Philosophy of Rongxiang Xu

“All my work is for human lives. My lifelong pursuit is scientific research; I never stop inventing new technology to save people. Being a doctor, I can contact the patients to learn about their conditions and suffering, and it is my utmost pleasure to see their happy face after healing.”

Mission statement

To prevent and alleviate human suffering by conforming to law of life, spreading and promoting organ regeneration science!

Rongxiang Xu's Devotion and Prospect

Every single man has regenerative life! Establish the world of regenerative humans!

National Rongxiang Xu Foundation, Inc. (formerly Regeneration X Foundation, Inc.) is a not for profit, charitable organization formed under Section 501(c)3 of the U.S. Internal Revenue Code. Donations to National Rongxiang Xu Foundation’s Project are tax-deductible as charitable contributions for US federal income tax purposes. There are no donation limits or restrictions on contributions to National Rongxiang Xu Foundation’s Project.

www.rxxf.org
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Calgary, AB, Canada

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Lehigh Valley Hospital Burn Center
Allentown, PA

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Phoenix, AZ

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Firefighters’ Burn Treatment Unit
University of Alberta Hospital
Edmonton, AB, Canada

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Regions Burn Center (retired)
St. Paul, MN

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University of Washington Regional Burn Center
Seattle, WA

MEMBER, TRAUMA, BURNS, AND CRITICAL CARE BOARD
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Shriners Hospitals for Children and University of California Davis
Sacramento, CA

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Kimberly A. Hoarle, MBA, CAE
American Burn Association
Chicago, IL

FUTURE ABA MEETINGS

Las Vegas, NV April 2–5, 2019
Orlando, FL March 17–20, 2020
Chicago, IL April 6–9, 2021
Las Vegas, NV April 26–29, 2022
Dallas, TX May 16–19, 2023
Chicago, IL April 9–12, 2024
# PAST PRESIDENTS

<table>
<thead>
<tr>
<th>Year</th>
<th>Name and Title</th>
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</thead>
<tbody>
<tr>
<td>1969</td>
<td>Curtis P. Artz, MD*</td>
</tr>
<tr>
<td>1970</td>
<td>Boyd W. Haynes Jr., MD, FACS*</td>
</tr>
<tr>
<td>1971</td>
<td>John A. Moncrief, MD*</td>
</tr>
<tr>
<td>1972</td>
<td>Robert M. McCormack, MD, FACS*</td>
</tr>
<tr>
<td>1973</td>
<td>Charles R. Baxter, MD, FACS*</td>
</tr>
<tr>
<td>1974</td>
<td>Bruce G. Macmillan, MD*</td>
</tr>
<tr>
<td>1975</td>
<td>John A. Boswick Jr., MD, FACS*</td>
</tr>
<tr>
<td>1976</td>
<td>Basil A. Pruitt Jr., MD, FACS</td>
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<tr>
<td>1977</td>
<td>William W. Monafo Jr., MD, FACS*</td>
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<td>1978</td>
<td>Alan R. Dimick, MD, FACS</td>
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<tr>
<td>1979</td>
<td>Duane L. Larson, MD, FACS*</td>
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<tr>
<td>1980</td>
<td>Arthur D. Mason Jr, MD*</td>
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<tr>
<td>1981</td>
<td>Charles E. Hartford, MD, FACS</td>
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<tr>
<td>1982</td>
<td>John F. Burke, MD, FACS*</td>
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<td>1983</td>
<td>Francis C. Nance, MD, FACS</td>
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<tr>
<td>1984</td>
<td>P. William Curreri, MD, FACS</td>
</tr>
<tr>
<td>1985</td>
<td>J. Wesley Alexander, MD, ScD, FACS</td>
</tr>
<tr>
<td>1986</td>
<td>Martin C. Robson, MD, FACS</td>
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<tr>
<td>1987</td>
<td>Joseph A. Moylan, MD, FACS*</td>
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<tr>
<td>1988</td>
<td>David M. Heimbach, MD, FACS*</td>
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<td>1989</td>
<td>C. Gillon Ward, MD, FACS</td>
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<td>1990</td>
<td>Thomas L. Wachtel, MD, FACS*</td>
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<td>1991</td>
<td>Fred T. Caldwell Jr., MD, FACS*</td>
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<td>1992</td>
<td>Roger E. Salisbury, MD, FACS</td>
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<td>1994</td>
<td>David N. Herndon, MD, FACS</td>
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<td>1995</td>
<td>Robert H. Demling, MD, FACS</td>
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<td>1996</td>
<td>Andrew M. Munster, MD, FRCS, FACS*</td>
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<td>1997</td>
<td>William F. McManus, MD, FACS*</td>
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<td>1998</td>
<td>Edwin A. Deitch, MD, FACS</td>
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<td>1999</td>
<td>Cleon W. Goodwin, MD, FACS</td>
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<td>2000</td>
<td>John L. Hunt, MD, FACS</td>
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<td>2001</td>
<td>Ronald G. Tompkins, MD, ScD, FACS</td>
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<td>2002</td>
<td>Jeffrey R. Saffle, MD, FACS</td>
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<td>2003</td>
<td>Marion H. Jordan, MD, FACS</td>
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<td>2004</td>
<td>Lynn D. Solem, MD, FACS</td>
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<td>2005</td>
<td>Richard L. Gamelli, MD, FACS</td>
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<tr>
<td>2006</td>
<td>Gary F. Purdue, MD, FACS*</td>
</tr>
<tr>
<td>2007</td>
<td>David G. Greenhalgh, MD, FACS</td>
</tr>
<tr>
<td>2008</td>
<td>Richard J. Kagan, MD, FACS</td>
</tr>
<tr>
<td>2009</td>
<td>G. Patrick Kealey, MD, FACS</td>
</tr>
<tr>
<td>2010</td>
<td>Robert L. Sheridan, MD, FACS</td>
</tr>
<tr>
<td>2011</td>
<td>Sidney F. Miller, MD, FACS*</td>
</tr>
<tr>
<td>2012</td>
<td>Nicole S. Gibran, MD, FACS</td>
</tr>
<tr>
<td>2013</td>
<td>Tina L. Palmieri, MD, FACS, FCCM</td>
</tr>
<tr>
<td>2014</td>
<td>Palmer Q. Bessey, MD, FACS, MS</td>
</tr>
<tr>
<td>2015</td>
<td>David H. Ahrenholz, MD, FACS</td>
</tr>
<tr>
<td>2016</td>
<td>Edward E. Tredget, MD, MSc, FRCS(c)</td>
</tr>
<tr>
<td>2017</td>
<td>Michael D. Peck, MD, ScD, FACS</td>
</tr>
</tbody>
</table>

*Deceased

Stop by the ABA Resource Center to pick up your commemorative 50th Anniversary pin
### PAST MEMBERSHIP OFFICERS (BOARD OF TRUSTEES)

<table>
<thead>
<tr>
<th>Years</th>
<th>Name</th>
<th>Years</th>
<th>Name</th>
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<tbody>
<tr>
<td>1979–1981</td>
<td>Cornelia Kenner, RN, CCRN, MS*</td>
<td>1998–2002</td>
<td>Rosie Thompson, RN, MS</td>
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<tr>
<td>1980–1982</td>
<td>Peter A. Brigham, MSW*</td>
<td>1999–2003</td>
<td>Mary D. Gordon, RN, MS</td>
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<tr>
<td>1982–1984</td>
<td>Carole L. Johnson, PhD</td>
<td>2001–2005</td>
<td>David R. Patterson, PhD</td>
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<tr>
<td>1993–1996</td>
<td>Leslie E. Robson, RN, MS</td>
<td>2012–2016</td>
<td>Michael A. Serghiou, OTR, MBA</td>
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</tbody>
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*Deceased

### PAST 2ND VICE PRESIDENTS (BOARD OF TRUSTEES)

<table>
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<th>Years</th>
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<th>Years</th>
<th>Name</th>
</tr>
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<tbody>
<tr>
<td>1990–1991</td>
<td>Carlos Blanco, MD</td>
<td>2000–2002</td>
<td>Daniel L. Traber, PhD*</td>
</tr>
<tr>
<td>1997–1998</td>
<td>John P. Remensnyder, MD, FACS*</td>
<td>2014–2017</td>
<td>Ernest J. Grant, RN, BSN, MSN, PhD, FAAN</td>
</tr>
</tbody>
</table>

*Deceased
GENERAL INFORMATION

2018 ANNUAL MEETING HIGHLIGHTS

- New Member Welcome Breakfast & International Attendee Welcome Breakfast
- Local Burn Center Tours
- Opening Ceremony, Awards & Presidential Address: A Half Century of Knowledge & Progress: The ABA at 50
- Presidential Plenary: The American Burn Association: 50 Years of Progress and Beyond
- Quinquennial: Prevention and Treatment of Burn Scarring: Then and Now
- Fundamentals of Burn Care: Designed to provide basic information for the novice burn care provider
- Burn Center Leadership Boot Camp: Multi-disciplinary session with focus on leadership and team building in the burn unit
- ABuRN Town Hall: The ABuRN Director and clinical researchers will review the progress of current studies and discuss the status of future projects
- ABA Business Meeting: Learn about what is happening in the ABA and elect the next leadership
- Fitness classes: Zumba and Yoga offered to help you keep active
- Advanced Burn Life Support: Special pre-conference programs for Providers and Instructors are offered

NEW THIS YEAR

- Disciplines, Topics & Educational Levels—Use the ABA mobile app or the online schedule to find sessions by discipline, topic and educational level
- Changing Places: Off-site at the Chicago Fire Academy—Experience a hands-on opportunity to better understand the training of professional firefighters
- Special SIG educational sessions with guest speakers and CEUs—New this year, 8 SIG meetings will be offering CEUs for attendees; special guest speakers
- Gotham Shield Tabletop Exercise—In-depth, participatory course conducting a critical analysis of the ABA’s response to a disaster situation
- Advanced Burn Provider Course (ABPC)—New pre-conference education with hands-on simulation

EXHIBIT HALL HOURS

<table>
<thead>
<tr>
<th>Date</th>
<th>Monday, April 9</th>
<th>Tuesday, April 10</th>
<th>Wednesday, April 11</th>
<th>Thursday, April 12</th>
<th>Friday, April 13</th>
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<tbody>
<tr>
<td>Registration Hours</td>
<td>7:00 am–6:00 pm</td>
<td>7:00 am–6:00 pm</td>
<td>7:00 am–6:00 pm</td>
<td>6:00 am–4:30 pm</td>
<td>7:00 am–2:00 pm</td>
</tr>
<tr>
<td>Speaker Ready Room</td>
<td>7:00 am–5:00 pm</td>
<td>7:00 am–5:00 pm</td>
<td>7:00 am–5:00 pm</td>
<td>7:00 am–5:00 pm</td>
<td>7:00 am–2:00 pm</td>
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REGISTRATION HOURS

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
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<tbody>
<tr>
<td>Sunday, April 8</td>
<td>4:00 pm–6:00 pm</td>
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<tr>
<td>Wednesday, April 11</td>
<td>6:00 am–6:00 pm</td>
</tr>
<tr>
<td>Monday, April 9</td>
<td>7:00 am–6:00 pm</td>
</tr>
<tr>
<td>Thursday, April 12</td>
<td>6:00 am–4:30 pm</td>
</tr>
<tr>
<td>Tuesday, April 10</td>
<td>7:00 am–6:00 pm</td>
</tr>
</tbody>
</table>

SPEAKER READY ROOM

The Speaker Ready Room is located in the Mobley room on the Lower Level of the Hilton. All presenters must visit the room and upload their presentations to the AV system at least the day before the presentation is to be made. Please make sure your presentation is in its final form as once it is uploaded, no changes can be made.

Please do not bring your computer into your session.

The Speaker Ready Room will be open during the following hours and staffed with a technician to assist with any questions.

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuesday, April 10</td>
<td>7:00 am–5:00 pm</td>
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<tr>
<td>Thursday, April 12</td>
<td>7:00 am–5:00 pm</td>
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<tr>
<td>Wednesday, April 11</td>
<td>7:00 am–5:00 pm</td>
</tr>
<tr>
<td>Friday, April 13</td>
<td>7:00 am–2:00 pm</td>
</tr>
</tbody>
</table>

ABA MOBILE APP

Download the ABA Mobile App to view all session information, abstracts, speakers, authors and room locations. For more information view the flyer in your registration bag. The password is: aba2018
TYPES OF SESSIONS

Correlatives
The Correlative Sessions showcase new, cutting-edge research on clinical management, basic science and other burn care issues through multiple short presentations by investigators of accepted abstracts. These presentations are followed by a question and answer period allowing for an exchange of ideas and additional learning. Abstracts are grouped by topic with sessions running concurrently.

Objectives:
• Discuss the results of cutting-edge scientific clinical management or basic science research and other burn issues.
• Identify opportunities to improve care of the burn injured patient.

Plenary Sessions
The Plenary Sessions provide opportunities for all attendees to learn about topics of interest to the multi-disciplinary team of burn care professionals.

Educational Forums
Concurrently running sessions that provide more in depth education on specific topics. These include four-hour courses (conducted over two-days), two-hour educational forums, workshops and other formats. These may have target audiences or be multi-disciplinary in focus. Any attendees with interest in the topic are welcome to attend. Room hopping is encouraged.

Symposia
The Symposia are small group interactive sessions to allow peer learning. Moderators are instructed to come prepared to introduce at least four problems areas and to facilitate discussion around solutions. Participants should come prepared to participate with their own burn unit practice successes, failures and questions.

Objectives:
• Discuss important issues within the burn field.
• Identify practice successes, failures and questions related to your burn unit.

Poster Rounds
Poster Rounds provide an opportunity to explore a topic in-depth with a small group of researchers led by experts in the field. Each researcher in the topic area will briefly present their work for the group.

Objectives:
• Discuss the results of cutting-edge scientific clinical management or basic science research and other burn issues.
• Identify opportunities to improve care of the burn injured patient.

CE CREDIT INFORMATION

Contact hours are awarded after verification of an individual’s full attendance and successful completion of an online evaluation form. Please see specific educational activities for details on CE hours and accreditation status.

The American Burn Association is Accredited by the following organizations:

Physician Credit (CME)
The American Burn Association is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. The American Burn Association takes responsibility for the content, quality, and scientific integrity of this CME activity.

The American Burn Association designates this live activity for a maximum of 37 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Social Workers
This program is Approved by the National Association of Social Workers (Approval #886775310-6577) for 10.5 continuing education contact hours.

Other Organizations
This program has been submitted to the following organizations for approval to award contact hours:
• The American Association of Neuroscience Nurses
• Commission on Dietetic Registration
• American Occupational Therapy Association, Inc.
• Illinois Physical Therapy Association

OBTAINING CE CREDIT

CE credit is awarded based on participation in the learning activities. CME credits can be claimed online at https://www.cteusca.com/amburn_ceu. Credit is calculated on a quarter hour basis.

For up to date information and detailed instructions please visit the Annual Meeting Education webpage http://ameriburn.org/education/annual-meeting/education/.
# COMMITTEE MEETINGS

Committees support the mission of the ABA. In 2018, newly appointed committee members are invited to attend and observe the meetings. For a list of the 2017–2018 Committee members visit [www.ameriburn.org](http://www.ameriburn.org).

## MONDAY, APRIL 9

<table>
<thead>
<tr>
<th>Committee</th>
<th>Time</th>
<th>Room</th>
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<tbody>
<tr>
<td>Burn Registry Committee</td>
<td>8:00 am–9:30 am</td>
<td>4L</td>
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<tr>
<td>BSAP - Burn Science Advisory Panel (Closed)</td>
<td>8:00 am–12:00 pm</td>
<td>4D</td>
</tr>
<tr>
<td>Burn Prevention Committee</td>
<td>8:00 am–2:00 pm</td>
<td>Salon A-1 - LL</td>
</tr>
<tr>
<td>MAC - Membership Advisory Committee</td>
<td>8:00 am–4:00 pm</td>
<td>Salon A-3 - LL</td>
</tr>
<tr>
<td>BQIP Committee</td>
<td>9:30 am–10:00 am</td>
<td>4L</td>
</tr>
<tr>
<td>NBR Committee</td>
<td>10:00 am–11:30 am</td>
<td>4L</td>
</tr>
<tr>
<td>Professional Certification Committee</td>
<td>10:00 am–11:30 am</td>
<td>4A</td>
</tr>
<tr>
<td>International Outreach Committee</td>
<td>10:00 am–12:00 pm</td>
<td>Salon A-4 - LL</td>
</tr>
<tr>
<td>Government Affairs Committee</td>
<td>10:00 am–12:00 pm</td>
<td>4K</td>
</tr>
<tr>
<td>ABLS Committee</td>
<td>1:00 pm–3:00 pm</td>
<td>Salon A-4 - LL</td>
</tr>
<tr>
<td>Elderly Care Committee</td>
<td>1:00 pm–3:30 pm</td>
<td>4A</td>
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<tr>
<td>ODBC - Organization &amp; Delivery of Burn Care</td>
<td>1:00 pm–4:00 pm</td>
<td>4M</td>
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<tr>
<td>Audit Committee</td>
<td>2:00 pm–3:00 pm</td>
<td>PDR 1 - 3rd</td>
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<tr>
<td>Rehabilitation Committee</td>
<td>2:00 pm–3:30 pm</td>
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<tr>
<td>Research Committee</td>
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<tr>
<td>Ethics Committee</td>
<td>3:00 pm–4:00 pm</td>
<td>PDR 1 - 3rd</td>
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<tr>
<td>Aftercare Reintegration Committee</td>
<td>3:00 pm–5:00 pm</td>
<td>Salon A-1 - LL</td>
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<tr>
<td>Verification Committee (Closed)</td>
<td>3:00 pm–8:00 pm</td>
<td>Salon A-4 - LL</td>
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<tr>
<td>Education Committee</td>
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## TUESDAY, APRIL 10

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<tr>
<th>Committee</th>
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<th>Room</th>
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<tbody>
<tr>
<td>Board of Trustees (Closed)</td>
<td>8:00 am–3:00 pm</td>
<td>McCormick Boardroom - 4th</td>
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<tr>
<td>Archives Committee (Closed)</td>
<td>4:00 pm–5:00 pm</td>
<td>Pullman Boardroom - 4th</td>
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## THURSDAY, APRIL 12

<table>
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<tr>
<td>JBCR Editorial Meeting (Closed)</td>
<td>12:15 pm–1:45 pm</td>
<td>Marquette Room - 3rd</td>
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## SATURDAY, APRIL 14

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<tbody>
<tr>
<td>Board of Trustees (Closed)</td>
<td>8:30 am–11:30 am</td>
<td>McCormick Boardroom - 4th</td>
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</tbody>
</table>
SPECIAL INTEREST GROUP (SIG) MEETINGS

SIG meetings provide an opportunity for the exchange of ideas, networking with colleagues, and information sharing. SIG meetings are included in your registration and all ABA meeting participants are encouraged to attend. For SIG descriptions, visit www.ameriburn.org.

MONDAY, APRIL 9
Federation of Burn Foundations
SIG: Motivating Millennials to Volunteer *
Canadian SIG

TUESDAY, APRIL 10
OT/PT SIG: Tips and Tricks for Burn Therapists—Serial Casting *
Nursing SIG
Research SIG
Nutrition SIG
Disaster SIG: Disaster Preparedness *
Reconstructive SIG
Burn Prevention & Epidemiology SIG: Evaluation of Prevention Efforts *
Burn Registry SIG
APRN/PA SIG: Treating the Burn Patient with a History of Polysubstance Abuse *
Pediatric SIG
Pharmacy SIG
Burn Survivor & Reintegration SIG: Understanding Intimacy: Bringing Connection and Body Together *
Fluid Resuscitation SIG
Burn Camp SIG: The Intentional Camp: How to Put More Muscle in Our Mission by Making Sure We Really Do What We Say We are Doing *
Fire Fighter SIG
Bioengineering/Biophysics SIG
Anesthesiology/Respiratory SIG
Psychosocial SIG: Behavioral and Cognitive Changes After an Electrical Injury *

*CEUs offered
Supporting our Partners in Burn Rehabilitation Since 1980

Quality Control Achieves Results

98.6% Customer Satisfaction

Bio Concepts
compression garments
2424 E. University Drive, Phoenix, Arizona, 85034 USA
Phone: +1-602-267-7854 | Fax: +1-602-273-6931

The Firefighters Burn Center at Regional One Health is proud to join the ABA in celebrating 50 years of advances in research, care, and prevention of burns. As the only verified burn center in a 4-state region, we’re proud to join the ABA in helping burn survivors return to normal, productive lives as quickly as possible.

thank you
FOR YOUR COMMITMENT TO THE FUTURE OF BURN CARE.
PROGRAM OVERVIEW

MONDAY, APRIL 9
7:30 am–5:00 pm  ABLS Provider Course
7:30 am–5:00 pm  Committee Meetings
12:00 pm–1:30 pm  IAC/Government Affairs Luncheon
6:00 pm–10:00 pm  SIG Meetings

TUESDAY, APRIL 10
7:30 am–4:00 pm  ABLS Instructor Course
7:30 am–5:00 pm  Advanced Burn Provider Course
8:00 am–4:30 pm  Board of Trustees Meeting
8:00 am–5:00 pm  SIG Meetings
11:30 am–1:00 pm  Board & Committee Chair Luncheon
1:00 pm–5:00 pm  Burn Center Leadership Boot Camp
1:00 pm–5:00 pm  Fundamentals of Burn Care
4:15 pm–5:45 pm  ABuRN Town Hall
5:00 pm–7:00 pm  Opening Reception in the Exhibit Hall

WEDNESDAY, APRIL 11
6:15 am–7:00 am  Zumba
6:30 am–7:45 am  Sunrise Symposia
7:00 am–7:45 am  New Member/First Time Attendee Breakfast
8:00 am–9:30 am  Opening Ceremony/Presidential Address and Awards
9:30 am–10:00 am  Coffee in the Exhibit Hall
10:00 am–12:00 pm  Correlatives & Educational Forums
12:00 pm–2:00 pm  Lunch in the Exhibit Hall
12:30 pm–1:30 pm  Poster Rounds
2:00 pm–4:00 pm  Educational Forums
4:15 pm–5:30 pm  Plenary Session: Top 5 Abstracts
5:30 pm–7:00 pm  Reception in Exhibit Hall

THURSDAY, APRIL 12
6:15 am–7:00 am  Yoga
6:30 am–7:45 am  Sunrise Symposia
7:00 am–7:45 am  International Attendee Breakfast
8:00 am–9:30 am  Plenary Session: Quinquennial
9:30 am–10:00 am  Coffee in the Hall
10:00 am–12:00 pm  Correlatives & Educational Forums
12:00 pm–2:00 pm  Lunch in the Exhibit Hall
12:30 pm–1:30 pm  Poster Rounds
2:00 pm–4:00 pm  Educational Forums
4:15 pm–5:30 pm  Year in Review
4:15 pm–6:00 pm  Changing Places Session
4:15 pm–6:00 pm  Burn Center Tours

FRIDAY, APRIL 13
6:30 am–7:45 am  Top Sunrise Symposia
8:00 am–9:30 am  Presidential Plenary: The ABA: 50 Years of Progress & Beyond
10:00 am–12:00 pm  Correlatives
10:00 am–12:00 pm  Best in Category Posters
12:30 pm–1:45 pm  Lunch Symposia/Educational Forums
2:00 pm–4:00 pm  Educational Forums
4:15 pm–6:00 pm  Business Meeting
7:00 pm–12:00 am  50th Year Celebration Banquet

LOCATION KEY

LL  Lower Level
L  Lobby Level
2nd  2nd Floor
3rd  3rd Floor

Meetings on the 4th floor are rooms 4A–4M
## DETAILED PROGRAM SCHEDULE

### MONDAY, APRIL 9

<table>
<thead>
<tr>
<th>Event</th>
<th>Time</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABLS Provider Course</td>
<td>7:30 am–5:00 pm</td>
<td>Joliet Room - 3rd</td>
</tr>
<tr>
<td>Committee Meetings</td>
<td>8:00 am–8:00 pm</td>
<td>See page 6</td>
</tr>
<tr>
<td>IAC Government Affairs Lunch</td>
<td>12:00 pm–1:30 pm</td>
<td>Marquette Room - 3rd</td>
</tr>
<tr>
<td>SIG Meetings</td>
<td>6:00 pm–10:00 pm</td>
<td>See page 7</td>
</tr>
</tbody>
</table>

### TUESDAY, APRIL 10

<table>
<thead>
<tr>
<th>Event</th>
<th>Time</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABLS Instructor Course</td>
<td>7:30 am–4:00 pm</td>
<td>Continental Ballroom A - L</td>
</tr>
<tr>
<td>ABPC: Advanced Burn Provider Courses</td>
<td>8:00 am–5:00 pm</td>
<td>4M</td>
</tr>
<tr>
<td>SIG Meetings</td>
<td>8:00 am–5:00 pm</td>
<td>See page 7</td>
</tr>
<tr>
<td>Board of Trustees Meeting</td>
<td>8:00 am–3:00 pm</td>
<td>McCormick Boardroom - 4th</td>
</tr>
<tr>
<td>Board and Committee Chair Luncheon</td>
<td>11:30 am–1:00 pm</td>
<td>Marquette - 3rd</td>
</tr>
<tr>
<td>Burn Center Leadership Boot Camp</td>
<td>1:00 pm–5:00 pm</td>
<td>Salon A-1 - LL</td>
</tr>
<tr>
<td>Fundamentals of Burn Care</td>
<td>1:00 pm–5:00 pm</td>
<td>Salon A-5 - LL</td>
</tr>
<tr>
<td>Archives Committee</td>
<td>4:00 pm–5:00 pm</td>
<td>Pullman Boardroom - 4th</td>
</tr>
<tr>
<td>ABuRN Town Hall</td>
<td>4:15 pm–5:45 pm</td>
<td>Salon A-4 - LL</td>
</tr>
<tr>
<td>Opening Reception</td>
<td>5:00 pm–7:00 pm</td>
<td>Stevens Salon C&amp;D - LL</td>
</tr>
<tr>
<td>Sponsored Symposia: Novel and Specific Real-time Tools for Reducing the Incidence and Impact of Infections</td>
<td>7:00 pm–8:30 pm</td>
<td>Continental A - L</td>
</tr>
</tbody>
</table>

### WEDNESDAY, APRIL 11

<table>
<thead>
<tr>
<th>Event</th>
<th>Time</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zumba</td>
<td>6:15 am–7:00 am</td>
<td>4L</td>
</tr>
<tr>
<td>Sunrise Symposia</td>
<td>6:30 am–7:45 am</td>
<td>See page 19</td>
</tr>
<tr>
<td>New Member/First Time Attendee Breakfast</td>
<td>7:00 am–7:45 am</td>
<td>Continental Ballroom A - L</td>
</tr>
<tr>
<td>Opening Ceremony, Presidential Address &amp; Awards</td>
<td>8:00 am–9:30 am</td>
<td>International Ballroom - L</td>
</tr>
<tr>
<td>Coffee with exhibitors</td>
<td>9:30 am–10:00 am</td>
<td>Stevens Salon C&amp;D - LL</td>
</tr>
<tr>
<td>Correlative I - Critical Care: Clinical I</td>
<td>10:00 am–12:00 pm</td>
<td>Salon A-2 - LL</td>
</tr>
<tr>
<td>Correlative II - Nursing/ Outpatient Burn Management</td>
<td>10:00 am–12:00 pm</td>
<td>Salon A-5 - LL</td>
</tr>
<tr>
<td>Correlative III - Public Health/ Epidemiology/ Prevention I</td>
<td>10:00 am–12:00 pm</td>
<td>Salon A-3 - LL</td>
</tr>
<tr>
<td>Correlative IV - Quality I</td>
<td>10:00 am–12:00 pm</td>
<td>Salon A-1 - LL</td>
</tr>
<tr>
<td>Correlative V - Wounds: Translation Science</td>
<td>10:00 am–12:00 pm</td>
<td>Salon A-4 - LL</td>
</tr>
<tr>
<td>Fire Fighter I: Carbon Monoxide &amp; Cyanide Poisoning—How They Affect Fire Fighters</td>
<td>10:00 am–12:00 pm</td>
<td>Continental Ballroom A - L</td>
</tr>
<tr>
<td>Rehabilitation Workshop: Burn Pain Management—What's a Therapist to Do?</td>
<td>10:00 am–12:00 pm</td>
<td>Continental Ballroom B - L</td>
</tr>
<tr>
<td>Lunch in the exhibit hall</td>
<td>12:00 pm–1:45 pm</td>
<td>Stevens Salon C&amp;D - LL</td>
</tr>
<tr>
<td>Poster Rounds</td>
<td>12:30 pm–1:30 pm</td>
<td>Stevens Salon C&amp;D - LL</td>
</tr>
<tr>
<td>Operation Gotham Shield: An In-depth Examination of the Current Framework for Response to Burn Disaster (2-day)</td>
<td>2:00 pm–4:00 pm</td>
<td>Continental Ballroom B - L</td>
</tr>
<tr>
<td>Burn Reconstruction: Part 1 (2-day)</td>
<td>2:00 pm–4:00 pm</td>
<td>Continental Ballroom A - L</td>
</tr>
</tbody>
</table>
Management of Vasodilatory Shock in the Care of Severe Burns 2:00 pm–4:00 pm  Salon A-5 - LL
It’s Not All About the Patient—What about the Staff? 2:00 pm–4:00 pm  Salon A-2 - LL
Stem Cells in Burn Injury 2:00 pm–4:00 pm  Salon A-4 - LL
Current Understanding of Exercise Science in Burns 2:00 pm–4:00 pm  Salon A-1 - LL
Social Reintegration: Helping Survivors and their Families Re-engage in their Communities 2:00 pm–4:00 pm  Salon A-3 - LL
Top 5 Abstracts Presented 4:15 pm–5:30 pm  International Ballroom - L
Wine & Cheese Reception with Exhibitors 5:30 pm–7:00 pm  Stevens Salon C&D - LL
Sponsored Symposia: Advanced Techniques for Durable Closure of Burns 7:00 pm–8:30 pm  Continental A - L
Sponsored Symposia: Laser Scar Therapy: Business Model and Clinical Evidence 7:00 pm–8:30 pm  Continental B - L

THURSDAY, APRIL 12

Yoga 6:15 am–7:00 am  4L
Sunrise Symposia 6:30 am–7:45 am  See page 30
International Attendee Breakfast 7:00 am–7:45 am  Marquette Room - 3rd
Prevention and Treatment of Burn Scarring: Then and Now 8:00 am–9:30 am  International Ballroom - L
Coffee with exhibitors 9:30 am–10:00 am  Stevens Salon C&D - LL
Correlative VI - Critical Care: Clinical II 10:00 am–12:00 pm  Salon A-2 - LL
Correlative VII - Nutrition 10:00 am–12:00 pm  Salon A-3 - LL
Correlative VIII - Pain and Itch / Psychosocial 10:00 am–12:00 pm  Salon A-4 - LL
Correlative IX - Quality II 10:00 am–12:00 pm  Salon A-1 - LL
Correlative X - Reconstruction 10:00 am–12:00 pm  Salon A-5 - LL
Fire Fighter II: Creating Therapeutic Community Reintegration Programs: A Collaboration between Clinicians and Fire Fighters 10:00 am–12:00 pm  Continental Ballroom A - L
Prevention Workshop: The American Burn Association’s 50 Years of Prevention 10:00 am–12:00 pm  Continental Ballroom B - L
Lunch in the exhibit hall 12:00 pm–1:45 pm  Stevens Salon C&D - LL
JBCR Editorial Meeting 12:15 pm–1:45 pm  Marquette Room - 3rd
Poster Rounds 12:30 pm–1:30 pm  Stevens Salon C&D - LL
Operation Gotham Shield, Part 2: An In-depth Examination of the Current Framework for Response to Burn Disaster 2:00 pm–4:00 pm  Continental Ballroom B - L
Burn Reconstruction: Part 2 2:00 pm–4:00 pm  Continental Ballroom A - L
A Shared 50th Anniversary with the ABA: Acute Respiratory Distress Syndrome (ARDS) in the Burn Patient 2:00 pm–4:00 pm  Salon A-5 - LL
Is the Clinical Work Environment in Your Burn Center Affecting Patient Outcomes? 2:00 pm–4:00 pm  Salon A-1 - LL
Working with the Psychiatrically Challenged Burn Patient 2:00 pm–4:00 pm  Salon A-3 - LL
The Research Continuum: From Database and Big Data to Quality Improvement Projects 2:00 pm–4:00 pm  Salon A-2 - LL
# Detailed Program Schedule

<table>
<thead>
<tr>
<th>Event</th>
<th>Time</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Year in Review: The Top Journal Publications</td>
<td>4:15 pm–5:30 pm</td>
<td>Continental Ballroom A - L</td>
</tr>
<tr>
<td>Changing Places</td>
<td>4:15 pm–6:00 pm</td>
<td>8th Street Entrance</td>
</tr>
<tr>
<td>Burn Center Tour: Loyola University Medical Center</td>
<td>4:15 pm–6:00 pm</td>
<td>8th Street Entrance</td>
</tr>
<tr>
<td>Burn Center Tour: University of Chicago Medical Center</td>
<td>4:15 pm–6:00 pm</td>
<td>8th Street Entrance</td>
</tr>
</tbody>
</table>

**FRIDAY, APRIL 13**

<table>
<thead>
<tr>
<th>Event</th>
<th>Time</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Pediatric Hand Burn: Getting it Right the First Time</td>
<td>6:30 am–7:45 am</td>
<td>Boulevard A - 2nd</td>
</tr>
<tr>
<td>Achieving Superior Outcomes with Challenging Burns to the Face, Neck and Hands</td>
<td>6:30 am–7:45 am</td>
<td>Boulevard B - 2nd</td>
</tr>
<tr>
<td>How Do We Deal with the Opioid Crisis and Still Provide our Patients with Adequate Pain Control?</td>
<td>6:30 am–7:45 am</td>
<td>Boulevard C - 2nd</td>
</tr>
<tr>
<td>Update from American Board of Surgery on Maintenance of Certification and Specialty Practice Designation</td>
<td>6:30 am–7:45 am</td>
<td>Joliet Room - 3rd</td>
</tr>
<tr>
<td>The American Burn Association: 50 Years of Progress and Beyond</td>
<td>8:00 am–9:30 am</td>
<td>International Ballroom - L</td>
</tr>
<tr>
<td>Break</td>
<td>9:30 am–10:00 am</td>
<td></td>
</tr>
<tr>
<td>Correlative XI - Critical Care: Clinical III</td>
<td>10:00 am–12:00 pm</td>
<td>Salon A-2 - LL</td>
</tr>
<tr>
<td>Correlative XII - Public Health/Epidemiology/Prevention II</td>
<td>10:00 am–12:00 pm</td>
<td>Salon A-3 - LL</td>
</tr>
<tr>
<td>Correlative XIII - Rehabilitation</td>
<td>10:00 am–12:00 pm</td>
<td>Salon A-5 - LL</td>
</tr>
<tr>
<td>Correlative XIV - Wounds: Clinical</td>
<td>10:00 am–12:00 pm</td>
<td>Salon A-1 - LL</td>
</tr>
<tr>
<td>Correlative XV - Critical Care: Translation Science</td>
<td>10:00 am–12:00 pm</td>
<td>Salon A-4 - LL</td>
</tr>
<tr>
<td>Best in Category Posters</td>
<td>10:00 am–12:00 pm</td>
<td>Salon A Foyer - LL</td>
</tr>
<tr>
<td>Lunch Symposia</td>
<td>12:30 pm–1:45 pm</td>
<td>See page 40</td>
</tr>
<tr>
<td>Fundamentals of Laser Practice</td>
<td>12:30 pm–1:45 pm</td>
<td>Marquette Room - 3rd</td>
</tr>
<tr>
<td>Ethics of Burn Research: From Bench to Bedside to Publication</td>
<td>12:30 pm–1:45 pm</td>
<td>Joliet Room - 3rd</td>
</tr>
<tr>
<td>Social Integration of the Burn Survivor: Innovations Using Cutting Edge Technology</td>
<td>12:30 pm–1:45 pm</td>
<td>Continental B - L</td>
</tr>
<tr>
<td>MAC Forum: Firefighter Burn Injuries and the Role of the Burn Team</td>
<td>2:00 pm–4:00 pm</td>
<td>Salon A-3 - LL</td>
</tr>
<tr>
<td>Controversies in Modern Burn Care: The Pro Con Debate</td>
<td>2:00 pm–4:00 pm</td>
<td>Salon A-5 - LL</td>
</tr>
<tr>
<td>Managing Blast and Crush Injuries</td>
<td>2:00 pm–4:00 pm</td>
<td>Salon A-1 - LL</td>
</tr>
<tr>
<td>Burn Care for Elderly Patients</td>
<td>2:00 pm–4:00 pm</td>
<td>Salon A-2 - LL</td>
</tr>
<tr>
<td>ABA Business Meeting</td>
<td>4:15 pm–6:00 pm</td>
<td>Marquette Room - 3rd</td>
</tr>
<tr>
<td>Annual Banquet</td>
<td>7:00 pm–12:00 am</td>
<td>Grand Ballroom</td>
</tr>
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</table>

**SATURDAY, APRIL 14**

<table>
<thead>
<tr>
<th>Event</th>
<th>Time</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Trustees</td>
<td>8:00 am–11:30 am</td>
<td>McCormick Boardroom - 4th</td>
</tr>
</tbody>
</table>
The Advanced Burn Life Support Provider Course is an eight-hour course for physicians, nurses, physician assistants, nurse practitioners, therapists, paramedics and anyone who may come into contact with a burn injured patient within the first 24 hours. The course provides guidelines in the assessment and management of the burn patient during the first 24 hours post injury. Following a series of lectures, case studies are presented for group discussions. You will be given the opportunity to work with a simulated burn patient to reinforce the assessment, stabilization, and the American Burn Association transfer criteria to a Burn Center. Final testing consists of a written exam and a practical assessment.

As a result of attending this activity, the learner should be able to:

- Evaluate a patient with a serious burn.
- Define the magnitude and severity of the injury.
- Identify and establish priorities of treatment.
- Manage the airway and support ventilation.
- Initiate and monitor fluid resuscitation.
- Apply correct methods of physiological monitoring.
- Determine which patients should be transferred to a burn center.
- Organize and conduct the inter-hospital transfer of a seriously injured burn patient.
- Describe basic care, triage and transfer in the event of a disaster.
Grupo Piccolo congratulates ABA for Fifty years of Progress in Burn Care!

“Pronto Socorro para Queimaduras”
Jointly Celebrating Fifty Years 1968-2018

Grupo Piccolo enthusiastically celebrates ABA as our beloved institution also turns fifty on April 1st. Since 1968, Grupo Piccolo has dedicated itself to pioneering burn research and advocating for excellence in integrative treatment of the whole patient.

Natalia de Paula Piccolo, MD
Paulo de Paula Piccolo, MD
Nelson de Paula Piccolo, MD
Silvia Piccolo Daher, MD
Roberta Piccolo Lobo, MD
Ricardo Piccolo Daher, MD
Maria Thereza Sarto Piccolo, MD, PhD
Nelson Sarto Piccolo, MD
Monica Sarto Piccolo, MD, MSc, PhD

In Memoriam, Emilia Ilda Sarto Piccolo, JD (1931 - 2017)
In Memoriam, Nelson Piccolo, MD (1927 - 1988)
The American Burn Association Congratulates the first certified burn therapists achieving the designation Burn Therapist – Certified (BT-C)

Annick Chouinard, B.Sc., BT-C
Lisa Forbes, MSc, OT Reg(MB), BT-C
David Lorello, DPT, BT-C
Derek Murray, MSPT, BT-C
Bernadette Nedelec, PhD, BSc OT (c), BT-C
Jonathan Niszczak, MS, OTR/L, BT-C
Ingrid Parry, MS, PT, BT-C
Reg Richard, MS, PT (ret.), BT-C
Marla Robinson, MSc, OTR/L, BCPR, FAOTA, BT-C
Michael Serghiou, OTR, MBA, BT-C
Scott Ward, PT, PhD, FAPTA, BT-C

CONGRATULATIONS
to the ABA on 50 years of advancing burn care!
FROM THE FIREFIGHTERS OF THE DISTRICT OF COLUMBIA
SIG MEETINGS
See page 7.

COURSES

ABLS INSTRUCTOR COURSE
7:30 am–4:00 pm | Continental Ballroom A - L
The Advanced Burn Life Support Instructor Course is a 4.5-hour course for physicians, nurses, physician assistants, and nurse practitioners. A prerequisite is successful completion of an ABLS Provider Course. Instructors should have: (1) demonstrated experience in providing burn care; (2) an interest in the content of the course and the process of teaching; and (3) a commitment to serve as a faculty member for the ABLS Provider courses. Following a lecture on “Teaching How to Teach,” you will present a five-minute mini-lecture on an assigned topic, lead a group discussion of case studies, and lead a patient assessment stabilization scenario. The ABLS Coordinator session will take place at the conclusion of the ABLS Instructor course. This is an optional question and answer session for attendees that are interested in coordinating an ABLS Provider course.

As a result of attending this activity, the learner should be able to:

• Define teaching and learning.
• Explain the relationship of the definitions of teaching and learning to a philosophy of teaching.
• Describe four teaching strategies and their application to the instructional sessions included in the ABLS Course.
• Describe three components of the lecture.
• Identify three levels of cognitive questions and give two examples of each.
• Describe the relationship of the group discussion and the medical problem-solving process teaching strategies to the case study and case simulation sessions in the ABLS Course.
• Review four concepts concerning the adult learner.
• Demonstrate teaching skills: microteaching, case study and case simulation sessions.

THE ADVANCED BURN PROVIDER COURSE (ABPC)
8:00 am–5:00 pm | 4M
New this year, the ABPC is targeted to early career providers. It is a hands-on, simulation course introducing the clinical skills required to assess and manage common complications in adult and pediatric patients with burn injuries. Skills such as wound management, skin substitute selection and placement and escharotomy will be taught.

The goal of the course is to improve the standard of burn care by educating providers with a need-driven curriculum that addresses common deficiencies in burn care as identified in a national multidisciplinary needs assessment. The course is not intended to serve as a substitute for burn fellowship training or situations that require clinical reasoning beyond the scope of today’s content. It is the expectation that providers that participate in the course will gain an understanding and an introduction to the clinical skills required to assess and manage common complications in adult and pediatric patients with burn injuries.

Expert faculty include:

Jeffrey E. Carter, MD
Louisiana State University Health Sciences Center
New Orleans, LA

Chris K. Craig, PA-C, MMS
Wake Forest Baptist Health
Winston Salem, NC

James H. Holmes IV, MD
Wake Forest Baptist Health
Winston Salem, NC

James E. Johnson, PhD
Wake Forest Baptist Health
Winston Salem, NC

Steve A. Kahn, MD
University of Southern Alabama
Mobile, AL
EDUCATIONAL FORUMS

BURN CENTER LEADERSHIP BOOT CAMP | F-093
1:00 pm–5:00 pm | Salon A-1 - LL
Course Directors: David T. Harrington, MD, Brad Wiggins, RN, BSN

Running a burn center is not just taking care of patients but being an administrator, a manager and a leader. Many practitioners are put in leadership positions in burn centers without any training in team building and leadership. Leadership skills, in all disciplines and on all levels, can increase productivity and effectiveness.

As a result of attending this activity, the learner should be able to:

- Identify available resources for leaders and managers.
- Identify team building opportunities.
- Discuss the importance of communication skills among all team members.
- Describe the impact leaders can have on the quality of care.

1:00 pm–1:10 pm Introduction
David T. Harrington, MD

1:10 pm–1:45 pm The Feeding and Watering of Your Burn Center
Rajiv Sood, MD

1:45 pm–2:20 pm Don't be an Island - Ask for Help!
Palmer Q. Bessey, MD, MS

2:20 pm–2:55 pm Building a Team with Millennials
J. Bradley Wiggins, RN, BSN

2:55 pm–3:30 pm Developing Community Relationships
Charles J. Yowler, MD

3:30 pm–4:05 pm Quality Improvement—Getting It Done!!
David T. Harrington, MD

4:05 pm–4:40 pm ABA Verification PRQ: How to Find and Close Gaps
Gretchen J. Carrougher, RN, MN

4:40 pm–5:00 pm Questions & Answers

FUNDAMENTALS OF BURN CARE | F-094
1:00 pm–5:00 pm | Salon A-5 - LL
Course Directors: Anjay Khandelwal, MD; Jeffrey S. Litt, DO; Miranda L. Yelvington, MS, OTR/L, BCPR

Rehabilitation for the burn patient begins on the day of the injury and can continue for a number of months to years after discharge. Managing the initial injury and throughout the rehabilitative phase requires knowledge and various skills on the part of the burn therapist to successfully achieve functional outcomes. In addition to formal rehabilitative sessions within the burn center, aftercare programs also play an important role in the patient’s physical and emotional recovery. This is an important component to burn care that all team members should be aware of which will help to provide a cohesive plan of care for the patients.

As a result of attending this activity, the learner should be able to:

- Discuss the assessment of rehabilitative needs of the burn patient.
- Demonstrate basic knowledge of splint application.
- List the types and benefits of aftercare programs for burn patients.

1:00 pm–1:10 pm Introduction
Jeffrey S. Litt, DO; Miranda Yelvington, MS, OTR/L, BCPR

1:10 pm–1:40 pm Panel Discussion: Involving the Family with Therapy: Interaction Dynamics and Challenging Situations
Shelley A. Wiechman, PhD, ABPP; Jessica Irven, MS, LTR/CTRS, CCLS; Virnal Murthy, MD; Miranda Yelvington, MS, OTR/L, BCPR

1:40 pm–1:50 pm Proper Application of Dressings and Burn Wound Wrapping: Tips and Techniques to Encourage Function
Trudy J. Boulter, OTR, BS, CHT

1:50 pm–2:30 pm Hands-on Breakout Session: Proper Application of Dressings and Burn

1:50 pm–2:30 pm Hands-on Breakout Session: Wound Wrapping: Tips and Techniques to Encourage Function

2:30 pm–3:00 pm Addressing Patient and Family Concerns about Outcomes and Appearance
Shelley A. Wiechman, PhD, ABPP; Michael Serghiou, OTR, MBA; Anjay Khandelwal, MD; Andrea Rubin, BA

3:00 pm–3:15 pm Break

3:15 pm–3:25 pm Scar Science
Bernadette Nedelec, PhD, BSc, OT

3:25 pm–3:55 pm Hands-on Breakout Session: Approaches to Management of Difficult Burn Scars
Michael A. Serghiou, OTR, MBA

3:55 pm–4:05 pm Burn Splinting
Michael A. Serghiou, OTR, MBA

4:05 pm–4:45 pm Hands-on Breakout Session: Application of Splints and Patient Positioning to Facilitate Range of Motion and Function

4:45 pm–5:00 pm Questions & Answers
ABuRN TOWN HALL | F-095
4:15 pm–5:45 pm | Salon A-4 - LL
Director: James H. Holmes IV, MD

The ABuRN group of the American Burn Association is a multidisciplinary group of ABA member’s committed to advancing burn care through collaborative research. Vital patient information from multiple burn centers is gathered in each study in hopes of answering many of the questions regarding the standards of burn treatment. This will ultimately add more scientific fact for many of the burn care treatments utilized today. At this multidisciplinary session, ABA leadership and clinical researchers will review the progress of current studies and discuss the status of future projects.

As a result of attending this activity, the learner should be able to:

• Identify the leaders of current research projects.
• Discuss current, ongoing, and future research.

4:15 pm–4:30 pm  Review of ABuRN Infrastructure and Processes
4:30 pm–4:45 pm  Status of Current Trials & RFPs
4:45 pm–5:30 pm  Presentations of New Studies and Opportunities
5:30 pm–5:45 pm  Open-floor Discussion

DON’T FORGET TO ATTEND THE OPENING RECEPTION IN THE EXHIBIT HALL 5:00–7:00 PM.

Catch up with your colleagues and visit the many exhibitors demonstrating solutions to meet your needs as a burn care professional.
SUNRISE SYMPOSIA

6:30 am–7:45 am

S-101 Burn Prevention: A Team Approach
Moderators: Debra A. Jones, RN, Cindy Magnole, RN, Maria Chacon Gomez, MD
4D

S-102 How Do We Get All of Those Calories In?
Moderators: Cynthia A. Hoffman, RD, MS, Jennifer M. Larson, RD
4M

S-103 Safe Nurse Staffing in the Burn Center
Moderators: Amanda Bettencourt MSN, CNS, CCRN-K, ACCNS-P,
Brad Rogers, RN, Karen Smith, BSc, MHS
Marquette - 3rd

S-104 Utilizing Your Burn Database to Develop QI Projects
Moderators: Linda Staubli, BSN, RN, CCRN-K, Tina L. Palmieri, MD
Continental B - L

S-105 Let’s Not Underestimate the Importance of the OR Team
Moderators: Jill M. Krystofinski, CRNA, MSN, Anthony Papp, MD, PhD,
Angela Faletta, RN, Emely Dubon, RN
4A

S-106 The Dilemma of Itch
Moderators: Todd Walroth, PharmD, Vimal K. Murthy, MD
Boulevard A - 2nd

S-107 Challenges of Discharge Planning
Moderators: Mikki Rothbauer, MSW, LICSW, Linda Gibbons, MS, RN
4K

S-108 Tips and Tricks on Starting and Maintaining Back to School Programs
Moderators: Elizabeth Dey, CPNP-AC, Erin Niles, RN, Jessica Inven, MS
4B

S-109 Burn Therapist Certification: How do I Apply?
Moderators: Ingrid S. Parry, MS, PT, Bernadette Nedelec, PhD, BSc, OT,
Lisa Forbes, MSc, OT
Joliet Room - 3rd

S-110 How to Successfully Support Burn Survivors at Any Age
Moderators: Amy R. Acton, RN, BSN, Karen L. Badger, PhD, MSW
4C

S-111 How to be a Successful Mentor and Mentee
Moderators: Jeffrey W. Shupp, MD, Amalia Cochran, MD, Victor Joe, MD
Boulevard B - 2nd

S-112 Lasers are Great, but How do We Deal with and Prevent Complications?
Moderators: Nathan A. Kemalyan, MD, Joel S. Fish, MD, MSc, Gretchen Kass, RN
Boulevard C - 2nd

S-113 The Pediatric Hand Burn: Getting it Right the First Time
Moderators: Robert L. Sheridan, MD, Miranda L. Yelvington, MS OTR/L
Continental C - L
FIRST TIME ATTENDEE & NEW MEMBER WELCOME BREAKFAST
7:00 am–7:45 am | Continental Ballroom A - L
Are you a first time Annual Meeting attendee or new ABA member? Please join your colleagues and ABA leadership for breakfast at this informal networking session. Learn more about ABA programs, activities, Special Interest Groups, and ways to get involved and find out how to make the most of your time at the Annual Meeting.

ZUMBA
6:15 am–7:00 am | 4L
Get your day moving by participating in this fun, fast-paced exercise class. Whether you’ve got the moves down or you’ve never tried Zumba before, you can work at your own pace and get the blood flowing so you’re ready for a full day of education.

PLENARY
OPENING CEREMONY, PRESIDENTIAL ADDRESS & AWARDS | P-153
8:00 am–9:30 am | International Ballroom
Presented by: Linwood R. Haith Jr., MD, FACS, FCCM
The Nathan Speare Regional Burn Treatment Center, Burn Center Co-Director, Crozer-Chester Medical Center, ABA President

The American Burn Association was founded on the cornerstone of education to organize burn care, research, prevention and rehabilitation. The ABA was the first professional organization to provide education to all members of that organization. The ABA has provided education on multiple platforms including the annual meeting, regional meetings, ABLS and the Journal of Burn Care and Research. It has demonstrated a fantastic 50-year history of ability to teach its members as well as all members of the medical community about burn injury and care. As we move into the 21st Century the opportunities and methods for learning have changed to more electronic media platforms. While these methods will be examined it is also important to realize that face-to-face in-person interaction is an extremely effective means for advancing and delivering burn education.

As a result of attending this activity, the learner should be able to:

• Describe ABA educational accomplishments in the past half decade.
• Examine methods burn teams use to obtain knowledge and skills now and in the past.
• Discuss future options of burn care education.

CORRELATIVES

C-154 CORRELATIVE I - CRITICAL CARE: CLINICAL I
10:00 am–12:00 pm | Salon A-2 - LL
Moderators: Kevin Chung, MD; Sandra Yovino, RN

1 Effects of Obesity on Burn Resuscitation
2 Revisiting Extracorporeal Membrane Oxygenation for Severe ARDS in Burns
3 An Adjusted Ideal Body Weight Index Formula with FFP Rescue Decreases Fluid Creep During Burn Resuscitation
4 Need for Mechanical Ventilation is More Predictive of Mortality than Age, %TBSA, and Frailty Score in Elderly Burn Patients
5 Does the Storage Age of Blood Transfused to Burn Patients Matter?
6 Preventing Unnecessary Intubations: Use of Flexible Fiberoptic Laryngoscopy for Airway Evaluation in Patients with Suspected Airway or Inhalation Injury
7 Trend Analysis of Current Modalities for Monitoring Fluid Therapy in Patients with Large Burns: Echoing the Call for Better Resuscitation Indices
8 Admission Heart Rate Reserve Is Associated With Clinical Response to Propranolol in Severely Burned Children

C-155 CORRELATIVE II - NURSING / OUTPATIENT BURN MANAGEMENT
10:00 am–12:00 pm | Salon A-5 - LL
Moderators: Jeanie Leggett, RN, BSN, MA; J. Bradley Wiggins, RN, BSN

9 Prevalence of Burnout Syndrome in Burn Center Clinical Staff
10 Quality of Life and Community Integration in Military and Civilian Burn Survivors
11 Clinical Evaluation of Burn Nursing Competency Domains
12 Pressure Ulcer Prevention: Knowledge Assessment and Education of Firefighters
13 Does Admission eGFR effect Burn Centre Length of Stay?
14 SCAR-Q: An Update on Field-testing a Patient-reported Outcome Instrument for Burn, Surgical, and Traumatic Scars
15 Use of Value Engineering to Optimize Burn Outpatient Clinic Workflow
16 Opioid Stewardship in the Burn Outpatient Setting
**C-156 CORRELATIVE III - PUBLIC HEALTH / EPIDEMIOLOGY / PREVENTION I**

10:00 am–12:00 pm | Salon A-3 - LL

Moderators: Kathe Conlon, BSN, RN, MSHS; Alisa Savetamal, MD

17 The Incidence of Adult Burn Patient Unplanned 30-Day Readmissions in the United States

18 Epidemiological Analysis of Paediatric Burns in the Dominican Republic Reveals a Demographic Profile at Significant Risk for Electrical Burns

19 Training the Masses; Preparing for a Burn Disaster Through Education of Burn Surge Facilities

20 Trends and Outcomes for Palliative Care in Major Burn Patients: 10-year Analysis of the NIS

21 Burn Mass Casualty Incident: What About the Children?

22 Firefighter Fatalities: Crude Mortality Rates and Risk Factors for Line of Duty Injury and Death

23 Sink Bathing Burns: A Unique Opportunity for an Injury Prevention Initiative

24 Factors Affecting Return to Work: A Burn Model System National Database Investigation

**C-157 CORRELATIVE IV - QUALITY I**

10:00 am–12:00 pm | Salon A-1 - LL

Moderators: Jennifer Brandt, PharmD; William Cioffi Jr., MD

25 Prospective Evaluation of Operating Room Inefficiency

26 Early Patient Deaths after Transfer to a Burn Center

27 Predictive Value of Quick SOFA and Baux Scores in Burn Patients

28 Decreasing Discharge Opiates in Burn Patients

29 Pictures Influence the Decision to Transfer: Outcomes of a Telemedicine Program Serving an 8 State Rural Population

30 Above and Beyond: Enoxaparin Dose Adjustment is Required for Adequate VTE Prophylaxis in Burn Patients

31 Evaluation of Intra- and Inter-User Reliability in Quantitative Scar Assessments

32 How Long Are Burn Patients Really NPO in the Perioperative Period and Can We Effectively Correct the Caloric Deficit Using an Enteral Feeding “Catch-up” Protocol?

**C-158 CORRELATIVE V - WOUNDS: TRANSLATION SCIENCE**

10:00 am–12:00 pm | Salon A-4 - LL

Moderators: Dorothy Supp, PhD; Steven Wolf, MD

33 Persistent Reactive Oxygen Species Damage Contributes to Hypertrophic Scar Phenotype After Wound Closure

34 Scar Outcomes Following Pressure Garment Therapy Cessation

35 First in Vitro and in Vivo Experiences with a New Synthetic Dermal Substitute with Dual Microporous Structure

36 Correlation between the Warrior/Worrier Gene on Post Burn Pruritus and Scarring

37 Tight Junctions Exhibit Differential Regulation in Dyspigmented Hypertrophic Scars

38 Mesenchymal Progenitor-derived VEGF is a Major Source of Cells Contributing to Heterotopic Bone

39 Effect of Tadalafil on Reduction of Necrosis in the Ischemic Zone in a Rat Comb Burn Model

**EDUCATIONAL FORUMS**

**FIRE FIGHTER I: CARBON MONOXIDE & CYANIDE POISONING - HOW THEY AFFECT FIRE FIGHTERS | F-160**

10:00 am–12:00 pm | Continental Ballroom A - L

Course Directors: Rick Boatwright, FF; Steven Kahn, MD

Two of the most common toxic gases you will encounter on a fire scene are carbon monoxide and cyanide. This session will provide details on the inherent dangers of these byproducts of combustion. This workshop will also cover the acute and chronic affects they have on the human body and how you can protect yourself.

As a result of attending this activity, the learner should be able to:

• Describe the hazards of carbon monoxide and cyanide poisoning for the fire fighter.
• Explain techniques to protect the fire fighter.

10:00 am–10:50 am   CO and HCN: Pathophysiology, Diagnosis, and Treatment  
Steven Kahn, MD

10:50 am–11:45 am   CO and HCN: Unique Considerations for the Firefighter  
Rick Boatwright, FF

11:45 am–12:00 pm  Questions & Answers
REHABILITATION WORKSHOP: BURN PAIN MANAGEMENT—WHAT’S A THERAPIST TO DO?
F-161

10:00 am–12:00 pm | Continental Ballroom B - L
Course Directors: Annick Chouinard, BSc., PT; Linda Leonard, RN, BSN; Lynne Benavides, OTR/L, CHT

This workshop will be on the management of pain through the acute, intermediate and long-term phases of healing from a burn therapist’s perspective. We will discuss: pain outcome metrics, interdisciplinary approach, non-pharmacologic management (graded motor imagery, immersive reality, somatosensory rehab, specific patient education) of pain.

As a result of attending this activity, the learner should be able to:

• Identify patients who would benefit from and apply the modalities of graded motor imagery, immersive reality, somatosensory rehab and specific patient education to treat pain from a burn injury in their daily practice.

• Recognize how the language they use during their daily interventions with burn patients can affect their patients’ pain experience.

• Use the pain outcome metrics presented as a way to evaluate patients’ response to treatment and how to choose the appropriate treatment modality for burn pain.

• Develop their own patient pain education curriculum through the different phases of burn care (for the different types of pain).

10:00 am–10:15 am   Evidence-based, Rehabilitation Focused Burn Survivor Pain Management
Beradette Nedelec, PhD, BSc, OT

10:15 am–10:30 am   Value of Pain Management Practice Guidelines
Gretchen J. Carrougher, RN, MN

10:30 am–12:00 pm   Value of Pain Management Practice Guidelines: Laboratory Sessions (90 min); Stations Rotate Every 30 min

10:30 am–11:00 am   Laboratory Sessions: Somatosensory Rehabilitation for Neuropathic Pain in Burn Survivors
Valerie Calva, OT

10:30 am–11:00 am   Laboratory Sessions: The Use of Virtual and Augmented Reality In Burn Care
Anjay Khandelwal, MD; Shelley A. Wiechman, PhD, ABPP

11:00 am–11:30 am   Laboratory Sessions: Graded Motor Imagery (GMI) Application in the Management of Chronic Burn Pain Based on the Method Developed by the Noigroup
Annick Chouinard, B.Sc., PT; Jennifer Kennedy, MS, OTR/L

11:00 am–11:30 am   Laboratory Sessions: Somatosensory Rehabilitation for Neuropathic Pain in Burn Survivors
Valerie Calva, OT

11:00 am–11:30 am   Laboratory Sessions: The Use of Virtual and Augmented Reality In Burn Care
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Valerie Calva, OT

11:30 am–12:00 pm   Laboratory Sessions: The Use of Virtual and Augmented Reality In Burn Care
Anjay Khandelwal, MD; Shelley A. Wiechman, PhD, ABPP

10:00 am–12:00 pm   Value of Pain Management Practice Guidelines: Laboratory Sessions (90 min); Stations Rotate Every 30 min
OPERATION GOTHAM SHIELD: AN IN-DEPTH EXAMINATION OF THE CURRENT FRAMEWORK FOR RESPONSE TO BURN DISASTER | F-171/F-271

2:00 pm–4:00 pm | Continental Ballroom B - L
Course Directors: Colleen M. Ryan, MD; Victor C. Joe, MD

This participatory course is an in-depth critical analysis of the American Burn Association’s response to a disaster situation involving a massive burn surge. Day 1 will involve a reenactment of Operation Gotham Shield, a recent federal tabletop exercise beginning with a 10Kt improvised nuclear device detonating at the entrance to the Lincoln Tunnel. Each step of the response will be discussed from federal, military, civilian and burn survivor standpoints. Audience participation will be encouraged and improvements in the response will be proposed. Day 2 continues this theme with discussion and input from experts in trauma, past events, and austere environments.

As a result of attending this activity, the learner should be able to:
• Define the current framework of a burn surge disaster response.
• Explain the ethical and practical issues involved in providing burn care in an austere care environment.
• Implement knowledge gained in your practice and synthesize a volunteer strategy.

Wednesday Agenda

2:00 pm–2:05 pm  Introduction & Orientation
Colleen M. Ryan, MD

2:05 pm–2:10 pm  Opening Remarks
Linwood R. Haith Jr., MD, Kimberly Hoarle, MBA, CAE

2:10 pm–3:55 pm  Mock Gotham Shield Exercise
Colleen M. Ryan, MD; Victor Joe, MD

3:55 pm–4:00 pm  Wrap Up
Victor C. Joe, MD

Thursday Agenda

2:00 pm–2:05 pm  Introduction
Colleen M. Ryan, MD

2:05 pm–2:35 pm  Keynote Speaker: Trauma Community/ Homeland Security Response
Alexander L. Eastman, MD, MPH

2:35 pm–2:50 pm  Response Consideration: Roles of Local/ State and Federal Government
Narayan Iyer, PhD

2:50 pm–3:10 pm  Tools for Situational Awareness at USG
Nancy Nurthen, MPH

3:10 pm–3:30 pm  Educational Resources and Innovation
Jeffrey E. Carter, MD

3:30 pm–3:45 pm  Ethics
Monica Gerrek, PhD

3:45 pm–4:00 pm  Panel Discussion with all Speakers
Victor C. Joe, MD
There is a growing need for burn reconstructive procedures all over the world because the community of burn survivors has grown steadily over the past decades due to improved acute burn care. The effective and functional reconstruction of burn related issues requires some special knowledge and skills, which are often not taught in plastic surgery residency programs. In addition, general surgeons often have to step up in international settings to perform basic burn reconstruction, if no plastic surgeon is available. This two-part course will teach learners how to analyze the reconstructive needs of a patient, demonstrate a variety of up-to-date solutions by leaders in the field, plan an efficient and effective reconstructive pathway, and execute key technical details of some basic operations.

As a result of attending this activity, the learner should be able to:

- Analyze the reconstructive needs of a patient.
- Discuss patient care plans for effective reconstructive pathway.
- Describe key technical details of the given operations.

### Wednesday Agenda

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<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Presenter</th>
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<tr>
<td>2:00 pm–2:05 pm</td>
<td>Introduction</td>
<td>Mark D. Fisher, MD</td>
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<tr>
<td>2:05 pm–2:35 pm</td>
<td>An Algorithm of Burn Scar Treatment</td>
<td>Sigrid A. Blome-Eberwein, MD</td>
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<td>2:35 pm–3:05 pm</td>
<td>Reconstruction of the Burned Face</td>
<td>Daniel N. Driscoll, MD</td>
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<td>3:05 pm–3:35 pm</td>
<td>Reconstruction of the Burned Upper Extremity</td>
<td>Gunter Germann, MD, PhD</td>
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<td>3:35 pm–4:00 pm</td>
<td>Panel Discussion</td>
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### Thursday Agenda

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<tr>
<td>2:00 pm–2:05 pm</td>
<td>Introduction</td>
<td>Mark D. Fisher, MD</td>
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<tr>
<td>2:05 pm–2:40 pm</td>
<td>Reconstruction of the Burned Neck and Mouth</td>
<td>Lawrence J. Gottlieb, MD</td>
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<td>2:40 pm–3:15 pm</td>
<td>Reconstruction of the Burned Breast and Trunk</td>
<td>Rajiv Sood, MD</td>
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<td>3:15 pm–3:50 pm</td>
<td>What Not to do in Burn Reconstruction</td>
<td>Matthias B. Donelan, MD</td>
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<td>3:50 pm–4:00 pm</td>
<td>Questions &amp; Answers</td>
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MANAGEMENT OFVASODILATORY SHOCK IN THE CARE OF SEVERE BURNS | F-173

2:00 pm–4:00 pm | Salon A-5 - LL
Course Directors: Bruce Friedman, MD; Kevin K. Chung, MD

Vasodilatory shock occurs frequently after severe burns in the form of burn shock during the initial resuscitation or septic shock later in the ICU course and is associated with significant morbidity and mortality. Newer interventions are available and quickly on the horizon that could alter outcomes in this difficult clinical setting. These include blood purification, new vasopressors, and the addition of classic micronutrients to name a few. Current practice is entirely limited to use of traditional vasopressors.

As a result of attending this activity, the learner should be able to:

• Develop new algorithms to support the patient with refractory shock.
• Explain the mechanism of Angiotensin II and how it may improve outcome in refractory burn and septic shock with implications for acute lung injury and other organ failures.
• Explain extracorporeal methods for the potential reversal of refractory burn and septic shock.
• Describe a potentially innovative way of using micronutrients to improve outcome in septic shock.

2:00 pm–2:20 pm  The Epidemiology of Refractory Burn and Septic Shock and Impact on Outcomes
Jeffrey W. Shupp, MD

2:20 pm–2:40 pm  Standard Approach to Refractory Burn and Septic Shock
Ian Driscoll, MD

2:40 pm–3:00 pm  Extracorporeal Therapy for Refractory Burn and Septic Shock
Kevin K. Chung, MD

3:00 pm–3:20 pm  Micronutrients and other Potential Innovative Approaches to Refractory and Septic Shock
Bruce Friedman, MD

3:20 pm–3:40 pm  Operational Considerations for Various Therapies in Shock: PharmD Perspective
Todd A. Walroth, PharmD

3:40 pm–4:00 pm  Conclusions and Future Directions
Kevin K. Chung, MD

IT’S NOT ALL ABOUT THE PATIENT—WHAT ABOUT THE STAFF? | F-174

2:00 pm–4:00 pm | Salon A-2 - LL
Course Directors: Anjay Khandelwal, MD; Tammy L. Coffee, MSN, RN, ACNP

In the modern healthcare environment, caring and compassion seem to be threatened by a new culture that is increasingly financially and quality driven. In order for the burn team to provide proper patient care, our focus must also include the needs of the caregivers and not just the patient. This is evident in multiple areas of clinical practice, including, but not limited to: communication, teamwork, resiliency and mutual support. Although multiple tools have been described to address these issues, no single approach has manifested as a panacea. In addition, although theoretically many tools appear enticing, providers often find it difficult to implement these tools in practical and sustainable models.

As a result of attending this activity, the learner should be able to:

• Recognize the signs and symptoms of staff burnout.
• Employ resiliency strategies to reduce personal burnout and to cope with stressors and changes in the workplace.
• Identify barriers to effective communication among clinical team members.
• Define and employ tools and strategies to improve team communication. Identify areas where the clinical staff can improve teamwork and staff engagement.
• Define various tools and strategies designed to improve and facilitate team-building.

2:00 pm–2:05 pm  Introduction/ Case Presentation
Anjay Khandelwal, MD; Tammy Coffee, RN, MSN, ACNP

2:05 pm–2:15 pm  Team STEPPS: What is it?
Christopher Hund, MFA

2:15 pm–3:55 pm  Group Workshops
Robert Smith, PhD

2:15 pm–2:45 pm  Group Workshops: Team Development and Leadership

2:45 pm–3:25 pm  Group Workshop: Communication

3:25 pm–3:55 pm  Group Workshop: Mutual Support and Decision Making

3:55 pm–4:00 pm  Wrap-up
Robert Smith, PhD; Anjay Khandelwal, MD; Tammy Coffee, RN, MSN, ACNP
**STEM CELLS IN BURN INJURY | F-175**

2:00 pm–4:00 pm | Salon A-4 - LL  
Course Directors: Dorothy M. Supp, PhD; Edward E. Tredget, MD, MSc

Currently, skin substitutes are used as adjuncts for treatment of large burn injuries. Although autologous epidermal keratinocytes, with or without dermal fibroblasts, have been used as the cellular components of skin substitutes, the monetary costs, regulatory hurdles, and logistical difficulties have slowed their adoption for routine clinical application in burn treatment. The purpose of this educational session is to highlight the potential therapeutic use of either autologous or allogeneic stem cells for treatment of burn injuries.

As a result of attending this activity, the learner should be able to:

- Describe different types of stem cells with therapeutic potential for burn wound healing.
- Explain the scientific basis supporting the use of stem cells for burns, as well as their limitations.
- Discuss novel therapies on the horizon.

2:00 pm–2:10 pm  Introduction  
Dorothy M. Supp, PhD

2:10 pm–2:40 pm  Epidermal Stem Cells and Tissue Engineering for Burn Patients  
Lucie Germain, PhD

2:40 pm–3:10 pm  Exploiting Dermal Stem/Progenitor Cells to Enhance Skin Regeneration  
Jeff Biernaskie, PhD

3:10 pm–3:45 pm  Bone Marrow-Derived Stem Cell Populations in Wound Healing and Perspectives on Future Clinical Applications  
Edward E. Tredget, MD, MSc

3:45 pm–4:00 pm Questions & Answers

**CURRENT UNDERSTANDING OF EXERCISE SCIENCE IN BURNS | F-176**

2:00 pm–4:00 pm | Salon A-1 - LL  
Course Directors: Bernadette Nedelec, PhD, BSc, OT; Oscar E. Suman, PhD

There are currently few specific recommendations on exercise prescription for adult and pediatric burn survivors. A survey given to licensed physical and occupational therapists who are part of the America Burn Association Special Interest Group reported that 81% of the 103 surveyed do not provide these important exercise related services. Post-discharge, early exercise training has important benefits that reverse or limit these complications in burned children. There are various research reports on the benefits of exercise training. However, there are many aspects of exercise training or adaptations that are not well known. In addition, there is some new “activity” related research that is in the forefront of burn care.

As a result of attending this activity, the learner should be able to:

- Describe the current research on exercise response and training adaptations using a rehabilitation exercise program specifically designed for burn patients.
- Discuss exercise related areas of research.
- Describe exercise prescriptions specific to burns.

2:00 pm–2:05 pm  Introduction  
Oscar E. Suman, PhD

2:05 pm–2:30 pm  The Role of Exercise in the Rehabilitation of Patients with Severe Burns  
Craig Porter, PhD

2:30 pm–2:55 pm  The Quantification of Exercise Prescription and the Exercise Training Responses in Children with Severe Burn Injury at Shriners Hospitals for Children–Galveston  
Eric Rivas, PhD

2:55 pm–3:20 pm  Thermoregulation in Adult Burn Survivors: Implications for Exercise and its Prescription  
Craig Crandall, PhD

3:20 pm–3:45 pm  Immersive Reality and Gaming Interventions: A New Frontier in Exercise Rehabilitation for Burns  
Jeffrey Schneider, MD

3:45 pm–4:00 pm Questions & Answers

**SOCIAL REINTEGRATION: HELPING SURVIVORS AND THEIR FAMILIES RE-ENGAGE IN THEIR COMMUNITIES | F-177**

2:00 pm–4:00 pm | Salon A-3 - LL  
Course Directors: Karen L. Badger, PhD, MSW; Pam Peterson, RN, BSN

Preparing both the burn survivor and family with the skills needed to re-engage with others successfully post-burn, and manage difficult every-day situations and interactions, is important for successful re-entry. This forum is designed to assist burn team professionals in addressing the social and community re-integration needs of burn survivors and their families by providing patient and family-centered social skills training. Key elements and goals of a social skills training program for burn survivors—Phoenix Beyond Surviving: Tools for Thriving—will be outlined as a model for practice. Methods through which family can be prepared as reintegration coaches and re-entry supporters of their burn-injured loved ones will also be described. Resources and strategies burn care professionals can implement as part of their daily practice and share with other team members to support the burn survivor and family members in their reintegration efforts will be provided.
As a result of attending this activity, the learner should be able to:

• Define the key elements/goals of social skills training and methods implemented to enhance burn survivors’ social skills post-burn.
• Define the roles that family members can assume to coach and support their loved one’s social reintegration efforts and methods through which family can be prepared for these activities.
• Introduce the topic of social skills training and coaching to burn survivors and family and participate in training and preparation activities as part of the burn team.
• Identify social skills training resources and tools available across the continuum of care (including those participants can apply in their daily practice) to assist burn survivors in their social reintegration.

2:00 pm–2:10 pm  Introduction - The Role of Social Skills Training in Social and Community Reintegration Post-burn
Karen L. Badger, PhD, MSW

2:10 pm–3:10 pm  Beyond Surviving: Social Skills Tools for Thriving after Burn Injury
Barbara Kammerer-Quayle, MA; Mona Krueger, MA, MSW; Rebekah Allely, OTR/L

3:10 pm–3:40 pm  Coaching the Coach: Family Members as Social Reintegration Support
Barbara Kammerer-Quayle, MA; Mona Krueger, MA, MSW

3:40 pm–3:50 pm  Application to Practice: Implementation Strategies and Resources
Jessica A. Irven, MS

3:50 pm–4:00 pm  Questions & Evaluations
Karen L. Badger, PhD, MSW; Pamela Peterson, BSN, RN

P L E N A R Y

TOP 5 ABSTRACTS PRESENTED | P-180

4:15 pm–5:30 pm | International Ballroom - L
Course Directors: Lucy A. Wibbenmeyer, MD; Linwood R. Haith Jr., MD

The correlative sessions run concurrently which encourages attendees to move around and listen to abstract presentations that are most important and relevant to them. Subsequently, attendees don’t have the opportunity to hear all of the presentations and may miss important topics. The top five abstracts, based on the scores of reviewers, will be presented at the Plenary to allow all attendees to hear the highest rated abstracts presented during the meeting.

As a result of attending this activity, the learner should be able to:

• Discuss the top five abstracts from the 50th Annual Meeting as designated by the Program Committee.

4:15 pm–4:30 pm  A Comparative Study of Autologous Skin Cell Suspension to Split-thickness Autografting in the Treatment of Acute Burns
William Hickerson, MD

4:30 pm–4:45 pm  Expert Outpatient Burn Care in the Home Through Mobile Health Technology
Heather Howard, RN, MSN

4:45 pm–5:00 pm  The Impact of Adverse Childhood Experiences (ACEs) on Burn Outcomes in Adult Burn Patients
Mikenzy Fassel, BS

5:00 pm–5:15 pm  Variation in National Readmission Patterns After Burn Injury
Sarah Eidelson, MD

5:15 pm–5:30 pm  Multi-regional Utilization of a Mobile Device App for Triage and Transfer of Burn Patients
Arek Wiktor, MD

CELEBRATE THE ABA’S 50TH ANNIVERSARY WITH WINE & CHEESE IN THE EXHIBIT HALL.

Collaborate with leading organizations in the burn field and companies that offer products and services that improve care and assist with support for burn injured patients and survivors.
Celebrating more than 50 years of burn care and two former ABA presidents

David Ahrenholz, MD  Lynn Solem, MD

Learn more at regionshospital.com/burn

Regions Hospital  Burn Center  ST. PAUL, MN

On behalf of the Board of Directors, staff, volunteers, burn survivors and Californians that we serve, the Alisa Ann Ruch Burn Foundation would like to congratulate the American Burn Association on its 50th Anniversary!
WHERE THERE’S SMOKE
THERE’S FIRE
AND FIRE MAKES BURNS
BUT WE FIGHT FIRE
WITH FIRE
EXPERTISE, RESEARCH
AND CARE

SO WHEN BURNS COME
TO US, THERE’S LIFE.

It takes determination to be the first
civilian burn center in the country. It takes
dedication to be part of our staff. And it
takes tenacity to be one of our patients. For
70 years, the research, innovation and injury
prevention at Evans-Hayes Burn Center,
located in Richmond, VA, has helped our
communities fight the effects of a burn.

Find out more at vcuhealth.org/burn
SUNRISE SYMPOSIA

6:30 am–7:45 am

S-201  Burn Prevention Education: Ethical Considerations
Moderators: Karla S. Klas, RN, BSN, CCRP, Jessica Summers, MD

S-202  Super Nutrition: Is there a Role for Immunomodulating Diets, Vitamins and Trace Minerals?
Moderators: Beth Shields, MS, RD, LD, CNSC, Stephen M. Clarke, MS, RD

S-203  Where are all the Nurses Going? Strategies to Retain the Work Force
Moderators: Ernest J. Grant, PhD, MSN, RN, Kelli Yukon, RN

S-204  Keeping Your Burn Unit in the Black
Moderators: Rajiv Sood, MD, Jeffrey Carter, MD

S-205  Burn Team Tetris: How to Fit the Pieces Together
Moderators: Philip H. Chang, MD, Amanda Fields, RN, Sean Hickey, MD

S-206  Difficult Dialogues: The Challenges of Caring for Burn Patients with a High BAUX Score
Moderators: Felicia N. Williams, MD, Lyn Dee Kealey, BA, MSW, LISW, Cara Lewis, LISW

S-207  Psychosocial Screening of Pediatric Burn Patients and their Families
Moderators: Carisa Perry-Parrish, PhD, Christina Duncan, PhD, Ellen O'Donnell, PhD

S-208  Strategies to Help Return Your Patient Back to Gainful Employment
Moderators: David J. Lorello, DPT, Melissa Litzinger, DPT

S-209  Reach for the Sky: How We Treat the Axillary Burn
Moderators: Beth A. Costa, OTR/L, Michael Feldman, MD

S-210  Achieving Superior Outcomes with Challenging Burns to the Face, Neck and Hands
Moderators: Debra A. Reilly Culver, MD, Katherine G. Siwy, OT

S-211  Should There be Level I and Level II Burn Centers?
Moderators: Sharmila S. Dissanaike, MD, David T. Harrington, MD

S-212  How Do We Deal with the Opioid Crisis and Still Provide our Patients with Adequate Pain Control?
Moderators: Rebecca Coffey, PhD, MSN, CNP, Claire V. Murphy, PharmD, BCPS, J. Kevin Bailey, MD

S-213  Burn Centers & Fire Fighters: Building Relationships
Moderators: Steven A. Kahn, MD, Annette Matherly, RN, CCRN, Thomas Flamm, FF
INTERNATIONAL ATTENDEE WELCOME BREAKFAST
7:00 am–7:45 am | Marquette - 3rd
All international attendees at the ABA Annual Meeting are invited to this informal breakfast session to get to know ABA leadership, connect with each other, and learn about ABA educational opportunities and initiatives.

YOGA
6:15 am–7:00 am | 4L
Enhance your learning experience by stretching and relieving stress. This relaxing yoga class is open to all attendees and will be enjoyable no matter your level. Take a few moments to set your intentions for the day and get the blood flowing. Namaste.

PLENARY
PREVENTION AND TREATMENT OF BURN SCARRING: THEN AND NOW | P-253
8:00 am–9:30 am | International Ballroom - L
Course Director: Basil A. Pruitt Jr., MD

The vast majority of severely injured burn patients will heal with some degree of scarring. Whether it is purely cosmetic or functionally significant, scarring can have long-term effects on the survivor. While initial scar modulation has long included pressure therapy and silicone products, exciting new research is exploring the results of cytokine manipulation and the effect of laser therapy on scar remodeling.

As a result of attending this activity, the learner should be able to:
- List the determinates of burn scarring.
- Describe how pressure and silicone modulate healing.
- Explain some common experimental scar models.
- Discuss cytokine manipulation of scars.

8:00 am–8:05 am Introduction
Basil A. Pruitt Jr., MD

8:05 am–8:20 am Pressure Therapy - Galveston History
David N. Herndon, MD

8:20 am–8:35 am Silicon Therapy - Sheets and Creams
David G. Greenhalgh, MD

8:35 am–8:50 am Cytokine Manipulation
Edward E. Tredget, MD, MSc

8:50 am–9:05 am Shine On: Laser Resurfacing and Remodeling of Hypertrophic Burn Scars
Charles S. Hultman, MD

C-254 CORRELATIVE VI - CRITICAL CARE: CLINICAL II
10:00 am–12:00 pm | Salon A-2 - LL
Moderators: Robert Cartotto, MD; Jody Rood, RN

40 Bacteriology and Causes of Recurrent Bacteremia in Combat Burn Casualties

41 Does Inhalation Injury have an Impact on the Blood Transfusion after Burn Injury in Children?

42 Significant Increase in Sepsis as a Cause of Death after Pediatric Burn Injury: A 3 Decade Autopsy Cohort

43 Utilization of a Burn Sepsis Algorithm: Should we Abandon the Consensus Criteria?

44 Burn Care in the Oldest Old: Can we do it Smarter?

106 Initial Experience with a New Bedside Electrospun Nanofibrous Dressing for Second Degree Burns

46 Vascular Smooth Muscle Dysfunction After Burn

47 Rising Mortality in Patients with Combined Trauma and Burn

C-255 CORRELATIVE VII – NUTRITION
10:00 am–12:00 pm | Salon A-3 - LL
Moderators: Christopher Lentz, MD; Katherine Wallace, MS, RD

48 Association Between Adipose and Skeletal Muscle Mitochondrial Respiratory Function in Children with Severe Burns

49 Cost Analysis and Benefit of Using an Institutional Modular Enteral Formula Product for Pediatric Burn Patients

50 Safety and Efficacy of Intraoperative Gastric Feeding During Burn Surgery

51 Oxandrolone and Propranolol Coadministration Reduce Skeletal Muscle Amino Acid Transporters Expression in Children with Burns

52 Combination of Oxandrolone and Propranolol Decreases Cardiac Work Compared to Propranolol Alone in Severely Burned Children

53 Increased Hypermetabolism with Extracorporeal Membrane Oxygenation in Burn Patients

54 What Percentage of Weight Loss is Associated with an Increased Risk of Complications?

55 Utilization of Z-Scores to Identify Malnutrition in the Pediatric Burn Abuse and Neglect Population

9:05 am–9:20 am Experimental Animal Scar Models
Nicole S. Gibran, MD

9:20 am–9:30 am Summary and Conclusions
Martin C. Robson, MD
C-256 CORRELATIVE VIII - PAIN AND ITCH / PSYCHOSOCIAL
10:00 am–12:00 pm | Salon A-4 - LL
Moderators: Elizabeth Dideon Hess, LCSW; Kate Pape, PharmD
56 Regional Anesthetic Blocks for Donor Site Pain in Burn Patients: A Meta-Analysis on Efficacy, Outcomes and Cost
57 Take Charge of Burn Pain: Development and Feasibility
58 Pediatric Post-Burn Pruritus
59 Identification of Cytochrome P450 Polymorphisms in Burn Patients and Impact on Fentanyl Pharmacokinetics
60 IL-6 Levels in the Acute Phase Following Injury Are Associated with the Development of PTSD Symptoms in Severely Burned Children
61 Measuring Social Integration using the LIBRE Profile: Reliability and Validity Assessments
62 Pain and PTSD Severity are Reciprocally Related in Burn Survivors at 6 months Post-Discharge
63 The Relation Between Satisfaction with Appearance and Ethnicity

C-257 CORRELATIVE IX - QUALITY II
10:00 am–12:00 pm | Salon A-1 - LL
Moderators: James H. Holmes IV, MD; Joan Weber, RN, BSN, CIC
64 The Future of Burn Surgery: Data from the 2016 Burn Physician Survey
65 Successful Implementation of a Perioperative Temperature Management Protocol
66 General Surgery Training in Burn Care-Needs Assessment in One ABA Region
67 Burn Patient Post-Discharge Telephone Follow Up
68 Intravenous Ketamine for Procedural Sedation in Non-ICU Patients: A Collaborative Burn MD/RN Pilot Protocol
69 Development and Evaluation of a 2-day Outreach Course to Meet Burn Educational Needs of Providers in Remote and Rural Areas
70 Changing the Way We Think About Burn Size Estimation
71 Challenges to the Standardization of Trauma Data Collection: A Call for Common Data Elements for Acute and Long-Term Trauma Databases

C-258 CORRELATIVE X–RECONSTRUCTION
10:00 am–12:00 pm | Salon A-5 - LL
Moderators: Derek Bell, MD; William Hickerson, MD
72 Dorsal Foot Contractures in Children- Effective and Safe Release with a VY Dorsalis Pedis Fasciocutaneous Flap
73 A 10 Year U.K. Experience of Dermal Scaffolds in the Management of Burns
74 Versatility of Dorsal Metacarpal Artery Flaps for Hand Burns
75 Does Topical Steroid after Fractional CO2 Laser Treatment of Scars Make a Clinical Difference?
76 Validation and Characterization of an Immediate, One-Stage Technique to Treat Full-Thickness Wounds in Swine
77 Initial Experience with Autologous Cell Suspension for Treatment of Partial Thickness Facial Burns
78 Optimization of ex-vivo Subnormothermic Oxygenated Machine Perfusion in Vascularized Composite Allograft on Rat to Prolong Preservation Duration
79 One Center’s Experience with the Use of Laser Treatments for Burn Scar

EDUCATIONAL FORUMS
FIRE FIGHTER II: CREATING THERAPEUTIC COMMUNITY REINTEGRATION PROGRAMS: A COLLABORATION BETWEEN CLINICIANS AND FIRE FIGHTERS | F-260
10:00 am–12:00 pm | Continental Ballroom A - L
Course Director: Phillip Tammaro, FF
Discharge from the burn center begins early in the patient’s continuum of care. Despite the education provided by the burn team, this can still be a frightening time for the patient and their family. Community reintegration programs have been increasing over the past several years and this session will share ideas on how to develop and implement these programs. As fire fighters and burn teams continue to enhance their professional relationship, this is an avenue that allows these teams to work collaboratively for the benefit of the burn patient. Team Brave is a collaboration between the Shriners Hospital for Children Boston and Boston Firefighters Burn Foundation.
As a result of attending this activity, the learner should be able:
• Describe the steps to designing and implementing a community reintegration program from a hospital setting.
• Describe how working with local fire fighter foundations can help the program obtain funding, volunteers, and problem solve other logistical barriers.
• Discuss various applications of this model to a number of different settings and age populations.

10:00 am–10:05 am  Introduction
   Phillip Tammaro, FF

10:05 am–10:35 am   Fundamentals & Theory behind Reintegration Program
   Lori Turgeon, PT, DPT

10:35 am–11:05 am   Program Implementation
   Patrick Connolly, FF

11:05 am–11:35 am  How the Program Works
   Stephen Turley, FF

11:35 am–12:00 pm  Questions & Answers

PREVENTION WORKSHOP: THE AMERICAN BURN ASSOCIATION'S 50 YEARS OF PREVENTION | F-261
10:00 am–12:00 pm | Continental Ballroom B - L
Course Directors: Rebecca A. Coffey, RN, MSN, CNP; Stephanie Campbell, BSN, RN, CCRN

The American Burn Association celebrates its milestone 50th anniversary in 2017, and this Workshop, presented by the Burn Prevention Committee, will cover the American Burn Association's contribution to burn prevention education over the past 50 years. This workshop will review published burn prevention research in the Journal of Burn Care and Research; presentations from past and present Burn Prevention Committee chairs on burn prevention initiatives throughout the years; burn prevention initiatives, successful and not so successful; and other ways that the American Burn Association has contributed and participated in burn prevention efforts within the past 50 years.

As a result of attending this activity, the learner should be able to:

• Explain the importance and impact of burn prevention education.
• Describe the evolution of the American Burn Association's role in support and advocacy of burn prevention education.

10:00 am–10:25 am   The ABA and Burn Prevention: Early History
   of the Burn Prevention Committee
   Patricia Mieszala, RN

10:25 am–11:00 am   Past Initiatives of the ABA Burn Prevention Committee
   Ernest J. Grant, PhD, MSN, RN; B. Daniel Dillard, BA; Karla Klas, BSN, RN, CCRP

11:00 am–11:20 am   Burn Prevention Today and Beyond
   Jennifer Radics-Johnson, MBA, CFRE

11:20 am–11:40 am   The Search for Evidence: 50 Years of Prevention
   Rebecca A. Coffey, MSN, PhD, CNP

11:40 am–12:00 pm  Panel Discussion

EDUCATIONAL FORUMS

OPERATION GOTHAM SHIELD: AN IN-DEPTH EXAMINATION OF THE CURRENT FRAMEWORK FOR RESPONSE TO BURN DISASTER: PART 2 | F-271
2:00 pm–4:00 pm | Continental Ballroom B - L
See description on page 23

BURN RECONSTRUCTION: PART 2 | F-272
2:00 pm–4:00 pm | Continental Ballroom A - L
See description on page 24

A SHARED 50TH ANNIVERSARY WITH THE ABA: ACUTE RESPIRATORY DISTRESS SYNDROME (ARDS) IN THE BURN PATIENT | F-273
2:00 pm–4:00 pm | Salon A-5 - LL
Course Directors: Kevin K. Chung, MD; Robert C. Cartotto, MD

It has been 50 years since the first published description of the Acute Respiratory Distress Syndrome (ARDS), and major advances in the management of patients with ARDS have occurred in the past two decades. However, almost without exception, the major clinical trials have either not included or specifically excluded burn patients. Consequently, many approaches to ARDS have been translated from the general ICU population to thermally-injured patients. We do not know if this is always suitable given the unique features of the burn patient. Hence there is a gap in our understanding of the most appropriate ARDS management strategies for burn patients.

As a result of attending this activity, the learner should be able to:

• Recognize current recommended strategies in the diagnosis and treatment of ARDS.
• Identify how these may need to be modified or adjusted in the thermally-injured patient with ARDS.

2:00 pm–2:10 pm  Introduction, Classification, Terminology, and Epidemiology
   Robert C. Cartotto, MD

2:10 pm–2:30 pm  Conventional Mechanical Ventilation: One Tidal Volume and Pressure Limit for All?
   Sharmila Dissanaike, MD

2:30 pm–2:45 pm  PEEP and Lung Recruitment: Opening the Lung in Burn ARDS
   Laura S. Johnson, MD

2:45 pm–3:00 pm  Fluid Management and Paralytic Agents: What’s Appropriate in the Burn Patient with ARDS?
   Nicole S. Gibran, MD

3:00 pm–3:15 pm  Unconventional Mechanical Ventilation: Beyond Conventional with HFPV and APRV
   Kevin K. Chung, MD
IS THE CLINICAL WORK ENVIRONMENT IN YOUR BURN CENTER AFFECTING PATIENT OUTCOMES? F-274

2:00 pm–4:00 pm | Salon A-1 - LL
Course Directors: Amanda P. Bettencourt, MSN, CNS, CCRN-K, ACCNS-P; Robert Sheridan, MD

Recent research suggests that the quality of the work environment affects patient outcomes, yet the focus in the burn community has not been on the unit work environment in patient outcomes research. The American Association of Critical Care Nurses recently published guidelines for healthy work environments that include appropriate clinical staffing, skilled communication, true collaboration, effective decision making, and authentic leadership as benchmark standards. The American Medical Association has also prioritized the work environment for physicians. The purpose of this session is to link together the burn clinical care environment with actionable interventions that may improve patient outcomes in the burn center.

As a result of attending this activity, the learner should be able to:

• Identify the characteristics of a healthy work environment and how to assess them.
• Implement evidence-based strategies to modify the burn care work environment.
• Integrate modifications to the work environment into quality improvement projects and outcome evaluations.

2:00 pm–2:05 pm  Welcome & Introduction
Amanda P. Bettencourt, MSN, CNS, CCRN-K, ACCNS-P; Robert Sheridan, MD

2:05 pm–2:35 pm  Healthy Workplaces
Amanda Bettencourt, MSN, CNS, CCRN-K, ACCNS-P

2:35 pm–2:55 pm  Clinician Burnout and Patient Outcomes
Robert L. Sheridan, MD

2:55 pm–3:25 pm  Case Studies: Adult
Leah M. Hanson, BSN, RN
Yuk Ming Liu, MD

2:55 pm–3:40 pm  Case Studies: Pediatric
Robert L. Sheridan, MD

3:25 pm–3:40 pm  Small Group Facilitated Sessions

3:40 pm–3:45 pm  Small Work Group Summaries

3:45 pm–3:55 pm  Wrap Up
Amanda Bettencourt, MSN, CNS, CCRN-K, ACCNS-P

3:55 pm–4:00 pm  Questions & Answers

WORKING WITH THE PSYCHIATRICALLY CHALLENGED BURN PATIENT | F-275

2:00 pm–4:00 pm | Salon A-3 - LL
Course Directors: Scott A. Cohen, MSW, LSW; Mikki J. Rothbauer, MSW, LICSW

Many burn patients come to the burn center with a variety of psychiatric conditions that affect their care and course of treatment. Often these conditions are contributory to the injury; at other times, they are exacerbated by it. Current practice is to ignore or merely medicate such conditions, while there are a number of brief, evidence-based behavioral interventions that can greatly enhance patient adherence and satisfaction. Some of these interventions include brief cognitive-behavioral therapy for anxiety and depression, motivational interviewing for addictions, and mindfulness.

As a result of attending this activity, the learner should be able to:

• Recognize common psychiatric conditions in burn patients (either pre- or post-injury).
• Define 3 ways that common conditions affect or are affected by burn care.
• Identify at least 2 strategies to encourage burn patient engagement with treatment.

2:00 pm–2:35 pm  Are We a Burn Center with Psychiatric Patients or a Psychiatry Unit with Burn Patients?
The Joys and Heartbreak of Working with Psychiatrically Challenged Burn Patients
Mikki J. Rothbauer, MSW, LICSW; Scott Cohen, MSW, LSW

2:35 pm–3:10 pm  Addressing Parental Distress and Guilt Following Pediatric Burn Injuries: Impact on Child Adjustment and Quality of Life
Carisa Perry-Parrish, PhD

3:10 pm–3:40 pm  Rationale and Approaches to Improve Coping: Applications to Wound Care Anxiety, Body Image Related Depression, and Post-Trauma Distress
James A. Fauerbach, PhD

3:40 pm–4:00 pm  Panel Discussion

THE RESEARCH CONTINUUM: FROM DATABASE AND BIG DATA TO QUALITY IMPROVEMENT PROJECTS | F-276

2:00 pm–4:00 pm | Salon A-2 - LL
Course Directors: Jeffrey W. Shupp, MD; Lauren Moffatt, PhD

It is often difficult to know when a project should be considered “research”. Questions often arise as to when institutional review board (IRB) approval is needed for a
project. The goal of this session will be to answer these and similar questions.

As a result of attending this activity, the learner should be able to:

• Determine whether their project should be classified as research.
• Define how to better utilize datasets to answer a research question.
• Explain the concept of Big Data.

2:00 pm–2:30 pm  What is Research? Considerations from a Regulatory Standpoint
Mary Beth Lawless, MSN, RN

2:30 pm–2:40 pm  Questions & Answers

2:40 pm–3:10 pm  Using Clinical and Quality Data Resources to Answer a Research Question
Waddah Al-Refaie, MD

3:10 pm–3:20 pm  Questions & Answers

3:20 pm–3:50 pm  Big Data: What is it? And Why am I Hearing so much About it?
Marti Jett, PhD, ST

3:50 pm–4:00 pm  Questions & Answers

THE YEAR IN REVIEW: THE TOP JOURNAL PUBLICATIONS | F-280
4:15 pm–5:30 pm | Continental Ballroom A-L
Course Director: Tina L. Palmieri, MD

A favorite session among attendees. Editors from each of the top publications in burn care present and discuss major advances in published burn research throughout the past year. Journals represented include: Journal of Burn Care & Research; Wound Repair and Regeneration; Journal of Trauma and Acute Care Surgery; and Burns.

As a result of attending this activity, the learner should be able to:

• Describe new techniques in burn care (surgical/wound care/critical care).
• Identify what other countries are researching in burn care.

4:15 pm–4:20 pm  Introduction
Tina L. Palmieri, MD

4:20 pm–4:35 pm  Journal of Burn Care & Research
David N. Herndon, MD

4:35 pm–4:50 pm  Burns
Steven E. Wolf, MD

4:50 pm–5:05 pm  Journal of Trauma and Acute Care Surgery
Basil A. Pruitt Jr., MD

5:05 pm–5:20 pm  Wound Repair and Regeneration
David G. Greenhalgh, MD

5:20 pm–5:30 pm  Questions & Answers

OFF-SITE ACTIVITIES
Tickets Required
Tickets are required for off-site events due to limited bus seating. If you have a ticket, please arrive 15 minutes early. If you don’t have a ticket and are interested in attending, there will be a waitlist line and we will allow people on the bus at 4:15 if ticketed attendees haven’t arrived.

CHANGING PLACES | F-281
4:15 pm–6:00 pm | 8th Street Entrance–bus pick-up
Course Director: Jason Woods, FF

Over the past several years Changing Places has discussed the reality and inherent dangers that fire fighters face on a daily basis. This year please join us at the Chicago Fire Academy to obtain a better understanding of the training that professional fire fighters experience at the beginning of their careers. Participants will have the opportunity for hands on simulation during this session.

As a result of attending this activity, the learner should be able to:

• Demonstrate the physical requirements necessary for fire fighters.
• Identify variety of skills fire fighters are required to have.
• Experience a few of these skills that recruits are required to master.

BURN CENTER TOUR: LOYOLA UNIVERSITY MEDICAN CENTER | E-253
4:15 pm–6:00 pm | 8th Street Entrance–bus pick-up

Operating the largest burn center in Illinois and a regional leader in burn care, Loyola Medicine delivers clinically integrated care for the most complex cases. Loyola’s outstanding success rates and multidisciplinary approach are recognized by the American College of Surgeons and American Burn Association. Tour the facilities and meet the staff to see how they work to improve the lives of everyone affected by burn injury.

BURN CENTER TOUR: UNIVERSITY OF CHICAGO MEDICAL CENTER | E-254
4:15 pm–6:00 pm | 8th Street Entrance–bus pick-up

The University of Chicago Burn and Complex Wound Center is a specialized care program where patients who have sustained burn injuries and other severe wounds are treated by a unique, multidisciplinary team of experts. Located within the University of Chicago medical center, the Burn Center is accredited by the American College of Surgeons and the American Burn Association. Tour the facilities and meet the staff to see how they work to improve the lives of everyone affected by burn injury.
Congratulations to the 
American Burn Association 
50 years of dedication and service

“Because our job doesn’t end after the fire is out”

Thank you for your support

NEW YORK FIREFIGHTERS BURN CENTER FOUNDATION
ENGINE 66 / LADDER 61
21 ASCH LOOP
BRONX, NY 10475

(718) 379-1900

www.nyffburncenter.com
Congratulations

The Paul Silverstein Burn Center at INTEGRIS Baptist Medical Center in Oklahoma City opened in 1975. Over the past four decades, we have become one of the larger burn centers in the United States, serving a six-state area.

We congratulate the American Burn Association on their milestone 50th anniversary. We share a common mission – to not only save lives, but return patients to the highest possible quality of life.

Christopher Lentz, M.D., FACS, Medical Director
Paul Silverstein, M.D., FACS, Emeritus Medical Director
Kenna Wilson, RN, Administrative Director
Stacy Robberson, RN, Clinical Director

INTEGRIS
Paul Silverstein Burn Center
INTEGRIS Baptist Medical Center
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BURN PREVENTION NETWORK

Congratulations

THE AMERICAN BURN ASSOCIATION on
50 YEARS
Supporting CARE RESEARCH REHABILITATION TEACHING & Prevention!

For burn prevention outreach resources and services contact us at
burnprev@fast.net  610.969.3930
BURNPREVENTION.ORG
MOST POPULAR SYMPOSIA

6:30 am–7:45 am

S-301 The Pediatric Hand Burn: Getting it Right the First Time
Moderators: Robert L. Sheridan, MD, Miranda L. Yelvington, MS, OTR/L
Boulevard A - 2nd

S-302 Achieving Superior Outcomes with Challenging Burns to the Face, Neck and Hands
Moderators: Debra A. Reilly Culver, MD, Katherine G. Siwy, OT
Boulevard B - 2nd

S-303 How Do We Deal with the Opioid Crisis and Still Provide our Patients with Adequate Pain Control?
Moderators: Rebecca A. Coffey, RN, MSN, CNP, J. Kevin Bailey, MD, Claire Murphy, PharmD, BCPS
Boulevard C - 2nd

SPECIAL EVENT

UPDATE FROM AMERICAN BOARD OF SURGERY ON MAINTENANCE OF CERTIFICATION AND SPECIALTY PRACTICE DESIGNATION

6:30 am–7:15 am | Joliet Room - 3rd

Dr. Tina Palmieri will share information and gather feedback from surgeons certified by the ABS on the possibility of adding a specialty practice designation for burns.

PLENARY

THE AMERICAN BURN ASSOCIATION: 50 YEARS OF PROGRESS AND BEYOND - P-353

8:00 am–9:30 am | International Ballroom - L
Course Directors: Linwood R. Haith Jr., MD; William G. Cioffi Jr., MD

From its fledging beginnings in 1967 the American Burn Association has grown over the past 50 years from 13 professionals to encompass over 2,000 members united in “Improving the lives of everyone affected by burn injury.” The last half a century has witnessed unprecedented survival and recovery of survivors. Responsible for this progress are advances in the fields of burn critical and surgical care, development of quality metrics for burn centers and their teams and the growth of both basic and clinical research spearheaded by the ABA. The Society will continue to leverage these advances as it looks toward continued growth in the care of burn patients everywhere.

As a result of attending this activity, the learner should be able to:

- Discuss the history of the ABA.
- List the sentinel developments in burn critical and surgical care over the past 50 years.
- Explain the importance of quality to burn care and the involvement of the ABA in its development.
- Discuss key research advancements and the ABA’s role in moving them forward.
- Discuss the mission of the ABA as we enter the next half century of burn care.

8:00 am–8:05 am Introduction
Linwood R. Haith Jr., MD

8:05 am–8:15 am The History of the American Burn Association
Palmer Q. Bessey, MD, MS

8:15 am–8:30 am Medical Advances in Burn Care over the Last 50 Years and the Role of Prominent American Burn Association Members
David N. Hemdon, MD
8:30 am–8:45 am Quality Improvements in Burn Care Under the Auspices of the American Burn Association
Nicole S. Gibran, MD

8:45 am–9:00 am Expansion of Research in the American Burn Association
Tina L. Palmieri, MD

9:00 am–9:15 am The Future of the American Burn Association
Steven E. Wolf, MD

9:15 am–9:30 am Questions & Answers

CORRELATIVES

C-354 CORRELATIVE XI - CRITICAL CARE: CLINICAL III
10:00 am–12:00 pm | Salon A-2 - LL
Moderators: Leopoldo Cancio, MD; Steven Kahn, MD

80 Admission Creatinine is Associated with Poor Outcomes in Burn Patients

81 Augmented Creatinine Clearance in Severely Injured Burn Patients

82 Retrospective Analysis of the Utilization of a Multidisciplinary Algorithm for Mobilization of the Vented Burn Patient

83 Implementation of a Remote Frostbite Protocol in the Use of Thrombolytics with Improved Salvage Rates

84 Validation of the Emergency General Surgery Frailty Index in Patients with Burn Injuries

85 Elderly Respond Differently than Adults to the Initial Burn Injury, but are Treated the Same

86 Predictors for Identifying Burn Sepsis and Performance versus Existing Criteria

87 Etanercept Is Safe and Efficacious for Treating Stevens-Johnson Syndrome and Toxic Epidermal Necrolysis

C-355 CORRELATIVE XII - PUBLIC HEALTH/ EPIDEMIOLOGY/PREVENTION II
10:00 am–12:00 pm | Salon A-3 - LL
Moderators: David Hemdon, MD; Victor Joe, MD

88 Comparing Quality of Life in Burn Survivors with and without Surgery: A Review of PROMIS-10 Survey Findings

89 Burns in Children with Myelomeningocele are Different: A Case Control Study

90 Trends in ED Discharge of Pediatric Minor Burns - a Review of CA's Office of Statewide Health Planning & Development (OSHPD)

91 Mortality Difference in Skin Sloughing Disorders Compared to Burns in a Tertiary Care Burn Center

92 Does Poverty Affect Outcomes in Middle Aged Burn Patients?

93 The Impact of Skin Allograft on Inpatient Outcomes for Major Burns 20-50%: a Propensity Score Matched Analysis Using NIS

94 The Impact of Hurricanes on Mechanisms of Burn Injury

95 A Review of After Action Reports Conducted Between the Eastern Regional Burn Disaster Consortium and Northeast Region Burn Centers

C-356 CORRELATIVE XIII–REHABILITATION
10:00 am–12:00 pm | Salon A-5 - LL
Moderators: Lisa Forbes, MSc, OT; Vincent Gabriel, MD

96 Burn Injury may have Age-dependent Effects on Strength and Aerobic Exercise Capacity in Boys Compared to Men

97 Role of Early Splinting, Positioning, and Edema Control of Burn Effected Joints in the Prevention of Burn Scar Contracture

98 Physical Rehabilitation Goals for Critically Ill Burn Patients

99 Distinguishing Causes of Maximal Exercise Limitation in Severely Burned Children

100 Donor Sites Appropriately Contribute to Whole-body Thermoregulation During an Exercise-induced Hyperthermic Challenge

101 Increasing Ambulation Through Real-Time Feedback in Burn Patients

102 Use of Isokinetic Dynamometry to Assess Muscle Function in Burned Patients is Reliable and Practical for Progressive Resistance Exercise Prescription

103 Randomized Controlled Trial of the Immediate and Long-term Effect of Massage on Adult Postburn Scar

C-357 CORRELATIVE XIV - WOUNDS: CLINICAL
10:00 am–12:00 pm | Salon A-1 - LL
Moderators: Amy Van Cleave, RN; Anthony Papp, MD, PhD

104 Bromelain-based Selective Enzymatic Debridement Reduces Surgery by 48% in Deep Dermal Burns Defined by Laser Doppler Imaging

105 Microangiography as a Potential Alternative Tool for Assessing Severe Frostbite Injury - a Comparison of Imaging Modalities

107 The Pioneering Work of Dr. Zora Janzekovic

108 Incorporation of 3D Stereophotogrammetry as a Valid, Reliable Method for Assessing Scar Volume in Standard Clinical Practice

#ABA50th | 39
Demonstration of the Safety and Effectiveness of Autologous Skin Cell Suspension Combined with Meshed Skin Grafts for the Reduction of Donor Area in the Treatment of Acute Burns

Bromelain-based Enzymatic Debridement of Large Burns

The Donor Site Dilemma: Hypertrophic Scarring of Split Thickness Autograft Donor Sites in Pediatric Burns

Quantification of Brown-Like Adipose Changes in Adult Burn Patients

Effect of Intravenous Fluid Resuscitation Volumes on the Adrenal Response in Burn Injury in Swine

Insulin and Exercise Combination Therapy Recovers Muscle Function in a Burn and Disuse Rat Model by Activating Protein Synthesis and Inhibiting Proteolysis

Fish Skin Grafts Support Ingrowth and Colonization of Adipose Derived Stem Cells in Vitro

Measurement of Circulating Neutrophil Extracellular Traps (NETs) After Burn Injury

Minimal Scarring after Grafting a Novel Autologous Self-assembly Skin Substitute on Burn Patients

Omega-3 rich Fish Skin Grafts in the Treatment of Full Thickness Burns: A Comparative Trial of Fish Skin and Cadaver Skin in a Porcine Model

Toll-Like Receptor-4 Agonist Monophosphoryl Lipid A Attenuates Severity of Acute Lung Injury and Hemodynamic Changes in an Ovine Model of Cutaneous Burn and Pneumonia Sepsis

C-358 CORRELATIVE XV - CRITICAL CARE: TRANSLATION SCIENCE

10:00 am–12:00 pm | Salon A-4 - LL
Moderators: Jeffrey Shupp, MD; Edward Tredget, MD, MSc

Quantification of Brown-Like Adipose Changes in Adult Burn Patients

Effect of Intravenous Fluid Resuscitation Volumes on the Adrenal Response in Burn Injury in Swine

Insulin and Exercise Combination Therapy Recovers Muscle Function in a Burn and Disuse Rat Model by Activating Protein Synthesis and Inhibiting Proteolysis

Fish Skin Grafts Support Ingrowth and Colonization of Adipose Derived Stem Cells in Vitro

Measurement of Circulating Neutrophil Extracellular Traps (NETs) After Burn Injury

Minimal Scarring after Grafting a Novel Autologous Self-assembly Skin Substitute on Burn Patients

Omega-3 rich Fish Skin Grafts in the Treatment of Full Thickness Burns: A Comparative Trial of Fish Skin and Cadaver Skin in a Porcine Model

Toll-Like Receptor-4 Agonist Monophosphoryl Lipid A Attenuates Severity of Acute Lung Injury and Hemodynamic Changes in an Ovine Model of Cutaneous Burn and Pneumonia Sepsis

BEAST IN CATEGORY POSTERS | F-360
10:00 am–12:00 pm | Stevens Salon A Foyer - LL
Course Directors: Lucy A. Wibbenmeyer, MD; Jason Woods, FF; Lauren Moffatt, PhD

There is excellent research being done by many members in the burn community and due to limited space and time, some are presented in a poster format. All of the posters are grouped by category and viewed during the poster rounds. Moderators select the best in each category. During this session the top poster in each category will be presented in a more formal setting.

As a result of attending this activity, the learner should be able to:

- Discuss the results of current scientific research.
- Identify opportunities to improve care of the burn patient.

LUNCH SYMPOSIA
12:30 pm–1:45 pm

S-365 Successful International Outreach: Do's and Don'ts
Moderators: Gennadiy Fuzaylov, MD, James J. Gallagher, MD, Dhaval Bhavsar, MD

Boulevard A - 2nd

S-366 Burn Prevention: Funding Opportunities
Moderators: Daniel Dillard, BA, Curtis L. Ryun, BSN, RN

Boulevard B - 2nd

S-367 Establishing, Collaborating and Publishing a Burn Center Disaster Plan
Moderators: Kathe Conlon, BSN, RN, MSHS, Andrea L. Valenta, RN, MSN

Boulevard C - 2nd

S-368 Tissue Engineering: Techniques to Successfully Cover the Large TBSA Burn
Moderators: Taryn Travis, MD, Tam M. Pham, MD

Continental B - L

S-369 Nuts & Bolts of Verification
Moderators: Nicole Gibran, MD, Ingrid S. Parry, MS, PT, Gretchen J. Carrougher, RN, MN

Continental C - L
Selective photothermolysis has now entered the world of burn reconstruction and has great potential to improve the function and quality of life for burn survivors by remodeling their scar tissue. Medical lasers present a unique modality for treatment that has been available for only the last two to three decades. We have now reached a point where early adopters are presenting their research and outcome data supporting the use of lasers. However, many burn centers are challenged by the processes that are inherent with establishing a laser program and as technology is information, it exists only to the degree that people can put it into practice (Eveland, 1986). It is not enough to present outcome data, we must provide training in the fundamentals of this technology along with guidance on how to create a laser program in an academic setting.

As a result of attending this activity, the learner should be able to:

- Explain the biophysics pertinent to the application of lasers & light-based energy devices. Identify the working parts of a laser and light-based device.
- Evidence a familiarity with various lasers and light-based devices so that they can seek out what is available or require purchase for their centers. Evidence a sound understanding of laser safety both in the clinic and operating room setting.
- Understand the interaction of lasers and light-based devices on human tissue & how to measure outcomes from treatment. Define the process and potential of laser assisted drug based delivery to burn scars.
- Identify best practice for multimodal anesthesia when utilizing lasers in an outpatient setting.
- Explain the regulations and credentialing aspects related to the use of medical lasers. Create templates for patient education/discharge instructions, clinical documentation and operative/procedure notes. Solicit support from insurers/third party payers.

As health care and burn research continue to evolve, practitioners are faced with new ethical issues to address. This includes issues surrounding informed consent when a patient becomes a subject, and conflict of interest that arises in clinical trials; modern perspectives on animal research ethics, and the ethics of publication—attribute, bias in publication, issues over industry sponsorship and participation, and handling negative results. This session will consider these and other ethical issues and present ethical principles that can be followed when faced with an ethical dilemma.

As a result of attending this activity, the learner should be able to:

- Explain how different ethical principles should be used to guide the conduct of animal research.
- Define ways to minimize conflict of interest when a burn clinician is also involved in a clinical trial and their patient is a potential subject.
- Relate important ethical principles to follow when reporting results of research in the literature.

The Life Impact Burn Recovery Evaluation (LIBRE) Profile is a new Computer Adaptive Test (CAT) to assess community participation in burn survivors. This course demonstrates the CAT and allows attendees to learn how to use the CAT in their clinical work. The developers of this open access patient-reported outcome measure will be available to answer questions on how to use the instrument for quality improvement in their practice.
As a result of attending this activity, the learner should be able to:

- Describe how to access and use the LIBRE Profile.
- Apply the LIBRE Profile for research or performance improvement purposes.

12:30 pm–12:35 pm  Introduction
   Colleen M. Ryan, MD
12:35 pm–12:45 pm   Measuring Burn Outcomes: The NIDILRR Burn Model Systems
   Jeffrey C. Schneider, MD
12:45 pm–1:00 pm   Development of a New Metric for Community Participation: The NIDILRR-funded LIBRE Profile
   Lewis E. Kazis, ScD
1:00 pm–1:15 pm   Utility of the LIBRE Profile: Survivor Perspective
   Amy R. Acton, RN, BSN
1:15 pm–1:35 pm    Using the LIBRE Profile: Demonstration
   Mary D. Slavin, PT, PhD
1:35 pm–1:45 pm  Questions & Answers

EDUCATIONAL FORUMS

MAC FORUM: FIREFIGHTER BURN INJURIES AND THE ROLE OF THE BURN TEAM | F-371

2:00 pm–4:00 pm | Salon A-3 - LL
Course Director: Jason Woods, FF

Any burn injury can put the fire fighter at risk for his career. Understanding the fire fighter’s inherent risk for burn injury and the measures invoked to promote their safety will provide burn care professionals insight for the need of the burn injured fire fighter to be cared for by the burn team. Building this relationship can have positive benefits for both professions.

As a result of attending this activity, the learner should be able to:

- Describe the special risk to the fire fighter.
- Identify the need for the fire fighter to be seen and evaluated by a burn physician.
- Discuss the turnout gear, what it is and what it does for the fire fighter.

2:00 pm–2:05 pm  Introduction
   Jason Woods, FF
2:05 pm–2:25 pm   Firefighter Risk and Injury
   Jason Woods, FF
2:25 pm–2:55 pm   PPE 101
   Patricia Freeman

2:55 pm–3:25 pm  Unique Challenges for Returning to Work
   Tina L. Palmieri, MD
3:25 pm–3:50 pm   Story of Survival
   Charles Shyab, FF
3:50 pm–4:00 pm  Questions & Answers

CONTROVERSIES IN MODERN BURN CARE: THE PRO CON DEBATE | F-372

2:00 pm–4:00 pm | Salon A-5 - LL
Course Directors: Christopher W. Lentz, MD; Robert C. Cartotto, MD

There are frequently choices in modern burn care between accepted therapies and modalities that have not been verified by prospective randomized studies. The gap is that burn team members may not fully understand the rationale behind the choice of one treatment approach over another. This course will highlight four controversial areas in care in the domains of burn surgery, burn critical care, burn nursing and burn rehab. Experts will defend their stance on a particular care plan or strategy, in order to educate participants on the rationale and evidence behind adopting a particular strategy. Computerized audience polling will be used to identify audience participant biases before each debate and then the audience will be re-polling after each debate to see if the data presented might affect changes in practice.

As a result of attending this activity, the learner should be able to:

- Describe several controversies of clinical burn care.
- Apply gained knowledge of current practices to burn care.

2:00 pm–2:05 pm  Introduction
   Robert C. Cartotto, MD
2:05 pm–2:30 pm   The Transfusion Trigger for a Burn Patient Should be a Hemoglobin of 7gm/dL
   PRO: Tina L. Palmieri, MD
   CON: David T. Harrington, MD
2:30 pm–3:00 pm   Artificial Dermal Templates Reduce Post Burn Scarring and Improve Outcome
   PRO: Victor C. Joe, MD
   CON: Robert C. Cartotto, MD
3:00 pm–3:30 pm   Silicone Gel Sheetings Reduce Post-Burn Hypertrophic Scar Formation
   PRO: Bernadette Nedelec, PhD, BSc, OT
   CON: J. Kevin Bailey, MD
3:30 pm–4:00 pm  Negative Pressure Wound Therapy Should be Used as the Postoperative Dressing Following Burn Debridement and Grafting
   PRO: Christopher W. Lentz, MD
   CON: Amalia Cochran, MD
MANAGING BLAST AND CRUSH INJURIES | F-373
2:00 pm–4:00 pm | Salon A-1 - LL
Course Directors: Jeremy W. Cannon, MD; Robert L. Sheridan, MD

Terrorist incidents commonly involve blast and crush trauma caused by explosive devices. These injuries will be sent to burn units. Staff should be familiar with their unique physiology and management requirements. As these injuries are not common in civilian practice, directed education is useful.

As a result of attending this activity, the learner should be able to:

• List the physiologic changes and time course of the four components of blast injury.
• Recognize at least three common errors made when managing blast and crush injury.

2:00 pm–2:15 pm   Intro and Basics of Blast and Crush Injury Physiology
Robert L. Sheridan, MD

2:15 pm–2:30 pm  Case 1
Booker King Jr., MD

2:30 pm–2:45 pm   Case 2
Jeremy W. Cannon, MD

2:45 pm–3:00 pm   Case 3
Leopoldo C. Cancio, MD

3:00 pm–3:15 pm   Case 4
Booker King Jr., MD

3:15 pm–3:30 pm   Case 5
Jeremy W. Cannon, MD

3:30 pm–3:45 pm   Case 6
Leopoldo C. Cancio, MD

3:45 pm–4:00 pm  Questions & Answers

As a result of attending this activity, the learner should be able to:

• Identify the knowledge gap.
• Identify clinical problems related to the elderly burn patient.
• Translate novel therapeutic insights into this patient population.

2:00 pm–2:05 pm   Welcome and Introduction: Elderly Burn Care
Marc G. Jeschke, MD, PhD

2:05 pm–2:20 pm   Frailty Indices, Prediction of Outcomes
Kathleen S. Romanowski, MD

2:20 pm–2:35 pm   Understanding Behavior Modifications to Prevent Burns in the Elderly: Futility in Burned Elderly?
Herbert A. Phelan III, MD

2:35 pm–2:50 pm   Acute Responses After Burn in the Elderly
Sarah Rehou

2:50 pm–3:05 pm   Nutrition and Wound Healing of the Elderly
John T. Schulz III, MD, PhD

3:05 pm–3:20 pm   Management of Pain, Agitation and Delirium
Alisa Savetamal, MD

3:20 pm–3:35 pm   Long-terms Outcomes of Elderly: Grief, Depression, PTSD
Arek Wiktor, MD

3:35 pm–3:50 pm   Basic and Translational Elderly Research
Elizabeth J. Kovacs, PhD

3:50 pm–4:00 pm  Discussion and Outlook

BURN CARE FOR ELDERLY PATIENTS | F-374
2:00 pm–4:00 pm | Salon A-2 - LL
Course Directors: Marc G. Jeschke, MD, PhD; Michael D. Peck, MD, ScD

Despite burn care provider recognition of poor outcomes of elderly patients, reasons for these problems are mostly unknown and at this time, there is no concerted effort to improve the outcome. This course will review the how elderly physiology affects all phases of burn care. In particular, the unique differences in this population as they relate to resuscitation, nutrition, rehabilitation and outcomes will be discussed.

As a result of attending this activity, the learner should be able to:

• Identify the knowledge gap.
• Identify clinical problems related to the elderly burn patient.
• Translate novel therapeutic insights into this patient population.

2:00 pm–2:05 pm   Welcome and Introduction: Elderly Burn Care
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Arek Wiktor, MD

3:35 pm–3:50 pm   Basic and Translational Elderly Research
Elizabeth J. Kovacs, PhD

3:50 pm–4:00 pm  Discussion and Outlook
The Firefighters Burn Institute congratulates the American Burn Association on 50 years of dedication to improving the lives of everyone affected by burn injury. We thank you for your continued leadership, commitment and partnership in working to achieve our common goals.

The Firefighters Burn Institute, helping victims become survivors!

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HARBORVIEW MEDICAL CENTER
UW Medicine
CROZER BURN CENTER: A NATIONALLY RECOGNIZED TEAM

Crozer-Keystone is proud that our Nathan Speare Regional Burn Treatment Center is the American Burn Association’s Burn Center of the Year, and that our medical director, Linwood Haith Jr., M.D., is the ABA’s new president. Representing the ABA domestically and internationally, Dr. Haith’s duties will include advocating burn-related issues in Washington, D.C. as well as promoting and supporting patient care, education, rehabilitation, prevention and burn-related research.

The Crozer Burn Center, located at Crozer-Chester Medical Center in Upland, is the only burn facility in suburban Philadelphia that provides comprehensive treatment for pediatric and adult burn patients and their families — from emergency and intensive care to rehabilitation, follow-up and outpatient services. Our team also treats road abrasions, frostbite and many other soft tissue diseases.

CROZERKEYSTONE.ORG/BURN
Every ABA Annual Meeting culminates in the Annual Banquet, the social event of the week. This year we will have a special celebration commemorating the 50th Annual Meeting of the ABA. This is a great opportunity to celebrate with your burn center colleagues and the new friends you’ve made.

The evening begins with a reception for networking, a buffet dinner and then dancing. It’s one of the most talked about events until the next time we meet. Attire is semi-formal.
POSTER SESSIONS

Stevens Salon C/D - Lower Level

POSTER SESSION I: ABSTRACTS # 200–375
Critical Care: Clinical I
Critical Care: Clinical II
Critical Care: Translational Science I
Critical Care: Translational Science II
Nursing/Nutrition I
Outpatient I
Pain & Delirium
Psychosocial I
Public Health/Epidemiology/Prevention I
Public Health/Epidemiology/Prevention II
Quality I
Quality II
Reconstruction
Reconstruction/Rehabilitation
Rehabilitation I
Wounds: Clinical I
Wounds: Clinical II
Wounds: Translational I

Poster Set-up (for Wednesday Rounds)
Tuesday, April 10 | 12:00 pm–2:00 pm

Poster Viewing Hours
Tuesday, April 10 | 3:00 pm–7:00 pm
Wednesday, April 11 | 9:30 am–2:00 pm

Rounds with Professors and Authors
Wednesday, April 11 | 12:30 pm–1:30 pm

Poster Dismantle
Wednesday, April 11 | 2:00 pm–3:00 pm

POSTER SESSION II: ABSTRACTS # 376–539
Critical Care: Clinical III
Critical Care: Clinical IV
Critical Care: Translational Science III
Nursing/Nutrition II
Outpatient II
Psychosocial II
Psychosocial III / Ethics I
Psychosocial/Pain, Delirium & Itch
Public Health/Epidemiology/Prevention III
Public Health / Epidemiology / Prevention IV
Quality III
Quality/Outpatient
Rehabilitation II
Wounds: Clinical III
Wounds: Clinical IV
Wounds: Translational II
Wounds: Translational III

Poster Set-up (for Thursday Rounds)
Wednesday, April 11 | 3:00 pm–5:00 pm

Poster Viewing Hours
Wednesday, April 11 | 4:00 pm–7:00 pm
Thursday, April 12 | 9:30 am–2:00 pm

Wine & Cheese Reception with Authors
Wednesday, April 11 | 5:00 pm–6:30 pm

Rounds with Professors and Authors
Thursday, April 12 | 12:30 pm–1:30 pm

Poster Dismantle
Thursday, April 12 | 2:00 pm–3:00 pm

BEST IN CATEGORY POSTERS

Stevens Salon A Foyer - Lower Level
Friday, April 13 | 10:00 am–12:00 pm

Course Directors: Lucy A. Wibbenmeyer, MD; Jason Woods, FF; Lauren Moffatt, PhD

Best in Category posters will be selected by the professors. All Posters with blue ribbons should be moved to Stevens Salon A Foyer for the Best in Category Session on Friday. Each presenter will provide a two minute overview of their poster and the top three will be selected by the Chairs of the Program, Research, and Membership Advisory Committees.
## POSTER SESSION I: ABSTRACTS # 200-375

### R-120 Critical Care: Clinical I

**Moderators:** Annemarie O’Connor, MSN, FNP-BC; Robin Lee, MD

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<th>No.</th>
<th>Title</th>
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<td>200</td>
<td>Spontaneous Breathing and Awakening Trials Plus a Multimodal Sedation/Agitation Protocol Decrease Vent Days and Benzodiazepine Use in the Burn ICU</td>
<td>Bolus and Continuous Infusion of Antibiotics Achieves Effective Therapeutic Levels of Antibiotics Better Than Traditional Dosing in Burn Patients</td>
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<td>Bolus and Continuous Infusion of Antibiotics Achieves Effective Therapeutic Levels of Antibiotics Better Than Traditional Dosing in Burn Patients</td>
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<td>Risk Factors and Outcomes of Renal Injury in Patients with a Major Burn: An Historical Cohort Study</td>
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<td>Vasopressor Use During Acute Fluid Resuscitation in Burn Patients</td>
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<td>Mechanical Ventilation of Burn Patients Who Do Not Have the Acute Respiratory Distress Syndrome (ARDS)</td>
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<td>Time from Burn Injury to Initial Excision and its Association with Surgical Blood Loss</td>
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<td>Clinical Significance of Ionized Magnesium in Critically Ill Burn Patients</td>
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<td>Implementation of Continuous Enteral Feeding and Shortened Fasting Periods in the Perioperative Burn Patient</td>
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<td>Attitudes Among Burn Surgeons and Palliative Care Physicians Regarding Goals of Care for Geriatric Burn Patients</td>
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### R-121 Critical Care: Clinical II

**Moderators:** Jennifer Rosenthal, RN; Larry Jones, MD

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<td>The Impact of Tracheostomy in Burns: An Institutional Experience</td>
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<td>Influence of Demographic and Clinical Variables on Vancomycin Trough Values in Pediatric Burn Patients</td>
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<td>High Fidelity Simulation and Burn Education</td>
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<td>Artificial Intelligence Predicts Sepsis After Burn Injury</td>
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<td>Effectiveness of ECMO for Burn-related Acute Lung Injury</td>
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<td>Does Clonidine have an Antipyretic Effect in Pediatric Burn Patients?</td>
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### R-122 Critical Care: Translational Science I

**Moderators:** David Greenhalgh, MD; Elizabeth Mann-Salinas, RN, PhD

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<td>A Long-term of Resistant Exercise Decreased Rat Muscle Function in Fast Twitch Myofiber Dominated Plantaris</td>
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<td>Specific Inhibition of IL-6 Trans-signaling Reduces Expansion of Peripheral Blood Granulocytic Gr-1+CD11b+ Cells after Burn Injury</td>
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<td>Evaluating Syndecan-1 as a Predictive Marker of Sepsis in Thermally Injured Patients</td>
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<td>Burn Injury Induced Functional and Morphological Alterations in Skeletal Mitochondria in a Metabolically Characterized Animal Model</td>
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<td>Pharmacological Ameioration of Perturbed Mitophagy Response (Mitophagy Resistance) in Burns</td>
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<td>Changes in the Composition of the Cardiac Inflammasome Following Thermal Injury as Related to Inflammation</td>
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<td>228</td>
<td>Anti-Inflammatory Effects of Novel Oridonin Analog CYD0693 in Rat Cardiomyocytes via Inhibition of NF-κB Signaling Pathway</td>
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**R-123 Critical Care: Translational Science II**
Moderators: Susan Smith, ARNP, PhD(c); Taryn Travis, MD

229 Enteral Fluid Resuscitation Alters Splenic Function and Leukocyte Populations Post-Burn in Swine
230 NLRP3 Inflamasome May Mediate Adverse Outcomes in Burned Elderly
231 Decrease of Mitochondrial Fusion Protein MFN1 and Associated Myogenin Inhibition in Response to Severe Burn
232 Toxic Compounds in Burn Patients with Smoke Inhalation Injury
233 Metformin Increases Mitochondrial Coupling and Enhances Antioxidant Activity in the Kidneys of Aged Mice Following Thermal Trauma
234 Molecular and Structural Changes in Intervertebral Discs Following Severe Burn in Rats
235 Measures of Systemic Innate Immune Function Predict the Risk of Nosocomial Infection in Pediatric Burn Patients
236 Alterations in Clock Gene Expression after Burn and Trauma
237 Burn Injury in Aged Mice Skews the Gut Microbiome and Correlates with a Change in Intestinal Antimicrobial Peptide Production
238 Therapeutic Hypothermia Attenuates the Hyperinflammatory Response After Burns

**R-124 Nursing/Nutrition I**
Moderators: Maggie Dylewski, PhD, RD; Alexandra Wubbels, RN, BSN

239 Making Mock Code Training Burn Specific
240 A Pilot Study on the Effects of Massage Therapy During the Workday to Combat Burn Nurse Burnout
241 Using Nursing Education to Improve the Care of Critically Ill Burn Patients
242 Growing the Next Generation of Exceptional Nurses: Utilization of a Formal Preceptor Council
243 Keeping Abreast of Burn Care Knowledge: A Multi-Center Online Nursing Burn Journal Club Approach
244 Enteral Feeding During Prone Positioning: A Case Review
245 Enteral Nutrition and Aspiration Events in Patients Placed Prone for Burn Surgery: An Academic Institutional Review
246 Benefits of Exercise in Burned Children with Insulin Resistance
247 Comparison of Major Burn Metabolic Cart Interpretations for a Pediatric and an Adult Patient
248 Dedicated Physical Therapy Rehab Gym on an Acute Care Inpatient Burn Unit

**R-125 Outpatient I**
Moderators: Karen Allard, MSN, APRN BC; Damien Carter, MD

249 Evaluation of a Novel Model for Outpatient Paediatric Burn Care: A 3-year Review of Outcomes from the Burn Treatment Room
250 Majority of Adult Patients with Lower Extremity Burns can be Safely Managed in Outpatient Setting
251 One Burn Center’s Efforts to Reduce No Show Rates and Facilitate Access to Outpatient Care
252 Beyond Scarring: Long-term Physical Outcomes Following Burns
253 Physician- and Patient-reported Outcomes Following Use of a Compounded Scar/Burn Gel: Results from a Prospective Observational Survey Study
254 Implementation of Patient Reported Outcomes in a Burn Outpatient Clinic
255 Post Acute Care of the Burn Survivor: Educating Providers on the Varied Needs of Burn Survivors after Discharge from the Burn Center
256 Sedation and Analgesia for Adult Outpatient Dressing Change: A Survey of American Burn Association (ABA) Burn Centers
Poster Sessions

Clinician and Parent Perceptions on a System for Real-Time Feedback of PatientReported Outcomes in Children with Burn Injuries
Comparing Post-hospitalization Global Health Scale Assessments in Male and Female Adult Burn Patients for Quality of Life

R-126 Pain & Delirium
Moderators: Gerarda Bozinko, MSN, RN, CCRN; Giavonni Lewis, MD
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Application of Genetic Testing in the Pediatric Burn Population
Pain Interference and Intensity in Persons with Burn Injury At Discharge and One Year Post-Injury
Coke with a “K”: Oral Administration of Injectable Ketamine During Burn Wound Dressing Changes
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Burn-Injured Youth Reveal the Most Difficult Challenges They Face as Survivors
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Outcomes in Geriatric Burn Patients
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**Moderators:** Michael Feldman, MD; Leigh Ann Price, MD

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**Moderators:** Roselle Crombie, MD, MPH; Michael Serghiou, OTR, MBA

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**R-134 Rehabilitation I**  
**Moderators:** Lynne Benavides, OTR/L, CHT; Jeffrey Schneider, MD

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AMERICAN BURN ASSOCIATION

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Northeast Region Burn Conference Planning Organization
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Alisa Savetamal, Vice President
Kathleen Hollowed, Treasurer
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Assisting the Northeast Region in Burn Education and Collaboration
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for burn survivors

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IAFF General Secretary-Treasurer

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Congratulations to the

American Burn Association at 50

Working together to help everyone affected by Burn Injury

1976 - 2018

William Randolph Hearst Burn Center
Weill Cornell Medicine/ NewYork-Presbyterian Hospital
New York
weillcornell.org/burn-center

Shriners Hospitals for Children
Where Hope and Healing Meet, Compassion and Expertise Come Together, and Lives are Changed.

Shriners Hospitals for Children® is changing lives every day through innovative pediatric specialty care, world-class research and outstanding medical education. Our health care system offers advanced care for children with orthopaedic conditions, burns, spinal cord injuries, and cleft lip and palate.

Congratulations to the American Burn Association on 50 years of dedicated collaboration with those of us who provide treatment, care and hope to the children we serve.

Shriners Hospitals for Children® shrinershospitalsforchildren.org
SAVING LIVES

SUPPORTING BURN SURVIVORS EVERY STEP OF THE WAY

“A lot of times I feel alone, but coming to Phoenix World Burn Congress shows me I’m not, and I feel like I have learned some things for even when I am at home.” - BRAEGAN

The Newton Kids: Gage, Braegan, and Kade.

VISIT ALLOSOURCE AT AMERICAN BURN ASSOCIATION - BOOTH 811 - TO HEAR HOW WE SUPPORT BURN SURVIVORS.

allosource.org
KILLS SUPER BUGS

Pathogenic Bacteria:
- Acinetobacter baumannii
- Carbapenem Resistant E. coli (CRE)
- Clostridium difficile (including spores)
- Escherichia coli
- Methicillin Resistant Staphylococcus aureus (MRSA)
- Proteus mirabilis
- Pseudomonas aeruginosa
- Serratia marcescens
- Staphylococcus aureus
- Vancomycin Resistant Enterococcus faecalis (VRE)

Pathogenic Fungi:
- Aspergillus niger
- Candida albicans

Pathogenic Virus:
- HIV

Anasept® Antimicrobial Skin & Wound Care Cleanser, Gel and Wound Irrigation Solution
- FDA-Cleared, broad-spectrum antimicrobial
- Unique, patented formula
- Safe, non-cytotoxic and tissue compatible
- Clinically tested*
- 2-year shelf life
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