Medical and Organizational Challenges Resulting from a Radiological/Nuclear Emergency

July 14-15, 2015 | Rockville Hilton | Rockville, MD

Finalized Agenda

Plenary Sessions:
- A decade of RITN (Hartzman)
- Crisis Standards of Care: Lessons from the Recent Ebola Outbreak in Africa (Rubinson)
- Japan's 3.11 earthquake, tsunami, & nuclear crisis (Nollet)
- Our experience in Tokai-mura Nuclear Accident (Mineishi)
- Improvements in Rad. Medical Countermeasures for ARS (Hatchett)
- Patients with Hematopoietic ARS: FDA's perspective on the Dose Selection for Filgrastim (Ma)
- Estimating Casualties from Radiological and Nuclear Threats (Curling)
- New Federal ConOps for Lab surge and triage (Koerner)
- FEMA's Planning & Coordination Activities for Public Health & Medical Response after an IND (Myal)
- PHEMCE & how it will support medical response (Coleman)
- Progress in MCM development by the CMCRs (Maidment)
- Emergency Biodosimetry (Blakely)
- Capability of the Bundeswehr Rad Medical Task Force (Lamkowski)

Research Track:
- The THBD-aPC pathway in radiation mitigation (Geiger)
- Advancements in therapy/mitigation of acute radiation sickness (Chute)
- Prostaglandin E2 mitigates ARS (Calvi)
- PHD inhibition mitigates and protects against radiation-induced gastrointestinal toxicity via HIF2 (Giaccia)
- Animal models, and the role of acute injury associated with late effects (Cohen)
- Advanced Development of HemaMax for mitigation of HSARS under the FDA Animal Rule (Gluzman-Poltorak)
- Administration of two radiation mitigators: GS nitroxide JP4-039 and water soluble oxetanyl sulfoxide MMS-350 improves total body irradiation (TBI) survival superior to one alone (Greenberger)
- An attempt to potentiate the radioprotective efficacy of countermeasures by utilizing a combination of modalities: Gamma-tocotrienol and amifostine (Newman)
- Importance of CaMKK2 as a regulator of HSC regeneration in vivo (Racioppi)

Operations Track:
- The Dana-Farber/Brigham and Woman’s Cancer Center Full Scale Exercise: Planning, Implementation, and Lessons Learned (McCullen & Tierney)
- Conducting a radiological full scale exercise (Teske)
- Geographical Relation of RITN Centers to Medical Toxicology and Disaster Management Resources (Davlantes & Kazzi)
- RITN Incidents and the use of eEmergency (Schlosser)
- Promoting Involvement in RITN: How to generate interest and get the right players to the table (Satterlee & Davis)
- National Alliance for Radiation Readiness: Leveraging Partnerships to Increase Preparedness (Allen)
- A Strategic Approach to National Radiation Emergency Medical Education & Training (MAJ Vanhorne-Sealy)
- Increasing RITN Awareness in PH Circles (Rose)
- Lessons Learned from the Aurora Theater Mass Casualty on Engaging Staff for Preparedness Efforts (Conroy)

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(On-site registration opens at 11:30 am on the 14th)
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Research Track (continued):

- Radioprotective efficacy of tocols is mediated through induction of granulocyte colony-stimulating factor (Romaine)
- Mitochondrial targeted glutathone peroxidase 4 mimic mito-ebselen mitigates irradiation damage. (Stoyanovsky)
- Circulating IL-18BP and IL-18 as dual biomarkers for radiation dose and injury assessment in mice after total body radiation exposure (Xiao)
- Abrogation of TGFβ signaling doses not rescue the radiosensitive phenotype or hematopoiesis Smad3/-/ Fancd2/-/ Double knockout (DKO) mice (Zhang)
- Fibrinogen-Coated Nanospheres Improve Hemostasis and Prevent Fatal Hemorrhage from Radiation-Induced Thrombocytopenia (Sung)

PROGRAM DESCRIPTION
The workshop will include highlight the most recent research and developments in the field of radiological/nuclear emergencies, including the Federal Concept of Operations, patient movement, the Public Health Emergency Medical Countermeasure Enterprise (PHEMCE), operational best practices, and biodosimetry.

EDUCATIONAL OBJECTIVES
1) Discuss progress in research on radiological countermeasures and biodosimetry.
2) Explain best practices from RITN hospitals.
3) Evaluate medical and societal effects from a pertinent recent event.
4) Describe federal objectives for radiological/nuclear disaster response.
5) Identify key lessons from a real-world ARS treatment case study.

TARGET AUDIENCE
Physicians, and other clinicians, support staff, emergency managers, research scientists, and appropriate federal agency staff involved in radiation response and treatment of patients with bone marrow toxicity.

Continuing education credit is available for physicians:
This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint sponsorship of the Medical College of Wisconsin and the NMDP. The Medical College of Wisconsin (MCW) is accredited by the ACCME to provide continuing medical education for physicians.

The Medical College of Wisconsin designates this live educational activity for a maximum of 9.5 AMA PRA Category 1 credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Nurses: The National Marrow Donor Program is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation (COA).

Up to 9.5 contact hours may be claimed for this educational activity.
All other health care professionals requesting continuing education credit for this activity will be issued a certificate of attendance.

Registration: (indicate any special needs here)

Hotel Accommodations:
Hotel accommodations must be made directly with the hotel at (301) 230-6721 | Group Name: NMDP 2015 RITN Meeting & Group Code: JNR (room block is based on availability until June 15, 2015)

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