

Day 1		FACULTY
6:30 a.m. – 7:30 a.m.	Registration & Breakfast	
7:30 a.m. – 8:00 a.m.	Welcome, Course Announcements, FCCS: Surgical Overview	MJ Reed
8:00 a.m. – 9:00 a.m.	<u>Approach to the Surgical Patient, Part 1: Overview of the Care of the Critically Ill Patient</u> - Describe physiologic derangements occurring with surgery - Identify common complications and their treatment	Buddy Hammerman
9:00 – 9:45 a.m.	<u>Approach to the Surgical Patient, Part 2: Surgical Emergencies</u> - Recognize a surgical emergency based on the patient's history and clinical presentation - Identify appropriate treatment and damage control techniques	Mark Hamill
9:45 a.m. – 10:00 a.m.	BREAK	
10:00 a.m. – 11:00 a.m.	<u>Surgical Airway Emergencies</u> - Recognize airway emergencies and treatment - Manage postoperative neck hematoma - Identify symptoms of upper airway obstruction - Review techniques of needle and surgical cricothyroidotomy	MJ Reed
11:00 a.m. – 12:00 p.m.	<u>Cardiovascular Surgical Emergencies</u> - Recognize cardiovascular emergencies and postoperative complications - Determine initial care for these conditions	Barbara McLean
12:00 p.m. – 1:00 p.m.	LUNCH	
1:00 p.m. – 2:00 p.m.	SKILL STATION <u>Assessment of the Critically Ill Postoperative Patient</u> - Identify common postsurgical conditions related to critical illness - Identify and manage common postanesthetic complications in the surgical patient - Prioritize and manage common postsurgical complications in a patient with complex medical	See grids below

	comorbidities.	
2:00 p.m. – 3:00 p.m.	SKILL STATION <u>Mechanical Ventilation II</u> - Provide a foundation for correlating pathophysiology and appropriate ventilator interactions - Develop strategic evaluation of secondary lung parameters and the methods of ventilator modification required to manage such scenarios - Expand both the didactic and practical understanding of mechanical ventilation strategies	See grids below
3:00 p.m. – 3:15 p.m.	BREAK	
3:15 p.m. – 4:15 p.m.	<u>Neurosurgical ICU</u> - Recognize neurosurgical emergencies and complications after neurosurgical procedures - Determine initial care for these conditions	Brenda Engler
4:15 p.m. – 5:00 p.m.	<u>Surgical Soft Tissue Complications and Urgencies</u> - Identify a normal healing wound - Recognize wound dehiscence and infection, necrotizing soft tissue infection, and extremity compartment syndrome	Heather Hausman
5:00 p.m. – 5:30 p.m.	<u>Equipment Discussion</u>	

Day 2		FACULTY
6:30 a.m. – 7:30 a.m.	BREAKFAST	
7:30 a.m. – 8:00 a.m.	Welcome, Recap, and Introduction	
8:00 a.m. – 9:00 a.m.	<u>Abdominal Surgical Emergencies, Part 1</u> - Recognize various presentations of abdominal emergencies and determine whether surgical consultation is necessary - Review signs and symptoms of toxic megacolon, small bowel obstruction, peritonitis, and esophageal perforation	Mark Hamill
9:00 a.m. – 9:45 a.m.	<u>Abdominal Surgical Emergencies, Part 2</u> Recognize and manage complications associated with acute pancreatitis, gastrointestinal hemorrhage, and abdominal compartment syndrome	MJ Reed
9:45 a.m. – 10:00 a.m.	BREAK	
10:00 a.m. – 11:00 a.m.	SKILL STATION <u>Hypotension After Abdominal Operation</u> - Discuss causes of shock in the postoperative patient - Identify risk factors for abdominal compartment syndrome (ACS) - Explain the diagnostic criteria for ACS	See grids below
11:00 a.m. – 12:00 p.m.	SKILL STATION <u>Integrated Abdominal Sepsis</u> - Recognize surgical emergencies in patients without surgical illness - Interpret, troubleshoot, and manage abdominal pain in	See grids below

	the critically ill patient	
12:00 p.m. – 1:00 p.m.	LUNCH	
1:00 p.m.– 1:45 p.m.	<u>Management of Special Populations</u> • Review treatment of pulmonary embolism • Manage ICU care of bariatric surgery patients and postoperative care of organ-specific transplant patients	Jason Stamm
1:45 p.m.– 3:15 p.m.	SKILL STATION <u>ICU Care for the Multi-System Trauma Patient</u> • Interpret, troubleshoot, and manage elevated intracranial pressure • Discuss chest tube basics and troubleshooting • Diagnose and manage abdominal compartment syndrome • Diagnose and manage compartment syndrome of extremities	See grids below
3:15 p.m. – 3:30 p.m.	BREAK	
3:30 p.m. – 4:30 p.m.	<u>Assessment of the Critically Ill Child</u> • Review anatomic and physiologic differences between pediatric and adult patients • Recognize respiratory failure and describe the clinical features of the different types of shock • Discuss the role of ancillary tests in cardiopulmonary evaluation of a child • Apply the Pediatric Early Warning Score (PEWS) to detect clinical deterioration early • Apply A-B-C-D-E systematic approach to pediatric trauma care • Discuss the early recognition and treatment of sepsis	MJ Reed
4:30 p.m. – 5:00 p.m.	<u>Equipment Discussion</u>	