

Monday, July 28, 2008

12:00 noon

Blue Bird Auditorium, NB-137, Neurosensory Center

Neurocritical care: past, present, and future

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Objectives: At the end of this presentation, participants should be able to:

- Understand the evolution of Neurocritical Care as a subspecialty of Critical Care Medicine
- Review the key concepts and elements of Neurocritical Care
- Learn about the current and future developments of neurocritical care research

References:

1. Smith M. Neurocritical care; has it come of age? *B J Anaesthesia* 2004;93:753-5
2. Rincon F, Mayer SA. Neurocritical care: a distinct discipline? *Curr Opin Crit Care* 2007;13:115-121
3. Mayer SA, Coplin WM, Chang C, **Suarez J**, et al. Program requirements for fellowship training in neurological intensive care: United Council for Neurologic Subspecialties guidelines. *Neurocritical Care* 2006;5:166-171
4. Mayer SA, Coplin WM, Chang C, **Suarez J**, et al. Core curriculum and competencies for advanced training in neurological intensive care: United Council for Neurologic Subspecialties guidelines. *Neurocritical Care* 2006;5:159-165
5. Pronovost PJ, Angus DC, Dorman T, et al. Physician staffing patterns and clinical outcomes in critically ill patients: a systematic review. *JAMA* 2002;288:2151-2162
6. Diringner MN, Edwards DF. Admission to a neurologic/neurosurgical intensive care unit is associated with reduced mortality rate after intracerebral hemorrhage. *Crit Care Med* 2001;29:635-640
7. Mirski MA, Chang CWJ, Cowan R. Impact of a neuroscience intensive care unit on neurosurgical patient outcomes and cost of care. Evidence-based support for an intensivist-directed specialty ICU model of care. *J Neurosurg Anesth* 2001;13:83-92
8. **Suarez JI**, Zaidat OO, Suri MF, et al. Length of stay and mortality in neurocritically ill patients: impact of a specialized neurocritical care team. *Crit Care Med* 2004;32:2311-7
9. Varelas PN, Conti MM, Spanaki MV, et al. The impact of a neurointensivist-led team on a semi-closed neurosciences intensive care unit. *Crit Care Med* 2004;32:2191-2198
10. **Suarez JI**. Outcome in neurocritical care: advances in monitoring and treatment and effect of a specialized neurocritical care team. *Crit Care Med* 2006;34:S232-8
11. Varelas PN, Eastwood D, Yun HJ, et al. Impact of a neurointensivist on outcomes in patients with head trauma treated in a neurosciences intensive care unit. *J Neurosurg* 2006;104:713-9
12. Varelas PN, Schultz L, Conti M, et al. The impact of a neuro-intensivist on patients with stroke admitted to a neurosciences intensive care unit. *Neurocrit Care* 2008; Jan 15 (Epub ahead of print)
13. **Bershad EM**, Feen ES, Hernandez OH, Suri MF, **Suarez JI**. Impact of a specialized neurointensive care team on outcome of critically ill acute ischemic stroke patients. *Neurocritical Care* 2008 Jan 15 (Epub ahead of print)
14. Varelas PN, Spanaki MV, Hacein-Bey L. Documentation in medical records improves after a neurointensivist's appointment. *Neurocrit Care* 2005;3:234-6
15. Helms AK, Torbey MT, Hacein-Ben C, et al. Standardized protocols increase organ and tissue donation rates in the neurocritical care unit. *Neurology* 2004;63:1955-7
16. Ling G, Ecklund J. Neuro-critical care in modern war. *J Trauma* 2007;62:S102

Target Audience, Needs, Educational Methods, Activity Evaluation:

Physicians, residents, fellows, and other healthcare professionals need to be updated about new advances in the clinical and research areas for the diagnosis, treatment, and management of patients with neurological disorders. Educational methods will include lectures, case presentations, audio/video presentations, and questions & answer sessions. Participants will be asked to complete an activity evaluation.

Accreditation/Credit Designation

Baylor College of Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. Physicians should only claim credit commensurate with the extent of their participation in the activity.