

NYC ASM Fall Meeting

November 1st, 2024

The New York City Bar
42 West 44th Street
(between 5th & 6th Avenues)
New York, NY



AGENDA AND OBJECTIVES (5 CE Credits)

8:00—9:00	REGISTRATION AND BREAKFAST
9:00—9:10	Welcome
9:10—10:00	Pearls and Pitfalls of Total Lab Automation For Blood Culture Melvili Cintron, PhD, D(ABMM) Memorial Sloan Kettering Cancer Center <ul style="list-style-type: none">• Discuss the challenges and benefits of using total laboratory automation systems for blood culture workup
10:00—10:50	Navigating a Blood Culture Shortage – VUMC’s Approach Romney Humphries, PhD, D(ABMM) Vanderbilt University Medical Center <ul style="list-style-type: none">• Describe the value of blood cultures and opportunities for stewardship
10:50-11:30	COFFEE BREAK Visit our NYC ASM Platinum Plus Sponsors!  
11:30—12:20	Blood Culture Contamination: Clinical Impact and Best Practices Brian Mochon, PhD, D(ABMM) Phoenix Children's Hospital <ul style="list-style-type: none">• Describe how to correctly draw blood cultures to reduce contamination and describe the effects of contaminated blood cultures on patient management
12:20—1:45	LUNCHEON
1:45—2:00	Distinguished Service Award Presentation
2:00—2:50	Accelerating Hepatitis C Elimination in the US Jennifer Rakeman, PhD Cepheid <ul style="list-style-type: none">• Discuss advances in HCV diagnostics and how they can improve patient care
2:50—3:40	An Update on Emerging and Re-emerging Viral Infections Benjamin Pinsky, MD, PhD Stanford Healthcare and Stanford Children's Health <ul style="list-style-type: none">• Explain the epidemiology, clinical presentation, and diagnosis of viral infections causing outbreaks over the past year, including influenza A (H5), Oropouche, and Mpox

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MEMBERSHIP AND REGISTRATION FEES

REGISTER ONLINE BY OCT 18th (Preferred) at www.nycasm.org

NYCASM annual Membership fee: \$25

Meeting registration fees:

NYC ASM Member
\$75

Non-member
\$150

**Please register in advance. There will be no on-site registration

REGISTRATION APPLICATION

Please complete and mail the following form if registering with a check.

Name _____

Address _____

Affiliation _____

Highest academic degree? _____

Email address _____

Member of national ASM? Yes No Member of NYC ASM Yes No

If paying by CHECK: Make check payable to NYC ASM, complete this form and mail both to:

Dr. Caitlin Otto
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Contact info@nycasm.org for questions