Clinical neurology; anatomical based approach to localizing CNS disease.

7:30 - 8:00  Registration and Coffee
8:00 – 9:00  Vestibular disorders: Peripheral, petrous temporal and hyoid bone disease. Central equine protozoal encephalitis. Dr. de Lahunta
9:00 – 9:30  Coffee break. Visit our sponsors & exhibitors.
9:30 – 10:30  Cerebellar cortical abiotrophy, shivers. Dr. de Lahunta
10:30 – 11:30  Prosencephalic disorders: hepatic encephalopathy, narcolepsy-sleep disorders. Dr. de Lahunta
11:30 – 12:15  Sponsor presentations of new or interesting products.
12:15 – 1:00  Lunch by “Kitchen Chicks” & “The Myhre Minute”.
1:00 – 2:30  Tetanus, Tetany, Myoclonus. Dr. de Lahunta
2:30 – 3:30  Laboratory tests for neurological disease including evaluating CBC, Chemistry, Fibrinogen, Serum Amyloid A, and serology. Dr. Johnson
3:30 – 4:00  Break
4:00 – 5:00  Clinical case lecture including an interesting case medley. Dr. Johnson
5:00 – 6:00  Cheese, wine, beer and hearty camaraderie!
6:00  Dinner at the Governor’s Inn for those staying for Day 2.

We are looking for interesting neurological cases to share with your colleagues. Significant discounts will be issued to your clients.

THURSDAY, MARCH 23, 2017

PROGRAM HIGHLIGHTS
Clinical neurology; anatomical based approach to localizing CNS disease.

FRIDAY, MARCH 24, 2017

PROGRAM HIGHLIGHTS
Clinical neurological anatomical based examination - A clinical approach to localizing central neurological disease with emphasis on clinical cases.

7:30 – 8:00  Registration and Coffee
8:00 – 9:00  Cervical radiographs – a neurologist’s perspective. Current technology allows obtaining cervical radiographs readily, but their interpretation can be challenging. This presentation will provide a framework for cervical radiographs interpretation, and limitations. Dr. Johnson
9:00 – 9:30  Coffee break
9:30 – 10:30  Head shaking—where to start? Headshaking syndrome can be challenging to diagnose and manage. This presentation will cover recent developments in the diagnosis and treatment of head shakers. Dr. Johnson
10:30 – 11:30  Neurologic, lame, or both? Mild neurologic disease can be easily confused with orthopedic lameness, causing failure to meet performance expectations. This presentation will discuss ways to differentiate neurologic from musculoskeletal disease. Dr. Johnson
11:30 – 12:15  Sponsor presentations of new or interesting products.
12:15 – 1:00  Lunch by “Kitchen Chicks”
1:00 – 2:30  Tetanus, Tetany, Myoclonus. Dr. de Lahunta
2:30 – 3:30  Laboratory tests for neurological disease including evaluating CBC, Chemistry, Fibrinogen, Serum Amyloid A, and serology. Dr. Johnson
3:00 – 3:30  Break
3:30 – 5:00  Clinical case lecture and demonstration including an “interesting case medley”. Dr. Johnson

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