

SCCM has negotiated special car rental rates for Congress with Hertz. Discounted rates are available from all Florida locations for rental dates between February 12 and March 9, 2016. To receive the discounted rates, please refer to the information below.

**Website:** www.Hertz.com
- **Phone:** +1 800 654-2240 (U.S. and Canada)
- **Phone:** +1 405 749-4434 (International)
- **CV #:** 050D0002

### Airport Shuttle / Taxi Service

**SuperShuttle**
- Shared ride shuttle service between Orlando International Airport (MCO) and Congress hotels is approximately $18 each way per person. Use the discount code below to receive 10% off a round-trip shuttle.
- **Website:** www.supershuttle.com
- **Phone:** +1 800 258-3826
- **Discount Code:** HRKZM
  - Discount valid online only. Online payment required. Gratuity not included.

**ExecuCar**
- Upscale, private transportation between Orlando International Airport (MCO) and Congress hotels is approximately $112 round-trip. Use the discount code below to receive 10% off a round-trip reservation.
- **Website:** www.execucar.com
- **Phone:** +1 800 258-3826
- **Discount Code:** HRKZM
  - Discount valid online only. Online payment required. Gratuity not included.

**Taxi Service**
- Taxi service is available from Orlando International Airport (MCO) to all Congress hotels. The approximate one-way cost is $44 plus gratuity.
- **Website:** www.mearstransportation.com/taxi-services
- **Phone:** +1 855 463-2776

**Uber**
- Transportation around town as well as between the Orlando International Airport (MCO) and Congress hotels. Use the discount code below and receive $20 off your first ride with Uber.
- **Website:** www.uber.com/go/sccm
- **Discount Code:** SCCM
SCCM is offering the following options for attendees who want to experience some of Central Florida’s exciting theme park attractions.

**Universal Orlando Parks**
At Universal Orlando® Resort you’ll find two spectacular theme parks, nonstop nightlife, and more, all in one convenient location. Experience the pulse-pounding thrills of Universal’s Islands of Adventure®. Take a starring role in some of the biggest movies and TV shows ever created at Universal Studios®. And enjoy the best in restaurants, nightclubs, shopping, movies and more at Universal CityWalk®. It’s an entire universe of action, fun and excitement that takes you where you never thought you’d go.

Purchase tickets online at https://www.universalorlando.com/convention and access special ticket options not available anywhere else!

Note: Pricing is subject to change without notice.

**Walt Disney World® Resort**
Special ticket offers and pricing are available to Critical Care Congress attendees and accompanying family or guests. Purchase exclusive afternoon (after 2:00 p.m. and after 4:00 p.m.) tickets and special discounted multiday tickets online at http://www.mydisneymeetings.com/sccm2016 or by calling +1 407 566-5600. Multiday tickets include an additional complimentary admission to one of the following Disney Experiences:
- Disney’s Typhoon Lagoon Water Park
- Disney’s Blizzard Beach Water Park
- A round of golf at Disney’s Winter Summerland Miniature Golf Courses (before 4:00 p.m.) or Disney’s Oak Trail 9-hole Golf Course
- ESPN Wide World of Sports Complex (Special events excluded. Admission to general area only.)

Note: The cutoff date for advance purchase savings is February 19, 2016. If you choose to book a hotel at a Disney property, you will be responsible for your own daily transportation to/from the Orange County Convention Center located on International Drive.

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**45th CRITICAL CARE CONGRESS: GUEST REGISTRATION FORM**
February 20-24, 2016 ▲ Orange County Convention Center ▲ Orlando, Florida, USA

**REGISTRANT INFORMATION**

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**SPOUSE/GUEST REGISTRATION** (If you need more space, please make a copy of this form.)

Spouse/guest registration is required for anyone over 18 years of age who will be participating in SCCM activities. Registration includes admission to the Exhibit Hall and an SCCM gift. Spouse/guest registration is $25 per guest over 18 and does not include admission to any educational session.

**PAYMENT INFORMATION** (Please send payment with registration form.)

- □ Check (must be U.S. funds drawn on a U.S. bank) or International Money Order
- □ Wire Transfer (Please contact SCCM Customer Service for wire transfer information.)
- □ Credit Card: □ American Express □ Discover □ MasterCard □ Visa

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Cardholder Signature ___________________________ Date ____________

Please use this form to register guests for the 45th Critical Care Congress. Please type or print clearly. Please keep a copy of this form for your records.

**EASY WAYS TO REGISTER:**

1. Online at www.sccm.org/congress 2. Call SCCM Customer Service at +1 847 827-6888 3. Fax the completed form to +1 847 493-6444 4. Mail the completed form to: 35083 Eagle Way, Chicago, IL 60678-1350 USA
The Society of Critical Care Medicine has 15 Specialty Sections to accommodate members of various professions and disciplines. Members may join up to three sections for unique opportunities to network with colleagues and become more involved in projects and initiatives while advancing the mission of the Society. For more information on joining a Specialty Section, visit www.sccm.org/membership.

Anesthesiology Section

Quality Metrics in Anesthesia & Critical Care
Since the shift of payment system from volume-based to value-based has taken place by the Centers for Medicare & Medicaid Services (CMS), numerous quality metrics have been introduced. These metrics are designed to measure performance and associate reimbursement through them.

Two types of quality metrics have proliferated during the last few years: process- and outcomes-based. A process metric focuses on improvement of a particular process to improve the eventual outcome. A perfect example of the same is timely delivery of antibiotics prior to incision to reduce surgical site infection as part of the Surgical Care Improvement Project SCIP. Outcome metrics such as readmission within 30 days of discharge put the onus of improving the process on individual healthcare systems by recognizing differences in practices and problems.

Metrics focused on measurement of the anesthesia delivery process have so far been lacking. Associated metrics such as SCIP have been used as surrogates by most of the practices to measure performance.

Anesthesia Quality Institute (AQI) and the Multicenter Perioperative Outcomes Group (MPOG), with their approved data registries, are spearheading the process of development of anesthesia-focused quality metrics.

Currently, the metrics being proposed focus (in part) on improving the processes of transition of care, neuromuscular blockade monitoring and reversal, and reduction in postoperative nausea and vomiting.

Join us at the Anesthesiology Section’s Year in Review at the 2016 Society of Critical Care Medicine Congress to learn more about these quality metrics and what you can do to stay ahead.

Osteopathic Medicine Section

As we prepare for the upcoming Society of Critical Care Medicine Critical Care Congress in Orlando, Florida, in February 2016, the Osteopathic Medicine Section will strive to make the meeting more interesting and relevant for fellow osteopathic physicians. While making your plans to attend Congress, here are a few of the projects being planned that you should be aware of:

- In order to encourage more visibility and participation by the section, we are planning to hold a reception for the Osteopathic Medicine Section members.

All other glucose meters currently in use with critically ill patients are now classified as “off-label” by the FDA and become subject to “high complexity testing” requirements under CMS. These requirements are so stringent that off-label use of glucose meters on critically ill patients is not a practical alternative. Testing would not be performed by nurses, only by individuals degreed in laboratory medical technology.

1. DIABETES CARE, VOLUME 33, Number 4, April 2010
2. Centers for Medicare & Medicaid Services

The only glucose meter cleared by the U.S. FDA for use with critically ill patients

In the last several years an unacceptably high number of adverse patient events and more than 16 deaths have been traced to the use of glucose meters in hospitals in the U.S. The FDA has just announced that it now requires hospital meters to be designed for and tested on critically ill patients in order to be cleared for use in these patient populations. To date, only one meter, the Nova StatStrip Glucose Hospital Meter System has been found to be accurate enough to obtain this new FDA clearance.

StatStrip Glucose has been designed specifically to be free of clinical interferences that can be present in critically ill patients. The proof data submitted to the FDA included:

- 1,698 individual critical care patients from five university medical centers had StatStrip Glucose results paired with an IDMS traceable laboratory glucose reference method.

- Data from multiple intensive care settings representing 19 medical condition categories and 257 subcategories as designated by the World Health Organization were included.

- Over 8,000 medications representing 33 parent drug classes and 134 drug subclasses as designated by the United States Pharmacopeia were studied for possible clinical interferences; no clinical interferences were observed.

The only glucose meter cleared by the U.S. FDA for use with critically ill patients

The American Osteopathic Board of Surgery offered component #3: Cognitive Assessment (formerly referred to as the Recertification Exam) for Osteopathic Continuous Certification for the certification of added qualification in Surgical Critical Care.

For questions about the section, contact Daniel Wu, DO, FACOS, FACS, Osteopathic Medicine Section Chair, at dwu2@lghealth.org.

Pediatrics Section

The Pediatrics Section Steering Committee has been busy planning for the 45th Society of Critical Care Medicine Critical Care Congress, to be held at the Orange County Convention Center in Orlando, Florida, from February 20-24, 2016! In addition to the excellent program content, we will plan on holding the annual Pediatrics Section Business Meeting, the
Pediatrics Section Year in Review, and the Pediatrics Section Reception. Keep your eyes out for more information to be coming soon via broadcast e-mail.

We will also be holding elections for several key positions (chair-elect and two members-at-large) on the Pediatrics Section Steering Committee. Trung Nguyen, MD, and Jana Stockwell, MD, FCCM, are eligible for re-election for the at-large positions. Tom Nakagawa, MD, FCCM, will move up to chair immediately following the section business meeting.

As always, please feel free to contact Derek S. Wheeler, MD, FCCM, Pediatrics Section Chair, at derek.wheeler@cchmc.org

Physician Assistant Section

The Physician Assistant (PA) Section would like to thank all physician assistants for their hard work and positive contributions as vital members of the critical care team! In celebration of PA Week (Oct. 6-12), the PA Section hosted a webcast on “PA Day,” Oct 6, 2015. The topic of the webcast was crystalloids versus colloid. It was presented in a Lincoln-Douglas debate format. Section members William Holecik III, MS, PA-C, and Peter Sandor, RRT, MHS, PA-C, tackled this topic with PA Section Chair Ryan O’Gowan, MBA, PA-C, FCCM, moderating.

In our attempts to engage more members of our section, we have added two additional member-at-large positions and will be welcoming a new secretary/treasurer at the upcoming Society of Critical Care Medicine (SCCM) Critical Care Congress in Orlando, Florida. We would like to welcome all members to get involved and engage the PA Section leadership. Please let us know if you have ideas that could help improve our section and, in turn, benefit our members.

We encourage the use of the PA Section forum located in the SCCM eCommunity. To access the eCommunities, go to sccm.socios.com or go to MySCCM.org, log in, and click on the eCommunities tab. Members and non-members alike can participate in this forum (non-members will be prompted to register for free). Remember to select the PA Section as your primary section to receive regular updates on forum activity.

Active members within this forum will help ensure its usefulness as a communication tool.

Additionally, by choosing the PA Section as your primary section, it ensures you will receive up-to-date news on all official PA Section activities. To do this, edit your section elections in the “My Sections” tab on MySCCM.org.

Research Section

The Research Section has been active with multiple ongoing initiatives. Our members are busy planning a total of seven exciting sessions that have been accepted for the 2016 Society of Critical Care Medicine (SCCM) Critical Care Congress in Orlando, Florida, from February 20-24, 2016.

The section has concluded to foster active exchange and discussion between designated “research” members of other SCCM Sections (e.g., Nursing, Clinical Pharmacy and Pharmacology, Internal Medicine, Pediatrics, and Neuroscience). We envision improved collaboration between all SCCM sections and improved integration of research endeavors across groups, improving effectiveness and scope and minimizing duplication of work. The Research Section is leading a Precision Medicine Task Force, which is co-chaired by Robert Stevens, MD, PhD, and Raghavan Murugan, MD, MS, FRCP. This important initiative is part of the SCCM Research Section Roadmap for Discovery Program. The goal is to deliver a white paper with recommendations on precision medicine research for improving, understanding and treatment of critical illness.

The section also has several active subcommittees: Basic and Translational Research (led by Basilia Zingarelli, MD, PhD), Clinical and Epidemiology Research (Marilyn Hrnak, RN, ACNP, PhD, FCCM), ICU Quality and Patient Safety Research (Michele Balas, RN, APRN-NP, CCRN, PhD), and Education and Simulation Research (Wan-Tsu W. Chang, MD). All section members are encouraged to join a subcommittee aligned with their interests to help further the great work being done in each group.

Ahmed Badr, MD, FACS, is leading a mentorship program to foster the development of the next generation of critical care researchers. If you are interested in participating as a mentor or mentee, please contact Dr. Badr at abadr@wpahs.org!

If you are interested in getting involved in any of these initiatives or subcommittees, please contact Section Chair Alejandro Rabinstein, MD, at rabinstein.alejandro@mayo.edu.

Surgery Section

Patient Safety - During Bedside Procedures

Never Events and Serious Reportable Events are defined as “adverse events that are serious, largely preventable, and of concern to both the public and health care providers.” These events (the kind of mistakes that should never happen in the field of medical treatment) fall into six categories: Surgical or Invasive Procedure Events, Product or Device Events, Patient Protection Events, Care Management Events, Environmental Events, and Potential Criminal Events (National Quality Forum).

The Surgical Section Patient Safety Committee is focusing on providing educational programs and materials on patient safety during bedside procedures in the intensive care unit (ICU) for a future Critical Care Congress. The committee has selected topics which include checklist usage, limiting noise and distraction, and the prevention of fires.

The committee will focus on: 1) The growth in checklist usage and the use of checklists during crises; 2) Providing awareness on reductions in the level of noise and distractions in order to create a safer environment for the patient and the procedural team; and 3) Enhancing team awareness regarding fire risk classification, assessment, prevention, and management.

Preventable medical decisions in our ICUs are associated with a culture that focuses on patient safety. The importance of being ever-vigilant during a bedside procedure is paramount. The implementation of tools and practice to reinforce this safety culture is an emphasis of this committee.
For intravenous use, Lyophilized Powder for Reconstitution

**INDICATIONS AND USAGE**

Kcentra, Prothrombin Complex Concentrate (Human), is a blood coagulation factor replacement product indicated for the urgent reversal of acquired coagulation factor deficiency induced by Vitamin K antagonist (VKA, e.g., warfarin) therapy in adult patients with:

- Both fatal and non-fatal arterial and venous thromboembolic complications have been reported with Kcentra in clinical trials and post marketing surveillance. Monitor patients receiving Kcentra for signs and symptoms of thromboembolic events.
- Kcentra was not studied in subjects who had a thromboembolic event, myocardial infarction, transient ischemic attack, unstable angina pectoris, or severe peripheral vascular disease within the prior 3 months. Kcentra may not be suitable in patients with thromboembolic events in the prior 3 months.

**WARNINGS AND PRECAUTIONS**

- Arterial and venous thromboembolic complications have been reported in patients receiving Kcentra. Monitor patients receiving Kcentra for signs and symptoms of thromboembolic events. Kcentra was not studied in subjects who had a thrombotic or thromboembolic (TE) event within the prior 3 months. Kcentra may not be suitable in patients with thromboembolic events in the prior 3 months.
- Kcentra is made from human blood and may carry a risk of transmitting infectious agents, e.g., viruses, the variant Creutzfeldt-Jakob disease (vCJD) agent, and theoretically, the Creutzfeldt-Jakob disease (CJD) agent.

**ADVERSE REACTIONS**

- The most common adverse reactions (ARs) (frequency ≥2.8%) observed in subjects receiving Kcentra were headache, nausea/vomiting, hypotension, and anemia.
- The most serious ARs were thromboembolic events including stroke, pulmonary embolism, and deep vein thrombosis.

**USE IN SPECIFIC POPULATIONS**

- Pregnancy: No human or animal data. Use only if clearly needed.

**DOSAGE FORMS AND STRENGTHS**

Kcentra is available as a single-use vial containing coagulation Factors II, VII, IX and X, and antithrombotic Proteins C and S as a lyophilized concentrate.

**CONTRAINDICATIONS**

- Known anaphylactic or severe systemic reactions to Kcentra or any components in Kcentra including heparin, Factors II, VII, IX, X, Proteins C and S, Antithrombin III and human albumin.
- Disseminated intravascular coagulation.
- Known heparin-induced thrombocytopenia. Kcentra contains heparin.

**DOSE FORMS AND STRENGTHS**

- Kcentra is a blood coagulation factor replacement product indicated for the urgent reversal of acquired coagulation factor deficiency induced by Vitamin K antagonist (VKA, e.g., warfarin) therapy in adult patients with:
  - Acute major bleeding or need for an urgent surgery/invasive procedure.

**DOSE AND ADMINISTRATION**

For intravenous use only

- Kcentra dosing should be individualized based on the patient’s baseline International Normalized Ratio (INR) value, and body weight.
- Administer Vitamin K concurrently to patients receiving Kcentra to maintain factor levels once the effects of Kcentra have diminished.
- The safety and effectiveness of repeat dosing have not been established and it is not recommended.
- Administer reconstituted Kcentra at a rate of 0.12 mL/kg/min (~3 units/kg/min) up to a maximum rate of 8.4 mL/min (~210 units/min.).

**ADDITIONAL DOSAGE INSTRUCTIONS**

- Dosing is based on body weight. Dose based on actual potency as stated on the carton, which will vary from 20-31 Factor IX units/mL, after reconstitution. Nominal potency is 500 or 1000 units per vial, approximately 25 units per mL after reconstitution.
- Units refer to International Units.
- Dose is based on body weight up to but not exceeding 100 kg. For patients weighing more than 100 kg, maximum dose should not exceed 5000 units.

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To report SUSPECTED ADVERSE REACTIONS, contact CSL Behring at 1-866-915-6958 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

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**USE IN SPECIFIC POPULATIONS**

- Pregnancy: No human or animal data. Use only if clearly needed.

Based on September 2014 version.
Important Safety Information

Kcentra is a blood coagulation factor replacement product indicated for the urgent reversal of acquired coagulation factor deficiency induced by Vitamin K antagonist (VKA—eg, warfarin) therapy in adult patients with acute major bleeding or the need for urgent surgery or other invasive procedure. Kcentra is for intravenous use only.

WARNING: ARTERIAL AND VENOUS THROMBOEMBOLIC COMPLICATIONS

Patients being treated with Vitamin K antagonist therapy have underlying disease states that predispose them to thromboembolic events. Potential benefits of reversing VKA should be weighed against the risk of thromboembolic events, especially in patients with history of such events. Resumption of anticoagulation therapy should be carefully considered once the risk of thromboembolic events outweighs the risk of acute bleeding. Both fatal and nonfatal arterial and venous thromboembolic complications have been reported in clinical trials and postmarketing surveillance. Monitor patients receiving Kcentra, and inform them of signs and symptoms of thromboembolic events. Kcentra was not studied in subjects who had a thromboembolic event, myocardial infarction, disseminated intravascular coagulation, cerebral vascular accident, transient ischemic attack, unstable angina pectoris, or severe peripheral vascular disease within the prior 3 months. Kcentra might not be suitable for patients with thromboembolic events in the prior 3 months.

Kcentra is contraindicated in patients with known anaphylactic or severe systemic reactions to Kcentra or any of its components (including heparin, Factors II, VII, IX, X, Proteins C and S, Antithrombin III and human albumin). Kcentra is also contraindicated in patients with disseminated intravascular coagulation. Because Kcentra contains heparin, it is contraindicated in patients with heparin-induced thrombocytopenia (HIT).

Hypersensitivity reactions to Kcentra may occur. If patient experiences severe allergic or anaphylactic type reactions, discontinue administration and institute appropriate treatment.

In clinical trials, the most frequent (≥2.8%) adverse reactions observed in subjects receiving Kcentra were headache, nausea/vomiting, hypotension, and anemia. The most serious adverse reactions were thromboembolic events, including stroke, pulmonary embolism and deep vein thrombosis.

Kcentra is derived from human plasma. The risk of transmission of infectious agents, including viruses and, theoretically, the Creutzfeldt-Jakob disease (CJD) agent, cannot be completely eliminated. The safety and efficacy of Kcentra in pediatric use have not been studied, and Kcentra should be used in women who are pregnant or nursing only if clearly needed.

Please see brief summary of full prescribing information on reverse.