





OCTOBER 28-30, 2021 | THE COSMOPOLITAN | LAS VEGAS, NV

2021 ANNUAL FORUM DIRECTORS



Robert K. Eastlack, MD, FAAOS



Brian Kwon, MD



Bill Taylor, MD



Luis Tumialán, MD

October 28 | Optional Cadaveric Lab October 28–30 | Scientific Program

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Invited Faculty

Rodrigo Amaral, MD Hyun Bae, MD Adam Bruggeman, MD Victor Chang, MD Peter Derman, MD Vedat Deviren, MD Rick Fessler, MD Kevin Foley, MD Jakub Godzik, MD Matthew Gornet, MD Jim Harrop, MD Roger Härtl, MD Christoph Hofstetter, MD Serena Hu, MD Richard Hynes, MD Sravisht Iyer, MD Larry Khoo, MD Choll Kim, MD Abhishek Kumar, MD Ronald Lehman, Jr., MD Isador Lieberman, MD Hani Malone, MD Cristiano Menezes, MD Catherine Miller, MD Issac Moss, MD Gregory Mundis, Jr., MD Fernando Nin, MD David Okonkwo, MD Luis Pimenta, MD Kornelis Poelstra, MD Kris Radcliff, MD Alok Sharan, MD Jian Shen, MD, PhD Tyler Smith, MD Jose Soriano, MD Jeremy Steinberger, MD Khoi Than, MD Jay Turner, MD Anand Veeravagu, MD Peter Whang, MD Chris Yeung, MD Seong Yi, MD James Yue, MD

Faculty subject to change



Don't miss:

Debates, Technique Videos, and Rapid Fire Talks

Young Surgeon Track

MISS & Endoscopic Cadaveric Lab Tracks

The SMISS Forum gives you practical insights you can immediately use. Previous participants planned to make numerous changes including:

- > "consider more lateral patients for oblique lateral interbody fusion"
- > "ERAS protocol for post-op pain management"
- > "incorporate endoscopic techniques and perhaps prone LLIF"
- > "plan to start adding robotics"
- > "increased use of tubular decompression"
- > "further incorporating navigation into my practice"
- > "use new drill I saw at meeting"
- > "may change the bone graft I use for fusions"
- > "think more about coronal alignment in addition to sagittal"
- > "improve preparation of the disc space"

"High-quality speakers focused on pertinent issues"

—2019 Attendee



October 28, 2021 | MERIN Laboratory | Las Vegas, NV

Join small learning groups with expert faculty and practice hands-on techniques. The labs are supported by various medical device companies.

Lab Tracks:

Lab Registration Fees:

- > MISS Techniques
- > Endoscopic Techniques

\$750 members / \$850 non-members



"Always learning new MIS techniques, tips, and tricks"

—2019 Attendee



If you are a resident, fellow, or in the first 3 years of practice, apply today for our SMISS '21 Young Surgeon Educational Track:

- > Attend non-CME new technology or workshop events on Friday and Saturday.
- > Attend a Networking Dinner on Friday night.
- > Receive a \$595 travel grant as well as free SMISS membership for 1 year.
- > E-mail your CV to klaney@broad-water.com to apply.
- > Apply by August 27. Notifications by Sept. 3.

CALL FOR ABSTRACTS

Submit abstracts relating to current and emerging techniques and technology in MISS.

Residents, Fellows, and Surgeons less than 3 years post-fellowship are encouraged to submit abstracts for consideration for the Young Surgeon Session.



VISIT www.smissmeeting.org to learn more.



SUBMISSION DEADLINE July 30, 2021



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THURSDAY, OCTOBER 28, 2021

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7:30 am – 4:30 pm	Optional Cadaveric L
2:00 pm – 7:00 pm	Registration

5:00 pm – 7:00 pm Session 1: SOLAS Sponsored Session

Part 1 — MIS Lateral Deformity Correction

- Posterior is the best answer
- Lateral just makes sense

Navigation Robotics and Lateral

- Safer and better for the patient
- Time consuming and not necessary

Single Position Surgery

- Lateral works, why risk it?
- PTP: Try it you'll like it

Lordosis and LLIF

- ACR is safe, effective, and provides reliable lordosis
- Alternative MIS procedures achieve lordosis

Part 2 — Single Position Surgery

- Thoracic lateral SPS: What you need to know. What's next?
- Deformity and SPS: What you need to know. What's next?
- Neuromonitoring and SPS: Is SSEP is the new standard?

FRIDAY, OCTOBER 29, 2021

6:45 am	Registration
	Non-CME Technology Workshops with Breakfast

8:30 am – 10:30 am

Session 2: Minimally Invasive Management of the Complex Spine Patient

Introduction to the Problem

- Case Presentation: L5-S1 spondylolisthesis. Clinical history & radiographic studies
- The unique biomechanics of spondylolisthesis at the lumbosacral junction

Rapid Fire — Why I do:

- Posterior MIS TLIF
- ALIF or OLIF only
- Anterior-Posterior
- MIS PLIF with cortical screws

Complication management and avoidance — anterior and posterior. Intraoperative: The unthinkable

The science of cellular graft material. Does the data support the cost?

- How To... Technique Videos for Complex Cases
- Techniques for minimally invasive Gill laminectomy
- Virtual reality and spinal surgery...the future of resident training

10:30 Refreshment Break & Exhibit Viewing

11:00 am – 12:30 pm Sessions 3A, 3B, & 3C: Free Papers Young Surgeons Papers & Panel

12:30 pm Lunch Young Surgeons Lunch: Growing your practice as a young surgeon in crowded, saturated marketplaces: how do I carve a niche?

1:20 pm – 3:00 pm

Sessions 4A & 4B: Concurrent Sessions

4A Concurrent — Imaging, Navigation, Robotics — and their Value in Your OR

4B Concurrent — Postoperative Pain Control in Minimally Invasive Surgery

3:00 pm Refreshment Break & Exhibit Viewing

3:30 pm – 5:45 pm

Session 5: General Session — Deformity

What is the rationale and what is feasible with MIS deformity correction today?

Debate: Same Day vs. Staged MIS Correction — How to Decide Debate: Single vs. Limited Position vs. Standard

Debate: Reconstruction of the anterior column — which approach is the best when 5/1 is included?

KEYNOTE: What one patient's experience can teach us about ethical opioid prescribing



Travis N. Rieder, PhD, is a bioethicist, philosopher and author, currently serving as Director of the Master of Bioethics degree program and a Research Scholar at the Johns Hopkins Berman Institute of Bioethics. He also has secondary appointments in the Departments of Philosophy and Health Policy & Management, as well as in the Center for Public Health Advocacy.

Travis Rieder, PhD

In 2019, Travis published *In Pain: A Bioethicist's Personal Struggle with Opioids*, in which he combines narrative from his own experience as a pain and opioid therapy patient with his expertise in philosophy and bioethics to identify, explain, and attempt to solve some of the most profound questions raised by pain and addiction medicine. *In Pain* has received significant positive attention, including reviews in *Science*, the *New York Times*, and the *LA Review of Books*, as well as an interview with Terry Gross on NPR's *Fresh Air.*

5:45 pm – 6:45 pm | Welcome Reception in Exhibit Hall

SATURDAY, OCTOBER 30, 2021

7:00 am	Registration
7:30 am – 8:20 am	Non-CME Technology Workshops with Breakfast

8:25 am – 10:05 am

Session 6: General Session Part 1 — Endoscopic Surgery

Intro: 37 y/o F, marathon runner with new L calf pain. Stopped running but has NYC/Boston/London marathon to train for. MRI – LEFT L4-5 HNP [paracentral]

"Help! I put my scope into the foramen & nothing looks familiar!" Basics of foraminal anatomy and how not to get lost underwater

Advanced disc pathology: Transforaminal decompression and discectomy for far-lateral pathology; and for paracentral and cranially migrated disc: data and technique

Interlaminar decompression and discectomy: technique and data using uniportal and biportal techniques

Debate: Why surgeons should or should not consider undertaking the learning curve of endoscopic spine surgery

- Should it's the future and like arthroscopic knee surgery we're all going to be doing it some day
- Should not it's a "waste of time", it takes too long, and the operation isn't as good

Complications:

- Oh @#%\$, what is that? Nerve? Clear fluid? What clear fluid? How to identify complications
- Yup... it's the nerve. Fixing complications that occur during endoscopic spine surgery
- Video: Transforaminal endoscopic discectomy, far lateral
- Video: Uniportal hemilaminectomy / discectomy

10:05 am – 10:35 am

Session 6: General Session Part 2 — MIS Case Debate

Debate: L4-L5 Grade 2 Spondylolisthesis with Stenosis

- Posterior only, TLIF
- MIS endoscopic decompression and fusion
- Lateral lumbar interbody fusion
- Prone Lateral

10:35 am Refreshment break

11:00 am – 12:10 pm Sessions 7: A – C Concurrent Sessions

A: Free papers B: Free papers C: Young surgeons track

12:10 pm Lunch

12:45 pm – 3:00 pm

Session 8: General Session — Ambulatory Surgical Centers

Intro: 37 y/o F, marathon runner with new L calf pain. Stopped running but has to train for NYC marathon MRI – L4-5 spondylolytic spondylolisthesis. Your hospital just shut down all in-patient surgery due to Covid restriction but you have privileges at your ASC

When do you know you're ready to take cases to ASC? Is it all about procedural time?

Regional anesthesia for lumbar surgery?

Who are the critical team members to successful ASC surgery?

Do the economics of ASCs make sense? For whom?

Role of ASCs during the COVID-19 pandemic. Did it help the needs of our patients? "As we learned in 1941, national emergencies can create strange bedfellows"

Debate: This patient needs to be done in a real hospital or ASC is adequate

Debate: This patient is the ideal candidate to be done in an ASC and will be better off because of it. 2 level ACDF for myelopathy

Complications: That revision microdiscectomy was supposed to be a piece of cake, why is there CSF everywhere? And why does my anesthesiologist look so nervous? What to do when your 1 hour Operation is now 3 hours long

Complications: ASA 3 in the ASC? Sure...

Video: Same day awake fusion

3:00 pm Adjourn

Registration & Hotel

Register online at **www.smissmeeting.org**

Scientific Program Registration Fees	
Non-Member Surgeon	\$825
SMISS Member Surgeon	\$675
Non-Member Resident, Fellow, Allied Health, Student (e.g. PA, RN)	\$575
Surgeon from Low-GDP Country*	\$475
SMISS Member Resident, Fellow, Allied Health, Student (e.g. PA, RN)	\$425

Late Fee (register after October 1) \$100

Optional Cadaveric Lab Registration Fees	
Must be registered for Scientific Program	\$750 members /
	\$850 non-members

For registration and hotel details and a complete list of course policies, visit **www.smissmeeting.org**

* As defined by the World Bank. List can be found on smissmeeting.org.

Industry Registration: Employees of medical device companies are not eligible for SMISS Membership or Allied Health registration. If you are not a health care provider, visit smissmeeting.org or contact Carly Franzen at cfranzen@broad-water.com for information on registration.

Cancellation Policy: Cancellations must be made in writing to Christina Bessette at cbessette@broad-water.com. Full refunds, less a \$50 administrative fee, will be provided for cancellations received by October 6, 2021. Cancellations after this date will not be refunded unless there is a documented medical or travel emergency or institutional travel policy.

"Far superior to the big meetings...higher content to time invested ratio"

—2019 Attendee



Hotel Accommodations

Location

The Cosmopolitan 3708 Las Vegas Blvd South Las Vegas, NV 89109

Room Rate

King or Double Queen room — \$265/night (+tax & \$45 daily resort fee)

Reservations

Make your reservation by October 6. Any reservations received after this date will be based on availability at the hotel's prevailing rates. Book online at **www.smissmeeting.org**

You may also book by phone at (855) 435-0005 or (702) 698-7575. Ask to book a room for the SMISS Annual Forum.

Make your reservation by October 6





CME Information

TARGET AUDIENCE

This course is designed for orthopaedic and neurological surgeons, fellows, and residents.

LEARNING OBJECTIVES

As a result of this activity, the participant should be better able to:

- > Describe the rationale, advances, surgical tips, and complications associated with current MISS techniques, including lateral, TLIF, and endoscopic.
- > Discuss MISS treatment options and their outcomes for the management of spinal deformity, cervical and lumbar degenerative, trauma, and tumor conditions.
- > Evaluate new technologies for various MISS challenges, including use of endoscopy, robotics, and artificial intelligence.
- > Describe learning options to enhance MIS surgical skills.

Accreditation Statement



JOINTLY ACCREDITED PROVIDER[™]

In support of improving patient care, this activity has been planned and implemented by Medical Education Resources (MER), SMISS and BroadWater. MER is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team

Physician Credit

Medical Education Resources designates this live activity for a maximum of $12 \text{ AMA PRA Category 1 Credits}^{\text{M}}$. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Disclosure of Conflicts of Interest

Medical Education Resources insures balance, independence, objectivity, and scientific rigor in all our educational activities. In accordance with this policy, MER identifies conflicts of interest with its instructors, content managers, and other individuals who are in a position to control the content of an activity. Conflicts are resolved by MER to ensure that all scientific research referred to, reported, or used in a CME activity conforms to the generally accepted standards of experimental design, data collection, and analysis. MER is committed to providing its learners with high-quality CME activities that promote improvements or quality in health care and not the business interest of a commercial interest.

FDA (United States)

Some drugs and medical devices demonstrated during this course have limited FDA labeling and marketing clearance. It is the responsibility of the physician to be aware of drug or device FDA labeling and marketing status.

Commercial Support

Various medical companies have been invited to exhibit and provide grants for this course. Full disclosure of financial and other support will be provided in the course materials.

Disclaimer

SMISS, MER, and BroadWater disclaim any and all liability for injury or other damages resulting to any individual attending a scientific meeting and for all claims that may arise out of the use of techniques demonstrated therein by such individuals, whether these claims shall be asserted by a physician or any other person.



c/o BroadWater 301 South County Farm, Suite L Wheaton, IL 60187 USA





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