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ROCHESTER

University of Rochester  
School of Medicine and Dentistry  
Continuing Professional Education  
601 Elmwood Avenue, Box 677  
Rochester, New York 14642-8677

University of Rochester  
School of Medicine and Dentistry  
Department of Surgery

*Presents*

**Current**  
**MULTIDISCIPLINARY**  
**MANAGEMENT of**  
**LUNG CANCER**

Saturday, April 28, 2007

University of Rochester  
School of Medicine & Dentistry  
Rochester, New York

*Sponsored by:*

UNIVERSITY OF  
**ROCHESTER**  
SCHOOL OF MEDICINE & DENTISTRY  
*Office of Continuing Professional Education*

**ACTIVITY DIRECTORS**

**Carolyn E. Jones, MD**

Assistant Professor of Surgery  
Division of Thoracic & Foregut Surgery  
University of Rochester School of Medicine & Dentistry

**Daniel P. Raymond, MD**

Assistant Professor of Surgery  
Division of Thoracic & Foregut Surgery  
University of Rochester School of Medicine & Dentistry

**Thomas J. Watson, MD**

Associate Professor of Surgery  
Chief of Thoracic Surgery  
Division of Thoracic & Foregut Surgery  
University of Rochester School of Medicine & Dentistry

**UNIVERSITY OF ROCHESTER FACULTY**

**Yuhchya Chen, MD**

Associate Professor  
Radiation Oncology

**Michael Milano, MD, PhD**

Assistant Professor  
Radiation Oncology

**Kishan Pandya, MD, FACP**

Professor of Medicine & Oncology  
Clinical Director, Hematology-Oncology  
Director, Clinical Trials Office

**Everett Porter, MD**

Senior Instructor  
Division of Pulmonary & Critical Care Medicine

**John Strang, MD**

Associate Professor  
Radiology

**LOCATION**

The conference will take place at the University of Rochester School of Medicine & Dentistry, 601 Elmwood Avenue, Rochester, NY. Driving instructions will be mailed with the registration acknowledgement.

**REGISTRATION**

Persons wishing to register should complete and return the registration form by April 13, 2007 to:

University of Rochester  
Office of Continuing Professional Education  
601 Elmwood Ave., Box 677  
Rochester, NY 14642-8677  
Fax: 585.275.3721  
www.urmc.rochester.edu/cpe

**SPECIAL SERVICES & INFORMATION**

For more information or to make disability arrangements, contact the Office of Continuing Professional Education at 585.275.4392 (10 days in advance of the conference for disability arrangements). Office hours are Monday-Friday, 8:00 am - 4:30 pm.

**FEES**

On or before April 13, 2007: \$75

After April 13, 2007: \$95

Fees include attendance at all course sessions, course materials, beverages and lunch. The registration fee must accompany the registration form. Please make checks payable to Continuing Professional Education. If you are paying by credit card, you may fax your registration form to 585.275.3721. Receipts will be issued at the conference.

For all cancellations, an administrative fee of \$25 will be deducted from all refunds. No refunds will be issued after April 13, 2007.

**U OF R VOUCHER AWARD PROGRAM**

The CME Voucher Award Program has been developed to recognize the efforts of the Medical School's community based preceptors, to encourage their continued involvement and to acknowledge the importance of their contributions. Vouchers can be redeemed ONLY for activities registering through the University of Rochester, Office of Continuing Professional Education. Instructions for use are on the Vouchers. A limited number of Voucher registrations will be available for any given activity. Vouchers are redeemed on a first come-first serve basis.

**UR NURSING CONTACT HOUR (NCH)**

**COUPON AWARD PROGRAM**

This Program has been developed to recognize the efforts of the School of Nursing's preceptors, to encourage their continued involvement, and to acknowledge the importance of their contributions.

Coupons can be redeemed for activities registering through the University of Rochester Office of Continuing Professional Education, the School of Nursing and the Center for Lifelong Learning at the Community Nursing Center at the School of Nursing. Instructions for use are on the Coupons.

**LUNCHEON**

Regular and vegetarian entrees will be served at lunch. Please indicate your preference on the registration form.

**ACCOMMODATIONS**

Attendees requiring overnight accommodations should call the Radisson Inn at 585.475.1910. When making reservations, please indicate you will be attending the University of Rochester's Management of Lung Cancer Activity.

**SMOKE FREE POLICY**

Effective November 16, 2006, the University of Rochester will become a Smoke Free institution - inside and out. The means that all (staff, patients and) visitors who wish to smoke must do so outside of the established Smoke FREE perimeter. As a leading health care organization, it is inconsistent with our missions to allow anyone to smoke - or be exposed to smoke - while at our facilities. This policy includes all tobacco products including: cigarettes, cigars, pipes, and chewing tobacco. Single-dose nicotine replacement products will be available for purchase at cost throughout the Medical Center. Please see conference staff at the registration desk for more information.

**NEEDS STATEMENT/ACTIVITY DESCRIPTION:**

Lung cancer remains the leading cause of cancer related death but still has very little research/outcomes based work considering the magnitude of the problem. This activity, geared towards primary care physicians, internists, oncologists, pulmonologists, and allied health care professionals, is designed to provide an update on the management of non-small cell lung cancer.

**ACTIVITY OBJECTIVES:**

This course is planned so that at its conclusion, participants should be able to:

- ▲ Discuss an appropriate work-up on a patient with lung cancer
- ▲ Discuss the surgical evaluation, surgical approaches, and evidence supporting multi-modal therapy for advanced stage lung cancer
- ▲ Identify new technologies and adjuvant therapies for patients with lung cancer

**ACCREDITATION STATEMENT:**

The University of Rochester School of Medicine & Dentistry is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

**CERTIFICATION STATEMENT:**

The University of Rochester School of Medicine and Dentistry designates this educational activity for a maximum of 6.5 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Application for CME credit has been filed with the American Academy of Family Physicians. **Determination of credit is pending.**

This continuing nursing education activity has been submitted to the New York State Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

Applications has been made to the American Association for Respiratory Care (AARC) for continuing education contact hours for respiratory therapists.

**CURRENT MULTIDISCIPLINARY MANAGEMENT OF LUNG CANCER**

**Saturday, April 28, 2007**

- 7:00am Registration/Continental Breakfast/Exhibits**
- 8:00am Welcome & Introductions**  
Daniel P. Raymond, MD
- 8:15am The Epidemiology of Lung Cancer and Screening in High Risk Populations**  
Everett Porter, MD
- 8:45am Radiologic Evaluation of Lung Nodules (The Role of CT, PET/CT and Percutaneous Biopsy)**  
John Strang, MD
- 9:15am Small Cell Lung Cancer**  
Kishan Pandya, MD, FACP
- 9:45am Panel Discussion**
- 10:00am AM Break/Exhibits**
- 10:15am Update on Emerging Techniques for Surgical Treatment of Early Stage NSCLC: The Role of VATS Lobectomy and Sublobar Resection**  
Carolyn E. Jones, MD
- 10:45am Surgical Therapy for Locally Advanced Disease**  
Daniel P. Raymond, MD
- 11:15am Treatment of Stage III NSCLC: The Role of Neoadjuvant/Adjuvant Therapy**  
Thomas J. Watson, MD
- 11:45am Panel Discussion**
- 12:00pm Lunch/Exhibits**
- 1:00pm Chemo Options for NSCLC: Management of Post-Op Patients and Patients with Stage IIIb/IV**  
Kishan Pandya, MD, FACP
- 1:30pm Update on the Role of Radiation Therapy for Lung Cancer Including Emerging Technologies**  
Michael Milano, MD, PhD
- 2:00pm New Approaches to Lung Cancer: Molecular Targeted Therapy New Chemotherapeutic Agents and Targeted Therapies (EGFR Inhibitors, Anti-VEGF)**  
Yuhchayau Chen, MD
- 3:00pm Panel Discussion**
- 3:15pm Case Presentations**
- 4:00pm Adjourn**

**REGISTRATION FORM**

CURRENT MULTIDISCIPLINARY  
MANAGEMENT OF LUNG CANCER  
Saturday, April 28, 2007  
University of Rochester Medical Center

PLEASE PRINT

Name \_\_\_\_\_ Title \_\_\_\_\_

Last 4 digits of SSN (for record keeping only) \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip+4 \_\_\_\_\_

Institution or Affiliation: \_\_\_\_\_

Practice Specialty: \_\_\_\_\_

Office Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**FEES:**

- |  |  |
|--|--|
| On/Before April 13, 2007:                          | After April 13, 2007                               |
| <input type="checkbox"/> \$75 Practicing Physician | <input type="checkbox"/> \$95 Practicing Physician |
| <input type="checkbox"/> \$75 Resident             | <input type="checkbox"/> \$95 Resident             |
| <input type="checkbox"/> \$75 PA                   | <input type="checkbox"/> \$95 PA                   |
| <input type="checkbox"/> \$75 NP                   | <input type="checkbox"/> \$95 NP                   |
| <input type="checkbox"/> \$75 RN                   | <input type="checkbox"/> \$95 RN                   |
| <input type="checkbox"/> \$75 RT                   | <input type="checkbox"/> \$95 RT                   |
| <input type="checkbox"/> \$75 Other                | <input type="checkbox"/> \$95 Other                |
| Please specify _____                               | Please specify _____                               |

**LUNCHEON:**

- Regular
- Vegetarian

Food Allergies: \_\_\_\_\_

**METHOD OF PAYMENT:**

- Check payable to: \_\_\_\_\_
- CONTINUING PROFESSIONAL EDUCATION**
- CME Voucher +\$ \_\_\_\_\_
- NCH Coupon +\$ \_\_\_\_\_
- Credit Card:  Visa  Mastercard  Discover

Card Number \_\_\_\_\_

Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

PLEASE RETURN THIS FORM WITH PAYMENT TO:

**UNIVERSITY OF ROCHESTER  
CONTINUING PROFESSIONAL EDUCATION  
601 ELMWOOD AVENUE, BOX 677  
ROCHESTER, NY 14642-8677  
FAX: 585.275.3721**

If paying by credit card you may fax your registration to our office. Copies of this form are acceptable. Please do not reduce this form.