

SASKSONO18 Schedule March 3, 2018		
0830	Registration & Continental Breakfast	
0900	Resuscitative Ultrasound - Dr. Tom Jelic Participants will be able to: <ul style="list-style-type: none"> • Describe the indications for resuscitative ultrasound. • Describe and interpret the main views/windows associated with focused TTE. • Analyze the emerging evidence for peri and intra-arrest TEE. • Understand main views for TEE in shock and cardiac arrest state. 	
0930	Critical Care Ultrasound - Dr. Joann Kawchuk Participants will be able to: <ul style="list-style-type: none"> • Describe the indications for CCUS. • Describe and interpret the main views/windows associated with CCUS. • Become familiar with increasing evidence for novel applications in CCUS. 	
1000	Refreshment Break	
	1015 - Concurrent "FUNdamentals" Track	1015 – Concurrent "Cutting Edge" Track
	FUNdamentals Track - Dr. Zafrina Poonja • Participants will be able to: Participate in a hands on resuscitative ultrasound workshop • Develop an approach to the basic components of resuscitation ultrasound: <ul style="list-style-type: none"> - Generation of PSL, PSS, A4C, and sub-xiphoid cardiac views - Generation and identification of IVC - Generation of basic lung views • Identification of cardiac abnormalities including pericardial effusion, RV dilation, hyperdynamic/hypodynamic LV function • Identification of pneumothorax, pleural effusions, consolidation • Ability to asses of IVC variability and size	<div> Intra-operative Echo Workshop - Dr. Michelle Clunie Participants will be able to: <ul style="list-style-type: none"> • Describe perioperative TEE current use and indications including rescue TEE in hemodynamically unstable patients. • Discuss perioperative TEE training, safety and pitfalls. • Describe a basic perioperative and rescue TEE image acquisition sequence. • Hands on TEE transducer opportunity to practice simulated TEE image acquisition. • Apply the above principles in simulated rescue TEE cases. </div> <div> Resuscitative Ultrasound Workshop - Dr. Paul Olszynski & Dr. Brady Murphy Participants will be able to: <ul style="list-style-type: none"> • Apply principles of resuscitative ultrasound through simulation cases. • Identify some of the logistical challenges associated with resuscitative ultrasound. • Develop strategies to incorporate resuscitative ultrasound into resuscitation choreography. </div>
1200	Lunch	

1230 – Concurrent “Cutting Edge” Track	1300 – Concurrent “FUNDamentals” Track
<p>IP Resuscitation SKanapalouza - Dr. Paul Olszynski</p> <p>Supervised scanning workshop</p> <p>Participants will be able to:</p> <ul style="list-style-type: none"> • Practice the basic components of resuscitation ultrasound: <ul style="list-style-type: none"> - Generation of PSL, PSS, A4C, and sub-xiphoid cardiac views - Generation and identification of IVC - Generation of basic lung views • Identify relevant cardiac abnormalities including pericardial effusion, RV dilation, hyperdynamic/hypodynamic LV function. • Identify pneumothorax, pleural effusions, consolidation. • Assess IVC variability and size. • Understand how to use ultrasound to assist in the treatment shock, chest pain, and shortness of breath. 	<p>Lightning Oral Abstracts and SONOGAMES - USUS and Dr. Quinten Paterson</p> <p>Participants will be able to:</p> <ul style="list-style-type: none"> • Describe the state of clinical ultrasound education and training opportunities at the University of Saskatchewan as illustrated by the student teams’ participation and demonstrated expertise. • Explain basic and advanced applications through participation in an innovative and interactive forum (image interpretation and clinical integration). • Demonstrate a greater appreciation for the clinical applicability of clinical ultrasonography.
1530	<p>“Lights, Camera, Action!” - SASKSONO18 Planning Committee</p> <p>Participants will be able to:</p> <ul style="list-style-type: none"> • Identify the challenges to integrating ultrasound into resuscitation. • Identify possible solutions for the timely integration of ultrasound into resuscitation.