



# 76<sup>TH</sup> ANNUAL MEETING

OF THE AMERICAN ASSOCIATION FOR THE SURGERY OF  
TRAUMA AND CLINICAL CONGRESS OF ACUTE CARE SURGERY

SEPTEMBER 13 - 16, 2017 • BALTIMORE, MD • BALTIMORE MARRIOTT WATERFRONT

Early registration deadline:  
**MONDAY, AUGUST 14**

Each registrant must submit a separate form.

**THREE EASY WAYS TO REGISTER!** Please choose one method. **Online:** [www.aast.org](http://www.aast.org) **Fax:** 312-202-5003  
**Mail:** AAST Registration Services, c/o American College of Surgeons 633 N. Saint Clair St., Chicago, IL 60611

## Attendee Information

FIRST	MIDDLE	LAST	
PROFESSIONAL DEGREE(S)/DESIGNATION(S)/CREDENTIALS		POSITION/TITLE	
INSTITUTION		PREFERRED MAILING ADDRESS	
CITY	STATE	ZIP/POSTAL CODE	COUNTRY
PHONE		FAX	
E-MAIL (confirmation will be sent to the e-mail address provided above and will be used for CME purposes)		ACS MEMBERSHIP ID, IF APPLICABLE	
EMERGENCY CONTACT NAME		PHONE/CELL	RELATIONSHIP TO ATTENDEE
IS THIS YOUR FIRST AAST ANNUAL MEETING? <input type="checkbox"/> YES <input type="checkbox"/> NO      MILITARY AFFILIATION: <input type="checkbox"/> Active <input type="checkbox"/> Reserve <input type="checkbox"/> Guard <input type="checkbox"/> Retired			
PROVIDE THE EMAIL ADDRESS YOU WISH TO RECEIVE CME COMMUNICATION: _____			

Guest\* Information (if attending)—includes the Poster Reception, Continental Breakfast Thursday - Saturday and Banquet.

\*The guest registration category does not apply to scientific attendees and is intended for a spouse or significant other. Please register under the appropriate category below.

FIRST	MIDDLE	LAST
CITY	STATE	E -MAIL

## Registration Fees

The official AAST program will begin at 12:30 pm on Wednesday, September 13.

Full Meeting Registration • Includes continental breakfast (Thursday–Saturday), poster reception, and one banquet ticket.						
Category	Early Fee <small>On or before 8/14</small>	Late Fee <small>8/15 - 9/12</small>	On-site Fees	Total		
AAST Member	\$555	\$615	\$665			
Nonmember	\$625	\$675	\$715			
Nurse/Paramedic	\$490	\$540	\$590			
Other (medical personnel [non-MD] not listed)	\$490	\$540	\$590			
In-Training Fellow*	\$335	\$335	\$335			
Resident*	\$335	\$335	\$335			
Student*	\$170	\$170	\$170			
Guest†	\$200	\$200	\$200			
Daily Meeting Registration • Includes continental breakfast on registered day. Lunch sessions are additional. Check the day(s) you wish to register for.						
Category	<input type="radio"/> Wednesday	<input type="radio"/> Thursday	<input type="radio"/> Friday	Friday <input type="radio"/> w/Banquet	<input type="radio"/> Saturday	Total
Nurse/Paramedic	\$170	\$170	\$150	\$350	\$20	
Other (medical personnel [non-MD] not listed)	\$170	\$170	\$150	\$350	\$20	
In-Training Fellow*	\$110	\$110	\$90	\$290	\$20	
Resident*	\$110	\$110	\$90	\$290	\$10	
Student*	\$60	\$60	\$40	\$240	Free	
Program Book						
Program books will be available for download on the AAST website closer to the meeting. If you'd like a printed program book, the cost is \$20 and will be provided to you when you check in at registration. The complete program will also be available on the meeting app.				<input type="checkbox"/> I would like a printed program book. <input type="checkbox"/> I will download the program book.		<b>\$20 FREE</b>
Registration Fee Subtotal:						

### PRE-MEETING EMERGENCY CONTACT INFORMATION:

Please let us know the best method to reach you prior to the meeting in case of an emergency, i.e. natural disaster, meeting cancellation, etc.

☐ Mobile E-mail (please indicate if different from above): \_\_\_\_\_

☐ Mobile Phone (please indicate if different from above): \_\_\_\_\_

☐ Home Phone: \_\_\_\_\_

\* Requires verification letter from department chairman or program director. Online registration is available.

† Friday banquet is included with Guest, Junior, and Child registrations.

### AMERICANS WITH DISABILITIES ACT

Please indicate if an ADA accommodation is required. If required, an AAST staff person will contact you.

☐ Audio ☐ Visual ☐ Mobile

☐ Other \_\_\_\_\_

☐ Check here if you or your guest has a dietary restriction. Please specify: \_\_\_\_\_

PRECONFERENCE SESSIONS		
<b>Shock Trauma Hybrid OR Field Trip Session (Morning) - Tuesday, September 12 - 8:00 am - 11:30 am</b>		
<input type="checkbox"/> Yes, I would like to attend in addition to the AAST Annual Meeting		\$25
<input type="checkbox"/> Yes, I would like to attend the Shock Trauma Hybrid OR Field Trip ONLY		\$25
<b>Shock Trauma Hybrid OR Field Trip Session (afternoon) - Tuesday, September 12 - 12:00 pm - 3:30 pm</b>		
<input type="checkbox"/> Yes, I would like to attend in addition to the AAST Annual Meeting		\$25
<input type="checkbox"/> Yes, I would like to attend the Shock Trauma Hybrid OR Field Trip ONLY		\$25
<b>Pediatric Trauma Symposium - Wednesday, September 13 - 7:00 am - 11:30 am</b>		
<input type="checkbox"/> Yes, I would like to attend in addition to the AAST Annual Meeting		\$50
<input type="checkbox"/> Yes, I would like to attend the Pediatric Trauma Symposium ONLY		\$50
<b>ACS-MOC - Wednesday, September 13 - 7:00 am - 11:30 am</b>		
<input type="checkbox"/> Yes, I would like to attend in addition to the AAST Annual Meeting		\$50
<input type="checkbox"/> Yes, I would like to attend the ACS-MOC ONLY (Members & Nonmembers)		\$100
<input type="checkbox"/> Yes, I would like to attend the ACS-MOC ONLY (In-Training Fellow, Resident, Students):		\$50
<b>Military Trauma Systems - Wednesday, September 13 - 7:00 am - 11:30 am</b>		
<input type="checkbox"/> Yes, I would like to attend in addition to the AAST Annual Meeting		\$50
<input type="checkbox"/> Yes, I would like to attend the Military Trauma Systems Session ONLY		\$50
<b>Johns Hopkins Tour - Wednesday, September 13 - 9:00 am - 11:00 am</b>		
<input type="checkbox"/> Yes, I would like to attend in addition to the AAST Annual Meeting		\$25
<input type="checkbox"/> Yes, I would like to attend the Johns Hopkins Tour ONLY		\$25
<b>MITC Session - Wednesday, September 13 - 10:00 am - 11:30 am</b>		
<input type="checkbox"/> Yes, I would like to attend in addition to the AAST Annual Meeting		\$25
<input type="checkbox"/> Yes, I would like to attend the MITC Session ONLY		\$25
<b>Preconference Session Subtotal</b>		
<b>Lunch Sessions</b> <i>(Please rank the following in the order of preference)</i>		
<b>Thursday, September 15 • 12:30 - 1:45 pm*</b> ____ Acute Care Surgery and the American Board of Surgery: Next Steps? ____ Trauma Exchange Programs: How to Maximize the Impact ____ Minimally Invasive Approaches to Pancreatic Debridement ____ ICU Management of Neurological Injury in Geriatric Patients ____ Advances in Risk Assessment for Emergency General Surgery ____ Pediatric Resuscitation- What's the Big Deal	<b>Friday, September 16 • 12:15 - 1:30 pm*</b> ____ Video Session of Acute Care Surgery Techniques ____ New Format for Journal Submissions: How to Make the Reviewers Happy ____ Surgical Emergencies after Bariatric Surgery ____ Resuscitation in the Post-PAC Era ____ Abdominal Wall Reconstruction: When to do a Component Separation (Open or Endoscopic) vs a Transversalis Abdominis Release ____ Fistula Rescue: Acute Care Surgery and Fistulas in 2017	<b>\$60 /each</b>
*Times subject to change.		
<input type="checkbox"/> If you are a Lunch Session moderator/presenter, please check here to receive your complimentary lunch ticket.		
<small>AAST will be providing CME credits and a self-assessment component as required for the fulfillment of Part 2 of the American Board of Surgery Maintenance of Certification (MOC) Program to Physicians.</small>		<b>Lunch Session Subtotal:</b>
<b>Friday Evening Banquet: September 15 7:30-10:00 pm</b>		
Included with full registration and Friday Daily with Banquet. Attire is black tie optional. Please indicate if you plan to attend, as the event will be ticketed. Badges must be worn at the event and banquet tickets are non-transferable. <input type="checkbox"/> Yes, I would like to attend.		
<b>Optional Breakfasts</b>		
<input type="checkbox"/> Resident, Student and In-Training Fellow Breakfast <i>(must be registered as a resident, student or in-training fellow)</i> <b>Thursday, September 14, 6:15 - 7:30 am</b>		<b>FREE</b>
<input type="checkbox"/> International Attendee Breakfast <i>(for all international attendees only)</i> <b>Friday, September 15, 6:15 - 7:30 am</b>		<b>FREE</b>
<input type="checkbox"/> New Fellows Breakfast <i>(for new members only)</i> <b>Saturday, September 16, 7:00-8:00 am</b>		<b>FREE</b>
<b>TOTAL AMOUNT DUE:</b>		

## Solicitation Policy:

The AAST strictly prohibits the solicitation and distribution of products and equipment at the AAST Annual Meeting in educational sessions or in the main foyer near educational sessions from 7:00 am to 5:00 pm Wednesday - Friday and 8:00 am – 12:00 pm on Saturday. All company products and equipment business MUST be conducted in the exhibit hall area with official exhibitors to the AAST Annual Meeting. Non-exhibiting company personnel are prohibited from soliciting AAST attendees at any time during the meeting. Please report any unauthorized solicitation to AAST staff immediately.

☐ I have read and understand the solicitation policy.

SIGNATURE

## Confirmation

Confirmations will be sent via e-mail, fax, or mail to all registrants. Please ensure legibility prior to faxing or mailing, and include all pages of the registration form.

## Cancellation Policy

Requests for refunds must be made in writing and received on or before Friday, August 25, 2017. There is a \$75 processing fee for all refunds and returned checks. Cancellations and registrations postmarked after the deadline date will not be eligible for refunds.

Conference attendee substitution is permitted and will be dealt with on a case-by-case basis.

AAST reserves the right to cancel any regularly scheduled session prior to the start of the meeting.

## Registration Questions?

Please contact AAST Registration Services at registration@facs.org or 312-202-5244.

## Badge & Course/Event Ticket Policy:

All AAST name badges and course/event tickets are non-transferable.

## Payment

Payment must accompany registration. Registration cannot be confirmed without payment.

Purchase orders are not accepted.

AAST Tax ID : 36-2985865.

## Fees payable in U.S. funds to AAST.

- ☐ Check (enclosed)  
☐ American Express  
☐ MasterCard ☐ VISA

CREDIT CARD NUMBER

EXPIRATION DATE

CARD HOLDER NAME

SIGNATURE