SUNY DOWSTATE MEDICAL CENTER
and
Long Island College Hospital
Presents

Practical NeuroCritical Care
Symposium on NeuroICU Clinical Care

December 3, 2010
8:00 AM - 5:00 PM

Long Island College Hospital,
339 Hicks Street
Brooklyn, NY 11201
**Statement of Need:**
A gap has been identified in the knowledge of nursing, housestaff and residents in the care of patients with aneurysms, subarachnoid hemorrhages and intracerebral hemorrhages.

**Target Audience:** Neurologists, NeuroIntensivists, Neurocritical Care Board Examination Candidates, NeuroInterventionalists, Neurosurgeons, Endovascular Radiologists, Fellows, Residents, Physician Assistants, Nurse Practitioners, Registered Nurses and Other Health Care Professionals who participate in the care of patients with aneurysms, subarachnoid hemorrhages or intracerebral hemorrhages.

**OBJECTIVES**
At the conclusion of this conference, participants should be able to:
- Increase knowledge of participants in interpreting intracranial wave forms and management of ventriculostomy drains.
- Diagnose, resuscitate and implement care for intracranial hypertension, brain herniation, cerebral vasospasm.
- Assist in the management of the reversal of thrombolytic induced intracerebral hemorrhage.
- Participants will gain knowledge in the use of pulmonary function tests to identify impending respiratory distress in patients with neuromuscular disease.
- Develop and implement the use of bedside neurological scales to identify impending neurological deterioration.

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

SUNY Downstate Medical Center designates this continuing medical education activity for a maximum of 8 **AMA PRA Category 1 Credits™**. Physicians should only claim credit commensurate with the extent of their participation in the activity.

**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 in place 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 Claudette Colville, 718-780-1124.
COURSE SCHEDULE

7:00 am to 8:00 am  Breakfast/Registration

Session 1—Moderators: Dr. John Miller, Dr. Joshua Rosenberg, Dr. Nazli Janjua
8-8:15 AM  Welcome and General Approach to Neurocritical Care Conference Patient Dr. Nazli Janjua
8:15-8:45 am  Examination of the Comatose and Pattern recognition: Identification and treatment of conditions causing acute neurologic change Dr. Nazli Janjua
8:45-9:15 am  Sedation for ICU patients Dr. Joshua R. Rosenberg
9:15-9:45am  Ventilatory Life Support Dr. Joshua R. Rosenberg
9:45-10:15 Vasoactive Medications Dr. Louis Gerolemou
10:15-10:30 Break/ Self-assessment quiz and Focused Question and Answer Period with Speakers
10:30-11:00 Pattern recognition: Identification and Treatment of Medical Catastrophes in the Neurocritical Care Patient Dr. Kessarin Panichpisal
11:00-11:30 am Intracranial Hypertension and CSF Diversion Dr. Wirkowski
11:30-11:45 am Case Based Discussion All speakers
11:45 am -12:00 pm  Q/A session 1
12:00- 1:00 pm  Lunch

Session 2—Moderators: Dr. Nazli Janjua, Dr. Toby Gropen, Dr. Michael Bergman
1:00- 1:30 pm  Intracranial Hemorrhage Dr. Ximena Morales
1:30-2:00 pm  Large Vessel Stroke Dr. Toby Gropen
2:00-2:30 pm  Subarachnoid Hemorrhage Dr. Nazli Janjua
2:30- 3:00 pm  Status Epilepticus Dr. Marlon Seliger
3:00-3:15pm  Coffee Break / Self -Assessment
3:15-3:45 pm Neuromuscular Respiratory Failure and Treatment complications/ Critical Care Weakness Dr. Yaacov Anziska
3:45-4:15 pm Therapeutic Hypothermia Dr. Michael Bergman
4:15-4:30 Case Based Discussion All speakers
4:30-4:45 Q/A Session 2 All speakers
4:45-5:00 Wrap up Dr. Nazli Janjua
Course Faculty

Dr. Nazli Janjua, Course Director
Director, Interventional and Critical Care Neurology
Long Island College Hospital

Dr. Yaacov Anziska
Assistant Professor
Department of Neurology
Director, Muscular Dystrophy Association Clinic
SUNY Downstate Medical Center

Dr. Michael Bergman
Director, Medical Intensive Care Unit
Division of Pulmonary Critical Care Medicine
Department of Medicine
Long Island College Hospital

Dr. Louis Gerolemou
Division of Pulmonary Critical Care Medicine
Department of Medicine
Long Island College Hospital

Dr. Toby Gropen
Chairman, Dept. of Neurology
Director, Stroke Division
Long Island College Hospital

Dr. John Miller
Chairman, Department of Neurosurgery
Long Island College Hospital

Dr. Ximena Morales
Director, Transcranial Doppler Lab
Department of Neurology
Long Island College Hospital

Dr. Kessarin Panichpisal
Department of Neurology
Long Island College Hospital

Dr. Joshua R. Rosenberg
Division of Pulmonary Critical Care Medicine
Long Island College Hospital

Dr. Marlon Seliger
Director, Electrophysiology Lab
Long Island College Hospital

Dr. Elzabeta Wirkowski
Attending Physician, Neurocritical Care
Department of Neurology
Winthrop Hospital

Registration Form:
Name ____________________________________________________________
Institution _________________________________________________________
Title/Position (Resident/Attending/Nurse/Other) residents must provide training verification __________________________________________________________
Address ________________________________________________________________________________________________
City ______________ State ____________ Zip ________________________________
Telephone (Day) ______________ (Evening) ______________
Credit Card (Type) ___________ Number _______________________________
Expiration Date ______________ Email Address: ____________________________
Address on Card if different from above: __________________________________________________________________

Registration information:
Registration fees: Residents, $25 (training verification required); Nurses, $50;
Attending Physicians, $75
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