



*Intensive Review of*  
**PEDIATRIC**  
**ANESTHESIA**

**May 30 - June 1, 2014**

*Hyatt Regency DFW International Airport • Dallas, TX*

A three-day course designed for the anesthesiologist  
seeking a comprehensive review  
of pediatric anesthesiology!

For details and registration information, please visit

**[WWW.PEDSANESTHESIA.ORG](http://WWW.PEDSANESTHESIA.ORG)**



Paul J. Samuels, MD  
Program Chair

Welcome to the Society for Pediatric Anesthesia's 2014 Intensive Review of Pediatric Anesthesia. This three-day symposium is designed to review the theory and practice of pediatric anesthesiology. Lectures will provide an extensive overview of the specialty, reinforcing the basic sciences, core physiologic principles, and clinically applicable concepts, including **revised and expanded** cardiac, ENT, pain, and neonatal content. We have assembled a renowned group of faculty educators from our nation's premier teaching programs for this comprehensive synopsis of pediatric anesthesiology. We look forward to seeing you in Dallas.

Paul J. Samuels, MD  
Program Chair

Samuel Wald, MD, MBA  
Program Co-Chair



Samuel Wald, MD, MBA  
Program Co-Chair

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## Education Mission Statement

The Intensive Review of Pediatric Anesthesia is designed for the anesthesiologist seeking a comprehensive review of Pediatric Anesthesiology. The course will provide a broad synopsis of contemporary Pediatric Anesthesiology that will consolidate the knowledge and enhance the clinical practice of the attendee.

## Scope & Types of Activities

This three-day symposium offers an in-depth review of current concepts in pediatric anesthesiology. Lectures will combine basic science, core physiologic and pharmacologic principles, and clinically applicable concepts. Course participants will receive an extensive overview of important topics and disciplines in pediatric anesthesiology including: Cardiac Anesthesia; Neonatal Anesthesia; Pediatric Pain; Pediatric ENT; Pediatric Orthopedics and Neurosurgery; Pediatric Preoperative Assessment; and Complications of Pediatric Anesthesia.

## Target Audience

The Intensive Review of Pediatric Anesthesia is designed for the anesthesiologist seeking a comprehensive review of Pediatric Anesthesiology.

## Accreditation & Designation

The Society for Pediatric Anesthesia is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The Society for Pediatric Anesthesia designates this Live activity for a maximum of 16 *PRA Category 1 Credit(s)*<sup>™</sup>. Physicians should only claim credit commensurate with the extent of their participation in the activity.

## Americans With Disabilities Act (ADA)

The Society for Pediatric Anesthesia has fully complied with the legal requirements of the ADA and the rules and regulations thereof. If any participant in this educational activity is in need of accommodations, please contact SPA at (804) 282-9780 in order to receive service.

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CONVENIENT ONLINE REGISTRATION FOR

# INTENSIVE REVIEW OF PEDIATRIC ANESTHESIA!

Visit [www.pedsanesthesia.org](http://www.pedsanesthesia.org) to register for the meetings and to make your hotel reservations online.

**[www.pedsanesthesia.org](http://www.pedsanesthesia.org)**

**Member Registration: \$795 Early; \$895 Late**

**Non-Member Registration: \$895 Early; \$995 Late**

Printed syllabus: \$50 (Not included with your registration) Order deadline is May 9, 2014

All registrants will receive access to online syllabus materials.

# Scientific Program

## FRIDAY, MAY 30, 2014

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- 4:00-7:00 pm Registration**
- 7:00-7:15 pm Welcome and Introduction**  
Paul J. Samuels, MD
- 7:15-8:00 pm Primer in Pediatric Pharmacology**  
Samuel Wald, MD, MBA
- 8:00-8:45 pm Pediatric Orthopedics/Trauma/Burns**  
Julie J. Niezgoda, MD
- 8:45-9:30 pm Neonatal Surgery**  
Paul J. Samuels, MD
- 9:30-9:45 pm Experts Panel**

## SATURDAY, MAY 31, 2014

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- 7:00-8:00 am Continental Breakfast**
- 8:00-8:45 am Neurosurgery and Spine Surgery**  
Julie J. Niezgoda, MD
- 8:45-9:30 am Cardiac 1: Transitional Circulation, Shunts**  
Emad B. Mossad, MD
- 9:30-10:00 am Cardiac 2: Complex Shunts**  
Susan R. Staudt MD, MEd
- 10:00-10:15 am Experts Panel**
- 10:15-10:30 am BREAK**
- 10:30-11:00 am Cardiac 3: Obstructive Lesions**  
Emad B. Mossad, MD
- 11:00-11:30 am Pediatric Anesthesia Equipment and Monitoring**  
Ann G. Bailey, MD
- 11:30 am-12:15 pm Pediatric Airway/ENT**  
Samuel Wald, MD, MBA
- 12:15-12:30 pm Experts Panel**
- 12:30-1:15 pm LUNCH**
- 1:15-1:45 pm Hematology/Oncology for the Pediatric Anesthesiologist**  
Ann G. Bailey, MD
- 1:45-2:30 pm Genetic and Metabolic Disease**  
Rosalie Tassone MD, MPH

- 2:30-3:00 pm Sedation and General Anesthesia for Children Outside the OR**  
Samuel Wald, MD, MBA
- 3:00-3:15 pm Experts Panel**
- 3:15-3:30 pm BREAK**
- 3:30-4:00 pm Cardiac 4: Cardiac Cath, TX, Pulm HTN, CPB**  
Emad B. Mossad, MD
- 4:00-4:30 pm Cardiac 5: Cardiac for Non-Cardiac Surgery**  
Susan R. Staudt, MD, MEd
- 4:30-5:15 pm Pediatric PALS/NALS**  
James J. Fehr, MD
- 5:15-5:30 pm Experts Panel**

## SUNDAY, JUNE 1, 2014

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- 7:00-8:00 am Continental Breakfast**
- 8:00-8:45 am Pediatric Pain: Acute and Chronic**  
Steven J. Weisman, MD
- 8:45-9:30 am Essentials of Regional Anesthesia**  
Steven J. Weisman, MD
- 9:30-9:45 am Experts Panel**
- 9:45-10:00 am BREAK**
- 10:00-10:45 am Pre-Operative Assessment and Optimization**  
David Robinowitz, MD
- 10:45-11:30 am Abdominal, GI and GU Surgery**  
James J. Fehr, MD
- 11:30-11:45 am Experts Panel**
- 11:45 am-12:30 pm LUNCH**
- 12:30-1:00 pm Complications of Pediatric Anesthesia**  
Rosalie Tassone MD, MPH
- 1:00-1:45 pm Neonatal Physiology for the Anesthesiologist**  
David Robinowitz, MD
- 1:45-2:00 pm Experts Panel**
- 2:00 pm Adjourn**

## Faculty

### Ann G. Bailey, MD

University of North Carolina  
Chapel Hill, NC

### James J. Fehr MD

Washington University in St. Louis  
St. Louis, MO

### Emad B. Mossad, MD

Texas Children's Hospital  
Houston, TX

### Julie J. Niezgoda, MD

Cleveland Clinic Foundation  
Cleveland, OH

### David Robinowitz MD

University of California  
San Francisco  
San Francisco, CA

### Paul J. Samuels, MD

Cincinnati Children's Hospital  
Cincinnati, OH

### Susan R. Staudt wMD, MEd

Medical College of Wisconsin/Children's  
Hospital  
Milwaukee, WI

### Rosalie Tassone MD, MPH

University of Illinois at Chicago  
Chicago, IL

### Samuel Wald MD, MBA

Stanford University  
Stanford, CA

### Steven J. Weisman, MD

Medical College of Wisconsin  
Children's Hospital  
Milwaukee, WI

# Intensive Review of **PEDIATRIC ANESTHESIA**

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## PROGRAM REGISTRATION FORM

If paying by check, please make checks payable to **SPA** and mail to:  
2209 Dickens Road, Richmond, VA 23230-2005; Phone: (804) 282-9780; Fax: (804) 282-0090; e-mail: spa@societyhq.com

PLEASE PRINT OR TYPE

Name \_\_\_\_\_ Degree \_\_\_\_\_ First Name for Badge \_\_\_\_\_  
Last First MI

Preferred Mailing Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_ Email Address\* \_\_\_\_\_

Office Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Fax # \_\_\_\_\_

**\*E-mail required for registration confirmation.**

	Through 5/9/14	After 5/9/14	
<input type="checkbox"/> SPA Member	\$795	\$895	= \$ _____
<input type="checkbox"/> Non-Member	\$895	\$995	= \$ _____
<input type="checkbox"/> Printed Syllabus	\$50	N/A	= \$ _____
<i>NOT included with your registration. All registrants will receive access to online materials.</i>			
<input type="checkbox"/> SPA Patient Safety Education and Research Fund Donation <sup>†</sup> (\$50 is suggested)			= \$ _____
<b>Meeting Total:</b>			= \$ _____

<sup>†</sup>The SPA is a 501(c) 3 organization and your donations are tax deductible as allowed by law. All voluntary contributions will be acknowledged.

I wish to receive membership information for:  **SPA**  **CCAS**  **SPPM**  
 How did you hear about the meeting?  Website  Printed Program  Postcard Mailing  
 Word of mouth  ASA Calendar of Meetings  Other \_\_\_\_\_

**If applying for SPA Membership, please complete Membership Application, and send with this Registration Form to:**

**SPA, 2209 Dickens Road, Richmond, VA 23230-2005** (Credit Card payments may be faxed to 804-282-0090.)

Personal Check  VISA  MasterCard  American Express  Discover

Card No \_\_\_\_\_ CVV Code: \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_ Printed Name on Card \_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_ Credit Card Zip Code: \_\_\_\_\_

**Refund Policy:** Full refund through April 25, 2014; 50% refund from April 26 - May 9, 2014; no refunds after May 9, 2014. Refunds will be determined by date **written** cancellation is received.

**IF YOU DO NOT RECEIVE A CONFIRMATION E-MAIL FROM THE SPA WITHIN 30 DAYS OF SUBMITTING YOUR REGISTRATION, PLEASE CALL/EMAIL THE OFFICE TO CONFIRM THAT YOUR REGISTRATION MATERIAL HAS BEEN RECEIVED.**