

37TH ANNUAL SCIENTIFIC MEETING

American Academy of Neurological and Orthopaedic Surgeons

Omni Hotel, Jacksonville, Florida June 7-8, 2013

Program



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37[™] ANNUAL SCIENTIFIC MEETING

Dear Colleagues,

Welcome to the Academy's 37th Annual Scientific Meeting, being held at the Omni Hotel in Jacksonville, Florida. As you join peers from around the world in this gorgeous location I encourage you to take full advantage of this opportunity to acquire up to 24 hours of ACCME accredited category I continuing medical education credits (including ICS-US CME offered concurrently from June 6th to June 8th). Your participation in our innovative program designed specifically for Neurosurgery and Orthopaedic Surgery specialists will provide a unique educational experience.

This year's meeting focuses on Neurosurgical and Orthopaedic Surgery that address Surgical Challenges and Creative Solutions, with special invited guest speakers presenting information about how to achieve this in your practice. Exceptional presentations will be given by internationally renowned speakers enhancing your practice viability and reputation while increasing your surgical knowledge.

We are greatly honored to have David Adelson, MD as our 2013 Key Note Speaker. Dr. Adelson is an internationally recognized neurosurgical and neuroscience expert in head injury and epilepsy in children and he is presenting, Pediatric Traumatic Brain Injury: Present and Future Management," on Friday morning.

We are also hosting The 4th Annual "Fun" draising and Awards Dinner featuring an elegant dinner, entertainment, and awards ceremony. Special guest speaker, Dr. Ingemar Davidson along with American Airlines Safety Captain Billy Nolan will present **Safety in the OR: Lessons from the Cockpit**. Don't miss this event which will be held on Friday evening. All proceeds benefit the AANOS Scholarship Fund.

We hope you enjoy our gathering in Jacksonville and take advantage of the wonderful daytime adventures and the exciting nightlife available for you and the entire family!

Sincerely,

Kazem Fathie, MD, PhD, FICS, FACS Chairman

American Academy of Neurological and Orthopaedic Surgeons

Maxime J.M. Coles, MD Orthopaedic Surgeon 2013 Scientific Organizing

Soluther

Committee Co-Chair

Clara Raquel Epstein, MD Neurosurgeon 2013 Scientific Organizing Committee Co-Chair

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BUSINESS MEETINGS

The American Academy of Neurological and Orthopaedic Surgeons Board of Directors **Meeting** will be held on Friday, June 7th in the Jacksonville Room following that day's scientific programming (approximately 3pm).

LEADERSHIP

BOARD OF DIRECTORS

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Course Sponsor

International College of Surgeons - United States Section
An ACCME Accredited Provider

Accreditation

The International College of Surgeons-United States Section is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to sponsor Continuing Medical Education for physicians.

Credit Designation

The International College of Surgeons-United States Section designates this live activity for a maximum of 24 AMA PRA Category 1 Credits. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

OVERALL COURSE OBJECTIVES

The Annual Scientific Meeting is designed to offer information regarding the latest surgical advancements and technology to address gaps in knowledge that may exist for practicing surgeons in all surgical specialties, residents in training, and allied health professionals. The desired outcome of this program is increased knowledge, better competency in cutting edge treatment modalities, and enhanced treatment decision making. It is the expressed goal of the course to provide enough material

that upon completion of the activity the participant can make educated decisions to incorporate the latest surgical techniques and technologies as well as discern when these procedures are warranted to provide optimum patient care.

Topics presented during the Annual Scientific Meeting have been designed to address and improve the attendee's knowledge and skills in the following competencies; patient care or patient-centered care, medical knowledge, practice-based learning & improvement, quality improvement and professionalism.

Disclosure Policy

It is the policy of the sponsoring organization the International College of Surgeons-US Section that any individual who is involved in planning or presenting in a program designated for AMA Physician's Recognition Award Category 1 Credit™ must disclose all relevant financial relationships with a commercial interest prior to being included in the final program. This information is disclosed to the audience prior to the activity. The ICS-US has procedures in place to address a conflict of interest should one arise. Our complete Policy on Commercial Support and Independence is available on FICS Online or by request from Headquarters. Additionally, faculty members are asked to disclose when any discussion of unapproved use of a pharmaceutical or medical device occurs.

Featured Presentations

SCIENTIFIC KEYNOTE SPEAKER



Pediatric Traumatic Brain Injury: Present And Future Management

David Adelson, MD, Director, Barrow Neurological Institute at Phoenix Children's Hospital Chief, Pediatric Neurosurgery/ Children's Neurosciences Clinical Professor of Surgery/Neurosurgery, University of Arizona Adjunct Faculty, School of Biological and Health Systems Engineering, Arizona State University, Phoenix, AZ

P. David Adelson, MD, FACS, FAAP, an internationally recognized neurosurgical and neuroscience expert in head injury and epilepsy in children, is the Director of the Barrow Neurological Institute at Phoenix Children's Hospital and the Division Chief of Neurosurgery.

Dr. Adelson, whose work has been published in numerous medical and scientific journals, is the principal investigator of a National Institute of Health (NIH) funded multicenter clinical trial to evaluate whether hypothermia can improve the outcome for children following severe traumatic brain injury. He has been funded through numerous extramural grants from the NIH and Centers for Disease Control (CDC) as well as through foundation support for his basic science laboratory and clinical research. He has been recognized as one of the foremost experts on pediatric head injury clinical management. His other clinical and research interests include pediatric epilepsy, brachial plexus and peripheral nerve injury, and pediatric brain tumors. He has been the recipient of multiple awards, including The Best Doc-

tors in America, Young Investigators Award of the Brain Injury Association, Congress of Neurological Surgeons Clinical Investigation Award and Outstanding Physician Award.

He is an active participant in multiple scientific and professional societies. Dr. Adelson is presently the President of the Congress of Neurological Surgeons and the Past Chair of the AANS/ CNS Section on Neurotrauma and Critical Care. He also sits on the Executive Committees of the Committee on Trauma of the American College of Surgeons, and previously on the Section of Neurological Surgery for the American Academy of Pediatrics, and the National Neurotrauma Society, to name a few.

Dr. Adelson was recruited to Arizona from the Children's Hospital of Pittsburgh where he served most recently as the A. Leland Albright Professor of Neurosurgery/ Pediatric Neurosurgery and Vice Chairman, (Research) at the University of Pittsburgh School of Medicine. He also served as the Director of Pediatric Neurotrauma, the Surgical Epilepsy Center, Brachial Plexus and Peripheral Nerve Center and Clinic, Center for Injury Research and Control, and Walter Copeland Neurosurgical Laboratory.

Dr. Adelson received his medical degree from Columbia University, New York, NY, and completed the neurosurgical residency program at the University of California, Los Angeles, School of Medicine, Los Angeles, Calif. He then obtained additional specialty training as a fellow in pediatric neurosurgery at Children's Hospital of Boston and Harvard Medical School, Boston, Mass., before moving on to Pittsburgh.

SOCIAL KEYNOTE SPEAKER



Safety in the OR: Lessons from the Cockpit

Ingemar Davidson, MD, PhD, FACS, Professor of Surgery, Division of Surgical Transplantation, University of Texas Southwestern Medical Center Dallas, TX

Ingemar J.A. Davidson a native of Sweden graduated at the University of Gothenburg, Sweden. Dr. Davidson's focus is organ transplantation, Dialysis Vascular Access in End Stage Renal Disease patients. He is Professor of Surgery, at the University of Texas Southwestern Medical Center Dallas, TX and Medical Director Parkland's Vascular Access Clinic. He is a member of medical professional societies, such as the American College of Surgeons,

American Medical Association, American Society of Transplant Surgeons and The Transplantation Society (International), Texas Transplantation Society (former president), and a past Board Member of Southwest Transplant Alliance (Organ Bank). Dr Davidson's research and experience is reflected in books, peer reviewed publications and proceedings. He is a current or past Reviewer for Critical Care Medicine, Journal for the American Society of Nephrology, Clinical Transplantation, Kidney International, and Juvenile Diabetes Foundation-International. He is member of the Editorial Board of Journal of Vascular Access. He has directed postgraduate programs dedicated to Transplantation and Access for Dialysis most notably CiDA (Controversies in Dialysis Access) now at its 10th year. He is a requested lecturer at congresses and symposiums in the USA and worldwide, including team building strategies. Dr. Davidson initiated and maintains a development of several clinical activities, and a co-investigator for active NIH grant supported clinical dialysis access studies.

Scientific Program

Friday, June 7, 2013

NEUROSURGICAL AND ORTHOPAEDIC PLATFORM PRESENTATIONS

9:00 - Noon Omni Ballroom

Welcome and Introductions

Kazem Fathie, MD, FICS, Clara Raquel Epstein, MD, FICS, Maxime Coles, MD, FICS

Moderators: Clara Raquel Epstein, MD, FICS, Jeffrey M. Epstein, MD, FICS, Lucia Zamorano, MD, FICS

International Neurosurgery - The State of Neurosurgery, Medicine and Politics in Kurdistan, Northern Iraq

Gene Bolles, MD, Neurological Surgeon, Assistant Professor, University of Colorado, Department of Neurosurgery; Denver Health Medical Center, Rocky Mountain Regional Trauma Center, Denver, CO

Current Advances in Epilepsy Surgery

Lucia Zamorano, MD, FICS, Professor of Neurological Surgery William Beaumont Oakland University School of Medicine, Birmingham, MI

Surgical Treatment of Arachnoid Cyst. Experience of the National Institute of Pediatrics. Mexico City

Javier Terrazo-Lluch, MD, MSc, Staff Neurosurgeon of National Institute of Pediatrics, Mexico City, Mexico

Quality Improvement Proposal: What is the Best Matrix for a Neurosurgeon Patient Care Sequence?

Hector E. James, MD, Professor of Neurosurgery and Pediatrics, University of Florida College of Medicine, Jacksonville, FL

Importance of Low-Amplitude Positive Facial Nerve Stimulation Following CP Angle Tumor Surgery

Bharat Guthikonda, MD, FICS, Associate Professor Director of Skull Base Research Department of Neurosurgery LSU HSC Shreveport, Shreveport, LA

Emerging Technologies; Are Some Surgeons Becoming Obsolete?

Clara Raquel Epstein, MD, FICS, Neurosurgeon/CEO, The Epstein Neurosurgery Center, LLC, Boulder, CO

Neuromodulation: New Options for Old Problems

Jeffrey Epstein, MD, FICS, Neurosurgeon, Brookhaven Memorial Hospital Medical Center, Babylon, NY/Patchogue, NY

Trigeminal Neuralgia - Clinical Observations from Latin American Experience

Mauro Alberto Segura Lozano, PhD, Neurosurgery Department, General Hospital of Morelia, Mexico Mexican Neurological Surgery Board National Board of Science and Technology of Mexico, Morelia, Mexico

Scientific Key Note Speaker Pediatric Traumatic Brain Injury: Present And Future Management

David Adelson, MD, Director, Barrow Neurological Institute at Phoenix Children's Hospital Chief, Pediatric Neurosurgery/ Children's Neurosciences at Phoenix Children's Hospital, Phoenix, AZ

Dr. Adelson will provide an overview on traumatic brain injury in children that will include a review of injury and mechanism, unique aspects of age at injury, the pathophysiology of primary and secondary mechanisms, present management through evidence based review of the literature, the pediatric guidelines recommendations, the use of advanced neural monitoring, and future approaches and targets for therapy in children and adults.

Lunch - Humanitarian Outreach Presentation Noon - 1:30 PM Salon C

Operation Hope: Humanitarian Medical Outreach John Thomas, MD. Lubbock. TX

NEUROSURGICAL AND ORTHOPAEDIC PLATFORM PRESENTATIONS

1:30 - 3:15 PM Omni Ballroom Moderators: Clara Raquel Epstein, MD, FICS, Jeffrey M. Epstein, MD, FICS, Lucia Zamorano, MD, FICS

Applications of Neuroendoscopy in Neuro-Oncology Chandrashekhar E. Deopujari, MD, Professor and Head, Neurosurgery, Bombay Hospital (Institute of Medical Sciences), Mumbai, India

Management of Cerebrospinal Fluid Leaks During Anterior Cervical Surgery

William Welch, MD, FICS, Professor of Neurosurgery, Chair, Department of Neurosurgery, Pennsylvania Hospital; Vice-Chair, Department of Neurosurgery, Perelman School of Medicine at the University of Pennsylvania, Philadelphia, PA

The Role of Hemicraniectomy in the Management of Patients with Space-Occupying MCA Infarction

W. Craig Clark, MD FICS, Neurosurgeon, President, The Neurosurgical Center, Memphis, TN

Scientific Program

Hemispherectomy

Jaime Diegoperez Ramirez, MD, FICS, Neurosurgeon, Centro Neurológico CMABC, México City, México

Chronic Pain, Insomnia and Depression

Richard Gershanik, MD, Orthopaedic Surgeon, Neurological & Neurosurgical Pain Management Center, Miami, FL

The Latest Clinical Surgical Total Knee Replacement Advancements in Painful Osteoarthritis of the Knee

Robert S. Mathews, MD, FICS, Orthopaedic Surgeon, First Team Institute LLC, Lancaster PA, Barnes Kasson Hospital, Susquehanna PA

Necrotizing Fasciitis

Maxime Coles, MD, FICS, Orthopaedic Surgeon, Sebasticook Valley Health, Pittsfield ME

Saturday, June 8, 2013

NEUROSURGICAL AND ORTHOPAEDIC PLATFORM PRESENTATIONS

9:00 - Noon Omni Ballroom

Welcome and Introductions

Kazem Fathie, MD, FICS, Clara Raquel Epstein, MD, FICS, Maxime Coles, MD, FICS

Moderators: Clara Raquel Epstein, MD, FICS, Jeffrey M. Epstein, MD, FICS, Lucia Zamorano, MD, FICS

AANOS Resident Scholarship Recipient Safe and Effective Atlanto-Axial Stabilization with Long Term Intra-Articular Arthrodesis

Doniel Drazin, MD, Senior Neurosurgery Resident, Department of Neurosurgery, The Spine Center, Cedars-Sinai Medical Center, Los Angeles, CA

Endoscopic Transforaminal Approach for Disc Herniation and Stenosis

Lucia Zamorano, MD, FICS, Professor of Neurological Surgery William Beaumont Oakland University School of Medicine, Birmingham, MI

The Dorsal Root Ganglion - An Emerging Neuromodulation Target

Richard L. Weiner, MD, FACS, Vice Chair, Dept of Neurosurgery, THR-Presbyterian Hospital, Dallas, Texas, Clinical Associate Professor of Neurosurgery, University of Texas Southwestern Medical School, Dallas, TX

Buttock Pain and Sciatica: When a Herniated Lumbar Disc is Not the Cause

Arnold Graham Smith, MD, Orthopaedic Surgery, Spine Rehabilitation and Surgery, Jacksonville, FL

Ovation Placental Tissue Based Adjunct to Spinal Fusion and Beyond

E. Jeffrey Donner, MD, Orthopaedic Surgeon, Co Founder, The Spine Institute, Loveland, CO

Penetrating and Ballistic Injuries in Neurosurgery - An Epidemic

Gene Bolles, MD, Neurological Surgeon, Assistant Professor, University of Colorado, Department of Neurosurgery; Denver Health Medical Center, Rocky Mountain Regional Trauma Center, Denver, CO

Kyphoplasty with Radiofrequency

Manuel Eduardo Soto García, MD, Villahermosa, Mexico

LESS Exposure Segmental Cervical Plating

Josue Gabriel, MD, FICS, Orthopaedic Surgeon, Spine Institute of Ohio, Columbus, OH

Paraganglioma of the Cauda Equina

W. Craig Clark, MD, FICS, Neurosurgeon, President, The Neurosurgical Center, Memphis, TN

Role of Intraoperative Near Infrared Indocyanine Green Videoangiography in Aneurysm Surgery

Bharat Guthikonda, MD, FICS, Associate Professor Director of Skull Base Research Department of Neurosurgery LSU HSC Shreveport, Shreveport, LA

A Hemiarthroplasty Experience Using a Proximal Femoral Cerclage Cable

Gerald Greenfield, Jr., MD, FICS, Private practice Orthopaedic Surgery South Texas Spinal Clinic/ Southwest Texas Methodist Hospital Clinical Assistant Professor University of Texas health Sciences Center- San Antonio, TX

Vagal Neuralgia

Richard Gershanik, MD, Orthopaedic Surgeon, Neurological & Neurosurgical Pain Management Center, Miami, FL

Lunch - Practice Management Presentation
Noon - 1:30 PM Salon C

Moderator: Francis Podbielski, MD

Management of Legal, Tax, and Insurance Liability Risks for Practice Profitability in 2013

Victoria J. Powell, JD, LLM, President of P Inc., Ridgeland, MS

ICS-US Scientific Program (abridged)

Thursday, June 6, 2013

OPENING CEREMONY & SPECIAL LECTURE 8:00 - 8:50 AM Salon A&B

Welcome

Nicholas Rebel, Executive Director, US Section, ICS, Chicago, IL

US Section President's Welcome and Introduction of Special Lecture

Ari Halldorsson, MD, FICS, **United States Section President**, Professor and Vice Chair, Program Director, Department of Surgery, Texas Tech University Health Sciences Center, Lubbock, TX

Barbers of Civility

Andrew Klein, MD, MBA, FICS, FACS, Director, Comprehensive Transplant Center, Esther and Mark Schulman Chair of Surgery, Transplant Medicine Professor, Vice-Chair, Department of Surgery Cedars-Sinai Medical Center, Los Angeles, CA

Uncivil behavior is escalating in society at large and this poses particular challenges in the surgical workplace. This presentation will raise awareness of the costs both in dollars and in human misery of incivility in the practice of medicine by looking in particular at the case of surgeons.

MANAGEMENT OF PORTAL HYPERTENSION 8:50 - 10:20 AM Salon A&B

Moderators: Dinesh Ranjan, MD & Thavam Thambi-Pillai, MD

This session will identify the treatments for portal hypertensive bleeding that are available and discuss advantages as well as significant side effects or complications, with the choice of therapy. In addition, the role of liver transplantation in the management of HCC in current clinical practice will be discussed. Upon completion of the course participants will know how to determine the most appropriate treatment for portal hypertensive bleeding thus improving patient care while reducing morbidity and mortality as well as extensive resource expenditures.

Shunting Options for Portal Hypertension

Alexander Rosemurgy, MD, Director, Surgical Digestive Disorders and GERD Center Director, HPB Surgery and Fellowship Program Southeastern Center for Digestive Disorders and Pancreatic Cancer Advanced Minimally Invasive and Robotic Surgery Florida Hospital, Tampa, FL

Role of TIPS in Portal Venous Hypertension Management Horacio D'Agostino, MD, FICS, FACS, FSIR, Professor of Radiology, Surgery, and Anesthesiology, Chair Dept. of Radiology, LSUHSC, Shreveport, LA

Role of Liver Transplantation in the Management of Portal Hypertension and HCC

Cataldo Doria, MD, PhD,FICS, Nicoletti Family Professor of Transplant Surgery, Director, Division of Transplantation, Surgical Director Liver Tumor Center, Jefferson Medical College, Thomas Jefferson University Hospital, Philadelphia, PA

LATE COMPLICATIONS FOLLOWING REPAIR OF CONGENITAL MALFORMATIONS

10:30 - Noon Salon A&B

Moderators: Domingo Alvear, MD & Magsood Elahi, MD

This session will identify and define long term issues and complications related to congenital malformations. Upon completion of the course participants will increase their knowledge and ability to identify complications related to various congenital malformations that occur later in life.

Late Complications Following Repair of Esophageal Atresia

Saleem Islam, MD, MPH, Associate Professor of Surgery University of Florida, Gainesville, FL

Congenital Diaphragmatic Hernia: Survival, Outcomes and Long-Term Follow-Up Issues as More Severely Afflicted Newborns Survive

David W. Kays, MD, Associate Professor and Chief Pediatric Surgery, University of Florida; Surgeon-In-Chief, Shands Hospital for Children, Gainesville, FL

Long Term Outcomes of Congenital Anorectal Malformations and Hirschsprung's Disease

Belinda Dickie, MD, PhD, Cincinnati Children's Hospital Medical Center. Cincinnati. OH

Midgut Volvulus in Adolescents and Adults; Incidence, Diagnosis and Management

Johanna Serrano, MD, General Surgery Resident, PGY2, Pinnacle Health, Harrisburg, PA



Lunch - Humanitarian Outreach Presentation
Noon - 1:30 PM Salon C

Humanitarian Outreach - Surgical Team Update and Introduction of Dr. Domingo Alvear

Gazi B. Zibari, MD, FACS Professor of Surgery, Department of Surgery, Louisiana State University Health Sciences Center, Shreveport, LA

The Global Surgical Burden of Disease - Who Can Help and How Can We Help?

Domingo T. Alvear, MD, FICS, Chief, Division of Pediatric Surgery Pinnacle Health Hospital, Harrisburg, PA

Salon D

ICS-US Scientific Program (abridged)

THE DR. ARNO ROSCHER ENDOWED LECTURE 1:30 - 2:00 PM Salon A&B

Moderator: Ari Halldorsson, MD

Despite elaborate characterization of risk factors, bladder cancer is still a major epidemiological problem and the ninth most common malignancy worldwide. Urothelial carcinoma is now recognized as a disease of alterations in several cellular processes. Clinical trials for targeted chemotherapy for bladder cancer have commenced, and future trials will aim to treat urothelial carcinoma based on a patient's molecular profile to empower physicians to personalize patient treatment through increased therapeutic efficacy. The future of bladder cancer management will rely on the use of detection techniques that reliably diagnose the presence of disease, marker panels that predict individual tumor behavior, and molecular targets that allow deployment of novel therapeutics. Participants in this special lecture will have improved comprehension of detection and treatment options for bladder cancer.

Dissecting Molecular Pathways In Bladder Cancer: A Rational Approach to Prognostic Profiling and Target Discovery

Richard J. Cote, MD, FRCPath, FCAP; University of Miami Miller School of Medicine, Professor and Joseph R. Coulter Jr. Chair, Department of Pathology, Chief of Pathology, Jackson Memorial Hospital, Director, Dr. John T. Macdonald Foundation Biomedical Nanotechnology Institute, Miami, FL

VASCULAR SURGERY AND THE DIABETIC FOOT 2:00 - 3:30 PM Salon A&B

Moderators: Dixon Santana, MD & Michael Jacobs, MD

This session will include discussion of the epidemiology of diabetic foot pathology and infections, diagnosis of diabetic neuropathy and associated conditions, the pathophysiology of diabetic foot infections giving emphasis on clinical diagnosis and use of current technology to diagnose associated local and systemic complications, surgical site infections and control of the venous circulation. Upon completion of this course participants will improve their ability to discuss, evaluate and interpret various issues related to the treatment of the diabetic foot as well as other vascular considerations.

Diabetic Foot: Prevalence & Management in India

Rajesh Shah, MD, FICS, Professor of Surgery, AMCMET Medical College, Past President: International College Of Surgeons-Indian Section, Ahmedabad, Gujarat, India

New Frontiers in the Treatment of Limb Threatening Ischemia

Albert G. Hakaim, MD, Professor of Surgery, Chair Department of Vascular Surgery, Mayo Clinic, Jacksonville, FL

Salvage of Limb with Diabetic Gangrene of the Foot Joshua Salvador, MD, FRCS(C), Past President of the Denton
Cooley Surgical Society, Hollywood, FL

Clinically Significance Incidental Computed Tomographic (CT) Finding in Patients Undergoing Endovascular Aortic Aneurysm Repair

Tze-Woei Tan, MD, Assistant Professor of Surgery, Louisiana State University Health Sciences Center, Shreveport, LA

Venous Circulation Control in the Healing of Neuropathic Ulcers

Frank P. Bongiorno, MD, FICS, Wound Specialists of Michigan, PLLC, Ann Arbor, MI

INTEGRATIVE MULTI DISCIPLINARY MANAGEMENT OF PERIPANCREATIC FLUID (A SPECIAL INTRODUCTORY LECTURE) 3:30 - 3:45 PM Salon A&B

Moderator: Dixon Santana, MD

Laparoscopic Drainage of Peripancreatic Fluid Collections - A Case Presentation

Michael Jacobs, MD, FICS, FACS, Clinical Professor of Surgery, Section Chief - General Surgery, Director - HPB Program, St. John/Providence Health System, Southfield, MI

Coffee Break 3:45 - 4:00 PM Salon D

MINIMALLY INVASIVE BARIATRIC SURGERY TECHNICAL OPTIONS

4:00 - 5:30 PM Salon A&B

Moderator: Larry S. Sasaki, MD

This session will identify current approaches, risks and advantages for Minimally Invasive Bariatric Surgery. Upon completion of this course participants will increase their knowledge of various approaches for Minimally Invasive Bariatric Surgery along with the corresponding risks and advantages.

Complications requiring Reoperation and Readmission after Laparoscopic Roux-en-Y Gastric Bypass and Laparoscopic Sleeve Gastrectomy

Jennifer Wilson, MbchB, Sunderland Royal Hospital, Sunderland, Tyne and Wear, United Kingdom

GI Bariatric Surgery: Latest Advances

Bestoun Ahmed, MD, FRCS, Assistant Professor of Surgery, University of Florida, Jacksonville, FL

Minimally Invasive Gastric Banding

Mubashir A. Sabir, MD, Farmington Hills, MI

Panel Discussion

ICS-US Scientific Program (abridged)

Saturday, June 8, 2013

HONORED LECTURES

1:30 - 2:30 PM

Salon A&B

Moderator: Larry S. Sasaki, MD

Diamond Anniversary Lecture

Twenty years Experience With Living-Related Liver Transplantation in Children

Paul M. Colombani, MD, Professor of Surgery, Children's Surgeonin Charge, at The Johns Hopkins Hospital, Lutherville, MD

Honorary Fellow Lecture

Improving Perioperative Care - Can We Shorten Recovery and Improve Outcomes?

H. Randolph Bailey MD, FICS, Clinical Professor of Surgery at the Weil Cornell Medical College and The University of Texas Health Science Center, Houston, TX

TRANSPLANTATION IN THE 3RD MILLENNIUM 2:30 - 3:45 PM Salon A&B

Moderator: M. Hosein Shokouh-Amiri, MD

Transplantation has evolved into an accepted therapy for many congenital or acquired disorders. We have seen major changes in indications and transplant techniques. This session will provide updates on various types of transplantation cases and related treatment options and risks. Upon completion of this course participants will increase their knowledge and ability to discuss treatment options and risks with patients that are considering various types of transplantation.

A Novel Approach for Surgical Management of Renal Artery Aneurysm: Experience with 6 cases

Henry Huang, MD, University of Tennessee Health Science Center at Memphis, Memphis, TN

Transplantation of a Severed Arm

Joshua Salvador, MD, FRCS(C), Past President of the Denton Cooley Surgical Society, Hollywood, FL

Translational Strategies to Improve Outcomes of Liver Transplantation: From Bench to Bedside

Reza F. Saidi, MD, FICS, FACS, Assistant Professor of Surgery Division of Organ Transplantation Department of Surgery University of Massachusetts Medical School, Worcester, MA

Risk Factors (RF) Affecting Long-Term (LT) Outcomes in Older Kidney Transplant Recipients (KTR): 10 Year Outcomes

Mark R. Laftavi, MD, FICS, Surgical Director of Transplant Department at Erie County Medical Center, Buffalo, NY

SURGICAL ONCOLOGY

3:45 - 5:15 PM

Salon A&B

Moderators: Larry S. Sasaki, MD & Bharat Guthikonda, MD

Various oncologic issues are discussed in this session comprised of invited presentations and submitted abstracts. Participants will increase their knowledge as it relates to the unique complications of surgical oncology.

Featured Presentation

Prognostic Impact of Colorectal Liver Metastases and Locally Advanced CRC

Xishan Wang, MD, Professor of Surgery, The Second Affiliated Hospital of Harbin Medical University, Director, Department of Colorectal Surgery, Director, Cancer Center, Director, Colorectal Cancer Institute of Harbin Medical University, Harbin, China

Prognostic Significance of SUV Max Value at the Time of Initial Diagnostic 18F-FDG PET/CT in Patients with Pancreatic Adenocarcinoma

Alireza Hamidian Jahromi, MD, Resident of General Surgery, Department of Surgery, Louisiana State University Health Sciences Center-Shreveport, LA

Comparative Effectiveness and Survival Benefit of Liver Directed Therapy, Systemic Chemotherapy and Radiation Therapy in Stage Four HCC: A SEER-Medicare Analysis

Nader N. Hanna, MD, FICS, Professor of Surgery & Director of Clinical Operations Division of General & Oncologic Surgery, Baltimore, MD

Leiomyosarcoma Arising from the Right Lobe of the Liver: A Case Report

Jobelle Joyce Anne Baldonado, MD, Resident, Department of Surgery, Philippine General Hospital, Manila, Philippines

Accuracy of 18F-FDG PET/CT in the Diagnosis of Pancreatic Lesions: A Single Center Experience

Alireza Hamidian Jahromi, MD, Resident of General Surgery, Department of Surgery, Louisiana State University Health Sciences Center-Shreveport, LA

Scientific Abstracts

The following Abstracts are listed in alphabetical order by presenting author. They have been reproduced as submitted with limited editing.

PARAGANGLIOMA OF THE CAUDA EQUINA

W Craig Clark, MD, PhD

President and CEO, The Neurosurgical Center, Southaven, MS

Purpose: Paragangliomas are benign and slow-growing neuroectodermal tumors commonly found in the adrenal medulla, carotid bodies, and glomus jugulare. Paragangliomas of the cauda equina are relatively rare. We recently had occasion to treat two of these cases, and this provides an opportunity to review and discuss this interesting entity.

Methods: The data and information presented were derived from a retrospective review of patient medical records and radiographic studies, as well as a review of the relevant medical literature.

Results: Only a few cases of this distinctly uncommon tumor have been reported since the first case of spinal ganglioma was reported in 1970. They usually arise from the filum terminale and displace the nerve roots peripherally as they grow in size. Clinical symptoms are nonspecific, and patients most often present with features of a cauda equina syndrome, including back pain, radicular symptoms, and bladder disturbances. The pathogenesis remains uncertain, and several theories will be discussed. MRI features have been described, and will be discussed as well.

Conclusion: Recognition of this tumor is important because of its potential endocrine function and amine and peptide-containing secretory granules. Surgical resection is curative, and can be achieved with a careful microsurgical dissection and sectioning of the filum. Both of the cases reviewed showed neurological improvement following removal of the intradural mass.

THE ROLE OF HEMICRANIECTOMY IN THE MANAGEMENT OF PATIENTS WITH SPACE-OCCUPYING MCA INFARCTION

W Craig Clark, MD, PhD
President and CEO, The Neurosurgical Center, Southaven, MS

Purpose: The malignant cerebral edema that often accompanies MCA cerebral infarctions carries a mortality rate of up to 80% despite all tenets of medical management including endotracheal intubation, blood pressure control, osmotherapy, hyperventilation and barbiturate anesthesia. Decompressive hemicraniectomy with duroplasty helps to normalize ICP, restore compromised flow in the penumbra and adjacent vascular territories, and restore the midline position of the brainstem and diencephalon. This is NOT a new procedure, but it has been rarely performed because of the concern that it would result in survival with overwhelming neurological impairment, handicap and dependence. Improvements in postoperative care and the reports of the DESTINY and DECIMAL trials make it mandatory that this issue be re-examined.

Methods: This study is a retrospective review of the relevant literature, with special emphasis on the DESTINY, DECIMAL and HAMLET trials examining the role of decompressive craniectomy and duroplasty in the management of uncontrolled cerebral swelling associated with MCA cerebral infarctions.

Results: Hemicraniectomy performed within 48 hours more than doubled the chances of survival, from 29 to 78%. This absolute risk reduction of 49% was highly significant and translates into a number needed to treat of 2 to avoid one fatality. In terms of disability, hemicraniectomy resulted in an increase in the proportion of patients with resulting disability. For every 10 hemicraniectomies performed for MCA infarction, 5 patients will escape death, and at 1 year of followup 1 will have mild disability, 1 will have moderate disability, and 3 will have moderate-to-severe disability(unable to walk).

Conclusion: Patients aged <60 with MCA infacts benefit from Hemicraniectomy with duraplasty. This is true regardless of dominance of the involved hemisphere. This is true regardless of early vs. late(48 hrs) timing of surgery. This true regardless of race or sex of the patient.

SAFE AND EFFECTIVE ATLANTOAXIAL STABILIZATION WITH LONG TERM INTRA-ARTICULAR ARTHRODESIS

Doniel Drazin, MD

Department of Neurosurgery, Cedars-Sinai Medical Center Los Angeles, CA

Purpose: Stabilizing the atlanto-axial complex is a challenge due to its unique anatomy. There are several techniques which provide good fusion but they have high complication rates or sacrifice the C2 nerve root, resulting in chronic postoperative pain. We present a new C1-2 surgical technique which establishes reliable atlanto-axial fusion while sparing the C2 nerve root.

Methods: The C1-2 joint is accessed by retracting the C2 nerve root superiorly and drilling out the joint using a high-speed burr with C2 nervesparing. This is followed by meticulous placement of a C1 lateral mass screw and C2 pedicle screw. Arthrodesis is completed by packing the joint cavity with local autologous bone and/or recombinant human bone morphogenic protein.

Results: This surgical technique was used at Cedars-Sinai Medical Center in 47 surgical cases over an 11 year period. No vertebral artery injuries, C2 nerve injuries, or spinal cord injuries were noted. There were no cases of instrumentation failure. One patient required hardware removal for C1 screw impingement on the C2 nerve root, and at that point fusion had already taken place. Successful fusion was documented at a mean follow-up of 7.4 ± 3.1 months (range 3.3-80.7 months).

Conclusion: Atlanto-axial fusion using C1 lateral mass, C2 pedicle screws, C2-nerve sparing, and C1-2 intra-articular arthrodesis is safe and reliable. With high long term fusion and low complication rates, this technique is suitable for a wide variety of surgical interventions.

Scientific Abstracts

NEUROMODULATION: NEW TECHNOLOGY FOR AN OLD PROBLEM

Jeffrey Epstein, MD, FICS St. Catherine's of Siena Medical Center

Purpose: New advancements in Neuromodulation technology give physicians the ability to obtain pain relief when we were unable to achieve it in the past. The possibilities, areas of coverage, and adaptability of the new technology far exceeds what has been achieved up to this point.

Methods: Utilizing a new 32 contact stimulating system with a novel programming platform, the ability to control current with the various lead combinations available affords the physician virtually unlimited programming combinations previously impossible to obtain, even with prior multiple current controlled systems.

Results: Areas of pain that were unable to be captured with older systems are now being covered. The ability to also utilize one implantable pulse generator where two were utilized in the past is a benefit to patients, as charging and controlling become easier.

Conclusion: The new neuromodulation system offers coverage possibilities that we are only starting to realize and understand. As work and further trials continue, physicians will be able to utilize this technology with greater adaptability than what was accomplished with older systems.

A HEMIARTHROPLASTY EXPERIENCE USING A PROXIMAL FEMORAL CERCLAGE CABLE

Gerald Greenfield, Jr, MD, FICS

Private practice Orthopaedic Surgery, South Texas Spinal Clinic/ Southwest Texas Methodist Hospital, Clinical Assistant Professor University of Texas health Sciences Center- San Antonio

Purpose: A single surgeon series of 125 hemiarthroplasty procedures is reviewed. All patients were treated at the same facility; and the majority by the same operative team. The goal was to define the efficacy of the use of a cerclage cable in the treatment of femoral neck fractures by non-cemrnted hemiarthroplasty.

Methods: Hospital charts for the senior author's hemiarthroplasty procedures for a three year period we reviewed. Initial and follow-up radiographs were compared for position of the prosthetic device and any postoperative change in implant position. A combination of endo- and bipolar prostheses were implanted based on the patient's pre-injury functional ability and joint space visible on injury radiographs. Since an ingrowth stem was utilized a prophylactic cerclage cable was placed to allow press fit while avoiding proximal femoral fracture.

Results: Patient ages ranged from 60 to 93 years of age and all patients survived their hospitalization. Blood loss ranged from 50 to 500cc with an average of 105cc. We were able to achieve three point fixation of the prosthetic stem in nearly all cases. There were no cases of proximal femur fracture or of stem migration. None of the patients complained os symptoms referable to the cerclage cable.

Conclusion: Relief of hoop stresses by placement of a cerclage cable prevented proximal femoral shaft fracture while allowing stable press fit of the prosthesis and avoiding the risks of bone cement.

IMPORTANCE OF LOW-AMPLITUDE POSITIVE FACIAL NERVE STIMULATION FOLLOWING CP ANGLE TUMOR SURGERY

Bharat Guthikonda, MD, FICS

Associate Professor, Director of Skull Base Research, Department of Neurosurgery, LSU HSC Shreveport, Shreveport, LA

Purpose: Preservation of facial nerve function is crucial to a successful CP angle tumor resection. Intraoperative facial nerve monitoring is a routine component of CP angle surgery. We sought to correlate short-term and long-term facial nerve function with respect to the minimum amplitude of stimulation required to obtain facial nerve identification at the conclusion of tumor resection.

Methods: We performed a review of all patients who underwent CP angle tumor surgery between September, 2007 and August 2012. The minimum amplitude necessary to achieve positive facial nerve stimulation was noted in all cases. Facial nerve function outcomes (based on the House-Brackmann grading scale) were noted at 3 different post-operative times: immediately after surgery (post operative day 1), 1 month post-op and 6 months post-op.

Results: 30 CP angle tumor resections were performed in our study time span (24 acoustic neuroma, 5 meningioma, 1 ganglioglioma). Positive facial nerve stimulation was achieved in all cases at the conclusion of tumor resection. The minimum threshold to achieve this final positive stimulation ranged from 0.1 to 1 milliampere (mean = 0.34 ma). Immediate post operative facial function varied from HB 1 to HB 4 (mean = HB 1.94). 1 month post operative facial function varied from HB 1 to HB 3 (mean = HB 1.61). 6 month post operative facial function varied from HB 1 to HB 2 (mean = 1.05). A trend was observed in which the higher the stimulation required to obtain final positive stimulation, the worse the initial facial nerve outcome and the longer the deficit took to return towards normal

Conclusion: Our study showed that final facial nerve stimulation with low amplitude led to good facial nerve outcomes in the long term. We also noted that despite some suboptimal immediate post operative facial nerve function, excellent long-term facial nerve function was seen in all patients. Our data stresses the importance of maintaining electrical integrity of the facial nerve; we advocate doing this at all costs even if a thin layer of tumor is left adherent to the facial nerve.

Scientific Abstracts

ROLE OF INTRAOPERATIVE NEAR INFRARED INDOCYANINE GREEN VIDEOANGIOGRAPHY IN ANEURYSM SURGERY

Bharat Guthikonda, MD, FICS

Associate Professor, Director of Skull Base Research, Department of Neurosurgery, LSU HSC Shreveport, Shreveport, LA

Purpose: To assess the utility of intraoperative near infrared Indocyanine Green videoangiography (ICGA) in the surgical management of intracranial aneurysms

Methods: All patients with intracranial aneurysms treated by a single surgeon (BH) from 2008-2013 and who underwent ICGA during surgery were included in the study. Clip repositioning rate and correlation of ICGA and post-operative angiography for completeness of aneurysm occlusion and parent vessel compromise were analyzed.

Results: A total of 112 patients with 126 aneurysms were included in the study. Among these 120 aneurysms were in the anterior circulation and 6 in the posterior circulation. The clip repositioning rate was 8% (n=10). Aneurysm obliteration was observed in 95.2% (n=120) cases and correlated with post-operative angiography in all the cases. ICGA was useful in assessing the vascular anatomy in all but ophthalmic segment internal carotid aneurysms. No branch vessel occlusion was noted. There were no complications related to the use of ICGA.

Conclusion: ICGA is an excellent technique in assessment of clip placement and aneurysm occlusion. It correlates well with post-operative angiography and carries little technique related morbidity. Its role during surgery for ophthalmic segment aneurysms is not well defined due to complex anatomy of the aneurysm and limited exposure.

ENDOSCOPIC TRANSFORAMINAL APPROACH FOR DISC HERNIATION AND STENOSIS

Lucia Zamorano, MD, FICS

Professor of Neurological Surgery, William Beaumont Oakland University School of Medicine, Birmingham, MI

Purpose: Minimally invasive spine surgery has become extremely important in the management of disc herniation and stenosis. Transforaminal approach has been used to for a percutaneous intradiscal surgery . We present a technique that uses an endoscopic transforaminal approach to reach the spinal canal to treat disc herniations, intraforaminal, extruded herniations, foraminoplasty .

Methods: Technique: patients were positioned in lateral decubitus with a roll placed under the flank. The Joimax TESSYS system was used. Using a 25cm 18 gauge needle and discogramm was done. Sequential reamers were used to enlarge the foramen by removing the ventral aspect of the superior facet. The beveled working cannula, 8mm was placed over the dilators. Rotating of the beveled canula and the endoscope allowed visualization of the annulus, exiting and traversing nerve root. The beveled end of the working canula was also used as a nerve root retractor. The diamond drill was used to enlarge the foramen. Forceps and were used to grasp fragments of disc. A flexible end bipolar coagulator was used for hemostasis and exploration of

the canal and epidural space. All patients were monitored with intraoperative EMG. A transforaminal epidural steroid injection was done to reduce postoperative nerve irritation.

Results: We present our experience on the first 25 cases. All patients responded well during the immediate postoperative period. No complications were observed. Follow up is schedule at 3, 6 and 12 months from procedure.

Conclusion: Endoscopic transforaminal approach to herniated disc and stenosis has proven to be safe and effective. Advantages of the approach includes small incision, maintained spinal stability, no scar formation, decreased risk of complications in patients with prior surgeries including fusion. Future advances of instrumentation will allow performance of placement of cages and fusion to bring endoscopy as a full adjuvant to spinal surgery.



Social Activities

4TH ANNUAL AANOS FUNDRAISING EVENT AND AWARDS DINNER

Friday 7:00-10:00 PM Pensacola Room

The 4th Annual AANOS Fundraising Event and Awards Dinner will feature an elegant dinner, award presentations, and an engaging presentation by **Ingemar Davidson**, **MD**, Professor of Surgery, Division of Surgical Transplantation, University of Texas Southwestern Medical Center, Dallas, TX and American Airlines pilot **Billy Nolan**, who will present; **Safety in the OR: Lessons from the Cockpit**

Price: \$100 per person. Check with Registration staff for on-site availability.

WELCOME RECEPTION

Wednesday 6:00-7:00 PM Pensacola Room Our first evening in Jacksonville begins with a cocktail reception. Join us as we kick off our very special 75th annual meeting; reconnect with old friends and meet members you may not have encountered before. 75 years wouldn't happen without our members, join us as we celebrate your commitment to the College.

JACKSONVILLE "TOP TO BOTTOM" WALKING TOUR
Thursday 2:00-3:45 PM Meet at Registration Desk

Your professional tour quide will meet you to show you Jacksonville from sky line views to beneath the city streets. Once known as "Cowford", the picturesque city along the river has grown to be the largest city in land area in the continental United States. Hear how Jacksonville rose from the ashes to emerge as an architectural gem of the South. The city was also the first Hollywood for movie making before the talkies. The walking tour goes inside seven buildings including an art gallery. The "Top" is an amazing panoramic view from the tallest skyscraper while the "Bottom" is the subterranean city with secret underground tunnels and bank vaults. Hear the exploits of past Presidents, great American architects, and the silent movie stars as we walk through time. The award-winning tour is rated EXCELLENT by Trip Advisor and was featured on PBS television. Price: \$20, Check with Registration staff for on-site availability.

St. Augustine Excursion

Friday 9:30 - 3:00pm Meet at Registration Desk During your trip to St. Augustine your tour director will weave a tapestry of stories from the Ponce de Leon discovery period, the pirate days of Sir Francis Drake, the Spanish and English colonial years, and the Victorian Flagler era. Before you know it you'll be stepping onto the cobblestones of St. George Street.

You'll have an opportunity to shop and explore the historic district on your own. Alternatively, you may want to stay with the tour guide to take a more intimate look inside the historic houses or magnificent hotels containing the stained glass work of Louis Comfort Tiffany. Your guide creates an interactive tour atmosphere which is fun for everyone. **Seats are VERY limited Price: \$90 Check with Registration staff for on-site availability.**

United States Section Convocation & Awards Ceremony

Saturday 6:30 PM Salon D

All attendees, families, friends and guests are invited to attend this hallmark event, the 75th Annual Convocation of the US Section. Brimming with splendor and pageantry, this impressive ceremony includes the formal induction of New Fellows and the presentation of several special awards. Join us in this celebration of the College, all its Fellows, and their accomplishments.

New Fellows Reception

Saturday 7:30 PM Prefunction

Immediately following the Convocation and Presidential Recognition Ceremony, this reception will afford you the opportunity to meet your National Section and International Officers, provide you with the opportunity to meet your newest colleagues from coast to coast, and of course, honor our incoming President and award winners. All attendees are encouraged to attend.

GALA DINNER

Saturday 8:30 PM Salon A&B

We end our meeting and our week together as we started it; in Fellowship, join us as we come together for one last event to mark our Diamond Anniversary; 75 years of Member Driven success before we bid farewell until next year. We have some wonderful entertainment planned to celebrate this milestone of scientific education and fellowship. Black Tie attire is optional. The three course dinner will feature filet with shrimp scampi for the entree. There will also be a vegetarian options available. **Price: \$125 per person. Check with Registration staff for on-site availability.**



General Meeting Information

Cancellation Policy

The cancellation deadline was May 24, 2013. Refunds will be issued, minus a \$50 processing fee, upon receipt of written notification via fax or mail. Verbal or written cancellations after May 24, will not be honored. Please allow four to six weeks after the meeting for your refund.

Continuing Medical Education (CME) Information

CME Program Evaluation Forms will be distributed prior to the commencement of each day's educational session.

To receive CME Credit, you must complete a Program Evaluation Form for each day of educational sessions you attend.

Program Evaluation Forms must be completed and returned to the Meeting Registration Desk prior to the conclusion of the conference. You may also mail your forms to:

ICS-US Headquarters Department of CME 1516 North Lake Shore Drive Chicago, IL 60610-1694

The deadline for submission of all CME Program Evaluation forms is Tuesday, July 9, 2013.

Meeting Registration

Everyone attending or participating in educational sessions, including faculty, is expected to register for the meeting.

Spouse/Guest Supplement

Anyone attending the meeting who is not a registered attendee, should be registered as a spouse/guest. The \$150 fee covers the costs such as lunches, breakfasts and coffee breaks etc.

Airport Transportation:

GO AIRPORT SHUTTLE:

904-353-8880. \$20 per person and \$8 each additional person. Upon your arrival at the Jacksonville International Airport, please take the escalator down to baggage claim. Please retrieve your luggage, and proceed directly outside to the "GO Shuttle Booth" located at pole number #4 across the lane towards the parking garage. You will then be directed to your shuttle.

GATOR CITY TAXI:

904-222-2222, approximately \$28 each way from the airport

Attendee Check-In

Pre-registered attendees may retrieve their conference materials from the ICS-US Meeting Registration Desk located on the second floor in the **Pre-Function area of the Omni Jacksonville**. The Meeting Desk will be staffed throughout the meeting as follows.

 Wednesday, June 5
 8:00-4:00 pm

 Thursday, June 6
 7:00 am-4:00 pm

 Friday, June 7
 7:00 am-4:00 pm

 Saturday, June 8
 7:00 am-4:00 pm

Attire

Business casual attire is recommended in educational sessions. Casual attire is appropriate for most social events. Evening attire is recommended for the Convocation and New Fellows Reception. Black tie is optional for the Gala Banquet.

Language

The official language of this conference is English, and all sessions and events shall be conducted in English.

Omni Select Guest Gold Level Benefits

Complimentary Wi-Fi Service
Complimentary Morning Beverage Delivery
Complimentary Pressing (2 Items)
Choice Of Free Nights Or Airline Miles
Complimentary Bottled Water (Night Of Arrival)
Eco-Friendly Housekeeping Options
Complimentary Shoe Shine
Exclusive Member-Only Offers
Express Check-In And Check-Out
Complimentary Newspaper Of Your Choice Daily
Customized Room Preferences
Evening Housekeeping Service, Including Turndown

Attendees may enroll at the: Omni Registration Desk

Parking

Valet parking (\$20) with unlimited in/out privileges City self parking (\$12) does not include in/out privileges Enterprise car rental office located on-site

Speaker Prep Area

A laptop computer has been set-up near the registration area. Speakers who did not submit their presentations in advance of the meeting should load their powerpoint files the day before their presentation. Speakers may also use this laptop to preview/review their slides.

Special Needs and Questions

If you have any special needs that must be addressed to ensure your comfort and/or if you require information not listed in this brochure, please see the ICS-US Staff at the Registration Desk during the hours listed above. Every effort will be made to facilitate your request.

Tickets/Workshop Registration

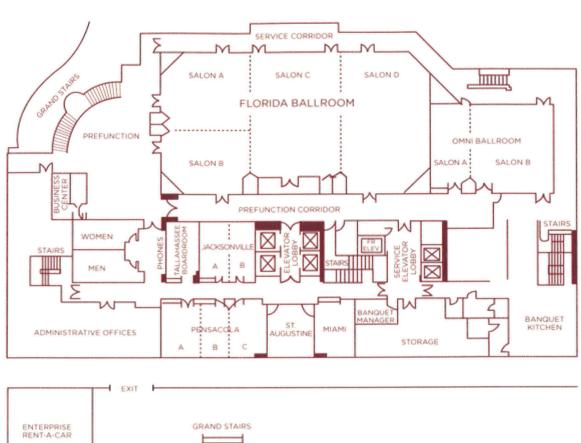
Tickets for social events and workshop registration MAY be available onsite on a VERY limited basis. However, staff is not responsible for events that are sold-out/unavailable or cancelled. Check with the Meeting Registration Desk as soon as possible.

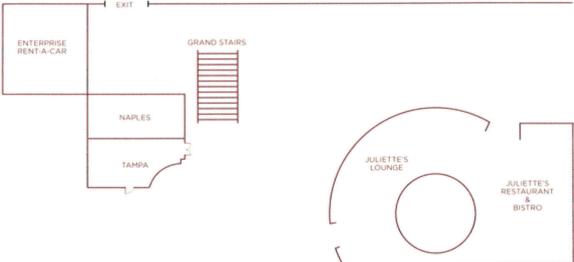
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Jacksonville Floor Plans





Schedule at a Glance

WEDNESDAY

JUNE 5
7:00-8:30am
Officer Breakfast
Omni Ballroom A

8:00-4:00pm
Meeting Registration
PREFUNCTION

8:00-8:30AM
Endowment Fund, Board
of Trustees Meeting
Pensacola Room

8:30-12:30PM
US Section Standing
Committee Meetings
PENSACOLA ROOM

12:30-1:30PM Officer Luncheon ATRIUM

1:30-3:00PM
Board of Regents Meeting
OMNI BALLROOM A&B

2:00-3:00 PM
Alliance Board of Directors
& General Membership
Meeting
JACKSONVILLE ROOM

3:00-5:00PM
Executive Council &
House of Delegates
Joint Meeting
OMNI BALLROOM A&B

7:00-8:00 PM
Welcome Reception
PENSACOLA ROOM

THURSDAY
JUNE 6
7:00-4:00pm
Meeting Registration
PREFUNCTION

7:00-8:30am
Continental Breakfast
FLORIDA BALLROOM SALON C

8:00-8:50AM
Opening Ceremony and
Special Lecture
FLORIDA BALLROOM SALON A-B

8:50-10:20 AM
MANAGEMENT OF
PORTAL HYPERTENSION
FLORIDA BALLROOM SALON A-B

10:30-Noon
Late Complications
Following Repair of
Congenital Malformations
FLORIDA BALLROOM SALON A-B

NOON-1:30 PM LUNCH PRESENTATION FLORIDA BALLROOM SALON C

1:30-2:00 PM
DR. ARNO A. ROSCHER
ENDOWED LECTURE
FLORIDA BALLROOM SALON A-B

2:00-3:30 PM
Vascular Surgery & the
Diabetic Foot
FLORIDA BALLROOM SALON A-B

2:00-3:45 PM

JACKSONVILLE "TOP TO BOTTOM" WALKING TOUR

MEET AT REGISTRATION DESK

3:30-3:45 PM
Integrative Multi-Disc.
Management of
Peripancreatic Fluid
FLORIDA BALLROOM SALON A-B

4:00-5:30 PM
Min. Invasive Bariatric Surgery Technical Options
FLORIDA BALLROOM SALON A-B

FRIDAY
JUNE 7
7:00-4:00pm
Meeting Registration
PREFUNCTION

7:00-8:30AM
Continental Breakfast
FLORIDA BALLROOM SALON C

8:00-9:45am Annual Research Scholarship Competition Florida Ballroom Salon A-B

9:00-3:00pm St. Augustine Tour Meet at Registration Desk

9:00-3:00pm
NEUROSURGICAL AND
ORTHOPAEDIC PLATFORM
PRESENTATIONS
OMNI BALLROOM A&B

10:00-Noon Annual Interactive Ethics Session Florida Ballroom Salon A-B

NOON-1:30PM LUNCH PRESENTATION FLORIDA BALLROOM SALON C

1:30-2:00pm Keynote Lecture Florida Ballroom Salon A-B

2:00-3:30pm
Integrative Multi-Disc.
Management of
Peripancreatic Fluid
FLORIDA BALLROOM SALON A-B

2:00-5:00PM Seeing & Sticking with Sound PENSACOLA ROOM

3:00-5:00pm

AANOS BOARD OF

DIRECTORS MEETING

JACKSONVILLE ROOM

3:45-5:15pm Management of Mediastinal Pathology FLORIDA BALLROOM SALON A-B

7:00PM
4th Annual AANOS
Fundraising Event and
Awards Dinner
PENSACOLA ROOM

SATURDAY
JUNE 8
7:00-4:00pm
Meeting Registration
PREFUNCTION

7:00-8:30am
Continental Breakfast
FLORIDA BALLROOM SALON C

8:00-9:45AM
CHALLENGES FOR THE ACUTE
CARE SURGEON
FLORIDA BALLROOM SALON A-B

9: 00-Noon
CHALLENGES IN ABDOMINAL
WALL RECONSTRUCTION
TAMPA ROOM

9:00-Noon
Neurosurgical and
Orthopaedic Platform
Presentations
Omni Ballroom A&B

10:00-Noon ROBOTIC SURGERY & OTHER TECHNOLOGY ADVANCEMENTS FLORIDA BALLROOM SALON A-B

NOON-1:30PM LUNCH PRESENTATION FLORIDA BALLROOM SALON C

1:30-2:30pm Honored Lectures Florida Ballroom Salon A-B

2:30 -3:45pm
TRANSPLANTATION IN THIRD
MILLENIUM
FLORIDA BALLROOM SALON A-B

3:45-5:15pm Surgical Oncology Florida Ballroom Salon A-B

6:30PM
US Section Convocation
& Awards Ceremony
FLORIDA BALLROOM SALON D

7:30PM
New Fellows Reception
PREFUNCTION

8:30pm Gala Dinner FLORIDA BALLROOM SALON A-B

EXHIBIT SHOW

Representatives from several companies will be present in Florida Ballroom Salon D
Thursday -Friday from 8:00-4:00pm, and Saturday from 8:00- Noon.
Please take a moment to visit these individuals whose support enhances our meeting.