

AAST 2026 ANNUAL MEETING

Pre, Lunch, and Add-On Session Descriptions

PRE-SESSIONS TUESDAY, SEPTEMBER 15

4th Annual AAST Military Fallen Surgeons Education Symposium

8:00 AM - 6:30 PM

The 4th Annual AAST Military Fallen Surgeons Education Symposium opens with welcoming remarks, the Presentation of Colors and Fallen Comrades Table, and opening remarks from the AAST President, Kimberly Davis, MD, MBA. The day features the Region 13 COT Resident Paper Competition across two sessions. Along with the above will include two panel sessions: Panel Session I, "Lead, Follow, or Get Out of the Way: Successes, Failures, and Pearls for Your First Leadership Position" and Panel Session II, "Spectacular OCONUS Cases: Leveraging Military Medicine." The COL Basil A. Pruitt, Jr., MD, Lecture titled, "Principal Deputy Assistant Secretary of War for Health Affairs" will be presented by Stephen Ferrara, MD. The program concludes with the AAST Always Remember Fund and Region 13 Trauma Paper Competition Results and Awards, followed by a cocktail reception.

The 2026 AAST Neurocritical Care Update and Board Review Course

1:00 PM - 5:30 PM

This session will be a high-level review of modern neurocritical care concepts and practice, as well as a board exam preparation course. Neurocritical care has traditionally been a major component of both medical and surgical critical care practice but has lacked a formal subspecialty certification process that is readily open to surgical intensivists. In 2021, the American Board of Surgery announced a newly established subspecialty certification in Neurocritical Care that is a collaborative effort with the American Board of Anesthesiology and the American Board of Neurology and Psychiatry. The first exam was offered in October of 2021 and followed a very successful AAST Neurocritical Care Board Review Course that was conducted at the 2021 AAST Annual Meeting. This review course has been offered yearly due to the level of demand. The last exam to allow certification through the practice pathway will be held in October of 2026, positioning us well to continue to offer this unique prep course ahead of the exam. Preparation for this exam requires not only familiarization with standard neurotrauma management, but also knowledge in non-surgical areas of neurocritical care such as acute stroke and other neurologic emergencies, neuroanatomy and MRI interpretation, and neuropharmacology. This session will provide an intense focused review covering the core topics and focus areas that will be covered on the Neurocritical Care Exam. The format will involve short didactic lectures on high-yield topics as well as case examples with sample question and answer reviews. In addition to the syllabus materials, attendees will also receive a copy of The Pocket Guide to Neurocritical Care.

Moderator(s): Tanya Egodage, MD; Purvi Patel, MD; Anaar Siletz, MD

Speakers: Tanya Egodage, MD; Jose Pascual, MD, PhD; Anaar Siletz, MD; Krista Kaups, MD, MS; Purvi Patel, MD; Salina Wydo, MD; Matthew Martin, MD; Natasha Keric, MD; Deborah Stein, MD, PhD; Samuel Tisherman, MD; Carlos Brown, MD; Stephen Figueroa, MD; Joel Elterman, MD; Jay Doucet, MD, MS

Hands-on Laparoscopic Common Bile Duct Exploration Seminar

Group 1: 1:00 PM - 3:30 PM • Group 2: 3:30 PM - 6:00 PM

This hands-on course will provide participants with a comprehensive overview of the indications, technique, and clinical considerations for transcystic common bile duct exploration. Following a focused didactic session, participants will engage in practical skills training using simulators and commonly used equipment to reinforce key concepts and build technical proficiency.

Please note this session is broken up into two groups (both teaching the same content). Group 1 will meet from 1:00-3:30 PM EST, and Group 2 will meet from 3:30-6:00 PM CST

Faculty: Marc de Moya, MD

NEXT UP
Wednesday Lunch Sessions →

LUNCH SESSIONS

WEDNESDAY, SEPT. 16 – 12:50–2:00 PM

Fix the System, Not Just the Surgeon: Structural Reforms in Acute Care Surgery That Promote Longevity

Acute Care Surgery (ACS) has matured into a dominant national model for delivering trauma, emergency general surgery, and surgical critical care. While ACS has improved access and efficiency, its intensity and structural design have also contributed to fatigue, attrition, and career dissatisfaction. Traditional wellness initiatives often focus on individual resilience rather than the system-level drivers that truly influence surgeon longevity.

This lunch session shifts the focus from the individual to the structure. Through a moderated panel featuring national ACS leaders, the discussion will examine which elements of current ACS models contribute to overload and which structural reforms—such as call redesign, workload distribution, team integration, protected non-clinical time, and leadership accountability—meaningfully improve sustainability. The session will provide practical, implementable strategies for division chiefs, program directors, and institutional leaders seeking to build durable ACS programs.

Presentation Topics and Speakers:

1. What in the ACS Model Drives Fatigue – Salina Wydo, MD
2. Designing ACS Systems That Work – Patrick Murphy, MD
3. Building Durable Careers Within ACS – Mitchell Cohen, MD

Moderator(s): Sarada Rao, MD; Joshua Dilday, DO; Christina Colosimo, DO

Speakers: Mitchell Cohen, MD; Patrick Murphy, MD; Salina Wydo, MD

Funding Outside the Box: Tips and Tricks for Nontraditional Grant Applications

The current funding landscape for external funding in the United States is challenging. In parallel, the field of trauma has seen increasing interest in academic pursuits such as prevention, education, and systems, that fall outside of the topics typically funded by traditional extramural funding mechanisms.

This session would address this critical knowledge gap by engaging physicians with experience in community-based grants management, foundation grants, state funding, and PCORI funding. These surgeons will share knowledge and expertise about how to search for such opportunities, how appropriately partner with community groups, non-physician providers, patients and collaborators outside surgical departments or traditional medical school investigators. Strategies will be outlined both for early career and later career surgeons.

We expect this session to be relevant to trauma center leaders such as trauma medical directors, to those with an interest in injury prevention or HVIP development, prehospital care or systems research, PCORI funding, and to young faculty or AAST associate members who are looking to develop a career in community or educational participatory programs and research.

Moderator(s): Adel Elkbuli, MD, MPH, MBA; Jeff Choi, MD

Speakers: Stephanie Bonne, MD; David Shapiro, MD, MPH; Elliot Haut, MD, PhD

Managing Complex Trauma: Lessons From Global Leaders

Trauma surgeons worldwide adhere to the same core principles, yet the management of complex trauma often differs substantially across settings. Variations in resource availability, trauma system structure, workforce models, cultural expectations, and logistical realities shape how these principles are applied in practice.

This session will feature internationally recognized trauma leaders who manage high-acuity injuries in environments that differ significantly from those in the United States. Through focused, case-based discussion, speakers will illustrate how similar injuries are approached using different strategies while achieving comparable outcomes. Emphasis will be placed on how constraints drive innovation, influence decision-making, and lead to alternative yet effective pathways of care.

By highlighting these differences, the session will challenge assumptions about resource dependence and broaden perspectives on what defines high-quality trauma care. Attendees will gain practical insights into adaptable strategies, improved efficiency, and system-level thinking that can be applied within U.S. trauma centers.

Moderator(s): W. Alan Guo, MD; Randeep S. Jawa, MD, MS

Speakers: Maeyane Stephens Moeng, MBBCh; Yasuhiro Otomo MD, PhD; Alberto García, MD

Optimizing Pediatric Trauma and Burn Regional Management

The session will consist of 3 speakers (12 minutes each) followed by panel discussion.

Topics covered will be the following:

1. Transfer criteria considerations to pediatric trauma centers for mixed trauma centers, non-trauma centers, and rural settings.
2. Supporting regional non-pediatric trauma centers through partnership with level 1 or 2 pediatric trauma centers: lessons learned.
3. Minor trauma and burn care: keeping patients close to home.

Moderator(s): Bindi Naik-Mathuria, MD, MPH

Speakers: Lillian Liao, MD; Deidre Wyrick, MD; Aaron Leshner, MD

“Too Sick” for Trauma or Emergency General Surgery? Navigating Frailty, Organ Failure, and Goals of Care

Trauma and emergency general surgery teams are increasingly confronted with patients whose physiologic reserve, comorbid burden, or advanced organ failure raise fundamental questions about the appropriateness and potential benefit of operative intervention. Determining when a patient is “too sick” for trauma or emergency general surgery requires careful integration of surgical judgment, geriatric assessment, critical care expertise, and palliative care principles.

This co-sponsored lunch session, developed collaboratively by the Geriatric Surgery, Critical Care, and Palliative Care Committees, will use a case-based format to explore high-stakes decision-making in complex patients. Following a brief framing introduction, presenters will address: (1) pre-operative evaluation and frailty assessment in older adults and high-risk patients; (2) recognition of advanced organ dysfunction and physiologic thresholds beyond which surgery is unlikely to provide meaningful benefit; and (3) approaches to situations in which surgery is not a viable option but patients or families request maximal intervention.

Through multidisciplinary discussion and real-world cases, this session will equip attendees with practical tools to assess surgical candidacy, communicate prognosis and risk effectively, manage conflict, and align care with patient values in the trauma and emergency general surgery setting.

Moderator(s): Joseph Cuschieri, MD; Andrea Long, MD

Speakers: Joseph Cuschieri, MD; Vanessa Ho, MD, MPH, PhD; David Zonies, MD

AI Use in Scientific Writing

Topics to be discussed:

1. Appropriate Use of AI in Medicine: The Good - Tyler Loftus, MD
2. Scientific integrity: hallucinations, fabricated citations, plagiarism, and unverifiable content: The bad and the Ugly - Raul Coimbra, MD, PhD
3. How to identify RED Flags during peer-review of papers using LLM for outcome prediction - Jeff Choi, MD

Moderator(s): Raul Coimbra, MD, PhD

Speakers: Raul Coimbra, MD, PhD; Tyler Loftus, MD; Jeff Choi, MD

Work Smarter, Not Harder: Making the EHR Work for You

This session will highlight practical strategies to redesign electronic health record (EHR) workflows to support high-quality trauma and acute care surgery while reducing documentation burden and strengthening alignment with coding and billing requirements. Rather than adding new documentation tasks, presenters will demonstrate how automation, smart templates, clinical decision support, and integrated quality dashboards can embed regulatory, performance improvement, and reimbursement standards directly into routine clinical workflows.

Using real-world examples from emergency general surgery, critical care, geriatrics, and palliative care, the session will showcase scalable approaches to improving patient flow, enhancing reliability and safety, and supporting nuanced clinical decision-making. Particular emphasis will be placed on ensuring that high-quality clinical documentation translates seamlessly into accurate coding, appropriate billing, and sustainable program funding. Attendees will leave with actionable tools to improve efficiency, financial stewardship, and clinician well-being while maintaining high standards of patient-centered care.

Moderator(s): Lisa Marie Knowlton, MD, MPH; Tanya Egodage, MD

Speakers: Matthew Neal, MD; Hee Soo Jung, MD; Laura Kreiner, MD; Alison Haruta, MD

NEXT UP
Thursday Add-On Sessions →

ADD-ON SESSIONS

THURSDAY, SEPT. 17 – 2:45–5:45 PM CST

AAST Mastery of Acute Care Surgery Course

The 2026 AAST Mastery of Acute Care Surgery Course will focus on techniques, concepts, controversies. The course will feature two topics areas of focus: trauma and emergency general surgery and include topical cases, didactic talks, and audience driven interactive discussion of common and evolving topics. Speakers will also participate as panelists for case scenarios and other audience directed questions.

Moderators: Michael Vella, MD, MBA; Ryan Dumas, MD

Speakers: Alberto Garcia, MD; Jeremy Ward, MD; Paula Ferrada, MD; Matthew Martin, MD; Kelsey Ensor, MD; Andrea Pakula, MD, MPH; Carlos Brown, MD; Purvi Patel, MD; Joshua Dilday, DO; Sayuri Jinadasa, MD

Sources and Practical Strategies for Funding Acute Care Surgery Research

Ready to take your research career to the next level?

The AAST Associate Members Research Committee is excited to offer its annual add-on session research course, targeted specifically for those who are building research programs, pursuing extramural funding, or are transitioning toward independent investigator status. This high-yield, interactive session will give participants practical strategies to:

1. Build a strong research portfolio as junior or mid-career faculty
2. Identify the right funding mechanism for career stage and goals
3. Understand how funding decisions are made behind the scenes
4. Develop a sustainable, long-term funding pipeline

Participants will hear from experienced investigators with sustained extramural funding and gain a comprehensive overview of multiple funding agencies including the NIH, AHRQ, PCORI, and the DOD. The session will also offer opportunity for small group advising from funded researchers who understand the challenges of the current funding climate. This is a must-attend course for AAST members and associate members serious about growing their research portfolio and competing successfully for funding.

Moderators: Jeff Choi, MD; Joshua Dilday, DO; Navpreet Dhillon, MD

Speakers: Lisa Knowlton, MD, MPH; Vikhyat Bebarta, MD; Michael Cripps, MD; Deborah Stein, MD, MPH; Marta McCrum, MD, MPH

How Artificial Intelligence Is Transforming Surgical Practice

Artificial intelligence (AI) is rapidly reshaping the landscape of modern surgery. From research and imaging interpretation to surgical training, clinical documentation, and patient education, AI-driven tools are transforming how surgeons learn, practice, and communicate. This session will explore emerging applications of AI across multiple domains of surgical care, highlighting both the opportunities and challenges associated with integrating these technologies into clinical practice.

Through perspectives from surgical leaders in trauma, education, and health systems, this session will examine how AI is influencing clinical workflows, surgical decision-making, and patient access to care.

Moderator(s): Christina Colosimo, DO; Caleb Butts, MD

Speakers: Mayur Narayan, MD, MPH, MBA, MHPE; Ryan Dumas, MD; Stephanie Bonne, MD; Tyler Loftus, MD, PhD; Gabriel Brat, MD, MPH; Lacey LaGrone, MD; Andy Sohn, MD; Molly Douglas, MD

Large Scale Combat Operations Tabletop Exercise

This session will be a demonstration of a tabletop exercise for large scale combat casualty distribution in North Central Texas. Panelists/stakeholders will include representatives from trauma centers, MOCC, FCC, EMS, and military. The scenario is World War III started 3 weeks ago. There are thousands of casualties. The military treatment facilities are full. The civilian hospitals near the major casualty landing zones will need to start taking military casualties. A military transport plane arriving from a combat theater with 35 casualties lands near Dallas. A patient list with details will be provided. Using facilitation questions the moderator will elicit plans to distribute these casualties among facilities in the DC area. A plane-load will land every day for at least 100 days. Time permitting, we will add a cyberattack as well as reserve/Guard medical deployments and elicit responses to these complications.

Moderator(s): Jeannette Capella, MD, MEd; Col. Valerie Sams, MD

Speakers: Col Valerie Sams, MD; Caroline Park, MD; Courtney Edwards, DNP; Jacob Seil; Jacob Seil; Robert Monaghan; Dennis Pollard; Marshall Isaacs, MD

NEXT UP
Friday Lunch Sessions →

LUNCH SESSIONS

FRIDAY, SEPT. 18 – 12:30–1:45 PM CST

Fostering Resilience in Geriatric Acute Care Surgery: Integrating ACS Geriatric Surgery Verification Principles Into Trauma and Emergency General Surgery Quality Programs

As the population ages, trauma and emergency general surgery (EGS) services across the country increasingly care for older adults who present uniquely complex clinical, functional, and psychosocial challenges. Ensuring resilient recovery pathways for geriatric patients requires purposeful integration of geriatric-focused quality initiatives into existing trauma and EGS quality frameworks. This session proposes a collaborative, multi-disciplinary panel highlighting how the American College of Surgeons (ACS) Geriatric Surgery Verification (GSV) standards can interface with the ACS EGS Verification Program and Trauma Quality Improvement Program (TQIP), with specific emphasis on building resilience, preventing complications such as delirium, and unifying currently fragmented verification and QI structures. This is an effort supported by the AAST Geriatrics and Patient Assessment Committees.

Given the proliferation of verification programs and the operational burden on institutions, there is a pressing need to streamline and harmonize efforts. This session aims to provide a practical roadmap and showcase real-world strategies to align QI initiatives across programs, especially those aimed at geriatric acute care surgery populations.

Moderator(s): Mira Ghneim, MD; Melissa Hornor, MD

Speakers: Stephanie Savage, MD, MS; Robert Barraco, MD, MPH; Melissa Hornor, MD

Life After the ICU: Recovery, Resilience, and Long-Term Outcomes

Survival after acute injury and critical illness is no longer the sole benchmark of success in trauma care. As trauma systems mature and mortality declines, long-term functional, cognitive, and psychological outcomes are emerging as critical quality indicators. A growing body of evidence demonstrates that many ICU survivors develop persistent physical, cognitive, psychological, and thromboinflammatory impairments collectively known as Post-Intensive Care Syndrome (PICS). These sequelae are often magnified in trauma and surgical ICU patients due to polytrauma, traumatic brain injury, emergent operations, systemic inflammation, and prolonged mechanical ventilation.

The burden of PICS extends beyond patients to families and caregivers and carries significant implications for long-term health, return to work, healthcare utilization, and value-based care metrics. Despite this, structured survivorship models remain inconsistently implemented within trauma systems. Trauma and acute care surgeons are uniquely positioned to lead post-ICU survivorship efforts but currently lack standardized frameworks for screening, referral, and longitudinal follow-up.

This session will examine trauma-specific PICS phenotypes, including the newly proposed thromboinflammatory pillar, and explore practical strategies for screening, multidisciplinary follow-up, and implementation of post-ICU clinics. Through evidence-based discussion, case-based application, and real-world implementation examples, attendees will develop actionable approaches to integrate survivorship into trauma systems and redefine success beyond hospital discharge.

Moderator(s): Jeffrey Anderson, MD

Speakers: Joseph Cuschieri, MD; Amy Bellinghausen, MD; James Jackson, PhD

Not Just a Faster Horse: How the AI Transformation in Healthcare Will Create New Opportunities for Trauma and Acute Care Surgery

Artificial intelligence (AI) has had a profound impact on numerous aspects of everyday life, and is creating new opportunities and challenges to the ACS surgeon. As the landscape of AI continues to evolve, it is important for us to better understand the ways in which it is currently and may be soon incorporated into our clinical workflows.

Therefore, the AAST Patient Assessment Committee proposes a lunch session discussing the intersection of AI and Acute Care Surgery, and where this technology can be harnessed to improve the care of our patients. Our speakers will discuss projects or cases uses for AI based on their personal expertise. Dr. Brat will discuss the use of foundation and large language models (LLMs) to use EMS pre-hospital and audio data for automated trauma triage. Dr. Heather Rhodes will present applied use cases of AI-enabled digital twins in trauma care that leverage queryable, quantitative EMS data streams to generate time-updated predictions of emergent intervention needs within six hours of initial medical contact. Her presentation will focus on integrating dynamic physiologic modeling, transport timelines, and system-level resource constraints to support prehospital and interfacility transportation decisions, particularly in rural trauma systems and resource-access deserts. Dr. Loftus will present an example of using AI-enabled decision support to optimize postoperative triage decisions, including user-centered design considerations. Dr. Callcut will discuss the integration of AI, biomedical...

.... big data and surgical data science into critical care for improved clinical decision support. Along with the discussion of how AI is being integrated into clinical care, Dr. Leichtle will also discuss how AI is going to affect health economics, from the integration of AI into revenue optimization to how the above uses of AI will improve resource utilization, length of stay, etc.

Collectively, these presentations will span foundational AI methodology, translational considerations, and clinically grounded decision support, providing attendees with a rigorous and practical understanding of how AI is being implemented, and can be responsibly scaled, within acute care surgical workflows. It will also educate the attendees on how AI will be integrated into the economics of the care that we provide. Our goal with this session is to have each attendee, regardless of familiarity with AI, leave the lunch session with a better understanding of the types of AI currently and soon to be in use in clinical settings, and how we can use AI to improve patient care.

Moderator(s): Anupamaa Seshadri, MD

Speakers: Gabriel Brat, MD; Rachael Callcut, MD, MSPH; Stefan Leichtle, MD, MBA; Tyler Loftus, MD, PhD; Heather Rhodes, PhD

Profit and Purpose in Acute Care Surgery: Growth Strategies and Maintaining Financial Health

This lunch session will highlight common challenging clinical encountered in critically ill adult and pediatric trauma and acute care patients. Using a case-based approach, participants will review the four principal tenants of bioethics—autonomy, non-maleficence, beneficence, and justice—and how they relate to patient care. Partnering with the AAST Geriatrics, Palliative Care, and Pediatric Trauma committee, this interactive panel will explore these complex situations in the various phases of life, the bioethical principles which can help guide clinical care, and discuss communication strategies to help patients and families navigate complex decision making.

Moderator(s): Jeffrey Nahmias, MD

Speakers: Jason Smith, MD, MBA; Marie Crandall, MD, MPH; Martin Shayn, MD, MBA; Marc de Moya, MD; Elizabeth Benjamin, MD, PhD; Lucy Kornblith, MD

The AAST Playbook: How to Turn Engagement into Research, Leadership, and Career Growth

The AAST has long provided a venue for surgeons to collaborate on scholarly activity, provide education, and participate in professional development. Since the inception of the Associate Membership in 2019, junior faculty and trainees have benefited from the mentorship, networking, and educational opportunities offered by the AAST. However, for many early-career surgeons and trainees, it can be difficult to fully appreciate the breadth of opportunities available within the organization. Involvement and success within the AAST require dedicated effort and strategic engagement tailored to individuals' goals. As Associate Members navigate the transition to becoming fellows, and as fellows continue to advance in their careers, involvement on committees and sustained academic productivity are imperative to their success within the organization and their careers. In this session, we will offer insights into how to become involved, highlight the many pathways for engagement within AAST, and provide guidance on how early and mid-career surgeons can leverage these opportunities to further their professional development, academic advancement, and research productivity.

Understanding the Structure of AAST: Where Opportunities Actually Live

For many surgeons, AAST can feel like a large and complex organization. Dr. Kim Davis will provide an overview of how the society functions behind the scenes, including the role of committees, partnerships, and national initiatives. She will highlight where meaningful opportunities exist for engagement and how early-career surgeons can identify areas that align with their interests.

Navigating the AAST as Early-Career Surgeon, and Transition to Fellow

Dr. Ryan Dumas, past President of the Associate Member Council (AMC), will discuss the structure of the Associate Member Council, participation as an early-career surgeon, and the transition to Fellow.

Getting Involved Early: Turning AAST Participation into Academic Productivity

Dr. Lisa Knowlton will discuss how early involvement in AAST can translate into tangible academic opportunities. Topics will include collaborative research networks, guideline development, multi-institutional studies, and educational initiatives. Practical strategies for finding projects, joining working groups, and developing scholarly collaborations within the organization will be emphasized.

Leveraging the AAST for Research Opportunities and Development:

MCT Committee Chair, Dr. Kevin Schuster, will discuss the research opportunities that exist within the AAST. He will review research scholarship opportunities, AAST research priorities, and research mentorship throughout the organization.

From Committee Member to National Leader

Dr. Kenji Inaba will discuss the pathway to leadership within AAST, including committee engagement, task force leadership, and service on national initiatives. He will share insights on how consistent participation, mentorship, and scholarly contribution can open doors to leadership roles within the society and across the broader trauma community.

Moderator(s): Joshua Dilday, DO; Rachel Choron, MD; Navpreet Dhillon, MD; Tanya Egogade, MD

Speakers: Kimberly Davis, MD, MBA; Ryan Dumas, MD; Lisa Knowlton, MD, MPH; Kevin Schuster, MD, MPH; Kenji Inaba, MD

The Nuts and Bolts of Emergency General Surgery Verification: Building, Implementing, and Maturing EGS Programs

As the American College of Surgeons (ACS) advances national standards for Emergency General Surgery (EGS) care, institutions across the country are increasingly pursuing EGS Verification to improve quality, standardize care delivery, and strengthen performance improvement infrastructure. However, many centers lack practical guidance on the administrative, clinical, and data infrastructure required to successfully establish and sustain an EGS Verification program.

The ACS provides “at-the-elbow” consultation for institutions considering EGS Verification, pairing interested sites with experienced EGS reviewers who help programs assess readiness and guide them through the verification process. Despite this support, institutions often struggle to operationalize the key components required for verification, including leadership structure, guideline development, registry infrastructure, performance improvement processes, and EGS triage systems.

This lunch session will provide a practical, step-by-step roadmap for developing and maturing an EGS Verification program. Speakers will discuss the administrative infrastructure required to launch an EGS program, strategies for developing and auditing practice management guidelines (PMGs), use of national EGS data infrastructure, including EGS-NSQIP, to drive quality improvement, and the critical role of registries and program managers in sustaining performance improvement initiatives. In addition, speakers will address EGS triage and tiering systems that help institutions align patient acuity with available resources.

Importantly, this session is designed not only for institutions exploring EGS Verification, but also for programs seeking to mature existing EGS systems and optimize quality improvement processes. Attendees will leave with practical tools, operational strategies, and real-world lessons learned that can be immediately applied to institutions at any stage of EGS program development.

Moderator: Catherine McKnight, MD; Jennifer Hartwell, MD

Speakers: Michael Wandling, MD, MS; Nicole Werner, MD, MS; Craig Follette, MD; Mary Perry, MSN, RN; Samuel Ross, MD, MPH