8 CMEs

ULTRASOUND FOR REGENERATIVE MEDICINE

HANDS-ON WORKSHOP

August 28 | Memphis, TN



- *Improve your skills*
- *Earn up to 8 CMEs*
- *Elevate your practice*
- *Enhance patient care*

American Society *of* Interventional Pain Physicians
81 Lakeview Drive, Paducah KY 42001
270.554.9412 | asipp.org

YOU'RE INVITED

On behalf of the Board of the American Society of Interventional Pain Physicians (ASIPP®), it is our privilege and pleasure to invite you to attend the **Ultrasound for Regenerative Medicine Hands-on Workshop**. This one-day workshop will be held on August 28, 2026 at the Medical Education and Research Institute (MERI) in Memphis, TN.

GENERAL INFORMATION

EDUCATIONAL OBJECTIVES/TARGET AUDIENCE

The **Ultrasound for Regenerative Medicine** hands-on workshop is designed for interventional pain physicians seeking CME credit hours, providing an introduction to and review of ultrasound in IPM, while supporting skill development.

EDUCATIONAL OBJECTIVES

- Provide high-quality, competent, safe, accessible, and cost-efficient services to your patients
- Improve existing skills and/or develop new skills in the use of ultrasound
- Incorporate ultrasound techniques in treating your patients so that patients have better outcomes and reduced side effects

ACCREDITATION STATEMENT

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of *CMEsolutions* and American Society of Interventional Pain Physicians (ASIPP®). The *CMEsolutions* is accredited by the ACCME to provide continuing medical education for physicians.

The *CMEsolutions* designates this live activity for a maximum of 8.0 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Physicians of Osteopathic Medicine — the American Osteopathic Association (AOA) accepts *AMA PRA Category 1 Credits™* as AOA Category 2-B credit.

AMERICANS WITH DISABILITIES ACT AND SPECIAL SERVICES

Organizers fully comply with the legal requirements of the Americans with Disabilities Act and the rules and regulations thereof. If any participant in this educational activity is in need of accommodations, please contact the organizers at (270) 554-9412 at least 10 days prior to the webinar. ASIPP® is an ABA Registered CME Provider.

Duplication or distribution of materials or recording of lectures without express written permission from ASIPP® is prohibited. There is NO commercial support for this workshop.

WORKSHOP DIRECTORS



Laxmaiah Manchikanti, MD
Chairman of the Board and Chief Executive Officer, ASIPP®



Mahendra Sanapati, MD
Vice Chairman of the Board and Chief Operations Officer

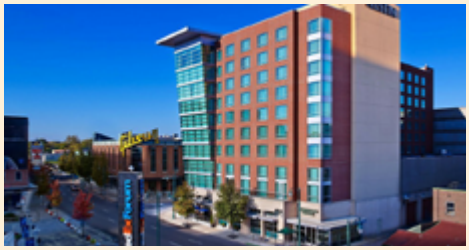


Annu Navani, MD
President, ASIPP®



Sheri Albers, DO

ACCOMMODATIONS



THE WESTIN MEMPHIS BEALE STREET

Book your room online

170 Lt. George W Lee Ave
Memphis, TN 38103
901-334-5900

Cut-off date for special room rates: August 13, 2026.

In order to ensure you receive the ASIPP room block rate of $189 plus tax per night let the hotel know you are with the ASIPP Meeting.

FRIDAY, AUGUST 28 **ALL TIMES ARE CST*

Workshop for Ultrasound for Regenerative Medicine

7:00am – 7:30am	Registration, Check-in and Breakfast
7:30am – 8:00am	Welcome & Course Introductions **Sheri Albers, DO**
8:00am – 8:30am	Ultrasound Artifacts **Sheri Albers, DO**
8:30am – 9:00am	Ultrasound of Joints **Navneet Boddu, MD**
9:00am – 9:30am	Ultrasound of Soft Tissues **Art Watanabe, MD**
9:30am – 10:30am	Equipment Overview **Mark Escardia**
10:30am – 12:30pm	**HANDS-ON WORKSHOP**
12:30pm – 1:30pm	Lunch
1:30pm – 4:30pm	**HANDS-ON WORKSHOP**
4:30pm	Workshop Adjourns

LAB STATIONS FOR ULTRASOUND FOR REGENERATIVE MEDICINE

1. Equipment Overview
2. Hip and Knee
3. Elbow and Wrist
4. Ankle and Foot
5. Shoulder and Neck



ULTRASOUND FOR REGENERATIVE MEDICINE HANDS-ON WORKSHOP REGISTRATION

PLEASE PRINT EXACTLY AS YOU WISH YOUR NAME TO APPEAR:

NAME (FIRST) (MIDDLE INITIAL) (LAST)

ADDRESS

CITY STATE ZIP

PHONE FAX

E-MAIL

ULTRASOUND FOR REGENERATIVE MEDICINE HANDS-ON WORKSHOP *(All registrations subject to approval)*

HANDS-ON WORKSHOP

❍ **$1,000 Member** ❍ **$1,200 Non-Member** ❍ **$100 Resident/Fellow***

*If registering as a Resident or Fellow, please list below the name of fellowship program, university or hospital and fax or e-mail a letter from the program director verifying your status. Your application for registration cannot be processed and you will not receive the discount until ASIPP receives this letter. Fax the letter to (270) 554.5394 or e-mail to crogers@asipp.org

NAME OF FELLOWSHIP PROGRAM

PAYMENT METHOD (Please check one):

❍ MASTERCARD ❍ VISA ❍ AMERICAN EXPRESS ❍ DISCOVER

CREDIT CARD NUMBER SECURITY CODE (Back of Card) EXP. DATE

NAME ON CARD

BILLING ADDRESS *(If different from above)* CITY STATE ZIP

AUTHORIZED SIGNATURE *(required for all credit card charges/orders)* *Date*

(Your application will not be processed if payment does not accompany registration form)

RETURN COMPLETED FORM TO:
ASIPP®, 81 Lakeview Drive, Paducah, KY 42001 or Fax to (270) 554.5394

CANCELLATION POLICY: ASIPP reserves the right to cancel this workshop upon reasonable notice and will assume no financial obligation to registrants for cancellation for reasons beyond its control. Registration fees will be refunded, however, costs incurred by the registrants, such as airline or hotel fees or penalties, are the responsibility of the registrants. ASIPP requires a 30-day notice of cancellation for workshops. Cancellations for the workshop after August 8, 2026 but prior to August 22, 2026 will forfeit 50% of their registration fee. No refunds can be made after August 22, 2026.

REGISTER ONLINE: https://pci.jotform.com/form/261045817278967

REGISTRANT INFORMATION

IMPORTANT. Please answer *all* the questions:

MEDICAL DEGREE:

❍ MD ❍ DO ❍ PhD
❍ List other: _____

PRIMARY SPECIALTY CERTIFICATION:

❍ Anesthesiology ❍ Physiatry
❍ Neurosurgery
❍ Other: _____

PAIN MEDICINE SUBSPECIALTY CERTIFICATION:

❍ American Board of Anesthesiology
❍ American Board of Interventional Pain Physicians
❍ Fellow of Interventional Pain Practice
❍ American Board of Pain Medicine
❍ Competency in Regenerative Medicine
❍ Competency in Interventional Pain Management
❍ Other: _____

FELLOWSHIP TRAINING:

❍ Pain Medicine
❍ Spine Surgery
❍ Sports Medicine
❍ Other: _____

SPECIALTY DESIGNATION:

❍ 09 – Interventional Pain Management
❍ 72 – Pain Management
❍ Other: _____

WHAT IS YOUR PRACTICE LOCATION:

❍ ASC ❍ HOPD ❍ Office-setting

PERCENTAGE OF INTERVENTIONAL PAIN MANAGEMENT PRACTICE:

❍ 0% ❍ 1–25% ❍ 26–50% ❍ 51–75% ❍ >75%

YEARS IN INTERVENTIONAL PAIN MANAGEMENT PRACTICE:

❍ 0 ❍ 1–5 ❍ 6–10 ❍ >10

TOTAL NUMBER OF PROCEDURES PERFORMED DURING PAST YEAR:

Procedure	*Total Performed*
Caudal Epidural Injections*	
Lumbar Interlaminar Epidural Injections*	
Lumbar/Sacral Facet Joint Nerve Blocks*	
Lumbar Facet Joint Interlaminar Injections*	
Lumbar Facet Radiofrequency*	
Lumbar/Sacral Transforaminal Epidural Injections*	
Percutaneous Adhesiolysis*	
Sacroiliac Joint Injections*	
Lumbar Discography*	
Percutaneous Lumbar Discectomy*	
Cervical Interlaminar Epidural Injections*	
Cervical Facet Joint Nerve Blocks*	
Cervical Facet Joint Intraarticular Injections*	
Cervical Facet Radiofrequency*	
Cervical Discography*	
Facet Joint Nerve Blocks*	
Thoracic Interlaminar Epidural Injections*	
Thoracic Facet Radiofrequency*	
Thoracic Discography*	
Stellate Ganglion Blocks*	
Celiac Plexus Blocks*	
Lumbar Sympathetic Blocks*	
Hypogastric Plexus Blocks*	
Trigeminal Nerve Blocks*	

**Must complete*