



# AAPM Cadaver Workshop

Thursday, February 23, 2012 • Palm Springs, CA

A preconference workshop with the AAPM 28<sup>th</sup> Annual Meeting (Non-CME Activity)

For Office Use Only
Date Received: _____
Cust. # _____ Ord.# 1- _____

Full name \_\_\_\_\_ First name for badge \_\_\_\_\_ Credentials \_\_\_\_\_

Facility \_\_\_\_\_ Facility City/State \_\_\_\_\_

Preferred address (  home  office ) \_\_\_\_\_ City/State/ZIP \_\_\_\_\_

Preferred contact phone # (required) \_\_\_\_\_ E-mail (required) \_\_\_\_\_

**Training Information:** In order to provide you with the optimal educational experience, please complete the following information relative to your training and experience. This section is a **required component** of the registration process.

1. Are you a physician currently enrolled in an ACGME fellowship training program in interventional pain medicine (IPM), or have you completed an ACGME training program in IPM? Yes \_\_\_ No \_\_\_ **If "Yes," stop here. If "No," continue to questions 2-3.**
2. Are you practicing currently as an interventional pain physician with >50% of your practice dedicated to pain management? Yes \_\_\_ No \_\_\_
3. Do you routinely perform fluoroscopically guided procedures (>20/month)? Yes \_\_\_ No \_\_\_

**Note:** A limited number of pain fellows will be eligible for the workshop at a discounted rate. Fellows must submit a registration form, accompanied by a letter of recommendation from their Program Director, in order to be considered for the workshop.

- Full Day Fellow - 4 procedures (8am-5pm) \$995

## Basic Track

### Fees: Member

- Full Day - 4 procedures (8am-5pm) \$1,575
- Half Day AM – 2 procedures (8am-Noon) \$975
- Half Day PM - 2 procedures (1-5pm) \$975

### Nonmember

- Full Day – 4 procedures (8am-5pm) \$1,995
- Half Day AM – 2 procedures (8am-Noon) \$1,395
- Half Day PM – 2 procedures (1-5pm) \$1,395

**Check off your procedure choices below. Also, please indicate an alternate choice – noting with an 'A':**

- |   |   |
|---|---|
| <input type="checkbox"/> Facet Joint Radiofrequency Ablation Techniques: Cervical, Thoracic, and Lumbar (B1)                              | <input type="checkbox"/> Facial Pain: Trigeminal Nerve, Sphenopalantine Ganglion, Gasserian Ganglion, and Stellate Ganglion Blocks (B5) |
| <input type="checkbox"/> Epidural Steroid Injections: Intralaminar and Transforaminal Cervical, Thoracic, and Lumbar (B2)                 | <input type="checkbox"/> Pelvic Pain: Hypogastric Plexus, Sacral Nerve Root, & Ganglion of Impar Blocks (B6)                            |
| <input type="checkbox"/> Sacral Nerve Root Injections and Caudal Lysis of Adhesions: Techniques in Utilization of Epidural Catheters (B3) | <input type="checkbox"/> CRPS: Stellate Ganglion and Lumbar Sympathetic Plexus Blocks (B7)  |
| <input type="checkbox"/> Abdominal Pain: Celiac Plexus and Splanchnic Nerve Blocks (B4)   | <input type="checkbox"/> Discography: Needle Placement and Nucleogram Interpretation (B8)   |

**Subtotal Basic \$ \_\_\_\_\_**

## Advanced Track

### Fees: Member

- Full Day - 4 procedures (8am-5pm) \$1,975
- Half Day AM – 2 procedures (8am-Noon) \$1,175
- Half Day PM - 2 procedures (1-5pm) \$1,175

### Nonmember

- Full Day – 4 procedures (8am-5pm) \$2,395
- Half Day AM – 2 procedures (8am-Noon) \$1,595
- Half Day PM – 2 procedures (1-5pm) \$1,595

**Check off your procedure choices below. Also, please indicate an alternate choice – noting with an 'A':**

- |  |   |
|--|---|
| <input type="checkbox"/> Spinal Cord Stimulation Track: Breakthrough Developments (A1)(4 hours)      | <input type="checkbox"/> Intercostal and Stellate Ganglion Blocks* (A6) |
| <input type="checkbox"/> Sacroiliac Joint Denervation (A2)   | <input type="checkbox"/> Vertebroplasty/Kyphoplasty (A7)                |
| <input type="checkbox"/> <i>mild</i> : Minimally Invasive Lumbar Decompression (A3)                  | <input type="checkbox"/> Sacroplasty (A8)                               |
| <input type="checkbox"/> Joint Injections* (SI, Hip, Knee, Shoulder) (A4)                            | <input type="checkbox"/> Percutaneous Facet Joint Fusion (A9)           |
| <input type="checkbox"/> Intradiscal Procedures: Laser Assisted Percutaneous Disc Decompression (A5) |   |

\* A4 and A6 stations will include simulation and evaluation with both Fluoroscopy and Ultrasound Guided imagery

**Subtotal Advanced \$ \_\_\_\_\_**

## Payment (CC Payment Only):

**TOTAL: \$ \_\_\_\_\_**

<b>MasterCard</b>	<b>VISA</b>	<b>American Express</b>	<b>Discover</b>	
Account number _____	Exp Date _____	Cardholder's name (please print) _____	Signature _____	

- If rebilling of a credit card charge is necessary, a \$75 processing fee will be charged
- I authorize AAPM to charge the above listed credit card amounts reasonably deemed by AAPM to be accurate and appropriate

Applications must be received by **February 7, 2012**. Acceptance in the workshop is dependent on topic selection(s) and availability. Final workshop topics will be based on selections made by all applicants. Applicants will be contacted to confirm registration based on topic selections by **February 7, 2012**. At that time, your payment will be processed. You will then receive an email confirmation for your registration and payment. AAPM neither accredits nor certifies physicians in training and does not intend to do so in its cadaver workshop. **Mail or Fax application to Cadaver Workshop Registration, PO Box 839, Glenview, IL 60025-0839 FAX: 847.375.6477**