

### 2015 Annual Scientific Assembly October 29-31, 2015

Baytowne Conference Center - Destin, Florida

## Syllabus and Program





Southern Medical Association is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. In November 2011, the ACCME awarded SMA "accreditation with commendation" for 6 years as a provider of continuing medical education for physicians.

#### **CONTENTS**

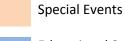
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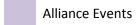
#### **SMA 2015 Annual Scientific Assembly**

#### **SCHEDULE AT A GLANCE**

Includes SMA and SMA Alliance (SMAA) Events All events take place in the Baytowne Conference Center

Thursday, October 29, 2015				
1:00-5:00 pm	Registration Open	Magnolia Ballroom Foyer		
1:00-5:00 pm	SMAA Exhibit Set-up	Magnolia Ballroom DEF		
1:00-5:00 pm	SMAA Raffle Drop-off (at SMA Registration Desk)	Magnolia Ballroom Foyer		
4:00-6:00 pm	Opening Educational Session	Magnolia Ballroom BC	Page 12	
6:00-7:30 pm	SMA/SMAA Presidents' Welcome Reception	Baytowne Conference Center Foyer	Page 2	
Friday, October 3	30, 2015			
6:30 am-5:30 pm	Registration Open	Magnolia Ballroom Foyer		
6:30-7:00 am	CME Session Continental Breakfast	Magnolia Ballroom DEF		
6:30 am-5:30 pm	SMA/SMAA Hospitality Area Open View Exhibits and Posters, Visit Raffle Area SMAA Exhibits and Raffle Grand Opening at 9:00 am	Magnolia Ballroom DEF		
7:00-8:00 am	CME Early Bird Session	Magnolia Ballroom BC	Page 13	
8:00 am-5:30 pm	CME Educational Sessions	Magnolia Ballroom BC	Page 14	
10:00-10:15 am	CME Session Break - Visit Hospitality Area, Exhibits, Posters, and Raffle	Magnolia Ballroom DEF		
12:30-1:30 pm	CME Lunch Session	Magnolia Ballroom BC	Page 18	
1:00-4:00 pm	SMAA General Session	Magnolia Ballroom A	Page 30	
3:15-3:30 pm	CME Session Break – Visit Hospitality Area, Exhibits, Posters, Raffle	Magnolia Ballroom DEF		
3:30-4:30 pm	How to Successfully Publish Your Manuscript	Magnolia Ballroom DEF	Page 20	
Saturday, Octobe	er 31, 2015			
6:30 am-1:00 pm	Registration Open	Magnolia Ballroom Foyer		
6:30-7:00 am	CME Session Continental Breakfast	Magnolia Ballroom DEF		
6:30 am-1:00 pm	SMA/SMAA Hospitality, Exhibits, Posters Raffle Closed	Magnolia Ballroom DEF		
7:00-8:00 am	CME Early Bird Session	Magnolia Ballroom BC	Page 23	
8:00 am-1:00 pm	CME Educational Session	Magnolia Ballroom BC	Page 24	
9:00-11:15 am	SMAA Post-Convention Meeting	Azalea I	Page 30	
10:00-10:30 am	CME Session Break - SMA/SMAA Hospitality, Exhibits, Posters, Raffle Winners Announced	Magnolia Ballroom DEF		
11:30 am-12:00 pm	SMA Presidential Installation	Magnolia Ballroom BC	Page 2	
1:15-2:30 pm	SMAA President Installation and Awards Luncheon	Camellia I-II	Page 30	





#### **ACKNOWLEDGMENT**

## The Southern Medical Association gratefully acknowledges the following sponsors of SMA's 2015 Annual Scientific Assembly







#### **SPECIAL EVENTS**

### Thursday, October 29, 6:00-7:30 pm, SMA/SMAA Welcome Reception Baytowne Conference Center Foyer

Sponsored in part by Medicus Insurance Company

Join SMA and the SMA Alliance as we kick off this year's Annual Meeting with light hors' douvres, fellowship, and fun!

### Saturday, October 31, 11:30 am-12:00 pm, SMA 2016 Presidential Installation Baytowne Conference Center – Magnolia Ballroom BC

Join us as the 2015-2016 SMA President, Benjamin M. Carmichael, MD is installed and awards are presented to the top 3 oral abstract presenters.

### Saturday, October 31, 1:15 -2:30 pm, SMAA President Installation & Awards Luncheon Baytowne Conference Center – Camellia I-II

\$75 per person

Join us for this auspicious event where the 2015-2016 SMA Alliance President will be installed and winners of this year's top Alliance Project Awards and the 2015 Medical Student Scholarship winner will be honored.

### Saturday, October 31, 6:00-8:00 pm, TRICK OR TREAT STREET The Village of Baytowne Wharf

Free Event

Calling all ghouls and goblins to the Village of Baytowne Wharf! Trick or treat through the Village and visit merchants for your favorite Halloween treats from 6:00-8:00 pm. The DJ will be playing frightening good tunes on the Events Plaza stage, and spooky fireworks will light up the sky at 8 pm!

EDUCATIONAL SESSION SCHEDULE						
	All events take place in the Baytowne Conference Center, Magnolia BC					
Thursday, October						
2:00-4:00 pm	Registration – Magnolia Foyer  Welcome, Announcements and Opening Remarks					
4:00-4:15	Mark S. Williams, MD, MBA, JD, CPE, SMA President, 2015					
	Clement P. Cotter, Jr., MD, MBA, Assembly Chair, 2015					
4:15-6:00	Telehealth: The Future of Health Care - Kristi Henderson, DNP, CFNP, CACNP, FAEN					
Friday, October 30,	2015					
6:30 am-5:00 pm	Registration – Magnolia Foyer					
6:30-7:00	Continental Breakfast – Magnolia Ballroom DEF					
7:00-8:00 – Early Bird	Cyber Liability, Teddy Gillen					
8:00-9:00	Sickle Cell Disease: Pathophysiologic Concepts and Expert Guidelines for Improved Patient Outcomes, Deniz Peker, MD and Lawrence A. Williams, MD					
9:00-10:00	Contraception: Past, Present and Future, Michael Thomas, MD					
10:00-10:15	Break – Visit Hospitality Area to View Posters, Exhibits and Raffle					
10:15-11:15	A System Based Approach to Managing Diabetic Foot Infection, Gregory L. Bearden, MD, FACS					
11:15-12:15	Disaster Planning and Response Strategies from the Pediatric Perspective, Steven T. Baldwin, MD					
12:15-12:30	Break – Pick up Box Lunches					
12:30-1:30 - Lunch Session	Ethical Challenges in the Care of Patients with Alzheimer's and Other Dementias, G. Richard Holt, MD, MSE, MPH, MABE, D BE					
1:30-1:45	Break – Visit Hospitality Area to View Posters, Exhibits and Raffle					
1:45-3:15	Abstract Presentations					
1:45-1:50	Introductions and Overview, Clement P. Cotter, Jr., MD, MBA					
1:50-2:00	HSV Pneumonitis in a Patient with Combined Pulmonary Fibrosis and Emphysema, Cathlen S. Delva, MD, MPH					
2:00-2:10	Stenotrophomonas Maltophilia: Culprit or Colonizer?, Jillian Norton, DO					
2:10-2:20	Palliative Care Options for Patients with End Stage Renal Disease Declining Hemodialysis, Sally Mathew, DO					
2:20-2:30	A Case Report of Benzocaine-induced Methemoglobinemia: A Life Threatening Complication					
	After a Transesophageal Echocardiogram (TEE), Fathia Alfakeri, MD Smartphone Application for Congestive Heart Failure Patients: A Pilot Study,					
2:30-2:40	Rebecca Hayes, MD					
2:40-2:50	Prognostic Value of Vitamin D Deficiency as an Outcomes Predictor in a Large Stable Cardiovascular Cohort Undergoing Elective Coronary Evaluation, Naveed Syed Iqbal, MD					
2:50-3:00	Lipoma or Sarcoma: Caution is Warranted, Gillian Jones, DO					
3:00-3:10	Role of Intraoperative Crystalloids on Hospital Length of Stay Following Esophageal Resection: A Retrospective Study in 76 Consecutive Patients, Morgan T. Smith, BA					
3:10-3:15	Questions & Answers					
3:15-3:30	Break – Visit Hospitality Area to View Posters, Exhibits and Raffle					
3:30-4:30	How to Successfully Publish Your Manuscript, G. Richard Holt, MD, MSE, MPH, MABE, D BE					
3:30-4:30	Integrating Psychiatry in Primary Care: Telepsychiatry and Beyond, Tom Milam, MD, MDiv, FAPA					
4:30-5:30	Obesity: Evidence and Lessons from the Baby Boomer Generation, Dana E. King, MD, MS					
5:30	Adjourn					

Saturday, Octobe	r 31, 2015
6:30 am-1:00 pm	Registration – Magnolia Foyer
6:30-7:00	Continental Breakfast – Magnolia Ballroom DEF
7:00-8:00 – Early Bird	Marijuana Myths and Science 2015, Paula O. Pell, MD, FACPE, FAAP
8:00-9:00	Update on Prevention for Primary Care, Dana E. King, MD, MS
9:00-10:00	Abstract Presentations
9:00-9:12	Dermatologic Mimicry – Vancomycin Induced Fixed Drug Eruption, Sahil Rao, MD
9:12-9:24	Angiosarcoma of Tongue – A Case Report of an Extremely Rare Tumor, Devam Sheth, MD
9:24-9:36	Telomere Rejuvenation and Longevity, C. Norman Shealy, MD
9:36-9:48	Extensive Chest Wall Defect Reconstruction with Titanium Rib Plates, Chadrick E. Denlinger, MD
9:48-10:00	How an Episode of Urinary Retention Gives Us Our Modern Understanding of the Universe, Lawrence M. Wyner, MD
10:00-10:30	Break
10:30-11:30	Medical Ethics and Physician-Patient Encounters, Bradford S. Dunkin, MHA
11:30-12:00	SMA Presidential Installation
12:00-1:00 pm	Hypertension Update 2015, Brian N. Batson, MD
1:00	Assembly Adjourns

#### **ASSEMBLY OVERVIEW**

SMA is committed to meeting the needs of physicians and the healthcare team through multispecialty educational sessions, and strives to provide a mix of education, service and camaraderie that empowers members to achieve both personal and professional goals. SMA's Scientific Assembly has always been its "premier" event, providing an interdisciplinary forum to enhance the sharing of information, knowledge and experience to advance the practice of medicine, and an opportunity for all generations of physicians to interact and learn from each other. The 2015 Annual Scientific Assembly has been designed and developed to meet the ongoing continuing education needs of its members and constituents. The format includes sessions that will address, through invited guest speakers and abstract presentations, both clinical and non-clinical topics. This educational activity will enhance the ability of healthcare professionals to better treat their patients, while fulfilling credentialing requirements. Assembly sessions are designed to reduce gaps and increase knowledge in the following areas, identified by needs sources:

- Bioethics & Medical Education
- Women's & Children's Health
- Medicine & Medical Subspecialties
- Mental Health
- Surgery & Surgical Subspecialties
- Quality Health Care, Patient Safety, & Best Practices
- Public Health & Environmental Medicine
- Emergency & Disaster Medicine

#### **LEARNING OBJECTIVES**

Through a combination of evidence-based didactic lectures, case presentations and abstract presentations, attendees will have the opportunity to gather and exchange information regarding current and emerging treatment options for common patient complaints. After participating in this activity, participants should have increased knowledge and have developed strategies to take back to practice to:

- Identify diagnostic and management options for a variety of commonly encountered conditions such as obesity, sickle cell disease, and hypertension
- Adapt a reasonable set of guidelines for disease prevention and health promotion in patients in the most common situations encountered in primary care
- Recognize the usefulness of technology, including telemedicine, telepsychiatry services, and standardization of care with the use of EMR
- Describe risk management strategies related to medical ethics and physician-patient encounters
- Review disaster risk assessment, planning and responses from the pediatric perspective and review the preparedness of their institution to deal with pediatric disaster victims.

#### **TARGET AUDIENCE and SCOPE**

Sessions presented will be of benefit to physicians, physician assistants, and nurse practitioners specializing or certified in the areas of internal medicine, family or general medicine, geriatric medicine, emergency medicine, pediatrics and adolescent medicine, mental health, and obstetrics and gynecology. Other specialists may also benefit from the wide array of topics.

#### ACCREDITATION and CME CREDIT



Southern Medical Association is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. In November 2011, SMA was resurveyed by the ACCME and awarded **Accreditation with Commendation** for 6 years as a provider of continuing medical education for physicians. ACCME accreditation seeks to assure the medical community and the public that Southern Medical Association provides physicians with relevant, effective, practice-based continuing medical education that supports U.S. health care quality improvement.

#### American Medical Association Physician's Recognition Award

Southern Medical Association designates this Live activity for a maximum of **16.25** *AMA PRA Category* 1 *Credits*™. Physicians should claim only the credit commensurate with the extent of their participation in this activity.

#### **American Academy of Family Physicians**

This Live activity, SMA Scientific Assembly, with a beginning date of 10/29/2015, has been reviewed and is acceptable for up to 16.25 Prescribed credits by the American Academy of Family Physicians. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

**Healthcare Professionals** – A certificate of attendance will be provided to all attending healthcare professionals.

#### **CME REQUEST FORM and EVALUATION**

Post-conference, remember to visit this link:

https://www.surveymonkey.com/r/2015\_AM\_CME\_Evaluations to complete your evaluation and CME request. You will also receive an email with instructions after the meeting. Your certificate will be processed and e-mailed approximately two weeks after you have completed the documentation on-line, based on the lectures you attend.

#### **DISCLAIMER**

The primary purpose of this CME conference is educational. Information presented and techniques discussed are intended to inform physicians of medical or practice-related knowledge, clinical procedures, and experiences of physicians willing to share such information with colleagues. It is recognized that a diversity of professional opinions exists in the contemporary practice of medicine which influence the selection of methods and procedures. The views and approaches of faculty are offered solely for educational purposes. The Southern Medical Association disclaims any and all liability for injury or other damages to any individual attending this CME conference and for all claims, which may result from the use of the information presented at this conference.

#### **DISTINGUISHED FACULTY**

#### **Assembly Chair**



#### Clement P. Cotter, Jr., MD, MBA

Dr. Cotter is a private practice Plastic & Reconstructive Surgeon with over 25 years of experience. He is a member of the American Society of Plastic Surgeons and is Board Certified by the American Board of Plastic Surgery, Inc. He practices at Shelby Ambulatory Surgery Center and Shelby Baptist Medical Center where he was Chief of the Department of Surgery from 2007 through December 2012. Dr. Cotter is also a Member of the Board of Trustees for

the Baptist Health System, and is currently a member of the Governance Committee and Chairs the Quality & Mission Committee where improvements in patient safety, clinical quality, and patient perception are integrated into the mission of the Baptist Health System.

#### **Distinguished Faculty**



#### Steven T. Baldwin, MD

Dr. Baldwin works clinically as a Pediatric Emergency Medicine physician at Children's Hospital of Alabama. He is a faculty member at the University of Alabama at Birmingham. He completed medical school at Albany Medical College and training in Pediatrics, Pediatric Emergency Medicine and Pediatric Critical Care Medicine at UAB. He also received his MBA degree from Auburn University and Healthcare Quality Science training at UAB. His other professional interests include disaster medicine, healthcare informatics, medical education and ED

administration. He is a member of the SMA.



Bryan N. Batson, MD

Dr. Batson joined Hattiesburg Clinic in 2003 and was named Director of the Hypertension Clinic in 2005. He is certified by the American Society of Hypertension as a Specialist in Clinical Hypertension, and he received one of 10 grants from the American Medical Association in 2009 to investigate the Best Practices in Managing Hypertension. In 2014, Hattiesburg Clinic's Hypertension Clinic was named one of only eight non-academic Centers of Excellence in the United States. Dr. Batson remains active in research and teaching, currently

serving as principal investigator in four clinical trials and as associate faculty for the College of Osteopathic medicine at William Carey University and in the Department of Physician Assistant Studies at Mississippi College. In addition to his clinical practice, Dr. Batson sits on the Board of Directors of Hattiesburg Clinic, as well as the Quality Care Improvement Committee. He currently serves as the Chief Medical Information Officer and EHR Director for Hattiesburg Clinic.



#### Gregory L. Bearden, MD, FACS

Dr. Bearden is a private practice General Surgeon practicing at Baptist Medical System-Princeton in Birmingham, Alabama and serves as a teaching faculty member for the affiliated surgical residency program. Dr. Bearden completed his surgical training at Baptist in 2006 after graduating from the University Of Alabama School Of Medicine in 2001. He is board certified in general surgery, a fellow of the American College of Surgeons, and a member of the American Society of Breast Surgeons. He currently chairs the Surgery Clinical Programs and Quality

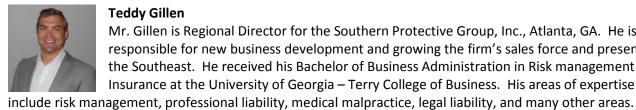
Committee of the Baptist Physicians Alliance and directs the Diabetic Foot Task Force quality improvement project for the Baptist Medical System.



#### **Bradford Dunkin, MHA**

Mr. Dunkin currently serves as the designated Sr. Risk Management Specialist for parts of southern California as well as the central region of the United States for the NORCAL group of companies. He has been with NORCAL Mutual Insurance Company as a Risk Management Specialist for twenty years. Brad received his undergraduate Bachelor of Arts degree from the College of William and Mary in Virginia, Williamsburg, VA, and his Masters degree in health care administration from the Medical College of Virginia, Richmond, VA. For over twenty years Brad

has spent his career working in the professional liability field providing consultation services to hospitals, physicians and clinics on a multitude of risk management topics due to the ever changing world or healthcare risk management. He spends a great deal of time consulting on physician practice risk management that often assists physicians in improving office practice systems, thus reducing liability exposures and resulting medical malpractice claims. He also participates in developing and delivering Continuing Medical Education programs to the physician community.



#### **Teddy Gillen**

Mr. Gillen is Regional Director for the Southern Protective Group, Inc., Atlanta, GA. He is responsible for new business development and growing the firm's sales force and presence in the Southeast. He received his Bachelor of Business Administration in Risk management and Insurance at the University of Georgia – Terry College of Business. His areas of expertise



#### Kristi Henderson, DNP, CFNP, CACNP, FAEN

Dr. Henderson is the Chief Telehealth & Innovation Officer for the University of Mississippi Medical Center (UMMC). She holds dual appointments in the School of Medicine and School of Nursing at UMMC. Dr. Henderson has spent the last twenty years of her career as an administrator, educator, innovator, researcher and clinician. Her focus has primarily been on improving and coordinating the health care delivery system with the utilization of technology (telehealth) and Nurse Practitioners for improved access and coordination of care. She has led the development of a statewide Telehealth Program which is recognized as a top telehealth

program in the U.S. Nationally recognized, Dr. Henderson has testified to the White House Domestic Policy Council and made numerous presentations on telehealth across the country. Dr. Henderson is regularly consulted by other state health care leaders, politicians, physicians, nurses, journalists and members of the academic community. She received her Doctorate of Nursing Practice degree from the University of Alabama at Birmingham, her master's degree in nursing, from the Mississippi University for Women, and her bachelor's degree in nursing from Mississippi College. She maintains national certification as a family and acute care nurse practitioner.



#### G. Richard Holt, MD, MSE, MPH, MABE, D BE

Dr. Holt is a professor emeritus at the University of Texas Health Science Center at San Antonio, on the clinical faculty at the Brooke Army Medical Center, Fort Sam Houston, Texas, and teaches at the UT School of Public Health. He is Editor-in-Chief of the Southern Medical Journal. His public health interests are in global health and international medicine, including bioterrorism and disaster medicine. He also teaches bioethics to healthcare professionals.



Dana E. King, MD, MS

Dr. King is Professor and Chair of WVU's Department of Family Medicine, and is also a Co-Director of the WV Clinical Translational Science Institute (WVCTSI) and founding Co-Director of the WV Practice Based Research Network (WV PBRN). He is originally from Charleston, WV. He received his bachelor's degree in Chemistry from Miami University in Ohio and medical degree from the University of Kentucky's College of Medicine. Dr. King completed a

Family Practice Residency at the University of Maryland and a Faculty Development Fellowship in Family Medicine at the University of North Carolina. After several years in practice, Dr. King went on to receive his Master's degree in Clinical Research from Medical University of South Carolina. Dr. King served as Vice Chair of the Department of Family Medicine at Medical University of South Carolina prior to coming to WVU. Nationally, he is the newly appointed Secretary/Treasurer of the North American Primary Care Research Group (NAPCRG) and has been recognized as one of the "Best Doctors in America" since 2001. He has numerous peer-reviewed publications and has presented at many local, national and international conference.



#### Thomas R. Milam, MD, MDiv, FAPA

Dr. Milam is a Board Certified Psychiatrist who is an Assistant Professor of Psychiatry and Behavioral Medicine at the Virginia Tech Carilion School of Medicine and Carilion Clinic. He also serves as Psychiatry Clerkship Director for medical students training in Psychiatry. Dr. Milam is a sought-after speaker in the area of Spirituality and Health. He actively attends international conferences and continues to write, teach, speak, and explore research interests in diverse areas such as mental healthcare delivery, telepsychiatry/telemedicine,

spirituality and health, psychopharmacology, maternal-fetal mental health, and the biological/genetic basis of mental illness. He hopes to continue being involved in helping shape health care policy in the United States and worldwide, particularly in regard to mental health care.



#### Deniz Peker, MD

Dr. Peker is Assistant Professor of the Department of Pathology and Associate Residency Program Director and Director of Anatomic Pathology Residency at the University of Alabama at Birmingham. She received academic training at Moffitt Cancer Center, one of the largest comprehensive cancer centers, and her research experience has provided an excellent background in pathology and malignant hematology with molecular genetics. During her

residency, she received several academic awards particularly for studies in lymphomas. During her academic career for the last few years, she has continued building on previous training and experience, and has been a collaborator in multiple studies targeting both benign and malignant hematologic disorders including Castleman disease. Dr. Peker's long term research interests involve the development of a comprehensive understanding of key biological factors in evolvement of cancer of lymphoid tissue, blood and bone marrow including myeloma, leukemia and lymphoma as well as benign hematopoietic stem cell disorders i.e. PNH, aplastic anemia.



#### Paula Oliver Pell, MD, FACEP, FAAP

Dr. Pell is an Emergency Medicine Staff Physician for All Children's Hospital in St. Petersburg, Florida and a Clinical Assistant Professor of Pediatrics at the University of South Florida. She received her MD degree from Indiana University, and her clinical experience includes over 35 years in emergency medicine. Dr. Pell is a Past President of the Southern Medical Association, serving in 2007-2008.



#### Michael A. Thomas, MD

Dr. Thomas is Professor of Obstetrics and Gynecology and Chief of the Division of Reproductive Endocrinology and Infertility at the University of Cincinnati College of Medicine. Dr. Thomas has been named one of the Best Doctors in America for nine consecutive years, an honor bestowed on 4 percent of physicians in the United States. He graduated from the University of Illinois College of Medicine and was a resident at Wayne State University in Detroit. Dr. Thomas completed a fellowship in Reproductive Endocrinology and Infertility at the University of Cincinnati College of Medicine and is board

certified in both Obstetrics and Gynecology and Reproductive Endocrinology and Infertility. Dr. Thomas is nationally recognized as a leader in the field of assisted reproduction, has over 90 scientific publications and book chapters and serves on several national committees. He is also Director of Reproductive Medicine Research, a clinical research unit that is funded by federal and private institutions, at the University of Cincinnati. He has extensive experience in treating multi-faceted infertility issues and endocrine disorders ranging from infertility, abnormal puberty, endometriosis, polycystic ovarian syndrome and menopause to disorders of the thyroid and adrenal gland. He is trained in microsurgery and hysteroscopy, as well as operative and laser laparoscopy.



#### Lawrence A. Williams, MD

Dr. Williams is an Assistant Professor in the Department of Pathology / Laboratory Medicine at the University of Alabama at Birmingham. He is board certified in Clinical Pathology and Transfusion medicine and serves as the Director of Coagulation at UAB and as the blood bank director at 5 hospitals in Alabama. Dr. Williams' subspecialty training includes Transfusion Medicine at Yale University and Hematopathology at Virginia Commonwealth University. Dr. Williams' clinical and research focus is on blood disorders, such as thrombotic

thrombocytopenic Purpura (TTP) and Sickle Cell Disease (SCD). More specifically, he is interested in the role of ADAMTS13 (a disintegrin and metalloproteinase with a thrombospondin type 1 motif, member 13) in the occlusive complications of these two diseases. As an apheresis physician he treats and diagnoses these disorders, among many others. He was a key member of the recent consensus conference for "Red Blood Cell Exchange in Sickle Cell Disease", held in San Antonio Texas.

#### DISCLOSURE OF RELEVANT FINANCIAL RELATIONSHIPS/OFF-LABEL DISCUSSIONS

**SMA Faculty Disclosure Policy and Conflict of Interest Resolution:** In accordance with the ACCME's Standards for Commercial Support, it is SMA's policy that all individuals involved with planning and implementation of the content of an SMA CME/CE activity are required to disclose to the audience 1) any relevant financial relationships with a commercial interest producing, marketing, re-selling, or distributing health care goods or services consumed by or used on, patients and 2) unlabeled/unapproved uses of drugs or devices discussed in their presentation. Perceived conflicts of interest (COI) will be resolved prior to the activity.

Below is a listing of **all individuals** who were involved in the planning and implementation of the educational content being presented during SMA's Scientific Assembly. These individuals, **unless otherwise noted**, **had no relevant financial relationships to disclose**. Discussions of off-label use are included.

#### A-D

Mohammed Al-Ourani, MD Fathia Alfakeri, MD, PGY-1 Shada Attraplsi, MD, PGY-1 Steven T. Baldwin, MD Bryan N. Batson, MD

\*Novartis Pharmaceuticals: Research Support

\*Discussion of unlabeled/unapproved uses: Alternative therapies mentioned in the media

Gregory L. Bearden, MD, FACS

\*Myriad Genetics: Stockholder

\* MiMedx: Stockholder

\*Exact Sciences: Stockholder

Ben Carmichael, MD Nikoo Cheraghi, MS5

Clement P. Cotter, Jr., MD, MBA

Robert Dachs, MD, FAAFP

Cathlen S. Delva, MD, MPH

Walter F. DeNino, MD

Chadrick E. Denlinger, MD

\*Discussion of unlabeled/unapproved uses:

Titanium rib plates Bradford Dunkin, MHA Daniel S. Eads, MD

#### F-M

Christine L. Gilkerson, MD

Teddy Gillen

Rachel J. Hager

Rebecca M. Hayes, MD

Stanley L. Hazen, MD, PhD

\*Astra Zeneca, Merck: Speaker

Kristi Henderson, DNP, CFNP, CACNP, FAEN

Naveed Iqbal, MD

Gillian Jones, DO, PGY4

Peter Kennedy, MD

Dana E. King, MD, MS

Jacob A. Klapper, MD Robert Kruger, MD

Preeya Laxna, MSIII

Bradley LeNoir, MD

Nicole A. Lopez, MD Sally Mathew, DO

Mukesh Mehta, MD

Thomas R. Milam, MD, MDiv, FAPA

#### N-R

Jillian Norton, DO, PGY2 Bobby D. Nossaman, MD Deniz Peker, MD

Paula Oliver Pell, MD, FACEP, FAAP

Sahil Rao, MD

#### S-Z

C. Norman Shealy, MD, PhD

\* Shealy Wellness: Stockholder

Devam Sheth, MD, PGY 3

Morgan T. Smith, BA, BA

Mandy Stone

Steven Strode, MD

Glenn Talboy Jr, MD, FACS

W.H. Wilson Tang, MD

\* Abbott Laboratories: Research Grant Investigator

Michael A. Thomas, MD

\*Berlex: Research Grant Investigator

\*Discussion of unlabeled/unapproved uses: Noncontraceptive benefits of contraception

Sihe Wang, PhD

Lawrence A. Williams, MD

Yuping Wu, PhD

Lawrence M. Wyner, MD

Joseph Zalocha, MD

#### Telehealth: The Future of Health Care

Kristi Henderson, DNP, CFNP, CACNP, FAEN

Thursday, October 29 4:15 – 6:00 pm

**Needs Statement and Practice Gap:** Telehealth/telemedicine is rapidly growing and being integrated into physician practices. Most physicians are unaware of the possibilities of how to use technology in their medical practices. This presentation is focused on educating the medical community on telehealth and the implications of it on the health care delivery system.

**Learning Objectives:** Define telehealth and how it is used; Review the benefits of telehealth for physician practices; Discuss the benefits of telehealth for patients.

- 1. americantelemed.org
- 2. learntelehealth.org

<b>Lecture Notes</b>		

#### **Cyber Liability**

Teddy Gillen

Early Bird Session: Friday, October 30 7:00 – 8:00 am

**Needs Statement and Practice Gap:** Nearly every day a major new cyber-attack makes headlines with millions of data records stolen. The health care industry is one of the hardest hit industries, with criminal cyber-attacks up 125% since 2010. It's not just large hospital groups at risk, either: 91% of all health care organizations had at least one data breach in the last two years. One of the primary drivers for the increased attacks on the health care industry is the high value of a medical identity—upwards of 10 or 20 times the value of a credit card number on the black market, where identity thieves buy them to submit fraudulent claims for high value medical devices, drugs and procedures. Healthcare practices are in the top cost category for data breaches, and a claim can be devastating to a practice's reputation. This session will educate healthcare professionals about how to identify typical causes of a claim as well as ways to protect against them.

**Learning Objectives:** Recognize preparedness to respond to a data breach; Identify Sources of Breaches; Have a knowledge regarding how a data breach can financially impact an organization; Describe breach notification requirements; Understand how to mitigate & transfer exposure regarding data breaches; Identify Insurance Coverage options.

- 1. Ponemon Institute, http://www.ponemon.org/news-2/66
- 2. Reuters, http://www.reuters.com/article/2014/09/24/us-cybersecurityhospitals-idUSKCN0HJ21I20140924

Lecture Notes		

## Sickle Cell Disease: Pathophysiologic Concepts and Expert Guidelines for Improved Patient Outcomes

Deniz Peker, MD Lawrence A. Williams, MD Friday, October 30 8:00-9:00 am

**Needs Statement and Practice Gap:** Sickle Cell Disease affects approximately 100,000 Americans, and occurs in about 1 out of every 500 African-American Births and 1 out of every 36,000 Hispanic-American births. People with SCD have less access to comprehensive team care than people with other genetic disorders. Primary Care Providers may lack confidence in providing high-quality care to adults with Sickle Cell Disease. Recent NIH guidelines, if followed, may improve the patient's quality of life. This lecture will provide a basic diagnostic approach to SCD and the pathophysiology that leads to the clinical consequences of the disease, and review simple and exchange transfusions for acute and chronic management of the disease.

**Learning Objectives:** Discuss how the unique characteristics of sickle cell disorders lead to clinical sequelae; Recognize the benefits to simple transfusion versus exchange transfusion in different clinical scenarios; Demonstrate an understanding of the hemoglobin / hematocrit and hemoglobin S (HbS) targets for acute and chronic management of SCD patients.

- 1. Kaushansky K, et al. Williams Hematology. 8th Ed. 2010. McGraw-Hill; pp709-742
- 2. Kim HC. Red cell exchange: special focus on sickle cell disease. Hematology Am Soc Hematol Educ Program. 2014 Dec 5;2014(1):450-6
- 3. Sickle Cell Disease Data & Statistics, cdc.gov/ncbddd/sicklecell/data.html

Lecture Notes			

#### **Contraception: Past, Present and Future**

Michael Thomas, MD

Friday, October 30 9:00-10:00 am

**Needs Statement and Practice Gap:** Clinicians often recognize that patients are sexually active and have contraceptive needs. However, they may be unfamiliar or uncomfortable with contraceptive assessment, counseling, and management for women with coexisting medical conditions, and lack understanding about the specific protestins and how contraceptive agents have noncontraceptive benefits. In 1996, the World Health Organization in collaboration with a large number of international family planning agencies, published the first edition of the Medical Eligibility Criteria for Contraceptive Use (MEC). Built on a structured systematic evaluation of available evidence, these regularly updated guidelines provide guidance to clinicians and health care organizations on the safety of contraceptive methods for people with specific medical conditions worldwide. The purpose of this lecture is to provide the practicing clinicians with pearls to assess the best contraceptive methods for patients, focusing on noncontraceptive benefits.

**Learning Objectives:** Understand the oncologic preventative effect of oral contraceptives; Discuss how hormonal contraceptives reduce hyperandrogenic symptoms; Understand the role drosprirenone plays in reducing PMDD; Understand how the progestin containing intrauterine systems impact dysfunctional uterine bleeding and menopausal hormonal therapy regimens.

- 1. Allen RH, Cwiak CA, eds. Contraception for the medically challenging patient. Springer. New York. 2014
- 2. World Health Organization. Medical eligibility criteria for contraceptive use. 4th ed. Geneva: WHO; 2009

Lecture Notes			

## A System Based Approach to Managing Diabetic Foot Infection

Gregory L. Bearden, MD, FACS

Friday, October 30 10:15 - 11:15 am

**Needs Statement and Practice Gap:** Practitioners may be unfamiliar with standard of care for treatment of diabetic foot infection and may approach the problem as individuals rather than part of a team. This lecture will demonstrate that by standardizing care with an EMR, patients will receive high quality, efficient care delivered by a coordinated team of physicians.

**Learning Objectives:** Recognize the faults in the current system for the delivery of care to patients with diabetic foot infections; Identify the current standard of care for the treatment of patients with diabetic foot infection; Describe how standardization of care can be achieved with the use of an electronic medical record (EMR); Recognize how standardization of care can improve quality and efficiency.

- 1. Chin et al. Diabetes management and peripheral vascular disease diagnosis and management. Clin Podiatr Med Surg 2014(31) 11-26
- 2. Lipsey et al. 2012 Infectious Disease Society of America Clinical Practice Guideline for the Diagnosis and Treatment of Diabetic Foot Infections. Clinical Infectious Diseases. 2012 (54) 12:132-173

Lecture Notes		

## Disaster Planning and Response Strategies from the Pediatric Perspective

Steven T. Baldwin, MD

Friday, October 30 11:15 am-12:15 pm

**Needs Statement and Practice Gap:** Disasters that affect the population in general will typically affect at least some pediatric aged individuals since they comprise about 25% of the general population. However, some types of disaster events may create almost exclusively pediatric victims. While many of the paradigms for risk assessment, planning, and responding to various types of disaster events are similar for adults and children, there are some important nuances related to pediatrics. Recognition of risks and planning can result in more optimal outcomes. This lecture will catalyze learners to review the preparedness of their institution to deal with pediatric disaster victims. Some experiences gained from responding to hurricanes, tornadoes, viral epidemics, and a few other threats will also be shared.

**Learning Objectives:** Review disaster risk assessment, planning and responses from the pediatric perspective; Identify pediatric contingencies that will catalyze review of institutional preparedness for pediatric disaster victims.

- 1. Hogan DO and Burstein J. Disaster Medicine. Lippincott Williams Wilkins 2002
- 2. Advanced Pediatric Life Support Course. American Heart Association
- 3. Pediatric Advanced Life Support Course. American College of Emergency Physicians

Lecture Notes			

## Ethical Challenges in the Care of Patients with Alzheimer's and Other Dementias

G. Richard Holt, MD, MSE, MPH, MABE, D BE

Lunch Session: Friday, October 30 12:30-1:30 pm

**Needs Statement and Practice Gap:** The care of patients with Alzheimer's and other dementias is now a part of most physicians' practices, whether it be as their primary care physician or a consultant physician. As the incidence of the disorders increases in the population, more physicians—as well as patients and their families—are faced with ethical challenges related to their patients' disease. Because of so many uncertainties and dilemmas in decision-making that are arising at a fast pace, guidelines for dealing with ethical dilemmas are still under discussion. The presentation will describe the ethical dilemmas and discuss the ethically acceptable approaches and options for the patient's consideration, in consultation with the family.

**Learning Objectives:** Understand the demographics of the dementias in the US; Describe the importance of honesty and timeliness in the disclosure of a diagnosis of a dementia to a patient; Develop an ethical plan through shared decision-making for the patient's preparation using advanced directives, durable medical power of attorney, and future care arrangements; Define the challenges and responsibilities caregivers face on a daily basis and support their efforts; Provide insight and advice for end-of-life decision making by surrogates and/or a competent patient.

- 1. Whitehouse PJ. Ethical issues in dementia. Dialogues Clin Neurosci. 2000 Jun; 2(2): 162–167 PMCID: PMC3181593. http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3181593/
- 2. Leuzy A, Gauthier S. Ethical issues in Alzheimer's disease: an overview. Expert Rev Neurother. 2012 May;12(5):557-67. doi: 10.1586/ern.12.38
- 3. Klein E, Karlawish J. Ethical issues in the neurology of aging and cognitive decline. Handb Clin Neurol. 2013;118:233-42. doi: 10.1016/B978-0-444-53501-6.00020-2

Lecture Notes			
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#### **Abstract Presentations**

Friday, October 30 1:45 – 3:15 pm

## Vote for Best Oral Abstract Presentation! Return Ballot to Registration by 10:30 am Saturday Morning

Time	Title	Presenter
1:45 pm	Welcome and Introductions	Clement P. Cotter, Jr., MD, MBA
1:50-2:00	Medicine & Medical Subspecialties	Cathlen S. Delva, MD, MPH
	<b>HSV Pneumonitis in a Patient with Combined</b>	
	Pulmonary Fibrosis and Emphysema	
2:00-2:10	Medicine & Medical Subspecialties	Jillian Norton, DO
	Stenotrophomonas Maltophilia: Culprit or Colonizer?	
2:10-2:20	Medicine & Medical Subspecialties	Sally Mathew, DO
	Palliative Care Options for Patients with End Stage	
	Renal Disease Declining Hemodialysis	
2:20-2:30	Medicine & Medical Subspecialties	Fathia Alfakeri, MD
	A Case Report of Benzocaine-induced	
	Methemoglobinemia: A Life Threatening Complication	
	After a Transesophageal Echocardiogram (TEE)	
2:30-2:40	Medicine & Medical Subspecialties	Rebecca Hayes, MD
	<b>Smartphone Application for Congestive Heart Failure</b>	
	Patients: A Pilot Study	
2:40-2:50	Medicine & Medical Subspecialties	Naveed Syed Iqbal, MD
	Prognostic Value of Vitamin D Deficiency as an	
	Outcomes Predictor in a Large Stable Cardiovascular	
	<b>Cohort Undergoing Elective Coronary Evaluation</b>	
2:50-3:00	Surgery & Surgical Subspecialties	Gillian Jones, DO
	Lipoma or Sarcoma: Caution is Warranted	
3:00-3:10	Surgery & Surgical Subspecialties	Morgan T. Smith, BA
	Role of Intraoperative Crystalloids on Hospital Length	
	of Stay Following Esophageal Resection: A	
	<b>Retrospective Study in 76 Consecutive Patients</b>	
3:10-3:15	Questions & Answers	All Speakers
3:15	Break	

Abstract Presentations - Notes					
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#### **How to Successfully Publish Your Manuscript**

G. Richard Holt, MD, MSE, MPH, MABE, D BE

Friday, October 30 3:30-4:30 pm

Join G. Richard Holt, MD, Editor-in-Chief and Jennifer Price, Managing Editor of the *Southern Medical Journal* for this informal, interactive session to address how to successfully prepare a manuscript for review and consideration for publication in a peer-reviewed Journal. Tips, writing techniques, and dos and don'ts will be discussed. Ample time will be allowed for your questions.

Lecture Notes		

## Integrating Psychiatry in Primary Care: Telepsychiatry and Beyond

Tom Milam, MD, MDiv, FAPA

Friday, October 30 3:30 – 4:30 pm

**Needs Statement and Practice Gap:** The national shortage of psychiatrists in the United States, and the emerging model of the Patient Centered Medical Home, has increased the already enormous pressure on primary care providers to manage their patients with behavioral health disorders. Access to timely referrals to psychiatrists is increasingly limited, especially for vulnerable populations such as children and the elderly, and for those living in rural areas where mental health resources are historically quite limited. Telepsychiatry, where a psychiatrist provides care through a video conferencing platform to a patient located at their primary care clinic, is a growing model designed to increase access to high-quality behavioral healthcare and to provide ongoing education and treatment support for primary care providers. This presentation will familiarize primary care provider's with telepsychiatry as a possible resource for improving access to behavioral healthcare, including exploring such issues as hardware, software, workflow and communication/technology requirements for effective telepsychiatric patient encounters. This presentation will also give primary care providers concrete tools for understanding and potentially implementing telepsychiatry in their primary care clinics, thus improving access to much needed behavioral healthcare resources, support and education.

**Learning Objectives:** Conceptualize the emerging model of tele-psychiatry and its potential impact on improving access to high quality behavioral health care; Grasp key concepts and terminology related to providing telepsychiatry services in the primary care setting such as technology requirements, reimbursement issues, work flow and interprofessional communication/documentation; Remove barriers between primary care providers and psychiatrists to promote a model of collaborative and integrated care consistent with the concept of Patient Centered Medical Home through the use of telepsychiatry.

- 1. American Telemedicine Association (ATA) website at americantelemed.org (see 'Practice Guidelines')
- 2. Telepsychiatry: Videoconferencing in the Delivery of Psychiatric Care. Jay H. Shore, M.D., M.P.H. (Am J Psychiatry 2013; 170:256–262)
- 3. Effects of Telepsychiatry on the Doctor-Patient Relationship: Communication, Satisfaction, and Relevant Issues. Donald M. Hilty, MD, Thomas S. Nesbitt, MD, Shayna L. Marks, BA and Edward J. Callahan, PhD. Primary Psychiatry. 2002;9(9): 29-34
- 4. Integrating Mental Health Treatment Into the Patient-Centered Medical Home. Croghan TW, Brown JD. Agency for Healthcare Research and Quality (AHRQ) Publication Number 10-0084-EF. U.S.
- 5. What is Telemedicine? A Collection of 104 Peer-Reviewed Perspectives and Theoretical Underpinnings. Sood et al. Telemedicine and e- Health, (2007) 13:573-90

Lecture Notes			

## Obesity: Evidence and Lessons from the Baby Boomer Generation

Dana E. King, MD, MS

Friday, October 30 4:30 – 5:30 pm

**Needs Statement and Practice Gap:** The State of Obesity report, produced by the Trust for America's Health (TFAH) and the Robert Wood Johnson Foundation (RWJF), in its 11th year, shows that 9 of the 10 states with the highest obesity rates are in the South, and that baby boomers, aged 45 to 64, may be earning the label "the fattest generation," with the highest obesity rate of any age group. Practitioners may have a gap in recent evidence and understanding of the obesity epidemic among baby boomers.

**Learning Objectives:** Describe the epidemiology of obesity among baby boomers; Identify the best lifestyle approach for managing obesity in baby boomers; Identify recent trends and evidence supporting a comprehensive lifestyle approach in managing obesity in baby boomers.

- 1. Trends in Dietary fiber Intake in the U.S. King DE, Mainous AG 3rd, Lambourne CA. J Acad Nutr Diet. 2012 May;112(5):642-8. doi: 10.1016/j.jand.2012.01.019. Epub 2012 Apr 25
- 2. Turning back the clock. King DE, Mainous AG 3rd, Geesey ME. Am J Med. 2007 Jul;120(7):598-603. Epub 2007 Apr 19
- 3. Adherence to healthy lifestyle habits in U.S. adults. King DE, Mainous AG 3rd, Carnemolla M, Everett CJ. Am J Med. 2009 Jun;122(6):528-34. doi: 10.1016/j.amjmed.2008.11.013

Lecture Notes			

#### Marijuana Myths and Science 2015

Paula O. Pell, MD, FACEP, FAAP

Early Bird Session: Saturday, October 31 7:00 – 8:00 am

**Needs Statement and Practice Gap:** Physicians and healthcare providers in many states are now impacted by regulations permitting the use of medical marijuana, and are encountering questions from patients in reference to its use. Healthcare providers must be aware of medical, legal, social and political issues related to medicinal cannabinoids and be prepared to respond to patients' questions and determine the evidence-based conditions for which cannabinoids may be prescribed. This lecture will address regulatory, clinical, and communication issues facing healthcare professionals when discussing the medical use of marijuana with patients.

**Learning Objectives:** Cite the history of marijuana uses; Describe current FDA approvals; Explain the approved indications for the state and federal laws pertaining to the medical and ethical use of cannabinoids; Determine evidence-based conditions to prescribe cannabinoids.

- 1. Cannabinoids for medical use, a systematic review and meta analysis, Whiting, JAMA, June 23-30, 2015
- 2. Cannabis in multiple sclerosis, Neurology 2005

Lecture Notes			

#### **Update on Prevention for Primary Care**

Dana E. King, MD, MS

Saturday, October 31 8:00 – 9:00 am

**Needs Statement and Practice Gap:** Many practitioners know the "what tests to order" for prevention and health maintenance but less about the "why." This presentation's purpose is to improve practitioners' understanding of the public health principles of prevention, and using current examples, apply the knowledge to specific groups of patients.

**Learning Objectives:** Understand the principles for selecting clinical preventive guidelines for use in practice; Describe resources that provide current clinical preventive guidelines; Adapt a reasonable set of guidelines for disease prevention and health promotion in patients in the most common situations encountered in primary care.

- USPSTF published guidelines, <a href="http://www.uspreventiveservicestaskforce.org/Page/Topic/recommendation-summary/prostate-cancer-screening">http://www.uspreventiveservicestaskforce.org/Page/Topic/recommendation-summary/prostate-cancer-screening</a>
- 2. USPSTF published guidelines, <a href="http://www.uspreventiveservicestaskforce.org/Page/Topic/recommendation-summary/lipid-disorders-in-adults-cholesterol-dyslipidemia-screening">http://www.uspreventiveservicestaskforce.org/Page/Topic/recommendation-summary/lipid-disorders-in-adults-cholesterol-dyslipidemia-screening</a>

Lecture Notes				

#### **Abstract Presentations**

Saturday, October 31 9:00 – 10:00 am

### Vote for Best Oral Abstract Presentation! Return Ballot to Registration by 10:30 am Saturday Morning

Time	Title	Presenter
9:00-9:12	Medicine & Medical Subspecialties	Sahil Rao, MD
	Dermatologic Mimicry – Vancomycin Induced Fixed	
	Drug Eruption	
9:12-9:24	Medicine & Medical Subspecialties	Devam Sheth, MD
	Angiosarcoma of Tongue – A Case Report of an	
	Extremely Rare Tumor	
9:24-9:36	Medicine & Medical Subspecialties	C. Norman Shealy, MD
	Telomere Rejuvenation and Longevity	
9:36-9:48	Surgery & Surgical Subspecialties	Chadrick E. Denlinger, MD
	<b>Extensive Chest Wall Defect Reconstruction with</b>	
	Titanium Rib Plates	
9:48-10:00	Bioethics & Medical Education	Lawrence M. Wyner, MD
	How an Episode of Urinary Retention Gives Us Our	
	Modern Understanding of the Universe	

Abstract Presentations - Notes		

#### **Medical Ethics and Physician-Patient Encounters**

Bradford S. Dunkin, MHA

Saturday, October 31 10:30 -11:30 am

**Needs Statement and Practice Gap:** Clinicians may lack knowledge of the application of ethical principles in health care decision making and patient encounters, especially when there are several parties involved with conflicting perspectives. In addition, there is lack of access to resources that can assist with ethical decision making and ethical dilemmas. Clinicians should be able to approach difficult patient encounter issues and decisions armed with an ethical framework to better assess options and choose the best options to resolve patient encounter issues.

**Learning Objectives:** Differentiate and identify the behaviors that constitute ethical behavior, personal conflicts, and professionalism; Identify and apply bioethical principles in health care settings; Apply ethical best practices to improve patient safety and reduce overall liability that focuses on identifying, responding to, investigating, and monitoring ethical behaviors.

- Medical Ethics and Patient Encounters: Claims Rx NORCAL Mutual Insurance Company, April 2014
   Jonsen AR, Siegler M, Winslade WJ. Clinical Ethics: A Practical Approach to Ethical Decisions in Clinical
   Medicine. 7th ed. New York, NY: McGraw Hill; 2010:1
- 2. McCaffre JJ, Hagg-Rickert S. Development of a risk management program. In Carroll R, Nakamura PLB, eds., Risk Management Handbook for Health Care Organizations: The Essentials. Vol. 1. San Francisco, CA: Jossey-Bass; 2006:87-114

Lecture Notes				

#### **Hypertension Update 2015**

Brian N. Batson, MD

Saturday, October 31 12:00-1:00 pm

**Needs Statement and Practice Gap:** Hypertension remains the most common cardiovascular risk factor in the United States (U.S.), affecting approximately one third of all adult Americans and two-thirds of adults aged 60 years or older. A study published in the January 29, 2015 issue of the *New England Journal of Medicine* stated that on the basis of the 2014 guidelines for hypertension therapy in the U.S., many eligible adults remain untreated. The implementation of the 2014 hypertension guidelines for U.S. adults between ages of 35 and 74 years could potentially prevent about 56,000 cardiovascular events and 13,000 deaths annually, while saving costs. Many healthcare providers are either unaware of the changes outlined in the most recent release of the guidelines, or may not be implementing them as they should be. This lecture will examine the evolution of the approach to blood pressure in regards to measurement, management, and treatment options. Through case presentations, examples of how to apply the current guidelines will be examined.

**Learning Objectives:** Describe the evolution of the diagnosis, treatment, and guidelines regarding hypertension; Define pivotal clinical trials that helped shape the most recent guidelines for hypertension management (JNC-8); Apply information learned through case examples to evaluate, diagnose, and treat patients.

- 1. <a href="http://jnc8.jamanetwork.com/">http://jnc8.jamanetwork.com/</a> (JNC-8 guidelines)
- 2. http://www.ash-us.org/ (American Society of Hypertension website that has many good resources)
- 3. <a href="http://www.nhlbi.nih.gov/files/docs/public/heart/hbp\_low.pdf">http://www.nhlbi.nih.gov/files/docs/public/heart/hbp\_low.pdf</a> (dowloadable copy of the DASH eating plan)

Lecture Notes				

#### **Poster Presentations** Friday, October 30 and Saturday, October 31 View Posters in the Hospitality Area POSTER # TITLE PRESENTER **Bioethics & Medical Education** P-1 Brugada Syndrome and the Potential Financial Burden on Health Tamer Said Ahmed, MD Care Medicine & Medical Subspecialties P-2 Cerebral Air Embolism as Complication of the Pigtail Catheter Emad Alkhankan, MD P-3 Swallowing Syncope: A Case Report in Light of Literature Chandralekha Ashangari, MBBS P-4 Central Aortic Systolic Pressure in Postural Orthostatic Tachycardia Chandralekha Ashangari, MBBS Syndrome (POTS) P-5 Cardiopulmonary Stress Test (CPX) in Postural Orthostatic Chandralekha Ashangari, MBBS Tachycardia Syndrome Septic Pericarditis and Cardiac Tamponade Caused by Methicillin-P-6 Eric H. Sladek, MD resistant Staphylococcus Aureus (MRSA) P-7 Acute MI in Patient with Discordant Cardiac Catheterization Marc Armstrong, MD, MPH Findings in an Asymptomatic Patient with Hypertensive Urgency P-8 Coral Snake (Elapidae) Presentation and Treatment Miguel Davila, MD P-9 The Kissing Disease Throws a Clot Patel Pranavkumar, MD, PharmD, PGY-2 P-10 Sternomanubrial Osteomyelitis Secondary to IV Drug Use Soniya Patel, MD P-12 Decreased Genital Mycotic Infection Incidence Over Time in Michael J. Davies, PhD Patients with Type 2 Diabetes Mellitus Treated with Canagliflozin Over 2 Years P-13 Familial Hypertriglyceridemia and Metabolic Syndrome Presenting Megha Oberoi, MD as Acute Pancreatitis eGFR Effects of Longer-Term Canaglifozin Treatment in Patients P-14 Michael J. Davies, PhD with Type 2 Diabetes Mellitus and Various Degrees of Baseline **Renal Function** Refractory Hypermagnesemia in Post Operative Ileus P-15 Mohamad Eid, MD P-16 Out of the Blue: A Case of Monocular Frosted Branch Angiitis in a Tom Lenz, MSIII Young Healthy Woman P-17 The Vanishing Cancer Brendan McQuellon, DO

POSTER #	TITLE	PRESENTER	
P-18	Embolic Stroke in a Patient with a Left Atrial Myxoma	Michael Cryer, MD	
P-19	Diabetic Ketoacidosis in the Setting of Metastatic Breast Cancer, Pancreatitis and Decreased Oral Intake in a Patient without Diagnosed Diabetes: A Case Report	Prashant Koshy, MD	
P-21	A Case of Cardiac Papillary Fibroelastoma Presenting with Recurrent Syncope	Christopher Jones, MD	
P-22	Incidental Finding of a Coronary Sinus Thrombosis During Decompensated Heart Failure	Eric Arguelles, MD	
P-23	An Atypical Cause for Atypical Hemolytic Uremic Syndrome	Carolina Belen de Elia, MD	
	Public Health & Environmental Medici	ine	
P-24	Effectiveness of Smoking Cessation Counseling	Anjali Om, MS	
Quality Healthcare, Patient Safety			
P-25	ROP Classification Using RetCam	Megha Pansara, MD	
P-27	Barriers to Post Partum Sterilization	Paulina Osial, MD	
	Surgery & Surgical Subspecialties		
P-28	Implementing Enteral Nutrition When Gastrostomy Tube is Contraindicated: Another Surgical Option Exists	Kelsey C. R. McKee, MD	
P-29	Perioperative Management of Ascites and Cirrhosis in the Setting of Complex Recurrent Ventral Hernia Repair	Gifty Abraham, MD	
P-30	Ossification of Posterior Longitudinal Ligament - A Rare Case of Cervical Myelopathy	Devam Sheth, MD	
P-32	Blastomycosis in New York: A Case Report and Epidemiologic Review of the Literature	Alvin Varghese, DO	
P-33	Lipoma or Sarcoma	Gillian Jones, DO	

#### **Attention Professional Registrants**

Don't forget to **cast your vote** for **Best Oral Abstract Presentations** and

#### **Best Poster Abstract Presentations**

Complete the ballot included in your **registration envelope** and deposit it at the SMA Registration Desk no later than **10:30 am on Saturday**. **Winners** will be **announced** at **11:30 am** at the meeting in **Magnolia Ballroom BC**.

#### **SMA ALLIANCE**



Attending spouses are invited to join the SMA Alliance for the

#### 91<sup>st</sup> Annual Meeting!

#### **SMA ALLIANCE ACTIVITIES**

#### Thursday, October 29

6:00-7:30 pm

SMA/SMAA Presidents' Welcome Reception – Baytowne Foyer

See Page 2 for Details

Friday, October 30

9:00 am-5:30 pm SMAA "Beach Bash for Cash" Raffle - The SMA Alliance

Raffle supporting the Research and Education Endowment Fund returns this year with wonderful items. Tickets are \$10

each or 11 for 100.



11:30 am-4:00 pm

Exhibits Open for Viewing (through Saturday) – Magnolia Ballroom DEF

Exhibits reflect the Alliance's ongoing commitment to enhance medicine

through the promotion of Health Education, Doctors' Day, and Medical Heritage activities and reflect the hard work of state and county medical alliances in the

SMA family.

1:00-4:00 pm SMAA General Session – Magnolia Ballroom A

Join SMAA President, Karen Morris as she spotlights the achievements of your Alliance and colleagues that concludes this Alliance year and outlines initiatives for 2016. One of the highlights of the General Session is the final vote for the 2015-2016 Executive Committee. Don't miss this opportunity to make your vote

count.

Saturday, October 30

9:00-11:15 am

SMAA Post-Convention Meeting – Azalea I

Join 2015-2016 SMAA President, Barbara Blanton and she and her Vice Presidents outline

plans for the 2015-16 year.

1:15-2:30 pm SMAA President Installation & Awards Luncheon – Camellia I-II

\$75 per person

Join us for this auspicious event where the 2015-2016 SMA Alliance President will be installed and winners of this year's top Alliance Project Awards and the 2015 Medical

Student Scholarship winner will be honored.

**DO NOT TURN IN THIS FORM!** Use these pages now to jot your thoughts throughout the meeting so you may accurately answer questions later when you complete your online Request for Credit and Evaluation Form.

# FORGET!

#### **Claim Your Credit and Evaluate!**

Watch your email for instructions to complete your request for credit, or visit this link: https://www.surveymonkey.com/r/2015\_AM\_CME\_Evaluations

The following questions will appear on your evaluation form.

Jot down your thoughts now and use this guide when you enter your evaluation responses online.

Indicate the reason you registered for this conference (check all that apply):	
conference (check an that apply).	☐ Modify treatment plans
☐ To improve clinical skills	☐ Change my screening and prevention
☐ To improve interpretive and diagnostic skills	practice
☐ To acquire new information on the subject	☐ Incorporate different diagnosis
☐ To review the subject	strategies into patient evaluation
☐ To meet CME requirements	<ul><li>Use alternative communication</li></ul>
	methodologies with patients and
Did the conference meet your expectations	families
(confirming your reason to register)?	☐ Implement new documentation
Yes No,	procedures to improve efficiency and
Please Explain:	accuracy of business practice
	<ul><li>Use systems-based resources for</li></ul>
	improved quality of care
How might the format of this activity be improved	☐ Improve the structure and operations of
in order to be most appropriate for the content	my practice to address healthcare
presented (check all that apply):	reform cost containment and other
☐ Include more case-based presentations	regulatory issues
☐ Add breakouts for subtopics	☐ None – This conference validated
☐ Add a hands-on instructional component	current practices
☐ Schedule more time for Q&A	☐ Other:
☐ Format was appropriate; no changes needed	Mosths information provided prostical and
☐ Other: Tell us your ideas for the program	Was the information provided practical and applicable to your practice?Yes No.
format:	Please explain:
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	Did you perceive commercial bias/influence at any
As a result of my participation in this activity, the	point during this conference?Yes No
ONE most likely change/new strategy I will	If yes, please provide detail including the speaker
implement in my practice is: (Select only ONE	and situation.
response)*	

<u>DO NOT</u> **TURN IN THIS FORM!** Use these pages now to jot your thoughts throughout the meeting so you may accurately answer questions later when you complete your online Request for Credit and Evaluation Form.

#### **Practice Gap/Needs Assessment**

What patient challenges, (clinical) issues do you see in your office that you don't feel properly prepared to address?

What non-clinical, business-related areas do you feel ill-equipped to address?

Faculty Evaluations - Rate your faculty (circle answers)

Faculty Evaluations - Nate your la	cuity (circle ai	isweis)			
Steven T. Baldwin, MD					
Knowledge of Subject Matter	Outstanding	Good	Satisfactory	Fair	Poor
Effective in Presenting Material	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Bias or Influence	Outstanding	Good	Satisfactory	Fair	Poor
Bryan N. Batson, MD	0 !!	G 1	0 0 .	г.	ъ
Knowledge of Subject Matter	Outstanding	Good	Satisfactory	Fair	Poor
Effective in Presenting Material	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Bias or Influence	Outstanding	Good	Satisfactory	Fair	Poor
Gregory L. Bearden, MD, FACS					
Knowledge of Subject Matter	Outstanding	Good	Satisfactory	Fair	Poor
Effective in Presenting Material	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Bias or Influence	Outstanding	Good	Satisfactory	Fair	Poor
Bradford Duncan, MHA					
Knowledge of Subject Matter	Outstanding	Good	Satisfactory	Fair	Poor
Effective in Presenting Material	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Bias or Influence	Outstanding	Good	Satisfactory	Fair	Poor
Teddy Gillen					
Knowledge of Subject Matter	Outstanding	Good	Satisfactory	Fair	Poor
Effective in Presenting Material	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Bias or Influence	Outstanding	Good	Satisfactory	Fair	Poor
Kristi Henderson, DNP, CFNP, CACNF	P FAFN				
Knowledge of Subject Matter	Outstanding	Good	Satisfactory	Fair	Poor
Effective in Presenting Material	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Bias or Influence	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Blus of Influence	Outstanding	Good	Satisfactory	1 un	1 001
G. Richard Holt, MD, MSE					
Knowledge of Subject Matter	Outstanding	Good	Satisfactory	Fair	Poor
Effective in Presenting Material	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Bias or Influence	Outstanding	Good	Satisfactory	Fair	Poor

Dana E. King, MD, MS					
Knowledge of Subject Matter	Outstanding	Good	Satisfactory	Fair	Poor
Effective in Presenting Material	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Bias or Influence	Outstanding	Good	Satisfactory	Fair	Poor
Thomas R. Milam, MD, MDiv, FAPA					
Knowledge of Subject Matter	Outstanding	Good	Satisfactory	Fair	Poor
Effective in Presenting Material	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Bias or Influence	Outstanding	Good	Satisfactory	Fair	Poor
Deniz Peker, MD					
Knowledge of Subject Matter	Outstanding	Good	Satisfactory	Fair	Poor
Effective in Presenting Material	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Bias or Influence	Outstanding	Good	Satisfactory	Fair	Poor
Paula O. Pell, MD, FACEP, FAAP					
Knowledge of Subject Matter	Outstanding	Good	Satisfactory	Fair	Poor
Effective in Presenting Material	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Bias or Influence	υ		3	Fair	Poor
Avoided Commercial Blas or Influence	Outstanding	Good	Satisfactory	rair	Poor
Michael A. Thomas, MD					
Knowledge of Subject Matter	Outstanding	Good	Satisfactory	Fair	Poor
Effective in Presenting Material	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Bias or Influence	Outstanding	Good	Satisfactory	Fair	Poor
Lawrence A. Williams, MD					
Knowledge of Subject Matter	Outstanding	Good	Satisfactory	Fair	Poor
Effective in Presenting Material	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Bias or Influence	Outstanding	Good	Satisfactory	Fair	Poor
Avoided Commercial Blas of Influence	Outstanding	Good	Satisfactory	1 all	1 001

#### **Faculty Comments**

Was there a specific speaker that made a special impression or gave you an "aha" moment?

#### **Contact Information**

This activity is sponsored by the Southern Medical Association. For more information, or to become an SMA Member, contact us:

35 West Lakeshore Drive, Suite 201, Birmingham, AL 35209 Tel: 800.423.4992; Fax 205-945-1830; Website: sma.org; E-mail: <a href="mailto:customerservice@sma.org">customerservice@sma.org</a>

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#### **CALENDAR OF LIVE CME EVENTS**



November 20-22, 2015 Southern Region Burn Conference Renaissance Hotel, Dallas, TX sma.org/burn



December 18-20, 2015
Medical Dilemmas in Patient Care
Crowne Plaza Times Square Manhattan Hotel
New York (Manhattan), NY
sma.org/medical-dilemmas



January 23, 2016
Psychiatry Pearls for the Primary Care Provider
Virginia Tech Carilion School of Medicine, Roanoke, VA
sma.org/psychiatry-pearls



**February 5-7, 2016**Osteoporosis: Diagnosis, Management and Prevention Hammock Beach Resort, Palm Coast, FL sma.org/osteoporosis



Three CME Cruise Offerings:
February 14-21, 2016 – Palliative Medicine - 7 Night Eastern Caribbean March 5-12, 2016 – Infectious Diseases – 7 Night Southern Caribbean June 10-17, 2016 – Allergy & Immunology – 7 Night Alaska sma.org/smart-education/conference-calendar



June 17, 2016
The 3 Rx's of Prescribing Controlled Substances: Rules, Regulations & Risks
The Hattiesburg Clinic, Hattiesburg, MS
sma.org/pcs



July 18-21, 2016
Focus on the Female Patient Conference
Kiawah Island Golf Resort, East Beach Conference Center, Kiawah Island, SC sma.org/female-patient



November 3-5, 2016 SMA Scientific Assembly Chattanoogan Hotel, Chattanooga, TN sma.org/assembly



July 16-20, 2017
Focus on the Female Patient Conference
Kiawah Island Golf Resort, East Beach Conference Center, Kiawah Island, SC sma.org/female-patient

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