



SMA
SOUTHERN MEDICAL ASSOCIATION

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.

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SMA 2016 Annual Scientific Assembly

SCHEDULE AT A GLANCE

Includes SMA and SMA Alliance (SMAA) Events
All events take place in the Chattanooga Hotel

Thursday, November 3, 2016

11:00 am-6:30 pm	Registration Open	Ballroom Foyer	
6:30-8:00 pm	SMA/SMAA Presidents' Welcome Reception	Ballroom 2,3,4	Page 2

Friday, November 4, 2016

6:30 am-5:30 pm	Registration Open	Ballroom Foyer	
6:30-7:00 am	Continental Breakfast		
6:30 am-5:30 pm	SMA/SMAA Hospitality Area Open View Exhibits and Posters, Visit Raffle Area <i>SMAA Exhibits and Raffle Grand Opening at 9:00 am</i>	Ballroom 2,3,4	
7:00-7:15 am	First General Session	Ballroom 1	
7:15 am-5:30 pm	CME Educational Sessions	Ballroom 1	Page 14
10:15-10:30 am	CME Session Break - Visit Hospitality Area, Exhibits, Posters, and Raffle		
12:30-1:30 pm	CME Lunch Educational Session	Ballroom 1	Page 18
3:15-3:30 pm	CME Session Break – Visit Hospitality Area, Exhibits, Posters, Raffle	Ballroom 2,3,4	
3:30-4:30 pm	Resident's Session: How to Successfully Publish Your Manuscript	Room TBA – Check Registration Desk	Page 19

Saturday, November 5, 2016

6:30 am-2:00 pm	Registration Open	Ballroom Foyer	
6:00-7:00 am	YO-GA-na Feel Great! (Yoga Session)	Room TBA – Check Registration Desk	Page 2
6:30 am-1:00 pm	SMA/SMAA Hospitality, Exhibits, Posters	Ballroom 2,3,4	
7:00 am-3:00 pm	CME Educational Session	Ballroom 1	Page 24
10:00-10:15 am	CME Session Break - SMA/SMAA Hospitality, Exhibits and Posters	Ballroom 2,3,4	
10:15-10:45 am	SMA Presidential Installation	Ballroom 1	Page 2
11:45 am-2:00 pm	CME Lunch Educational Session	Ballroom 1	Page 24



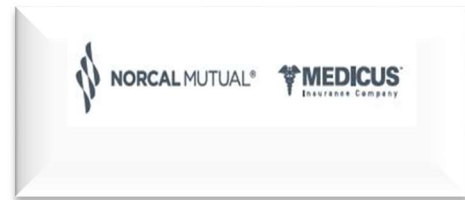
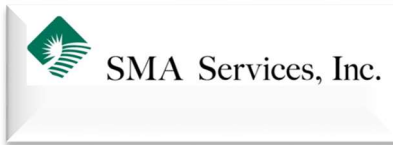
Special Events



Educational Sessions

ACKNOWLEDGMENT

The Southern Medical Association gratefully acknowledges the following exhibitors and sponsors of SMA's 2016 Annual Scientific Assembly



**Longevity Quest
Nashville Healthcare Recruiting Center
United States Air Force Health Professions**

SPECIAL EVENTS

**Thursday, November 3, 6:30-8:00 pm, SMA/SMAA Welcome Reception
Ballroom 2,3,4**

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

**Friday, November 4, 1:15 -2:30 pm, SMAA President Installation & Awards Luncheon
Walker Room**

\$75 per person

Join us for this auspicious event during which the 2016-2017 SMA Alliance President will be installed and winners of this year's top Alliance Project Awards and the 2016 Medical Student Scholarship winner will be honored.

Saturday, November 5, 6:00-7:00 am, YO-GA-na Feel Great!

Room To Be Announced – Check Registration Desk

Free Event

Join SMA and Chattanooga's own **Yoga Landing** for this morning yoga session dedicated to gentle stretching, deep breathing, and relaxation techniques designed to start your day with a sense of energy, well-being, and clarity. The session is open to ALL levels, including anyone who has never used a yoga mat before! Individuals will work to his or her own ability and comfort level. Wear comfortable, loose-fitting clothes. A small supply of mats will be available or feel free to bring your own.

**Saturday, November 5, 10:15-10:45 am, SMA 2016 Presidential Installation
Ballroom 1**

Join us as the 2016-2017 SMA President, Ajoy Kumar, MD is installed.

EDUCATIONAL SESSION SCHEDULE

All events take place at the Chattanooga Hotel, Ballroom 1

Thursday, November 3, 2016

11:00 am – 6:30 pm	Registration
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Friday, November 4, 2016

6:30 am	Registration
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6:30	Continental Breakfast
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7:00	First General Session, Welcome and Announcements
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Benjamin Carmichael, MD, SMA President 2015-16

Ajoy Kumar, MD, FAAFP, SMA 2016 Assembly Chair

7:15	Session 1 – Recognizing and Managing Common Dermatological Conditions
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Greg Bourgeois, MD

8:15	Session 2 – Current Guidelines for Cervical Cancer Screening and Management of Abnormal Results
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Joan K. Lingen, MD, FACOG

9:15	Session 3 – (Part 1): Health Literacy: Making Patients Safer Through Understanding
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Kelly Rinehart, RN

10:15	Break – Visit Hospitality Area to View Posters
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10:30	Session 4 – Abstract Presentations
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10:30	Welcome, Dr. Kumar
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10:30	Physicians-in-Training Competition Begins
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Medicine & Medical Specialties

10:32	Demyelinating Thalamic Lesion Presenting with Symptomatic Paroxysmal Hemidystonia
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Vrushali Shah, MD

10:44	A Rare Case of Non Compaction Cardiomyopathy
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Sukhdeep Bhogal, MD

10:56	Outcomes of Empyema Management with Intrapleural tPA and Dnase
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Madhavi Cherukula, MD

11:08	PPI and Nephropathy: An Uncommon Diagnosis Related to a Common Medication. A Case Report and Review
--------------	--

Nabodita D. Ghimire, MD

11:20	A Rare Case of Blastic Plasmacytoid Dendritic Cell Neoplasm with Aberrant Immunophenotypic Profile and Unusual Cytogenetics
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Susan E. Harley, MD

11:32	When Statins Get Physical
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Christopher Jackson, MD

11:44	Diagnosis of Synovial Sarcoma in Patient with an Inferior Vena Cava Mass
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Jenifer Samuel, MD

11:56	A Case of Hansen's Disease Masquerading as Sarcoidosis
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Daven J. Savla, MD

12:08 pm	A Persistent Cough That Won't Go Away?
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Pralhad Sharma, MD

12:20	Discussion, Questions and Answers
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12:30	Break – Pick up Box Lunches
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12:45	Session 5 – Lunch Session – See ME Different
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Panelists: *Ajoy Kumar, MD, and Randy Glick, BSB/PM, MCP*

1:30	Break – Visit Hospitality Area to View Posters
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1:45	Session 6 - Abstract Presentations
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Medicine and Medical Specialties (continued)

1:45	Reversible Cerebral Vasoconstriction Syndrome
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Ryan Wisler, MD

1:57	It is Not a Contaminant! A Case of Lactobacillus Gasseri Bacteremia with Lumbar Osteomyelitis, Epidural, and Paraspinal Abscesses
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Eliud Torres, MD

2:09	A Bilateral Facial Nerve Paralysis: A Diagnostic Challenge
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Ashish Verma, MBBS

Surgery & Surgical Specialties	
2:21	Ipilimumab Induced Orbital Myopathy in a Euthyroid Patient, <i>Austin Pharo, MD</i>
2:33	<i>Physicians-in-Training Competition Concludes</i>
Public Health & Environmental Medicine	
2:33	NFL Football, the Game Itself, Sets BMI Limits That Can Guide Healthier Public High School Football Participation, <i>George W. Moll, MD</i>
2:45	A Hundred Years of Penile Mayhem from Zippers, <i>Lawrence M. Wyner, MD</i>
Women's & Children's Health	
2:57	Vaginal Anatomy on MRI – New Information Obtained Using Distention, <i>Alan Appelbaum, MD</i>
3:09	Discussion, Questions, and Answers; and Announcement of Physicians-in-Training Competition Winners, <i>Dr. Kumar</i>
3:15	Break – Visit Hospitality Area to View Posters
3:30	Session 7A – (Part 2): Cultural Competency: Making Patients Safer Through Understanding <i>Kelly Rinehart, RN</i>
3:30	Session 7B – Tips That Can Help You Successfully Publish Your Manuscript, <i>Jennifer Price, MA</i>
4:30	Session 8 - Choosing Wisely: Recommendations for Appropriate Labs and Testing in Adult and Pediatric Rheumatology Patients, <i>Christopher R. Morris, MD</i>
5:30	Adjourn

Saturday, November 5, 2016	
6:00 am	Registration – Magnolia Foyer
6:30	Continental Breakfast
7:00	Session 9 – Hot Topics in the Hot Tropics: Cases in Travel Medicine, <i>Andrew Urban, MD</i>
8:00	Session 10 – The RUC & Also MACRA, FYI, <i>Thad F. Waites, MD, FACC</i>
9:00	Session 11 – Cases from the Beeper: Great Questions and Teachable Moments from the World of Infectious Diseases, <i>Andrew Urban, MD</i>
10:00	Break
10:15	SMA Presidential Installation
10:45	Session 12 – Consistency, Quality and Cost - Why Reducing Variability in Health Care Matters, <i>Mark S. Williams, MD, MBA, JD, CPE</i>
11:45	Break – Pick Up Box Lunches
12:00 pm	Session 13 – Lunch Session – Prescribing Controlled Substances, <i>Chad Boomershtine, MD, PhD</i>
2:00	Session 14 – New Drugs Update, <i>C. Wayne Weart, PharmD, FAPhA, FASHP, BCPS</i>
1:00	Assembly Adjourns
POSTER PRESENTATIONS - View Scientific Posters in the Hospitality Area on Friday and Saturday – See Page 27	

CONTACT INFORMATION

This activity is sponsored by the Southern Medical Association. For more information, or to become an SMA member, contact us: 800.423.4992, ext. 620; customerservice@sma.org; website: sma.org.

ASSEMBLY OVERVIEW

SMA is committed to meeting the needs of the physicians and the healthcare team through interprofessional, multidisciplinary 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 2016 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 provide practical information to enhance the ability of healthcare professionals to better treat their patients, while fulfilling credentialing requirements.

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:

- Recognize that many dermatologic presenting symptoms overlap, and discrete identifiable factors for each disease can help aid in diagnosis and treatment;
- Apply the current ACOG/ASCCP guidelines for age-based routine cervical cancer screening;
- Utilize appropriate laboratory studies to assess patients with musculoskeletal complaints;
- Identify practical information, guideline recommendations, updates, and best practices about treatment strategies and new diagnostic tests, along with recommendations for incorporating these updates into practice for commonly encountered infectious diseases;
- Explain examples of care variation along with potential impacts on quality, cost, and patient safety;
- Follow guidelines for prescribing opioids for the management of chronic pain;
- Describe the current information concerning newly FDA-approved medications (pharmacology, pharmacokinetics, efficacy and safety data, drug interactions, dosing, monitoring, and cost) in the selection of evidence-based pharmacotherapy;
- Recognize the RUC process and how payment for a procedure is determined;
- Describe the massive new law that is beginning to collect data now and that will determine the majority of Part B Medicare payment going forward;
- Apply communication best practices that reduce barriers between patients and healthcare providers;
- Recognize the importance of accredited medical associations and how to apply tailored improvement to improve patient care and solve problems within the business of medicine.

TARGET AUDIENCE

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. healthcare 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 11/03/2016, 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/2016_AnnualScientificAssembly_CMEForm_Evaluation 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 diverse professional opinions exist 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



Ajoy Kumar, MD, FAAFP currently serves as a Physician Executive at Bayfront Health in St. Petersburg, Florida, where he is responsible for quality and clinical practice initiatives and collaboratively promoting high quality, cost effective medical care by leading interactions with hospital medical staff, hospital administrative leadership, and other corporate leadership and staff. He also provides leadership and expertise for hospital quality and clinical effectiveness in the areas of infection control, risk management, patient safety, patient satisfaction, and medical staff credentialing functions to ensure the collaboration and coordination of all stakeholders in these processes.

Also serving as Medical Director of the St. Petersburg Free Clinic in St. Petersburg, Florida, Dr. Kumar oversees clinical operations. He is Chief Medical Officer for the Florida 3 Disaster Medical Assistance Team (DMAT) and also Chairs the Quality Board at Bon Secours in St. Petersburg. He holds the academic affiliation of Clinical Assistant Professor of Family Medicine at Florida State University College of Medicine in Sarasota. Dr. Kumar is actively involved with the Florida Academy of Family Physicians and currently is President-elect of Southern Medical Association.

Board Certified in Family Medicine, he received his medical degree at Ross University School of Medicine, in Portsmouth, Dominica, West Indies, and completed his internship, residency, and a Fellowship in Family Medicine and Primary Care Sports Medicine at Bayfront Family Medical Residency in St. Petersburg, Florida.

In his spare time he enjoys spending time with his family and friends, struggling through Orange Theory Fitness workouts, watching movies, traveling, and improving his photography skills.

Distinguished Faculty



Chad S. Boomershine, MD, PhD completed MD and PhD studies at The Ohio State University in psychoneuroimmunology prior to residency, fellowship and postdoctoral training at Vanderbilt University. Dr. Boomershine is triple boarded in internal medicine, rheumatology, and pain medicine and currently serves as an Assistant Professor at Vanderbilt, Medical Director of four pain management clinics, and a Principal Investigator with Clinical Research Solutions.

Dr. Boomershine has published numerous articles in leading journals and websites and has presented lectures both nationally and internationally on the topic of pain management including a keynote address at the International Pain in Women Conference at the Royal College of Physicians in Dublin, Ireland.



Gregory Bourgeois, MD was born and raised in south Louisiana. He graduated from Louisiana State University with honors in Biological Sciences. He obtained his MD from UAB School of Medicine.

After completing an Internship in Internal Medicine at Baptist Health System in Birmingham, he returned home for his Dermatology residency at LSU Health Sciences Center in New Orleans where he served as Chief Resident. During residency he was awarded an American Society for Dermatologic Surgery preceptorship at SkinCare Physicians in Boston to perform concentrated study in laser and cosmetic dermatology under renowned dermatologists Michael Kaminer, MD, Jeffrey Dover, MD, Kenneth Arndt, MD, and Thomas Rohrer, MD.

He has had research published in the *Journal of the American Academy of Dermatology* and *Cutis* and has presented dermatologic research at numerous academic meetings. Dr. Bourgeois is trained in medical, surgical, and cosmetic dermatology with special interest in using lasers to treat a variety of skin conditions and biologics to treat psoriatic disease. He and his wife have four children.



Randall E. Glick, BSB/PM, MCP serves as the Executive Director of the Southern Medical Association (SMA). Headquartered in Birmingham, Alabama, SMA is a 501c3 regional multispecialty, interdisciplinary medical education organization founded by physicians in 1906.

Mr. Glick works with the organization's leadership, members, and staff to accomplish SMA's mission to transform patient care through multidisciplinary, interprofessional educational activities. Mr. Glick also serves as the President of SMA Services Inc., a wholly owned subsidiary of the Southern Medical Association providing financial services and travel and tours services geared specifically toward the needs of healthcare professionals.

A graduate of the University of Phoenix, Mr. Glick earned his Bachelor of Science Degree in Business Management with a concentration in Project Management. He is also a Microsoft Certified Professional, earning his Microsoft Certified Systems Engineering certification in 2000. In addition, Mr. Glick is a member of the American Society of Association Executives.



Joan K. Lingen, MD, FACOG is a 1989 graduate of The Chicago Medical School, which she attended as an Armed Forces Health Professions Scholar. As a commissioned U.S. Navy Medical Corps officer, she trained at the Naval Hospital in San Diego, California and completed her internship and residency in Obstetrics and Gynecology. Her subsequent military assignments included being a staff physician at the U.S. Naval Hospital in Yokosuka, Japan and at the National Naval Medical Center in Bethesda, MD.

After working with the Mid-Atlantic Permanente Medical Group (Kaiser) in suburban Washington, DC and in a private practice occupational medical group in Virginia Beach, VA, she ultimately relocated to the Eastern Shore of Virginia in 2005 where she is currently the Clinical Director of the Franktown Community Health Center which is one of the 5 Federally Qualified Health Centers (FQHC) that make up the Eastern Shore Rural Health System, Inc.



Christopher R. Morris, MD is a board-certified rheumatologist with more than 15 years' experience, is in private practice in Kingsport, Tennessee at Arthritis Associates. A native of Springfield, Illinois, he attended medical school at Tulane University in New Orleans, Louisiana, and received his medical degree from the Universidad Autonoma de Guadalajara, Guadalajara, Jalisco, Mexico. He completed his Internship and Residency at the University of Tennessee Medical Center in Knoxville, and Rheumatology fellowship at the Medical College of Georgia in Augusta.

Before entering private practice, he was Clinical Assistant Professor of Medicine at East Tennessee State University in Johnson City, Tennessee, where he was involved in numerous research projects. He is an active member, Councilor for the state of Tennessee, and serves on several Education Design Groups for Southern Medical Association. He has served on four Committees for the American College of Rheumatology, most recently Rheumpac, which advocates for issues important to people with arthritic diseases, as well as the physicians who care for them.

He is married to Jane Alison Jackson Morris, and has two children Christopher Richard Jr. and Amanda Kathleen. His hobbies include being a life master in bridge, and Order of Merlin in the International Brotherhood of Magicians.



Kelly Rinehart, RN began her nursing career traveling the country working as an operating room nurse in a variety of settings. She later continued her education in risk management and quality and process improvement. Kelly worked for NORCAL for 7 years as Senior Risk Management Specialist and Interventionalist before forming her own company, Medical Risk Consulting, LLC.

Ms. Rinehart specialized in providing customized services for healthcare providers and organizations, with a focus on clinical risk management, culture training, lean healthcare coaching, disclosure of adverse event training, root cause analysis, and the evaluation and design of risk management and patient safety programs. She has consistently worked directly with physicians, nurses, administrators, and other medical staff, in both the acute care and ambulatory settings, to improve patient safety and increase efficiency. Her work has consisted of comprehensive risk assessments to determine process improvement opportunities, coaching and team building, and developing and implementing safety tools into the workplace.

As a popular speaker for physicians and medical staff alike, Ms. Rinehart has conducted Patient Safety Workshops for physicians in Oregon, Idaho, and Washington discussing issues such as Patient Handoffs, Disclosure of Adverse Events, and Claims Review Analysis. She returned to NORCAL in 2015 as a Senior Risk Management Specialist living in the Nashville, TN area and serving the southeast section of the country.



Andrew Urban, MD specializes in the comprehensive care of individuals with HIV infection and is a consultant in Adult Infectious Diseases. He is credentialed as a HIV Specialist through the American Academy of HIV Medicine. Dr. Urban is Chief of Infectious Diseases at the Wm. S. Middleton Memorial Veterans Hospital in Madison, Wisconsin. He is actively involved in continuing medical education as the Clinical Lead of the Office of Continuing Professional Development in Medicine and Public Health and undergraduate medical education as a course director in the second year curriculum. Dr. Urban is the recipient of numerous teaching awards for his work with housestaff and medical students.



Thad F. Waites, MD, FACC is a graduate of Mississippi College and University of Mississippi Medical Center. He trained at The University of Colorado and Emory University. He was a flight surgeon in the US Naval Reserve. He has practiced cardiology at Ochsner Clinic and at Forrest General Hospital. Dr. Waites was president of MS Affiliate of the American Heart Association as well as twice president of the SouthEast Affiliate. His main vocation now is as director of the cath lab at Forrest General. His main avocation is with the American College of Cardiology, where he is on the Board of Trustees and was Chairman of the Board of Governors. In addition, Dr. Waites is a Member of the Mississippi State Board of Health.



C. Wayne Weart, PharmD, FAPhA, FASHP, BCPS received his Bachelor of Science degree in Pharmacy in 1971 from the University of Georgia. He served his residency in Hospital Pharmacy at the Medical University Hospital in Charleston, SC in 1972. He completed his formal education by receiving his Doctor of Pharmacy degree from the Philadelphia College of Pharmacy and Science in 1974.

Dr. Weart is Professor Emeritus in the Department of Clinical Pharmacy and Outcome Sciences in the South Carolina College of Pharmacy, Medical University of South Carolina (MUSC), as well as Professor of Family Medicine in the College of Medicine, MUSC. Prior to his teaching at the Medical University, Dr. Weart instructed at West Virginia University in pharmacy and family medicine.

Since beginning his professional career, Dr. Weart has more than 100 publications and he has given scores of lectures to numerous professional groups and societies, to medical and house staffs at both West Virginia University and MUSC, and special presentations at national pharmacy and medical seminars across the country.



Mark S. Williams, MD, MBA, JD, CPE is the Chief Physician Executive for Tenet's Brookwood Baptist System in Birmingham, Alabama. He is the immediate past president of the Southern Medical Association. From 2008 to 2014 he served as the Chief Medical Officer of the North Mississippi Health System in Tupelo, Mississippi – the largest rural health care system in the United States and was the recipient of the 2012 National Malcolm Baldrige Award for Organizational Performance.

A graduate of the University of South Alabama School of Medicine, Dr. Williams completed his post-graduate training as the chief resident in the department of anesthesiology at the University of Alabama in Birmingham. He is formerly a member of the governor's Medicaid redesign committee and Healthcare Workforce committee in Mississippi, past board chairman of the Alabama Quality Assurance Foundation, and served as chief of staff of Carraway Methodist Medical Center from 2005 to 2007. From 2006 to 2008 he was the Chief Medical Officer for the St. Vincent's system in Birmingham, Alabama and chairman of Ascension Health's Physician Informatics Committee and Chair of Ascension's Task Force on Disclosure of Unanticipated Outcomes.

He is a 2001 graduate of the Alabama School of Law and a member of the Alabama State Bar. He completed the MBA program at Samford University in 1995 and is a former medical director for Alabama Power Company. He enjoys white water rafting in the wilds of Idaho and Montana. He and his wife Sandi have four children and one grandchild.

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.

Abstract Presenters

Appelbaum, Alan

May discuss use of lubricating gel as an intravaginal contrast medium

Bhogal, Sukhdeep

Cherukula, Madhavi

Ghimire, Nabodita D.

Harley, Susan E.

Jackson, Christopher

Moll, George W.

Pharo, Austin

Samuel, Jenifer

Savla, Daven J.

Shah, Vrushali

Sharma, Pralhad

Torres, Eliud

Verma, Ashish

Wisler, Ryan

Wyner, Lawrence M.

Glick, Randall E.

Kumar, Ajoy

Lingen, Joan K.

Morris, Christopher R.

Clinical Investigator: AbbVie

Rinehart, Kelly

Urban, Andrew

Off Label: May speak about medications that are off-label in reference to travel medicine and infectious diseases.

Waites, Thad F.

Weart, C. Wayne

Off Label: May discuss off-label use of new drugs, if questions are asked.

Williams, Mark S.

Assembly Planning Committee

Carmichael, Benjamin

Cotter, Jr., Clement

DiPette, Donald

Kruger, Robert

Lingen, Joan K.

Loftus, Loretta

Morris, Christopher R.

Shamieh, Fayez

Strode, Steven

Williams, Mark S.

Content Reviewers

Avery, Dave

Strode, Steven

Kumar, Ajoy

SMA Staff

Glick, Randall E.

Stone, Mandy

Invited Speakers

Boomershine, Chad

Speakers Bureau: Pfizer Inc for Lyrica and Embeda; Takeda Pharmaceuticals, Inc for Uloric and Colcrys. **Advisory Boards:** Vertical Pharmaceuticals, LLC for Lorzone; AstraZeneca for Zurampic. **Research Grants and Clinical Trials Work:** Luitpold Pharmaceuticals; Daichi Sankyo

Off Label: Off label use of non-opioid medications to treat chronic pain will be discussed along with the evidence for their efficacy.

Bourgeois, Gregory

Speakers Bureau: AbbVie

Off Label: Prednisone is used extensively off-label in dermatology for many different diseases and may be discussed.

**Session 1 – Recognizing and Managing Common
Dermatological Conditions**
Greg Bourgeois, MD

**Friday, November 4
7:15 – 8:15 am**

Description: Dermatology is a topic that often appears at the top of general practitioners educational needs, in part because they receive minimal dermatological training. In addition, skin is exposed for everyone to see and inadequacy on the part of a practitioner, either in diagnosis or management, is equally apparent to patient and doctor. This makes both parties uncomfortable and can lead to unnecessary referrals and poor care. Because skin lesions and disease are common complaints in everyday practice, and often the correct diagnosis can be elusive due to countless possibilities, common and uncommon but emergent skin disease should be recognizable. Many presenting symptoms overlap, and discrete identifiable factors for each disease can help aid in diagnosis and treatment. During this session, the use of images along with discussion will provide information about the latest in the treatment of commonly encountered skin diseases.

Learning Objectives: Upon completion, attendees should be able to:

- Recognize commonly encountered skin diseases;
- Identify dermatologic treatment options;
- Refer to a dermatologist when necessary.

References and Resources:

1. VisualDX Website: www.visualdx.com
2. Dermatology. 3rd ed. Ed. Bolognia, Jorizzo, and Schaffer. Elsevier, 2012

Lecture Notes

**Session 2 – Current Guidelines for Cervical Cancer Screening
and Management of Abnormal Results**
Joan K. Lingen, MD, FACOG

**Friday, November 4
8:15-9:15 am**

Description: The guidelines for routine cervical cancer screening and management of abnormal results have changed significantly in the last few years which has resulted in some confusion for both medical providers and patients. This session will review the current ACOG/ASCCP guidelines, the current data and rationale that resulted in these changes, and areas of ongoing management controversy.

Learning Objectives: Upon completion, attendees should be able to:

- Apply the current ACOG/ASCCP guidelines for age based routine cervical cancer screening
- Recognize screening results, based on current ACOG/ASCCP guidelines;
- Define the rationale for recent changes and the areas of ongoing management controversy.

References and Resources:

1. ACOG Practice Bulletin Number 131, November 2012: Screening for Cervical Cancer
2. ACOG Practice Bulletin Number 140, December 2013: Management of Abnormal Cervical Cancer Screening Test Results and Cervical Cancer Precursors
3. ASCCP Management Guidelines: <http://www.asccp.org/asccp-guidelines>

Lecture Notes

**Session 3 – (Part 1): Health Literacy: Making Patients
Safer Through Understanding**
Kelly Rinehart, RN

**Friday, November 4
9:15-10:15 am**

Description: The gaps in provider knowledge, competence, and performance that underlie this course are supported by the literature regarding *low patient literacy* and *lack of culturally competent healthcare*. Both problems create barriers between providers and patients that can result in disparities, poor patient outcomes, and professional liability claims.

A subjective analysis of NORCAL claims has revealed the need for providers to become more culturally and linguistically competent so as to increase patient safety and reduce malpractice risk exposure. The cases presented in this course are accompanied by risk management recommendations that, if implemented, will increase physician competence to respond appropriately to cultural, linguistic, and literacy differences between healthcare providers and their patients.

Learning Objectives: By reviewing the cases presented in this course and implementing the risk management recommendations, participants will increase their cultural and linguistic competence and be able to:

- Assess each patient interaction for health literacy barriers to effective communication
- Integrate appropriate communication skills to enhance your communication with patients when barriers to effective communication are identified
- Apply various techniques for educating patients and confirming their understanding of health information provided by you, including your recommendations for treatment

Lecture Notes

Session 4 – Abstract Presentations

Friday, November 4
10:30 am – 12:30 pm

Time	Title	Presenter
10:30 am	Welcome and Introductions	Ajoy Kumar, MD
10:32	<i>Medicine & Medical Specialties</i> Demyelinating Thalamic Lesion Presenting with Symptomatic Paroxysmal Hemidystonia	Vrushali Shah, MD
10:44	<i>Medicine & Medical Specialties</i> A Rare Case of Non Compaction Cardiomyopathy	Sukhdeep Bhogal, MD
10:56	<i>Medicine & Medical Specialties</i> Outcomes of Empyema Management with Intrapleural tPA and Dnase	Madhavi Cherukula, MD
11:08	<i>Medicine & Medical Specialties</i> PPI and Nephropathy: An Uncommon Diagnosis Related to a Common Medication. A Case Report and Review	Nabodita D. Ghimire, MD
11:20	<i>Medicine & Medical Specialties</i> A Rare Case of Blastic Plasmacytoid Dendritic Cell Neoplasm with Aberrant Immunophenotypic Profile and Unusual Cytogenetics	Susan E. Harley, MD
11:32	<i>Medicine & Medical Specialties</i> When Statins Get Physical	Christopher Jackson, MD
11:44	<i>Medicine & Medical Specialties</i> Diagnosis of Synovial Sarcoma in Patient with an Inferior Vena Cava Mass	Jenifer Samuel, MD
11:56	<i>Medicine & Medical Specialties</i> A Case of Hansen’s Disease Masquerading as Sarcoidosis	Daven J. Savla, MD
12:08 pm	A Persistent Cough That Won’t Go Away?	Pralhad Sharma, MD
12:20	Discussion, Questions, and Answers	All Speakers
12:30	Break	

Abstract Presentations – Notes

Needs Statement and Practice Gap: Although a great way to get away and discover what's new, CME activities rarely address the specific needs of healthcare providers. Healthcare providers who continuously examine their practice/departments for deficiencies, identify areas for improvement, and then share these needs with their associations can together develop educational activities that solve problems. Problems related to office procedures for staff, specific patient populations, or broader system-based or community wide problems can all be solved through the development of education. By viewing associations as clinical team members, and including them in problem solving, a continuous quality improvement cycle can be established - one that delivers better quality and more profitable healthcare services.

Learning Objectives: Upon completion, attendees should be able to:

- See the importance of continuing education...not just for licensure but also as a means to solving problems resulting in better quality of care that is also more profitable;
- See accredited medical associations and their staff as clinical team members, and begin including them in problem solving;
- Implement continuous improvement programs within their practice as a means to improving patient care and practice profitability.

Lecture Notes

Session 6 – Abstract Presentations

Friday, November 4
1:45-3:15 pm

Time	Title	Presenter
1:45 pm	<i>Medicine & Medical Specialties</i> Reversible Cerebral Vasoconstriction Syndrome	Ryan Wisler, MD
1:57	<i>Medicine & Medical Specialties</i> It is Not a Contaminant! A Case of Lactobacillus Gasseri Bacteremia with Lumbar Osteomyelitis, Epidural, and Paraspinal Abscesses	Eliud Torres, MD
2:09	<i>Medicine & Medical Specialties</i> A Bilateral Facial Nerve Paralysis: A Diagnostic Challenge	Ashish Verma, MBBS
2:21	<i>Surgery & Surgical Specialties</i> Ipilimumab Induced Orbital Myopathy in a Euthyroid Patient	Austin Pharo, MD
	Physicians-in-Training Competition Concludes	
2:33	<i>Public Health & Environmental Medicine</i> NFL Football, the Game Itself, Sets BMI Limits That Can Guide Healthier Public High School Football Participation	George W. Moll, MD
2:45	<i>Public Health & Environmental Medicine</i> A Hundred Years of Penile Mayhem from Zippers	Lawrence M. Wyner, MD
2:57	<i>Women's & Children's Health</i> Vaginal Anatomy on MRI – New Information Obtained Using Distention	Alan Appelbaum, MD
3:09	Discussion, Questions, and Answers; and Announcement of Physicians-in-Training Competition Winners	Ajoy Kumar, MD
3:15	Break	

Abstract Presentations – Notes

**Session 7A – (Part 2): Cultural Competency: Making Patients
Safer Through Understanding**
Kelly Rinehart, RN

**Friday, November 4
3:30-4:30 pm**

Description: The gaps in provider knowledge, competence, and performance that underlie this course are supported by the literature regarding *low patient literacy* and *lack of culturally competent healthcare*. Both problems create barriers between providers and patients that can result in disparities, poor patient outcomes, and professional liability claims.

A subjective analysis of NORCAL claims has revealed the need for providers to become more culturally and linguistically competent so as to increase patient safety and reduce malpractice risk exposure. The cases presented in this course are accompanied by risk management recommendations that, if implemented, will increase physician competence to respond appropriately to cultural, linguistic, and literacy differences between healthcare providers and their patients.

Learning Objectives: By reviewing the cases presented in this course and implementing the risk management recommendations, participants will increase their cultural and linguistic competence and be able to:

- Respond to challenges that may emerge when working with a culturally, linguistically and literacy diverse populations.
- Apply strategies to reduce communication barriers with limited English speaking patients in your practice.
- Make your practice comfortable for the LGBTQI population.

Lecture Notes

<p>Session 7B – Tips That Can Help You Successfully Publish Your Manuscript</p> <p>Jennifer Price, MA</p>	<p>Friday, November 4</p> <p>3:30-4:30 pm</p>
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<p>Session 7B – Tips That Can Help You Successfully Publish Your Manuscript</p> <p>Jennifer Price, MA</p>	<p>Friday, November 4</p> <p>3:30-4:30 pm</p>
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Description: Join 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

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**Session 8 - Choosing Wisely: Recommendations for
Appropriate Labs and Testing in Adult
and Pediatric Rheumatology Patients**
Christopher R. Morris, MD

**Friday, November 4
4:30-5:30 pm**

Description: As healthcare costs strain federal and state budgets and threaten the long-term fiscal health of the US, increasing attention is focused on healthcare quality, affordability, and value. Policymakers, payers, and health systems face considerable challenges in controlling healthcare spending while ensuring the highest quality care. Recently, the medical profession has been called on to more actively inform these efforts by drawing attention to potentially wasteful healthcare spending. In 2011, the American Board of Internal Medicine (ABIM) Foundation embarked on the Choosing Wisely campaign, inviting medical professional societies to construct a list of five tests, treatments, or services that are commonly used in that specialty but whose usefulness should be reevaluated by patients and clinicians. This session will review the five recommendations of the American College of Rheumatology regarding the appropriate use of laboratory and imaging studies and medication use and monitoring. As a result, inappropriate laboratory and radiographic studies might be avoided, resulting in more efficient management of adults and children with arthritic disease.

Learning Objectives: Upon completion, attendees should be able to:

- Utilize appropriate laboratory studies to assess patients with musculoskeletal complaints;
- Avoid ordering tests that are not indicated by the patient's symptomatology;
- Select the correct tests and studies to monitor patients with arthritic diseases.

References and Resources:

1. Yaxzdany et al. Choosing Wisely: The American College of Rheumatology's Top 5 List of Things Physicians and Patients Should Question. *Arthritis Care & Research*, Vol. 65, No. 3, March 2013, pp 329–339
http://www.rheumatology.org/Portals/0/Files/AC_R%20Article_Choosing%20Wisely%20The%20ACR's%20Top%205%20List%20of%20Things%20Physicians%20and%20Patients%20Should%20Question.pdf
2. ROUSTER-STEVENS et al. Choosing Wisely: The American College of Rheumatology's Top 5 for Pediatric Rheumatology. *Arthritis Care & Research*. Vol. 66, No. 5, May 2014, pp 649–657
http://www.rheumatology.org/Portals/0/Files/AC_R%20Article%20Peds%20Choosing%20Wisely%20Top%205.pdf

Lecture Notes

Andrew Urban, MD

Saturday, November 5
7:00-8:00 am

Description: According to the CDC, more than 1 billion travelers worldwide crossed international borders, yet very few individuals seek pre-travel health advice. Further, post-travel-associated medical concerns are becoming more complex requiring more medical knowledge and post-travel precautions. In this lecture, we will use a case-based format to emphasize the approach to pre-travel consultation and develop an organized approach to vaccines, malaria prevention, Zika virus concerns, and traveler's diarrhea. Certain post-travel high-risk situations will be discussed.

Learning Objectives: Upon completion, attendees should be able to:

- Describe the approach to pre-travel immunizations;
- Identify a good resource to use for pre-travel consultation;
- Examine high-risk situations that mandate prompt decision making for the returning traveler.

References and Resources:

1. Vaccines. Medicine. Advice. <http://wwwnc.cdc.gov/travel>

Lecture Notes

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Session 10 – The RUC & Also MACRA, FYI
Thad F. Waites, MD, FACC

Saturday, November 5
8:00 – 9:00 am

Description: Beginning in 2019, the Centers for Medicare and Medicaid Services (CMS) will implement a new two-track reimbursement system under which providers will be rewarded for delivering high-quality, cost-effective care and encouraged to shift toward alternative payment methodologies, referred to as the Medicare Access and CHIP Reauthorization Act (MACRA). Because changes will have a major impact on physician organizations and other Medicare providers, it is important for providers to understand what to expect over the next few years as payment reform changes the face of Medicare.

The AMA advocates for fair and accurate valuation for all physician services within the Resource-Based Relative Value Scale (RBRVS). To ensure that physician services across all specialties are well-represented, the AMA established the AMA/Specialty Society Relative Value Scale Update Committee (RUC). The RUC makes recommendations regarding valuation for new and revised Common Procedural Terminology (CPT) codes to the CMS. Providers need a better understanding of the RUC process and how payment for procedures are determined. This lecture will explain how CPT codes are developed and then how RVUs (Relative Value Work Units) are developed from the codes and ultimately how a medical provider is paid.

Learning Objectives: Upon completion, attendees should be able to:

- Recognize the RUC process and how payment for a procedure is determined;
- Describe the massive new law that is beginning to collect data now and that will determine the majority of Part B Medicare payment going forward.

References and Resources:

1. H.R.2 – medicare Access and CHIP Reauthorization Act of 2015
<https://www.congress.gov/bill/114th-congress/house-bill/2/text>
2. The RVS Update Committee
<http://www.ama-assn.org/ama/pub/physician-resources/solutions-managing-your-practice/coding-billing-insurance/medicare/the-resource-based-relative-value-scale/the-rvs-update-committee.page>
3. How MACRA, MIPS, AND APMs will impact your Medicare Payments
<http://ablehealth.com/2016/01/25/how-macra-mips-and-apms-will-affect-your-medicare-payments/>
4. The triple aim must turn into the quadruple aim. Here's why.
www.kevinmd.com/blog/2016/01/triple-aim-must-turn-quadruple-aim-heres.html

Lecture Notes

Session 11 – Cases from the Beeper: Great Questions and Teachable Moments from the World of Infectious Diseases

Andrew Urban, MD

Saturday, November 5
9:00 – 10:00 am

Description: Healthcare providers are becoming more involved than ever in managing complicated infectious diseases, medical experts say. Contributing to that change is the fact that there are too few infectious disease specialists to meet the nation's demand, particularly in rural areas. Another factor is improved treatment that extends the lives of people with diseases such as HIV. As a result, more doctors are treating chronic conditions in patients with complex communicative illnesses. Physicians face challenges as they take on this expanded role; these challenges include limited time for office visits and little specialized training in infectious diseases. Complicating matters: growing antibiotic resistance and a lack of new antimicrobials to work against one of the nation's most serious health threats — gram-negative bacteria, which are resistant to all available antibiotics. This highly interactive case-based session will provide the learner with practical information, guideline recommendations, updates, and best practices about treatment strategies and new diagnostic tests, along with recommendations for incorporating these updates into practice.

Learning Objectives: Upon completion, attendees should be able to:

- Understand the importance of early recognition and appropriate empiric therapy of Anaplasma/Ehrlichia infections;
- Discuss the workup when a patient on biologic therapy presents with pneumonia;
- Demonstrate the approach to a patient with recurrent furunculosis and cellulitis;
- Understand the approach to drug-drug interactions with HIV antiretrovirals.

References and Resources:

1. Amednews.com (American Medical News): Infectious diseases weigh on primary care (ACP annual meeting)
<http://www.amednews.com/article/20130513/health/130519971/4/>

Lecture Notes

Session 12 – Consistency, Quality and Cost - Why Reducing Variability in Health Care Matters

Mark S. Williams, MD, MBA, JD, CPE

Saturday, November 5
10:45 – 11:45 am

Description: While medicine is generally considered a scientific discipline, there are often wide variations in how this science is practiced. Clinical outcomes may be affected by this variation as well as the costs of care and potential adverse effects. In this presentation, examples of care variation will be presented along with potential impacts on quality, cost, and patient safety. This is not meant to suggest that variation is an aspect to be eliminated, but more simply to recognize that it takes place and that an understanding of the impact of variation can lead to better care at lower costs.

Learning Objectives: Upon completion, attendees should be able to:

- Recognize that large-scale opportunities exist to reduce variation in care and, at the same time, foster improved outcomes;
- Identify resources that will help identify variations in care both at a local and a national level;
- Discuss and implement initiatives to foster standardization when appropriate;
- Gain an understanding of how reduction of care variation and innovation are related.

References and Resources:

1. Report of the Task Force on Variation in Health Care Spending, American Hospital Association, 2011
2. Working in Concert: A How-To Guide to Reducing Unwarranted Variations in Care, California Healthcare Foundation, Sept 2014
3. Clinical Variation in Your Medical Organization
<https://www.healthcatalyst.com/role-clinical-variation-medical-practice>

Lecture Notes

**Session 13 – Lunch Session – Prescribing
Controlled Substances**
Chad Boomershine, MD, PhD

**Saturday, November 5
12:00-2:00 pm**

Description: Opioid abuse and misuse have reached epidemic proportions in the US. To address this, states and the federal government have published new guidelines for prescribing opioids for patients with chronic pain and have required physicians to receive instruction in prescribing opioids. Providers who prescribe controlled substances need to know how to apply the current guidelines, guidance related to prescribing adjuvant non-opioids for managing chronic pain, and strategies to work interprofessionally with all members of the healthcare team to address the issue. This lecture will summarize the US opioid epidemic and review recent guidelines issued by the Centers for Disease Control and Prevention and the State of Tennessee Department of Health. It will then offer advice on the use of adjuvant non-opioid medications for the management of chronic pain.

Learning Objectives: Upon completion, attendees should be able to:

- Follow guidelines for prescribing opioids for the management of chronic pain;
- Prescribe adjuvant non-opioids for the management of chronic pain.

References and Resources:

1. Tennessee Chronic Pain Guidelines
<https://www.tn.gov/assets/entities/health/attachments/ChronicPainGuidelines.pdf>
2. CDC Guideline for Prescribing Opioids for Chronic Pain – United States, 2016
<http://www.cdc.gov/mmwr/volumes/65/rr/pdfs/rr6501e1er.pdf>
3. Adjuvant Nonopioid Medications for Managing Chronic Pain. Chad S. Boomershine, MD, PhD
<http://docplayer.net/11203145-Adjuvant-nonopioid-medications-for-managing-chronic-pain-chad-s-boomershine-md-phd.html>

Lecture Notes

Session 14 – New Drugs Update
C. Wayne Weart, PharmD, FAPhA, FASHP, BCPS

Saturday, November 5
2:00 – 3:00 pm

Description: The FDA has approved many changes to existing medications that need to be appreciated, especially as they relate to potential risks, side effects, drug-drug interactions, as well as expanded FDA-approved indications which may not be widely known by the audience. Gaps primarily exist because the busy primary care provider does not have sufficient time to keep up with all the recent changes including new medications, new data on existing medications, FDA label changes, and CDC changes in immunizations schedules that may impact the care of patients. With more education, the physician is able to make an appropriate, evidence-based evaluation of patient-specific drug therapy to maximize patient outcomes while avoiding or minimizing risks and being aware of the costs. This session will provide new, updated, clinically relevant, and where available, evidence-based information of newly approved medications by the FDA as well as updated medications safety information from the FDA in addition to a review of the new information from the ACIP and CDC concerning immunizations. It will also review the current clinical guidelines that discuss the related medications, as well as provide cost information where available.

Learning Objectives: Upon completion, attendees should be able to:

- Discuss the FDA Warnings and label changes that relate to medication safety and how this information should be applied in the selection and monitoring of evidence-based pharmacotherapy to achieve better patient related outcomes;
- Describe the 2016 updated ACIP/CDC Immunization recommendations and new FDA approved vaccines;
- Describe the current information concerning newly FDA approved medications (pharmacology, pharmacokinetics, efficacy and safety data, drug interactions, dosing, monitoring, and cost) in the selection of evidence-based pharmacotherapy.

References and Resources:

1. ACIP and CDC MMWR Reports
2. FDA Drug Safety Reports
3. New Focused Update by AHA/ACC/HFSA on Reduced EF Heart Failure 2016

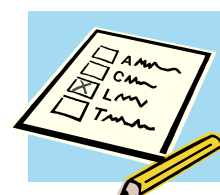
Lecture Notes

Poster Presentations View Posters in the Hospitality Area		Friday, November 4 and Saturday, November 5
POSTER #	TITLE	PRESENTER
<i>Medicine & Medical Subspecialties</i>		
P-1	An Unusual Cause of Pleural Effusion: Yellow Nails Syndrome – A Case Report	Emad Alkhankan, MD
P-3	Not a Straight Forward Atrioventricular (AV) Node Ablation	Ahmed Amro, MD
P-4	Atrial Fibrillation with Accessory Pathway in a Middle-Aged Patient	Ahmed Amro, MD
P-5	Brugada Syndrome Unmasked by Viral Pharyngitis	Ahmed Amro, MD
P-6	Incidental Finding of a Left Ventricular Apical Diverticulum in a Patient with Chest Pain and Elevated Cardiac Enzymes	Christopher I. Jones, MD
P-7	A Case of Left Atrial Sarcoma Presenting with Mitral Valve Obstruction and Left Heart Failure	Eric Arguelles, MD
P-8	Maybe It's Not Psoriasis: Cutaneous B cell Lymphoma & Mycoses Fungoides with Ocular Involvement	Teera Crawford, MS
P-10	Atrial Myxoma as an Incidentaloma – A Conservative Approach	Saeeda Fatima, MBBS
P11	A Rare Presentation of Supracristal VSD in 81 Year Old	Saeeda Fatima, MBBS
P-12	Presentation of Aortic Stenosis in a Young Patient with Bicuspid Aortic Valve	Saeeda Fatima, MBBS
P-13	Idiopathic Giant Bullous Emphysema Masquerading as a Spontaneous Pneumothorax	Utsav Hanspal, MD
P-14	Unexplained Hyperbilirubinemia in Patient with Sickle Cell Disease	Vernisha Hearn, MS
P-15	Rituximab Monotherapy in the Management of a Rare Case of an HIV Associated Lymphoproliferative Disorder	Jason Hew, MD
P-16	ALK Gene Mutated Non-Small Cell Lung Cancer in Trisomy 21	Jason Hew, MD
P-17	New Onset Atrial Fibrillation in a Young Male Associated with Energy Drink Consumption	Trevanne Matthew Hew, MD
P-18	Neurogenic Stunned Myocardium Following Acute Subarachnoid Hemorrhage	Abdul Ahad Khan, MD
P-19	Swimmer's Shoulder: Rotator Cuff, Labrum, or Something Else?	Scotty Newcomer, DO

POSTER #	TITLE	PRESENTER
P-20	Response to Obinutuzumab/Chlorambucil in a Elderly Patient with B-cell Prolymphocytic Leukemia	Vinay Minocha, MD
P-21	Neither Fish, Nor Flesh, Nor Good Red Herring: An Uncommon Presentation of a Common Symptom	Nusrat Mujib, MD
<i>Mental Health</i>		
P-29	An Evidence Based Review of Early Intervention and Prevention of Posttraumatic Stress Disorder	Bridgette Martinak, MD
P-30	Combined ECT and Clozapine in an Acutely Psychotic Patient with Treatment Resistant Schizophrenia	Ruth Rayikanti, MD
P-31	Foreign Accent Syndrome (FAS) Presenting as Conversion Disorder: A Rare Presentation	Abhishek Reddy, MD
P-32	Catatonic Schizophrenia: Early Recognition of an Unusual Presentation	Christiana Wilkins, MD
<i>Women's & Children's Health</i>		
P-33	Obstructive Uropathy as a Cause of Acute Renal Failure in Active Stage of Labor	Diego Barbara, MD

Attention Professional Registrants

Don't forget to **cast your vote** for
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**.

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.



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/2016_AnnualScientificAssembly_CMEForm_Evaluation

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):

- ☐ To improve clinical skills
- ☐ To improve interpretive and diagnostic skills
- ☐ To acquire new information on the subject
- ☐ To review the subject
- ☐ To meet CME requirements

Did the conference meet your expectations

(confirming your reason to register)?

__Yes __ No,

Please Explain: _____

How might the format of this activity be improved in order to be most appropriate for the content presented (check all that apply):

- ☐ Include more case-based presentations
- ☐ Add breakouts for subtopics
- ☐ Add a hands-on instructional component
- ☐ Schedule more time for Q&A
- ☐ Format was appropriate; no changes needed
- ☐ Other: Tell us your ideas for the program format: _____

As a result of my participation in this activity, the **ONE** most likely change/new strategy I will implement in my practice is: (Select only ONE response)

- ☐ Modify treatment plans
- ☐ Change my screening and prevention practice
- ☐ Incorporate different diagnosis strategies into patient evaluation
- ☐ Use alternative communication methodologies with patients and families
- ☐ Implement new documentation procedures to improve efficiency and accuracy of business practice
- ☐ Use systems-based resources for improved quality of care
- ☐ Improve the structure and operations of my practice to address healthcare reform cost containment and other regulatory issues
- ☐ None – This conference validated current practices
- ☐ Other: _____

Was the information provided practical and applicable to your practice? __Yes __ No.

Please explain: _____

Did you perceive commercial bias/influence at any point during this conference? __Yes __ No

If yes, please provide detail including the speaker and situation.

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.

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)

Chad S. Boomershine, MD, PHD	1	2	3	4	5	6	7	8	9	10
Gregory Bourgeois, MD	1	2	3	4	5	6	7	8	9	10
Randall E. Glick, BSB/PM, MCP	1	2	3	4	5	6	7	8	9	10
Joan K. Lingen, MD, FACOG	1	2	3	4	5	6	7	8	9	10
Christopher R. Morris, MD	1	2	3	4	5	6	7	8	9	10
Kelly Rinehart, RN	1	2	3	4	5	6	7	8	9	10
Andrew Urban, MD	1	2	3	4	5	6	7	8	9	10
C. Wayne Weart, PharmD	1	2	3	4	5	6	7	8	9	10
Mark S. Williams, MD, MBA, JD, CPE	1	2	3	4	5	6	7	8	9	10

Faculty Comments

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



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