September 22, 2015

Greetings,

On behalf of Mayo School of Continuous Professional Development, we are pleased to announce Mayo Clinic’s upcoming CME Course, *Mayo Clinic Comprehensive Shoulder and Elbow Course: Current Concepts and Controversies*. This course is January 23–24, 2016 at the Fairmont Scottsdale Princess in Scottsdale, Arizona. This is the only shoulder or elbow course offered by Mayo Clinic in 2016 that is open to all interested attendees; The Mayo Clinic Elbow Course is an invite-only course and is happening in 2016.

**PROGRAM OVERVIEW**

*Comprehensive Shoulder and Elbow Course: Current Concepts and Controversies* provides information on the latest treatment options for shoulder and elbow arthroplasty, arthroscopy, fracture and reconstruction. The focus is on the best current practice in diagnosis, treatment and new technology. Faculty with international expertise in shoulder and elbow surgery discuss how to optimize surgical techniques and how to avoid complications. Didactic sessions emphasize tips and pearls to approach complex shoulder and elbow reconstruction. Attendees are encouraged to bring cases for discussion. A sawbones session is also available for attendees during lunch.

The conference outline is below.

**Exhibit Opportunity**

At this time, we would like to invite you to exhibit at the course. The exhibit fee is $1,500 and exhibit space is limited. If you are interested in exhibiting, please complete and return the attached exhibitor registration and letter of agreement to Kathy Fuqua: Fuqua.kathy@mayo.edu or fax: 507-538-7234.

We look forward to your support and participation. If you have any questions, please contact Julie Reed by telephone at (507) 266-2821or via e-mail at reed.julie1@mayo.edu.

Thank you for your consideration and we look forward to a favorable reply.

Sincerely,

Diane L. Dahm, M.D.
John W. Sperling, M.D.
Scott P. Steinmann, M.D.
*Course Directors*
# Mayo Clinic Comprehensive Shoulder and Elbow Course: Current Concepts and Controversies

**January 23 – 24, 2016**  
**Fairmont Scottsdale Princess, Scottsdale, Arizona**

## Program Schedule

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>6:15 a.m.</td>
<td>Registration and Breakfast</td>
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</table>
| 7:00 – 10:30 a.m. | Instability  
Role of Surgery After First Dislocation  
When Do We Add Bone Graft?  
Latarjet, Techniques, Complications  
Role of Remplissage  
Panel: Instability Cases |
| 10:30 – 11:30 a.m. | Management of the Stiff Elbow  
Medical Collateral Ligament Tears: How to Fix and When  
Common Mistakes in Elbow Arthroscopy  
Elbow Fracture Panel  
Elbow Arthroscopy Disasters  
Distal Bicepts (Single vs. Two Incision) |
| 11:30 a.m. – 1:30 p.m. | Lunch and Sawbones |
| 1:30 – 4:00 p.m. | Rotator Cuff  
Nonoperative tx of Cuff Tears  
Subscapularis Tears  
Biceps Death: Above, at, or Below the Groove  
Massive Tear: Role of Tendon Transfers  
Single or Double Row: Who Cares?  
Grow Your Own: Do Any Adjuncts Help RCT heal?  
Arthroplasty  
How do you Diagnose an Infected Arthroplasty  
Infected Arthroplasty: One or Two Stage  
Do You Need a Stem on the Humeral Side?  
B2 Glenoid: rTSA is the Best Way to Go?  
Non Arthroplasty Options in the Young Patient  
Mini-stem Options vs. Standard Stems: Where’s the Science? |
| 4:00 – 5:00 p.m. | Case Presentations  
Shoulder Fracture Disasters |
<p>| 5:00 p.m.     | Adjourn Day                                                          |</p>
<table>
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<tr>
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<tr>
<td>6:15 a.m.</td>
<td>Breakfast</td>
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<tr>
<td></td>
<td><strong>Elbow Trauma and Reconstruction</strong></td>
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| 7:00 – 9:00 a.m. | Revision TEA with Bone Loss  
                   | Infected TEA: Treatment Algorithm  
                   | Coronoid Fx: Do We Need to Fix All?  
                   | Radial Head Arthroplasty Ingrowth vs. Polished Stems  
                   | Terrible Triad: How Terrible? Do All Need ORIF? |
| 9:00 a.m. – 12:00 p.m. | Shoulder Reconstruction:  
                     | Should SLAP Tears Be Repaired  
                     | PASTA Repair vs. Take-down RCR  
                     | Proximal Humerus fx: What is New?  
                     | A/C joint Separation and Clavicle fx – Treatment Update |
| 12:00 p.m. – 1:00 p.m. | Shoulder Cases: Instability, Cuff Disease, Biceps, Arthroplasty |
| 1:00 p.m.    | Course Adjourns                             |
Mayo School of Continuous Professional Development (MSCPD)

Exhibitor Agreement
Regarding the Terms and Conditions for a Commercial Exhibit

Activity Title: Mayo Clinic Comprehensive Shoulder and Elbow Course: Current Concepts and Controversies
Activity Number: 2016R322

Location: Fairmont Scottsdale Princess, Scottsdale, AZ  Date(s) January 23-24, 2016

Agreement between: ACCREDITED PROVIDER (PROVIDER):
Mayo Clinic College of Medicine – Mayo School of CPD
AND

Name of Commercial Company (EXHIBITOR): _________________________________________________
(as it should appear on printed materials)

Name of Person Exhibiting: __________________________________________________________________

Address: ________________________________________________________________________________

Telephone: ________________________ Fax: _____________________ Email: _______________________

The named EXHIBITOR wishes to exhibit at the above named activity for the amount of $1,500

Payment Information

Federal Tax ID number is 41-6011702

☐ Check
Make check payable to Mayo Clinic and remit to: Mayo School of Continuous Professional Development
Attn: Julie Reed, MSCPDA
Plummer 2-60
200 First Street SW
Rochester, MN 55905

(Identify course name on check Shoulder/Elbow 2016R322)

☐ Electronic Transfer

$25 fee

Please contact CME office for account information.
By signing below, I agree to the “Terms and Conditions” outlined on Page 2 of this Exhibitor Agreement (including ACCME Standards for Commercial Support):

EXHIBITOR Representative: _______________________________ 
(I understand and agree that typing my name above is the electronic equivalent of a written signature) (Date)

PROVIDER Representative: ____________________________________ (Signature) (Date)

TERMS AND CONDITIONS

• EXHIBITOR agrees to abide by ACCME Standards for Commercial Support as stated at www.accme.org:
  SCS 4.2: “Product-promotion material or product-specific advertisement of any type is prohibited in or during CME activities. The juxtaposition of editorial and advertising material on the same products or subjects must be avoided. Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from CME.” “Live, face-to-face CME, advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during or after a CME activity. Providers cannot allow representatives of Commercial Interests to engage in sales or promotional activities while in the space or in the place of the CME activity.”

• EXHIBITOR may not distribute promotional materials. Distribution of pharmaceuticals or other samples is prohibited.

• All commercial support associated with this activity will be given with the full knowledge of the PROVIDER. No additional payments, goods, services or events will be provided to the course director(s), planning committee members, faculty, joint sponsor, or any other party involved with the activity.

• Completion of this agreement represents a commitment and payment is due and collectible by the ACTIVITY DATE unless otherwise agreed upon by the PROVIDER. PROVIDER reserves the right to refuse exhibit space to EXHIBITOR in the event of nonpayment or Code of Conduct violation.

• PROVIDER agrees to provide exhibit space and may acknowledge EXHIBITOR in activity announcements. PROVIDER reserves the right to assign exhibit space or relocate exhibits at its discretion.

• PROVIDER Federal Tax ID number is 41-6011702. Please remit check payable to: Mayo Clinic. Please identify course name on the check stub.

Please fax completed Exhibitor Agreement to: (507) 538-7234
Exhibit Representative Registration Form

Company Name: ____
Mailing Address: ____
City/State/Zip Code: ____
Name of Representative in charge of exhibit: ____
(Please type or print name exactly as you want it to appear on the name tag)

Mailing Address: ____
City/State/Zip Code: ____

Business Telephone: ____
Fax Number: ____
E-mail address: ____

2nd Representative: ____
Email Address: ____

Display Information:
A 6’ table will be provided for your exhibit. (a maximum of two representatives are allowed per exhibit).
Please list additional requests here (i.e. power): ____

Complete and return this form by January 4, 2016 to:
Kathy Fuqua, CME Specialist Assistant – fuqua.kathy@mayo.edu
Mayo School of Continuous Professional Development
Plummer 2-60
200 First Street SW
Rochester, Minnesota 55905
Fax: (507) 538-7234