# THE 30TH INTERNATIONAL CONFERENCE ON ADVANCES IN CRITICAL CARE NEPHROLOGY

Updates in ICU Medicine: Controversies, Challenges and Solutions



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MARCH 3-6, 2025

Manchester Grand Hyatt San Diego, California



Abstract Deadline:

# AKI&CRRT 2025

MARCH 3-6, 2025

MANCHESTER GRAND HYATT SAN DIEGO, CALIFORNIA USA

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### **IMPORTANT CONFERENCE DATES**

Abstract Submission Now Open Now Open Online Registration Deadline for Receipt of Abstracts (see page 5) December 12, 2024 Deadline for Early Bird Registration December 13, 2024 Notification of Abstract Acceptance January 5, 2025 On-site Registration Fees Begin February 1, 2025 Hotel Reservation Deadline Feburary 16, 2025 Pre-Conference Elective CRRT Workshop (see page 4) March 2 & 3, 2025 Pre-Conference Elective NEXUS Workshop (see page 21) March 2, 2025 Pre-Conference Elective POCUS Workshop (see page 4) March 3, 2025 Pre-Conference Elective AKI Symposium (see page 22) March 3, 2025 Poster Mounting and Viewing March 3, 2025 Plenary and Standard Workshop Sessions March 4-6, 2025

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**Abolfazl Zarjou, MD** Birmingham, AL USA

### GENERAL INFORMATION

Visit our website for the most current program information, abstract submission, online registration and online hotel reservations. www.crrtonline.com

### CONFERENCE DATES AND LOCATION

The inclusive dates for all scientific sessions of the **THIRTIETH INTERNATIONAL AKI & CRRT CONFERENCE** are March 3-6, 2025. The Conference will be held at the Manchester Grand Hyatt, 1 Market Place, San Diego, CA 92101, Tel: (619) 232-1234. Online Reservations are available directly with the hotel by using Hotel Reservations link on the conference website. Group reservations of 5 or more hotel rooms need to contact the conference administration directly at 858-272-1018.

### REGISTRATION INFORMATION

Please visit our website to register (online registration required, printable form available). All participants must register and pay the appropriate fee. *Fee includes* access to all Plenary Sessions, Standard Workshops, Morning Symposia, Exhibit Area, Welcome Reception & Poster Sessions (Mon.), Exhibit Reception & Poster Sessions (Tue.), CME Accreditation, Conference Syllabus (digital media), two Lunches (Tue. & Wed.), and all conference coffee breaks. Conference Registration Fee *DOES NOT* include Elective Events on Sunday or Monday. Registration checkin will begin on Sunday, March 2, 2025. Poster Viewing will begin on Monday evening March 3, 2025. For additional registration times see the program. **See website for Virtual Options.** 

REGISTRATION FEES	Early Bird On or before Dec. 13, 2024	Pre-Registration Dec. 14, 2024 thru Jan. 31, 2025	<b>Registration</b> Feb. 1 thru Mar. 6, 2025
Physicians/Other (MD, PhD, etc.)	\$ 895	\$ 995	\$ 1,050
With Multimedia Package	\$ 1,195	\$ 1,295	\$ 1,350
Nurses/Dieticians/			
Pharmacists/Residents*/Fellows*	\$ 665	\$ 775	\$ 820
With Multimedia Package	\$ 965	\$ 1,075	\$ 1,120
Industry	\$ 895	\$ 995	\$ 1,050
With Multimedia Package	\$ 1,195	\$ 1,295	\$ 1,350

<sup>\*</sup>with letter of verification from department head

#### CME CERTIFICATE FEE

\$50

Includes credits for Conference Sessions, CRRT Basics Workshop and POCUS Workshop

### PRE-CONFERENCE ELECTIVE SYMPOSIUM & WORKSHOP FEES

CRRT Basics	\$ 350	\$ 370	\$ 395
POCUS Workshop	\$ 380	\$ 400	\$ 425
AKI Symposium	\$ 350	\$ 370	\$ 395
AKI Symposium w/o full conference reg.	\$ 410	\$ 430	\$ 455
Nexus Pediatric Workshop	\$ 75	\$ 75	\$ 75

#### MEET THE EXPERT BREAKFAST SESSIONS

(with registration) \$60

These breakfast sessions (choose from 2 on Tue., Wed. & Thur.) allow participants to meet and interact with internationally renowned experts in an informal setting over breakfast. See pages 12, 16 and 19 for titles and faculty.

#### ONLINE MULTIMEDIA PRESENTATIONS

(with registration) \$300

Free with 3 night conference hotel stay! See website for details.

We will record all *7 PLENARY SESSIONS* and select symposia for post-conference viewing online. Add this package to your registration to review presentations in a state-of-the-art format that includes streaming audio and video, and synchronized slides.

### PRE-CONFERENCE ELECTIVE EVENTS

### ELECTIVE CRRT WORKSHOP (see page 3 for fees)

2 Day Workshop!

SUNDAY & MONDAY, MARCH 2 & 3 (CME Available for fee, limited enrollment)

### **Practice Based Learning in CRRT: The Science and the Art**

Sunday 1:30pm-6:00pm, Monday 8:00am-5:30pm

See full description and program on pages 9 & 10.

(includes PM break Sunday and Monday breaks & lunch - full CRRT Conference Registration Required)

### **ELECTIVE NEXUS WORKSHOP**

(see page 3 for fees)

SUNDAY, MARCH 2 (Non-CME, limited enrollment)

### **Introduction to the NEXUS - Pediatric Collaboratives**

Sunday 1:00pm-6:15pm

See full description and program on page 21.

(includes breaks and dinner - full CRRT Conference Registration Required)

### **ELECTIVE POCUS WORKSHOP**

(see page 3 for fees)

MONDAY, MARCH 3 (CME Available for fee, limited to 40 participants)

### Point of Care Ultrasound (POCUS): Science and Practice

Monday 8:00am-4:30pm

See full description and program on page 11.

(includes lunch, AM & PM breaks - full CRRT Conference Registration Required)

### ELECTIVE AKI SYMPOSIUM

(See page 3 for fees. Full AKI & CRRT 2025 conference registration is NOT required\*)

Presented by UAB/UCSD O'Brien Center for AKI Research

MONDAY, MARCH 3 (Non-CME, limited enrollment)

## Changing Paradigms in AKI: From Mechanisms to Management

7:55am-5:30pm

Acute Kidney Injury is a rapidly evolving area where several advances have been made in understanding the mechanisms and pathways of AKI and its effects on other organs. Recent identification of biomarkers has provided new tools and techniques to characterize this disorder. This pre-course will provide a comprehensive review of the most recent developments in the field and describe emerging knowledge from basic and translational research applicable to clinical care. See full program on page 22. (includes lunch, AM & PM breaks)

\* A \$30 discount will be given to attendees that also register for the AKI & CRRT Conference. To receive the discount you must sign up for this symposium at the same time you register for the conference.

### ELECTIVE MEET THE EXPERTS (see page 3 for fees)

These elective breakfast sessions allow participants to meet and interact with internationally renowned experts in an informal setting over breakfast. This is an excellent opportunity to ask questions, learn how these experts manage patients, get guidance for projects and network.

Choose from 2 on Tuesday, Wednesday and Thursday - 7:00-8:00am. See program for details

## ADDITIONAL OPTIONAL SESSIONS (Non-CME)

These informative sessions are held during breakfast or lunch time periods.

Seating is LIMITED for these sessions - Selection made during registration. All are Non-CME

#### **TUESDAY MORNING, March 4**

7:00-8:00am

INDUSTRY BREAKFAST SYMPOSIUM - TBD Non-CME

TUESDAY AFTERNOON, March 4
12:30-2:00pm
INDUSTRY LUNCH SYMPOSIA - TBD Non-CME

WEDNESDAY AFTERNOON, March 5
12:30-2:00pm
INDUSTRY LUNCH SYMPOSIA - TBD Non-CME

### ABSTRACT INFORMATION

#### **DEADLINE FOR RECEIPT OF ABSTRACTS: December 12, 2024**

### Abstract Submission Via Our Website is Required: www.crrtonline.com

#### **GENERAL INFORMATION**

- 1. The abstract must be written in English.
- 2. Deadline: Abstracts MUST BE RECEIVED no later than December 12, 2024.
- 3. Online abstract submissions are required. See website for details: www.crrtonline.com
- 4. Presenting authors must pay the registration fee and attend the meeting. Authors of accepted abstracts are not provided with travel funds.
- All accepted abstracts will be published and distributed electronically in the CRRT Conference Syllabus. Hardcopy syllabus booklets will be available for purchase during the conference. Abstracts and digital posters (if submitted) will also be published online at: www.crrtonline.com
- 6. Notification of acceptance will be mailed by January 6, 2025.
- 7. Selected abstracts will be eligible for digital poster discussions on Monday and Tuesday, March 3 & 4 from 5:30-7:00pm. Details will be provided with notification of acceptance.

### CONTENT OF THE ABSTRACT

- 1. Abstracts are limited to 2500 characters. Please see sample on the conference website.
- 2. Abstract Body: purpose of the study, methods used, summary of the results and conclusion reached.
- 3. Author list is limited to 10.
- 4. References and credits **MUST NOT** be included in the abstract.
- 5. Simple tables, figures and graphs may be included, but avoid the use of special characters.
- 6. Formulas should be avoided.
- 7. Use standard abbreviations in parentheses after the full word appears the first time.
- Please indicate the subject category your abstract most closely represents:
   a) Epidemiology and Outcomes from AKI, b) Research in AKI (Basic, translational, clinical including clinical trials), c) RRT Technique Characteristics, d) RRT Applications and Targeted Interventions, e) New Technology, f) RRT Research, g) Nursing Issues (education, training, care delivery)
- 9. Abstracts will be published as submitted. Proof and edit your submission accordingly.

#### TRAVEL AND REGISTRATION AWARDS

Fellows in an accredited training program, nurses and allied professionals who submit a poster abstract to be presented at the CRRT Conference by December 12 are eligible to apply for Registration and Travel Awards for the conference. Awards will be based on the quality and relevance of the research as judged by the abstract review committee. **Awards will be provided based on availability of funds.** Award recipients are required to be present at their poster session on Monday, March 3 and Tuesday, March 4, 2025.

- 1. Registration Awards Conference reg fee. includes plenary sessions and standard workshops.
- 2. Travel Awards Checks for up to a maximum of \$500 will be presented at the time of the conference.
- 3. **Recognition Awards** The top 3 overall and 1 pediatric abstract will be selected.

#### CRITERIA FOR GRANTS AND/OR AWARDS

- 1. Submit a poster abstract (via CRRT web site) and present a poster in the topics covered in the CRRT conference at the Poster Sessions: Monday, March 3 and Tuesday, March 4, 2025.
- 2. Fellows must be currently enrolled in an accredited fellowship program in their host country.
- 3. Submit a signed letter (same time as abstract) from their program director verifying their current status in the program. NOTE: Signed letter must be faxed or emailed to CRRT administration office (fax: 1-858-272-7687 or res@crrtonline.com) on the same date as submission of abstract. Abstracts submitted without dated faxed letter will not be accepted for Grants.
- 4. Designate request for financial support on the CRRT website abstract application form.
- 5. Fellows must attend an offered workshop.

#### SUBMISSION

- Notification of acceptance will be mailed by January 6, 2025 with additional information regarding poster dimensions, digital file submission and presentation of your poster.
- 2. For additional information or if you are unable to complete an online submission contact:

RES Seminars Phone: 858-272-1018 Website: crrtonline.com 4425 Cass Street, Suite A Fax: 858-272-7687

San Diego, CA 92109 USA Email: crrt@res-inc.com

### **SOCIAL ACTIVITIES** (Non-CME)

**Welcome Reception and Poster Sessions** Monday, March 3, 2025 5:30-7:30pm All attendees are invited to review the CRRT poster presentations including fellows in training and meet the presenters and faculty. This is a great opportunity to pick-up credentials, register on-site, organize your workshops and prepare for the upcoming CRRT meeting. Light appetizers & refreshments will be served.

**Exhibit Reception and Poster Session** Tuesday, March 4, 2025 6:00-8:00pm Meet and interact with CRRT poster presenters while you review the latest in equipment and products. This is a great opportunity to network and meet your colleagues. Light appetizers & refreshments will be served.

### **CME INFORMATION**

### LEARNER OBJECTIVES

The CRRT conference provides a comprehensive review of advances in clinical care, research and technology in critical care medicine with a focus on the kidney and renal support techniques. The conference is designed to facilitate interdisciplinary interactions among caregivers involved in the management of patients in intensive care units. Physicians, nurses, pharmacists, nutritionists and other allied personnel from industry have opportunities to learn from each other. The conference utilizes a combination of invited lectures; case based small group workshops, debates, hands on interactive and simulation based workshops. Attendees have an opportunity to interact with the faculty through focused panel discussions and symposia.

At the end of this conference attendees should be able to:

- Describe the recent advances in the pathophysiology and management of critically ill
  patients with a focus on sepsis, multi-organ failure, infections, lung and kidney injury in
  different settings.
- Discuss the best ways to identify, treat and follow up patients with acute kidney injury (AKI) resulting from different causes utilizing biomarkers, imaging and lab studies and applying educational tools to raise awareness of AKI.
- Describe the principles and practice of renal replacement techniques including CRRT, IHD and plasma exchange and demonstrate how to setup and use these techniques for managing critically ill patients.

### **ACCREDITATION STATEMENT**

TRD

### NEEDS ASSESSMENT

Several sources of information were utilized to identify the practice gaps prompting this educational conference. These include literature review of multiple publications in Pubmed, publications from the American Society of Nephrology, International Society of Nephrology, ERA-EDTA, Critical care societies and published KDIGO and European Best Practice and NICE guidelines and feedback from participants and faculty at prior CRRT conferences and discussions with the international organizing committee.

#### TARGET AUDIENCE

The CRRT target audience includes: MD/DOs, NP/PA/Nurses, Dieticians, Industry, Pharmacists, Residents and Fellows. Specialties include: Anesthesiology, Cellular & Molecular Medicine, Critical Care, Emergency Medicine, Family & Preventive Medicine, Geriatrics, and Internal Medicine.

### **CME INFORMATION**

#### **CME CREDIT**

The following sessions are being reviewed for CME Credit:

SUNDAY & MONDAY, MARCH 2 & 3, 2025

ELECTIVE: Practice Based Learning in CRRT: The Science and the Art - WORKSHOP

MONDAY, MARCH 3, 2025 ELECTIVE: POCUS WORKSHOP TUESDAY, MARCH 4, 2025

MEET THE EXPERT SESSIONS, MORNING SYMPOSIA

SESSION I: PATIENT CHARACTERISTICS

GROUP 1 - WORKSHOPS, GROUP 2 - WORKSHOPS

WEDNESDAY, MARCH 5, 2025

MEET THE EXPERT SESSIONS, MORNING SYMPOSIA

**GROUP 3 - WORKSHOPS** 

SESSION II: CONTROVERSIES IN CRITICAL CARE NEPHROLOGY

SESSION III: EMERGING CONCEPTS IN AKI AND RRT

THURSDAY, MARCH 6, 2025

MEET THE EXPERT SESSIONS, MORNING SYMPOSIA

SESSION IV: IMPROVING OUTCOMES IN AKI

SESSION V: FUTURE TRENDS IN CRRT AND CRITICAL CARE

#### FACULTY DISCLOSURE

It is the policy of University of California San Diego School of Medicine Continuing Professional Development to ensure that the content of accredited continuing education and related materials is accurate, balanced, objective, and scientifically justified. Education must be free of the influence or control of ineligible companies, and protect learners from promotion, marketing, and commercial bias. All persons in a position to control the content of accredited continuing education must disclose all financial relationships held with ineligible companies, prior to assuming a role in the activity. Those relationships deemed relevant to the education are mitigated prior to the activity through one of the following strategies, depending on the nature of relationship and the role of the person: 1) divesting the financial relationship, 2) altering the individual's control over content, and/or 3) validating the planning decisions and/or content through independent peer review. All relevant financial relationships are mitigated prior to the activity and mitigation strategies and necessary steps for implementation are communicated to individuals prior to them assuming their role in the activity. Persons who refuse or fail to disclose are disqualified from participating in the activity. Activities are evaluated by participants and peer reviewers to determine if the content was free of bias and met acceptable scientific standards. This information is considered in future activity planning.

#### CULTURAL AND LINGUISTIC COMPETENCY

Continuing medical education (CME) providers are required by state Assembly Bills 1195 and 241, and the standards created by the California Medical Association (CMA), to include components that address cultural and linguistic competency and implicit bias in CME activities. The planners and presenters of this activity has been asked to provide meaningful consideration of these standards in the selection and presentation of content. Additional resources can be found on the UC San Diego CME website:

https://medschool.ucsd.edu/education/cme/tools/Pages/Cultural-Competency.aspx

#### CANCELLATION POLICY

If your registration must be cancelled, your fee, less \$100 U.S. for administrative costs, will be refunded upon your written request. No refunds will be made after **February 17, 2025**. Allow 6-8 weeks for refund.

#### CONFERENCE OFFICE

RES Seminars, 4425 Cass Street, Suite A

San Diego, CA 92109 USA

### CONTACT INFO RES / AKI & CRRT 2025

Phone: 858-272-1018
Fax: 858-272-7687
Email: crrt@res-inc.com
Website: www.crrtonline.com

### **PROGRAM**

### SUNDAY, MARCH 2

12:00pm-7:30pm Conference Registration Open

### PRE-CONFERENCE ELECTIVE WORKSHOP

(Non-CME, see page 3 for elective workshop fees)

### **NEXUS Workshop**

1:00-7:00pm Please see page 21 for details and schedule

#### PRE-CONFERENCE ELECTIVE WORKSHOP

(CME Available except for Session 5, see page 3 for elective workshop fees)

### Practice Based Learning in CRRT: The Science and the Art

This workshop is designed to provide participants with the knowledge and understanding for the effectiveutilization of CRRT to manage critically ill patients. Session 1 on Monday focuses on the fundamentals of CRRT including the components, operational characteristics and characteristics, solute and fluid management and monitoring. Session 2 on Tuesday will utilize case-based discussions and interactive sessions to illustrate the underlying concepts for application of CRRT in different situations. Delegates will participate in group exercises to apply their learning for the management of complex cases. At the end of this workshop participants will have an improved understanding of how to utilize CRRT for optimizing renal support. A quiz will be administered pre-and post- course for assessment.

#### **Learning Objectives:**

- Describe the underlying concepts and review the process of decision making for prescribing and delivering CRRT
- Learn machine set-up for different modalities, alarm conditions, troubleshooting, monitoring and charting
- Utilize the tools provided to manage complex cases

Co-Chairs: Ashita Tolwani, MD and Jorge Cerda, MD

#### SUNDAY AFTERNOON, March 2 - SESSION 1

1:30pm-6:0	Opm CRRT PRINCIPLES - CME Available
1:30-1:45pm	Opening Remarks – Ashita Tolwani, Jorge Cerda
1:45-2:00	Introduction to CRRT Master Class – Ashita Tolwani
2:00-2:30	Patient Selection, Modality, and Dose – Jorge Cerda
2:30-3:15	The ABC of the CRRT Prescription – Ashita Tolwani
3:15-3:45	Access, Membrane, Circuit - Manish Kaushik
3:45-4:15	Solutions and Fluid Balance – Javier Neyra
4:15-4:30	Coffee Break
4:30-4:50	Drug Dosing and Adjustments – Linda Awdishu
4:50-5:10	Nutritional Support During CRRT – Michael Connor
5:10-6:00	Dysnatremias and Acid Base Disorders – Lenar Yessayan
6:00pm	Adjourn (Resume Monday Morning)

#### MONDAY MORNING SCHEDULE ON FOLLOWING PAGE

### MONDAY, MARCH 3

### Practice Based Learning in CRRT: The Science and the Art

Continued from Sunday afternoon

### MONDAY, March 3 SESSION 2

8:00am-9:3	35am IMPLEMENTING CRRT - CME Available
8:00-8:20	De-escalating and Transitioning RRT – Manish Kaushik
8:20-8:40	Integrating Multidisciplinary Support Team for CRRT Delivery – Linda Awdishu
8:40-9:00	Paper to Digital, e-Prescribing and Charting for CRRT During
	AKI in the ICU – Theresa Mottes
9:00-9:20	Developing Quality Measures for CRRT Delivery – David Askenazi
9:20-9:35	Introduction to Workshops – Ashita Towani
9:35-9:50	Coffee Break

#### SESSION 3

9:50am-12:15pm WORKSHOPS - Breakout Sessions - CME Available

Rotating at 45 minute intervals: 9:50-10:35am; 10:40-11:20am; 11:25am-12:15pm

Room #1: Knowing your Circuit, Alarms, and Other Tricks

Katrina Eggleston and Katie Plomaritas

Room #2: The When, How, and Why of CRRT? – Pedro Teixeira and Dana Fuhrman

Room #3: Citrate Lab and Other Anticoagulation Alternatives: Concepts to Build Your Protocol
Lenar Yessayan and Michael Connor

12:15-1:00pm Lunch Hosted by Conference for Workshop Participants

#### SESSION 4

1:00pm-3:00pm WORKSHOPS - Breakout Sessions - CME Available

Rotating at 35 minute intervals: 1:00-1:35pm, 1:40-2:15pm, 2:25-3:00pm

Room #1: Connectology with Hybrid Systems: ECMO, Apheresis, ECCOR

Keith Wille and Katie Plomaritas

Room #2: Precision Solute Control and Dynamic Dosing with CRRT

Manish Kaushik and Ashita Tolwani

Room #3: What's New in Blood Purification in the ICU?

Thiago Reis, Javier Neyra and Raj Basu

3:00-3:15 Coffee Break

#### **SESSION 5 - NON-CME**

3:15pm-5:30pm Please see page 21 for Session 5 Schedule

### **ELECTIVE AKI SYMPOSIUM**

Presented by UAB/UCSD O'Brien Center for AKI Research - NON-CME

### Changing Paradigms in AKI: From Mechanisms to Management

7:55am-5:30pm

See page 22 for full schedule

5:30-7:30pm Monday Evening Reception & Poster Review - For All Conference Attendees

7:00am-7:00pm

Conference Registration Open

### PRE-CONFERENCE POCUS WORKSHOP (CME Available w/ fee)

(CME Available, limited to 40 participants, see page 3 for elective workshop fees)

### Point of Care Ultrasound (POCUS): Science and Practice

This course is designed for nephrology and critical care providers to learn the basics of Point-Of-Care Ultrasound with a specific focus on frequent pathologies found in acutely ill patients. This workshop will include brief didactic sessions and hands-on sessions. At the end of this workshop, the trainees will have basic knowledge about indications for POCUS, normal/abnormal findings, and how this can be integrated in the evaluation of the patients. The aim is to provide the introductory practical skills necessary to continue their training autonomously. A quiz will be administered pre- and post-course for assessment.

Faculty: W. Beaubien-Souligny; K. Kashani; A. Shaw, R. Wald; J. Deschamps; V. Niyyar, P. Teixeira

#### **Learning Objectives:**

The core focus on this course is as follows:

#### 1. Cardiac:

- A. Qualitative assessment of chamber size and systolic function;
- B. Identification of severe valvulopathy;
- C. Assessment of pericardial fluid and tamponade physiology

#### 2. Thoracic:

- A. Qualitative assessment of pleural effusion size and characteristics;
- B. Identification of pneumothorax;
- C. Assessment of alveolar consolidation and interstitium

#### 3. Abdominal:

- A. Identification of kidney and bladder and assessment of kidney size and echogenicity, and evaluation of urinary obstruction;
- B. Identification of intraperitoneal fluid;
- C. Qualitative assessment of abdominal aorta size

#### 4. Vascular and Vascular Access:

- A. Patency and caliber of main veins for catheter placement;
- B. Identifying the presence of a thrombus;
- C. Basic examination of an arteriovenous fistula/graft

#### 5. Hemodynamic and Fluid Evaluation:

- A. Inferior vena cava visualization and assessment;
- B. Venous Doppler assessment;
- C. Estimating stroke volume / cardiac output

**Schedule** - Participants will be allocated into groups of 4 and will rotate through each of 5 stations to review the principles of image identification and interpretation and get hands-on experience with the ultrasound probes.

#### 8:00-8:20am Welcome and Pre-quiz

- 8:20-8:45 Introduction to Basics of Lung Ultrasound
- 8:45-9:15 Lungs: Hands-on (group 1) / Image Review Session (group 2)
- 9:15-9:45 **Lung Part 2** (group switch)
- 9:45-10:00 Coffee Break
- 10:00-10:20 Introduction to Basic Echocardiography
- 10:20-10:50 **Heart: Hands-on** (group 1) / **Image Review Session** (group 2)
- 10:50-11:10 **Heart Part 2** (group switch)
- 11:10-12:30 Vascular Ultrasound and Vascular Access
- 12:30-1:15 Lunch Hosted by Conference for Workshop Participants
- 1:15-1:35 Introduction to Abdominal and Renal Ultrasound
- 1:35-2:05 **Abdomen: Hands-on** (group 1) / **Image Review Session** (group 2)
- 2:05-2:35 **Abdomen Part 2** (group switch)
- 2:35-2:50 Coffee Break
- 2:50-3:10 Introduction to Fluid Status Assessment: Putting it all together
- 3:10-3:40 Fluid Assessment: Hands-on (group 1) / Image Review Session (group 2)
- 3:40-4:10 Fluid assessment 2 (group switch)
- 4:10-4:30 Post-quiz and Conclusion
- 4:30 Adjourn

5:30-7:30pm Monday Evening Reception & Poster Review - For All Conference Attendees

### **TUESDAY MORNING, MARCH 4**

7:00am-7:00pm Conference Registration Open

7:00-8:00am MEET THE EXPERT - Breakfast Sessions (CME Available)

(elective sessions, choose one, see pg. 4 for fees/details)

Session 1 (ME1) - How do I use Hemadsorption Techniques in My Practice

Claudio Ronco and Thomas Rimmelé

Session 2 (ME2) - How Do I use ChatGpt to Help Me Work Smarter?

Azra Bihorac and Rolando Claure-Del Granado

7:00-8:00am MORNING SYMPOSIA - (CME Available for A and B)

(Seating is LIMITED, selection made during registration, coffee served)

#### Symposium A

De-escalating and Transitioning RRT: Best Practices

Ron Wald and Anitha Vijayan (Moderators)

The practice of transitioning between RRT modalities and discontinuing RRT varies widely across different centers. Due to a lack of guidelines, care delivery often relies on subjective assessments of the patient's condition. This symposium will explore the evidence for weaning patients from acute RRT and discuss the transition between different RRT modalities.

Modality Transitions for RRT: What do I do - Ashita Tolwani

Discontinuation of RRT - When and How - Sean Bagshaw

Liberation off CRRT - Strategies to Optimize Care in Children - Shina Menon

#### Symposium B

8:20-10:30am Plenary 1 - MINI-SYMPOSIA

Marlies Ostermann

Utilizing Biomarkers for AKI Management: Practical Considerations

John Prowle and Mitra Nadim (Moderators)

Current paradigms for diagnosing, staging, and monitoring kidney function changes from AKI rely on serum creatinine and urine output, which often do not correlate with underlying structural damage. The availability of various biomarkers of kidney function and damage offers new approaches for patient evaluation and targeted interventions. This symposium will discuss practical ways to incorporate biomarkers to enhance management of AKI.

**Determine High Risk Patients and Intervention Strategies** - Alex Zarbock **Implementing Dialysis Timing with Biomarker Guidance** - Rajit Basu

Assessing Recovery and Treatment Response to Intervention - Christian Nusshag

9:30-9:45

Sepsis Associated AKI:

### SESSION I: PATIENT CHARACTERISTICS (CME Available)

CME Available	Organ Dysfunction in the Critically Ill Patient: Emerging Concepts		What Have we Learned? Matthieu LeGrand
Co-Chairs: 8:20-8:30	Eric Hoste and Kathleen Liu  Opening Remarks  Ravindra L Mehta	9:45-10:00 10:00-10:30	New Insights in Thermoregulation Peter Pickkers SPECIAL LECTURE
8:30-8:45 8:45-9:00	Worsening Kidney Function in Acute Heart Failure Amir Kazory Refractory Shock: Can we Define it?		AI in the ICU: Are We Ready? Yes: Azra Bihorac Maybe: Jay Koyner No: Lui Forni
9:00-9:15	Ashish Khanna Neural Control of Multiorgan	10:30-11:00	Moderator: Claudio Ronco  Coffee Break / Faculty Picture
9:15-9:30	Dysfunction in AKI Mark Okusa Lactate in Critical Illness		

### **TUESDAY MORNING, MARCH 4**

### STANDARD WORKSHOPS - GROUP 1 (CME Available for All)

Open to all participants - applicable to physicians, nurses and allied personnel

Codes: C= Core workshop, I = Intermediate, A = Advanced, N= Nurses, AP = Nurses & Allied Personnel These Standard Workshops are designed for smaller groups and allow for more interaction between presenters and attendees. Ample time is available for Q&A.

CME Available for All 4 Workshops

#### Workshop Tracks

A: Biomarkers; B: CRRT Technique; C: Critical Care Topics; D: Organ Support

#### 11:00am-12:30pm GROUP 1 - SIMULTANEOUS STANDARD WORKSHOPS (choose one)

#### A01 Enhancing Communication in the Workplace: Improving Skills with Empathy (C.N.AP)

This experiential workshop aims to enhance patient care by fostering curiosity, listening, and perspective-taking skills. It will help participants develop competence in addressing communication challenges. Through brief interactive didactics, medical improv, and reflective exercises, we will improve skills essential for care providers and team members. Additionally, we will explore how implicit bias affects communication through prejudices, stereotyping, or discrimination.

(G. Mehta, JM Maury) Limited to 30 participants

### B02 Citrate Anticoagulation for CRRT: How to Use it? (C,N,AP)

Regional citrate anticoagulation (RCA) is increasingly utilized for CRRT. Advances in technology have enabled automated citrate anticoagulation. However, concerns remain about its ease of use and application in patients with liver failure and reduced tissue perfusion. This workshop will discuss the best approaches for utilizing RCA for CRRT. (*Tolwani*, *Joannidis*, *Srisawat*)

#### C03 Pediatric AKI and RRT: Beyond the Basics (I,N,AP)

This workshop will highlight the epidemiology and best practices for AKI management and CRRT, peritoneal dialysis and tandem therapies application in neonates and children. (*Plomaritas*, *Selewski*, *Soranno*)

#### D04 Managing Patients with Combined Kidney and Liver Failure (C,N,AP)

Patients with combined liver and kidney failure are difficult to manage. This workshop will discuss the pathophysiology and illustrate best approaches for differential diagnosis and management of these patients.

(Nadim, Deep, Rosner)

#### 12:30-2:00pm Lunch



### **TUESDAY AFTERNOON, MARCH 4**

12:30-2:00pm **LUNCH SYMPOSIA** - (*Non-CME*)

(Seating is LIMITED, selection made during registration, lunch provided by conference. Please note, these are the only lunch options provided on Tuesday.

### T1 - Establishing Evidence for Interventions for AKI and CRRT: Trial Designs and Endpoints

Currently, no specific therapy exists for preventing or treating AKI other than mitigating further injury and providing supportive care. Clinical trials in AKI and CRRT have largely been unsuccessful in providing evidence for novel therapeutic interventions targeting underlying pathophysiology. This symposium will discuss the rationale and adoption of new, well-designed clinical trials with appropriate endpoints to confirm or refute the efficacy of such interventions.

Moderators: Glenn Chertow and Kathleen Liu

Sex and Gender Considerations in Critical Care Nephrology Trials – Nuttha Lumlertgul Endpoints for AKI Trials - Time for a MAKE-over? – Andrew Shaw Clinical Trial Designs: ADQI Recommendations – Alex Zarbock

#### T2 - Improving Care for Patients After Hospitalization for AKI

AKI is a complex disease that requires multidisciplinary interventions however most patients who are hospitalized with an episode of AKI do not have systematic follow up or targeted interventions to improve recovery and mitigate the effects of the disease. This session will provide guidance on patient centered approaches to improve the management and outcomes of patients with AKI.

Moderators: Jorge Cerda and Samira Bell

Developing a Post-AKI follow-up Clinic - Real-life Experience – Nick Selby

Barriers to Effective Patient Education and Follow-up in AKI Recovery – Etienne Macedo

Post-Hospitalization of Patients with AKI Requiring Dialysis – Anitha Vijayan



### **TUESDAY AFTERNOON, MARCH 4**

### STANDARD WORKSHOPS - GROUP 2 (CME Available)

#### CME Available for All 4 Workshops

#### 2:00-3:30pm GROUP 2 - SIMULTANEOUS STANDARD WORKSHOPS (choose one)

A05 Enhancing Communication in the Workplace: Addressing Conflict and Uncertainty (C,N,AP)
Patients' emotional responses to illness, along with clinicians' reactions, are central to healthcare
communication. Strong emotions significantly influence decision-making and clinical outcomes.
Recognizing, validating, and managing negative emotions in patients is crucial. This workshop will
provide brief didactics and reflections, share strategies for empathic communication, and explore
ways to maintain our own emotional regulation. (G Mehta, Fuhrman)

Limited to 30 participants

#### B06 Precision Solute Control and Dynamic Dosing with CRRT? (I,N,AP)

CRRT techniques have evolved with availability of new technology to customize dialysis delivery. This interactive case based workshop will discuss how to apply the technology for dose adjustments, monitoring for adequacy, modality selection and transitions in CRRT. (Claure, Kaushik, Prowle)

#### C07 Starting, Transitioning and Stopping RRT for AKI: Science and Art (C,N,AP)

One of the most vexing issues for clinicians is determining when to initiate RRT in critically ill patients, when and how to transition modalities and when it can be stopped. This workshop will use case studies to explore various approaches and establish the principles for clinical decisions for renal support. (Mehta, Bagshaw, Lumlertgul)

#### D08 Hemadsorption: Techniques and Application (ECOS) (C,N,AP)

Hemadsorption techniques have advanced with the development of selective membranes for extracorporeal organ support. These methods are now widely used, often alongside standard CRRT. This workshop will cover the rationale and strategies for practical application, using case studies to explore different options. (Ronco, Reis, Rimmelé)

3:30-4:00pm Coffee Break

### SESSION I: PATIENT CHARACTERISTICS - continued (CME Available)

	Plenary 2 - MINI-SYMPOSIA Acute Kidney Injury (AKI): Pathophysiology	5:00-6:00	SPECIAL SESSION 30 Years of AKI and CRRT: Reflections and Predictions
Co-Chairs:	Danielle Soranno and Kent Doi		Panel: Claudio Ronco,
4:00-4:15	Adenosine Antagonists and the Kidney David Askenazi		Tim Bunchman, Ravindra Mehta, Glenn Chertow & TBD Moderators:
4:15-4:30	The Emerging Concept of	6.00	Stuart Goldstein & Marlies Ostermann
	Tubular Functional Reserve Vincenzo Cantaluppi	6:00pm 6:00-8:00pm	Adjourn EXHIBIT RECEPTION AND
4:30-4:45	AKI in the Neurosurgical Unit Vedran Premuzic	1	POSTER SESSION
4:45-5:00	Urine Profiling in Sepsis Associated AKI		
	Christian Nusshag		

### **WEDNESDAY MORNING, MARCH 5**

7:00am-6:00pm Conference Registration Open

#### 7:00-8:00am MEET THE EXPERT - Breakfast Sessions (CME Available)

(elective sessions, choose one, see pg. 4 for fees/details)

Session 3 (ME3) - How do I Monitor Quality for CRRT in my ICU

Theresa Mottes and Oleksa Rewa

Session 4 (ME4) - How do I Manage the Oliguric Patient?

Ashish Khanna and Lui Forni

#### 7:00-8:00am MORNING SYMPOSIA - (CME Available for C and D)

(Seating is LIMITED, selection made during registration, coffee served)

# Symposium C - Nutritional Strategies for AKI and CRRT: Can We Improve Outcomes? Michael Connor and Linda Awdishu (Moderators)

Patients with AKI often experience malnutrition due to altered nutrient metabolism and nutrient loss associated with RRT. Recent trial data suggests that adjusting protein and energy intake is crucial for improving outcomes in these patients. This symposium will review the latest findings on nutrition and discuss current official recommendations.

Assessing Nutritional Status and Needs in the ICU - Michael Joannidis

The Who, When and How of Nutritional Support for AKI and CRRT Marlies Ostermann

Protein, Urea and Outcomes in AKI - John Prowle

# Symposium D - Managing the Heart Failure Patient with Worsening Renal Function Patrick Murray and Raj Chakaravarthi (Moderators)

Patients with advanced heart failure often develop worsening renal function (WRF), making it challenging to decide between drug therapy and RRT. This workshop will cover practical applications and outcomes of various treatments for heart failure and cardio-renal syndrome, including ultrafiltration techniques.

Assessing Cardiac Function - What Tools? - Jean Deschamps

Improvement in Renal Function: Is It a Good Thing in Acute Heart Failure?

Amir Kazory

Is Urine Sodium Effective at Guiding Decongestion? - Rolando Claure-Del Granado

#### STANDARD WORKSHOPS - GROUP 3 (CME Available)

CME Available for All 4 Workshops

#### 8:15-9:45am GROUP 3 - SIMULTANEOUS STANDARD WORKSHOPS (choose one)

#### A09 Enhancing Communication in the Workplace: When Something Goes Wrong (C,N,AP)

Despite our best efforts, patients sometimes face unintended negative consequences from care or treatment. It is our professional duty to disclose adverse events and near misses to patients and their families with honesty. This workshop will provide evidence-based communication tools to help offer apologies, share necessary information, and provide emotional support and resources. We will use clinical scenarios and role-plays to address challenges and manage these conversations effectively. (G. Mehta, Ostermann) Limited to 30 participants

#### B10 Personalized Fluid Management with CRRT (A,N,AP)

Achieving fluid balance and maintaining plasma composition is key for effective CRRT. This workshop will use case studies to discuss strategies for fluid management in CRRT to achieve patient driven outcomes for fluid, electrolyte and acid base balance. (Murugan, Mehta, Beaubien-Souligny)

#### C11 Optimization of the CRRT Program to Improve Outcomes (A,N,AP)

Although RRT is widely applied globally, there are minimal established criteria for monitoring care quality. This symposium will outline the characteristics of top-tier CRRT programs and strategies for Quality Improvement by integrating data from CRRT devices and clinical information. The importance of policies, procedures, and dashboards will also be discussed. (Neyra, Mottes, Rewa)

#### D12 Plasma Exchange in Critically Ill Patients: Who, When and How (A,N,AP)

Plasma exchange (PE) is increasingly utilized in the ICU with CRRT and other extracorporeal techniques. This workshop will describe the best approaches for applying PE in critically ill patients and explore merging opportunities for managing patients with hybrid therapies. (Sanchez, Premuzic, Noiri)

### WEDNESDAY, MARCH 5

#### SESSION II: CONTROVERSIES IN CRITICAL CARE NEPHROLOGY (CME Available)

10:15am-12:30pm Plenary 3 - MINI-SYMPOSIA 11:15-11:30 Immune Disorders of AKI Patients CME Available Challenges in ICU Management Following Various Types of Injuries Peter Pickkers and Nuttha Lumlertgul Thomas Rimmelé Co-Chairs: 11:30-11:45 **Hepatorenal Syndrome:** 10:15-10:30 Post-op Vasopressors Use and the **Changing Paradigms** Kidnevs: Is There a Problem? Mitra Nadim Lui Forni 10:30-10:45 SGLT2 Inhibitors and Critical 11:45-12:15 SPECIAL LECTURE Illness San Diego AKI & CRRT Award Translating Discoveries to Marlies Ostermann Enhance Management in AKI 10:45-11:00 Intra-abdominal Hypertension TBD and Renal Perfusion Pressure: **Targets for Intervention?** 12:15-12:30 Top Abstract Awards Ashish Khanna 11:00-11:15 Understanding Kidney Health **During and After Critical Illness** 

12:30-2:00pm LUNCH SYMPOSIA - (Non-CME)

John Prowle

(Seating is LIMITED, selection made during registration, lunch provided by conference. Please note: At this time, these are the only lunch options provided on Wednesday.)

#### W1 - Chat GPT is Here to Stay: What Can We Expect?

The use of ChatGPT and similar AI tools is growing across various aspects of our lives. Despite being in the early stages of acceptance, these tools are being adopted in healthcare for quick access to medical information, generating patient summaries, suggesting diagnoses, and providing treatment options. This symposium will explore the emerging applications and practical issues of these techniques in managing ICU patients.

Moderators: Jay Koyner and Nuttha Lumlertgul

AI for Continuous Acuity Prediction in the ICU - Azra Bihorac

AI Generated Risk Score for Acute Kidney Injury Prediction - Rolando Claure-Del Granado ChatGPT applications in Critical Care Nephrology - Kianoush Kashani

#### W2 - AKI Post Transplant: Recognition and Management

Acute kidney injury (AKI) frequently occurs in recipients of solid-organ transplants, such as kidney, heart, lung, and liver transplants. In addition to the typical causes of AKI in native kidneys, transplanted organs have unique risk factors. This symposium will cover the epidemiology, clinical significance, and pathogenic mechanisms of AKI, as well as the impact of immunosuppressive therapies on these patients. *Moderators:* Keith Wille and Vandana Niyyar

Post Non-Kidney Solid Organ Transplant AKI: Patterns and Outcomes - Raj Chakaravarthi AKI Post Kidney Transplant - Vincenzo Cantaluppi Pediatric Post Transplant AKI - Akash Deep

### WEDNESDAY AFTERNOON, MARCH 5

### SESSION III: EMERGING CONCEPTS IN AKI AND RRT (CME Available)

	Plenary 4 - MINI-SYMPOSIA Novel Strategies in AKI Management		Plenary 5 - MINI-SYMPOSIA Challenges and Controversies in
Co-Chairs:	Samira Bell and Javier Neyra	CME Available	Renal Support and CRRT
2:00-2:15	Early Detection of Drug-induced	Co-Chairs:	Anitha Vijayan and Nattachai Srisawat
	Kidney Injury (DIKI): Role of Biomarkers Patrick Murray	4:15-4:30	ECMO and CRRT: Synergism or Dissonance
2:15-2:30	Role of Renal Functional Reserve on AKI Risk and Recovery	4:30-4:45	David Selewski Net Balance vs Net UF: What Matters?
2:30-2:45	Claudio Ronco How Best to Assess Renal Recovery after AKI	4:45-5:00	Ravindra Mehta Starting RRT for AKI: How Late is too Late?
2:45-3:00	Nick Selby AKI - Is it All the Same?	5:00-5:15	Ron Wald  Effect of Ultrafiltration Rates on
3:00-3:15	Alex Zarbock  Preventing Cardiac Surgery AKI:  Do we have a Solution		Kidney Recovery Post AKI Etienne Macedo
3:15-3:30	Andrew Shaw Temporary Mechanical	5:15-5:30	RRT Dose-Intensity in AKI - Time to Revisit Sean Bagshaw
	Circulatory Support and the Kidney Jean Deschamps	5:30-5:45	PIRRT in Critical Care: Does it have a Role?
3:30-3:45	Management of RAAS Inhibitors in the Pre-op Setting Matthieu LeGrand	5:45-6:00	Eric Hoste  ADQI 34: Renal Toxicity Due to  Anti-Cancer Therapies  Mitch Rosner
3:45-4:15	Coffee Break	6:00	Adjourn - Free Evening



### THURSDAY MORNING, MARCH 6

7:00am-1:00pm Conference Registration Open

7:00-8:00am MEET THE EXPERT - Breakfast Sessions (CME Available)

(elective sessions, choose one, see pg. 4 for fees/details)

Session 5 (ME5) - How do I care for the Patient with ARDS and AKI

Kathleen Liu and Keith Wille

Session 6 (ME6) - How do I Dose Volume During CRRT?

Raghavan Murugan and David Selewski

7:00-8:00am MORNING SYMPOSIA - (CME Available for E and F)

(Seating is LIMITED, selection made during registration, coffee served)

Symposium E

Adapting CRRT for Patients with Electrolyte and Acid Base Problems

Pedro Teixeira and Harin Rhee (Moderators)

Acid base and electrolyte problem are commonly encountered in critically ill patients and are often the reason for initiating CRRT. This symposium will discuss three common situations in ICU patients and provide guidance on best practices for recognition and management.

Bicarbonate in AKI: Use and Misuse - Lui Forni

Dysnatremias: How to Correct with CRRT - Lenar Yessayan

Phosphorus and Magnesium Abnormalities During CRRT - Mitch Rosner

Symposium F

Assessment of Fluid Responsiveness, Hemodynamic Monitoring and Targets

Matthieu Legrand and Akash Deep (Moderator)

Fluid administration is an integral component of management of critically ill patients. Determining which patient needs fluids, what type, when and how much is crucial for optimal management. This symposium will cover the principles and strategies for volume assessment and hemodynamic monitoring in ICU.

Assessing Volume Status in the ICU Patient: Tools and Strategies

Kianoush Kashani

Emmanuel Burdmann

**POCUS for Fluid Management: Can it Guide Therapy?** 

William Beaubien-Souligny

Hemodynamic Monitoring: What Metrics Should We Follow? - Eric Hoste

#### SESSION IV: IMPROVING OUTCOMES IN AKI (CME Available) 8:00-10:30am Plenary 6 - MINI SYMPOSIA 9:15-9:30 TBD CME Available Global Burden of AKI TBD 9:30-9:45 **Greening CRRT:** Co-Chairs: Rai Chakaravarthi and Etienne Macedo **Opportunties and Challenges** Harin Rhee 8:00-8:15 Effects of AKI in Liver Disease 9:45-10:00 **Acute PD vs Acute HD:** Akash Deep Which is the Right Choice? 8:15-8:30 Inequalities in Healthcare and Nattachai Srisawat Effects on Kidney Disease 10:00-10:15 Controversial Issues in CKRT: Samira Bell **Insights from Korean Guidelines** 8:30-8:45 Changing Epidemiology of AKI: SeJoong Kim What have we Learned? 10:15-10:30 ADQI 35: Jorge Cerda Accelerating the Adoption of 8:45-9:00 Advances in Pediatric AKI **Evidence-based Practices in AKI** Timothy Bunchman Javier Neyra and Oleksa Rewa 9:00-9:15 **Heat Stress and Kidney** 10:30-11:00 Coffee Break Dysfunction

### THURSDAY MORNING, MARCH 6

### SESSION V: FUTURE TRENDS IN CRRT AND CRITICAL CARE (CME Available)

11:00am-1:00pm Plenary 7 - MINI SYMPOSIA 5. Bicarbonate in CRRT Trial CME Available Emerging Strategies in AKI and Michael Joannidis Extracorporeal Support 6. Dialyzing Wisely Program Thiago Reis and Harin Rhee Oleksa Rewa Co-Chairs: 7. TIGRIS Trial 11:00-11:15 New Horizons in AKD Care and TRD Prevention 8. KOURAGE Trial Vincent Wu Patrick Murray 11:15-12:30 Update from Ongoing and 9. AM Pharma Trial **Late Breaking Trials** Peter Pickkers 8-10 minutes each

1. The RELIEVE-AKI Trial 12:30-12:55 Critical Care Nephrology: Raghavan Murugan Literature Review Kianoush Kashani 2. The ESTOP AKI Trial Jay Koyner 12:55-1:00 **Closing Remarks** 3. LIBERATE-D Trial

Ravindra L. Mehta

Kathleen Liu Chairman 4. HERICC REGISTRY: PHASE 2 1:00pm Conference Adjourns Vedran Premuzic

#### SUNDAY, MARCH 2

12:00pm-7:30pm Conference Registration Open

### PRE-CONFERENCE ELECTIVE WORKSHOP

(Non-CME, see page 3 for elective workshop fees)

### **NEXUS**

Progress to improve care for children with critical care nephrology related illnesses continues. To continue a movement towards collaborative innovation, education, and study, the NEXUS is a symposium to focus the global approach to care for critically ill neonates and children. NEXUS is a joint session between all pediatric critical care nephrology care providers, industry partners, and thought leaders in the spaces of diagnostics, therapeutics, advocacy, and education.

#### SUNDAY AFTERNOON, March 2

1:00-1:15	Welcome to the NEXUS
1:15-2:15	Pediatric Collaboratives - Around the Horn
2:15-3:15	Refreshment & Networking Session #1 - "What are the questions we aren't asking?"
3:15-4:15	The Next Big Ideas (x3) - Jr. Faculty Led Sessions
4:15-5:15	The Industrial Pediatric Revolution: The Newest Paths in the Road
5:15-6:15	Refreshment & Interactive Session #2 – "Going Faster"
6:15-6:30	Sharing of Ideas / Concluding Statements

6:30-7:15 Adjourn/Break

7:15-10:00 **Dinner** 

Faculty: David Askenazi, Rajit K. Basu, Stuart Goldstein, Theresa Mottes, Dana Fuhrman and

Timothy Bunchman

### **MONDAY, MARCH 3**

### PRE-CONFERENCE ELECTIVE WORKSHOP

(see page 3 for elective workshop fees)

### Practice Based Learning in CRRT: The Science and the Art

(Non-CME Portion)

Continued from Monday Afternoon

#### SESSION 5 - NON-CME

#### 3:15pm-5:30pm INTERACTIVE TRACKS

These sessions will have adult and pediatric tracks to familiarize attendees with the available CRRT machines. Participants will be guided on user inter-faces, learn how to set up for different modalities and adjust and monitor for therapy delivery based on the prescription. Machines connections for combination therapies with ECMO, apheresis and adsorption techniques will be shown. *This Session is Non-CME* 

## 3:15pm-4:45pm CRRT Equipment Demonstrations Simultaneous - Breakout Sessions (select one)

Room #1: Baxter PRISMAX

Ashita Tolwani, Michael Connor, Katrina Eggleston and TBD

Room #2: Fresenius NxStage / MultiFiltrate Pro

Lenar Yessayan, MD and TBD (multiFiltrate Pro) and TBD (NxStage)

Room #3: Pediatric Systems – David Askenazi, Dana Fuhrman and Theresa Mottes

#### 4:45pm-5:30pm CRRT MASTER CLASS

In this session participants will be allocated to teams and given a case scenario for which they have to determine an appropriate prescription for CRRT and program the machine to deliver the therapy.

5:30 Adjourn

5:30-7:30pm Monday Evening Reception & Poster Review - For All Conference Attendees

7:00am-7:00pm

5:30-7:30pm

Conference Registration Open

### PRE-CONFERENCE AKI SYMPOSIUM (Non CME)

(see page 3 for elective symposium and workshop fees)

# **Changing Paradigms in Acute Kidney Injury: From Mechanisms to Management**

Presented by UAB/UCSD O'Brien Center for AKI Research

Full Conference registration is NOT required for this elective symposium. See page 4 for details.

7:55 am	Opening Remarks - Ravindra Mehta, MD
PLENARY 1	The Discovery Pipeline: Molecules, Mechanisms and Targets
Non-CME	Co-Chairs: Alex Zarbock and Prabhleen Singh
8:00-8:20	Roles of Lymphatics and Lymphangiogenesis in AKI - Joseph Rutkowski
8:20-8:40	Iron Metabolism in AKI to CKD Transition - Abolfazl Zarjou
8:40-9:00	Enhancing Kidney Repair - TBD
9:00-9:20	Sensing the Pressure: Role of Mechanosensory Channels in Kidney Damage in
	AKI and CKD - Mark Okusa
9:20-9:40	Cellular and Mitochondrial Dysfunction: Targets for Intervention? - Vincenzo Cantaluppi
9:40-10:00	Discussion
10:00-10:15	Coffee Break
PLENARY 2	Bench to Bedside: Translating Discoveries to Clinical Care
Non-CME	Co-Chairs: Mark Okusa and Volker Vallon
10:15-10:35	Development as a Biological Variable in Experimental Models of AKI - Danielle Soranno
10:35-10:55	The Role of ORAI-1 in AKI - Sudarshan Hebbar
10:55-11:15	Insights for AKI from the Human Kidney Precison Medicine Project (KPMP)
	Matthias Kretzler
11:15-11:35	Targeting Mitochondria and Metabolism in AKI - Mark Hepokoski
11:35-11:55	Metabolic Communication Through SGLT2 Inhibition - Volker Vallon
11:55-12:15	Discussion
12:15-1:15pm	Lunch Hosted by Conference
PLENARY 3	Emerging Strategies for AKI Studies
Non-CME	Co-Chairs: Kathleen Liu and Sejoong Kim
1:15-1:35	Nephrons of Steel: Exploring Kidney Fitness and Resistance to Acute Kidney Injury Dana Fuhrman
1:35-1:55	Clinical Trial Endpoints for AKI: Consensus Recommendations from ADQI - Lui Forni
1:55-2:15	Bayesian Methods: A Potential Path forward for ICU Trials - John Kellum
2:15-2:35	In-Silico Trials in AKI and Sepsis - Gianluca Villa
2:35-2:55	Drug-Induced Acute Kidney Injury Risk Prediction Models - Linda Awdishu
2:55-3:15	Discussion
3:15-3:30	Coffee Break
PLENARY 4	Evolving Paradigms: Lessons from Ongoing Trials
Non-CME	Co-Chairs: Nuttha Lumlertgul and Ron Wald
3:30-3:50	Design and Conduct of the COPE AKI Study: What are we Learning? - Ivonne Schulman
3:50-4:10	Selective Cell Cytopheretic Device for AKI - Stuart Goldstein
4:10-4:30	Towards Health Care Metaverse: Digital Twins in the ICU - Azra Bihorac
4:30-4:50	Refining Inclusion Criteria for AKI Clinical Trials - Glenn Chertow
4:50-5:10	Tackling Hatavaganaity, Phonetyping for Hamadaauntian Vant Dai
	Tackling Heterogeneity: Phenotyping for Hemadsorption - Kent Doi
5:10-5:30	Discussion

Monday Evening Reception & Poster Review - For All Conference Attendees