Managing Acute and High-Impact Chronic Pain Through Multidisciplinary Care

Vancouver Convention Centre | Vancouver, BC, Canada
Preconference Sessions: April 25–26, 2018
Annual Meeting: April 26–29, 2018
Exhibits: April 26–28, 2018
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A Message from the AAPM President

It is my pleasure as president of the American Academy of Pain Medicine (AAPM) to welcome you to the AAPM 34th Annual Meeting & Preconferences and to highlight some of the wonderful educational and networking opportunities you will have this week in Vancouver.

Multidisciplinary Care as the Gold Standard for Pain Care

The meeting theme—Managing Acute and High-Impact Chronic Pain Through Multidisciplinary Care—has been woven throughout the 2018 AAPM educational program. Preconference and Annual Meeting sessions will address a challenge among all healthcare providers, the patients we care for, and the communities they live in: balancing the need for improving comprehensive pain care while responding to the growing societal epidemic of prescription opioid abuse and opioid-related overdoses and deaths.

Now, amidst the current opioid crisis and the devastation it has inflicted, is a critical time for our pain medicine specialty to lead the way in advocating for comprehensive pain care. Our patients are in need of greater access to evidence-based pharmacologic approaches, behavioral health interventions, interventional procedures, substance abuse treatment, and rehabilitation-based care. To that end, the AAPM 34th Annual Meeting has been designed to provide key stakeholders—including physicians and members of their treatment teams, payers, and researchers—with the skills and knowledge necessary to improve the care provided to patients and to optimize patient outcomes. I hope you will attend my opening remarks Friday at 8:15 am in the general session room to learn more about this meeting theme.

Preconferences & Special Session Tracks Provide Additional Learning Opportunities

In addition to the dynamic 34th Annual Meeting program and more than 200 poster abstract displays, the following preconference programs are available on Wednesday and Thursday:

• Pain Medicine Best Practices: Integrative Solutions for Critical Challenges
• Interdisciplinary/Multidisciplinary Pain-Based Care

Included in your Annual Meeting registration is full access to special session tracks on Sunday morning covering cancer/palliative care, neuromodulation, and behavioral health. You can choose to attend the full track for any topic, or you can mix and match the sessions that best meet your needs and interests.

Take Preconferences and Annual Meeting Programs Home & Continue Learning On Demand

I hope and trust that you will have a productive week and will gain valuable knowledge, skills, and competencies that you can immediately implement in your home practice. New for 2018, you can now take preconference and Annual Meeting sessions home with you. Order the on-demand preconference and/or Annual Meeting courses before the end of the meeting on Sunday, April 29, and gain access to all sessions through the AAPM Education Center following the meeting at significantly reduced rates.

Finally, mark your calendar now for the AAPM 35th Annual Meeting, March 6–10, 2019, in Denver, CO.

Sincerely,

Steven P. Stanos, DO
President, American Academy of Pain Medicine
My Patient’s NOT AN ADDICT

Why Should I Prescribe TAKE-HOME NALOXONE?

FRIDAY, APRIL 27, 2018
12:30 PM to 1:30 PM

Exhibition Hall A • Convention Level, East Building • Vancouver Convention Centre

AAPM will provide lunch for all attendees from Noon to 12:30 PM

FACULTY

Jeffrey A. Gudin, MD
Director,
Pain Management and Palliative Care,
Englewood Hospital and Medical Center,
Englewood, New Jersey

Mark A. Kallgren, MD
Medical Director of Pain Medicine,
Oregon Anesthesiology Group, PC,
Portland, Oregon

Anthony W. Mimms, MD
Founder and Owner,
Mimms Functional Rehabilitation PC,
Indianapolis, Indiana

Registration

There is no registration fee for attending this commercially supported satellite symposium; however, seating may be limited. To preregister, please visit www.surveymonkey.com/r/kaleoAAPM2018 or scan the adjacent code. Preregistration does not guarantee seating. We recommend arriving at the symposium location early.

Learning Objectives

After attending this symposium, participants should be better able to:
• Identify patients at risk for an opioid overdose.
• Initiate the conversation with at-risk patients and care partners around opioid overdose and the need for take-home naloxone.
• Implement a strategy to create an opioid emergency plan that includes education and coprescribing take-home naloxone for at-risk patients and care partners.
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2012 Martin Grabois, MD
2013 Lynn R. Webster, MD
2014 Sean Mackey, MD PhD
2015 Bill McCarberg, MD
2016 Daniel B. Carr, MD
2018 AAPM Annual Meeting Program Committee

Special thanks to the members of the AAPM Program Committee who volunteered their time, energy, and expertise to develop the AAPM 34th Annual Meeting & Preconferences.

Committee Members

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Assistant Professor of Anesthesiology
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Immediate Past Co-Chair
Associate Professor, Department of Anesthesiology and Critical Care Medicine
Associate Professor, Johns Hopkins Carey Business School
Johns Hopkins University
Vice-Chair for System Integration, Department of Anesthesiology and Critical Care Medicine
Johns Hopkins School of Medicine
Baltimore, MD

Visit painmed.org/annualmeeting for a full list of faculty and planner disclosures.

#PAINMED2018
Target Audience
Clinicians treating patients in pain are invited to join leading experts in pain medicine at the AAPM 34th Annual Meeting & Preconferences. The program has been designed by a multidisciplinary, multimodal committee of experts at the forefront of pain medicine practice. Its primary audience is physicians whose scope of practice is targeted at the multidisciplinary practice of pain medicine, and its secondary audience of nonphysician healthcare clinicians includes nurses, nurse practitioners, physician assistants, physical therapists, psychologists, and pharmacists who are part of the multidisciplinary pain management team.

Learning Objectives
After attending the meeting, participants should be better able to:

- describe recent advances in research, clinical best practices, patient management, practice management, and the diagnosis and treatment of patients in pain to pain medicine clinicians.
- assess the most up-to-date, evidence-based scientific developments and clinical best practices in the field of pain medicine.
- review the wide range of treatment therapies available to help patients suffering from pain and pain-related psychological dysfunction regain their quality of life.
- assess, treat, and improve outcomes for patients suffering from multiple types of pain through the use of evidence-based, integrative/multidisciplinary pain management strategies, and patient-centered treatment plans.
- improve patient safety and decrease the rate of opioid- and pain analgesic-related adverse events.

Continuing Medical Education Information

**Physician Accreditation Statement**

The American Academy of Pain Medicine (AAPM) is accredited by the Accreditation Council for Continuing Medical Education (ACCMCE) to provide continuing medical education (CME) for physicians.

**34th Annual Meeting:** AAPM designates this live activity for a maximum of 17.5 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

**Pain Medicine Best Practices: Integrative Solutions for Critical Challenges Preconference:** AAPM designates this live activity for a maximum of 9 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

**Interdisciplinary/Multidisciplinary Pain-Based Care Preconference:** AAPM designates this live activity for a maximum of 7.5 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

**Note:** Attendees cannot receive credit for simultaneous sessions. The largest number of credits that can be earned by combining the Pain Medicine Best Practices: Integrative Solutions for Critical Challenges Preconference, Interdisciplinary/Multidisciplinary Pain-Based Care Preconference, and AAPM 34th Annual Meeting is 34 CME credits.

**American Academy of Family Physicians (AAFP)**

AAPM is approved by the American Academy of Family Physicians to offer continuing medical education for the 34th Annual Meeting; the Pain Medicine Best Practices: Integrative Solutions for Critical Challenges preconference; and the Interdisciplinary/Multidisciplinary Pain-Based Care preconference.

**American Academy of Physician Assistants (AAPA)**

AAPA accepts certificates of participation for educational activities certified for AMA PRA Category 1 Credits™ from accredited organizations, including AAPM.

**Nursing Credits**

This continuing nursing education activity was approved by American Association of Neuroscience Nurses, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation. Nursing credit will be offered only for the AAPM 34th Annual Meeting.

**American Psychological Association (APA)**

Select sessions at this conference have been reviewed and approved by the APA of Office Continuing Education in Psychology (CEP) to offer Continuing Education (CE) credit for psychologists. Full attendance is required at each session for which you are claiming CE credit. Partial credit is not awarded. The CEP Office maintains responsibility for the delivery of the session. Approval #2018003. Note: Claimants also must complete an online evaluation prior to receiving credit from APA.

Attendees can earn up to 19 APA CEs:
- Friday: 8 CEs
- Saturday: 6 CEs
- Sunday: 5 CEs

**MOCA 2.0® Credits**

Participants in the Annual Meeting; Pain Medicine Best Practices: Integrative Solutions for Critical Challenges preconference; and Interdisciplinary/Multidisciplinary Pain-Based Care preconference will receive MOCA 2.0® credit once evaluations are submitted online. AAPM will report participant completion data to the American Board of Anesthesiology via the ACCME’s Program and Activity Reporting System (PARS) on behalf of the participant in a timely manner. PARS is a web-based portal for the collection of program and activity data from accredited continuing medical education (CME) providers such as AAPM.

Maintenance of Certification in Anesthesiology Program® and MOCA 2.0® are registered certification marks of the American Board of Anesthesiology.
MOC Part II Lifelong Learning
Participants in the Annual Meeting; Pain Medicine Best Practices: Integrative Solutions for Critical Challenges preconference; and Interdisciplinary/Multidisciplinary Pain-Based Care preconference will receive American Board of Physical Medicine and Rehabilitation (ABPMR) MOC Part II Lifelong Learning CMS credit after evaluations have been submitted online. Participants will need to report these CMS credits directly to their ABPMR MOC homepage located at www.abpmr.org/account/login.

Evaluation Tool
Meeting registrants can access the evaluation by visiting the AAPM website at www.painmed.org/vancouver and clicking on the evaluation link. The online evaluation may be completed during the meeting or after attendees have returned home. Participants will receive their CME certificate only after they submit their evaluations online. Certificates also can be sent to participants’ e-mail addresses for printing later or saving electronically. All attendees are encouraged to complete the meeting evaluation by May 31, 2018, regardless of whether they are seeking continuing education credits. The final evaluation deadline for the 34th Annual Meeting is December 31, 2018. If you have any questions, please call 847.375.4731.

Disclosure of Unlabeled Use
This educational activity may contain discussion of published and/or investigational uses of agents that are not indicated by the U.S. Food and Drug Administration. The American Academy of Pain Medicine does not recommend the use of any agent outside of the labeled indications. The opinions expressed in the educational activity are those of the faculty and do not necessarily represent the views of any organization(s) associated with this activity. Please refer to the official prescribing information for each product for discussion of approved indications, contraindications, and warnings.

Disclosure of Conflicts of Interest
It is the policy of AAPM to plan and implement educational activities in accordance with the ACCME to ensure balance, independence, objectivity, and scientific rigor. As an ACCME-accredited provider, AAPM may receive commercial support from industry providers but does not receive guidance, either nuanced or direct, on the content of the activity or on who should deliver the content. All program faculty and planners are required to disclose all financial relationships they may have or have had within the past 12 months with commercial interests whose products or services are related to the subject matter of the presentation. Any real or apparent conflicts of interest must be resolved prior to the presentation. Faculty are expected to disclose this information to the audience both verbally and in print (slides) at the beginning of each presentation. Faculty also are required to inform program participants if any unlabeled uses of products regulated by the U.S. Food and Drug Administration will be discussed. A full list of real-time Planning Committee and faculty disclosures can be found at www.painmed.org/annualmeeting/2018-faculty-disclosures.

Disclaimers
1. Participants have an implied responsibility to use information presented at the 34th Annual Meeting to enhance patient outcomes and their own professional development. The information presented in this activity is not meant to serve as a guideline for patient management. Further, the opinions expressed at the 34th Annual Meeting are those of the faculty and do not necessarily represent the views of AAPM. Any procedures, medications, or other courses of diagnosis or treatment discussed in this activity should not be used by clinicians without evaluation of patient conditions and possible contraindications on dangers in use, review of any applicable manufacturer’s product information, and comparison with recommendations of other authorities.

2. Meeting schedules and faculty are subject to change and cancellation. If AAPM must cancel a meeting event or session, registrants will receive a full credit or refund, minus a processing fee of $25. AAPM is not liable for any other loss, cost, or expense, however caused or incurred, arising from cancellation.

The AAPM 34th Annual Meeting is supported in part by educational grants from the following commercial supporters as of March 21, 2018: Boston Scientific Corporation; Daiichi Sankyo, Inc.; Jazz Pharmaceuticals, Inc.; Salix Pharmaceuticals, Inc., a Division of Valeant Pharmaceuticals North America LLC.
Late-Breaking Posters

Posters numbered LB001-LB004 will be on display in the Resource Center through the two groups noted below.

Poster Hours
The six highest-ranking poster authors have been selected to present their posters at a plenary research highlights session Friday morning or a concurrent scientific session Friday afternoon.

Scientific posters will be on display in the AAPM Resource Center at the Vancouver Convention Centre. There will be two presentation groups of posters. Be sure to visit the Resource Center to see both groups because they are available to be viewed on different days. Copies of the six highest-ranking posters also will be displayed in the East Meeting Room 1 Foyer.

Late-breaking posters will be on display through both poster sessions.

Group 1
This presentation group, with posters numbered 100–202, includes posters categorized by the following clinical topics: Basic Science, Procedures, Psychosocial, and Translational.

These posters will be on display in the Resource Center from Thursday, April 26, at 6 pm until Friday, April 27, at 11 am.

Author-Attended Sessions
Welcome Reception with Poster Session
Thursday, April 26, 6-7:30 pm

Group 2
This presentation group, with posters numbered 203–303, includes posters categorized by the following clinical topics: Epidemiology/Health Policy/Education, Pharmacologic, and Rehabilitation.

These posters will be on display in the Resource Center from Friday, April 27, at 6 pm until Saturday, April 28, at 11:30 am.

Author-Attended Sessions
AAPM 34th Annual Meeting Reception with Poster Session
Friday, April 27, 6-7:30 pm

Speaker Ready Room Hours

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<td>Saturday, April 28</td>
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<td>Sunday, April 29</td>
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Registration Hours

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<td>Sunday, April 29</td>
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Paperless Meeting
Registrants are able to view, download, and print faculty slides and presentation information at www.painmed.org/vancouver during and after the Annual Meeting. You also can access handouts and meeting details by downloading the AAPM Annual Meeting mobile app. See page 26 for details.

Sunshine Act
The Physician Payment Sunshine Act (Sunshine Act)—Section 6002 of the Patient Protection and Affordable Care Act mandates the disclosure of the National Provider Identifier number for any “payment or other transfer of value over $10” given to a physician from any pharmaceutical, device, or biologics manufacturing company. As an accredited ACCME provider for CME, physician participation in AAPM CME-accredited activities is deemed a “non-reportable” event.

Americans with Disabilities Act
AAPM wishes to ensure that no individual with a disability is excluded, denied services, segregated, or otherwise treated differently from other individuals because of the absence of auxiliary aids and services. If you require any of the auxiliary aids or services identified in the Americans with Disabilities Act to attend any AAPM program, please contact the AAPM Member Services Team by phone at 847.375.4731 or by e-mail at info@painmed.org in advance so special requests may be met. For onsite assistance, please visit the registration desk.
Annual Meeting On-Demand

New for 2018, AAPM is pleased to offer the following on-demand Annual Meeting & Preconference courses. Save 50% when you purchase courses before the conclusion of the meeting on Sunday, April 29. Visit the registration desk or the AAPM booth in the Resource Center to make your purchase.

AAPM 34th Annual Meeting

With more than 40 educational sessions highlighting the most relevant and timely topics in pain medicine taking place over just a few days, this on-demand course enables you to view all those sessions you missed. Or refer back to content of interest with a full library of Annual Meeting session voiceover PowerPoint videos.

- **Members:** $150 ($300 after 4/29)
- **Non-members:** $200 ($400 after 4/29)

Pain Medicine Best Practices: Integrative Solutions for Critical Challenges

A collection of video-recorded presentations and presenter slides from the Pain Medicine Best Practices Preconference program, instructing participants on how to optimize the management of chronic pain with opioid analgesics and non-opioid therapies.

- **Members:** $100 ($200 after 4/29)
- **Non-members:** $150 ($300 after 4/29)

Interdisciplinary/Multidisciplinary Pain-Based Care

A collection of video-recorded presentations and presenter slides from the Interdisciplinary/Multidisciplinary Pain-Based Care Preconference, providing a broad stakeholder examination of multi- and inter-disciplinary pain management programs.

- **Members:** $100 ($200 after 4/29)
- **Non-members:** $150 ($300 after 4/29)

NOTE: CME is not available for 2018 AAPM Annual Meeting & Preconference on-demand courses. The on-demand course will be available in the AAPM Education Center within 6 weeks of the Annual Meeting. Specific presentations within a session may not be available or may be audio only if the presenter has confidential patient information or otherwise declines to be recorded.
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Passport Program

Participate in the AAPM Resource Center Passport Program for a chance to win one of the following prizes:

- $1,000 gift card
- $500 gift card
- free AAPM Annual Meeting registration in Denver, CO (up to $980 value).

For a chance to win, fill your passport with stamps from industry partner booths in the Resource Center; earn stamps by answering the questions on your passport. Drop your completed passport in the tumbler located at the AAPM booth #427. Winners will be drawn Saturday morning at 10 am.
Join AAPM leaders for cocktails, appetizers, and networking

Welcome Reception
Thursday, April 26
6-7:30 pm

Annual Reception
Friday, April 27
6-7:30 pm

AAPM Resource Center
Vancouver Convention Centre – East Exhibit Hall B

Learn about exciting new pain medicine products and innovations you’ll only find at AAPM.

More than 200 scientific poster abstracts will be on display in the Resource Center throughout the meeting, and each reception will feature more than 90 unique poster presentations.

Visit AAPM at booth 427 with questions and to learn more.
He has served on numerous state and national organizations’ boards and committees. He has been recognized in several “Best Doctors,” the Texas Pain Society, and is chair of the Texas Health and Human Services Commission Palliative Care Interdisciplinary Advisory Council. Fellow. He was the founding chair and medical director of the Texas Pain Advocacy and Information Network (TxPAIN), is past president of Larry C. Driver, MD the American Academy of Pain Medicine, and received the American Pain Society’s Wilbert E. Fordyce Clinical Investigator Award in 2005 and John and Emma Bonica Public Service Award in 2014, the Eastern Pain Association’s John J. Bonica Award in 2011, and the American Academy of Neurology’s Mitchell B. Max Award for Neuropathic Pain in 2015. Dr. Dworkin’s major research interests are methodologic aspects of analgesic clinical trials and the treatment and prevention of chronic neuropathic and musculoskeletal pain. The primary focus of his current research involves the identification of factors that increase the assay sensitivity of clinical trials to detect differences between an active and a control treatment. Dr. Dworkin also is interested in the transition from acute to chronic pain, and his research has shown that patients with greater acute pain are more likely to develop chronic pain.

Robert Dworkin received his BA from the University of Pennsylvania and his PhD from Harvard University. He is a professor of anesthesiology and perioperative medicine, neurology, and psychiatry; a professor in the Center for Human Experimental Therapeutics; and director of the Anesthesiology Clinical Research Center at the University of Rochester School of Medicine and Dentistry. Dr. Dworkin also serves as director of the Analgesic, Anesthetic, and Addiction Clinical Trial Translations, Innovations, Opportunities, and Networks’ (ACTTION) public-private partnership with the U.S. Food and Drug Administration (FDA) and is a special government employee of the FDA. He is an associate editor of Pain and a member of the editorial boards of the Journal of Pain, Canadian Journal of Pain, and Current Pain and Headache Reports.

Dr. Dworkin received the American Pain Society’s Wilbert E. Fordyce Clinical Investigator Award in 2005 and John and Emma Bonica Public Service Award in 2014, the Eastern Pain Association’s John J. Bonica Award in 2011, and the American Academy of Neurology’s Mitchell B. Max Award for Neuropathic Pain in 2015. Dr. Dworkin’s major research interests are methodologic aspects of analgesic clinical trials and the treatment and prevention of chronic neuropathic and musculoskeletal pain. The primary focus of his current research involves the identification of factors that increase the assay sensitivity of clinical trials to detect differences between an active and a control treatment. Dr. Dworkin also is interested in the transition from acute to chronic pain, and his research has shown that patients with greater acute pain are more likely to develop chronic pain.

Robert H. Dworkin, PhD

Robin J. Hamill-Ruth, MD

Robin Hamill-Ruth graduated from George Washington University School of Medicine, then completed a surgical internship and anesthesiology residency at Maine Medical Center. She then completed a pain medicine fellowship at the University of Virginia and a critical care fellowship at the University of Western Ontario. After that, Dr. Hamill-Ruth joined the faculty at the University of Virginia, where she attended in the operating room, the surgical intensive care unit, and the pain management center. She became medical director of the clinic in 1996, growing the fellowship and clinical practice substantially, culminating in receipt of the Center of Clinical Excellence Award from the American Pain Society in 2009. She also recently was granted professor emeritus status.

Dr. Hamill-Ruth was a member of the AAPM Board of Directors and served as chair of the Scientific Review and Guidelines Committee. She also has served the American Board of Pain Medicine (ABPM) in many capacities, including on the Examination Council, Credentials Committee, Nominations Committee, the Board of Directors, and Executive Committee. She also served as president of ABPM for 2 years, during which time she worked actively with the Accreditation Council for Graduate Medical Education and the American Board of Medical Specialties to address the need for recognition of pain medicine as a primary specialty. In addition, Dr. Hamill-Ruth sought recognition of ABPM certification at a state level and worked with several state boards of medicine on legislation to include ABPM certification in the definition of a “qualified pain specialist.”

Other recent contributions by Dr. Hamill-Ruth include co-authoring the Population Research Working Group Section of the National Pain Strategy as well as participating in the most recent revision of the Federation of State Medical Board Safe Opioid Prescribing Guidelines for Chronic Pain and the Laboratory Medicine Practice Guidelines for Chronic Pain.

Founders Award

The Founders Award is given to an individual for outstanding contributions to the science or practice of pain medicine. This award is given for continued contributions for the basic or clinical science of pain medicine or for the demonstration of clinical excellence or innovation in the practice of pain medicine.

Robert H. Dworkin, PhD

Robert Dworkin received his BA from the University of Pennsylvania and his PhD from Harvard University. He is a professor of anesthesiology and perioperative medicine, neurology, and psychiatry; a professor in the Center for Human Experimental Therapeutics; and director of the Anesthesiology Clinical Research Center at the University of Rochester School of Medicine and Dentistry. Dr. Dworkin also serves as director of the Analgesic, Anesthetic, and Addiction Clinical Trial Translations, Innovations, Opportunities, and Networks’ (ACTTION) public-private partnership with the U.S. Food and Drug Administration (FDA) and is a special government employee of the FDA. He is an associate editor of Pain and a member of the editorial boards of the Journal of Pain, Canadian Journal of Pain, and Current Pain and Headache Reports.

Dr. Dworkin received the American Pain Society’s Wilbert E. Fordyce Clinical Investigator Award in 2005 and John and Emma Bonica Public Service Award in 2014, the Eastern Pain Association’s John J. Bonica Award in 2011, and the American Academy of Neurology’s Mitchell B. Max Award for Neuropathic Pain in 2015. Dr. Dworkin’s major research interests are methodologic aspects of analgesic clinical trials and the treatment and prevention of chronic neuropathic and musculoskeletal pain. The primary focus of his current research involves the identification of factors that increase the assay sensitivity of clinical trials to detect differences between an active and a control treatment. Dr. Dworkin also is interested in the transition from acute to chronic pain, and his research has shown that patients with greater acute pain are more likely to develop chronic pain.

Presidential Excellence for Education Award

The Presidential Excellence for Education Award honors an individual who has made major contributions to the education of others about pain medicine.

Larry C. Driver, MD

Larry Driver is a professor in the department of pain medicine and section of integrated ethics, as well as an adjunct ethicist for clinical ethics consultation, at the University of Texas MD Anderson Cancer Center in Houston. His undergraduate education was at Austin College, followed by medical education at the University of Texas Medical School at San Antonio. His anesthesiology residency was completed at the University of Colorado Health Sciences Center in Denver, and he completed a clinical fellowship in pain and symptom management at MD Anderson. He is board certified in anesthesiology, pain medicine, and hospice and palliative medicine. He was a visiting research scholar in the Pellegrino Center for Clinical Bioethics at Georgetown University’s Kennedy Institute of Ethics and is a Mayday Pain and Society Fellow. He was the founding chair and medical director of the Texas Pain Advocacy and Information Network (TxPAIN), is past president of the Texas Pain Society, and is chair of the Texas Health and Human Services Commission Palliative Care Interdisciplinary Advisory Council. He has served on numerous state and national organizations’ boards and committees. He has been recognized in several “Best Doctors,” “Top Doctors,” “Super Doctors,” and “Who’s Who” listings, and has received numerous state and national awards for his advocacy efforts. He is an elected fellow of the Texas Academy of Science, an elected member of the University of Texas Academy of Health Science Educators, and is a designated UT Distinguished Teaching Professor. Dr. Driver chairs AAPM’s Professional Education and CME Oversight Committee.
**Patient Advocacy Award**

The Patient Advocacy Award recognizes activity of individuals in advocating for appropriate evaluation and treatment of patients suffering from pain. This award was created to honor healthcare professionals whose deeds reflect their recognition of the importance and impact of the specialty of pain medicine.

**Paul Christo, MD MBA**

Paul Christo is an associate professor in the division of pain medicine at the Johns Hopkins University School of Medicine. He served as director of the Multidisciplinary Pain Fellowship Program for 8 years and the Blaustein Pain Treatment Center for 5 years at the Johns Hopkins Hospital.

He hosts an award-winning, nationally syndicated SIRIUS XM radio talk show on overcoming pain called “Aches and Gains.” His show has earned him the John and Emma Bonica Public Service Award from the American Pain Society recognizing distinguished contributions to the field of pain medicine through public education, dissemination of information, and public service. Dr. Christo was selected as a Mayday Pain and Society Fellow, and named a “hero” by The Pain Community, a patient advocacy association, for his work on “Aches and Gains.” He was also honored by the American Society of Pain Educators as Pain Educator of the Year for his transformational work on public education through the media.

Dr. Christo is an invited lecturer both nationally and internationally; serves on four journal editorial boards; has published more than 100 articles and book chapters and co-edited three textbooks on pain; and actively teaches medical students, residents, and pain fellows.

Dr. Christo has directed or coordinated many national conferences that focus on educating both specialists and generalists on important aspects of pain diagnosis and treatment.

He serves on the board of directors and executive committee of the Academy of Integrative Pain Management, and has served on committees and advisory boards for the American Academy of Pain Medicine, American Society of Anesthesiologists, International Association for the Study of Pain, and American Pain Society. He earned an MBA from the Johns Hopkins Carey Business School in Health Care Management.

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**Distinguished Service Award**

The Distinguished Service Award is given to an individual for commitment and specific outstanding contributions to AAPM.

**Jeffrey M. Tiede, MD LTC MC USA (co-recipient)**

Jeffrey Tiede serves as director of the Interdisciplinary Pain Management Center at Landstuhl Regional Medical Center, Germany. He holds a bachelor’s degree in biology from Drury University in Springfield, MO; a doctorate from the Saint Louis University School of Medicine; and graduate medical education degrees in anesthesiology and pain management from the Mayo Clinic. In his military capacity, he serves as the Deputy Commander of Clinical Services for the Medical Support Unit–Europe, 7th MSC.

He has practiced pain management in the academic, civilian, and military settings. His previous leadership positions include serving as chief of the division of pain management at Dwight D. Eisenhower Army Medical Center. He deployed in support of Operation Enduring Freedom in 2014 as a BTN Surgeon for the 2nd Brigade Combat Team, STRIKE, 101st Airborne Division (Air Assault). LTC Tiede’s awards and decorations include the Bronze Star Medal and the Meritorious Service Medal.

He served on the AAPM Annual Meeting Program Committee for 7 years, including as the conference co-chair in 2013, and chaired the Scientific Poster Abstract Committee for 5 years. He was previously awarded the AAPM Presidential Commendation for Service to the Academy in 2011.

**James C. Watson, MD (co-recipient)**

James Watson is an associate professor and serves as a vice chair in the department of neurology (practice analytics) at the Mayo Clinic in Rochester, MN, and is the neurology practice chair for the Mayo Clinic Enterprise (integrating the Mayo Clinic Rochester, Arizona, and Florida practices). He holds a dual appointment in the department of anesthesiology and division of pain medicine. He is board certified in neurology, pain medicine, clinical neurophysiology, and neuromuscular disease. His clinical practice includes interventional pain medicine; electrophysiology–EMG; and a consultative pain practice with a special focus on neuropathic pain, spine-related disorders, and headache.

For AAPM, Dr. Watson chairs the Scientific Poster Abstract Committee and serves on the AAPM Annual Meeting Program Committee and Scientific Review and Guidelines Committee. In addition, Dr. Watson has co-founded a headache special interest group for interventional pain providers and contributed to the Anesthesia Neurologic Complications Practice Advisory for the American Society of Regional Anesthesiology and Pain Medicine. He also continues to write pain-related board questions for the American Board of Anesthesiology.
Robert G. Addison, MD, Award

The Robert G. Addison, MD, Award is given to an individual or organization in recognition of outstanding efforts to foster international cooperation and collaboration on behalf of the specialty of pain medicine.

Xue-Jun Song, MD PhD

Xue-Jun Song received his medical degree and completed resident training in anesthesiology at Xuzhou Medical University. He later received a PhD in neurobiology from the Institute of Neuroscience, Chinese Academy of Sciences, and completed his postdoctoral training at the Yale University Department of Anesthesiology and Section of Neurobiology. Dr. Song then served as an assistant, associate, and full professor, as well as director of basic science research, at Parker University Research Institute in Dallas, TX, for 18 years.

Dr. Song is a professor of neurobiology, pain medicine, anesthesiology, and oncology and director of SUSTech Center for Pain Medicine at the Southern University of Science and Technology (SUSTech), Shenzhen, and the executive director of the Center for Pain Medicine, Peking University Health Science Center, Beijing, China. He also serves as president of the CASP/China Chapter of IASP, vice chair of the Chinese Physiological Society Translational Research of Pain Committee, and a standing member of committees of the Chinese Pharmacological-Anesthesiology Society and the International Chinese Academy of Anesthesiology. In addition, he is an editorial board member of PAIN Reports and Pain Medicine and chief editor for English for the Chinese Journal of Pain Medicine.

Dr. Song’s research is focused on understanding the neural mechanisms of general anesthesia and chronic pain after nerve injury, bone cancer, and diabetes, and exploring molecular targets for treatment of chronic pain. His research has resulted in dozens of publications in prestigious journals including Anesthesiology, Brain, Cancer Research, the FASEB Journal, the Journal of Clinical Investigation, the Journal of Neuroscience, the Natural Neuroscience Journal, Pain, and more, as well as patents for chronic pain treatment. Due to his outstanding scientific research, he has been awarded the Scott Haldeman Award and The Louis Sportelli NCMIC Award from the World Federation of Chiropractic, the Chinese National Extraordinary Young Scientist Award, the Jiangsu Province Medical Expert Award, and awards from the Chinese Academy of Sciences and Chinese Ministry of Education.

Pain Medicine Fellowship Excellence Award

AAPM’s annual Pain Medicine Fellowship Excellence Award recognizes Pain Medicine Fellowship Programs within the United States that are accredited by the Accreditation Council for Graduate Medical Education (ACGME) and provide an exceptional learning experience to their fellows, preparing them to deliver the highest standard of care to patients with pain. In addition, the award is intended to honor programs whose efforts coincide with AAPM’s mission “to optimize the health of patients in pain and eliminate the major public health problem of pain by advancing the practice and the specialty of pain medicine.”

2018 Pain Medicine Fellowship Excellence Award Recipients:

Johns Hopkins Pain Medicine Fellowship Program

NYU Langone Health Pain Medicine Fellowship Program
Past Award Recipients

PaInMED2018

Philipp M. Lippe, MD, Award
1995 Philipp M. Lippe, MD
1996 Joel Saper, MD
1997 Richard Stieg, MD
1998 Sridhar Vasudevan, MD
1999 Hubert Rosomoff, MD
2000 J. David Haddox, DDS MD
2001 Kathleen M. Foley, MD
2002 Michael Ashburn, MD MPH
2003 Daniel B. Carr, MD
2004 Robert G. Addison, MD
2005 Kenneth A. Follett, MD PhD
2006 Samuel J. Hassenbusch, MD PhD
2007 Scott M. Fishman, MD
2008 Benjamin L. Crue Jr., MD FACS
2009 Albert L. Ray, MD
2010 Michel Y. Dubois, MD
2011 Douglas Throckmorton, MD
2012 Philip A. Pizzo, MD
2013 Chester “Trip” Buckenmaier III, MD COL (Ret.) MC USA
2014 James P. Rathmell, MD
2015 Lieutenant General Eric Schoomaker, MD PhD; Major General Richard W. Thomas, MG DHA
2016 John D. Loeser, MD
2017 Rollin M. Gallagher, MD MPH

Founders Award
1995 Benjamin Crue, MD
1996 Wilbert Fordyce, PhD
1997 Peter Wilson, MBBS PhD
1998 Tony Yaksh, PhD
1999 Steven Feinberg, MD
2000 Rollin M. Gallagher, MD MPH
2001 Gary J. Bennett, PhD
2002 Russell Portenoy, MD
2003 Donald D. Price, PhD
2004 James C. Eisenach, MD
2005 Edward C. Covington, MD
2006 Gerald F. Gebhart, PhD
2007 Richard B. North, MD
2008 Michael J. Cousins, MD DSc FANZCA FRCA FACP RACP FFpm ANZCA
2009 Nikolai Bogduk, MD PhD DSc
2010 David Lorincz, MSSW
2011 Daniel B. Carr, MD MA
2012 Howard L. Fields, MD PhD
2013 Allan Basbaum, PhD
2014 Steven P. Cohen, MD
2015 Clifford Wolff, MD PhD
2016 Daniel J. Clauw, MD
2017 R. Norman Harden, MD

Pain Medicine Fellowship Excellence Award
2013 Brigham and Women’s Hospital
2014 Jackson Memorial Hospital/University of Miami
2015 Beth Israel Deaconess Medical Center and Mayo Clinic (Rochester, MN)
2016 Cleveland Clinic; Medical College of Wisconsin; University of California, Davis; and University of Pittsburgh Medical Center
2017 Stanford Pain Medicine Fellowship Program

AAPM Presidential Excellence Award for Education
2012 Lynn R. Webster, MD
2013 Debra K. Weiner, MD
2014 Beth B. Murinson, MD PhD
2015 Michael Cousins, MD DSc
2016 Gagan Mahajan, MD
2017 Col. Kevin Galloway, U.S. Army (Ret) MHA BSN

Distinguished Service Award
1996 Patricia Owen
1997 Not Awarded
1998 Paul Gebhard, JD; Kristie Haley
1999 Peter Wilson, PhD MBBS; Ruth Tiernan
2000 Not Awarded
2001 Joel R. Saper, MD FACP FAAN
2002 Elliot Krames, MD
2003 Samuel J. Hassenbusch, MD PhD; Jeffrey W. Engle
2004 Albert L. Ray, MD
2005 Rollin M. Gallagher, MD MPH
2006 Edward C. Covington, MD
2007 Eduardo M. Fraifeld, MD
2008 David A. Fishbain, MD DFAPA
2009 Colleen M. Healy
2010 Scott M. Fishman, MD
2011 Timothy R. Deer, MD DABPM
2012 B. Todd Sitzman, MD MPH
2013 Philip A. Saigh Jr.
2014 Charles E. Argoff, MD; Marsha Stanton, PhD RN
2015 Perry G. Fine, MD
2016 Yu “Woody” Lin, MD
2017 Sean Mackey, MD PhD

Patient Advocacy Award
2001 Warner Wood, MD
2002 Robert Biscup, MS DO
2003 Not Awarded
2004 Kenneth Moritsugu, MD MPH
2005 John (Jack) C. Lewin, MD
2006 Not Awarded
2007 Louis W. Sullivan, MD
2008 Robert D. Kerns, PhD
2009 Not Awarded
2010 Myra Christopher
2011 Will Rowe
2012 Robert J. Saner II, JD
2013 Malene Davis, MBA MSN CHPN, and Capital Caring
2014 Edward J. Blisky, PhD
2015 Samir K. Ballas, MD FACP
2016 Penney Cowan and Carmen R. Green, MD
2017 Judith A. Paice, PhD RN

Robert G. Addison, MD, Award
2014 Tanja Erika Schiereth, MD PhD
2015 ChildKind International
2016 Andrew Moore, DSc
2017 Faculty of Pain Medicine ANZCA

AAPM Presidential Excellence Award for Education
2012 Lynn R. Webster, MD
2013 Debra K. Weiner, MD
2014 Beth B. Murinson, MD PhD
2015 Michael Cousins, MD DSc
2016 Gagan Mahajan, MD
2017 Stanford Pain Medicine Fellowship Program
Perry Fine, MD
In recognition and appreciation of his years of service advocating for pain medicine and pain patients as a member of the Pain Care Coalition.

Robert Wailes, MD, and Donna Bloodworth, MD
In recognition and appreciation of their service representing AAPM at the American Medical Association House of Delegates.

Patrice Harris, MD
In recognition and appreciation of her commitment to physicians and patients and her leadership of the American Medical Association Opioid Task Force.

Judith Scheman, PhD
For her dedication to advancing interdisciplinary pain care both with patients and in training the next generation of behavioral pain clinician.

Charles Argoff, MD
In recognition and appreciation of his leadership of the American Academy of Pain Medicine Foundation and ongoing educational initiatives across multiple specialties and disciplines.

Patrick J Tighe, MD, MS
In recognition of his contributions to the development of the ACTTION-APS-AAPM Acute Pain Taxonomy, a multidimensional acute pain classification system; supporting development of the Acute Pain SIG, and his work related to our academy’s journal, Pain Medicine, including with the Acute Perioperative Pain Section and the growing Social Media Project.

Diane Flynn, MD, COL. (Ret.) MC USA
In recognition of her leadership in advancing multi- and interdisciplinary pain care for the military health system.

W. Michael Hooten, MD
In recognition of his advancement of pain education for clinical professionals.

James Atchison, DO, & Vitaly Gordin, MD
In recognition of their efforts to chair the 2018 AAPM Annual Conference.

Chad Brummett, MD
In recognition of his research in perioperative and post-surgical pain management and his contributions to the field of pain medicine.

Chris Baumgartner, BS
In recognition of his leadership in expanding the impact and effectiveness of Washington state’s Drug Monitoring Program.
### Wednesday, April 25 | Preconference Sessions

<table>
<thead>
<tr>
<th>Time</th>
<th>Location</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Noon–1 pm</td>
<td></td>
<td>Lunch on Your Own</td>
</tr>
</tbody>
</table>

### Thursday, April 26 | Preconference Sessions

<table>
<thead>
<tr>
<th>Time</th>
<th>Location</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>7–11:30 am</td>
<td>East Ballroom A</td>
<td>Interdisciplinary/Multidisciplinary Pain-Based Care—Part 1 of 2 (001)</td>
</tr>
<tr>
<td>11:30 am–12:15 pm</td>
<td></td>
<td>Lunch on Your Own</td>
</tr>
<tr>
<td>12:15–4:45 pm</td>
<td>East Ballroom A</td>
<td>Interdisciplinary/Multidisciplinary Pain-Based Care—Part 2 of 2 (001)</td>
</tr>
</tbody>
</table>

### Thursday, April 26 | Annual Meeting Sessions

<table>
<thead>
<tr>
<th>Time</th>
<th>Location</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>5–6 pm</td>
<td>East Meeting Room 1-3</td>
<td>Opening Session and Award Presentation (101)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Robert G. Addison, MD, Award Presentation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Stakeholder Collaboration in Moving Pain Management Forward: A Payer’s Perspective</td>
</tr>
<tr>
<td>6–7:30 pm</td>
<td>East Exhibit Hall B</td>
<td>Welcome Reception</td>
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<tr>
<td></td>
<td></td>
<td>Exhibits &amp; Poster Session (Group 1 &amp; Late-Breaking)</td>
</tr>
</tbody>
</table>

### Friday, April 27 | Annual Meeting Sessions

<table>
<thead>
<tr>
<th>Time</th>
<th>Location</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>6:30–7 am</td>
<td>East Meeting Room 1-3</td>
<td>AAPM-Provided Breakfast</td>
</tr>
<tr>
<td>7–8 am</td>
<td>East Meeting Room 1-3</td>
<td>Satellite Symposium</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Introducing a Single-Agent, Abuse-Deterrent, Extended-Release Morphine</td>
</tr>
<tr>
<td>8:15–9:15 am</td>
<td>East Exhibit Hall A</td>
<td>General Session I and Award Presentations (102)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>President’s Opening Remarks</td>
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<tr>
<td></td>
<td></td>
<td>Philipp M. Lippe, MD, Award &amp; Distinguished Service Award Presentations</td>
</tr>
<tr>
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<td></td>
<td>Keynote Address: Practicing Medicine in the Age of Accelerations</td>
</tr>
<tr>
<td>9:15–10 am</td>
<td>East Exhibit Hall A</td>
<td>General Session II and Award Presentations (103)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Founders Award &amp; Pain Medicine Fellowship Excellence Award Presentations</td>
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<tr>
<td></td>
<td></td>
<td>Plenary Research Highlights</td>
</tr>
<tr>
<td>10–11 am</td>
<td>East Exhibit Hall B</td>
<td>NETWORKING BREAK</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Exhibits &amp; Poster Session (Group 1 &amp; Late-Breaking)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Meet the Faculty: 10:15-10:45 am</td>
</tr>
<tr>
<td>11 am–Noon</td>
<td>East Ballroom A</td>
<td>Basic, Translational, and Clinical Perspectives on Complex Regional Pain Syndrome (CRPS) (201)</td>
</tr>
<tr>
<td></td>
<td>East Ballroom B</td>
<td>Brain Imaging of Chronic Pain, Research Findings, and Guidelines for Medicolegal Applications (202)</td>
</tr>
<tr>
<td></td>
<td>East Ballroom C</td>
<td>Multidisciplinary Care Model and Contemporary Strategies for Intrathecal Drug Delivery (203)</td>
</tr>
<tr>
<td>Noon–12:30 pm</td>
<td>East Exhibit Hall A</td>
<td>AAPM-Provided Lunch</td>
</tr>
<tr>
<td>Noon–12:30 pm</td>
<td>East Meeting Room 1-3</td>
<td>Satellite Symposium</td>
</tr>
<tr>
<td></td>
<td>East Exhibit Hall A</td>
<td>My Patient’s Not an Addict: Why Should I Prescribe Take-Home Naloxone?</td>
</tr>
<tr>
<td></td>
<td>East Meeting Room 1-3</td>
<td>The Burden of Migraine...an Exploration of Migraine in the Pain Practice and the Role of CGRP on the Impact of the Disease</td>
</tr>
<tr>
<td>1:45–2:45 pm</td>
<td>East Meeting Room 14</td>
<td>SPECIAL EVENT: How to Get Published in Peer-Reviewed Journals</td>
</tr>
<tr>
<td>1:45–2:45 pm</td>
<td>East Ballroom A</td>
<td>Virtual Reality Has Now Come Online for Chronic Pain (204)</td>
</tr>
<tr>
<td>1:45–2:45 pm</td>
<td>East Ballroom B</td>
<td>Poster Research Highlights (205)</td>
</tr>
<tr>
<td>1:45–2:45 pm</td>
<td>East Ballroom C</td>
<td>Ketamine for Pain, Depression, and Post-Traumatic Stress Disorder (PTSD): What Do We Know? (206)</td>
</tr>
<tr>
<td>2:45–3:45 pm</td>
<td>East Exhibit Hall B</td>
<td>NETWORKING BREAK</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Meet the Faculty: 3-3:30 pm</td>
</tr>
<tr>
<td>3:45–4:45 pm</td>
<td>East Meeting Room 14</td>
<td>SPECIAL EVENT: Getting Your Research Funded</td>
</tr>
<tr>
<td>3:45–4:45 pm</td>
<td>East Ballroom A</td>
<td>Neuropathic Pain: Beyond Adjuvants and Opioids: A Look at New and Reemerging Treatments (207)</td>
</tr>
<tr>
<td>3:45–4:45 pm</td>
<td>East Ballroom B</td>
<td>Sleep Away the Pain: Whether and How to Treat Insomnia to Improve Chronic Pain (208)</td>
</tr>
<tr>
<td>3:45–4:45 pm</td>
<td>East Ballroom C</td>
<td>Knowledge and Skill for Implementation of Office-Based Regenerative Pain Practice: An Evidence-Based Approach (209)</td>
</tr>
</tbody>
</table>
**FRIDAY, APRIL 27 | ANNUAL MEETING SESSIONS continued**

<table>
<thead>
<tr>
<th>Time</th>
<th>Location</th>
<th>Event</th>
</tr>
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<tbody>
<tr>
<td>4:45–5 pm</td>
<td><strong>NETWORKING BREAK</strong></td>
<td></td>
</tr>
<tr>
<td>5–6 pm</td>
<td><strong>CONCURRENT SESSIONS</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>East Ballroom A</strong></td>
<td>Collecting Patient-Reported Outcomes (PROs) to Enhance Your Practice and What the Collected Registry Data Tell Us So Far (210)</td>
</tr>
<tr>
<td></td>
<td><strong>East Ballroom B</strong></td>
<td>Suicidality and Chronic Pain: Research/Risk Factors and Monitoring/Evaluation/Treatment in the Context of Opioid Tapering (211)</td>
</tr>
<tr>
<td></td>
<td><strong>East Ballroom C</strong></td>
<td>A Pain in the Rear: Diagnosing and Treating Lumbar Spine and Sacroiliac Complex Pain (212)</td>
</tr>
<tr>
<td>6–7:30 pm</td>
<td><strong>East Exhibit Hall B</strong></td>
<td>AAPM 34th Annual Meeting Reception</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Exhibits &amp; Poster Session (Group 2 &amp; Late-Breaking)</td>
</tr>
</tbody>
</table>

**SATURDAY, APRIL 28 | ANNUAL MEETING SESSIONS**

<table>
<thead>
<tr>
<th>Time</th>
<th>Location</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>6:15–6:45 am</td>
<td><strong>East Meeting Room 1-3</strong></td>
<td>AAPM-Provided Breakfast</td>
</tr>
<tr>
<td>6:45–7:45 am</td>
<td><strong>FREE Satellite Symposium</strong></td>
<td>Current Understanding of the Peripheral and Central Components Involved in the Pain Pathway and Their Roles in Chronic Pain and Future Therapeutics</td>
</tr>
<tr>
<td>7–8:30 am</td>
<td><strong>East Exhibit Hall A</strong></td>
<td><strong>General Session III and Award Presentations (104)</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Patient Advocacy Award &amp; Presidential Excellence Award for Education Presentations</td>
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<tr>
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<td></td>
<td>The National Strategy and U.S. Task Force on Pain and Opioids</td>
</tr>
<tr>
<td>9–9:15 am</td>
<td><strong>NETWORKING BREAK</strong></td>
<td></td>
</tr>
<tr>
<td>9:15–10:15 am</td>
<td><strong>CONCURRENT SESSIONS</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>East Ballroom A</strong></td>
<td>The Conundrum of Acute Hospital Opioid Management: Treatment Challenges, Discharge Opportunities, and Balancing Compassionate Care While Decreasing Harm (301)</td>
</tr>
<tr>
<td></td>
<td><strong>East Ballroom B</strong></td>
<td>Urine, Oral Fluid, or Serum? Interpretation of Interactive Case Studies Using Point of Care (POC) and Laboratory-Based Tests (302)</td>
</tr>
<tr>
<td></td>
<td><strong>East Ballroom C</strong></td>
<td>Not All Headaches Are Migraines! A Practical Approach to Cranial Neuralgias, Unilateral, and Medication-Overuse Headaches (303)</td>
</tr>
<tr>
<td>10:15–11:30 am</td>
<td><strong>East Exhibit Hall B</strong></td>
<td>NETWORKING BREAK</td>
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<td>Exhibits &amp; Poster Sessions (Group 2 &amp; Late-Breaking)</td>
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<td>Meet the Faculty: 10:30–11 am</td>
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<tr>
<td>11:30 am–12:30 pm</td>
<td><strong>CONCURRENT SESSIONS</strong></td>
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<tr>
<td></td>
<td><strong>East Ballroom A</strong></td>
<td>CDC Guideline: Where Do We Stand? Advocating for Physicians and Their Patients in Pain (304)</td>
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<tr>
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<td><strong>East Ballroom B</strong></td>
<td>Web-Based Multimedia Curriculum for Training in Ultrasound-Guided Pain Medicine Procedures (305)</td>
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<tr>
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<td><strong>East Ballroom C</strong></td>
<td>Fake News: The Risk of Promoted Flawed Data and Crucial Role of Evidence-Based Interventional Pain Management (306)</td>
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<tr>
<td>12:30–1 pm</td>
<td><strong>East Meeting Room 1-3</strong></td>
<td>AAPM-Provided Lunch</td>
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<td><strong>East Exhibit Hall A</strong></td>
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<td>1–2 pm</td>
<td><strong>FREE Satellite Symposia</strong></td>
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<td></td>
<td><strong>East Meeting Room 1-3</strong></td>
<td>Clinical Issues in Chronic Pain: Debates &amp; Discussions About Therapeutically Targeting Nerve Growth Factor Signaling</td>
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<td><strong>East Exhibit Hall A</strong></td>
<td>Legislation and Litigation: A Moving Target Impacting Patient Care</td>
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<td>2:15–3:15 pm</td>
<td><strong>CONCURRENT SESSIONS</strong></td>
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<td></td>
<td><strong>East Ballroom A</strong></td>
<td>The New Definition(s) of Pain: Update on Pain Taxonomies, HCAHPS Metrics, and Diagnostic Systems (307)</td>
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<td><strong>East Ballroom B</strong></td>
<td>Cannabis Conundrum! Medical Marijuana Authorization and Integration into the Recreational Marketplace (308)</td>
</tr>
<tr>
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<td><strong>East Ballroom C</strong></td>
<td>Visceral Pain: It Takes a Village: A Medical, Surgical, Behavioral Medicine, and Patient Team-Based Approach (309)</td>
</tr>
<tr>
<td>3:15–3:30 pm</td>
<td><strong>NETWORKING BREAK</strong></td>
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<tr>
<td>3:30–4:30 pm</td>
<td><strong>CONCURRENT SESSIONS</strong></td>
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<td></td>
<td><strong>East Ballroom A</strong></td>
<td>Unintended Prolonged Opioid Use: An Under-Recognized Segue to Long-Term Use (310)</td>
</tr>
<tr>
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<td><strong>East Ballroom B</strong></td>
<td>Extending the Perioperative Surgical Home: Interdisciplinary Strategies to Optimize Perioperative Pain Management (311)</td>
</tr>
<tr>
<td></td>
<td><strong>East Ballroom C</strong></td>
<td>Walking the Line in Pain and the Law: Organized Medicine, Pain Physicians, and AAPM’s Work to Support Providers and Patients (312)</td>
</tr>
<tr>
<td>4:30–4:45 pm</td>
<td><strong>NETWORKING BREAK</strong></td>
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## SATURDAY, APRIL 28 | ANNUAL MEETING SESSIONS  continued

<table>
<thead>
<tr>
<th>Time</th>
<th>Location</th>
<th>Session Title</th>
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<tbody>
<tr>
<td>4:45–5:45 pm</td>
<td><strong>CONCURRENT SESSIONS</strong></td>
<td></td>
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<tr>
<td></td>
<td><strong>East Ballroom A</strong></td>
<td>Buprenorphine/Naloxone for Pain and Opioid Use Disorder (313)</td>
</tr>
<tr>
<td></td>
<td><strong>East Ballroom B</strong></td>
<td>Pearls of Multidisciplinary Treatment of Chronic Pain in the Veterans Health Administration, Medicaid, and Adolescent Populations (314)</td>
</tr>
<tr>
<td></td>
<td><strong>East Ballroom C</strong></td>
<td>Challenging Neuropathic Pain Syndromes: Small Fiber Neuropathy, Erythromelalgia, and Central Neuropathic Pain (315)</td>
</tr>
<tr>
<td>6–7:15 pm</td>
<td><strong>East Ballroom A</strong></td>
<td>AAPM Town Hall</td>
</tr>
</tbody>
</table>

## SUNDAY, APRIL 29 | ANNUAL MEETING SESSIONS

<table>
<thead>
<tr>
<th>Time</th>
<th>Location</th>
<th>Session Title</th>
</tr>
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<tbody>
<tr>
<td>7–7:50 am</td>
<td><strong>General Session IV (105)</strong></td>
<td>Guidelines for the Use of Ketamine to Treat Acute and Chronic Pain</td>
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<tr>
<td></td>
<td><strong>East Meeting Room 1-3</strong></td>
<td>East Ballroom A</td>
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</table>

**ATTEND THE FULL CANCER/PALLIATIVE CARE, NANS NEUROMODULATION, OR BEHAVIORAL HEALTH TRACK SUNDAY MORNING, OR MIX AND MATCH SESSIONS AND PRESENTATIONS THROUGHOUT THE DAY.**

<table>
<thead>
<tr>
<th>Time</th>
<th>Cancer/Palliative Care Track</th>
<th>NANS Neuromodulation Track</th>
<th>Behavioral Medicine Track</th>
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<tr>
<td>8–9 am</td>
<td><strong>East Ballroom A</strong></td>
<td><strong>East Ballroom B</strong></td>
<td><strong>East Ballroom C</strong></td>
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<tr>
<td>9–9:15 am</td>
<td><strong>NETWORKING BREAK</strong></td>
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<td>10:15–10:30 am</td>
<td><strong>NETWORKING BREAK</strong></td>
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<tr>
<td>11:30–11:45 am</td>
<td><strong>NETWORKING BREAK</strong></td>
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<tr>
<td>12:45 pm</td>
<td><strong>Meeting Adjournment</strong></td>
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Pain Medicine Best Practices: Integrative Solutions for Critical Challenges

Many healthcare professionals do not feel adequately trained to evaluate and treat the patient in pain. The Pain Medicine Best Practices: Integrative Solutions for Critical Challenges preconference is designed for pain specialists and subspecialists, primary care providers, and trainees interested in learning how to optimize the management of chronic pain with opioid analgesics and non-opioid therapies.

This session will provide timely and practical information for pain management delivered through didactic lectures, case studies with audience response participation, and interactive small group discussions. Bring your toughest clinical dilemma and join expert faculty to examine the compelling challenges facing pain medicine practitioners today and in the coming decades. Together, faculty and attendees will explore current evidence, best practices, and emerging therapies to develop practical and integrative solutions.

In the afternoon, attendees will rotate through three small-group breakout sessions featuring spinal cord stimulation technological updates, medical and interventional approaches to headache management, and diagnostic conundrums for treatment of neck versus shoulder and back versus hip pain. Experts in the field will serve as breakout faculty to provide interactive training to attendees.

Co-Chairs
Farsbad M. Abadian, MD, and Gagan Mahajan, MD

Morning Program: 7 am–Noon

7–7:10 am
Welcome
Gagan Mahajan, MD

7:10–7:25 am
Critical Challenges in Pain Medicine
Farsbad M. Abadian, MD

7:25–7:45 am
Opioid Prescribing: Current Guidelines and Best Practices
Mark S. Wallace, MD

7:45–8:10 am
Opioid Risk Stratification: Setting the Foundation for Success
Farsbad M. Abadian, MD

8:10–8:35 am
Opioid Monitoring and Implementing an Exit Strategy
Gagan Mahajan, MD

8:35–9 am
Pain, Addiction, and Opioid Therapy: Harm Reduction Strategies
Lynn R. Webster, MD

9–9:20 am
Adjunctive Use of Medical Acupuncture for Opioid Management and Taper
Farsbad M. Abadian, MD

9:20–9:35 am
Q&A
Farsbad M. Abadian, MD; Gagan Mahajan, MD; Mark S. Wallace, MD; and Lynn R. Webster, MD

9:35–9:50 am
Break

9:50–10:10 am
Minimally Invasive Therapies for Neurogenic Claudication: When Epidurals Stop Working and Surgery Is Not an Option
Peter S. Staats, MD

10:10–10:45 am
Radiofrequency Ablation for Lumbar Facet Pain: Evidence and Controversy
Steven P. Cohen, MD

10:45–11:05 am
Radiofrequency Ablation for Knee and Hip Osteoarthritis: Changing the Treatment Paradigm
Steven P. Cohen, MD

11:05–11:25 am
Spinal Cord Stimulation: Technological Updates
Peter S. Staats, MD

11:25–11:45 am
Evidence and Indications for Peripheral Field Stimulation and Peripheral Nerve Stimulation
Peter S. Staats, MD

11:45–Noon
Q&A
Steven P. Cohen, MD, and Peter S. Staats, MD

Noon–1 pm
Lunch Break

Afternoon Program: 1–5 pm

1–1:20 pm
Motivational Interviewing: Changing Attitudes About Pain Management
Ravi Prasad, PhD

1:20–1:40 pm
Medical Marijuana in Pain Medicine: Current Evidence and Best Practices
Mark S. Wallace, MD

1:40–2 pm
Ketamine: Miracle Drug or Latest Fad?
Steven P. Cohen, MD

2–2:15 pm
Q&A
Steven P. Cohen, MD; Ravi Prasad, PhD; and Mark S. Wallace, MD

2:15–2:30 pm
Break

2:30–5 pm
Interactive Modules
Attendees will rotate through the three following 50-minute breakouts:

Care of the Complex Pain Patient: Interdisciplinary Best Practices
Ravi Prasad, PhD, and Mark S. Wallace, MD

Headache Management: Medical and Interventional Approaches
Alexander Feoktistov, MD PhD; Peter S. Staats, MD; and James C. Watson, MD

Diagnostic Conundrums: Neck vs. Shoulder; Back vs. Hip
James W. Atchison, DO; Zachary L. McCormick, MD; and Byron Schneider, MD

The Best Practices Preconference is supported in part by educational grants from the following commercial supporters, as of March 2018: Daiichi Sankyo, Inc.
Interdisciplinary/Multidisciplinary Pain-Based Care

In light of the National Pain Strategy and treatment guidelines supporting a shift toward population-based multidisciplinary care, the role of structured interdisciplinary treatment programs and team-based care has found itself at the frontline of pain management. This preconference will provide a broad stakeholder examination of multi- and interdisciplinary pain management programs. Participants will be highly engaged throughout the day, rotating through active workshop breakout sessions and participating in didactic lectures and panel discussions designed to incorporate attendee ideas and experiences.

The preconference will open with lectures on the philosophy and benefits of interdisciplinary pain management. Expert faculty will provide guidance on developing treatment teams, using available outcomes tools, incorporating opioid reductions into practice, and assessing patients to determine appropriate candidates for this type of care. Techniques and treatments that emphasize changes in brain function for the chronic pain patient will be a focus.

Attendees will then rotate through four small-group breakout sessions featuring hands-on training in physical and occupational therapy, pain psychology, pain education, and relaxation training. Experienced interdisciplinary pain team members will serve as breakout faculty to actively simulate interdisciplinary program treatment sessions for attendees.

The program will conclude with an afternoon expert panel discussion so that attendees can review and develop plans for post-interdisciplinary program treatments and continuation of care, coordination and incorporation of additional and alternative treatments/disciplines, and working with insurance companies and payers to present useful information for approvals.

Co-Chairs
James W. Atchison, DO, and Ravi Prasad, PhD

Morning Program: 7:30–11:30 am
7–7:15 am
Intro to Interdisciplinary Management
Steven P. Stanos, DO
7:15–7:30 am
The Current State of Interdisciplinary Treatment Programs
Michael Harris, PhD, Pacific Rehabilitation Centers
7:30–8 am
Panel: Learning from the Past as We Move into the Future
Kimberly George, RN (Moderator)
Heather Kroll, MD; Diane M. Flynn, MD; Marcos Iglesias, MD MMM; Jeffrey Livovich, MD; and Judith Scheman, PhD
8–8:15 am
Outcomes Assessment in Pain Care
Ravi Prasad, PhD
8:15–8:30 am
Medication Optimization
James W. Atchison, DO
8:30–8:55 am
Philosophy of How Physical and Cognitive Treatments Change Brain Function, Functional Activity Levels, and Quality of Life
Kristin E. Lucas, PT DPT, and Elizabeth Gaffron, MOTR/L
8:55–9:05 am
Break
9:05–9:25 am
Building a Self-Management Treatment Plan
James W. Atchison, DO
9:25–9:50 am
Are There Patients Unsuitable for Interdisciplinary Care?
Ravi Prasad, PhD (Moderator), and Patricia Cole, PhD
9:50–9:55 am
Room Transition Break
9:55–10:40 am
Workshop 1
Clinical Psychology
Patricia Cole, PhD
Biofeedback
Felix Laevsky, MS
Physical Therapy
Hannah Nilles, PT DPT
Occupational Therapy
Elizabeth Gaffron, MOTR/L
10:40–10:45 am
Room Transition Break
10:45–11:30 am
Workshop 2
Clinical Psychology
Patricia Cole, PhD
Biofeedback
Felix Laevsky, MS
Physical Therapy
Hannah Nilles, PT DPT
Occupational Therapy
Elizabeth Gaffron, MOTR/L
11:30 am–12:15 pm
Lunch Break
Afternoon Program: 12:15–4:45 pm
12:15–1 pm
Workshop 3
Clinical Psychology
Patricia Cole, PhD
Biofeedback
Felix Laevsky, MS
Physical Therapy
Hannah Nilles, PT DPT
Occupational Therapy
Elizabeth Gaffron, MOTR/L
1–1:05 pm
Room Transition Break
1:05–1:50 pm
Workshop 4
Clinical Psychology
Patricia Cole, PhD
Biofeedback
Felix Laevsky, MS
Physical Therapy
Hannah Nilles, PT DPT
Occupational Therapy
Elizabeth Gaffron, MOTR/L
1:50–2 pm
Room Transition Break
2–2:45 pm
Panel: What to Do After Formal Treatment
James W. Atchison, DO; Ravi Prasad, PhD; Patricia Cole, PhD; Elizabeth Gaffron, MOTR/L; Sharron Hsu, PhD; Felix Laevsky, MS; Kristin Lucas, PT DPT; and Hannah Nilles, PT DPT
2:45–3 pm
The Oregon Experience: Developing Collaborative Care Multidisciplinary Models for Medicare/Medicaid Patients
Catriona M. Baist, DPsy
3–3:45 pm
Panel: How Do We Collaborate with Insurers to Provide the Most Cost-Effective and Highest Evidence-Based Quality of Care?
Steven P. Stanos, DO, and Kimberly George, RN (moderators)
Teresa Bartlett, MD; Geralyn Datz, PhD; Jeffrey Livovich, MD; and James Moore, PhD
3:45–4:45 pm
Interactive Pain Programs Fair
Steven P. Stanos, DO, and Kimberly George, RN
AAPM 34th Annual Meeting Receptions

Welcome Reception: Thursday, April 26, 6–7:30 pm
AAPM 34th Annual Meeting Reception: Friday, April 27, 6–7:30 pm

Join AAPM leadership, fellow meeting attendees, and industry partners during evening receptions in the Resource Center. Receptions are an excellent opportunity to socialize and network with colleagues, view more than 200 scientific posters featuring the latest pain research, and learn about the newest technologies and products to improve your practice and patient care.

Meet the Faculty
AAPM is excited to again feature Meet the Faculty events during meeting breaks. Plan to visit the Resource Center during the following times for the opportunity to get your questions answered by pain medicine experts and engage in discussion with fellow meeting attendees:
• Friday, April 27, 10:15–10:45 am
• Friday, April 27, 3–3:30 pm
• Saturday, April 28, 10:30–11 am

AAPM Shared Interest Groups (SIGs)
Meeting registrants are invited to participate in SIG meetings, which enable attendees to connect with a niche community of practitioners who share similar interests. Meeting times and locations will be posted at annualmeeting.painmed.org as they become available. The following AAPM SIGs may meet in Vancouver:
• Acute Pain Medicine
• Federal Medicine
• Interdisciplinary Pain Medicine
• Pain Psychology
• Primary Care
• Regenerative Pain Medicine
• Resident Fellow Education

Easily Identify Colleagues with Similar Interests
The AAPM 34th Annual Meeting is the must-attend meeting of the year because it brings together a multidisciplinary group of pain medicine clinicians. Back by popular demand, badge ribbons will help attendees identify colleagues with similar backgrounds and interests to facilitate networking. Visit the ribbon kiosk at the AAPM membership booth located in the Meeting Room level foyer to select ribbons to help you connect with your peers.

Special Event: How to Get Published in Peer-Reviewed Journals
Friday, April 27, 1:45–2:45 pm
Gain invaluable tips and strategies on how to get your research published. Pain Medicine, the official journal of AAPM, considers international research and systematic review papers on all pain topics. Learn how to submit your best research to Pain Medicine!

Special Event: Getting Your Research Funded
Friday, April 27, 3:45–4:45 pm
Expert panelists will provide tips for securing strong mentorship, resources for research and training, and guidance in grant writing for developing a competitive National Institutes of Health application, as well as for managing clinical endeavors and research. A must-attend session for individuals interested in research.

Resource Center
The AAPM Resource Center is the place to network with fellow meeting attendees and industry partners in a dynamic and synergistic atmosphere. At the Resource Center, you can:
• enjoy complimentary beverages and network with colleagues during meeting breaks and evening receptions.
• continue your education by viewing more than 200 scientific posters and meeting the authors.
• visit the AAPM booth to learn about membership, AAPM Foundation, educational products, and Pain Medicine journal.
• meet exhibitors presenting the latest information that will benefit your practice and patients and compare relevant products and services in one convenient place.
• attend short programming that will demonstrate multimodal methods of pain management at the Presentation Centre.
• meet the faculty and learn from our pain medicine experts.
• relax and recharge in the AAPM Lounge.

Want to exhibit or know a company that should exhibit? Go to annualmeeting.painmed.org or e-mail prd@painmed.org.

Resource Center Schedule
Thursday, April 26 ................. 6-7:30 pm
Friday, April 27 .................... 10-11 am,
........................................... 2:30-7:30 pm
Saturday, April 28 ............... 10-11:30 am
Get more meeting.

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Stay informed about hot issues, event program changes, upcoming events, and organizer messages.

- Access the full meeting schedule
- Navigate the meeting venue with maps and room assignments
- Discover local attractions
- Connect with fellow attendees
- Build your personal schedule
- Bookmark sessions and speakers
- Access handouts & CME evaluations

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NOVARTIS
STAKEHOLDER COLLABORATION IN MOVING PAIN MANAGEMENT FORWARD: A PAYER’S PERSPECTIVE

Kimberly George, RN

Stakeholder Collaboration in Moving Pain Management Forward: A Payer’s Perspective

Kimberly George, SVP at Sedgwick Claims, will examine healthcare reimbursement issues, such as prior authorizations, that are commonly seen as barriers by clinicians. Ms. George will guide meeting attendees through novel payer initiatives, including development of top-tier, outcomes-based referral networks and other initiatives to improve patient outcomes and support evidence-based quality care. These collaborative partnerships between payer and clinician can help in the quest to better manage high-impact chronic pain in an ever-changing healthcare market.

FRIDAY, APRIL 27

8:15–9:15 am
GENERAL SESSION I AND AWARD PRESENTATIONS (102)

President’s Opening Remarks
Steven P. Stanos, DO

Presentation of the Philipp M. Lippe, MD, Award to Robin J. Hamill-Ruth, MD

Presentation of the Distinguished Service Award to Jeffrey M. Tiede, MD LTC MC USAR, and James C. Watson, MD

Keynote Address: Practicing Medicine in the Age of Accelerations
Amy L. Compton-Phillips, MD

AAPM is pleased to welcome Amy Compton-Phillips, MD, executive vice president and chief clinical officer for Providence Health & Services, to deliver the 2018 Keynote Address. Dr. Compton-Phillips has an extensive background in directing patient care programs and leading healthcare organizations. She will share a physician executive’s perspective while speaking to AAPM Annual Meeting attendees about navigating healthcare system changes, systems’ responses to pain management issues, and the general state of health care and its impact on pain physicians practicing at both private and academic institutions.

9:15–10 am
GENERAL SESSION II AND AWARD PRESENTATIONS (103)

Presentation of the Founders Award to Robert H. Dworkin, PhD

Presentation of the Pain Medicine Fellowship Excellence Award to the Johns Hopkins Pain Medicine Fellowship Program and NYU Langone Health Pain Medicine Fellowship Program

Plenary Research Highlights

Increasing both the quality and quantity of scientific pain research is a primary goal of the AAPM Annual Meeting. The Scientific Poster Abstract Committee has selected two of the highest-ranking, most novel 2018 poster submissions for live presentation in this plenary venue.

Moderator: James C. Watson, MD

Patient-Centered Prescription Opioid Tapering in Community Outpatients with Chronic Pain (Poster 190—Group 1)
Maisa Ziadni, PhD

Pregabalin and Lidocaine to Alter Neuropathic Pain After Breast Cancer Surgery: Results of a Pilot Factorial-Design Randomized Controlled Trial (Poster 211—Group 2)
James S. Khan, MD MSC

10–11 am
Networking Break

Visit exhibits and see scientific posters (Group 1 and Late-Breaking) in the Resource Center!
10:15–10:45 am
Meet the Faculty: Ketamine
Meet the faculty in the Resource Center.

11 am–Noon
Concurrent Sessions
Basic, Translational, and Clinical Perspectives on Complex Regional Pain Syndrome (CRPS) (201)
The prevalence of complex regional pain syndrome (CRPS) remains high; however, definitive diagnosis often is delayed and treatment is not optimal secondary to lack of knowledge about best practices. This program will change learners’ approach to the diagnosis and management of CRPS in order to optimize early, mechanisms-based interdisciplinary treatment.
Moderator: R. Norman Harden, MD

Complex Regional Pain Syndrome: From the Bench to the Bedside and Back
Vivianne Tawfik, MD PhD

Complex Regional Pain Syndrome: Thoughts on Diagnosis and Promising New Therapies
R. Norman Harden, MD

Brain Imaging of Chronic Pain, Research Findings, and Guidelines for Medicolegal Applications (202)
This session will discuss brain imaging technologies to study chronic pain, along with nerve and brain nerve abnormalities in chronic pain conditions, treatment effects, and pretreatment outcome indicators. In addition, faculty will discuss International Association for the Study of Pain task force findings of the technical and neuroethical issues of using brain imaging to diagnose and prognosticate treatment outcomes.
Moderator: James W. Atchison, DO

Abnormalities of the Dynamic Pain Connectome in Chronic Pain: Can Neuroimaging Be Used to Predict Pain and Treatment Outcomes?
Karen D. Davis, PhD

Brain Functional and Anatomical Reorganization in the Management of Chronic Pain
Marwan N. Baliki, PhD

Multidisciplinary Care Model and Contemporary Strategies for Intrathecal Drug Delivery (203)
Review recent notable changes in the management strategies for patients with a targeted drug delivery system. Speakers also will discuss safety, efficacy, and best practices when employing intrathecal therapy. Pharmacodynamic risks will be compared with oral analgesics, including the risk of respiratory depression, endocrinopathy, hyperalgesia, and addiction. Systemic opioid cessation will be discussed alongside an appraisal of the economics of utilizing targeted drug delivery in a contemporary pain practice.
Moderator: Michael S. Leong, MD

Comparison of Intrathecal and Oral Analgesics: Selected Adverse Effects and Efficacy
Michael S. Leong, MD

Intrathecal Drug Delivery: Is Bolus Administration Better than Continuous?
Jason E. Pope, MD

Cost-Effectiveness of Targeted Drug Delivery
Robert Bolash, MD

Noon–1:45 pm
Networking & Lunch Break

1:45–2:45 pm
Special Event
How to Get Published in Peer-Reviewed Journals
CME not provided.
Rollin M. Gallagher, MD MPH, and R. Norman Harden, MD

1:45–2:45 pm
Concurrent Sessions
Virtual Reality Has Now Come Online for Chronic Pain (204)
Review research on the use of virtual reality (VR) for acute and chronic pain in adults and children as well as the use of VR in increasing limb function. Clinicians should expect to leave with knowledge about new clinical tools for use with their pain patients.
Moderator: Ted Jones, PhD

The Use of Virtual Reality with Pediatric Patients
Jeffrey I. Gold, PhD

The Use of Virtual Reality for Somatic Symptom Disorders
Kim D. Bullock, MD

The Use of Virtual Reality for Chronic Pain: What It Does and Does Not Do
Ted Jones, PhD

Poster Research Highlights (205)
Cutting-edge research from award-winning scientific poster submissions.
Moderator: Patrick J. Tighe, MD MS

Epidural Blood Patch (EBP) Efficacy Clinical and Procedural Predictors in Spontaneous Cerebrospinal Fluid (CSF) Hypovolemia (Poster 162—Group 1)
Gabriel L. Pagani-Estevez, MD

Access to Pharmacologic Pain Therapies Among Patients with Disabilities (Poster 287—Group 2)
Allison Glinka Przybysz, MD MPH

Healthcare Utilization Analysis of a Comprehensive Pain Rehabilitation Program: A Retrospective Cohort Study (Poster 293—Group 2)
Christy L. Hunt, DO MS

Development and Initiation of an Opioid Overdose Prevention Quality Improvement Program on an Inpatient Rehabilitation Unit (Poster 303—Group 2)
Ada Lyn Yao, MD

Please note: APA credits are not provided for session 205.

Ketamine for Pain, Depression, and Post-Traumatic Stress Disorder (PTSD): What Do We Know? (206)
A critical examination of the current use of ketamine for the treatment of intractable pain as well as for alleviating depression and PTSD. Faculty also will review the literature and address issues related to efficacy, side effects, and long-term outcomes. In addition, case discussions will illustrate the synergistic use of ketamine and psychotherapeutic interventions to reduce severe neuropathic pain and PTSD.
Moderator: May L. Chin, MD

Ketamine for Intractable Pain
May L. Chin, MD
Ketamine for Depression
Brian A. Erickson, MD

Interdisciplinary Ketamine for the War Against Co-Occurring Severe Neuropathic Pain and PTSD
Benjamin Keizer, PhD

2:45–3:45 pm
Networking Break
Visit exhibits in the Resource Center!

3–3:30 pm
Meet the Faculty: Neuropathic Pain
Meet the faculty in the Resource Center!

3:45–4:45 am
Special Event
Getting Your Research Funded
CME not provided.
Jennifer M. Hah, MD MS; Yu “Woody” Lin, MD PhD; and Sean Mackey, MD PhD

3:45–4:45 pm
Concurrent Sessions
Neuropathic Pain: Beyond Adjuvants and Opioids: A Look at New and Reemerging Treatments (207)
Efficacy often is limited with currently available neuropathic pain adjuvants. This session will focus on new and re-emerging treatments for neuropathic pain—including low-dose naltrexone—and the status of novel agents in development. Emerging evidence for available nontraditional treatments also will be reviewed.
Moderator: James C. Watson, MD

The Role of Low-Dose Naltrexone for the Treatment of Neuropathic Pain Syndromes
Neel Mehta, MD

Emerging Therapies in the Treatment of Neuropathic Pain
Charles E. Argoff, MD

Sleep Away the Pain: Whether and How to Treat Insomnia to Improve Chronic Pain (208)
Review recent research on how disrupted sleep can worsen chronic pain, as well as effective interventions for treating insomnia and chronic pain that go beyond basic sleep hygiene or the use of pharmaceutical sleep aids. The session will introduce attendees to cognitive behavioral therapy (CBT) for insomnia and chronic pain and explore approaches for combining CBT protocols to treat comorbid chronic pain and insomnia. In addition, faculty will provide an introduction to the literature regarding circadian rhythmicity and pain, with an emphasis on therapeutic considerations.
Moderator: Heather Poupore-King, PhD

Relationship Between Sleep and Pain
Heather Poupore-King, PhD

Non-Drug Treatments for Sleep and Pain
Fiona Barwick, PhD

Circadian Rhythms in Sleep and Pain
R. Robert Auger, MD

Knowledge and Skill for Implementation of Office-Based Regenerative Pain Practice: An Evidence-Based Approach (209)
There is an increasing body of evidence for regenerative pain therapy. New research and technology continue to improve safety and outcomes for office-based pain practices. This session discusses the knowledge and skill needed for implementation of office-based regenerative pain practice through an evidence-based approach.
Moderator: Wenchun Qu, MD PhD

Implementation of Office-Based Technology for Regenerative Therapy in Pain Practice
Wenchun Qu, MD PhD

Mechanism of Mesenchymal Stem Cell Therapy and Regulatory Compliance
Jianguo Cheng, MD PhD

Update on Evidence for Regenerative Therapies for Pain
Jay E. Bowen, DO

4:45–5 pm
Networking Break

5–6 pm
Concurrent Sessions
Collecting Patient-Reported Outcomes (PROs) to Enhance Your Practice and What the Collected Registry Data Tell Us So Far (210)
Updates from the Collaborative Health Outcomes Information Registry (CHOIR), including new data and the practicalities of using it in interventional pain clinics and multidisciplinary pain centers, will be discussed throughout this session.
Moderator: Ajay D. Wasan, MD MSc

The Latest CHOIR Enhancements Make It Even Easier to Get It Up and Running
Sean Mackey, MD PhD

Collecting PROs in an Interventional Pain Practice and Treatment Outcomes Results
Ajay D. Wasan, MD MSc

Enhancing Clinical Practice with CHOIR and Getting Your Health System to Adopt It
Robert W. Hurley, MD PhD

Suicidality and Chronic Pain: Research/Risk Factors and Monitoring/Evaluation/Treatment in the Context of Opioid Tapering (211)
Chronic pain patients (CPPs) are at high risk for suicidality, which could be increased in the context of opioid tapering. This session presents recent research in this area along with monitoring techniques for suicidality development in CPPs undergoing opioid tapering. In addition, evaluation/treatment procedures for such CPPs will be discussed.
Moderator: David A. Fishbain, MD

Suicidality and Chronic Pain: Research Status, Risk Factors, and Opioid Tapering Impact
David A. Fishbain, MD

Suicidality Monitoring/Evaluation/Treatment in the Chronic Pain Setting in the Context of Opioid Tapering
W. Michael Hooten, MD
AAPM 34TH ANNUAL MEETING PROGRAM | FRIDAY–SATURDAY

A Pain in the Rear: Diagnosing and Treating Lumbar Spine and Sacroiliac Complex Pain (212)
Lumbar spine and posterior pelvic/hip girdle pain is often challenging to diagnose and treat. This session elucidates an evidence-based paradigm for effective diagnosis and treatment, rooted in knowledge of prevalence rates and the diagnostic value of clinical tests. Recent developments in related outcomes literature also will be reviewed.
Moderator: Zachary L. McCormick, MD

Don’t Always Blame the Sacroiliac Joint
Byron Schneider, MD

What Is New and What Is True? An Evidence-Based Update of Treatments for Lumbar Spine and Sacroiliac Complex Pain
Zachary L. McCormick, MD

6–7:30 pm
AAPM 34th Annual Meeting Reception
Cap off your day by networking with fellow meeting attendees in the Resource Center. View scientific posters (Group 2 and Late-Breaking) and meet the authors. Cocktails and refreshments will be served. Entry is included with meeting registration.

SATURDAY, APRIL 28

8–9 am
GENERAL SESSION III AND AWARD PRESENTATIONS (104)

Presentation of the Patient Advocacy Award to Paul Christo, MD MBA

Presentation of the Presidential Excellence Award for Education to Larry C. Driver, MD

The National Strategy and U.S. Task Force on Pain and Opioids

Shared Solutions for Our Pain and Opioid Crises
Sean Mackey, MD PhD

9–9:15 am
Networking Break

9:15–10:15 am
Concurrent Sessions

The Conundrum of Acute Hospital Opioid Management: Treatment Challenges, Discharge Opportunities, and Balancing Compassionate Care While Decreasing Harm (301)
Managing patients’ pain levels during hospitalization presents many challenges. Some patients may be naïve to opioids while others are habituated to them, making it difficult to appropriately regulate individual patients’ doses. As patients prepare to leave the hospital, clinicians must make decisions about discharge prescriptions. Utilizing case-based scenarios, this session will address these challenges of acute hospital opioid management and provide solutions for balancing compassionate care while decreasing potential harm.
Moderator: James W. Atchison, DO

The Role of Acute Care Prescribing in the Opioid Epidemic
Chad M. Brummett, MD

Acute Pain Care in a Complex World: The Harborview Medical Center Experience
Ivan K. Lesnik, MD

Urine, Oral Fluid, or Serum? Interpretation of Interactive Case Studies Using Point of Care (POC) and Laboratory-Based Tests (302)
Urine, oral fluid, or serum drug testing is commonly incorporated into the management of pain patients. This session discusses the advantages and limitations of these tests using interactive case studies to directly apply this knowledge to correctly interpret patient test results.
Moderator: Paul J. Jannetto, PhD

Understanding and Interpreting Oral Fluid Testing in Pain Management Patients
Paul J. Jannetto, PhD

Understanding and Interpreting Urine Testing in Pain Management Patients
Robin J. Hamill-Ruth, MD

Understanding and Interpreting Serum Testing in Pain Management Patients
Loralie J. Langman, PhD

Please note: APA credits are not provided for session 302.

Not All Headaches Are Migraines! A Practical Approach to Cranial Neuralgias, Unilateral, and Medication-Overuse Headaches (303)
Not all unilateral headaches are migraines. Correct treatment depends on correct diagnosis. This session focuses on the diagnostic approach to unilateral headache and an evidence-based treatment approach to nonmigrainous unilateral headaches, including cranial neuralgias. The challenge of successful management of medication-overuse headache also will be addressed.
Moderator: James C. Watson, MD

A Practical Approach to Cranial Neuralgias
James C. Watson, MD

Non-Migrainous Unilateral Headache
Alexander Feoktistov, MD PhD

Successful Management of Medication-Overuse Headache
Zabid H. Bajwa, MD
10:15–11:30 am  
**Networking Break**
Visit exhibits and see scientific posters (Group 2 and Late-Breaking) in the Resource Center!

10:30–11 am  
**Meet the Faculty: Behavioral Pain Medicine**
Meet the faculty in the Resource Center!

11:30 am–12:30 pm  
**Concurrent Sessions**

- **CDC Guideline: Where Do We Stand? Advocating for Physicians and Their Patients in Pain (304)**
  This session provides an update on the Centers for Disease Control and Prevention (CDC) guideline and opioid-related regulatory issues, as well as their impact on both patients in pain and their treating physicians. Speakers from the American Medical Association Opioid Task Force, AAPM’s CDC guideline project, and AAPM’s Opioid Advisory Committee will provide their points of view followed by an interactive session with the goal of improving attendee and speaker perspectives on the intended, and unintended, consequences of the CDC guidelines and resultant regulations.
  
  *Moderator and Introduction: Steven R. Hanling, MD*

- **A GPS for a Maze of Guidelines and Regulations**
  Patrice A. Harris, MD MA

- **CDC Opioid Guideline: Lost in Translation**
  Kurt Kroenke, MD

- **Web-Based Multimedia Curriculum for Training in Ultrasound-Guided Pain Medicine Procedures (305)**
  This educational session discusses how to develop a multimedia, web-based ultrasound curriculum that provides standardized training in ultrasound techniques in education and clinical practice. Attendees will learn practical approaches to the design of curricula to improve training, competence, and patient outcomes. The faculty also will demonstrate this technology.
  
  *Moderator: Matthew J. Pingree, MD*

- **Content Creation and Demonstration**
  Matthew J. Pingree, MD

- **Assessing the Learner**
  Rebecca Sanders, MD

- **Outcome Measures and Future Directions**
  Thomas P. Pittelleke, DO MPH

- **Fake News: The Risk of Promoted Flawed Data and the Crucial Role of Evidence-Based Interventional Pain Management (306)**
  An evidence-based review of common interventional procedures focusing on epidural steroid injections and radiofrequency neurotomy. The importance of patient selection and procedural techniques to help counteract the inappropriate combining of divergent techniques and patient populations that is frequently done in review articles and practice guidelines will be highlighted.
  
  *Moderator: Yakov Vorobeychik, MD PhD*

- **Lumbar Medial Branch Radiofrequency Neurotomy: An EBM Overview of Selection and Technique**
  David J. Kennedy, MD

12:30–2 pm  
**Networking & Lunch Break**

2:15–3:15 pm  
**Concurrent Sessions**

- **The New Definition(s) of Pain: Update on Pain Taxonomies, HCAHPS Metrics, and Diagnostic Systems (307)**
  Recently, the American Academy of Pain Medicine, Food and Drug Administration, and American Pain Society have developed new approaches toward establishing a formal taxonomy of acute and chronic pain conditions. This session reviews existing and proposed systems for categorizing pain conditions, including those with related mandates by the Centers for Medicare & Medicaid Services.
  
  *Moderator: Patrick J. Tighe, MD MS*

- **The New Taxonomies of Pain: AAPT, AAAPT, HCAHPS, and ICD11**
  Patrick J. Tighe, MD MS

- **How to Change the Discussion: Principles of Formulation and Validation of Diagnostic Criteria**
  Stephen Bruehl, PhD

- **From Publication to Practice: Clinical Impact of Updated Taxonomic Structures in Sickle Cell Disease Pain**
  Carlton Dampier, MD

- **Cannabis Conundrum! Medical Marijuana Authorization and Integration into the Recreational Marketplace (308)**
  This session will provide an overview of the Canadian Access to Cannabis for Medical Purposes Regulations (ACMPR), covering the history, status, implications for practitioners and providers, and opportunities for research and pharmacosurveillance. Patient communication, screening, monitoring, and follow-up will be discussed. The session will further review how the medical market was integrated into the regulated market established under I-502 in 2012. In 2015, Substitute Senate Bill 5052 was passed to create the integrated market. The new system allows for additional benefits for patients and their designated providers not previously available. Case-based scenarios will assist attendees in understanding this complex law.
  
  *Moderator: Mark A. Ware, MD MSc*

- **Cannabis Prescribing in Canada: Challenges and Opportunities**
  Mark A. Ware, MD MSc

- **Integrating Medical Marijuana into a Recreational Market: The Washington State Experience**
  Christopher Baumgartner, BS
Visceral Pain: It Takes a Village: A Medical, Surgical, Behavioral Medicine, and Patient Team-Based Approach (309)

As understanding of pathogenesis of visceral pain improves, there is increasing evidence of alterations in brain-gut interactions resulting in exacerbation of inflammation and motility issues. This session explores how management is shifting from single provider pain management to interdisciplinary approaches, including psychology and enhanced recovery after surgery when surgery is necessary.

Moderator: Judith Scheman, PhD

Managing Acute and High-Impact Chronic Visceral Pain: Helping to Take the Flame Out of IBD

Tracy Hull, MD

Enhanced Recovery After Colorectal Surgery: Fewer Opioids, Faster Recovery, Happier Patients

Tracy Hull, MD

Paradigm Shift in the Management of Visceral Pain: From Gastroenterologist to Surgeon to Psychologist

Linda A. Nguyen, MD

3:15–3:30 pm
Networking Break

3:30–4:30 pm
Concurrent Sessions

Unintended Prolonged Opioid Use: An Under-Recognized Segue to Long-Term Use (310)

With rare exceptions, practitioners do not intend for an initial opioid prescription given for an acute pain episode to result in indefinite repeat prescriptions—a phenomenon termed unintended prolonged opioid use (UPOU). Recently, intentional short-term use has emerged as a previously under-recognized segue to long-term use. This session provides an expanded awareness of the complex determinants, allowing clinicians the ability to better understand and mitigate UPOU.

Moderator: W. Michael Hooten, MD

Epidemiology, Patient Factors, and Regulatory Influences

W. Michael Hooten, MD

The Role of Patient Self-Selection

Mark Sullivan, MD PhD

Negative Affect and the Mediating Role of Opioid Craving

Ajay D. Wasan, MD MSc

Extending the Perioperative Surgical Home: Interdisciplinary Strategies to Optimize Perioperative Pain Management (311)

The Perioperative Surgical Home encourages an interdisciplinary approach to perioperative care long after discharge. This session provides novel interdisciplinary strategies to optimize perioperative pain management to bridge the continuum of postoperative pain. In addition, long-term outcomes of routine acute pain interventions, with presentation of real-world implementation efforts, will be discussed.

Moderator: Jennifer Hab, MD MS

Novel Interdisciplinary Approaches to Improve Long-Term Outcomes After Surgery

Jennifer Hab, MD MS

Innovative and Established Interdisciplinary Acute Pain Interventions: Separating Fact from Fiction

David A. Edwards, MD PhD

Pathways to Implementation: Preoperative Optimization of Patients with Chronic Pain

Arun Ganesh, MD

Walking the Line in Pain and the Law: Organized Medicine, Pain Physicians, and AAPM’s Work to Support Providers and Patients (312)

How do the regulatory and legal systems risk infringing upon the very practice of medicine? This session will discuss how broad-based legislation in a “one size fits all” capacity impacts individualized and personalized practice—and how this approach has changed physician practice even when opioids aren’t part of the picture.

Moderator: Robert E. Wailes, MD

One Physician’s Story

Lynn R. Webster, MD

AAPM and the AMA: Organized Medicine’s Response to Protect Physicians and Patients

Robert E. Wailes, MD

How the State of Washington Applies the Law: The Frank Li Case. How Does This Apply to Me?

Micah T. Matthews, MPA CPM

4:30–4:45 pm
Networking Break

4:45–5:45 pm
Concurrent Sessions

Buprenorphine/Naloxone for Pain and Opioid Use Disorder (313)

This session will use didactic lecture, audience discussion, and case studies to provide learners with information about the intersection of pain and opioid use disorder and discuss screening and assessment tools, as well as treatment approaches for managing these co-occurring disorders.

Moderator: Kristen Huntley, PhD

The Arc of the Opioid Epidemic and Adoption of Evidence-Based Practices

Kristen Huntley, PhD

Opioid Agonist Therapy for Pain and Opioid Use Disorder

William Becker, MD

Management of Buprenorphine Within the Perioperative Period

Jordan L. Newmark, MD
Parels of Multidisciplinary Treatment of Chronic Pain in the Veterans Health Administration, Medicaid, and Adolescent Populations (314)

This session provides pearls in the multidisciplinary treatment of chronic pain in three distinct populations. The Veterans Health Administration (VA) presentation discusses the challenges of effectively and efficiently coordinating care between pain specialty and primary care teams, sharing lessons learned from the VA’s team-based pain care model at all levels, and posting potential solutions informed by best practices for the community. The Medicaid presentation describes how an innovative data-driven transformative culture can become a catalyst for significant improvements in patient care while reducing healthcare costs. The adolescent presentation discusses the biopsychosocial-spiritual impact that chronic pain has on adolescents by presenting case-based scenarios.

Moderator: Friedhelm Sandbrink, MD

Team Care Everywhere: Translational Lessons from the VA’s Stepped Care Model for Pain
Friedhelm Sandbrink, MD

Lessons Learned from Clinical and Insurer Perspectives in Treating the Medicaid Population
Tobias Moeller Bertram, MD PhD

SUNDAY, APRIL 29
7–7:50 am
GENERAL SESSION IV (105)
Guidelines for the Use of Ketamine to Treat Acute and Chronic Pain
An expert panel will offer insight into key findings on indications for the use of ketamine, optimal dosing, physiological monitoring, and contraindications from a newly developed clinical guideline.

Moderator: Steven P. Cohen, MD

Ketamine: Developing of the ASRA, AAPM, and ASA Guidelines for Chronic Pain and Recommendations for Use
Steven P. Cohen, MD

Pre-Treatment Testing and Monitoring for Ketamine Infusions
Robert W. Hurley, MD PhD

Contraindications for Ketamine Infusions
Ajay D. Wasan, MD MSc

Clinical Indications and Treatment Effects of Ketamine for Chronic Pain
W. Michael Hooten, MD

8 am–12:45 pm
NEW! Special Topics in Pain Medicine Tracks
Included with AAPM 34th Annual Meeting registration are three extended 4-hour special topic tracks. Attendees can select to attend the full Cancer/Palliative Care, NANS Neuromodulation, or Behavioral Health track Sunday morning, or mix and match track sessions and presentations throughout the morning.

Cancer/Palliative Care Track
This innovative interdisciplinary track brings together experts in managing pain and collateral symptoms in the cancer patient, recognizing new pain problems resulting from novel therapies, emphasizing the utility of interdisciplinary assessment and management approaches, and considering contexts for providing palliative care strategies.

In the past several years, technological advances in spinal cord stimulation (SCS) have led to significant and rapid improvement in outcomes. This program will present advances in SCS, including current understanding of mechanism of action, emerging waveform modalities, and evidence-based data supporting expanded patient selection and disease-specific indications.

Behavioral Medicine Track: A Behavioral Medicine Workshop for Healthcare Professionals
Back by popular demand, this interactive basic and advanced skills workshop will give participants a solid understanding of the biopsychosocial model of pain. Targeted outcomes include increased confidence and the ability to facilitate patient receptivity and engagement in behavioral pain medicine. Attendees will leave with clinical toolkits, enduring resources, and scripts for difficult topics.

8–9 am
CONCURRENT SPECIAL TOPICS IN PAIN MEDICINE TRACKS
Cancer/Palliative Care Track—Curing Cancer May Hurt: Updates and Strategies for Managing Treatment-Related Cancer Pain (401)
Evolving cancer treatment options include the newer perioperative protocols, radiation therapies, and chemo- and immunotherapies, each resulting in pain syndromes that vary from the common expected symptom burdens from traditional treatments. This case-based, interactive session will expand learners’ understanding of some of the newer cancer treatment
options and some of the pain sequelae of those treatments, as well as recommend approaches that can help those patients.

Moderator: Larry C. Driver, MD

**Advances in Radiation Treatments and Resultant Pain Syndromes in the Oncologic Population**

Vinay Puttanniah, MD

**Advances in Oncologic Surgical Pain Treatments: ERAS Protocols and Chronic Surgical Pain Syndromes**

Thomas Van de Ven, MD PhD

**Emerging Pain Syndromes and Treatment Options for Newer Chemo- and Immunotherapies**

Amitabh Gulati, MD


This session will present the science underpinning proposed SCS mechanisms of action and patient selection considerations—a key to successful clinical outcomes.

Welcome and Introduction: B. Todd Sitzman, MD MPH

**Spinal Cord Stimulation in Chronic Pain: Mode of Action**

Ricardo Vallego, MD PhD

**SCS Patient Selection Considerations and Disease Specific Indications**

B. Todd Sitzman, MD MPH

**Behavioral Medicine Track—A Behavioral Medicine Workshop for Healthcare Professionals Session 1 of 4: Advanced Skills Target High-Impact Chronic Pain! (403)**

This first of four sessions discusses the foundational nuts-and-bolts knowledge on integrating behavioral medicine into clinical care.

Moderator: Beth D. Darnall, PhD

**The Psychological Science of Pain and Relief**

Beth D. Darnall, PhD

9–9:15 am

**Networking Break**

9:15–10:15 am

**CONCURRENT SPECIAL TOPICS IN PAIN MEDICINE TRACKS**

**Cancer/Palliative Care Track—Rapidly Changing Paradigms in Oncologic Pain Medicine in an Era of Prescribing Scrutiny (407)**

As perceptions of opioid therapy evolve, care must be taken to ensure that suffering cancer patients are not inadvertently ignored as an unintended consequence. This session provides a current perspective on the World Health Organization’s pain treatment ladder, relevant risk management tools, safe opioid prescribing and monitoring practices, and multimodal adjuvant treatment approaches (including cannabis where legal)—all of which can help mitigate pain and symptom burdens and enhance quality of life.

Moderator: Larry C. Driver, MD

**Modifying the WHO Ladder with Newer Opioid Treatment Strategies**

Amitabh Gulati, MD

**Establishing Safe Prescribing and Monitoring Habits for Cancer Patients on Opioid Therapy**

Dhanalakshmi Koyyalagunta, MD

Starting Multimodal Cancer Pain Techniques to Address the Opioid Crisis in the Oncologic Population

Vinay Puttanniah, MD

**Give Them What They Want?: Yes or No to Cannabis for Patients with Serious Illness**

Jacob J. Strand, MD

**The Cancer Is Gone—Now What to Do with the Opioids? Managing Chronic Pain in Cancer Survivors**

Mibhir M. Kamdar, MD


This session continues the SCS Neuromodulation track, reviewing the value of psychological evaluation, as well as available high-quality evidence from Level I and II studies supporting the use of SCS in chronic pain involving the axial spine and extremities.

Moderator: B. Todd Sitzman, MD MPH

**Value of Psychological Evaluation Prior to Neuromodulation Therapy**

Daniel M. Doleys, PhD

**Spinal Cord Stimulation for Back and Leg Pain**

Kasra Aminidefan, MD

**Behavioral Medicine Track—A Behavioral Medicine Workshop for Healthcare Professionals Session 2 of 4: Advanced Skills Target High-Impact Chronic Pain! (406)**

This second of four sessions continues the discussion on the foundational nuts-and-bolts knowledge on integrating behavioral medicine into clinical care.

Moderator: Jennifer L. Murphy, PhD

**Buying Into Biopsychosocial**

Jennifer L. Murphy, PhD

10:15–10:30 am

**Networking Break**

10:30–11:30 am

**CONCURRENT SPECIAL TOPICS IN PAIN MEDICINE TRACKS**

**Cancer/Palliative Care Track—Palliative Care and Pain Medicine: The “Naughty Patient,” Yes or No to Cannabis? The Cancer Is Gone but the Opioids Are Not (404)**

When trying to address the challenges inherent in pain management and palliative care for the cancer patient, knowing “what to do” can be a daunting task for clinicians. This session provides practical strategies to manage the patient on opioids who has demonstrated aberrant use, better understanding of cannabis in order to better advise patients, and chronic pain care for cancer survivors—all important areas of expertise needed for safe and effective care.

Moderator: Larry C. Driver, MD

**Rising to the Challenge of the “Naughty Patient”: Identifying and Managing Aberrant Opioid Use Behaviors in Patients with a Serious Illness**

Halena Gazelka, MD

**Modifying the WHO Ladder with Newer Opioid Treatment Strategies**

Amitabh Gulati, MD

**Establishing Safe Prescribing and Monitoring Habits for Cancer Patients on Opioid Therapy**

Dhanalakshmi Koyyalagunta, MD

Starting Multimodal Cancer Pain Techniques to Address the Opioid Crisis in the Oncologic Population

Vinay Puttanniah, MD

This session continues the SCS Neuromodulation track, reviewing available high-quality evidence from Level I and II studies supporting the use of SCS in chronic pain involving the neck and extremities, and for treatment of painful peripheral neuropathy.

Moderator: B. Todd Sitzman, MD MPH

Spinal Cord Stimulation for Neck and Upper Extremity Pain
Kasra Amirdelfan, MD

Spinal Cord Stimulation for Back and Leg Pain
Peter S. Staats, MD

Behavioral Medicine Track—A Behavioral Medicine Workshop for Healthcare Professionals Session 3 of 4: Advanced Skills Target High-Impact Chronic Pain! (409)

This third of four sessions provides advanced training in difficult cases and high-impact chronic pain. Interactive components include group discussion and skills application in vignette cases of high-impact chronic pain. It also includes skill-building workshops and panel discussion.

Moderator: Sara Davin, PsyD

Strategies for Improving Challenging Interactions and Optimizing Outcomes for High-Impact Chronic Pain: Identification and Treatment Planning and Communication Skills
Sara Davin, PsyD

Advanced Application/Skill-Building Workshops/Panel Discussion
Beth D. Darnall, PhD; Sara Davin, PsyD; Jennifer L. Murphy, PhD; and Judith Scheman, PhD

11:30–11:45 am
Networking Break

11:45 am–12:45 pm
CONCURRENT SPECIAL TOPICS IN PAIN MEDICINE TRACKS

Cancer/Palliative Care Track—The Interdisciplinary Cancer Pain Management Collaborative: Patient-Centered Teamwork (410)

The Vanderbilt matrix model of interdisciplinary, multispecialty cancer pain care utilizes the expertise of various specialists such as the oncologist, functional neurosurgeon, and interventional pain specialist, all contributing key diagnostic, treatment, and triage expertise based on their particular vantage point. This session details how this approach can provide the patient more and better options for pain and symptom control, improved quality of life, and even increased survival.

Moderator: Larry C. Driver, MD

The Interventional Pain Doctor’s Collaborative Role in Diagnosis, Treatment, and Triage of Cancer Pain Patients
David A. Edwards, MD PhD

The Functional Neurosurgeon’s Role: Operative Cancer Pain Treatment: Who Is a Good Candidate and Who Isn’t?
Hamid Shah, MD

The Oncologist’s Role: Triaging Patients in Pain—Crucial Information for Interventional Collaborators
Barbara Murphy, MD


This session concludes the SCS Neuromodulation track, presenting an overview of clinical best practices, including patient and device selection, perioperative management, and complication mitigation strategies. This will be followed by a Q&A panel with all program faculty.

Moderator: B. Todd Sitzman, MD MPH

B. Todd Sitzman, MD MPH

Q&A Panel
Kasra Amirdelfan, MD, Daniel M. Doleys, PhD; Peter S. Staats, MD; B. Todd Sitzman, MD MPH; and Ricardo Vallejo, MD PhD

Behavioral Medicine Track—A Behavioral Medicine Workshop for Healthcare Professionals Session 4 of 4: Advanced Skills Target High-Impact Chronic Pain! (412)

This final session provides advanced training in difficult cases and high-impact chronic pain. It includes challenging case examples and interactive workshops, as well as role plays and a panel discussion.

Moderator: Judith Scheman, PhD

Strategies for Improving Challenging Interactions and Optimizing Outcomes for High-Impact Chronic Pain: Challenging Case Examples and Interactive Workshop
Judith Scheman, PhD

Role Plays and Panel Discussion
Beth D. Darnall, PhD; Sara Davin, PsyD; Jennifer L. Murphy, PhD; and Judith Scheman, PhD

12:45 pm
MEETING ADJOURNMENT
Faculty disclosures can be found online at www.painmed.org/annualmeeting/2018-faculty-disclosures.
CLINICAL ISSUES IN CHRONIC PAIN
DEBATES AND DISCUSSIONS ABOUT THERAPEUTICALLY TARGETING NERVE GROWTH FACTOR SIGNALING

SATURDAY APRIL 28
1:00 PM - 2:00 PM
EAST MEETING ROOM 1, 2, 3
Vancouver Convention Centre | Lunch will be provided.

FACULTY

Charles E. Argoff, MD
Professor of Neurology
Albany Medical College
Director, Comprehensive Pain Center
Albany Medical Center
Albany, New York

Alfonso E. Bello, MD
Clinical Associate Professor of Medicine
University of Illinois College of Medicine at Chicago
Physician, Rheumatology and Interventional Pain Management
Director of Rheumatology Research
Illinois Bone & Joint Institute
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Jeffrey A. Gudin, MD
Director, Pain Management and Wellness Center
Englewood Hospital and Medical Center
Englewood, New Jersey

Egilius L.H. Spierings, MD, PhD
Clinical Professor of Neurology & Craniofacial Pain
Tufts University Schools of Medicine & Dental Medicine
Boston, Massachusetts
Founder, Medical Director, and Principal Investigator
MedVadis Research
Watertown, Massachusetts

TARGET AUDIENCE

The educational design of this activity addresses the needs of pain specialists and other clinicians involved in the management of patients with chronic osteoarthritic or low back pain.

EDUCATIONAL OBJECTIVES

After completing this activity, the participant should be better able to:

• Discuss the pathophysiologic underpinnings of chronic osteoarthritic and low back pain with a focus on contributions from nerve growth factor (NGF)

• Educate patients about limitations in efficacy, and personal and public risks associated with currently available pharmacologic treatment options for chronic osteoarthritic or low back pain

• Describe the mechanistic rationales and clinical evidence for emerging analgesic strategies designed to inhibit NGF signaling

PHYSICIAN ACCREDITATION STATEMENT

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Global Education Group (Global) and Integritas Communications. Global is accredited by the ACCME to provide continuing medical education for physicians.

This CME/CE activity complies with all requirements of the federal Physician Payment Sunshine Act. If a reportable event is associated with this activity, the accredited provider managing the program will provide the appropriate physician data to the Open Payments database.

PHYSICIAN CREDIT DESIGNATION

Global Education Group designates this live activity for a maximum of 1.0 AMA PRA Category 1 Credit™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

GLOBAL CONTACT INFORMATION

For information about the accreditation of this program, please contact Global at 303-395-1782 or cme@globaleducationgroup.com.

This activity is jointly provided by Global Education Group and Integritas Communications.

This activity is supported by an educational grant from Regeneron Pharmaceuticals, Inc.

An official independent commercially supported satellite symposium held in conjunction with the American Academy of Pain Medicine’s 34th Annual Meeting and Pre-Meeting Activities.

REGISTER TODAY!
ExchangeCME.com/NGF18
AAPM would like to thank our industry partners for their participation in the 2018 Annual Meeting and Preconference Commercially Supported Satellite Symposia (CSS). These CSS are satellite events and not part of the official AAPM Annual Meeting. They are planned solely by the sponsoring companies and their medical communication firms.

We invite you to attend the CSS to gain comprehensive insight into important topics and issues facing today’s pain specialists. This year we are offering both certified and non-certified symposia. CSS descriptions for certified activities, faculty disclosures and procedure for obtaining CME credit will be provided by individual organizers.

Registration is not required; however, seating is limited for all events. We recommend arriving at the event early. Breakfast and lunch sponsored by AAPM will be provided prior to the CSS. There are no fees to attend any of these CSS. Nonmedical professionals or members of industry may only be allowed to participate at the discretion of the CSS sponsoring company.

SATURDAY, APRIL 28

12:30–1 pm
AAPM-Provided Lunch
Arrive in your selected symposium room early to enjoy breakfast in advance of the presentation.

1–2 pm
Clinical Issues in Chronic Pain: Debates and Discussions About Therapeutically Targeting Nerve Growth Factor Signaling
During this CME-accredited Clinical Issues™ program, a multidisciplinary panel of faculty experts in pain management, rheumatology, neurology, and anesthesiology will examine the mechanistic underpinnings of chronic osteoarthritic and low back pain, focusing on clinically relevant roles of nerve growth factor (NGF) in the potentiation, progression, and severity of long-term nociceptive signaling. The panel also will discuss the ongoing—albeit at times interrupted—development of NGF as a therapeutic target. The faculty conversations will be enhanced at times by expert-narrated 3D animations and the latest data published onsite in Vancouver, providing learners with multimedia explanations of new paradigms in chronic pain management.

Charles E. Argoft, MD (Prerecorded)
Alfonso E. Bello, MD
Jeffrey A. Gudin, MD
Egilius L.H. Spierings, MD PhD

Educational Objectives
After completing this activity, the participant should be better able to:

- Discuss the pathophysiologic underpinnings of chronic osteoarthritic and low back pain with a focus on contributions from NGF.
- Educate patients about limitations in efficacy and personal and public risks associated with currently available pharmacologic treatment options for chronic osteoarthritic or low back pain.
- Describe the mechanistic rationales and clinical evidence for emerging analgesic strategies designed to inhibit NGF signaling.

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Physician Credit Designation
Global Education Group designates this live activity for a maximum of 1.0 AMA PRA Category 1 Credit™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Disclosure of Conflicts of Interest
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Event staff will be glad to assist you with any special needs (eg, physical, dietary, etc). Please contact Katie Anderton at kanderton@integritasgrp.com.

Global Contact Information
For information about the accreditation of this program, please contact Global at 303.395.1782 or cme@globaleducationgroup.com.

This activity is supported by an educational grant from Regeneron Pharmaceuticals, Inc.
FRIDAY, APRIL 27

6:30–7 am
AAPM-Provided Breakfast
Arrive in your selected symposium room early to enjoy breakfast in advance of the presentation.

7–8 am
Introducing a Single-Agent, Abuse-Deterrent, Extended-Release Morphine
Jeffrey Gudin, MD
This presentation will shine a light on the growing public health issue of prescription opioid abuse and introduce the audience to a single-agent, abuse-deterrent, extended-release morphine product. Expert faculty will take the audience through an in-depth look into the product, the three categories of evidence supporting its expected abuse-deterrent properties, and important safety and dosing information. The audience also will have the opportunity to ask questions to gain a deep understanding of the product.

Educational Objectives:
After attending this symposium, participants should be better able to:
• Understand the role of an abuse-deterrent, extended-release morphine in helping to fight prescription opioid abuse.
• Understand the various categories of evidence recommended to support an abuse-deterrent formulation per U.S. Food and Drug Administration industry guidance
• Learn about a single-agent, abuse-deterrent morphine that retains extended-release properties even if manipulated and that is expected to reduce abuse via intranasal and intravenous routes. However, abuse by intranasal, intravenous, and oral routes still is possible.
• Gain deep understanding of the technology and the differentiating abuse-deterrent properties of the product.
• Gain familiarity with the important prescribing considerations and Important Safety Information of the product.

Activity funded by: Daiichi Sankyo, Inc., & Inspirion Delivery Sciences

Noon–12:30 pm
AAPM-Provided Lunch
Arrive in your selected symposium room early to enjoy lunch in advance of the presentation.

12:30–1:30 pm
My Patient’s Not an Addict: Why Should I Prescribe Take-Home Naloxone?
Jeffrey A. Gudin, MD
Mark A. Kallgren, MD
Anthony W. Mimms, MD
As opioid overdose deaths continue to increase year after year, it’s time to look beyond statistics and stereotypes to our patients with chronic pain who need opioid therapy to be able to do activities of daily living. There are many facets to responsible opioid prescribing. Key among them is actively coprescribing naloxone with opioids as a safety precaution in the home for patients at risk of overdose. Numerous government agencies and professional organizations are recommending that clinicians coprescribe take-home naloxone to help rapidly reverse an opioid overdose, should one occur.

During this symposium, the faculty will provide guidance on how to identify patients at risk of an opioid overdose, and start the conversation in a way that overcomes patient resistance to take-home naloxone being part of their treatment plan. In addition, the faculty will offer their best practices when coprescribing naloxone, educating patients and care partners, and creating an opioid emergency plan.

Educational Objectives:
After attending this symposium, participants should be better able to:
• Identify patients at risk for an opioid overdose.
• Initiate the conversation about opioid overdose and the need for take-home naloxone with at-risk patients and care partners.
• Implement a strategy to create an opioid emergency plan that includes education and coprescribing take-home naloxone for at-risk patients and care partners.

Activity funded by: kaléo, Inc.

12:30–1:30 pm
The Burden of Migraine...An Exploration of Migraine in the Pain Practice and the Role of CGRP on the Impact of the Disease
Activity funded by: Amgen, Inc
SATURDAY, APRIL 28

6:30-6:45 am
AAPM-Provided Breakfast

Arrive in your selected symposium room early to enjoy breakfast in advance of the presentation.

6:45-7:45 am
Current Understanding of the Peripheral and Central Components Involved in the Pain Pathway and Their Roles in Chronic Pain and Future Therapeutics

Patrick W. Mantyh, PhD
Charles E. Argoff, MD

Chronic pain is an under-recognized and under-resourced public health problem with devastating impact. The World Health Organization’s ranking of 310 ailments places low back and neck pain as the leading “global burden of disease” worldwide, with painful musculoskeletal conditions (eg, arthritis) a major threat to mobility that compromises the health of individuals and societies around the world.

The overall prevalence of common, predominantly musculoskeletal pain conditions (eg, arthritis, rheumatism, chronic back or neck problems, and frequent severe headaches) was estimated at 43% among adults in the United States.

As the population ages and the prevalence of chronic musculoskeletal conditions continues to rise and clinicians find themselves struggling to manage pain and restore function associated with these conditions,

Peripheral and central sensitization of nociceptive pathways appear to ultimately drive the perpetuation of pain and play a role in the chronic aspects of the disease. Conventional pain management pharmacotherapy targets systemic inflammation and pain; increasing awareness on future pharmacological targets is warranted in the context of the underlying pathophysiological mechanisms of chronic pain.

Educational Objectives:

After attending this symposium, participants should be better able to:

• Discuss disease burden of chronic pain, with a focus on musculoskeletal pain.
• Discuss and contrast the most widely used guidelines for the management of chronic pain.
• Increase awareness of the high unmet medical need in this disease area.
• Review the pathophysiology of chronic pain and the role of various mediators including NGF in chronic pain pathophysiology and their role in central and peripheral sensitization.
• Review the rationale behind various treatments for chronic pain that are under investigation.

Activity funded by: Pfizer, Inc & Eli Lilly and Company

12:30-1 pm
AAPM-Provided Lunch

Arrive in your selected symposium room early to enjoy lunch in advance of the presentation.

1-2 pm
Legislation and Litigation: A Moving Target Impacting Patient Care

Michael C. Barnes, Esq
Lynn R. Webster, MD

Policymakers under pressure to pass legislation to address the continuing opioid crisis, and overzealous prosecutors seeking to crack down on inappropriate opioid prescribing sometimes overlook the needs of patients with legitimate pain conditions. In this rapidly changing landscape, it is important that pain practitioners are aware of recent trends in state legislation. By understanding what rules apply to their practice, they can be diligent in their practice of prescribing opioids and other controlled substances, thereby safeguarding appropriate patient access. Adopting such practices will also help to protect their patients from harm, and to shield themselves from criminal, civil, or administrative liability.

Educational Objectives:

After attending this symposium, participants should be better able to:

• Identify recent trends in state legislation around opioid prescribing.
• Evaluate the impact of legislation on patient care and professional liability.
• Review cases where opioid prescribers are prosecuted to apply lessons that help them protect their practice from investigation.

Activity funded by: Pernix Therapeutics

Please refer to onsite materials for updated information.
Learn more.

The AAPM Education Center offers a growing library of on-demand CME courses and other specialized continuing education courses on important topics in pain medicine to help clinicians improve care and optimize patient outcomes.

Courses feature presentations by nationally-recognized leaders in pain medicine and include:

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- Perspectives on social policy issues
- Fundamentals of multidisciplinary pain management

Register today at painmed.org/education
Or for more information, call 847.375.4731

Education is the key to improving pain treatment.
This presentation group, with posters numbered 100–202, includes posters categorized by the following clinical topics: Basic Science, Procedures, Psychosocial, and Translational. These posters will be on display in the Resource Center from Thursday, April 26, at 6 pm until Friday, April 27, at 11 am.

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These posters will be on display in the Resource Center from Friday, April 27, at 6 pm until Saturday, April 28, at 11:30 am.

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Reasons to Visit the AAPM Resource Center
• Compare relevant products and services in one convenient place.
• Stay current with new and advanced technology.
• Gain firsthand knowledge of how devices work and how they will benefit your patients and practice.
• Network with peers and colleagues in a dynamic and synergistic atmosphere.

Meeting Receptions and Breaks
Attend evening receptions in the Resource Center on Thursday and Friday evenings beginning at 6 pm. All networking breaks throughout the meeting also will take place inside the Resource Center to provide attendees ample time to connect with colleagues while learning about the latest technological and pharmacological advances in the field of pain medicine.

Scientific Posters
More than 200 posters will be on display, categorized by the following clinical topics:
• basic science
• epidemiology/health policy/education
• late-breaking
• pharmacologic
• procedures
• psychosocial
• rehabilitation
• translational

Networking
Join us to network with your colleagues during the unopposed hours of educational programming. More than 1,000 clinicians who specialize in pain medicine, plus a growing number of primary care physicians from across the country, will be attending this meeting. Take advantage of the opportunity to network with your colleagues to discuss research and diagnosis, treatment, and management of acute, chronic, cancer, recurrent, and noncancer pain.

NEW! Presentation Centre
These 10-minute sessions demonstrate multimodal methods of pain management.

Interactive Exhibits
Visit booths from companies and organizations showcasing products and services specially designed for leaders in the study and treatment of pain. The AAPM Resource Center is an additional benefit of educational learning. By visiting these vendors, you will learn more about advancements that will keep you and your practice at the forefront of your field. Products and information from pharmaceutical companies, medical supplies and equipment, laboratory testing, medical publications, and alternative delivery systems will be featured.

Visit the AAPM, AAPM Foundation, and Pain Medicine Booths
The AAPM, AAPM Foundation, and Pain Medicine booths are conveniently located just outside of the Resource Center. Stop by to learn more about the Academy, Journal, and Foundation.

NEW! Presentation Centre
These 10-minute sessions demonstrate multimodal methods of pain management.

Resource Center Schedule
Thursday, April 26 ............................. 6–7:30 pm
Friday, April 27 ................................. 10–11 am
2:30–7:30 pm
Saturday, April 28 ............................. 10–11:30 am

AAPM Showcase Schedule
Attend showcase sessions that feature products, services, or programs in the field of pain medicine. All attendees are invited to the 30-minute sessions that will be held in the AAPM Resource Center. Please refer to the onsite information or your mobile app regarding updated topics and faculty.
Inventory as of 03/16/2018

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47 Posterboards

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Plotted: November 10, 2017
By: Lam, Jeffrey
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AAPM
April 26 - 28, 2018
VCC East Hall B

PAInMED2018

RESoURCE CEntER fL ooR PLAn
| EXHIBITORS BY PRODUCT/SERVICES CATEGORY |

### Alternative Delivery Systems
- BioPhysics Pharma, Inc.  
  Booth 215
- Multi Radiance Medical  
  Booth 606

### Clinical Research
- BioPhysics Pharma, Inc.  
  Booth 215

### Compound Pharmacy
- AIS Healthcare  
  Booth 405
- BioPhysics Pharma, Inc.  
  Booth 215
- Hartley Medical Pharmacy  
  Booth 604

### Education
- American Chronic Pain Association, Inc.  
  Booth 211
- Practical Pain Management  
  Booth 619
- Spine Intervention Society  
  Booth 401

### Electronic Health Records
- Modernizing Medicine  
  Booth 523
- PHI Medical Office Solutions  
  Booth 609

### Laboratory Equipment & Supplies
- LabCorp  
  Booth 607
- Nova Labs, LLC  
  Booth 621

### Medical Devices
- 18 Health Medical Supplies, LLC  
  Booth 521
- Aspen Medical Products  
  Booth 620
- Boston Scientific  
  Booth 504
- ElectroCore, LLC  
  Booth 307
- Esperar Solutions, Inc.  
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- Halyard Health  
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- Medtronic  
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  Booth 606
- Myoscience  
  Booth 616
- Vertos Medical  
  Booth 314

### Medical Equipment and Supplies
- Halyard Health  
  Booth 507
- Quinn Medical/Thuasne USA  
  Booth 205
- Nevro  
  Booth 302

### Migraine
- Amgen, Inc./Novartis  
  Booth 127
- Depomed, Inc.  
  Booth 618

### Medical Publishing/Journals
- Clinical Pain Advisor  
  Booth 500
- Pain Medicine Journal  
  Booth 427
- Pain Medicine News  
  Booth 404
- Practical Pain Management  
  Booth 619
- Wolters Kluwer  
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### Organizations
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- American Academy of Pain Medicine Foundation  
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- American Chronic Pain Association, Inc.  
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- International Association for the Study of Pain (IASP)  
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- North American Neuromodulation Society  
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### Other
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  Booth 503
- American Board of Pain Medicine  
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- Multi Radiance Medical  
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- Daiichi Sankyo, Inc.  
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### Software
- Modernizing Medicine  
  Booth 523
- PHI Medical Office Solutions  
  Booth 609

### Ultrasound
- Konica Minolta Healthcare  
  Booth 406
Booth 521
18 Health Medical Supplies, LLC
www.18-health.com
18 Health Medical is one of the leading manufacturers of Dipcard and Integrated Cup drug testing diagnostic products. The available drug screening products are designed for healthcare professionals in laboratories, rehabilitation centers, treatment centers, hospitals, clinics, private practices, human resource departments, and the judicial system. These products also can be ordered online for your personal use at home. Please reach out with any drug testing inquiries. We provide bulk quantities to maximize your savings while receiving a high-quality, trustworthy product.

Booth 503
Abbott
www.aleretoxicology.com
Alere is now part of Abbott’s Diagnostics family of businesses. We are committed to delivering exceptional drug testing solutions—thus helping organizations detect abuse of drugs and alcohol. Our laboratory services and rapid screening solutions allow you to make fast and informed decisions about drug abuse in the workplace.

Booth 403
Adapt Pharma, Inc
www.adaptpharma.com
Adapt Pharma, maker of NARCAN® Nasal Spray, is an innovative, small business focused on developing cutting-edge treatments for patients with special medical conditions.

Booth 525
Admera Health
www.admerahealth.com
Admera Health is an advanced molecular diagnostics company focused on personalized medicine, noninvasive cancer testing, and digital health. Dedicated to developing cutting-edge diagnostics that span the continuum of care, Admera Health fulfills unmet medical needs with cost-effective tests and accurate analysis to guide patient care. We are committed to improving the health and well-being of our global community through the direct delivery of personalized, medically actionable results.

Booth 405
AIS HealthCare
www.aispaincare.com
AIS HealthCare provides sterile, patient-specific intrathecal pain pump medications and in-home intravenous infusion including immune globulin therapies. These services are supported with Advanced Nursing Solutions, providing physicians and patients with in-home pump refills, and patient-centric Advanced Care Coordination Solutions that assist patients in achieving self-management goals and optimal wellness.

Booth 427
American Academy of Pain Medicine
www.painmed.org
Please visit this company’s booth for more information.

Booth 427
American Academy of Pain Medicine Foundation
www.aapmfoundation.org
Please visit this company’s booth for more information.

Booth 603
American Board of Pain Medicine
www.abpm.org
The mission of the American Board of Pain Medicine is to improve access to comprehensive pain care through a rigorous certification process for pain medicine physician specialists. The 2019 application window will open later this summer. Please visit our booth for more information.

Booth 211
American Chronic Pain Association
www.theacpa.org
Since 1980, the American Chronic Pain Association (ACPA) has offered peer support and coping skills to help people with pain begin their journey from patient to person. The ACPA continues to offer programs and services designed to provide support, encouragement, information, and self-management skills that help a person with pain regain control of their life. Call 800.533.3231 or visit www.theacpa.org.

Booth 127
Amgen/Novartis
www.amgen.com
Please visit this company’s booth for more information.

Booth 620
Aspen Medical Products
www.aspenmp.com
Aspen Medical Products is a leader in the development of innovative spinal braces for pain management, post-trauma stabilization, pre- and post-surgical stabilization and long-term patient care. Aspen’s commitment to clinical research is unparalleled in the orthotics community and has directly impacted product development, providing unsurpassed motion restriction, superior comfort and the most effective pain relieving braces on the market. The company makes more than 35 spinal orthotics options, including the award winning Vista® adjustable product lines that provide unsurpassed motion restriction, superior comfort and an economic advantage, encouraging better patient compliance.
BioDelivery Sciences, International
www.bdsi.com
BioDelivery Sciences ("BDSI") is a specialty pharmaceutical company focused on pain management and addiction medicine. We utilize our novel and proprietary BioErodible MucoAdhesive (BEMA®) and other drug-delivery technologies to develop and commercialize, either on our own or in partnership, new applications of proven therapies to address important unmet medical needs.

Booth 215
BioPhysics Pharma, Inc.
www.b-physics.com
Please visit this company’s booth for more information.

Booth 504
Boston Scientific
www.controlyourpain.com
Investing in innovative products, clinical initiatives, and world-class service, Boston Scientific’s pain portfolio is leading the way by providing better pain relief to a broader spectrum of patients.

Booth 500
Clinical Pain Advisor
www.clinicalpainadvisor.com
Please visit this company’s booth for more information.

Collegium Pharmaceutical, Inc.
www.collegiumpharma.com
Collegium Pharmaceutical, Inc. is a specialty pharmaceutical company developing and commercializing novel, abuse-deterrent products for the treatment of patients suffering from chronic pain and other diseases. Collegium has developed a novel, patented, abuse-deterrent technology platform, DETERx®, designed to provide extended-release drug delivery, while helping to deter against common methods of abuse and tampering, including crushing, chewing, heating, and injecting. DETERx is a registered trademark of Collegium Pharmaceutical, Inc.

Booth 625
Daichii Sankyo
www.dsi.com
Daichii Sankyo, Inc. is the U.S. subsidiary of Daichii Sankyo, Co., Ltd. The company currently markets therapies in hypertension, dyslipidemia, diabetes, acute coronary syndrome, thrombotic disorders, stroke risk reduction, opioid-induced constipation, IV iron therapy, and metastatic melanoma.

Depomed, Inc.
www.depomed.com
Depomed is a leading specialty pharmaceutical company committed to putting the Patient First in everything it does. Depomed is focused on enhancing the lives of patients, families, physicians, providers and payors through the commercialization of products in the areas of pain and neurology, and in the development of drugs in areas of unmet medical need. To learn more about Depomed, visit www.depomed.com.

Booth 507
ElectroCore, LLC
www.gamma-core.com
Please visit this company’s booth for more information.

Booth 502
Esperar Solutions, Inc.
www.esperar.ca
Esperar Solutions is a Canadian corporation. Our principal goal is to introduce to the community new technologies to manage pain. We are the exclusive distributors of SphenoCath® in Canada. SphenoCath® is the only patented SPG, PPG, and Trigeminal nerve blockade device. It could treat headaches and facial pain syndromes.

Halyard Health
www.halyardhealth.com
Halyard Health is a medical technology company focused on preventing infection, eliminating pain, and speeding recovery. Solutions for chronic pain include COOLIEF® Cooled RF, a continuous thermal radiofrequency treatment that uses water-cooled technology to safely deactivate pain-causing sensory nerves, providing up to 24 months of relief, improved function, and reduced drug utilization.

Hartley Medical Pharmacy
www.hartleymedical.com
Founded in 1979, Hartley Medical is a national, state-of-the-art compounding pharmacy dedicated to providing the highest-quality sterile pharmaceuticals for targeted drug delivery. Hartley Medical exceeds USP 797 standards and continues to be an industry leader in intrathecal preparations.
Isodiol International, Inc., is the market leader in pharmaceutical-grade phytochemical compounds and the industry leader in the manufacturing and development of phytoceutical consumer products. Isodiol is the pioneer of many firsts for the cannabis industry including commercialization of 99%+ pure, bioactive pharmaceutical grade cannabinoids, micro-encapsulations, and nanotechnology for the highest-quality consumable and topical skin care products. Isodiol’s growth strategy includes the development of over-the-counter and pharmaceutical drugs, expanding its phytoceutical portfolio and aggressively continue international expansion into Latin America, Asia, and Europe.

kaléo is a pharmaceutical company dedicated to building innovative solutions that can help empower patients with certain serious, life-threatening medical conditions and their caregivers. kaléo products combine established drugs with innovative delivery platforms, with the goal of achieving safety, efficacy, and cost effectiveness. kaléo is privately held, and headquartered in Richmond, VA.

Konica Minolta Healthcare is a world-class provider of and market leader in medical diagnostic imaging and healthcare information technology. With over 75 years of endless innovation, Konica Minolta is globally recognized as a leader providing cutting-edge technologies and support aimed at providing real solutions to meet customers’ needs. Some innovative solutions include the KDR™ U-Arm DR System, the AeroDR® Wireless Flat Panel Detector, Exa™, and the SONIMAGE® H51 and JS Ultrasound Systems. For more information, please visit www.konicaminolta.com/medicalusa.

LabCorp is one of the nation’s premier medical drug monitoring programs and is offered through LabCorp and its specialty testing laboratory, MedTox Laboratories. The LabCorp MedWatch® program offers a full menu of medical drug monitoring tests that provides unparalleled choice, flexibility, and clinical value for your specific monitoring needs.

As a global leader in medical technology, services, and solutions, Medtronic improves the lives and health of millions of people each year. We use our deep clinical, therapeutic, and economic expertise to address the complex challenges faced by healthcare systems today. Let’s take healthcare Further, Together. Learn more at Medtronic.com.

Modernizing Medicine® and its affiliated companies empower physicians with suites of mobile, specialty-specific solutions that transform how healthcare information is created, consumed, and utilized to increase practice efficiency and improve patient outcomes. Built for value-based healthcare, Modernizing Medicine’s data-driven, touch- and cloud-based products and services are programmed by a team that includes practicing physicians to meet the unique needs of pain management.

Multi Radiance Medical manufactures FDA-cleared super pulsed lasers, for drug-free and side effect–free pain relief. MR4 Lasers are the only therapeutic lasers validated in-vitro, in-vivo, in laboratory trials, and in clinical trials. Console or cordless models, anywhere treatment is needed. Great alternative to opioids.

Nevro is a global medical device company focused on providing innovative therapies that improve the quality of life of patients suffering from chronic pain. Nevro’s Senza® spinal cord stimulation (SCS) system is an evidence-based neuromodulation platform developed for treating chronic pain and the only SCS system that delivers Nevro’s proprietary HF10™ therapy.

The North American Neuromodulation Society (NANS) is dedicated to being the premier organization representing neuromodulation. NANS promotes multidisciplinary collaboration among clinicians, scientists, engineers, and others to advance neuromodulation through education, research, innovation, and advocacy. Through these efforts, NANS seeks to promote and advance the highest-quality patient care.
Booth 621

Novalabs, LLC
www.novalabs.com

Novalabs is a leading histopathology lab specialized in Epidermal Nerve Fiber Density (ENFD) testing. ENFD testing is considered the gold standard for diagnosing small fiber neuropathy (SFN), a pervasive and complicated condition to treat. Partnering with our physicians, Novalabs’ goal is to educate patients and improve treatment for SFN.

Booth 427

Pain Medicine Journal
www.painmed.org/journal

Please visit this company’s booth for more information.

Booth 404

Pain Medicine News
www.painmedicinenews.com

Please visit this company’s booth for more information.

Booth 505

Pernix Therapeutics
www.pernixtx.com

Pernix Therapeutics is a specialty pharmaceutical business with a focus on acquiring, developing, and commercializing prescription drugs primarily for the U.S. market. The company targets underserved therapeutic areas such as CNS, including neurology and pain management, and has an interest in expanding into additional specialty segments. Pernix promotes its branded products to physicians through its two sales forces and markets its generic portfolio through its wholly owned subsidiaries, Macoven Pharmaceuticals, LLC and Cypress Pharmaceutical, Inc.

Booth 609

PHI Medical Office Solutions
www.phimedos.com

PhyGeneSys is a comprehensive suite offering an integrated electronic health record, appointment scheduling, and practice management solution. PhyGeneSys incorporates a patient portal that relays pain journal documentation, messages, and patient requests to providers. PhyGeneSys works for pain management practices of any size and ambulatory surgical centers. Contact us at sales@phimedos.com.

Booth 619

Practical Pain Management
www.practicalpainmanagement.com

Practical Pain Management (PPM), now in its 18th year, is the nation’s premier teaching journal for more than 40K pain practitioners. PPM provides the tools, insights, and resources to help HCPs treat their chronic pain patients and to navigate the ever-shifting landscape of pain management. PPM articles are authored by leading clinicians from across the country.

Booth 205

Quinn Medical/Thuasne USA
www.thuasneusa.com

Please visit this company’s booth for more information.

RENEWED 2018!

Booth 617

Recro Pharma, Inc.
www.recropharma.com

Recro Pharma is a revenue-generating specialty pharmaceutical company focused on the acute care setting. Our research includes anesthesia compounds as well as non-opioid analgesics. In September 2017, the FDA accepted for review an NDA for our lead investigational product, meloxicam IV 30mg, a proprietary NSAID with a proposed indication for the management of moderate to severe pain, with a PDUFA date set for May 26, 2018.

Booth 519

Regenexx
www.regenexx.com

Regenexx® is a worldwide, elite physician network with the world’s most advanced stem cell and blood platelet procedures for orthopedic indications. Regenexx is devoted to growing your regenerative medicine practice through education, training, marketing, national call centers, R & D, our patient registry, and continued quality assurance and support.

RENEWED 2018!

Booth 401

Spine Intervention Society
www.spineintervention.org

Please visit this company’s booth for more information.

Booth 209

U.S. Pain Foundation
www.uspainfoundation.org

Please visit this company’s booth for more information.

RENEWED 2018!

Booth 314

Vertos Medical, Inc.
www.vertosmed.com

Vertos Medical, Inc., was founded to advance the treatment of patients suffering from lumbar spinal stenosis (LSS), primarily a degenerative, age-related narrowing of the lower spinal canal. Vertos Medical’s proprietary technologies include mild®, which is an outpatient, minimally invasive, fluoroscopically guided LSS treatment. For more information, visit www.Vertosmed.com.

Booth 305

Wolters Kluwer
www.lww.com

Wolters Kluwer Health is a leading global provider of information and point of care solutions for the healthcare industry. Our solutions are designed to help professionals build clinical competency and improve practice so they can make important decisions on patient care. Our leading product brands include Audio-Digest, Lippincott, Ovid®, UpToDate®, and others.

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Education. Easy online access to Continuing Medical Education (CME) programs for physicians and other pain professionals by top experts and researchers. AAPM is accredited by the Accreditation Council for Continuing Medical Education (ACCME).

Updates. Stay on top of the latest news in the field of pain medicine with AAPM’s bimonthly e-news. Members also receive AAPMail Alerts—timely emails on FDA alerts, advocacy updates, member information and more.

Advocacy. AAPM voices your concerns — the needs of both patients and professionals. As part of the Pain Care Coalition in Washington DC, and through representation in the AMA House of Delegates (HOD), the Academy advocates for a balanced approach to safe and effective pain treatment.

Questions?
Contact Member Services at info@painmed.org or 847.375.4731, or visit painmed.org.

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• furthering the clinical validity of appropriate and effective treatment and care
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• providing readily accessible education — for pain specialists and primary care clinicians alike
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Contact Kathy Checea, Director of Professional Relations, to learn how you can support the AAPM Foundation at kchecea@painmed.org
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Introducing a Single-Agent, Abuse-Deterrent, Extended-Release Morphine

Friday, April 27, 2018 • 7:00 AM – 8:00 AM

LEARNING OBJECTIVES

• Understand the role of an abuse-deterrent, extended-release morphine in helping to fight prescription opioid abuse
• Understand the various categories of evidence recommended to support an abuse-deterrent formulation per FDA industry guidance
• Learn about a single-agent, abuse-deterrent morphine that retains extended-release properties even if manipulated and that is expected to reduce abuse via intranasal and intravenous routes. However, abuse by intranasal, intravenous, and oral routes is still possible
• Gain deep understanding of the technology and the differentiating abuse-deterrent properties of the product
• Gain familiarity with the important prescribing considerations and Important Safety Information of the product

LOCATION
East Meeting Room 1-3
Vancouver Convention Centre
Vancouver, BC, Canada

FACULTY
Jeffrey Gudin, MD
Director, Pain Management and Wellness Center
Englewood Hospital and Medical Center
Englewood, New Jersey

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