MUSCULOSKELETAL ULTRASOUND
ONE DAY WORKSHOP

June 8, 2019

Divisions of Musculoskeletal Radiology and Ultrasound
Department of Diagnostic Radiology
Lahey Hospital & Medical Center
Burlington, Massachusetts

Register Online
at https://cmetracker.net/LAHEY/Catalog
Musculoskeletal One Day Workshop
June 8, 2019

Course Objectives
This one day program will provide participants with a comprehensive introduction to musculoskeletal ultrasound. The program will include a combination of didactic and supervised hands-on workshops with live models. The program will educate participants to understand the capabilities and limitations of ultrasound in musculoskeletal evaluation and gain the expertise essential to perform consistent and high-quality examinations.

This activity will address the following ACGME/ABMS Competencies: Medical Knowledge, Patient Care, Practice Based Learning and Improvement.

Upon completion of this course participants will be able to:
• Discuss basic MSK US technique
• Discuss MSK US transducers selection
• Identify and describe normal pertinent MSK anatomy
• Understand strengths and weaknesses of MSK ultrasound
• Recognize potential MSK US artifacts and pitfalls
• Recognize the role of dynamic maneuvers in MSK US exams
• Become familiar with the role of MSK US in Rheumatology

Course Director:
Dmitry Elentuck, MD
Section Head of Musculoskeletal Radiology

ACCREDITATION
The Lahey Clinic Hospital, Inc. is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

CREDIT DESIGNATION
The Lahey Clinic Hospital, Inc. designates this live activity for a maximum of 8.25 AMA PRA Category 1 credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

This program is approved for 8.25 CEU Cat A with the Society of Diagnostic Medical Sonographers™

To maintain small size of work groups, we are limiting attendance to 36 participants.
Saturday, June 8, 2019
4 Southeast Roger Jenkins Transplant Center

7:15 a.m. Registration
7:45 a.m. Welcome and Introduction
Dmitry Elentuck, MD
Course Director
Alison Lampke, MHA
Program Coordinator

8 a.m. Shoulder
9:30 a.m. Hip
11 a.m. Break
11:15 a.m. Knee
12:30 p.m. Lunch Break
1 p.m. Foot/Ankle
2:15 p.m. Hand/Wrist
3:30 p.m. Elbow
4:45 p.m. Questions
5 p.m. Adjourn

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**Lodging Information**
The event will be held at the Lahey Hospital & Medical Center (LHMC), 41 Mall Road, Burlington, MA. A block of hotel rooms has been held at the Burlington Marriott Hotel, within walking distance to LHMC or accessible via hotel shuttle. Reservations may be made by calling Marriott Hotel Central Reservations at 800.228.9290. For other questions, please call the Burlington Marriott directly at 781.229.6565. Please indicate you are attending the LHMC Musculoskeletal Workshop.

**Directions**
**From the South:** Take Route 128/I-95 North to Exit 33B. Turn right on Cambridge Street and take the first left on to Mall Road. Lahey Hospital & Medical Center’s main entrance is one half mile on the left.

**From the North:** Take Route 128/I-95 South to Exit 33B. Exit on to Mall Road. Lahey Hospital & Medical Center is one half mile on the left.

**Course Information**
Lahey Hospital & Medical Center, Continuing Medical Education (CME)

Office Phone: 781.744.8056 or Fax: 781.744.2930
Email: CME@Lahey.org

Register Online
at [https://cmetracker.net/LAHEY/Catalog](https://cmetracker.net/LAHEY/Catalog)

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**Faculty**

**Dmitry Elentuck, MD**
Section Head MSK Radiology
Musculoskeletal Radiologist
Course Director
Lahey Hospital & Medical Center
Asst. Professor of Radiology
Tufts University School of Medicine

**Anita Uppin, MD**
Musculoskeletal and Emergency Radiologist
Lahey Hospital & Medical Center
Asst. Professor of Radiology
Tufts University School of Medicine

**Jonathan Rassi, MD**
Musculoskeletal Radiologist
Lahey Hospital & Medical Center
Asst. Professor of Radiology
Tufts University School of Medicine

**Jonathan Vincent, MD**
Musculoskeletal Radiologist
Lahey Hospital & Medical Center
Asst. Professor of Radiology
Tufts University School of Medicine

**Robert J. French Jr., MD**
Assistant Professor of Radiology
Musculoskeletal Imaging and Intervention
Duke Radiology
Duke University Medical Center

**Pauley Chea, MD**
Fellow In Musculoskeletal Radiology/Intervention
Brigham and Women’s Hospital
Asst. Professor of Radiology
Tufts University School of Medicine

**Wayne Anderson, RDMS, RMSKS**
Lead MSK Sonographer

**Stacey Timmons, RDMS**
Sonographer

**Cyndi Jablonski, RDMS**
Sonographer

**Erin McHugh, RDMS**
Sonographer

**Breanna Dos Santos, RDMS**
Sonographer

**Patricia Doyle, MBA, CRA, RT(R)(MR)**
Director of Radiology

**Christoph Wald, MD, PhD, MBA**
Department Chair Radiology

**Karen Reuter, MD**
Section Head
Ultrasound and Vascular Department
Lahey Hospital & Medical Center
Musculoskeletal Workshop
June 8, 2019

REGISTRATION
at https://cmetracker.net/LAHEY/Catalog

Registration Fees:

<table>
<thead>
<tr>
<th>Registration</th>
<th>MD/Advanced Practitioner</th>
<th>Technologist/Sonographer/Student</th>
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</thead>
<tbody>
<tr>
<td>Open until June 1</td>
<td>Early Bird until 3/1/18</td>
<td>$700</td>
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<tr>
<td></td>
<td>Regular 3/2-5/15</td>
<td>$725</td>
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<td>Late 5/16-6/1 (Pending availability)</td>
<td>$750</td>
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</tbody>
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Group discounts price – 10% off or Lahey discounts price – 10% off

For Fax or Mail-In Registration:

Name: ________________________________

Address: ________________________________

City: __________________ State: __________ Zip: ______________

Telephone: __________________ Fax: __________________

Email address: __________________

Payment by Check:

Must be in U.S. funds made payable to Lahey Clinic Hospital, Inc.

Payment by Credit Card:

☐ Mastercard   ☐ VISA   ☐ American Express   ☐ Discover

Name as it appears on credit card: __________________

Account #: ________________________________

Expiration Date: __________________________

Amount to be charged: _______________________

Signature: _________________________________

☐ Please check box if you have special needs that require additional assistance.*

Identify needs: ________________________________

Special Needs:

Mail or Fax This Form and Check to:

Lahey Clinic Hospital, Inc., CME Office
41 Mall Road, Burlington, MA 01805
Fox: 781.744.2930

There will be a $50 cancellation fee for all registration cancellations.

*If registering on-line, call the CME Office at 781.744.8056.