

**5th Annual Transplantation Symposium
Optimizing Kidney Transplant Outcomes
Friday, October 13, 2017**

Registration Payment Information

Registration forms will not be processed without payment. Online registration requires credit card payment. Make check payable to OCME IFR 900051. The registration deadline is Wednesday, October 11, 2017.

Please indicate payment method:

Credit Card Check

Total Amount _____

Credit Card

We accept the following credit cards:

Visa MC Discover

Card # _____

Expiration Date _____

Zip Code _____

Print name as it appears on the card

Signature _____

I hereby authorize SUNY Downstate Medical Center to charge my credit card for the amount indicated above.

For additional information or questions, please phone 718.270.2422 or e-mail ocme@downstate.edu.
Fax Number: 718.270.4563.

Please mail the check and this form back to us in a stamped envelope to:

SUNY Downstate Medical Center
The Office of Continuing Medical Education
450 Clarkson Avenue, Box 1244
Brooklyn NY 11203

Cancellation Policy

Refunds will be granted for requests received in writing prior to October 11, 2017, 11:59 p.m. ET. Fax written requests to 718-270-4563. Refunds will be processed after the meeting. After October 11, 2017 all sales are final.

PROGRAM DESCRIPTION

Kidney transplantation is a rapidly evolving field of medicine and relies on dissemination of emerging evidence to all providers involved in the care of transplant candidates. Critical evaluation of new evidence is needed to understand the implications to local practice. Accurate identification of barriers to implementation of best practices also facilitates acceptance of new advances by practitioners. The symposium fulfills these needs by creating a forum for exchange of ideas between local practitioners, patient organizations, community leaders, and renowned experts.

TARGET AUDIENCE

This symposium is designed to enhance knowledge, competence and performance of transplant surgeons, transplant coordinators, nephrologists, nephrology fellows, and other dialysis care providers.

OBJECTIVES

Upon completion of this educational activity, participants should be able to:

- Understand different approaches to evaluation of cardiovascular risk in kidney transplant candidates
- Discuss recent advances in donor management, organ preservation, and treatment of chronic viral hepatitis
- Understand advantages and disadvantages of different immunosuppressive regimens
- Apply best practices in the diagnosis and management of complications of immunosuppression
- Identify barriers to referral for and transplantation with pancreas transplants.

ACCREDITATION & DESIGNATION STATEMENT

The State University of NY (SUNY) Downstate Medical Center is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The SUNY Downstate Medical Center designates this live activity for a maximum of 6.25 *AMA PRA Category 1 Credit(s)*™. Physicians should claim only the credit commensurate with the extent of their participation in the activity

NURSES

This activity has been submitted to the American Nephrology Association for approval to award contact hours. American Nephrology Nurses Association - Approver is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

PHYSICIAN ASSISTANTS

AAPA accepts category 1 credit from AOACCME, Prescribed credit from AAFP, and AMA PRA Category 1 Credit™ from organizations accredited by the ACCME.

DISCLOSURE STATEMENT

SUNY Downstate Medical Center Office of CME (OCME) and its affiliates are committed to providing educational activities that are objective, balanced and as free of bias as possible. The OCME has established policies that will identify and resolve all conflicts of interest prior to this educational activity. All participating faculty are expected to disclose to the audience, verbally or in writing, any commercial relationships that might be perceived as a real or apparent conflict of interest related to the content of their presentations, and unlabeled/unapproved uses of drugs and devices. Detailed disclosures will be made verbally and/or in writing during the program.

ADA STATEMENT

Special Needs: In accordance with the Americans with Disabilities Act, SUNY Downstate Medical Center seeks to make this conference accessible to all. If you have a disability which might require special accommodations, please contact the OCME at 718-270-2422 or e-mail your needs to: ocme@downstate.edu

ACCOMODATION

If you wish to stay in Brooklyn, here are some hotels in celebrated areas:

- Fairfield Inn & Suites Brooklyn
- Marriott at the Brooklyn Bridge
- Sheraton Brooklyn

TRAVEL DIRECTIONS

<http://www.downstate.edu/directions/index.html>

By Subway

During rush hour, take the Flatbush Avenue Line (#2 or #5 Lexington Avenue) trains to the Winthrop Street station. [Take any Brooklyn-bound train (#2, 3, 4, or 5) to Nevins Street in Brooklyn, changing there for a #2 or #5 marked "Flatbush Avenue". Note that the # 5 runs only during rush hours.] Exit at Nostrand and Parkside Avenues. Cross Nostrand Avenue and walk one block on Parkside Avenue until it ends at New York Avenue. Turn right onto New York Avenue. Cross New York Avenue and walk east on Lenox Road until the entrance at 395 Lenox Road.

PARKING

<http://www.downstate.edu/directions/parking.html>
Valet Parking is available from 6:00 a.m. to 6:00 p.m., located in front of the 445 Lenox Road hospital entrance at the valet parking booth. The fee is \$10.00



**5th Annual
Transplantation Symposium**

**Optimizing
Kidney Transplant
Outcomes**

**FRIDAY, OCTOBER 13, 2017
7:30 AM – 4:00 PM**

Alumni Auditorium
SUNY Downstate Medical Center
395 Lenox Road
Brooklyn, NY 11203



5th Annual Transplantation Symposium: Optimizing Kidney Transplant Outcomes

Friday, October 13, 2017

7:30–8:30 AM Registration

8:30–8:45 **Welcome/Opening Remarks:**
Carlos Pato, MD, PhD
Dean, College of Medicine

Moro Salifu, MD, MPH, MBA
Chairman, Department of Medicine

Rainer Gruessner, MD
Chairman, Department of Surgery

Fasika Tedla, MD, MSc
Medical Director of Transplantation

Before Transplant

Moderator: Eli A. Friedman, MD

8:45–9:15 **Cardiac Evaluation of Transplant Candidates**
Bertram Kasiske, MD

9:15–9:45 **Donor Management and Organ Preservation**
Devon John, MD

9:45–10:15 **Kidney Transplant for Hepatitis C and B Infected Candidates**
Elizabeth C. Verna, MD, MS

10:15–10:30 **Questions and Answers (Panel Discussion)**

10:30–10:45 **BREAK** (Refreshments, Exhibits open)

Early Post-transplant Period

Moderator: Nabil Sumrani, MD

10:45–11:15 **Individualizing Immunosuppression**
Michelle Josephson, MD

11:15–11:45 **Antibody Mediated Rejection**
Bonnie E. Lonze, MD

11:45–12:15 **Recurrent Urinary Tract Infections**
Brandon Eilertson, MD

12:15–12:30 **Questions and Answers (Panel Discussion)**

12:30–1:30 **LUNCH**

Long-term Management

Moderator: Amarpali Brar, MD

1:30–2:00 **BKV Nephropathy**
Dharshana Dadhania, MD

2:00–2:30 **Anemia after Kidney Transplant**
Oluwatoyin Bamgbola, MD

2:30–3:00 **Disorders of Mineral Metabolism**
Mariana Markell, MD

3:00–3:30 **Optimizing Kidney Transplant Outcome in Diabetics Through Simultaneous or Subsequent Pancreas Transplant**
Rainer Gruessner, MD

3:30–3:50 **Questions and Answers (Panel Discussion)**

3:50–4:00 **Closing Remarks, Announcements and Adjourn**

GUEST FACULTY

Darshana Dadhania MD, MS
Associate Professor of Medicine
Medical Director, Histo-incompatible Kidney Transplant Program
Assistant Director, Immunogenetics & Transplantation Center
Weill Cornell Medicine, NY

Michelle Josephson, MD
Professor of Medicine
University of Chicago

Bertram Kasiske, MD
Professor of Medicine, University of Minnesota
Director, Scientific Registry of Transplant Recipients
Director, Division of Nephrology, Hennepin County Medical Center

Bonnie E. Lonze, MD
Assistant Professor of Surgery
Vice Chair for Research
NYU Langone Transplant Institute

Elizabeth Verna, MD, MS
Assistant Professor of Medicine
Director of Clinical Research, Transplant Initiative
Program Director, Transplant Hepatology Fellowship
Center for Liver Disease and Transplantation
Columbia University College of Physicians and Surgeons

SUNY DOWNSTATE FACULTY

Oluwatoyin Bamgbola, MD
Associate Professor of Clinical Pediatrics
Chief, Division of Pediatric Nephrology

Brandon Eilertson, MD
Assistant Professor of Medicine
Division of Infectious Diseases

Eli A. Friedman, MD, MACP, FRCP
Distinguished Teaching Professor of Medicine
Deputy Chair, Department of Medicine

Rainer W.G. Gruessner, MD
Clarence & Mary Dennis Professor of Surgery
Chairman, Department of Surgery

Mariana S. Markell, MD
Associate Professor of Medicine
Division of Nephrology

Moro O. Salifu, MD, MBA, MPH, FACP
Professor and Chairman, Department of Medicine
Chief, Division of Nephrology
Director, Transplant Program

ORGANIZING COMMITTEE

Amarpali Brar, MD
Assistant Professor of Medicine
Division of Nephrology

Devon John, MD
Chief of Transplantation
Department of Surgery

Carrie Lindower, RN, MBA
Administrative Director of Kidney Transplant

Nabil Sumrani, MD
Associate Professor of Surgery

Fasika M. Tedla, MD, MSc
Assistant Professor of Medicine
Medical Director of Kidney Transplantation

Nelcia Trim, RN
Assistant Director of Nursing for Dialysis and Transplant

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REGISTRATION FORM

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- Complete the Registration Form and mail with fee to: SUNY Downstate Medical Center
The Office of Continuing Medical Education
450 Clarkson Avenue, Box 1244
Brooklyn NY 11203-2098
- Fax Registration Form to the Office of CME @ (718)-270-4563
Contact the Office of CME at 718-270-2422 should you have any questions.

Registration Fees

- Physicians: \$75.00 / with CME \$95.00
- Non-physicians: \$55.00 / with CME \$75.00
- Fellows, Residents, and Students Free with I.D.

Please make check payable to OCME IFR 900051. Fees include comprehensive course syllabus, continental breakfast, lunch and refreshment break.

Registration Information

Last Name _____

First Name _____

Address _____

City _____

State _____

Zip Code _____

Email _____

Phone _____

Fax _____

Hospital/Organization _____

Specialty _____

(Please check which applies to you)

MD RN PA RD PhD

School Educator Student

Other _____

Turn over for payment information ►