American Society for Metabolic and Bariatric Surgery

25th Annual Meeting

June 15-20, 2008
Gaylord National on the Potomac
The American Society for Metabolic and Bariatric Surgery gratefully acknowledges the supporters of the 25th Annual Meeting

PLATINUM LEVEL

ALLERGAN

ETHICON ENDO-SURGERY, INC.
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Dear Friends and Colleagues,

It has been said that vision without action is a daydream; action without vision is a nightmare. This year marks the 25th anniversary of the ASMBS. For some, this is a dream and a vision fulfilled; for others, it is a work in progress. To most of us, the ASMBS has come to represent the single, largest, most respected resource for education, collaboration and patient advocacy for the surgical treatment of obesity and metabolic conditions.

I want to extend a personal invitation to each of you to attend our annual conference in Washington, DC at the brand new Gaylord National Resort and Convention Center on the Potomac. This year we are featuring three full days of courses targeting surgeons, allied health professionals and nurses with emphasis on endoscopic and restrictive applications. In addition, there will be 2 ½ days devoted to new research.

I am pleased to announce our keynote speakers: Arya M. Sharma, MD, FRCP and George Blackburn, MD, PhD. Professor Sharma from McMaster University will be giving the Basic Science Lecture on the subject of “Current Research on Appetite Control”. Professor Blackburn will be giving the Mason Lecture on the topic of “Evidence Based Recommendations for Best Practices in Weight Loss Surgery”.

We have reserved the evening of June 17th for a very special event – a Walk on the Capitol sponsored by the ASMBS Foundation and Obesity Action Coalition in order to improve awareness of the disease of obesity and its effects on the citizens of this nation. Now is the time to demonstrate our resolve: to educate the lawmakers and the public on behalf of our patients and everyone affected by this disease.

I urge all of you to share in a dream started over 25 years ago and to participate in its vision. See you in Washington, DC.

Best Regards,

Kelvin D. Higa, MD
President, American Society for Metabolic and Bariatric Surgery

**QUICK REFERENCE**

**LOCATION**
Gaylord National on the Potomac
National Harbor, Maryland

**SOCIAL EVENTS**
Tuesday, June 17, 2008
Welcome Reception
5:00 pm – 6:00 pm

Tuesday, June 17, 2008
Foundation Event
Walk on the Capitol
6:30 pm – 8:30 pm

Thursday, June 19, 2008
Dinner Dance
7:00 pm – Midnight

**EDUCATION & EXHIBITIONS**
June 15 – 17
Courses/Sessions

June 15 – 16
Industry-Sponsored Workshops

June 17 – 19
Technical Exhibitions

June 18 – 20
Plenary Sessions including
ASMBS/TOS Primary
Clinician’s Track
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## ADDITIONAL INFORMATION

Ph: 352.331.4900  |  Fx: 352.331.4975  
email: info@asmbs.org  |  www.asmbs2008.org
ASMBS  |  100 SW 75 Street, Suite 201  |  Gainesville, FL 32607 USA
PRESIDENT
Kelvin D. Higa, MD
President, American Society for
Metabolic and Bariatric Surgery
Fresno, CA USA

PRESIDENT-ELECT
Scott Shikora, MD
Boston, MA USA

COUNCIL-AT-LARGE
Christine Ren-Fielding, MD
New York, NY

SECRETARY/TREASURER
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Little Rock, AR USA

COUNCIL-AT-LARGE
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Scottsdale, AZ USA

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Richmond, VA USA

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Eric DeMaria, MD
Durham, NC USA

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Portland, OR USA

COUNCIL-AT-LARGE
Titus Duncan, MD
Atlanta, GA USA

ALLIED HEALTH CHAIR
Bobbie Lou Price, RN
Greenville, NC USA

COUNCIL-AT-LARGE
James Kane, Jr., MD
Arlington Heights, IL USA

ALLIED HEALTH CHAIR-ELECT
William Gourash, MSN, CRNP
Pittsburgh, PA USA
PLENARY SESSION

CHAIR – Nicolas Christou, MD, PhD
Montreal, Quebec, Canada

Chair-Elect:
Marc Bessler, MD
New York, NY USA

Past Chair:
Eric DeMaria, MD
Durham, NC USA

Jeff Allen, MD
Louisville, KY USA

T. Karl Byrne, MD
Charleston, SC USA

John Dixon, MD
Melbourne, Australia

Michel Gagner, MD
Miami Beach, FL USA

David Greenbaum, MD
Willingboro, NJ USA

Giselle Hamad, MD
Pittsburgh, PA USA

William Inabnet, MD
New York, NY USA

Daniel Jones, MD
Boston, MA USA

Shanu Kothari, MD
LaCrosse, WI USA

Marina Kurian, MD
New York, NY USA

John Morton, MD
Stanford, CA USA

Michel Murr, MD
Tampa, FL USA

Jaime Ponce, MD
Dalton, GA USA

Aurora Pryor, MD
Durham, NC USA

David Provost, MD
Dallas, TX USA

William Richards, MD
Nashville, TN USA

Scott Shikora, MD
Boston, MA USA

C. Daniel Smith, MD
Jacksonville, FL USA

Clark Warden, MD
Covington, LA USA

ALLIED HEALTH MAIN SESSION

CHAIR – Karen Schulz, RN, MSN, CBN
Rocky River, OH, USA

Chair-Elect:
Teresa Leath, RN, CBN
Birmingham, AL USA

Ronald Evans, PhD
Richmond, VA USA

Karen Flanders, NP, CBN
Concord, MA USA

Kellie Friedman, PhD
Durham, NC USA

Jennifer Gianos, RN, CBN
Tamarac, FL USA

Jill Meador, RN, BSN, CBN
Richmond, VA USA

Janelle Morissette, RN, MSN
Federal Way, WA USA

Bobbie Lou Price, RN, BSN, CBN
Greenville, NC USA

Maureen Quigley, ARNP
Lebanon, NH USA

Stephen Ritz, PhD
Decatur, GA USA

www.asmbs.org
## SATURDAY, JUNE 14

<table>
<thead>
<tr>
<th>Event</th>
<th>Time</th>
<th>Location</th>
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<tr>
<td>Attendee Registration</td>
<td>4:00 pm – 7:00 pm</td>
<td>Convention Center Foyer</td>
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<tr>
<td>Speaker Preparation Room</td>
<td>4:00 pm – 7:00 pm</td>
<td>Chesapeake 1</td>
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## SUNDAY, JUNE 15

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<tr>
<td>Continental Breakfast</td>
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<td>Convention Center Foyer</td>
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<tr>
<td>Attendee Registration</td>
<td>7:00 am – 5:00 pm</td>
<td>Convention Center Foyer</td>
</tr>
<tr>
<td>Speaker Preparation Room</td>
<td>7:00 am – 5:00 pm</td>
<td>Chesapeake 2</td>
</tr>
<tr>
<td>CBN Examination Review</td>
<td>8:00 am – 4:30 pm</td>
<td>Maryland B</td>
</tr>
<tr>
<td><strong>Allied Health Essentials in Surgical Support</strong></td>
<td>8:00 am – 4:30 pm</td>
<td>National Harbor 3</td>
</tr>
<tr>
<td><strong>OR Personnel, PACU &amp; Any Bariatric Healthcare Provider — Awareness Is Key: “You Never Know What Can Come Through Your ER”</strong></td>
<td>8:00 am – 4:45 pm</td>
<td>National Harbor 10</td>
</tr>
<tr>
<td><strong>Centers of Excellence in Bariatric Surgery: Guidelines for Achieving Approval</strong></td>
<td>8:00 am – 5:00 pm</td>
<td>Maryland A</td>
</tr>
<tr>
<td>Refreshment Break</td>
<td>9:30 am – 10:30 am</td>
<td>Convention Center Foyer</td>
</tr>
<tr>
<td>Lunch</td>
<td>12:00 pm – 1:30 pm</td>
<td>Cherry Blossom Ballroom</td>
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<tr>
<td><strong>Practical Tips for Mundane Issues</strong></td>
<td>1:30 pm – 5:00 pm</td>
<td>Maryland D</td>
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<tr>
<td>Refreshment Break</td>
<td>2:30 pm – 3:00 pm</td>
<td>Convention Center Foyer</td>
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<tr>
<td><strong>Industry-Sponsored Workshops:</strong></td>
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<tr>
<td>– Healthwise Technologies/LivRite</td>
<td>7:00 PM</td>
<td>National Harbor 3</td>
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<tr>
<td>– Covidien</td>
<td>7:00 PM</td>
<td>Potomac D</td>
</tr>
<tr>
<td>– EnteroMedics</td>
<td>7:00 PM</td>
<td>Potomac D</td>
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## MONDAY, JUNE 16

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<td>7:00 am – 5:00 pm</td>
<td>Convention Center Foyer</td>
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<tr>
<td>Speaker Preparation Room</td>
<td>7:00 am – 5:00 pm</td>
<td>Chesapeake 2</td>
</tr>
<tr>
<td><strong>ASMBS/SAGES Masters Postgraduate Course: Flexible Endoscopy &amp; Endoluminal Surgery (Didactic Session)</strong></td>
<td>7:50 am – 12:00 pm</td>
<td>Potomac D</td>
</tr>
<tr>
<td><strong>Masters Course in Behavioral Health</strong></td>
<td>8:00 am – 5:00 pm</td>
<td>Maryland D</td>
</tr>
<tr>
<td><strong>Essentials in Bariatric Surgery</strong></td>
<td>8:00 am – 5:00 pm</td>
<td>National Harbor 5</td>
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<td><strong>Allied Health Postgraduate Courses:</strong></td>
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<tr>
<td>– Advanced Practice <em>(repeated in afternoon)</em></td>
<td>9:00 am – 12:00 pm</td>
<td>Maryland A</td>
</tr>
<tr>
<td>– Laparoscopic Adjustable Banding <em>(repeated in afternoon)</em></td>
<td>9:00 am – 12:00 pm</td>
<td>Maryland B</td>
</tr>
<tr>
<td>– Nutrition &amp; Bariatric Surgery <em>(repeated in afternoon)</em></td>
<td>8:00 am – 12:00 pm</td>
<td>Maryland C</td>
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<tr>
<td>Refreshment Break</td>
<td>9:45 am – 10:30 am</td>
<td>Convention Center Foyer</td>
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<tr>
<td>Lunch</td>
<td>12:00 pm – 1:30 pm</td>
<td>Potomac A</td>
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<td><strong>Allied Health Postgraduate Courses:</strong></td>
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<tr>
<td>– Advanced Practice <em>(repeat of morning session)</em></td>
<td>1:00 pm – 4:00 pm</td>
<td>Maryland A</td>
</tr>
<tr>
<td>– Laparoscopic Adjustable Banding <em>(repeat of morning session)</em></td>
<td>1:00 pm – 4:00 pm</td>
<td>Maryland B</td>
</tr>
<tr>
<td>– Nutrition &amp; Bariatric Surgery <em>(repeat of morning session)</em></td>
<td>1:00 pm – 5:00 pm</td>
<td>Maryland C</td>
</tr>
<tr>
<td><strong>Laboratory A (continuation of ASMBS/SAGES Masters Postgraduate Course)</strong></td>
<td>1:10 pm – 2:40 pm</td>
<td>Potomac 4</td>
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<tr>
<td><strong>Laboratory B (continuation of ASMBS/SAGES Masters Postgraduate Course)</strong></td>
<td>3:10 pm – 4:40 pm</td>
<td>Potomac 4</td>
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<tr>
<td>Refreshment Break</td>
<td>3:00 pm – 3:30 pm</td>
<td>Convention Center Foyer</td>
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# COURSE AND EXHIBIT SCHEDULE

## Monday, June 16

**Industry-Sponsored Workshops:**
- Ethicon 7:00 pm National Harbor 3
- Sanofi-Aventis 7:00 pm National Harbor 10
- Allergan 7:00 pm Potomac C
- Pearson 7:00 pm Potomac D

## Tuesday, June 17

- Continental Breakfast sponsored by New Direction by Robard 7:00 am – 8:00 am Convention Center Foyer
- Attendee Registration 7:00 am – 5:00 pm Convention Center Foyer
- Speaker Preparation Room 7:00 am – 5:00 pm Chesapeake 2
- Press Room 7:00 am – 5:00 pm Chesapeake 3
- **Video-Based Techniques of Primary Laparoscopic Bariatric Surgery** 8:00 am – 12:00 pm Potomac C
- **Advanced Bariatric Life Support** 8:00 am – 12:30 pm Potomac D
- **Gastric Restriction: Adjustable Laparoscopic Banding & Sleeve Gastrectomy** 8:00 am – 12:30 pm Maryland C
- **Allied Health Sciences Main Session** 8:00 am – 5:00 pm Potomac A
- **Exhibit Hall Open** 9:00 am – 4:00 pm Prince George’s Exhibit Hall
- **Refreshment Break in Exhibit Hall** 9:45 am – 10:30 am Convention Center Foyer
- **Lunch served in Exhibit Hall** 12:00 pm – 2:00 pm Prince George’s Exhibit Hall
- **Students/Residents/Fellows Session** 1:00 pm – 4:40 pm Maryland B
- **Videos-Based Techniques of Laparoscopic Revisional Bariatric Surgery** 1:30 pm – 5:15 pm Potomac C
- **Allied Health Sciences Main Session Workshops:**
  - Mobility Patterns & Safe Transfer of the Bariatric Patient 2:00 pm – 2:45 pm & 2:50 pm – 3:35 pm National Harbor 2
  - Protein Supplements: The Truth & Misconceptions 2:00 pm – 2:45 pm & 2:50 pm – 3:35 pm National Harbor 3
  - Psyched-Up for Followup: Psychological Research-Based Strategies to Improve Followup Rates & Success with Bariatric Patients 2:00 pm – 2:45 pm & 2:50 pm – 3:35 pm Chesapeake 5
  - How To Build Successful Partnerships that Work for Patients and Grow Your Practice 2:00 pm – 2:45 pm & 2:50 pm – 3:35 pm National Harbor 5
  - Eating Disorders 101 2:00 pm – 2:45 pm & 2:50 pm – 3:35 pm National Harbor 10
  - The Multi-Disciplinary Approach to Bariatric Surgery 2:00 pm – 2:45 pm & 2:50 pm – 3:35 pm National Harbor 11
- **Refreshment Break served in Exhibit Hall** 3:00 pm – 4:00 pm Prince George’s Exhibit Hall
- **Allied Health Sciences Main Session Professional Networking Groups:**
  - Advanced Practice Nursing/Physician Assistant 4:00 pm – 5:00 pm National Harbor 2
  - Nursing 4:00 pm – 5:00 pm National Harbor 3
  - Exercise/Physical Fitness 4:00 pm – 5:00 pm Chesapeake 5
  - Practice Management 4:00 pm – 5:00 pm National Harbor 5
  - Nutrition 4:00 pm – 5:00 pm National Harbor 10
  - Behavioral Health 4:00 pm – 5:00 pm National Harbor 11
- **Welcome Reception** 5:00 pm – 6:00 pm Convention Center Foyer
- **ASMBS Foundation’s Walk on the Capitol** 6:30 pm – 8:30 pm Transportation Provided

*Continues next page*
| **Wednesday, June 18** |  |
|---|---|---|
| Continental Breakfast | 7:00 am – 8:00 am | Convention Center Foyer |
| Attendee Registration | 7:00 am – 5:00 pm | Convention Center Foyer |
| Speaker Preparation Room | 7:00 am – 5:00 pm | Chesapeake 2 |
| Press Room | 7:00 am – 5:00 pm | Chesapeake 3 |
| **Plenary Session** |  |
| – Oral Presentations | 8:00 am – 4:30 pm | Potomac A |
| – Video Presentations | 2:00 pm – 4:30 pm | National Harbor 3 |
| – Primary Clinician’s Tract | 2:00 pm – 4:30 pm | Potomac C |
| – Poster Session | 4:30 pm – 6:00 pm | Prince George’s Exhibit Hall |
| Exhibit Hall Open | 9:00 am – 4:00 pm | Prince George’s Exhibit Hall |
| Refreshment Break served in Exhibit Hall | 9:30 am – 10:00 am | Prince George’s Exhibit Hall |
| Lunch in Exhibit Hall | 12:00 pm – 2:00 pm | Prince George’s Exhibit Hall |
| Refreshment Break served in Poster Session | 4:30 pm – 6:00 pm | Prince George’s Exhibit Hall |

| **Thursday, June 19** |  |
|---|---|---|
| Continental Breakfast | 7:00 am – 8:00 am | Convention Center Foyer |
| Attendee Registration | 7:00 am – 5:00 pm | Convention Center Foyer |
| Speaker Preparation Room | 7:00 am – 5:00 pm | Chesapeake 2 |
| Press Room | 7:00 am – 5:00 pm | Chesapeake 3 |
| **Plenary Session** |  |
| – Oral Presentation | 8:00 am – 1:00 pm | Potomac A |
| – Primary Clinician’s Tract | 8:00 am – 10:10 am | Potomac C |
| Exhibit Hall Open | 9:30 am – 2:30 pm | Prince George’s Exhibit Hall |
| Refreshment Break served in Exhibit Hall | 10:10 am – 10:40 am | Prince George’s Exhibit Hall |
| Lunch served in Exhibit Hall | 12:00 pm – 2:00 pm | Prince George’s Exhibit Hall |
| Refreshment Break | 3:30 pm – 4:00 pm | Convention Center Foyer |
| **ASMBS Business Meeting** |  |
| Closing Gala Reception | 4:00 pm – 5:30 pm | Potomac C |
| Closing Gala Dinner & Dancing | 7:30 pm – 12:00 am | Potomac A |

<p>| <strong>Friday, June 20</strong> |  |
|---|---|---|
| Continental Breakfast | 7:00 am – 8:00 am | Convention Center Foyer |
| Attendee Registration | 7:00 am – 2:00 pm | Convention Center Foyer |
| Speaker Preparation Room | 7:00 am – 2:00 pm | Chesapeake 2 |
| Press Room | 7:00 am – 2:00 pm | Chesapeake 3 |
| <strong>Plenary Session</strong> |  |
| – Oral Presentations | 8:00 am – 1:15 pm | Potomac A |
| – Primary Clinician’s Tract | 10:30 am – 1:15 pm | Potomac C |
| Refreshment Break | 10:00 am – 10:30 am | Convention Center Foyer |</p>
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<tbody>
<tr>
<td>Item Writing Workshop</td>
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<tr>
<td>Allied Health Program Committee</td>
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<tr>
<td>Allied Health Membership Committee</td>
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<td>Allied Health Support Group Committee</td>
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<td>Allied Health RN Certification Committee</td>
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<tr>
<td>Allied Health PA/NP Preceptorship Ad-Hoc Committee</td>
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<td>Allied Health Clinical Issues Committee</td>
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<tr>
<td>Allied Health Continuing Education Committee</td>
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<td>SOARD Allied Health Editorial Board</td>
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<td>Allied Health Executive Committee</td>
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<tbody>
<tr>
<td>Finance Committee</td>
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<tr>
<td>Committee Chairs and Executive Council</td>
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<tr>
<td>Bariatric Training Committee</td>
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<tr>
<td>Research Committee</td>
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<td>Public Education Committee</td>
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<td>Leadership Breakfast</td>
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<td>Corporate Council Steering Committee</td>
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### WEDNESDAY, JUNE 18

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<tr>
<td>Emerging Technologies Committee</td>
<td>6:45 am – 7:45 am</td>
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<td>Insurance Committee</td>
<td>6:45 am – 7:45 am</td>
<td>Chesapeake 4</td>
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<tr>
<td>Professional Liability Education</td>
<td>6:45 am – 7:45 am</td>
<td>Chesapeake 5</td>
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<tr>
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<tr>
<td>State Chapters Committee</td>
<td>6:45 am – 7:45 am</td>
<td>Chesapeake 9</td>
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<tr>
<td>Membership Committee</td>
<td>6:45 am – 7:45 am</td>
<td>Chesapeake 6</td>
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<tr>
<td>Bariatric Medicine Committee</td>
<td>6:45 am – 7:45 am</td>
<td>Chesapeake 7</td>
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<tr>
<td>Communications Committee</td>
<td>6:45 am – 7:45 am</td>
<td>Chesapeake 8</td>
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<tr>
<td>Ethics Committee</td>
<td>12:00 pm – 1:00 pm</td>
<td>Chesapeake 5</td>
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<tr>
<td>Professional Conduct Committee</td>
<td>1:00 pm – 2:00 pm</td>
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<tr>
<td>Women Bariatric Surgeons</td>
<td>5:00 pm – 7:00 pm</td>
<td>Lower Atrium</td>
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<tr>
<td>State Chapter Meetings</td>
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<tr>
<td>– Canadian Surgeons</td>
<td>6:00 pm – 7:30 pm</td>
<td>Chesapeake 9</td>
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<tr>
<td>– Florida Surgeons</td>
<td>6:00 pm – 7:30 pm</td>
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<tr>
<td>– Pennsylvania Surgeons</td>
<td>6:00 pm – 7:30 pm</td>
<td>Chesapeake 8</td>
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<tr>
<td>– Ohio Surgeons</td>
<td>6:00 pm – 7:00 pm</td>
<td>Chesapeake C</td>
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<tr>
<td>– Texas State Chapter</td>
<td>5:00 pm – 6:00 pm</td>
<td>National Harbor 4</td>
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<tr>
<td>– Tennessee State Chapter</td>
<td>7:00 pm – 9:00 pm</td>
<td>Chesapeake 6</td>
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<tr>
<td>IFSO Board Meeting</td>
<td>6:00 pm – 7:30 pm</td>
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<tr>
<td>DS Meeting</td>
<td>7:00 pm – 10:00 pm</td>
<td>Chesapeake 8</td>
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### THURSDAY, JUNE 19

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<tr>
<td>ASMBS Foundation Board</td>
<td>6:45 am – 7:45 am</td>
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<tr>
<td>Program Committee</td>
<td>12:00 pm – 2:00 pm</td>
<td>Chesapeake 12</td>
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<tr>
<td>Mississippi State Chapter</td>
<td>5:30 pm – 7:00 pm</td>
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### FRIDAY, JUNE 20

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<th>Location</th>
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<tbody>
<tr>
<td>Pediatric Surgery Committee</td>
<td>6:45 am – 7:45 am</td>
<td>Chesapeake 7</td>
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<td>New York State Chapter</td>
<td>7:00 am – 8:00 am</td>
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<tr>
<td>Executive Council</td>
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INDUSTRY-SPONSORED WORKSHOPS

These seven workshops (three on Sunday and four on Monday) are not planned by the ASMBS and, therefore, are not accredited by the ASMBS. There is no charge for the Annual Meeting participants.

**Sunday, June 15**
7:00 pm – 10:00 pm

**Postoperative Aftercare Workshop**
*Presented by Healthwise Technologies*

The focus of this workshop is to present the findings of our postoperative study of bariatric patients along with our guidelines for a well-structured followup program that will facilitate long term weight loss.

Our survey of postoperative bariatric patients followed the success or failure of their weight loss from one to ten years after surgery. In following these patients, we became convinced that bariatric surgery alone frequently does not permanently solve weight loss issues. This is further reflected in some doctors’ reservations to recommend surgery, and the insurance industry’s reluctance to cover surgeries, even though weight loss is a serious contributor to morbidity. We found that most hospitals do not require, or even offer, adequate followup or aftercare programs. We feel Healthwise Technologies’ LivLite program is at the forefront of bariatric surgical care, and we are stepping in to fill this void.

The focus of our Aftercare Program is to teach the postoperative patient the tools they need in every day life to maintain the long-term success of bariatric treatment.

Our Aftercare Program offers:

- A uniform system tailored by leading experts in the field
- Support services including speakers, workshops, seminars and our “Make It a Life Style” cruises where patients learn to modify their behavior to attain long term goals
- An online resource that provides the patient with tracking tools, community centers and a complete line of support products tailored to the specific needs of the bariatric patient including: protein supplements, bariatric vitamins, pre-packaged meals, books, videos, and living aids
Sunday, June 15
7:00 pm – 10:00 pm

Emerging Technology Symposium: VBLOC™ Vagal Blocking Therapy
Physiologic Rationale, Laparoscopic Implantation and Summary of Early Results
Presented by EnteroMedics

This workshop will provide information regarding:
- Implications of Vagal Innervation in Digestive Function, Satiation and Satiety
- What Vagotomy Taught Us: Review of the Literature
- Nerve and Organ Response to Intermittent Vagal Blocking
- Energy Delivery: Blocking versus Stimulation Algorithms
- Summary of Early Results: Feasibility Clinical Data Review
- Patient Reported Indicators of Mechanism of Action
- Laparoscopic Implantation Procedure Video Highlights
- Where May VBLOC Therapy Fit? The Patient, Nursing and Surgeon Perspectives
- The Clinical and Regulatory Process for Emerging Technologies
- Q&A

Sunday, June 15
7:00 pm – 10:00 pm

What is the role of the Bariatric Coordinator and the Diabetic Educator in managing the Type II Diabetic? When is surgery an option?
Presented by Covidien

Learning objectives:
- Overview of established bariatric standards of care and comparing them with the standards of care for the diabetic educator
- Overview of current medical treatment options as well as surgical treatment options. What are the markers for treatment
- Overview of AADE’s defined seven self-care behaviors. How success for both obesity and diabetes is linked to active self management
- Review of the elements of a multidisciplinary approach to resolution of diabetes and obesity
Monday, June 16
7:00 pm – 10:00 pm

Economics and its Influence on the Evolution of Bariatric and Metabolic Surgery
Presented by Ethicon Endo-Surgery

Bariatric surgery today, with its various effective operative procedures, is not only a proven treatment for obesity, but is increasingly being viewed as a primary treatment for various metabolic diseases. The roadblocks in the path of the further development of this field are economic. This symposium will offer you an overview of the economics of health care and the way in which these economic factors play out to affect the field for patients and surgeons. What you learn will enable you to discuss and influence the evolution of bariatric/metabolic surgery with a variety of stakeholders into the primary general surgical specialty of the future.

Moderated by: Henry Buchwald, MD, PhD

Monday, June 16
7:00 pm – 10:00 pm

Thromboprophylaxis Following Bariatric Surgery: The Case for Universal Guidelines
Presented by Sanofi-Aventis

This workshop is designed for surgeons and healthcare providers involved in the clinical treatment of bariatric surgery patients. It is an interactive, case-based symposium with an emphasis on evidence-based medicine. Faculty will present current literature and guidelines and lead case discussions. Participants will analyze and discuss individual cases with experts in bariatric surgery and thrombosis.

Upon completion of this workshop, participants will be able to:
- Discuss VTE risk assessment for bariatric surgery patients
- Explain the latest guidelines, including the SCIP recommendations for VTE prophylaxis in bariatric surgery patients
- Discuss the potential risks and benefits of available prophylaxis options for VTE, including pharmacologic and mechanical means
- Identify barriers to implementation of VTE guidelines and ways to improve compliance

This educational activity is approved for a maximum of 2.5 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity. This activity is jointly sponsored by Quadrant Medical Education and the Annenberg Center for Health Sciences. Supported by an Independent Educational Grant from Sanofi-Aventis U.S.

For registration information please call Tracy O’Keefe at 973-206-8961.
Monday, June 16
7:00 pm – 10:00 pm

Myth vs. Reality: The Impact of Pre- and Post-Operative Surgical Followup Care on Durable Weight Loss and Comorbidity Resolution Among Severely Obese Patients
Presented by Allergan Medical

Point-Counterpoint Format
This CME workshop will provide a lively, interactive experience for the audience that will be both engaging and dynamic – it will set this program apart from traditional didactic presentations.

Expert faculty will present and debate the importance of several physiologic variables that may impact short- and long-term weight regulation and outcomes in the severely obese population. Among these variables are gut and adipocyte hormone regulation and their impact on satiety, postoperative protein status and its impact on body composition and patient nutritional status following surgery.

Agenda Highlights:
- Food for Thought – Debating the Impact of Bariatric Surgery on Satiety, Weight Regulation, Body Composition and Nutritional Status
- Panel Discussion and Q&A – Practical Considerations for Optimizing the Pre- and Post-Operative Care of the Bariatric Surgery Patient

CME credit is available. Dinner will be provided.
Monday, June 16
7:00 pm – 10:00 pm

**Psychological Assessment of the Bariatric Surgery Candidate & the New MBMD Bariatric Summary Report & Norms**

**Presented by Pearson**

**Program Overview**
This workshop focuses on the MBMD test and its usefulness in psychological evaluations of candidates for bariatric surgery. There will be particular focus on the MBMD test’s new Bariatric Summary report and norms – and the psychosocial insights it provides with regard to presurgical interventions, patient behavior, postsurgical outlook and care.

Whether you perform presurgical or behavioral health evaluations or are interested to learn about the process, this training will provide you valuable information. Those with little or no experience with the MBMD test, as well as those who have used the instrument can benefit from the information presented.

This workshop will provide information about:
- The MBMD test’s bariatric norm group and the specialized Bariatric Summary, designed specifically for the bariatric surgery candidate
- The test scales and features including measures of response patterns, negative health habits, psychiatric indicators and coping styles
- Recommendations for practical application of the MBMD test with bariatric surgery candidates – including a surgeon’s viewpoint on psychologically preparing a candidate
- Interpreting MBMD assessment results through a case study review format

**Program Objectives**
By attending this workshop, participants will be able to:
- Utilize the MBMD test scales, including psychiatric indicators, coping styles, stress moderators and treatment prognostics
- Utilize the new Bariatric Summary report which includes information to help determine a candidate’s suitability to surgery and prepare medical staff for patient’s likely response post-surgery
- Apply the Interpretive guidelines for the MBMD test in presurgical bariatric settings
- Describe the importance of candidate’s psychological preparation from a surgeon’s perspective

**Who Should Attend:**
Healthcare professionals who have an interest in the psychosocial aspects of medical treatment. All members of the bariatric surgical team will benefit, as will members of a multidisciplinary healthcare team: Psychologists, surgeons, physicians and nurses. Licensed healthcare professionals are qualified to administer the MBMD test.

**Presenters:**
Michael Antoni, PhD
Sunil Bhoyrul, MD, FRCS, FACS
Lisa Steres, PhD
GUEST SPEAKERS

PRESIDENTIAL ADDRESS
Kelvin D. Higa, MD
Advanced Laparoscopic Surgery Associates
Fresno, CA, USA
Thursday, June 19, 11:10 am – 12:00 pm

EDWARD E. MASON
FOUNDERS LECTURE
George L. Blackburn, MD, PhD
http://nutrition.med.harvard.edu/personnel/personnel_bio.html
Beth Israel Deaconess Medical Center
Boston, MA, USA
Wednesday, June 18, 11:15 am – 12:00 pm

BASIC SCIENCE LECTURE
Arya M. Sharma, MD/PhD, FRCPC
www.drsharma.ca/
University of Alberta
Edmonton, AB, Canada
Friday, June 20, 9:15 am – 10:00 am

ALLIED HEALTH SCIENCES MAIN SESSION
Georgeann N. Mallory, RD
Executive Director
American Society for Metabolic and Bariatric Surgery
Gainesville, FL, USA
Tuesday, June 17, 10:55 am – 11:30 am

PROGRAM CHAIRS

Plenary Session
Nicolas V. Christou, MD, PhD
McGill University
Montreal, QC, Canada

Education Programs
J. Kenneth Champion, MD
Videoscopic Institute of Atlanta
Marietta, GA, USA

Allied Health Sciences Main Session
Karen Schulz, RN, MSN, CBN
St. Vincent Charity Hospital
Cleveland, OH, USA

Allied Health Education Programs
Jill Meador, RN, BSN, CBN
Medical College of Virginia
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Cornell Weight Loss Surgery Program
Alfons Pomp, MD Cornell
New York, NY USA

Allied Health Postgraduate Course: Advanced Practice
Karen Flanders, NP-C
Emerson Hospital
Concord, MA USA

Allied Health Postgraduate Course: Laparoscopic Adjustable Banding
Teresa Leath, RN, CBN
University of Alabama at Birmingham
Birmingham, AL USA

Allied Health Postgraduate Course: Nutrition and Bariatric Surgery
Jeanne Blankenship, MS, RD, CLE
University of CA at Davis
Sacramento, CA USA

Allied Health Essentials in Surgical Support
Laura Boyer, RN, CBN
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Covington, LA USA

Tracy Martinez, RN, BSN, CBN
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Gastric Restriction
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Masters Course in Behavioral Health
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Practical Tips for Mundane Issues
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Video Techniques: Laparoscopic Revisional
Ninh Nguyen, MD
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Gastrectomy
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Masters Course in Behavioral Health
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Video Techniques: Primary Laparoscopic
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</table>
Alan Wittgrove, MD  
Wittgrove Bariatric Center  
La Jolla, CA USA  
Pages 44, 45, 46, 61

Stephen Wohlgemuth, MD  
Sentara Bariatrics  
Norfolk, VA USA  
Page 50

Debra M. Wolf, PhDc, MSN, BSN, RN  
UPMC St. Margaret  
Pittsburgh, PA USA  
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Gavitt Woodard, BA  
Stanford University  
Stanford, CA USA  
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Daniel Wool, MD  
Stanford University  
Stanford, CA USA  
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Hosein Yasrebi, MD,  
Memorial Hospital  
Jacksonville, FL USA  
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Zobair M. Younossi, MD  
Inova Health System  
Annandale, VA USA  
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Gail Melendres Wynn, MD  
St. Francis Hospital  
Newark, DE USA  
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Xiang Yuan, MD  
VA Commonwealth Univ  
Richmond, VA USA  
Page 63

Kerstyn Zalesin, MD  
William Beaumont Hospital  
Royal Oak, MI USA  
Pages 50, 79

John G. Zografakis, MD  
Summa Health System  
Akron, OH US  
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ASMBS DISCLOSURE STATEMENT (AS REPORTED BY 5-1-08)

It is the policy of the American Society for Metabolic and Bariatric Surgery that speakers at a CME Category 1 event must disclose any financial or other relationship with: (1) any manufacturer(s) of commercial product(s) that may be discussed in the speaker’s presentation and/or (2) commercial supporters of the event. The intent of this policy is to disclose to the activity audience any significant financial interest or other relationship, including the nature of the relationship that could bias the speaker. If the ASMBS determines that a conflict of interest exists, the ASMBS will seek a resolution which may include changes in topic, discussion and/or faculty.

Following is the list of disclosure information submitted to ASMBS including presenters and those in control of content for the 25th Annual Meeting of the American Society for Metabolic and Bariatric Surgery. (See disclosure codes page 31)
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<td>C. Daniel Smith, MD</td>
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<td>Sherman Smith, MD - 1dg, 2dg</td>
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<td>Harvey Sugerman, MD - 8ai</td>
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<td>Samuel Sultan, BA</td>
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<td>David S Tichanksy, MD</td>
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<td>Chris Thompson, MD</td>
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**American Society for Metabolic and Bariatric Surgery 25th Annual Meeting Faculty Disclosure Codes**

**Commercial Interest:**

1. Autosuture/Tyco/Covidien/US Surgical
2. Ethicon Endo-Surgery
3. Bariatric Partners
4. Inamed/Allergan
5. Karl Storz Endoscopy
6. Novus Robard
7. Robard
8. Surgical Review Corp
9. Synovis
10. USGI
11. Metacure Ltd.
12. Glaxosmith Kline
13. Olympus Surgical
14. Wyeth Pharmaceuticals
15. W. L. Gore & Associates
16. National Association for Weight Loss Surgery
17. Intuitive Surgical
18. Stryker
19. NIDDK
20. Medtronic
21. CR Bard
22. Cyberonics
23. GI Dynamics
24. Allergan Canada
25. Applied Medical
26. Davol/Bard
27. Novapost Systems
28. Medical Innovation Developpement
29. Ellipse Technologies
30. AstraZeneca and TAP
31. Sanofi-Aventis
32. Bard
33. Enteromedics/Bard
34. Surgiquest
35. Endogastric Solutions
36. RemedyMD
37. CryoLife
38. Gregory Dakin
39. Hill Rom
40. BariMD
41. Boston Scientific
42. Power Medical
43. Bariatric Advantage
44. American College of Surgeons
45. Barosense
46. TNCO
47. DNO
48. Johnson & Johnson
49. Fulfillum
50. Iasis Health Care
51. Bentec Medical
52. General Nutrition Company
53. Cleveland Clinic
54. Contemporary Forums
55. cookbiotech

**Received**

a. Salary
b. Royalty
c. Consulting Fee
d. Honoraria
e. Ownership Interest
f. Grant
g. Teaching
h. Research
i. Employment
j. Other
k. Advisory Committee
CBN EXAMINATION REVIEW COURSE

SUNDAY, JUNE 15, 2008
8:00 am – 4:30 pm

Course Director:
Christine Bauer, MSN, RN, CBN

*Up to 7.5 CEU credits are available.*

Course Overview and Target Audience:

This review course is designed for licensed Registered Nurses (RN’s) in the United States, the District of Columbia and Puerto Rico, who have been involved in the nursing care of morbidly obese and bariatric surgery patients for a minimum of two years and are preparing to take the Certification Exam.

Course Objectives:

Upon completion of this activity, participants should be able to:
- Explain morbid obesity and the history of weight loss surgery
- Review clinical management for four weight loss surgery procedures
- Explain team collaboration, program administration and outreach related to the management of morbid obesity
- Discuss strategies for successful test taking

Course Outline:

7:00 am  Continental Breakfast
8:00 am  General Introduction
          – Christine Bauer, MSN, RN, CBN
8:15 am  Introduction to Morbid Obesity and History of WLS
          – Christine Bauer, MSN, RN, CBN
8:45 am  RNY & Variations – Anna Miller, RN, CBN
10:15 am Break
10:30 am LAGB – Teresa Leath, RN, CBN
11:30 am Gastric Sleeve – Laura Boyer, RN, CBN
11:45 am Lunch
12:45 pm BPD/DS – Barbara Metcalf, RN, CBN
1:45 pm  Team Collaboration and Outreach
          – Bobbie Lou Price, RN, BSN, CBN
2:45 pm  Break
3:00 pm  Program Administration
          – Laura Boyer, RN, CBN
3:30 pm  Test taking tips
          – Barbara Lawrence, RN, MEd
4:15 pm  Closing remarks – Q&A
4:30 pm  Adjourn
ALLIED HEALTH ESSENTIALS IN SURGICAL SUPPORT

SUNDAY, JUNE 15, 2008
8:00 am – 4:30 pm

Course Co-Directors:
Laura Boyer, RN, CBN
Tracy Martinez, RN, BSN, CBN

*Up to 7.0 CEU credits are available.*

Course Overview and Target Audience:
This course provides an overview of the fundamentals of bariatric surgical practice management. It is designed primarily for allied health personnel new to the field, but it is also a great review for the experienced allied health professional.

This course has repetitive information presented at previous annual conferences.

Course Objectives:
Upon completion of this activity, participants should be able to:
- Describe the disease of morbid obesity
- Identify appropriate bariatric surgical candidates
- Discuss the advantages and disadvantages of bariatric surgical procedures
- Identify postoperative metabolic deficiencies and discuss treatment
- Discuss the management of postoperative complications
- Summarize the importance of patient education
- Explain the importance of a multidisciplinary bariatric program
- Discuss the role of support groups
- Describe important components of exercise following bariatric surgery
- Discuss the role of preoperative psychological evaluations

Course Outline:

7:00 am   Continental Breakfast
8:00 am   Introduction
8:05 am   The Disease of Morbid Obesity
          – Tracy Martinez, RN, BSN, CBN
8:45 am   The Surgical Treatment of Morbid Obesity
          – Alan Wittgrove, MD
9:30 am   Break
9:45 am   Patient Education and Informed Consent
          – Laura Boyer, RN, CBN
10:30 am  Post-op Care
          – Bobbie Lou Price, RN, BSN, CBN
11:00 am  Nutrition/Vitamin Therapy
          – Linda Aills, RD
12:00 pm  Lunch
1:00 pm   Role of Exercise
          – Jennifer Schwettmann, MSPT
1:30 pm   Facilitating Support Groups
          – Barbara Metcalf, RN, CBN
2:00 pm   Patient Followup
          – Bobbie Lou Price, RN, BSN, CBN
2:20 pm   Psychological Support
          – Melodie Moorehead, PhD
2:50 pm   Break
3:05 pm   Insurance and Surgical Access
          – Walter Lindstrom, Jr., Esq.
4:00 pm   Faculty Panel Discussion
4:15 pm   Evaluations and Post-Test
4:30 pm   Adjourn
OR PERSONNEL, PACU AND ANY BARIATRIC HEALTHCARE PROVIDER
– AWARENESS IS KEY: “YOU NEVER KNOW WHAT CAN COME THROUGH YOUR ER”

SUNDAY, JUNE 15, 2008
8:00 am – 4:45 pm

Course Director:
Jennifer Gianos, RN, RNFA, CBN, CNOR

*Up to 7.75 CEU credits are available.*

Course Overview and Target Audience:

This course is designed not only for operating room staff and PACU but will also be very educational for any healthcare provider dealing with bariatric patients. This will offer a more rounded education of the complete bariatric patient.

Course Objectives:

Upon completion of this activity, participants should be able to:

- Recognize various bariatric procedures and have a better knowledge of each with anatomy and physiology concerns
- Identify complications of each procedure in a timely manner
- Explain bariatric anesthesia concerns

Course Outline:

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<thead>
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<td>7:00 am</td>
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<tr>
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<td>Welcome – Jennifer Gianos, RN, RNFA, CBN, CNOR</td>
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<td>8:05 am</td>
<td>Possible Gastric Bypass Complications</td>
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<td>– Short and Long Term</td>
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<td>– Carlos Carrasquilla, MD</td>
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<td>8:40 am</td>
<td>Unexpected Intraoperative</td>
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<td>Complications: a Perioperative Nurse’s Point of View</td>
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<td>– Alice Jackson, NPC, RNFA, CBN, MSN</td>
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<tr>
<td>9:15 am</td>
<td>Potential OR Concerns with Vitamin, Calcium and Iron Deficiencies in the Noncompliant Patients</td>
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<td>– Jennifer Gianos, RN, RNFA, CBN, CNOR</td>
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<tr>
<td>9:40 am</td>
<td>Break</td>
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<td>10:00 am</td>
<td>Pathways to Surgery</td>
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<tr>
<td></td>
<td>– Tracy Martinez, RN, BSN, CBN</td>
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<td>10:30 am</td>
<td>Centers of Excellence</td>
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<td></td>
<td>– Alan W. Wittgrove, MD</td>
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<td>11:15 am</td>
<td>Documentation Update: “If It’s Not Documented, It’s Not Done”</td>
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<td>– Jennifer Gianos, RN, RNFA, CBN, CNOR</td>
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<tr>
<td>11:45 am</td>
<td>Q &amp; A</td>
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<td>12:00 pm</td>
<td>Lunch</td>
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<td>1:00 pm</td>
<td>Possible Complications in Adjustable Gastric Banding</td>
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<td></td>
<td>– Gregory Schroder, MD</td>
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<td>1:30 pm</td>
<td>Gastric Sleeve Technique and Results</td>
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<td></td>
<td>– Drake Bellanger, MD</td>
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<td>2:00 pm</td>
<td>Internal Hernias: “The Camouflage Danger”</td>
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<td>– Carlos Carrasquilla, MD</td>
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<td>2:30 pm</td>
<td>Break</td>
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<tr>
<td>3:00 pm</td>
<td>Case Study – Neil Hutcher, MD</td>
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<tr>
<td>3:15 pm</td>
<td>Case Study – Matthew Brengman, MD</td>
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<tr>
<td>3:30 pm</td>
<td>Case Study – Carlos Carrasquilla, MD</td>
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<td>3:45 pm</td>
<td>Case Study – Drake Bellanger, MD</td>
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<tr>
<td>4:00 pm</td>
<td>Case Study – Barry Greene, MD</td>
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<tr>
<td>4:15 pm</td>
<td>Case Study – Jennifer Gianos, RN, RNFA, CBN, CNOR</td>
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<tr>
<td>4:30 pm</td>
<td>Q &amp; A</td>
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<tr>
<td>4:45 pm</td>
<td>Adjourn</td>
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</tbody>
</table>
CENTERS OF EXCELLENCE IN BARIATRIC SURGERY: GUIDELINES FOR ACHIEVING APPROVAL

SUNDAY, JUNE 15, 2008
8:00 am – 5:00 pm

Course Co-Directors:
J. Kenneth Champion, MD
Lynne Thompson, RN
Alan Wittgrove, MD

*Up to 7.75 CME credits and 8.0 CEU credits are available with the workshops.*

Course Overview and Target Audience:
This course is designed for surgeons, bariatric allied health personnel, nurses, clinical coordinators, administrators and nutritionists who participate in the planning and implementation of an ASMBS Center of Excellence program at their institution. The course will review the essential components required for COE approval and provide insight into common pitfalls and roadblocks centers have incurred in the approval process.

Those participants who register for the workshops should bring a laptop and blank CD/DVD along with your own center’s materials for individual feedback and assistance.

Course Objectives:
Upon completion of this activity, participants should be able to:
- Identify the requirements for an ASMBS Center of Excellence
- Explain the key components necessary to organize your center for a site visit
- Demonstrate how to prepare and utilize clinical pathways and standardized orders in bariatric surgery
- Assess equipment and facility policy changes needed for a COE
- Recognize the elements necessary for data capture and reporting for a COE
- Describe common pitfalls which prevent COE accreditation

Course Outline:

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>7:00 am</td>
<td>Continental Breakfast</td>
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<tr>
<td>8:00 am</td>
<td>Centers of Excellence Overview and Current Status</td>
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<tr>
<td>8:20 am</td>
<td>Starting a New Program</td>
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<tr>
<td>8:40 am</td>
<td>COE Requirements and Site Inspection Preparation</td>
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<tr>
<td>9:25 am</td>
<td>Equipment and Facility Concerns</td>
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<td>9:45 am</td>
<td>Refreshment Break</td>
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<tr>
<td>10:00 am</td>
<td>Clinical Pathway Development and Utilization</td>
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<td>10:20 am</td>
<td>Support Groups</td>
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<td>10:40 am</td>
<td>Data Collection and Reporting with BOLD</td>
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<tr>
<td>11:25 am</td>
<td>Free-Standing and Outpatient Clinics</td>
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<tr>
<td>11:45 am</td>
<td>Panel Discussion and Audience Questions</td>
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<tr>
<td>12:30 pm</td>
<td>Lunch</td>
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<tr>
<td>1:30 pm – 5:00 pm</td>
<td>Workshops:</td>
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<tr>
<td>4:00 pm</td>
<td>Q &amp; A</td>
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<tr>
<td>5:00 pm</td>
<td>Adjourn</td>
</tr>
</tbody>
</table>
PRACTICAL TIPS FOR MUNDANE ISSUES

SUNDAY JUNE 15, 2008
1:30 pm – 5:00 pm

Course Director and Moderator:
J. Kenneth Champion, MD

*Up to 3.25 CME credits are available.*

Faculty / Panel:
Sherman Smith, MD
Bobbie Lou Price, RN, BSN, CBN
Neil Hutcher, MD
Tracy Martinez, RN, BSN, CBN
Jeanne Blankenship, MS, RD, CLE

Course Overview and Target Audience:
This course will employ a new format with the moderator outlining topics which present to a busy bariatric practice on a daily basis and then soliciting comments and feedback from the panel, which represent a cross section of our membership. We encourage active audience participation and comments. Many of the topics are routine, non-flashy topics which do not have an absolute right or wrong. We hope to share several different approaches to each subject and let the audience decide which fits their practice best.

Course Objectives:
Upon completion of this activity, participants should be able to:
- Recognize the challenge of preventing and managing metabolic bone disease after bariatric surgery
- Develop treatment strategies for managing osteoarthritis and gout after gastric bypass
- Identify what medications should be avoided after bariatric surgery and which supplements are beneficial
- Describe the perioperative management of common issues such as diabetes and DVT prophylaxis
- Examine the management of pregnancy after bariatric surgery

1:30 pm Introduction

Course Topics:
Management and prevention of metabolic bone disease after bariatric surgery (which blood tests, vitamin D, PTH, bone density testing; which calcium: carbonate or citrate; role of estrogens, biphosphates, calcitonin in treatment of osteoporosis)
- Management of osteoarthritis and gout (avoiding NSAIDS and steroids in immediate postop area, use of colchicines)
- Medications to avoid or limit after bariatric surgery (ASA, Plavix, NSAIDS, steroids)
- Perioperative and postop management of diabetes
- DVT prophylaxis and IVC filters in high-risk patients (hyper-coagulable, previous DVT/PE)
- Nutritional issues postop (which supplements, which labs, how often, recalcitrant anemia, IV iron, which route B12)
- Pregnancy after bariatric surgery (is routine birth control enough? are BCP’s absorbed normally? what lab tests? refer to high-risk OB?; what to advise the patient pregnant three months s/p bypass: therapeutic AB)

5:00 pm Adjourn
ASMBS/SAGES MASTERS POSTGRADUATE COURSE: “FLEXIBLE ENDOSCOPY AND ENDOLUMINAL SURGERY FOR THE BARIATRIC SURGEON”

MONDAY, JUNE 16, 2008
7:50 am – 12:00 pm: Didactic
Lab A: 1:10 pm – 2:40 pm
Lab B: 3:10 – 4:40 pm

Course Co-Directors:
Ninh T. Nguyen, MD
Jose Martinez, MD

*Up to 5.5 CME credits are available.*

Course Overview and Target Audience:

Endoscopy is an integral part of the management of bariatric patients. It is commonly used as a screening modality in the preoperative setting and in the operating room for detection of intraoperative complications such as bleeding and staple-line leaks. Furthermore, endoscopy is often used as a therapeutic measure in the management of postoperative complications and, more recently, to enhance gastric pouch restriction.

This full-day program provides a comprehensive overview of endoscopy and its application to bariatric surgery and gives the participants the opportunity for hands-on exposure to the techniques of diagnostic and therapeutic endoscopy. The course will also feature new innovative endoscopic bariatric procedures in the pre-clinical setting. The hands-on portion of the course will enable the participants to practice the techniques of diagnostic and therapeutic endoscopy including balloon dilation, the various hemostatic maneuvers and to practice endoscopic gastric pouch reduction therapy.

If you have previously attended the ASMBS didactic portion of this activity and would like to register for lab only, contact the ASMBS office at 352.331.4900.

Course Objectives:

Upon completion of this activity, participants should be able to:
- Recognize the indications of diagnostic and therapeutic endoscopy
- Compare the techniques for diagnostic and intraoperative endoscopy
- Demonstrate the techniques of therapeutic endoscopy including balloon dilation, thermal ablation, hemostatic clipping and stent placement
- Describe emerging technologies which utilize endoscopy for the treatment of obesity

Course Outline:

Diagnostic and Therapeutic Endoscopy

7:00 am  Continental Breakfast
7:50 am  Introductory Remarks
          Ninh Nguyen, MD and Jose Martinez, MD
8:00 am  Endoscopy Techniques and Credentialing Issues
          – Raul Rosenthal, MD
8:10 am  Preoperative Endoscopy in Bariatric Patients: Is it Necessary?
          – Bruce Schirmer, MD
8:25 am  The Role of Intraoperative Endoscopy
          – C. Daniel Smith, MD
8:40 am  Postoperative Bariatric Endoscopic Evaluation (Bypass and Band)
          – Phil Schauer, MD
9:00 am  Endoscopic Hemostatic Techniques and Foreign Body Removal (Clips, Thermal Energy and Injection Therapy)
          – John Lee, MD
9:10 am  Technique of Balloon Dilation for Stomach Stenosis
          – Ninh Nguyen, MD
9:25 am  Q & A Session
9:45 am  Refreshment Break

Continues next page
Therapeutic Endoscopy and Emerging Endoscopic Technologies

10:00 am  Endoscopic Stoma Size Reduction  
          – Alfonso Torquati, MD
10:15 am  Techniques of Stenting for Leaks & Gastro-Gastric Fistulae  
          – Chris Thompson, MD
10:35 am  Endoscopic Gastric Pouch Reduction Therapy – Dean Mikami, MD
10:50 am  Endoscopy after Gastric Bypass: Access to the Gastric Remnant (Transgastric vs. Transoral Technique)  
          – Jose Martinez
11:05 am  Emerging Endoscopic Obesity Procedures (Endoscopic Duodenal Sleeve, Intragastric Balloon) – Eric DeMaria, MD
11:30 am  Q & A Session
12:00 pm  Lunch

Laboratory A

1:10 pm Therapeutic Endoscopy: 6 Stations
- Balloon Dilation Deployment of Flexible Covered Stent
- Hemostasis: Injection Therapy
- Hemostasis: Thermal Ablation
- Hemostasis: Clips
- Hemostasis: Fibrin Sealant
- Gastric Pouch Reduction Therapy

2:40 pm Break

Laboratory B

3:10 pm Therapeutic Endoscopy: 6 Stations
- Balloon Dilation Deployment of Flexible Covered Stent
- Hemostasis: Injection Therapy
- Hemostasis: Thermal Ablation
- Hemostasis: Clips
- Hemostasis: Fibrin Sealant
- Gastric Pouch Reduction Therapy

4:40 pm Adjourn
MASyERs COURSE IN BEHAVIOURAL HEALTH

MONDAY, JUNE 16, 2008
8:00 am – 5:00 pm

Course Directors:
Cathy Reto, PhD
Melissa A. Kalarchian, PhD
James E. Mitchell, MD
David B. Sarwer, PhD

Morning Session
Moderator: Cathy Reto, PhD

7:00 am  Continental Breakfast
8:00 am  BH-01. SELF-REPORTED PSYCHIATRIC TREATMENT HISTORIES OF BARIATRIC SURGERY CANDIDATES
David B. Sarwer, PhD; Kelly Sutton-Skinner; Miriam H. Eisenberg, BA; Anthony N. Fabricatore, PhD;
LaShanda R. Jones, PhD; Ray Carvajal, MA; Robert H. Kuehnel, PhD
8:15 am  BH-02. NEW 3D VISUALIZATION TECHNIQUE CHALLENGES PATIENT SELF-IMAGE: CONFRONTATION THEN COLLABORATION
Stephen Wohlgemuth, MD
8:30 am  BH-03. PSYCHOLOGICAL INTERVENTION: PREPARING FOR POST-SURGICAL LIFESTYLE ADHERENCE
Mark Randall, PsyD, DrPH, MA; Pamela Herman, RN, BSN, CBN
8:45 am  BH-04. PSYCHOSOCIAL TRENDS RELATED TO WEIGHT REGAIN AFTER BARIATRIC SURGERY
Jacqueline Odom, PhD; Tamika L. Washington, MPA; Kerstyn Zalesin, MD; Peter A. McCullough, MD, MPH;
Basil Hakmeh
9:00 am  BH-05. OPTIMIZING LONG-TERM WEIGHT CONTROL AFTER BARIATRIC SURGERY
Melissa A. Kalarchian, PhD; Marsha D. Marcus, PhD; Anita P. Courcoulas, MD
9:15 am  BH-06. DATA SUGGESTS CARBOHYDRATE ADDICTION NEGATIVELY AFFECTS LONG-TERM GASTRIC BYPASS OUTCOMES
Katie Jay, MSW
9:30 am  BH-07. MALADAPTIVE COPING AND PERCEIVED STRESS INCREASE HUNGER RATINGS IN LAPAROSCOPIC BANDING PATIENTS
Susan F. Franks, PhD; Adam B. Smith, DO; Joan F. Carroll, PhD
9:45 am  BH-08. ALCOHOL CONSUMPTION PATTERNS AFTER BARIATRIC SURGERY
Jacqueline Odom, PhD; Tamika L. Washington, MPA; Kerstyn Zalesin, MD; Peter A. McCullough, MD, MPH;
Basil Hakmeh
10:00 am BH-09. CHANGES IN WEIGHT AND EMOTIONAL EATING AMONG BARIATRIC CANDIDATES FOLLOWING COMPLETION OF A
MINDFUL EATING GROUP Adrienne K. Elliot, PhD; Katherine P. Eisen, PhD; Danielle L. Hall, PsyD
10:30 am Refreshment Break
11:00 am Invited Presentation DISORDERED EATING IN BARIATRIC SURGERY PATIENTS James E. Mitchell, M.D.
12:00 pm LUNCH
1:30 pm Panel Discussion THE PREOPERATIVE PSYCHOLOGICAL EVALUATION: ISSUES AND CONTROVERSIES
Anthony N. Fabricatore, Ph.D., Melissa A. Kalarchian, Ph.D., David B. Sarwer, Ph.D.

Afternoon Session
Moderator: Melissa A. Kalarchian, PhD
2:30 pm Beyond the Pre-surgical Psychological Evaluation: Weight Regain after Weight Loss Surgery Kelli E. Friedman, PhD
3:15 pm Beyond the Pre-surgical Psychological Evaluation: Chronic Pain after Weight Loss Surgery Katherine L. Applegate, PhD
4:00 pm Beyond the Pre-surgical Psychological Evaluation: Alcohol Abuse after Weight Loss Surgery Stephanie Sogg, PhD.
5:00 pm Adjourn
ESSENTIALS IN BARIATRIC SURGERY

**MONDAY, JUNE 16, 2008**
8:00 am – 5:00 pm

**Course Director:**
Alfons Pomp, MD

*Up to 7.0 CME credits are available.*

**Course Overview and Target Audience:**
This course provides an overview of the surgical approach to the management of the morbidly obese patient. It is designed primarily for surgeons new to the field, but it is also a great review for the experienced bariatric surgeon.

**Course Objectives:**
Upon completion of this activity, participants should be able to:

- Describe the disease of morbid obesity and its comorbid conditions
- Determine medical weight loss options and the role of the non-surgeon clinician
- Summarize the history of weight loss surgery
- Recognize the various surgical procedures that are common today
- Select appropriate bariatric surgical candidates and recognize contraindications for surgery
- Specify issues in the perioperative care and early postoperative management
- Explain common perioperative complications and long-term nutritional consequences
- Specify the role and goals of bariatric Centers of Excellence

**Course Outline:**

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<tr>
<th>Time</th>
<th>Session</th>
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<tr>
<td>7:00 am</td>
<td>Continental Breakfast</td>
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<tr>
<td>8:00 am</td>
<td>Obesity; Epidemiology and Comorbid Conditions – Harvey Sugerman, MD</td>
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<tr>
<td>8:30 am</td>
<td>Medical Weight Loss Options and Popular Diets – Christopher Still, DO</td>
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<tr>
<td>9:00 am</td>
<td>Contraindications for Surgery – When to Just Say No – Scott Shikora, MD</td>
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<tr>
<td>9:30 am</td>
<td>Surgical Treatment: What History Has Taught Us – Alfons Pomp, MD</td>
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<tr>
<td>10:00 am</td>
<td>Refreshment Break</td>
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<tr>
<td>10:30 am</td>
<td>Restrictive Procedures (VBG, Banding, Sleeve) – Eldo Frezza, MD</td>
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<td>11:00 am</td>
<td>Gastric Bypass (Roux, Loop, Banded and Unbanded) – Alfons Pomp, MD</td>
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<td>11:30 am</td>
<td>Malabsorptive Procedures (JIB, BPD, BPD/DS) – Francesco Rubino, MD</td>
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<td>12:00 pm</td>
<td>Revisional Surgery – Who, What, Where and Why – Daniel Gagne, MD</td>
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<td>12:30 pm</td>
<td>Lunch</td>
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**Surgical Treatment Options**

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<th>Time</th>
<th>Session</th>
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<tr>
<td>1:30 pm</td>
<td>Reoperative Assessment; Screening, Evaluation, Education and Management of Comorbidities – Christopher Still, DO</td>
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<tr>
<td>2:00 pm</td>
<td>Perioperative Issues and Early Postoperative Care – Daniel Gagne, MD</td>
</tr>
<tr>
<td>2:30 pm</td>
<td>Damage Control – Dealing with Operative and Postoperative Emergencies – J. Kenneth Champion, MD</td>
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<td>3:00 pm</td>
<td>Refreshment Break</td>
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**The Bariatric Office and Aftercare**

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<th>Time</th>
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<tr>
<td>3:30 pm</td>
<td>The Role of the Non-Surgeon Clinician – Tracy Martinez, RN, BSN, CBN</td>
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<tr>
<td>4:00 pm</td>
<td>Long-Term Nutritional and GI Consequences – Gregory Dakin, MD</td>
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<tr>
<td>4:30 pm</td>
<td>Centers of Excellence – What Does it All Mean? – Robin Blackstone, MD</td>
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<tr>
<td>5:00 pm</td>
<td>Adjourn</td>
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www.asmbs.org
ALLIED HEALTH POSTGRADUATE COURSE: ADVANCED PRACTICE

MONDAY, JUNE 16, 2008
9:00 am – 12:00 pm and 1:00 pm – 4:00 pm

Course Director:
Karen Flanders, NP-C, CBN
*Up to 3.0 CEU credits are available.*

Course Overview and Target Audience:
This Allied Health Postgraduate course is an overview of the management and care of postoperative bariatric patients presenting with immediate and long-term complications. This course is designed for Nurse Practitioners, Clinical Nurse Specialists, Nurse Anesthetists, Physician Assistants and experienced Bariatric Nurses and other health care professionals.

Course Objectives:
Upon completion of this activity, participants should be able to:
- Identify the signs and symptoms of various complications which can occur after bariatric surgery
- Assess, diagnose and treat abdominal pain
- Evaluate and treat vitamin deficiencies in the postoperative surgical weight loss patient
- Define optimum care for the pregnant bariatric patient

Course Outline:

Morning Session (repeated at 1:00pm)
SESSION ONE:
Abdominal Pain in the Postoperative Bariatric Patient
Moderator: Lisa Dutton, RNC, FNP
9:00 am  Abdominal Pain Assessment
– Karen Flanders, NP-C, CBN
9:15 am  Immediate Postoperative Complications
– Brett Gordon, PA-C
9:40 am  Long Term Postoperative Complications
– C. Kenneth Mitchell, MD
10:00 am Band Complications
– Giovanni Dugay, APN
10:20 am Q & A

SESSION TWO: Vitamin and Mineral Deficiencies
Moderator: Karen Flanders, NP-C, CBN
10:30 am  Vitamin and Mineral Requirements for the Bariatric Patient
– Shannon Jansma, RD, PA-C
10:40 am  A, B, D, E, K and Mineral Deficiencies
– Shannon Jansma, RD, PA-C
11:00 am Q & A

SESSION THREE:
Pregnancy in the Postoperative Bariatric Patient
Moderator: Karen Flanders, NP-C, CBN
11:10 am Birth Control Options
– Kim Delamont, MSN, WHNP, CNM, PNNP
11:20 am Recommendations for Management/Monitoring Pregnancy
– Kim Delamont, MSN, WHNP, CNM, PNNP
11:35 am Nutritional Considerations in the Post-Bariatric Pregnant Patient
– Ashley Mannell, RD, MS
11:55 am Q & A
12:00 pm Adjourn

Afternoon Session (repeat of Morning Session)
SESSION ONE:
Abdominal Pain in the Postoperative Bariatric Patient
Moderator: Lisa Dutton, RNC, FNP
1:00 pm  Abdominal Pain Assessment
– Karen Flanders, NP-C, CBN
1:15 pm  Immediate Postoperative Complications
– Brett Gordon, PA-C
1:40 pm  Long-Term Postoperative Complications
– C. Kenneth Mitchell, MD
2:00 pm  Band Complications – Giovanni Dugay, APN
2:20 pm Q & A

SESSION TWO: Vitamin and Mineral Deficiencies
Moderator: Karen Flanders, NP-C, CBN
2:30 pm  Vitamin and Mineral Requirements for the Bariatric Patient
– Shannon Jansma, RD, PA-C
2:40 pm  A, B, D, E, K and Mineral Deficiencies
– Shannon Jansma, RD, PA-C
3:00 pm Q & A

SESSION THREE:
Pregnancy in the Postoperative Bariatric Patient
Moderator: Karen Flanders, NP-C, CBN
3:10 pm Birth Control Options
– Kim Delamont, MSN, WHNP, CNM, PNNP
3:20 pm Recommendations for Management/Monitoring Pregnancy
– Kim Delamont, MSN, WHNP, CNM, PNNP
3:35 pm Nutritional Considerations in the Post-Bariatric Pregnant Patient
– Ashley Mannell, RD, MS
3:55 pm Q & A
4:00 pm Adjourn
ALLIED HEALTH POSTGRADUATE COURSE: LAPAROSCOPIC ADJUSTABLE BANDING

MONDAY, JUNE 16, 2008
9:00 am – 12:00 pm and 1:00 pm – 4:00 pm

Course Director:
Teresa Leath, RN, CBN

*Up to 3.0 CEU credits are available.*

Course Overview and Target Audience:

Laparoscopic Banding is an effective tool in the treatment of morbid obesity. As with any operation, challenges can occur. This course is designed to discuss some of the more challenging issues related to laparoscopic adjustable gastric banding. This course is offered both in the morning and afternoon.

Course Objectives:

Upon completion of this activity, participants should be able to:
- Identify how behavior modification and patient compliance affect outcomes in the adjustable banding patient and how we should measure their success
- Discuss band replacement in the super-obese patient and patients with significant hiatal hernia
- Describe appropriate band adjustment algorithms

Course Outline:

Morning Session (repeated at 1:00 pm)

9:00 am  Introduction
9:05 am  Importance of Patient Compliance
 – Gaspar Rosario, NP
9:25 am  Hiatal Hernia Repair at Time of Band Replacement
 – Jeff Holloway, MD
9:45 am  Band Adjustments: What Works and What Doesn’t
 – Deana McDonald, RN, BSN, CBN
10:15 am  How Should We Measure Success?
 – Darren Tishler, MD
10:45 am  Lap Adjustable Banding in the Super-Obese Patients
 – Christine Ren-Fielding, MD
11:15 am  Behavior Modifications for the Success of the Banding Patient
 – David Sarwer, PhD
11:30 am  Panel Q & A
12:00 pm  Adjourn

Afternoon Session (repeat of Morning Session)

1:00 pm  Introduction
1:05 pm  Importance of Patient Compliance
 – Gaspar Rosario, NP
1:25 pm  Hiatal Hernia Repair at Time of Band Replacement
 – Jeff Holloway, MD
1:45 pm  Band Adjustments: What Works and What Doesn’t
 – Deana McDonald, RN, BSN, CBN
2:15 pm  How Should We Measure Success?
 – Darren Tishler, MD
2:45 pm  Lap Adjustable Banding in the Super-Obese Patients
 – Christine Ren-Fielding, MD
3:15 pm  Behavior Modifications for the Success of the Banding Patient
 – David Sarwer, PhD
3:30 pm  Panel Q & A
4:00 pm  Adjourn
## ALLIED HEALTH POSTGRADUATE COURSE: NUTRITION AND BARIATRIC SURGERY

### MONDAY, JUNE 16, 2008

8:00 am – 12:00 pm  
1:00 pm – 5:00 pm  

**Course Director:**  
Jeanne Blankenship, MS, RD  

*Up to 4.0 CEU credits are available.*

**Course Overview and Target Audience:**

This half-day course will examine the nutritional considerations of surgical weight loss. Experts will review the process of assessing nutrition status of pre- and post-surgical patients and offer practical solutions of preventing, monitoring and treating nutritional deficiencies.

This program is designed for registered dietitians, nurses, nurse practitioners and other clinical personnel who are involved with the clinical care of the surgical weight loss patient. The course is recommended for professionals who have mastered the concepts presented in the Essentials for Bariatric Surgery course.

**Course Objectives:**

Upon completion of this activity, participants should be able to:

- Summarize macronutrient and micronutrient considerations for surgical weight loss procedures
- Identify how to assess nutrition status using biochemical indices
- Discuss the current evidence related to macronutrient requirements and dietary distributions during weight loss and weight maintenance
- Describe the effect of surgery and restricted intake on vitamin and mineral status
- Explain the role of gut hormones in hunger and satiety

**Course Outline:**  
**Morning Session (repeated at 1:00 pm)**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>8:00 am</td>
<td>Introduction</td>
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</table>
| 8:05 am | The ASMBS Nutrition Guidelines  
  – Scott Shikora, MD, FACS |
| 8:15 am | Vitamin and Minerals: Research and Recommendations  
  – Margaret Furtado, MS, RD |
| 8:45 am | Macronutrient Considerations  
  – Liz Goldenberg, MPH, RD |
  – Jeanne Blankenship, MS, RD |
| 9:45 am | Strategies for Effective Weight Loss Maintenance  
  – Toni Piechota, MS, MPH, RD |
| 10:15 am | Break                                                                   |
| 10:30 am | Texture and Advancement in Current Practice  
  – Jeanne Blankenship, MS, RD |
| 10:45 am | Hunger vs. Satiety: Gut-Brain Interactions Before and After Bariatric Surgery  
  – Laura Frank, PhD, RD |
| 11:30 am | Panel Discussion with Q&A                                             |
| 12:00 pm | Adjourn                                                                 |

**Afternoon Session (repeat of Morning Session):**

<table>
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<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>1:00 pm</td>
<td>Introduction</td>
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</table>
| 1:05 pm | The ASMBS Nutrition Guidelines  
  – Scott Shikora, MD |
| 1:15 pm | Vitamin and Minerals: Research and Recommendations  
  – Margaret Furtado, MS, RD |
| 1:45 pm | Macronutrient Considerations  
  – Liz Goldenberg, MPH, RD |
  – Jeanne Blankenship, MS, RD |
| 2:45 pm | Strategies for Effective Weight Loss Maintenance  
  – Toni Piechota, MS, MPH, RD |
| 3:15 pm | Break                                                                   |
| 3:30 pm | Texture and Advancement in Current Practice  
  – Jeanne Blankenship, MS, RD |
| 3:45 pm | Hunger vs. Satiety: Gut-Brain Interactions Before and After Bariatric Surgery  
  – Laura Frank, PhD, RD |
| 4:30 pm | Panel Discussion with Q&A                                             |
| 5:00 pm | Adjourn                                                                 |
VIDEO-BASED TECHNIQUES OF PRIMARY LAPAROSCOPIC BARIATRIC SURGERY

TUESDAY JUNE 17, 2008
8:00 am – 12:00 pm

Course Co-Directors:
Eric DeMaria, MD
J. Kenneth Champion, MD

*Up to 3.5 CME credits are available.*

Course Overview and Target Audience:
This course provides a comprehensive overview of the surgical techniques utilized to perform primary weight loss operations. The course is designed for practicing bariatric surgeons, residents or fellows, and allied health personnel. This is a video-based course focusing on clinical pearls and avoiding pitfalls in the operating room during the performance of bariatric surgery.

Course Objectives:
Upon completion of this activity, participants should be able to:

■ Compare the different techniques which can be employed to accomplish laparoscopic gastric banding, gastric bypass, duodenal switch and sleeve gastrectomy

■ Explain surgical techniques to minimize postop complications after bariatric surgery

■ Describe clinical pearls experienced surgeons employ to facilitate their technique

Course Outline:

7:00 am  Continental Breakfast

8:00 am  Introduction

8:10 am  Laparoscopic Adjustable Gastric Band – Standard Procedure
– Eric DeMaria, MD

8:30 am  New Options for Laparoscopic Adjustable Gastric Banding
– Jaime Ponce, MD

8:50 am  Hand-Sewn Gastric Bypass
– Kelvin Higa, MD

9:10 am  Linear Stapler Antecolic Gastric Bypass
– J. Kenneth Champion, MD

9:30 am  Circular Stapler Retrocolic Gastric Bypass
– Scott Shikora, MD

9:50 am  Refreshment Break served in the Exhibit Hall

10:30 am  Sleeve Gastrectomy – Greater Curve Mobilization First
– Raul Rosenthal, MD

10:50 am  Sleeve Gastrectomy – Pouch Formation First
– Paul Cirangle, MD

11:10 am  Duodenal Switch
– Michel Gagner, MD

11:40 am  Q&A

12:00 pm  Adjourn (Lunch served in the Exhibit Hall)
ADVANCED BARIATRIC LIFE SUPPORT

TUESDAY, JUNE 17, 2008
8:00 am – 12:30 pm

Course Co-Directors:
Daniel Herron, MD
Alfons Pomp, MD

*Up to 4.0 CME credits and 4.5 CEU credits are available.*

Course Overview and Target Audience:

This course is designed for bariatric surgeons, general surgeons who provide call coverage for bariatric surgeons, ER physicians, critical care specialists, hospitalists, internists who manage postoperative bariatric patients and bariatric nursing staff. This course is an organized approach for evaluation and management of serious life-threatening conditions in bariatric patients. The program gives a foundation of common knowledge for all members of the bariatric team. This knowledge is applicable in both large tertiary hospitals as well as small rural emergency departments.

Course Objectives:

Upon completion of this activity, participants should be able to:

- Assess the patient’s condition expeditiously
- Demonstrate how to resuscitate and stabilize the bariatric patient in critical situations
- Identify procedures and policies to minimize complications in bariatric surgery patients
- Recognize and manage the common surgical emergencies
- Arrange appropriately for the patient’s definitive care by a bariatric surgeon and specialists with experience in caring for the morbidly obese
- Describe what would ensure that optimum care is provided by an experienced bariatric surgical team in a facility capable of caring for critically ill bariatric patients

Course Outline:

7:00 am  Continental Breakfast

8:00 am  Welcome & Introduction
– Daniel Herron, MD

8:15 am  Early complications after bariatric surgery; recognizing and treating leaks and other impending disasters in the bariatric surgery patient
– Alfons Pomp, MD

8:45 am  Pulmonary Problems; sleep apnea, acute respiratory failure and pulmonary embolus, including ventilatory guidelines
– Anthony Udekwu, MD

9:05 am  Postop bleeding; intraluminal and intraabdominal
– Ninh Nguyen, MD

9:30 am  Postop abdominal pain; bowel obstruction, internal hernia and other sources
– Daniel Herron, MD

10:00 am  Refreshment Break served in the Exhibit Hall

10:30 am  Intensive Care Management of sepsis, SIRS and ARDS in the severely obese patient
– Mary Reed, MD

11:00 am  Case studies; abdominal pain, bleeding, sepsis, critical care, and others
– All faculty members

12:20 pm  Wrap-up

12:30 pm  Adjourn (Lunch served in the Exhibit Hall)
GASTRIC RESTRICTION: 
ADJUSTABLE LAPAROSCOPIC BANDING AND SLEEVE GASTRECTOMY

TUESDAY, JUNE 17, 2008
8:00 am – 12:30 pm

Course Co-Directors:
Michel Gagner, MD
Jaime Ponce, MD

*Up to 4.25 CME credits are available.*

Course Overview and Target Audience:
This program is for bariatric surgeons with band experience as well as advanced skills who are interested in performing gastric banding alternatives, optimizing their results, decreasing complications, integrating sleeve gastrectomy into their practice and learning revision strategies involving restrictive procedures.

The first part of this course provides an overview of the current gastric banding strategies available in the US with emphasis on optimizing results and decreasing short-term and long-term failures. The second half is devoted to all general aspects of sleeve gastrectomy for morbid obesity. Technical tips are reviewed to optimize results, as well as how to diminish complications and treat the most frequent ones. Both operations are discussed as a revision option.

Course Objectives:
Upon completion of this activity, participants should be able to:
- Identify the technical differences between bands available in the US
- Recognize the importance of identification and repair of hiatal hernias during band placement to prevent high reoperation rate
- Describe different band adjustment strategies and followup issues
- Explain the use of gastric banding as a revisional procedure
- Analyze the indications/contraindications of sleeve gastrectomy and cite major technical steps for completion of sleeve gastrectomy
- Explain the prevention of complications for sleeve gastrectomy
- Describe staged operations involving sleeve gastrectomy and revisions

Course Outline:

7:00 am  Continental Breakfast

Adjustable Gastric Band:
8:00 am  Technique Differences between Bands Available in the US
    – Jaime Ponce, MD
8:20 am  Hiatal Hernia Repair Decreases Reoperation and Band Failure
    – Christine Ren-Fielding, MD
8:45 am  Rationale Approach to Band Adjustments
    – Greg Schroder, MD
9:10 am  Nonoperative Band Issues
    – Jeff Allen, MD
9:35 am  Gastric Band Role in Revisions and Salvage Procedures
    – David Provost, MD
10:00 am Refreshment Break served in Exhibit Hall

Sleeve Gastrectomy:
10:15 am  Indications/Contraindications for Sleeve Gastrectomy
    – Eldo Frezza, MD
10:35 am  Technical Operative Aspects of Sleeve Gastrectomy
    – Michel Gagner, MD
10:55 am  Primary-versus-Staged Sleeve Gastrectomy
    – Phil Schauer, MD
11:15 am  Early Outcomes with Sleeve Gastrectomy
    – Greg Jossart, MD
11:35 am  Complications of Sleeve Gastrectomy (Early and Late)
    – Raul Rosenthal, MD
11:55 am  Sleeve as a Revision Procedure
12:15 pm  General Panel Discussion/Questions
12:30 pm  Adjourn (Lunch served in Exhibit Hall)
ALLIED HEALTH SCIENCES MAIN SESSION

TUESDAY, JUNE 17, 2008
8:00 am – 5:00 pm
*Up to 6.0 CEU credits are available.*

SESSION ONE
Moderator: Karen Flanders, NP, CBN

7:00 am  Continental Breakfast

8:00 am  CHAIR ADDRESS – Karen Schulz, RN, MSN, CBN

8:15 am  AH-01. EARLY US OUTCOMES AFTER LAPAROSCOPIC ADJUSTABLE GASTRIC BANDING IN PATIENTS WITH BMI 30 - 40
Samuel Sultan, BA; Manish Parikh, MD; Heekoung Youn, MA, RN; Marina Kurian, MD; George Fielding, MD; Christine Ren-Fielding, MD

8:25 am  AH-02. PREOPERATIVE CONVENTIONAL WEIGHT LOSS AND NUMBER OF ATTEMPTS DOES NOT PREDICT POSTOPERATIVE WEIGHT LOSS IN PATIENTS UNDERGOING LAPAROSCOPIC GASTRIC BYPASS
Emily Jantz, RD, CD; Christopher J. Larson, RD, PA-C; Michelle A. Mathiason, MS; Kara J. Kallies, BA; Shanu N. Kothari, MD

8:35 am  AH-04. LAPAROSCOPIC ADJUSTABLE GASTRIC BANDING COMPLICATIONS AND OUTCOMES IN A SINGLE US CENTER WITH FOUR-YEAR FOLLOW-UP
Muhammad Z. Abdul-Jawad, MD; Kevin P. Noon, ARNP

8:45 am  Q & A

SESSION TWO
Moderator: Maureen Quigley, NP

9:05 am  AH-05. OUTCOMES OF LAPAROSCOPIC BARIATRIC SURGERY AFTER RENAL TRANSPLANT
Renan Rojas, MD; Samuel Szomstein, MD; Raul Rosenthal, MD

9:15 am  AH-06. PATIENTS WITH COMBINED MOOD AND EATING DISORDERS WHO HAD LAPAROSCOPIC GASTRIC BYPASS ARE MORE CHALLENGING POSTOPERATIVELY BUT CAN ACHIEVE COMPARABLE WEIGHT LOSS
Amy A. Gorin, PhD; Ioannis Raftopoulos, MD, PhD

9:25 am  AH-07. PHYSICAL ACTIVITY LEVELS OF PATIENTS UNDERGOING BARIATRIC SURGERY IN THE LONGITUDINAL ASSESSMENT OF BARIATRIC SURGERY (LABS) STUDY
Wendy C. King, PhD; Steven H. Belle, PhD, MScHyg; William H. Chapman, Dr; Anita P. Courcoulas, MD; Gregory Dakin, MD; George M. Eid, MD; David R. Flum, MD, MPH; William B. Inabinet, MD; James Mitchell, MD; Brant Oelschlager, MD; Emma J. Patterson, MD; Bruce M. Wolfe, MD

9:35 am  Q & A

9:45 am  Refreshment Break served in the Exhibit Hall

Continues next page
SESSION THREE
Moderators: Jill Meador, RN, CBN

10:15 am  AH-08. FAILURE OF THE ADJUSTABLE GASTRIC BANDING: STARTING BMI IS THE FULCRUM OF SUCCESS AND FAILURE
Brad Snyder, MD; Terry Scarborough, MD; Sherman Yu; Erik B. Wilson, MD

10:25 am  AH-09. EARLY RESULTS OF CONVERSION FROM LAPAROSCOPIC BANDING TO LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS
Robert Moore, MD; Richard A. Perugini, MD; Donald Czerniach, MD; Robin P. Mason, NP; John Kelly, MD

10:35 am  AH-10. EFFECT OF LAPAROSCOPIC GASTRIC BYPASS FOR TYPE 2 DIABETES MELLITUS WITH BMI < 35 KG/M²
WeiJei Lee, MD, PhD; Yi-Chih Lee, MHA; Jung-Chien Chen, MD; Kong-Han Ser, MD; Shu-Chun Chen, RN; Ching-Mei Lin, MD

10:45 am  Q & A

10:55 am  GUEST SPEAKER – Georgeann N. Mallory, RD, Executive Director ASMBS

11:30 am  UPDATE & AWARD PRESENTATION

12:00 pm  Lunch served in the Exhibit Hall

AFTERNOON WORKSHOPS

2:00 pm – 2:45 pm  Concurrent Workshops (repeated at 2:50 pm)
A. Mobility Patterns and Safe Transfer of the Bariatric Patient. Michael Dionne, BS, PT
B. Protein Supplements: The Truth and Misconceptions. Christine Becker, MS, RD
C. Psyched-Up for Followup: Psychological Research-Based Strategies to Improve Follow-up Rates and Success with Bariatric Patients. Elizabeth Ryland, PhD
D. How to Build Successful Partnerships that Work for Patients and Grow Your Practice. Jan Carter, MBA
E. Eating Disorders 101. Cathy Reto, PhD
F. The Multi-Disciplinary Approach to Bariatric Surgery – Is it Risk Free or Risky Business?
   Kathleen M. McCauley

2:50 pm – 3:35 pm  Concurrent Workshops (repeat of 2:00 pm workshops)
A. Mobility Patterns and Safe Transfer of the Bariatric Patient. Michael Dionne, BS, PT
B. Protein Supplements: The Truth and Misconceptions. Christine Becker, MS, RD
C. Psyched-Up for Followup: Psychological Research-Based Strategies to Improve Follow-up Rates and Success with Bariatric Patients. Elizabeth Ryland, PhD
D. How to Build Successful Partnerships that Work for Patients and Grow Your Practice. Jan Carter, MBA
E. Eating Disorders 101. Cathy Reto, PhD
F. The Multi-Disciplinary Approach to Bariatric Surgery – Is it Risk Free or Risky Business?
   Kathleen M. McCauley

3:35 pm  Refreshment Break served in the Exhibit Hall

4:00 pm  Professional Networking

5:00 pm  Adjourn
STUDENTS/RESIDENTS/FELLOWS SESSION

TUESDAY, JUNE 17, 2008
1:00 pm – 4:40 pm
*Up to 3.5 CME credits are available.*

Moderator: Robert Brolin, MD

1:00 pm  
ST-01. NATIONAL TRENDS IN UTILIZATION AND OUTCOMES OF LAPAROSCOPIC ADJUSTABLE GASTRIC BANDING
Marcelo W. Hinojosa, MD; Esteban Varela, MD, MPH; Dhavan A. Parikh, MA; Brian R. Smith, MD; Xuan-Mai T. Nguyen, MS; Ninh T. Nguyen, MD

1:20 pm  
ST-02. THE EVOLUTION OF BARIATRIC SURGERY IN THE UNITED STATES FROM 1979 – 2005
Corey N. Ming-Lum, MD; J. Christopher Eagon, MD

1:40 pm  
ST-03. REASONS FOR HYPOXIA IN THE POSTOPERATIVE PERIOD AFTER LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS FOR MORBID OBESITY
Marin Radulescu, MD; Samuel Szomstein, MD; Raul Rosenthal, MD

2:00 pm  
ST-04. ATTITUDES AND OUTCOMES FOR BODY CONTOURING AFTER GASTRIC BYPASS SURGERY
Shelley Noland, MD; John Downey, BS; Gabriel Brat, BS, MS; Gavitt Woodard, BA; John Morton, MD, MPH

2:20 pm  
ST-05. WHAT IS MY GOAL? PATIENT EXPECTATIONS OF COMORBIDITY RESOLUTION FOLLOWING BARIATRIC SURGERY
Shahzeer Karmali, MD, FRCSC; Kimberly Yee; Emily M. Brown; John Sweeney; Mary L. Brandt; Vadim Sherman, MD, FRCSC

2:40 pm  
ST-06. COMPARISON OF HOSPITAL CHARGES BETWEEN ROBOTIC-ASSISTED, STAPLED AND HAND-SEWN GASTRIC BYPASS
Houman Solomon, MD; Gigi Y. Liu, BS; Lucy C. Lee, BS; Ramzi S. Alami, MD; John Morton, MD, MPH; Myriam J. Curet, MD, FACS

3:00 pm  
Refreshment Break served in the Exhibit Hall

3:20 pm  
ST-07. RESOLUTION OF GASTROESOPHAGEAL REFLUX AND HIATAL HERNIA WITH LAPAROSCOPIC ADJUSTABLE GASTRIC BANDING
Leonierose N. Dacuycuy, BS; Carson D. Liu, MD

3:40 pm  
ST-08. REVISIONAL LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS FOLLOWING NON-GASTRIC BANDING BARIATRIC PROCEDURES
Mario Morales, MD; Andrew A. Wheeler, MD; Roger de la Torre, MD; James S. Scott, MD

4:00 pm  
ST-09. PERSPECTIVES ON PEDIATRIC BARIATRIC SURGERY: IDENTIFYING BARRIERS TO REFERRAL
Corey W. Iqbal, MD; Seema Kumar, MD; Amber D. Iqbal, RN; Michael B. Ishitani, MD

4:20 pm  
ST-10. RESULTS OF A GASTROJEJUNAL ANASTOMOTIC TECHNIQUE DESIGNED TO REDUCE STRicture
John P. Sczepaniak, BS; Milt L. Owens, MD CM

4:40 pm  
Adjourn
VIDEO-BASED TECHNIQUES OF LAPAROSCOPIC REVISIONAL BARIATRIC SURGERY

TUESDAY JUNE 17, 2008
1:30 pm – 5:15 pm

Course Directors:
Ninh Nguyen, MD
Philip Schauer, MD

*Up to 3.25 CME credits are available.*

Course Overview and Target Audience:
This course provides a comprehensive technical overview of the surgical management of late bariatric complications and revisional surgery for weight recidivism. The course is intended to teach practicing bariatric surgeons, residents and allied health professionals the appropriate workup and patient selection, the various types of revisional procedures and the technical details and possible pitfalls of reoperative surgery. This course will take the form of video-based education by providing the participants with extensive video images from world-renowned experts in the field of bariatric surgery.

Course Objectives:
Upon completion of this activity, participants should be able to:

- Describe the workup and patient selection for reoperative bariatric surgery
- Explain the various surgical options for management of late complications and revisional surgery
- Identify laparoscopic techniques for management of late complications and revisional operations

Course Outline:

1:30 pm Intoductory Remarks
– Ninh Nguyen, MD, Philip Schauer, MD

Techniques for Laparoscopic Management of Complications

1:35 pm Laparoscopic Management of Band Slippage
– Santiago Horgan, MD

1:50 pm Laparoscopic Take-Down of Gastrogastric Fistulae
– Raul Rosenthal, MD

2:00 pm Laparoscopic Reversal of Gastric Bypass
– J. Kenneth Champion, MD

2:10 pm Laparoscopic Take-Down of VBG for Obstruction – Ninh Nguyen, MD

2:20 pm Laparoscopic Reoperation for Marginal Ulcer – Eric DeMaria, MD

2:30 pm Laparoscopic Band Removal for Erosion – Helmuth Billy, MD

2:40 pm Laparoscopic Management of Internal Herniation – Alan Wittgrove, MD

2:50 pm Q & A Session

3:15 pm Break

Techniques of Laparoscopic Revisional Surgery

3:30 pm Conversion of VBG to Gastric Bypass – Kelvin Higa, MD

3:40 pm Conversion of Band to Sleeve – John Morton, MD

3:50 pm Conversion of Nissen to Gastric Bypass – Ricardo Cohen, MD

4:00 pm Conversion of Sleeve to Gastric Bypass – Phil Schauer, MD

4:10 pm Conversion of Band to Roux-en-Y Gastric Bypass – David Provost, MD

4:20 pm Gastric Banding of the Bypass – Ariel Ortiz, MD

4:30 pm Sleeve Gastrectomy Revision – Paul Cirangle, MD

4:40 pm Conversion of Loop Gastric Bypass to Roux-en-Y – Ramsey Dallal, MD

4:50 pm Q & A Session

5:15 pm Adjourn
PLENARY SESSION, INCLUDING THE ASMBS/TOS PRIMARY CLINICIAN’S TRACK

This session incorporates participants’ oral papers with discussion from the floor, invited lectureship, basic science reviews and distinguished guest lectureships covering the wide range of disciplines involved in bariatric surgery. (Up to 17.75 CME credits are available.)

OBJECTIVES

Upon completion of this conference, physicians and support staff should be able to:

- Define, discuss and solve specific challenges in the treatment of people with obesity and obesity-related and metabolic diseases and conditions
- Describe the development and use of new techniques to achieve weight loss by surgery in obese patients
- Examine the broad scope of patient care services
- Identify the specific needs of bariatric patients and assist in targeting their care in a coordinated multidisciplinary team effort

WEDNESDAY, JUNE 18
8:00 am – 9:30 am

SESSION ONE: METABOLIC SURGERY FOR DIABETES
Moderators: Marc Bessler, MD; Nicolas Christou, MD, PhD

7:00 am Continental Breakfast and Registration

8:00 am PL-01. IS ROUX-EN-Y GASTRIC BYPASS (RYGB) FOR TYPE 2 DIABETES MELLITUS (T2DM) REALLY METABOLIC SURGERY? THE IMPORTANCE OF THE BARIATRIC IMPACT OF SURGERY
Brian Kadera, BS; John Grant, MD; Aurora D. Pryor, MD; Dana D. Portenier, MD; Eric J. DeMaria, MD
Discussant: Shanu Kothari, MD

8:15 am PL-02. EFFECT OF SLEEVE GASTRECTOMY ON MORBIDLY OBESE PATIENTS WITH DIABETES MELLITUS
Xinxiang Li, MD; Pedro Martinez, MD; Samuel Szomstein, MD; Raul Rosenthal, MD
Discussant: Simon Biron, MD

8:30 am PL-03. A RANDOMIZED TRIAL COMPARING LAPAROSCOPIC SLEEVE GASTRECTOMY VERSUS GASTRIC BYPASS FOR THE TREATMENT OF TYPE 2 DIABETES MELLITUS: PRELIMINARY REPORT
WeiJei Lee, MD, PhD; Yi-Chih Lee, MHA; Jung-Chien Chen, MD; Kong-Han Ser, MD; Shu-Chun Chen, RN; Ching-Mei Lin, MD
Discussant: Robin Blackstone, MD

8:45 am PL-04. TYPE 2 DIABETES MELLITUS IN SEVERELY OBESE INDIVIDUALS IS CAUSED BY INSUFFICIENT BETA CELL SENSITIVITY RELATIVE TO THE DEGREE OF INSULIN SENSITIVITY
Richard A. Perugini, MD; John Kelly, MD; Donald Czerniach, MD
Discussant: Walter J. Pories, MD

9:00 am PL-05. IMPACT OF LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS ON HGA1C CONCENTRATIONS IN PATIENTS WITH DIABETES: A MATCHED COHORT ANALYSIS
Daniel E. Mumme, MD; Michelle A. Mathiason, MS; Kara J. Kallies, BA; Shanu N. Kothari, MD
Discussant: Henry Buchwald, MD, PhD

9:15 am PL-06. 24-WEEK FOLLOWUP OF AN OPEN LABEL, PROSPECTIVE, RANDOMIZED CONTROLLED TRIAL OF ENDOSCOPIC DUODENAL JEJUNAL BYPASS SLEEVE (DJBS) VERSUS LOW CALORIE DIET FOR WEIGHT LOSS
Michael Tarnoff, MD; Alex Escalona, MD; Luis Ilbanez, MD; Almino Ramos, MD; Galvao Neto Manoel, MD; Leonardo Rodriguez, MD
Discussant: Michel Murr, MD

9:30 am Refreshment Break served in Exhibit Hall
WEDNESDAY, JUNE 18
10:00 am – 12:00 pm

SESSION TWO: CLINICALLY SIGNIFICANT STUDIES OF GENERAL INTEREST
Moderators: Eric DeMaria, MD; Michel Gagner, MD

10:00 am  PL-07. BARIATRIC SURGERY IN MEDICARE PATIENTS (MP): HIGHER RISKS BUT SUBSTANTIAL BENEFITS  
Xiang Yuan, MD; Lisa R. Martin Hawver, MD; Peter Ojo, MD; Luke Wolfe, MS; Jill Meador, BSN, CBN; John M. Kellum, MD; James W. Maher, MD  
Discussant: Natan Zundel, MD

10:15 am  PL-08. LAPAROSCOPIC BARIATRIC SURGERY AND MALIGNANT DISEASES  
Majed Maalouf, MD; Pavlos K. Papasavas, MD; Daniel J. Gagné, MD; Jorge E. Urbandt, MD; Philip F. Caushaj, MD  
Discussant: Nicolas Christou, MD, PhD

10:30 am  PL-09. BARIATRIC SURGERY IMPROVES/PREVENTS CANCER IN MORBIDLY OBESE PATIENTS  
Nicolas V. Christou, MD, PhD; John S. Sampalis, PhD  
Discussant: Marc Bessler, MD

10:45 am  PL-10 GI SYMPTOM IMPROVEMENT POST-ROUX-EN-Y GASTRIC BYPASS: LONG TERM ANALYSIS  
Naveen Ballem, MD; Durgamani Kishore Yellumahanthi, MD, MPH; Joshua Argo, MD; Ronald H. Clements, MD  
Discussant: Jeff Allen, MD

11:00 am  PL-11. LONG-TERM RESULTS AFTER GASTRIC BANDING: 12 YEARS FOLLOWUP  
Konstantinos E. Arapis, MD, PhD; Denis Chosidow, MD; Philippe Mognol, MD; Jean-Pierre Marmuse, MD, PhD  
Discussant: Bruce M. Wolfe, MD

11:15 am  EDWARD E. MASON FOUNDERS LECTURE  
EVIDENCE BASED RECOMMENDATIONS FOR BEST PRACTICES IN WEIGHT LOSS SURGERY  
George L. Blackburn, MD, PhD

12:00 pm  Lunch served in Exhibit Hall
### CONCURRENT SESSIONS

#### WEDNESDAY, JUNE 18
2:00 pm – 4:30 pm

##### VIDEO SESSION
2:00
**V1. GASTRIC POUCH AND STOMA REDUCTION USING A NOVEL ENDOSURGICAL OPERATING SYSTEM**
Marvin Ryou, MD; Lee Swanstrom, MD; Daniel Mullady, MD; David B. Lautz, MD; Marc Bessler, MD; Daniel M. Herron, MD; Christopher C. Thompson, MD

2:10
**V2. THE TRANS-GASTRIC ENDOSCOPIC RENDEZVOUS TECHNIQUE (TGER)**
Shahzeer Karmali, MD; John Sweeney; Vadim Sherman, MD

2:20
**V3. ENDOSCOPIC SCLEROTHERAPY FOR DILATED GASTROJEJUNOSTOMY AFTER GASTRIC BYPASS**
Atul K. Madan, MD; Khurram A. Khan, MD; David S. Tichansky, MD

2:30
**V4. LAPAROSCOPIC RESTORATION OF GASTROINTESTINAL CONTINUITY AFTER DUODENAL SWITCH**
Giovanni Dapri, MD; Guy Bernard Cadière, MD PhD; Jacques Himpens, MD

2:40
**V5. LAPAROSCOPIC CONVERSION OF A DISTAL MINI-GASTRIC BYPASS TO A PROXIMAL ROUX-EN-Y GASTRIC BYPASS FOR MALNUTRITION**
Enrique Arias, MD; Patricio Fajnwaks, MD; Renan Rojas, MD; Samuel Szomstein, MD; Raul Rosenthal, MD

2:50
**V6. TRANSORAL ENDOSCOPIC CLOSURE OF A GASTRIC FISTULA**
Michael Schweitzer, MD; Kimberley E. Steele, MD; Patrick Okolo, MD; Mack Mitchell, MD; Jerome Lyn-Sue, MD

### PRIMARY CLINICIAN’S TRACK

#### WEDNESDAY, JUNE 18
2:00 pm – 4:30 pm

**PRIMARY CARE AND SEVERE OBESITY – WE ARE ALL BARIATRICIANS**

2:00
**INTRODUCTION AND GOAL SETTING**
Sasha Stiles, MD

2:10
**COMORBIDITIES OF SEVERE OBESITY**
Harvey Sugerman, MD

2:30
**PRIMARY CARE INTERFACE – TASKS, FAILINGS, GAPS AND NEEDS**
John Dixon, MD

2:50
**CARDIO-METABOLIC RISK, DIABETES AND METABOLIC SYNDROME**
Sayeed Ikramuddin, MD

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**PLENARY SESSION**, WEDNESDAY, JUNE 18

*Including the ASMBS/TOS Primary Clinician’s Track*
**SESSION THREE continued**

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<th>Time</th>
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| 3:00 | PL-16. | DISAPPOINTING MID-TERM RESULTS AFTER LAPAROSCOPIC GASTRIC BANDING IN YOUNG PATIENTS  
Hermann Neboda, MD; Monika Lanthafer, MD; Helmut Weiss; Michael Sieb, MD; Franz Aigner  
Discussant: James Maher, MD |
| 3:15 | PL-17. | HOW MUCH EWL IS ENOUGH? A BAYESIAN ANALYSIS TO DETERMINE MINIMAL EWL TO DELIVER IMPROVEMENT/RESOLUTION OF CO-MORBIDITIES AFTER LAPAROSCOPIC ADJUSTABLE GASTRIC BANDING IN PATIENTS WITH BMI 30 – 40  
Samuel Sultan, BA; Manish Parikh, MD; Heekoung Youn, MA, RN; Marina Kurian, MD; George Fielding, MD; Christine Ren-Fielding, MD  
Discussant: Kenneth B. Jones, MD |
| 3:30 | PL-18. | PREDICTIVE FACTORS OF SUCCESS AFTER GASTRIC BANDING: A NATIONWIDE SURVEY ON THE ROLE OF PATIENTS BEHAVIOR AND CENTER ACTIVITY  
Jean-Marc Chevallier, MD,PhD; Michel Païta, MD; Michel Marty, MD; Karem Slim, MD; Arnaud Basdevant, MD  
Discussant: John Kellum, MD |
| 3:45 | PL-19. | MANAGEMENT OF MEGAESOPHAGUS AFTER GASTRIC BANDING FOR MORBID OBESITY  
Enrique Arias, MD; Pedro Martinez, MD; Alexander Ramirez, MD; Marin Radulescu, MD; Samuel Szomstein, MD; Raul Rosenthal, MD  
Discussant: Harvey Sugerman, MD |
| 4:00 | PL-20. | LAPAROSCOPIC ADJUSTABLE GASTRIC BANDING DOES NOT CAUSE ESOPHAGEAL DYSMOTILITY  
Veronica Gorodner, MD; Carlos Galvani, MD; Alberto S. Gallo, MD; Santiago Horgan, MD  
Discussant: Kenneth G. MacDonald, MD |

**VIDEO SESSION continued**

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<th>Time</th>
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| 3:00 | V7. | LAPAROSCOPIC GASTRIC BYPASS AFTER PREVIOUS NISSEN FUNDOPLICATION  
Scott Q. Nguyen, MD; Adheesh A. Sabnis, MD; Daniel M. Herron, MD |
| 3:15 | V8. | LAPAROSCOPIC REVISION OF VBG TO RYGB WITH LARGE HIATAL Hernia  
H. Joseph Naim, MD; Mathias A. Fobi, MD |
| 3:30 | V9. | LAPAROSCOPIC MAGENSTRASSE AND MILL PROCEDURE  
Elmer Valin, MD; Ursula McMillian, MD; Kervin Arroyo, MD |
| 3:45 | V10. | LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS IN A PATIENT WITH THE ENTIRE SMALL BOWEL IN A CONGENITAL HERNIA SAC  
Abdelrahman A. Nimeri, MD; Kelvin D. Higa, MD; Keith B. Boone, MD; Alice Jackson, Masters; Ahad Khan, MD |
| 3:50 | V11. | TREATMENT OF CHRONIC OBSTRUCTION AS A LATE COMPLICATION OF AN ADJUSTABLE GASTRIC BAND  
Kevin M. Reavis, MD; Marcelo W. Hinojosa, MD; Brian R. Smith, MD; Ninh T. Nguyen, MD |
| 4:00 | V12. | LAPAROSCOPIC REDUCTION OF SMALL BOWEL INTUSSUSCEPTION IN A 33-WEEK-PREGNANT GASTRIC BYPASS PATIENT  
George M. Eid, MD; Aley El-Din Tohamy, MD |

**PRIMARY CLINICIAN’S TRACK cont.**

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<th>Time</th>
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| 3:30 | V13. | INTUSSUSCEPTION AS A LATE COMPLICATION OF LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS  
Alfredo C. Cordova, MD; Nicholas A. Spinelli, MD; Francis J. Scholz, MD; Dmitry Nepomnayshy, MD |

**THE SURGERIES**

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<th>Time</th>
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<tr>
<td>3:30</td>
<td>GASTRIC SLEEVE</td>
<td>Raul Rosenthal, MD</td>
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<tr>
<td>3:50</td>
<td>LAPAROSCOPIC BANDING AND PRIMARY CARE</td>
<td>Christine Ren-Fielding, MD</td>
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</tbody>
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Continues next page
CONCURRENT SESSIONS

4:15 PL-21. PRE-LAPAROSCOPIC BANDING GROUP EDUCATION IN MEDICAID POPULATION; DOES IT REALLY MAKE A DIFFERENCE? 
Joseph A. Talarico, MD; Alfonso Torquati, MD, MSC; Erin M. McCarthy, MS, RD, LDN; Steven Bonomo, MD; Rami E. Lutfi, MD 
Discussant: Samer Mattar, MD

VIDEO SESSION

Mario Morales, MD; Andrew A. Wheeler, MD; Roger de la Torre, MD; James S. Scott, MD

4:20 V15. LAPAROSCOPIC PLACEMENT OF AN ADJUSTABLE GASTRIC BAND IN A SUPER-SUPER OBESE PATIENT WITH SITUS INVERSUS 
Eric M. Pauli, MD; Irfan Wadiwala, DO; Ann M. Rogers, MD

PRIMARY CLINICIAN’S TRACK

4:10 NEW TECHNOLOGIES 
Scott Shikora, MD

POSTER SESSION

4:30 pm Poster Session in the Exhibit Hall (See listing of posters at end of Plenary Session Information, page 76.)
6:00 pm Adjourn
### PLENARY SESSION*, THURSDAY, JUNE 19

*Including the ASMBS/TOS Primary Clinician’s Track

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#### CONCURRENT SESSIONS

##### SESSION FOUR

**THURSDAY, JUNE 19**

8:00 am – 10:10 am

**GASTRIC BYPASS/SLEEVE GASTRECTOMY**

Moderators: John Dixon, MD; Jaime Ponce, MD

- **7:00 am**  
  Continental Breakfast

- **8:00 am**  
  PL-22. **ELEVATED PARATHYROID HORMONE IS NOT A MARKER FOR PREOPERATIVE BONE LOSS IN MORBIDLY OBESE WOMEN PRESENTING FOR GASTRIC BYPASS**  
  Shannon J. Graewin, MD; Deborah A. Andris, MSN, APNP; Peter R. Nuttleman, MD; James R. Wallace, MD, PhD

- **8:10 am**  
  PL-23. **ANALYSIS OF IRON LEVELS IN MALE BARIATRIC PATIENTS**  
  Peter T. Hallowell, MD; Thomas A. Stellato, MD; John J. Jasper, MD; Margaret M. Schuster, RN, BSN, CBN; Kristen N. Graf, RN, BSN, CBN; Ann A. Robinson, BS

- **8:20 am**  
  William D. Fuller, MD; Jason J. Rasmussen, MD; Mohamed R. Ali, MD

- **8:30 am**  
  PL-25. **PHYSICAL ACTIVITY AND PHYSICAL FUNCTION CHANGES IN OBESE INDIVIDUALS FOLLOWING GASTRIC BYPASS SURGERY**  
  Deborah Josbeno, PT, MS; George M. Eid, MD; John M. Jakicic, PhD; Andrea L. Hergenroeder

- **8:40 am**  
  PL-26. **IMPROVEMENT AND STABILIZATION OF CHRONIC RENAL DISEASE FOLLOWING GASTRIC BYPASS**  
  J. W. Alexander, MD, Sc.D; Hope R. Goodman, MPT; Lisa R. Martin Hawver, MD; Michael A. Cardi, MD

- **8:50 am**  
  PL-27. **THE EFFECT OF LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS ON URINARY INCONTINENCE IN MORBIDLY OBESE WOMEN**  
  Rajesh Laungani, MD; Arthur M. Carlin, MD; Nicole Seleno; Todd Hoffman, BA

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#### PRIMARY CLINICIAN’S TRACK

**THURSDAY, JUNE 19**

8:00 am – 10:00 am

**PREOPERATIVE ASSESSMENT**

- **7:00 am**  
  Continental Breakfast

- **8:00 am**  
  MEDICAL ASSESSMENT – SLEEP DISORDERS AND PULMONARY ASSESSMENTS  
  John Dixon, MD

- **8:20 am**  
  CARDIAC ASSESSMENT  
  Paul Poirier, MD

- **8:40 am**  
  PSYCHIATRIC PREPARATION  
  David Sarwer, PhD

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*Continues next page*
### Plenary Session, Thursday, June 19

**9:00 am**  
John J. Gonzalez, MD; Peter P. Lopez, MD; Kent Van Sickle, MD; Nilesh A. Patel, MD

**9:10 am**  
**PL-29. SIZE REALLY DOES MATTER – RESULTS OF A GASTROJEJEUNAL ANASTOMOTIC TECHNIQUE DESIGNED TO REDUCE STRICTURE BYPASS**  
Milt L. Owens, MD CM; John P. Sczepaniak, BS

**9:20 am**  
**PL-30. LENGTHS OF ROUX AND COMMON CHANNEL LIMBS DO NOT CORRELATE WITH WEIGHT LOSS IN PATIENTS UNDERGOING ROUX-EN-Y GASTRIC BYPASS**  
Thomas S. Helling, MD

**9:30 am**  
**PL-31. FIVE-YEAR OUTCOME WITH GASTRIC BYPASS: ROUX LIMB LENGTH MAKES A DIFFERENCE**  
John J. Gleysteen, MD

**9:40 am**  
**PL-32. LAPAROSCOPIC BILIOPANCREATIC DIVERSION (LBPD) WITHOUT GASTRECTOMY – FIVE-YEAR FOLLOWUP**  
Carlos E. Domene, MD, PhD; Paula Volpe, MD

**9:50 am**  
**PL-33. SLEEVE GASTRECTOMY WITH ENTERAL BYPASS (SGBP), NEW TECHNIQUE FOR MORBID OBESITY. THREE YEARS FOLLOWUP**  
Munir Alamo, MD; Cristian Sepulveda, MD, MPH; Jose Gellona, MD

**10:00 am**  
**PL-34. TWO-YEAR FOLLOWUP OF SLEEVE GASTRECTOMY AS A FINAL APPROACH FOR MORBID OBESITY**  
Pedro Martinez, MD; Ka Ming Vicky Li, MD; Patricio Fajnwaks, MD; Samuel Szomstein, MD; Raul Rosenthal, MD

**10:10 am**  
Refreshment Break served in the Exhibit Hall

### Concurrent Sessions

**SESSION FOUR continued**

<table>
<thead>
<tr>
<th>Time</th>
<th>Title</th>
<th>Presenter(s)</th>
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<tbody>
<tr>
<td>9:00 am</td>
<td>EXERCISE EVALUATION, PREPARATION AND METABOLIC IMPLICATIONS</td>
<td>Harry Pino, PhD</td>
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<td>9:20 am</td>
<td>INTRODUCTION OF A VLCD WITHIN A COMPREHENSIVE BARIATRIC SURGERY PROGRAM</td>
<td>John Hernried, MD</td>
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<td>9:40 am</td>
<td>WHY PREOPERATIVE WEIGHT LOSS?</td>
<td>Ramzi Alami, MD</td>
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<td>10:00 am</td>
<td>CONCLUSIONS</td>
<td>Sasha Stiles, MD</td>
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**9:00 am**  
**EXERCISE EVALUATION, PREPARATION AND METABOLIC IMPLICATIONS**  
Harry Pino, PhD

**9:20 am**  
**INTRODUCTION OF A VLCD WITHIN A COMPREHENSIVE BARIATRIC SURGERY PROGRAM**  
John Hernried, MD

**9:40 am**  
**WHY PREOPERATIVE WEIGHT LOSS?**  
Ramzi Alami, MD

**10:00 am**  
**CONCLUSIONS**  
Sasha Stiles, MD

**10:10 am**  
Refreshment Break served in the Exhibit Hall
THURSDAY, JUNE 19
10:40 am - 12:00 pm

SESSION FIVE: COMPARATIVE STUDIES

Moderators: Giselle Hamad, MD; Daniel B. Jones, MD

10:40 am PL-35. TREATMENT OF VITAMIN D DEPLETION FOLLOWING ROUX-EN-Y GASTRIC BYPASS SURGERY: A RANDOMIZED PROSPECTIVE CLINICAL TRIAL
Arthur M. Carlin, MD; D. S. Rao, MB, BS; Kelli M. Yager, MS, MPH; Nayana J. Parikh, BSc; Alissa Kapke, MS

10:50 am PL-36. THE STATUS OF VENOUS THROMBOEMBOLISM (VTE) PROPHYLAXIS AMONG BARIATRIC SURGEONS: HAVE WE CHANGED OUR PRACTICE DURING THE LAST DECADE?
Carlos A. Barba, MD; Carolyn Harrington, PA-C; Mark Loewen, MD

11:00 am PL-37. PROPHYLACTIC MEASURES TO REDUCE THE RISK OF VENOUS THROMBOEMBOLISM IN BARIATRIC SURGERY: CHEMOPROPHYLAXIS ADDED TO SEQUENTIAL COMPRESSION MAY NOT REDUCE THIS RISK WHEN COMPARED TO SEQUENTIAL COMPRESSION ALONE
Michel Gagner, MD; Faith Selzer; Gladys Strain, PhD; Marc Bessler, MD; Anita P. Courcoulas, MD; Gregory Dakin, MD; David R. Flum, MD, MPH; Jeffrey A. Hunter, MD; William B. Inabnet, MD; Jim Mitchell, MD; Alfons Pomp, MD

11:10 am PRESIDENTIAL ADDRESS
Kelvin D. Higa, MD

12:00 pm Lunch served in the Exhibit Hall

CONCURRENT SESSIONS

SESSION SIX

THURSDAY, JUNE 19
2:00 pm - 3:30 pm

GENERAL INTEREST/OUTCOMES STUDIES
Moderators: William Inabnet, MD; Shanu N. Kothari, MD

2:00 pm PL-38. LOW SURGICAL VOLUMES IN HOSPITALS THAT MEET SURGICAL REVIEW CORPORATION (SRC) BARIATRIC SURGERY CENTER OF EXCELLENCE (BSCOE) MINIMUM STANDARDS DO NOT DEMONSTRATE AN ADVERSE IMPACT ON SURGICAL OUTCOMES
Chris A. Learn, PhD; Gail D. Hughes, MPH, Dr.PH; Eric J. DeMaria, MD; Harvey J. Sugerman, MD; Bobby L. Clark, PhD; Gary M. Pratt, BA; Walter Pories, MD
Discussant: Scott Shikora, MD

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<tr>
<td>2:15 pm</td>
<td><strong>PL-39. REPRODUCTIVE HEALTH CHARACTERISTICS OF WOMEN UNDERGOING BARIATRIC SURGERY</strong></td>
<td>Gabriella G. Gosman, MD;</td>
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<td>Wendy C. King, PhD;</td>
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<td>Beth Scharpe, MD, PhD;</td>
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<td>Gladys Witt Strain;</td>
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<td>Hyagriv N. Simhan, MD;</td>
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<td>2:30 pm</td>
<td><strong>PL-40. DOES LIVER APPEARANCE CORRELATE WITH HISTOPATHOLOGY?: A PROSPECTIVE ANALYSIS OF ROUTINE LIVER BIOPSIES DURING BARIATRIC SURGERY</strong></td>
<td>Charles J. Dolce, MD;</td>
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<td>Jennifer E. Keller, MD;</td>
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<td>Jay Buckingham, BS;</td>
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<td>Keith S. Gersin, MD;</td>
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<td>Timothy S. Kawada, MD;</td>
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<td>Discussant: Paul E. O’Brien, MD</td>
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<td>2:45 pm</td>
<td><strong>PL-41. LONGITUDINAL MIXED MODELS IMPROVE THE ANALYSIS OF WEIGHT LOSS OUTCOMES AFTER BARIATRIC SURGERY</strong></td>
<td>Ramsey M. Dallal, MD;</td>
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<td>Leonard E. Braitman, PhD;</td>
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<td>Lacy H. Hunt, MS;</td>
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<td>Brian B. Quebbemann, MD;</td>
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<td>Discussant: Robert Brolin, MD</td>
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<td>3:00 pm</td>
<td><strong>PL-42. VAGAL BLOCKING FOR OBESITY CONTROL (VBLOCTM): ONGOING COMPARISON OF WEIGHT LOSS WITH TWO GENERATIONS OF AN ACTIVE, IMPLANTABLE MEDICAL DEVICE</strong></td>
<td>James Touli, MD, PhD;</td>
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<td>Baard Kulseng, MD, PhD;</td>
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<td>Ulrich Keller;</td>
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<td>Lilian Kow, MD, PhD;</td>
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<td>Ronald Marvik;</td>
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<td>Katherine S. Twedens;</td>
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<td>Richard R. Wilson, MD;</td>
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<td>Charles J. Billington, MD</td>
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<td>Frank G. Moody, MD</td>
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<td>Discussant: Bill Richards, MD</td>
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<td>3:15 pm</td>
<td><strong>PL-43. EFFECT OF IMMUNOSUPPRESSION ON PATIENTS UNDERGOING WEIGHT LOSS SURGERY</strong></td>
<td>Elizabeth A. Dovec, MD;</td>
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<td>Pavlos K. Papasavas, MD;</td>
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<td>Daniel J. Gagné, MD;</td>
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<td>Jorge E. Urbandt, MD;</td>
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<td>Philip F. Caushaj, MD;</td>
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<td>Discussant: Christine Ren-Fielding, MD</td>
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<td>3:30 pm</td>
<td>Refreshment Break served in the Exhibit Hall</td>
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<td>4:00 pm</td>
<td><strong>Adjourn to ASMBS Business Meeting</strong></td>
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FRIDAY, JUNE 20
8:00 am – 10:00 am

7:00 am  Continental Breakfast

SESSION SEVEN: EMERGING MEDICAL TECHNOLOGIES/BASIC RESEARCH
Moderators: John M. Morton, MD; Marina S. Kurian, MD

8:00 am  PL-44. ENDOLUMINAL PROCEDURES FOR BARIATRIC PATIENTS: EXPECTATIONS AMONG BARIATRIC SURGEONS
Stacy A. Brethauer, MD; Aurora D. Pryor, MD; Bipan Chand, MD; Philip R. Schauer, MD; Raul Rosenthal, MD; William O. Richards, MD; Marc Bessler, MD

8:10 am  PL-45. TRANSORAL REVISION OF DILATED GASTRO-JEJUNOSTOMY ANASTOMOSIS AFTER GASTRIC BYPASS SURGERY
Alfonso Torquati, MD, MSCI; Sherry S. Kernodle, M.Ed., RD; Joan L. Kaiser, MA, RN; Augustin R. Attwell, MD

8:20 am  PL-46. A RODENT MODEL OF METABOLIC SURGERY FOR THE STUDY OF TYPE 2 DIABETES AND PET SCANNING OF BETA CELL MASS
William B. Inabnet, MD; Luca Milone, MD; Evren Durak, MD; Leaque Ahmed, MD, FACS; Judith Korner, MD, PhD; Marc Bessler, MD; Paul E. Harris

8:30 am  PL-47. BARIATRIC SURGERY MAY ENHANCE ENERGY-EFFICIENT AEROBIC METABOLISM
Hector J. Menchaca, MD; Van N. Michalek, BA; Thomas D. Rohde, MS; Henry Buchwald, MD, PhD

8:30 am  PL-48. GASTRIC ELECTRICAL STIMULATION WITH TANTALUS® IMPROVES GLYCEMIC CONTROL IN OVERWEIGHT SUBJECTS WITH TYPE 2 DIABETES
Arthur Bohdjalian; Bernhard Ludvik; David Nocca; Eric Renard, MD, PhD; Bruno Guerci; Laurent Bessler; Ahmad Assalia, MD; Eddy Karnieli, MD; Rudolf Prager; Gerhard Prager

8:40 am  PL-49. ALTERATIONS IN CENTRAL BRAIN DOPAMINE RECEPTORS BEFORE AND AFTER LAPAROSCOPIC ROUX-EN Y GASTRIC BYPSS
Kimberly E. Steele, MD; Michael Schweitzer, MD; Thomas Magnuson, MD; Jerome Lyn-Sue, MD; Dean Wong; Gregory Prokopowicz, MD MPH; Dene Noppenberger

8:50 am  PRESENTATION OF AWARDS

9:15 am  BASIC SCIENCE/CLINICAL RESEARCH LECTURE
Appetite for Hunger: It’s All in Your Head
Arya M. Sharma, MD/PhD, FRCPC

10:00 am  Refreshment Break
## CONCURRENT SESSIONS

### FRIDAY, JUNE 20
10:30 am – 1:00 pm

### COMPLICATIONS/REVISIONAL SURGERY

Moderators: David A. Provost, MD; Michel Murr, MD

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<th>Discussant</th>
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<tr>
<td>10:30</td>
<td>PL-50. PATTERNS OF SHORT-TERM READMISSION-REOPERATION FOLLOWING ROUX-EN-Y GASTRIC BYPASS (RYGB)</td>
<td>Todd A. Kellogg, MD; Daniel B. Leslie, MD; Therese Swan, BA; Sayeed Ikramuddin, MD</td>
<td>John J. Gleysteen, MD</td>
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<td>10:45</td>
<td>PL-51. CAN A SHORT COURSE OF PROPHYLACTIC LOW DOSE PROTON PUMP INHIBITOR THERAPY PREVENT STOMAL ULCERATION AFTER LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS?</td>
<td>Mathieu D'Hondt, MD; Dirk D. Devriendt, MD; Frank Van Rooy, MD; Franky Vansteenkiste, MD; Hans Pottel, PhD; Matthias Steverynck, Medical Student; Lieselot Desplentere, Medical Student; Eva Simoens, Medical Student</td>
<td>Philip R. Schauer, MD</td>
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<tr>
<td>11:00</td>
<td>PL-52. MARGINAL ULCER AFTER 1,792 LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS (RYGB) PROCEDURES: INCIDENCE, MEDICAL AND SURGICAL TREATMENT, AND COMPLICATIONS</td>
<td>Jonathan A. Hata, MD; Eric J. DeMaria, MD; Dana D. Portenier, MD; John Grant, MD; Aurora D. Pryor, MD</td>
<td>Bruce E. Schirmer, MD</td>
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<td>11:15</td>
<td>PL-53. REVISIONAL OPERATIONS FOR MARGINAL ULCER AFTER ROUX-EN-Y GASTRIC BYPASS</td>
<td>Rohit A. Patel, MD; Robert E. Brolin, MD; Alok D. Gandhi, DO</td>
<td>Benjamin E. Schneider, MD</td>
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<td>11:30</td>
<td>PL-54. BILE REFLUX FOLLOWING ROUX-EN-Y GASTRIC BYPASS: AN UNRECOGNIZED CAUSE OF POST-OPERATIVE PAIN</td>
<td>Daniel E. Swartz, MD; Elijah Mobley, MD; Edward L. Felix, MD</td>
<td>Michael A. Schweitzer, MD</td>
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<td>11:45</td>
<td>PL-55. INTERNAL HERNIA AT PETERSEN’S SPACE AFTER LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS: 4.2% INCIDENCE WITHOUT CLOSURE. A SINGLE SURGEON’S SERIES OF 1300 CASES</td>
<td>Roc W. Bauman, MD; Jon R. Pirrello, MD</td>
<td>John W. Baker, MD</td>
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### PRIMARY CLINICIAN’S TRACK

### EXTRAORDINARY OUTCOMES

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<tbody>
<tr>
<td>10:30</td>
<td>ADOLESCENT ISSUES</td>
<td>Tom Inge, MD</td>
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<tr>
<td>10:50</td>
<td>BENEFICIAL EFFECT OF BARIATRIC SURGERY ON OFFSPRINGS</td>
<td>Picard Marceau, MD</td>
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<td>11:10</td>
<td>ECONOMICS OF BARIATRIC SURGERY</td>
<td>Scott Shikora, MD</td>
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<td>11:30</td>
<td>PREOPERATIVE RISK STRATIFICATION AND POSTOP OUTCOMES</td>
<td>Eric DeMaria, MD</td>
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<td>11:50</td>
<td>DIABETES</td>
<td>John Dixon, MD</td>
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### PLENARY SESSION*, FRIDAY, JUNE 20  
*Including the ASMBS/TOS Primary Clinician’s Track*

#### PL-56. LAPAROSCOPIC CONVERSION OF ADJUSTABLE GASTRIC BANDING INTO SLEEVE GASTRECTOMY  
**Giovanni Dapri, MD; Guy Bernard Cadière, MD PhD; Jacques Himpens, MD**  
Discussant: Barry Fisher, MD

#### PL-57. ADJUSTABLE GASTRIC BANDING AS A REVISIONAL BARIATRIC PROCEDURE AFTER FAILED GASTRIC BYPASS – INTERMEDIATE RESULTS  
**Marc Bessler, MD; Amna Daud, MD, MPH; William B. Inabnet, MD; Beth Schrope, MD, PhD; Daniel Davis, DO**  
Discussant: Eric DeMaria, MD

#### PL-58. FAILED VERTICAL BANDED GASTROPLASTY (VBG) – ADJUSTABLE GASTRIC BANDING OR ROUX-EN-Y GASTRIC BYPASS: A PROSPECTIVE LONG-TERM FOLLOWUP STUDY  
**Karl A. Miller, MD; Hell E, MD, Pomp A, MD, Hallein**  
Discussant: Alfonso Torquati, MD

#### PL-59. ADJUSTABLE GASTRIC BAND PLACED ABOVE GASTRIC BYPASS POUCH AS A REVISION OPERATION FOR FAILED GASTRIC BYPASS  
**Philip L. Chin, MD; Mir B. Ali, MD; Kelly Francis, MD; Peter C. Leport, MD**  
Discussant: Barry Fisher, MD

#### ADJOURN

#### WHAT HAVE WE MISSED?  
**LONG-TERM PSYCHOLOGICAL AND BEHAVIORAL ISSUES**  
*Melissa Kalarchian, PhD*

#### THE ROLE OF PLASTIC SURGERY  
*J. Peter Rubin, MD*

#### ISSUES OF LONG-TERM FOLLOWUP, PRIMARY CARE ROLE AND CONCLUSIONS  
*Sasha Stiles, MD*
The Following Presentations will be considered for the
BARIATRIC SURGERY FELLOW SCHOLARSHIP BY KARL STORZ ENDOSCOPY-AMERICA

BARIATRIC SURGERY IN MEDICARE PATIENTS (MP): HIGHER RISKS BUT SUBSTANTIAL BENEFITS
Xiang Yuan, MD; Lisa R. Martin Hawver, MD; Peter Ojo, MD; Luke Wolfe, MS; Jill Meador, BSN, CBN;
John M. Kellum, MD; James W. Maher, MD Presented on Wednesday, June 18, at 10:00 am.

COMPARATIVE EXCESS BODY WEIGHT LOSS FROM LAPAROSCOPIC ADJUSTABLE GASTRIC BAND
AND LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS IN A U.S. CENTER OVER THREE YEARS
David B. Lautz, MD; Richard S. Flint, MD; Thien K. Nguyen, MD; Kerri A. Clancy, RN, CBN;
Ashley H. Vernon, MD; Ali Tavakkolizadeh, MD; Malcolm K. Robinson, MD; Edward C. Mun, MD;
Todd D. Neal Presented on Wednesday, June 18, at 2:15 pm.

ROUTINE FLUOROSCOPIC IMAGING DURING LAPAROSCOPIC ADJUSTABLE GASTRIC BAND
ADJUSTMENT RESULTS IN SIGNIFICANT ALTERATIONS IN CLINICAL CARE
Matthew Kroh, MD; Nancy E. Duleley, ADN; Stacy A. Brethauer, MD; Tomasz Rogula, MD, PhD;
Philip R. Schauer, MD; Bipan Chand, MD Presented on Wednesday, June 18, at 2:30 pm.

ELEVATED PARATHYROID HORMONE IS NOT A MARKER FOR PREOPERATIVE BONE LOSS IN
MORBIDLY OBESE WOMEN PRESENTING FOR GASTRIC BYPASS
Shannon J. Graewin, MD; Deborah A. Andris, MSN, APNP; Peter R. Nuttleman, MD;
James R. Wallace, MD, PhD Presented on Thursday, June 19, at 8:00 am.

2007 JOHN HALVERSON YOUNG INVESTIGATOR AWARD WINNER
Cindy Lee, BS
University of Southern California, Los Angeles, CA USA

2007 KARL STORZ ENDOSCOPY-AMERICA
BARIATRIC SURGERY FELLOW SCHOLARSHIP WINNER
Michael C. Harnisch, MD
Brooke Army Medical Center, San Antonio, TX USA

2007 OUTSTANDING POSTER AWARD WINNERS
Hazem A. Elariny, MD, PhD
Advanced Laparoscopic and General Surgery Associates, Vienna, VA USA

Laurie Spaulding, MD
Fletcher Allen Health Care, Burlington, VT USA
The Following Presentations will be considered for
THE JOHN HALVERSON YOUNG INVESTIGATOR AWARD

IS ROUX-EN-Y GASTRIC BYPASS (RYGB) FOR TYPE 2 DIABETES MELLITUS (T2DM) REALLY METABOLIC SURGERY? THE IMPORTANCE OF THE BARIATRIC IMPACT OF SURGERY
Brian Kadera, BS; John Grant, MD; Aurora D. Pryor, MD; Dana D. Portenier, MD; Eric J. DeMaria, MD
Presented on Wednesday, June 18, at 8:00 am.

IMPACT OF LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS ON HGA1C CONCENTRATIONS IN PATIENTS WITH DIABETES: A MATCHED COHORT ANALYSIS
Daniel D. Mumme, MD; Michelle A. Mathiason, MS; Kara J. Kallies, BA; Shanu N. Kothari, MD
Presented on Wednesday, June 18, at 9:00 am.

LAPAROSCOPIC BARIATRIC SURGERY AND MALIGNANT DISEASES
Majed Maalouf, MD; Pavlos K. Papasavas, MD; Daniel J. Gagne, MD; Jorge E. Urbandt, MD; Philip F. Caushaj, MD
Presented on Wednesday, June 18, at 10:15 am.

HOW MUCH EWL IS ENOUGH? A BAYESIAN ANALYSIS TO DETERMINE MINIMAL EWL TO DELIVER IMPROVEMENT/RESOLUTION OF COMORBIDITIES AFTER LAPAROSCOPIC ADJUSTABLE GASTRIC BANDING IN PATIENTS IWHT BMI 30-40
Samuel Sultan, BA; Manish Parikh, MD; Heekoung Youn, MA, RN; Marina Kurian, MD; George Fielding, MD; Christine Ren-Fielding, MD
Presented on Wednesday, June 18, at 3:15 pm.

PRE-LAPAROSCOPIC BANDING GROUP EDUCATION IN MEDICAID POPULATION; DOES IT REALLY MAKE A DIFFERENCE?
Joseph A. Talarico, MD; Alfonso Torquati, MD, MCSI; Erin M. McCarthy, MS, RD, LDN; Steven Bonomo, MD; Rami E. Lutfi, MD
Presented on Wednesday, June 18, at 4:15 pm.

THE EFFECT OF LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS ON URINARY INCONTINENCE IN MORBIDLY OBESE WOMEN
Rajesh Laungani, MD; Arthur M. Carlin, MD, FACS; Nicole Seleno; Todd Hoffman, BA
Presented on Thursday, June 19, at 8:50 am.

EFFECT OF IMMUNOSUPPRESSION ON PATIENTS UNDERGOING WEIGHT LOSS SURGERY
Elizabeth A. Dovec, MD; Pavlos K. Papasavas, MD; Daniel J. Gagne, MD; Jorge E. Urbandt, MD; Philip F. Caushaj, MD
Presented on Thursday, June 19, at 3:15 pm.
P1. OUTCOMES OF LAPAROSCOPIC FUNDOPLICATION VS. LAPAROSCOPIC GASTRIC BYPASS IN MORBIDLY OBESE WITH GASTROESOPHAGEAL REFLUX DISEASE  
Esteban Varela, MD, MPH; Marcelo W. Hinojosa, MD; Ninh T. Nguyen, MD

P2. CENTRAL VENOUS LINE PLACEMENT PRIOR TO GASTRIC BYPASS IMPROVES O.R. EFFICIENCY  
David W. Overby, MD; Karen Colton, RN; Joseph M. Stavas, MD; Robert G. Dixon, MD; Timothy M. Farrell, MD

P3. A SURGICAL ADHESIVE INCREASES BURST PRESSURE AND SEALS LEAKS IN STAPLED GASTROJEJUNOSTOMY  
Govind Nandakumar, MD; Bryson Richards, BA; Koiana Trencheva, BSN; Gregory Dakin, MD

P4. PATIENT-CENTERED CARE (PCC) AND ITS EFFECT ON GASTRIC BYPASS PATIENTS’ LEVEL OF SATISFACTION UPON DISCHARGE  
Debra M. Wülf, PhDc, MSN, BSN, RN; Lisa Lehman, BSN, RN; Robert Quinlin, MD

P5. RE-DO SURGERY OF FAILURES AND COMPLICATIONS AFTER RESTRICTIVE PROCEDURES: 10 YEARS EXPERIENCE ON 132 PATIENTS  
Stefano Cariani, MD; Laura Agostinelli; Luca Leuratti; Eleonora Giorgini; Enrico Amenta

P6. PREDICTING SLEEP APNEA IN BARIATRIC SURGERY PATIENTS  
Ronette L. Kolotkin, PhD; James M. Walker, MD; Tom V. Cloward, MD; Robert J. Farney, MD; Ross D. Crosby, PhD; Richard E. Gress, MA; Steven C. Hunt, PhD; Ted D. Adams, PhD

P7. GAYET-WERNICKE ENCEPHALOPATHY CAUSED BY ROUX-EN-Y GASTRIC BYPASS FOR MORBID OBESITY  
Elie K. Chouillard, MD; Claude H. Tayar; Philippe Mognol, MD

P9. LAPAROSCOPIC MESH REPAIR OF A GIANT HIATUS HERNIA WITH SIMULTANEOUS LAPAROSCOPIC ADJUSTABLE GASTRIC BANDING – 18-MONTH OUTCOME  
John G. Zografakis, MD; Stephanie Valente, DO; Adiran G. Dan, MD; Debbie D. Pasini, RN, BSN

P11. SHORT-TERM RESULTS OF LAPAROSCOPIC ADJUSTABLE GASTRIC BANDING IN A LOW BMI (30-35) POPULATION  
Robert L. Michaelson, MD, PhD; Jessie H. Ahroni, PhD, ARNP; Kevin F. Montgomery, MD

P12. LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS (LRYGBP) AS A REVISION PROCEDURE  
Hugo A. Sanchez, MD; Karina Cabrera; Maureen Mosti; Carlos Zerrweck; Mauricio Sierra, MD; Guillermo Dominguez, MD; Miguel F Herrera, MD

P13. IMPROVEMENT IN COMORBID CONDITIONS AFTER GASTRIC BYPASS: PATIENT-REPORTED OUTCOMES  
Kira L. Ryskina, B.A.; Kenneth M. Miller, MD; James Aisenberg, MD; Daniel M. Herron, MD; Subhash U. Kini, MD

P17. MUCOSAL AND SEROSAL ISCHEMIA AFTER GASTRIC STAPLING AS DETERMINED BY A NEW ‘REAL TIME’ NON-INVASIVE TISSUE SURFACE PROBE MEASURING TISSUE OXYGENATION  
Gevorg Mutafyan, MD; Christopher J. Myers, MD; Aurora D. Pryor, MD; James D. Reynolds, PhD; Eric J. DeMaria, MD

P18. USE OF THE DA VINCI ROBOT IN LAP BAND® SURGERY: INITIAL DATA FROM A RETROSPECTIVE REVIEW  
Michael Johnell, MD FACS; Paula Shellenbarger, MSN, FNP-C; Edward Amend, RRT, MBA; Steve Toth, MS, PA-C; Rebecca Roberts, RN; Carol Runge, LPN

P20. PRIMARY LAPAROSCOPIC GASTRIC BYPASS (LGBP) CAN BE PERFORMED SAFELY IN PATIENTS WITH BMI > 60 KG/M2  
Deborah Abeles, MD; Julie Kim, MD; Michael Tarnoff, MD; Sajani Shah, MD; Scott A. Shikora, MD

P25. BARIATRIC PATIENT HANDLING PRESENTS CAREGIVERS WITH HEIGHTENED RISK OF INJURY  
Stephen B. Randall, BS

P26. ADDRESSING POSTOPERATIVE NEEDS IN THE FIRST 24 HOURS FOR THE BARIATRIC WEIGHT LOSS SURGERY PATIENT; A NURSING PERSPECTIVE  
Jennifer Drake; Azmi Kukic, RN BSN
P27. VARIATION IN SURGICAL TECHNIQUE WITH LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS - RESULTS FROM THE MICHIGAN BARIATRIC SURGERY COLLABORATIVE
Jonathan F. Finks, MD; Arthur M. Carlin, MD, FACS; Tallal Zeni, MD; Steve C. Poplawski, MD; Andre Nunn, MD; Jeffrey Genaw; Kevin R. Krause, MD; Andrea M. Osborne, MS; Hong Ji, MS; John Birkmeyer, MD; Nancy Birkmeyer, PhD

P28. LAPAROSCOPIC SLEEVE GASTRECTOMY WITH DUODENAL JEJUNAL BYPASS
Kazunori Kasama, MD; Eiji Kanehira, MD, PhD; Takashi Oshiro, MD; Akiko Umezawa, MD; Yuka Negishi, MD; Yoshimochi Kurokawa, MD

P29. METABOLIC OVER-ADAPTATION TO CALORIE RESTRICTION AFTER ROUX-EN-Y GASTRIC BYPASS DOES NOT PREDICT THE ONE-YEAR WEIGHT LOSS
Patrick Ritz, MD, PhD; Guillaume Becouarn, MD; Philippe Topart, MD

P30. ONE-YEAR WEIGHT LOSS AFTER PRIMARY OR REVISIONAL ROUX-EN-Y GASTRIC BYPASS FOR FAILED ADJUSTABLE GASTRIC BANDING
Philippe Topart, MD; Guillaume Becouarn, MD; Patrick Ritz, MD, PhD

P31. ROUX-EN-Y GASTRIC BYPASS AND THE DEVELOPMENT OF LEUKOPENIA/ATYPICAL INFECTIONS
Caliste Hsu, MD; John Monk, MD

P32. RETRIEVABLE INFERIOR VENA CAVA FILTERS AND EXTENDED PHARMACOLOGIC PROPHYLAXIS IN HIGH-RISK BARIATRIC SURGERY PATIENTS
Marilyn Borkgren-Okonek, MS; Robert W. Hart, MD; Jonathan W. Wallace, MD; James M. Kane, MD; Peter C. Rantis, MD

P33. RELATION BETWEEN DEGREE OF WEIGHT LOSS AFTER BARIATRIC SURGERY AND REDUCTION IN HIGH SENSITIVITY C-REACTIVE PROTEIN
Varun Agrawal, MD; Kevin R. Krause, MD; David L. Chengelis, MD; Kerstyn Zalesin, MD; Leslie Rocher, MD; Peter A. McCullough, MD, MPH

P34. GENERAL ANESTHESIA VIA LARYNGEAL MASK AIRWAY IN LAPAROSCOPIC ADJUSTABLE GASTRIC BANDING (LAGB)
Mirto Foletto, MD; Paolo Bernante, MD; Michele Carron; Federico Innocente; Ulderico F. Freo, MD

P35. OBESITY IS ASSOCIATED WITH INCREASED PREVALENCE AND SEVERITY OF PELVIC FLOOR DISORDERS
Chi Chiung Grace Chen, MD; Cheryl Williams; Linda D. McElrath; Matthew D. Barber, MD; Philip R. Schauer, MD; Stacy A. Brethauer, MD

P36. LAPAROSCOPIC BANDING PROLAPSE LEADING TO CHRONIC GASTRIC STRANGULATION
Danny A. Sherwinter, MD; Jerzy M. Macura, MD; Harry L. Adler, MD

P37. GASTROJEJUNAL ANASTOMOTIC COMPLICATIONS USING 45-MM VERSUS 60-MM LINEAR STAPLER IN OVER 500 PATIENTS UNDERGOING LAPAROSCOPIC RYGB
Christopher C. Pfeifer, DO; Jon D. Gabrielsen, MD; Iswanto Sucandy, MD; Todd Buchanan, BS; Anthony T. Petrick, MD

P38. OUTCOMES AND COMPLICATIONS IN PATIENTS UNDERGOING LAPAROSCOPIC GASTRIC BANDING AT HENNEPIN COUNTY MEDICAL CENTER
Eric J. Saterbak, MD

P39. INTUSSUSCEPTION AFTER GASTRIC BYPASS: REPORT OF 7 CASES, WITH RECOMMENDATIONS FOR A NEW TREATMENT MODALITY
Anthony M. Gonzalez, MD; Jorge R. Rabaza, MD; Juan-Carlos Verdeja, MD; Juan-Carlos Diez, MD; Prasuna Inampudi, MD

P40. SLEEVE GASTRECTOMY GIVES EXCELLENT SHORT-TERM WEIGHT LOSS IN PATIENTS WITH LOW-GRADE OBESITY (BMI 30-35)
Dag Arvidsson, MD, PhD; Thanos Kakoulidis, MD; Åsa Karringer; Tina Gloaguen; Maria Palmquist

P41. THE LAP-BAND® AP SYSTEM: AN EVALUATION OF COMPARATIVE EFFECTIVENESS WITH EARLIER BANDS
Paul E. O’Brien, MD; Wendy Brown, MBBS, PhD, FRACS; Paul Burton, FRACS; Margaret L. Anderson, BHIM, Grad Dip HA

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P42.
ENDOSCOPIC TREATMENT OF SYMPTOMATIC INTRALUMINAL MIGRATED MARLEX MESH IN BANDED ROUX-EN-Y GASTRIC BYPASS
Hosein Yasrebi, MD, FACS; Bharat K. Misra, MD

P43.
WHY ARE PATIENTS REJECTED FROM AN ACADEMIC WEIGHT LOSS SURGERY PROGRAM?
Shawn Tsuda, MD; Limaris Barrios, MD; Benjamin E. Schneider, MD; Daniel B. Jones, MD

P44.
SAFETY AND EFFICACY OF SIMULTANEOUS CHOLECYSTECTOMY AT THE TIME OF ROUX-EN-Y GASTRIC BYPASS
Jin-Jo Kim, MD; Bruce D. Schirmer, MD

P45.
PERCEIVED BARRIERS TO BARIATRIC SURGERY AMONG MORBIDLY OBSESE PATIENTS
Bianca B. Afonso, MD; Samuel Szomstein, MD; Raul Rosenthal, MD

P46.
OUTCOMES OF BARIATRIC SURGERY IN PATIENTS WITH BMI LESS THAN 35 KG/M2
Patricio Fajnwooks, MD; Alexander Ramirez, MD; Pedro Martinez, M.D.; Enrique Arias, MD; Samuel Szomstein, MD; Raul Rosenthal, MD

P47.
CONTINUOUS POSITIVE AIRWAY PRESSURE (CPAP) IN THE IMMEDIATE POSTOPERATIVE PERIOD AFTER LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS: IS IT SAFE?
Alexander Ramirez, MD; Peter F. Lalor, MD; Samuel Szomstein, MD; Raul Rosenthal, MD

P48.
REASONS FOR TACHYCARDIA IN THE POSTOPERATIVE PERIOD OF PATIENTS UNDERGOING LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS
Iswanto Sucandy, MD; Pedro Martinez, MD; Samuel Szomstein, MD; Raul Rosenthal, MD

P51.
EATING BEHAVIOR PATTERNS AND WEIGHT LOSS ONE YEAR AFTER LAPAROSCOPIC BANDING SURGERY
Adam B. Smith, DO; Susan F. Franks, PhD; Kathryn A. Kaiser, BS; Joan F. Carroll, PhD

P52.
LAPAROSCOPIC SLEEVE Gastrectomy VERSUS INTRAGASTRIC BALLOON: A CASE-CONTROL STUDY
Massimiliano Cipriano, MD; Massimiliano Cipriano, MD; Alberto Materia, MD; Vincenzo Bacci, MD; Roberta Maselli, MD; Luca Musmeci, MD; Michele Lorenzo, MD, PhD; Nicola Basso, MD

P53.
HAND-SEWN GASTROJEJUNOSTOMY IS ASSOCIATED WITH FEWER ANASTOMOTIC COMPLICATIONS THAN LINEAR STAPLED ANASTOMOSIS IN RYGB
Jon D. Gabrielsen, MD; Christopher C. Pfiefer, DO; Iswanto Sucandy, MD; Yasir Akmal, MD; Hazem El-Arousy, MD; Heather King, MD; Horatiiu Dancea, MD; Peter N. Benotti, MD; William Strodel, MD; Anthony T. Petrick, MD

P54.
LAPAROSCOPIC VERTICAL SLEEVE GASTRECTOMY: EFFICACY OF USING BIOABSORBABLE SEAMGUARD
Patrick M. Chiasson, MD; Stephen E. Burpee, MD

P55.
VARIABILITY OF POUCH AREA AND GASTROJEJUNOSTOMY SIZE IN PATIENTS UNDERGOING HAND-SEWN LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS (RYGBP)
Rocio Perez-Johnston, MD; Armando Lopez-Ortiz, MD; Luis F. Alva-Lopez, MD; Karina Cabrera; Maureen Mosti; Mauricio Sierra, MD; Sofia Sanchez-Leenheer, MD; David Velazquez, MD, MS, PhD; Miguel F Herrera, MD

P56.
ONE OR TWO STAGES BPD-DS?
Daniel R. Krawczykowski, MD

P57.
IMPACT OF LAPAROSCOPIC ADJUSTABLE GASTRIC BANDING ON CALORIC INTAKE, BEHAVIORAL AND PSYCHOLOGICAL CHANGES IN OBESE ADOLESCENTS
Mary Ann Witt, DNsC; Janet Schauben; Mike Devlin; Elizabeth B. Finkelsson, BA; Jason C. Fisher, MD; Jeffrey Zitsman, MD
P58.
THE EFFECT OF GASTRIC BYPASS ON VITAMIN D
Carina Signori, DO; Kertyn Zalesin, MD; Miller M. Wendy, MD; Tamika L. Washington, MPA; Kevin R. Krause, MD; David L. Chengelis, MD; Peter A. McCullough, MD, MPH

P59.
FIBRIN SEALANT IS ASSOCIATED WITH AN INCREASED INFLAMMATORY RESPONSE AND ABSCESSED FORMATION AFTER GASTRIC BYPASS
Nicolas V. Christou, MD, PhD

P60.
BARIATRIC SURGERY EXPERIENCE OF 1650 CASES AS PART OF A GENERAL SURGICAL PRACTICE: ARE OUTCOMES AS GOOD?
Anthony M. Gonzalez, MD; Jorge R. Rabaza, MD; Juan-Carlos Verdeja, MD; Enrique Whittwell, MD

P61.
QUALITY OF LIFE IMPROVEMENT AFTER ROUX-EN-Y GASTRIC BYPASS: LONG-TERM SF-36 DATA
Naveen Ballem, MD; Durgamani Kishore Yellumahanthi, MD, MPH; Mary Wesley, MPH; Ronald H. Clements, MD

P62.
WHAT BARIATRIC PROCEDURE WOULD ASMBS MEMBERS CHOOSE FOR THEMSELVES?
Kimberley E. Steele, MD; Lisa Eaton, BA; Jerome Lyn-Sue, MD; Thomas Magnuson, MD; Gregory Prokopowicz, MD MPH; Anne Lidor, MD; Michael Schweitzer, MD

P63.
THE PRESENCE OF PARIETAL CELLS IN SMALL POUCHES MAY CONTRIBUTE TO MARGINAL ULCERATION AFTER GASTRIC BYPASS SURGERY
Gail M. Wynn, MD; Isaias Irgau, MD1; Michael Peters, MD2

P65.
COMPARISON BETWEEN LAPAROSCOPIC ADJUSTABLE GASTRIC BANDING (LAGB) AND LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS (LRYGB) IN POST-MENOPAUSAL FEMALES > 55 YEARS OLD
Mitchell S. Roslin, MD; Paresh C. Shah, MD; Mary Lou Walen; Christopher Diefenbach, MS

P66.
LAPAROSCOPIC ADJUSTABLE GASTRIC BANDING (LAGB) IN MORBID OBSESE ADOLESCENT PATIENTS IS ASSOCIATED WITH IMPROVEMENT OF SELF- AND PARENT-PROXY ASSESSMENT OF QUALITY OF LIFE
Alberto S. Gallo, MD; Lisa Tussing-Humphreys, MS, RD; Mark J. Holterman, MD, PhD; Ai-Xuan Holterman, MD; Nancy Browne, CPNP, CBN; Allen Browne, MD
P77. POSTOPERATIVE NAUSEA AND VOMITING IN HIGH-RISK BARIATRIC PATIENTS UNDERGOING SLEEVE GASTRECTOMY
Ramy H. Fouad, MD; Patrick Gatmaitan, MD; Stacy A. Brethauer, MD; Karen Cooper, MD; Philip R. Schauer, MD; Bipan Chand, MD

P78. EARLY JEJUNOJEJUNOSTOMY OBSTRUCTIONS FOLLOWING LAPAROSCOPIC GASTRIC BYPASS: CASE SERIES AND TREATMENT ALGORITHM
Candice M. Jensen, MD; Talar Tejirian, MD; Catherine Lewis, MD; Amir Mehran, MD; Erik Dutson, MD

P79. PREOPERATIVE CONSUMMATORIED BEHAVIOR ASSESSMENT SURVEY DOES NOT PREDICT POSTOPERATIVE WEIGHT LOSS FOLLOWING LAPAROSCOPIC GASTRIC BYPASS
David S. Tichansky, MD; Atul K. Madan, MD; Khurram A. Khan, MD; Whitney S. Orth, RD

P80. RESOLUTION OF PLANTAR FASCIITIS AFTER WEIGHT LOSS SURGERY
Patrick Gatmaitan, MD; Ramy H. Fouad, MD; Ali Elhorr, MD; Tracy Pitt, DO; Karen Cooper, MD; Stacy A. Brethauer, MD; Bipan Chand, MD; Philip R. Schauer, MD

P81. THE IMPACT OF AN INSTITUTIONAL REVIEW PANEL ON PATIENT SELECTION. HOW DO PANEL DECISIONS AFFECT PATIENT SELECTION?
Kristoffel R. Dumon, MD; Steven E. Raper, MD; Diane Filter, MSN, MPH; Noel N. Williams, MD, FRCSI

P82. SINGLE-STAGE GASTRIC BYPASS IS SAFE AND EFFECTIVE IN THE SUPER-OBESE
William M. Bowling, MD; Farouck N. Obeid, MD; Kurt Kralovich, MD; James W. Wagner, MD; Jamal D. Farhan, MD; Bernard Danan, MD; Janet S. Fike, MHA; Jacob A. Durant

P83. PREOPERATIVE MULTIDISCIPLINARY BEHAVIORAL MODIFICATION CAN LEAD TO ENHANCED WEIGHT LOSS IN PATIENTS UNDERGOING GASTRIC BYPASS
Thomas Conlee, MD; Bernard Benedetto, MD; Ward Dunnican, MD; Carl Rosati, MD; T Paul Singh, MD

P84. THE IMPACT OF LAPAROSCOPIC BARIATRIC SURGERY ON COMPONENTS OF METABOLIC SYNDROME
ChunHong Bai; Clare Nugent; Hazem Elariny, MD; Mariam Afendy; Angela Wheeler; Arian Afendy; Michael Garone; Caitlin Quigley; Priya Gopalakrishnan; Aimal Arsalla; Oscar Chan, MD; Zobair M. Younossi, MD, MPH, FACP, FACG

P86. PROXIMAL VERSUS DISTAL REVISIONAL SURGERY FOR WEIGHT REGAIN FOLLOWING ROUX-EN-Y GASTRIC BYPASS
Daniel E. Swartz, MD; Elijah Mobley, MD; Edward L. Felix, MD

P87. IDENTIFICATION OF HIATAL HERNIA AT ADJUSTABLE GASTRIC BAND PLACEMENT - COMPARISON OF TWO METHODS
Matthew L. Brengman, MD; Gregory L. Schroder, MD; David Elliott, MD

P88. STAGED REPAIR OF SLIPPED LAPAROSCOPIC ADJUSTABLE GASTRIC BAND
Christopher W. Finnell, MD; Douglas R. Ewing, MD; Hans J. Schmidt, MD; Amit Trivedi, MD

P89. LESSONS LEARNED AFTER 100 CONSECUTIVE LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASSES USING THE 25-MM ORVIL DEVICE AND DST SERIES EEA
John J. Gonzalez, MD; Peter P. Lopez, MD; Kent Van Sickle, MD; Nilesh A. Patel, MD

P90. NON-COMPLIANCE WITH PROPHYLACTIC POSTOPERATIVE URSDIOL AFTER ROUX-EN-Y GASTRIC BYPASS (RYGB) INCREASES THE INCIDENCE OF SYMPTOMATIC CHOLELITHIASIS
Brij Mohan, MD; Mohammad Jamal, MD; Debra Heitshusen; Junlin Liao; Isaac Samuel

P91. REOPERATIVE ROUX-EN-Y GASTRIC BYPASS (RYGBP) FOR LONG TERM FAILURE AFTER VERTICAL BANDED GASTROPLASTY (VBG) FOR MORBID OBESITY
Elie K. Chouillard, MD; Philippe Mognol, MD; Abe L. Fingerhut, MD; Jean-Pierre Marmuse, MD
P93. PREVENTING POST OPERATIVE NAUSEA AND VOMITING FOLLOWING BARIATRIC SURGERY
Jeffrey F. Barletta, Pharm.D.; Douglas Hoover, R.Ph.; Ronald B. Mengel, RN, BSN; Todd Emery, MD; Randal Baker, MD

P94. SLEEVE GASTRECTOMY, EARLY RESULTS
Marcos Berry, MD; Patricio Lamoza; Patricio Burdiles; Carlos Carvajal, Prof; Ferrario L. Mario, MD; Lionel Urrutia; Hector Conoman

P95. ADJUSTABLE GASTRIC BANDING (AGB) IN PRE-TRANSPLANT PATIENTS
Shahzeer Karmali, MD, FRCSC; John Sweeney; O. H. Frazier; John A. Goss, MD; Vadim Sherman, MD, FRCSC

P96. PERFORMANCE OF ACTIVITIES OF DAILY LIVING IN PERSONS SEEKING BARIATRIC SURGERY
Alex Nagle, MD; Patrick N. Smith-Ray, BS; Eric S. Hungness, MD; Khashayar Vaziri, MD; Jay B. Prystowsky, MD

P97. LAPAROSCOPIC PLACEMENT OF ADJUSTABLE GASTRIC BAND WITH CONCOMITANT SLIDING HIATAL HERNIA OR GIANT PARAESOPHAGEAL HERNIA REPAIR
Richard S. Flint, MD; Ashley H. Vernon, MD; Thien K. Nguyen, MD; Kerri A. Clancy, RN, CBN; Ali Tavakkolizadeh, MD; Malcolm K. Robinson, MD; David B. Lautz, MD

P98. TORADOL ASSOCIATED POSTOPERATIVE HEMORRHAGE FOLLOWING LAPAROSCOPIC GASTRIC BYPASS (RYGBP)
Eric R. Valladares, MD; Chris Leyva; Jorge L. Sosa, MD; Lisa M. Szekely-Dingfelder, DO; Nancy Rubio, CST; Guadalupe Velazquez, RN; Juan E. Calero, CSA, MD; Hector Pallavicini, MD

P99. ROBOTIC ROUX-EN-Y GASTRIC BYPASS: EARLY EXPERIENCE
John R. Romanelli, MD; Lisa A. Mark, MD; Jay N. Kuhn, MD

P100. SINGLE-CENTER BARIATRIC SURGERY EXPERIENCE WITH AN OPTICAL TROCAR IN AN UNSUSSULATED ABDOMEN: 6-YEAR EXPERIENCE AND CRITICAL REVIEW OF THE LITERATURE
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2008 Research Grant Award Program

The ASMBS Research Committee would like to congratulate the recipients of the 2008 Research Grant Awards:

**Ronald K. Evans, PhD**  
Virginia Commonwealth University  
Richmond, VA  
Metabolic and Cardiovascular Disease Risk Reduction Following Gastric Bypass Surgery: The Role of Endothelial Progenitor Cells in Vascular Health  
$50,000

**Drew Rideout, MD**  
University of South Florida  
Tampa, FL  
Adiponectin Improves Steatohepatitis in Obese Rats After Roux-en-Y Gastric Bypass  
$50,000

**Mary-Elizabeth Patti, MD**  
Joslin Diabetes Center  
Boston, MA  
Hyperinsulinemic Hypoglycemia Following Gastric Bypass: Pathophysiology and Molecular Mechanism  
$50,000

Each grant is sponsored by the ASMBS Foundation in the amount of $50,000.
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Deadline for Submission
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2009 TENTATIVE MEETING SCHEDULE

26TH ANNUAL MEETING
AMERICAN SOCIETY FOR METABOLIC AND BARIATRIC SURGERY

June 21 – 26, 2009
Gaylord Texan, Grapevine, Texas

2009 Tentative Schedule

June 21  Allied Health Essentials in Surgical Support
June 21  OR Personnel, PACU and Bariatric Healthcare Providers
June 21  CBN Review Course
June 21  Centers of Excellence in Bariatric Surgery
June 21  Practical Tips for Mundane Issues
June 22  ASMBS/SAGES Flexible Endoscopy and Endoluminal Surgery
June 22  Masters in Behavioral Health
June 22  Essentials of Bariatric Surgery
June 22  Allied Health Post-Graduate Courses
June 23  Advanced Bariatric Life Support
June 23  Video-Based Techniques of Primary Laparoscopic Bariatric Surgery
June 23  Video-Based Techniques of Laparoscopic Revisional Bariatric Surgery
June 23  Gastric Restriction Course
June 23  Allied Health Sciences Main Session
June 23  Students/Residents/Fellows Session
June 24 – 26  Plenary Session, including ASMBS/TOS Primary Clinician’s Track
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