



THE PITTSBURGH COURSE: COMPREHENSIVE ENDOSCOPIC ENDONASAL SURGERY OF THE SKULL BASE

Pittsburgh, Pennsylvania

~ November 9-12, 2022 ~



GUEST FACULTY

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*Sponsored by:
University of Pittsburgh School of Medicine
Department of Neurological Surgery
Department of Otolaryngology
Center for Continuing Education in the Health Sciences*

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GENERAL INFORMATION

Course Overview

This 4-day course teaches the surgical techniques and anatomy for endoscopic endonasal surgery of the ventral skull base. Experts on the subject will present the anatomical and technical aspects of this procedure along with the risks, benefits and outcomes.

The course features an interactive live surgery demonstration using indocyanine green fluorescence endoscopy, fresh anatomical specimen dissection, lectures and panel discussions, 3D anatomy lectures, and case presentations. Participants will have an opportunity to enhance their knowledge and skills regarding endoscopic surgery of the ventral skull base.

Learning Objectives

Following completion of this course, participants should be able to:

- Describe the anatomic relationships between the ventral skull base, paranasal sinuses and orbit.
- Understand the indications, benefits and risks associated with endoscopic endonasal skull base surgery.
- Utilize endoscopic techniques to approach tumors in the anterior, middle and cranial fossae.

Target Audience

This course is designed for skull base teams (neurosurgeons, otolaryngologists, head and neck surgeons) and senior level residents who wish to learn and practice the technical skills needed to perform comprehensive endoscopic endonasal surgery of the ventral skull base.

Location (unless otherwise noted)

Lecture Room: UPMC Eye & Ear Institute Building
203 Lothrop Street, 1st Floor, Room S-120

Lab: University of Pittsburgh School of Medicine Anatomy Lab
Scaife Hall, 3550 Terrace Street, 3rd Floor, Room 360

Audio/Video Recording and Photography Policy

The use of audio/video recording or photographic devices is **NOT** permitted at any time in the lecture room, anatomy lab or hospital.

Continuing Medical Education Credit

In support of improving patient care, the University of Pittsburgh is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

The University of Pittsburgh designates this live activity for a maximum of 31.25 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

All other learners will receive a certificate of attendance.

To receive CME credit:

The UPMC Center for Continuing Education in the Health Sciences (CCEHS) Continuing Education Learning Portal (<https://cce.upmc.com>) is used to claim and track your continuing education credits. Certificates will be available to download and stored for future reference.

If you are a new user, click [Register](#) (upper right corner) to create an account. The permanent email address you listed on your registration form should be the same email you use when creating your account. If you choose a different email, please notify the UPMC Center for Continuing Education by emailing ccehs_support@upmc.edu or <https://cce.upmc.com/contact-us> to update your records. Once your account has been created, return to login, complete the course evaluation and claim credit on the [CCEHS Learning Portal](#), <https://cce.upmc.com>. The activity is accessible in your [Pending Activities](#). Please allow up to 2 days before accessing.

Questions or problems? Please contact the UPMC Center for Continuing Education by emailing ccehs_support@upmc.edu or <https://cce.upmc.com/contact-us>

COVID-19 Policies

All course attendees must adhere to the following:

- Become familiar with, and comply with, all federal state, and local laws, orders, directives, and guidelines related to COVID-19 including CDC guidance on COVID-19; comply with any UPMC instructions related to health and safety measures, including masking and social distancing.
- Monitor their health and leave the course (or otherwise not attend) if experiencing COVID-19 symptoms, such as fever or chills, cough, shortness of breath or difficulty breathing, muscle or body aches, new loss of taste or smell, or if they have a confirmed or suspected case of COVID-19.

Wi-Fi Access

Complimentary Wi-Fi is available. How to connect:

1. View available wireless networks.
2. Connect to “**upmc-guest**”
3. Open your Web Browser, begin surfing!

Disclaimer Statement

The information presented at this program represents the views and opinions of the individual presenters, and does not constitute the opinion or endorsement of, or promotion by, the UPMC Center for Continuing Education in the Health Sciences, UPMC / University of Pittsburgh Medical Center or Affiliates and University of Pittsburgh School of Medicine. Reasonable efforts have been taken intending for educational subject matter to be presented in a balanced, unbiased fashion and in compliance with regulatory requirements. However, each program attendee must always use his/her own personal and professional judgment when considering further application of this information, particularly as it may relate to patient diagnostic or treatment decisions including, without limitation, FDA-approved uses and any off-label uses.

ACKNOWLEDGEMENT OF SUPPORT

We gratefully acknowledge educational grant support for this course from the following companies:

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We gratefully acknowledge in kind support for this course from the following companies:

Apex Medical, Inc.	Mizuho America, Inc.
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Medtronic	Sutter Medical Technologies USA

FACULTY LISTING

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WEDNESDAY, NOVEMBER 9, 2022

- 7:15 AM **REGISTRATION & BREAKFAST**
- 7:30 AM **Let's Get Started: Classification and Training (including lab training)**
Carl Snyderman, MD, MBA
- 7:55 AM **Navigating the Nose and Sinuses: Getting to the Skull Base in 3D**
Eric Wang, MD
- 8:20 AM **It All Starts at the Sella: Endoscopic Pituitary Surgery**
Paul Gardner, MD
- 9:05 AM ***ALL Transfer from Lecture Room to Lab***
- 9:15 AM **Prosection for Lab Session 1 – Pituitary Surgery**
Bozena Wrobel, MD and Gabriel Zada, MD, MS
- 10:15 AM **Lab Session 1**

<u>Group A:</u> Anatomical Dissection • Intranasal Landmarks • Middle Turbinates • Septal Mucosal Flap • Sphenoidotomy • Sella • Posterior Ethmoidectomy • Suprasellar/Transplanum Approach	<u>Group B:</u> Prosection for Lab Sessions 3&4: Sagittal Plane <i>After Prosection, transfer from Lab to Lecture Room for:</i> 3D Surgical Anatomy Lectures Georgios Zenonos, MD • Anterior Skull Base • Sinonasal, Sellar and Parasellar Regions
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- 12:30 PM ***GROUP A: Transfer from Lab to Lecture Room***
- 12:45 PM **LUNCH & LECTURE**
Tools for Success: Equipment, Instruments and Set-Up for Endonasal Surgery
Eric Wang, MD
- 1:15 PM **Plumbing Problems Big and Small: Reconstruction of Skull Base Defects**
Carl Snyderman, MD, MBA
- 1:50 PM **Up and Away: Transtuberculum and Transplanum Approaches**
Paul Gardner, MD

WEDNESDAY, NOVEMBER 9, 2022 (CONTINUED)

2:50 PM PANEL DISCUSSION: Behind the Scenes – Perioperative Care

Moderator: Eric Wang, MD

Panelists: All Faculty

3:15 PM ***GROUP B: Transfer from Lecture Room to Lab***

3:30 PM Lab Session 2

<u><i>Group A:</i></u> 3D Surgical Anatomy Lectures Georgios Zenonos, MD • Anterior Skull Base • Sinonasal, Sellar and Parasellar Regions <i>After Lectures, transfer from Lecture Room to Lab for:</i> Prosection for Lab Sessions 3&4: Sagittal Plane	<u><i>Group B:</i></u> Anatomical Dissection • Intranasal Landmarks • Middle Turbinates • Septal Mucosal Flap • Sphenoidotomy • Sella • Posterior Ethmoidectomy • Suprasellar/Transplanum Approach
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5:45 PM ADJOURNMENT

EVENING AT LEISURE (For complete information about events, shopping areas, or restaurants in or near Oakland, please feel free to visit the following websites (<http://www.pittsburghmagazine.com> or <http://www.visitpittsburgh.com/>) or feel free to ask us for recommendations!)

THURSDAY, NOVEMBER 10, 2022

- 7:00 AM BREAKFAST
- 7:15 AM The New Workhorses: Transclival, Transodontoid Approaches
Paul Gardner, MD
- 8:00 AM Case Presentations & Live Surgery
Paul Gardner, MD, Carl Snyderman, MD, MBA, Eric Wang, MD, and Georgios Zenonos, MD
Moderators
Bozena Wrobel, MD and Gabriel Zada, MD, MS
- 12:00 PM LUNCH
- 1:00 PM *ALL Transfer from Lecture Room to Lab*
- 1:15 PM Lab Session 3

<u><i>Group A:</i></u> Prosection for Lab Sessions 5 & 6: Sagittal Plane <i>After Prosection, transfer from Lab to Lecture Room for:</i> Challenges and Considerations of Pediatric Endonasal Surgery Michael McDowell, MD	<u><i>Group B:</i></u> Anatomical Dissection • Anterior Ethmoidectomy • Medial Orbital Decompression • Optic Nerve Decompression • Ethmoid Artery Ligation • Frontal Sinusotomy (Draf 3 Procedure) • Craniofacial Resection
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- 3:00 PM *GROUP B: Transfer from Lab to Lecture Room*
- 3:15 PM Craniofacial Resection for Sinonasal Malignancy and Meningioma
Carl Snyderman, MD, MBA
- 3:45 PM *GROUP A: Transfer from Lecture Room to Lab*
- GROUP B: Lecture – Challenges and Considerations of Pediatric Endonasal Surgery
Michael McDowell, MD

THURSDAY, NOVEMBER 10, 2022 (CONTINUED)

4:00 PM Lab Session 4

<u>Group A:</u> Anatomical Dissection • Anterior Ethmoidectomy • Medial Orbital Decompression • Optic Nerve Decompression • Ethmoid Artery Ligation • Frontal Sinusotomy (Draf 3 Procedure) • Craniofacial Resection	<u>Group B:</u> <i>After Lecture, transfer from Lecture Room to Lab for:</i> Prosection for Lab Sessions 5 & 6: Sagittal Plane
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5:45 PM AFTERNOON PROGRAM ADJOURNMENT

EVENING PROGRAM (*Registrants Only Please*)

LOCATION: Wyndham Pittsburgh University Center
 Schenley Ballrooms I-IV
 100 Lytton Avenue
 Pittsburgh (Oakland) PA 15213

6:30 PM Cocktail Reception

7:00 PM Dinner & Guest Faculty Lectures

7:30 PM Advances in Minimally Invasive Cranial Tumor Neurosurgery in 2022
 Gabriel Zada, MD, MS

8:00 PM Carotid Artery Injury during Endoscopic Skull Base Surgery: Management and Prevention
 Bozena Wrobel, MD

8:45 PM ADJOURNMENT

FRIDAY, NOVEMBER 11, 2022

**** NOTE: LECTURE ROOM CHANGE TO BST S-100 ****

8:00 AM BREAKFAST

8:15 AM Transpterygoid Approach: Gateway to the Coronal Plane
Eric Wang, MD

8:45 AM Group Photo

8:55 AM ***GROUP A: Transfer from Lecture Room to Lab***

GROUP B: 3D Surgical Anatomy Lecture – Posterior Skull Base
Georgios Zenonos, MD

9:10 AM Lab Session 5

<u>Group A:</u> Anatomical Dissection • Palatosphenoidal Artery and Vidian Nerve Identification • Pituitary Transposition • Transclival Approach (Extradural/Intradural) • Transodontoid Approach • Medial Transpetrous Approach • Cavernous Sinus Approaches	<u>Group B:</u> <i>After Lecture, transfer from Lecture Room to Lab for:</i> Prosection: Orbital Approaches S. Tonya Stefko, MD Prosection for Lab Sessions 7 & 8: Coronal Plane Equipment Demonstrations
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12:10 PM ***ALL TRANSFER FROM LAB TO LECTURE ROOM***

12:25 PM LUNCH & LECTURE
Outside the Box: Coronal Plane Approaches
Paul Gardner, MD

1:30 PM GROUP A: 3D Surgical Anatomy Lecture – Posterior Skull Base
Georgios Zenonos, MD

GROUP B: Transfer from Lecture Room to Lab

FRIDAY, NOVEMBER 11, 2022 (CONTINUED)

1:45 PM Lab Session 6

<u>Group A:</u> <i>After Lecture, transfer from Lecture Room to Lab for:</i> Prosection: Orbital Approaches S. Tonya Stefko, MD Prosection for Lab Sessions 7 & 8: Coronal Plane Equipment Demonstrations	<u>Group B:</u> Anatomical Dissection • Palatosphenoidal Artery and Vidian Nerve Identification • Pituitary Transposition • Transclival Approach (Extradural/Intradural) • Transodontoid Approach • Medial Transpetrous Approach • Cavernous Sinus Approaches
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4:45 PM ADJOURNMENT

6:10 PM Transportation Departs Wyndham Pittsburgh University Center Hotel for Course Banquet

6:30 PM Course Banquet
(Registrants Only Please)

LOCATION: LeMont Restaurant
1114 Grandview Avenue
Pittsburgh (Mount Washington) PA 15211
<http://www.lemontpittsburgh.com/>

9:30 PM Transportation Departs Course Banquet for Wyndham Pittsburgh University Center Hotel

SATURDAY, NOVEMBER 12, 2022

7:45 AM BREAKFAST

8:00 AM *GROUP A: Transfer from Lecture Room to Lab*

GROUP B: 3D Surgical Anatomy Lecture – Cavernous Sinus and Middle Fossa
Georgios Zenonos, MD

8:15 AM Lab Session 7

<u><i>Group A:</i></u> Anatomical Dissection • Antrostomy • Sphenopalatine Artery Ligation • Middle Cranial Fossa Approaches: Transpterygoid • Cavernous Sinus • Meckel's Cave • Infratemporal Skull Base	<u><i>Group B:</i></u> <i>After Lecture, transfer from Lecture Room to Lab for:</i> Prosection: Alternative Reconstructive Flaps: Pericranial Flap, Inferior Turbinate Wall Flap Equipment Demonstrations
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10:30 AM *ALL TRANSFER FROM LAB TO LECTURE ROOM*

10:45 AM PANEL DISCUSSION: Putting it all Together: Case-Based Discussion and Q&A
 ** Attendees are encouraged to bring cases for discussion **
 Moderators: Bozena Wrobel, MD and Gabriel Zada, MD, MS
 Panelists: All Faculty

11:15 AM LUNCH & LECTURE
 Code Red: Carotid Artery Injury
 Paul Gardner, MD

11:50 AM GROUP A: 3D Surgical Anatomy Lecture – Cavernous Sinus and Middle Fossa
 Georgios Zenonos, MD

GROUP B: Transfer from Lecture Room to Lab

SATURDAY, NOVEMBER 12, 2022 (CONTINUED)

12:00 PM Lab Session 8

<u><i>Group A:</i></u> <i>After Lecture, transfer from Lecture Room to Lab for:</i> Prosection: Alternative Reconstructive Flaps: Pericranial Flap, Inferior Turbinate Wall Flap Equipment Demonstrations	<u><i>Group B:</i></u> Anatomical Dissection • Antrostomy • Sphenopalatine Artery Ligation • Middle Cranial Fossa Approaches: Transpterygoid • Cavernous Sinus • Meckel's Cave • Infratemporal Skull Base
2:15 PM Disaster Plan: ICA Injury Simulation Exercise Paul Gardner, MD	

2:30 PM COURSE ADJOURNMENT

ANATOMICAL DISSECTION SCHEDULE

Wednesday, November 9, 2022: Lab Sessions 1 & 2

1. **Intraoperative navigational device.** Familiarize yourself with the function of the image guidance system.
2. Identify the following **intranasal landmarks**: inferior turbinate, middle turbinate, superior turbinate, middle meatus, hiatus semilunaris, uncinate process, bulla ethmoidalis, sphenoid rostrum, sphenoid ostium, olfactory sulcus.
3. Resect the **middle turbinates**.
4. Elevate a **septal mucosal flap** on one side. It should be pedicled on the ipsilateral posterior nasal artery. Displace the flap into the nasopharynx during the other procedures.
5. **Endonasal approaches for pituitary surgery.** Transect the posterior nasal septum and expose the sphenoid rostrum. Remove rostrum and open sphenoid air cells. Enlarge the opening maximally in all directions. Resect the posterior edge of the nasal septum to enhance bilateral exposure. Identify sphenoid sinus landmarks: planum sphenoidale, optic canal, lateral optic-carotid recess, carotid canal, medial optic-carotid recess, sella, clival recess. Remove sphenoid septations and note relationship to carotid canal.
6. **Pituitary.** Open the sella to the margins of the cavernous sinus in all directions. Remove sphenoid rostrum inferiorly and note how it improves access to the sella.
7. **Posterior ethmoidectomy.** Skeletonize the posterior medial orbit and ethmoid roof by removing the posterior ethmoid air cells. Identify the increased visualization and exposure to the sphenoid planum.
8. **Suprasellar/transplanum approach.** Thin and remove the bone of the planum sphenoidale. Thin and remove the bone of the “tuberculum strut” bilaterally. Open the suprasellar dura and identify the optic chiasm, infundibulum, and ICA. Identify the superior hypophyseal artery.

ANATOMICAL DISSECTION SCHEDULE

Thursday, November 10, 2022: Lab Sessions 3 & 4

1. **Anterior ethmoidectomy.** Open the bulla ethmoidalis and remove anterior ethmoid air cells in an anterior to posterior direction. Identify the lamina papyracea. Expose the nasofrontal recess and identify the anterior ethmoid artery. Repeat the ethmoidectomy on the opposite side.
2. **Medial orbital decompression.** Make an opening in the lamina papyracea and remove the medial orbital wall from the fovea ethmoidalis superiorly to the orbital floor and as far posteriorly as the anterior wall of the sphenoid sinus.
3. **Optic nerve decompression.** Decompress the orbital apex and follow the optic canal posteriorly. Use the drill to thin the bone over the optic nerve without exposing the carotid artery.
4. **Anterior and posterior ethmoid artery ligation.** Elevate the periorbita along the skull base and identify the anterior and posterior ethmoid arteries.
5. **Frontal sinusotomy (Draf procedure).** Perform a Draf Type 3 procedure. Resect the anterior nasal septum superiorly, anterior to the middle turbinates. Remove the floor of the frontal sinuses across the midline and anterior to the crista galli.
6. **Anterior craniofacial resection.** Resect the superior attachment of the nasal septum from the crista galli to the sphenoid. Resect attachments of middle turbinates. Thin and remove bone of anterior cranial base from ethmoid roof laterally and to planum sphenoidale posteriorly. Drill out crista galli. Incise dura bilaterally and then transect falx attachment anteriorly. Reflect dura posteriorly and identify olfactory bulbs. Elevate olfactory tracts and transect nerves posteriorly. Identify the interhemispheric fissures, frontopolar vessels, and anterior communicating artery.

ANATOMICAL DISSECTION SCHEDULE

Friday, November 11, 2022: Lab Sessions 5 & 6

1. **Palatosphenoidal artery and vidian nerve identification.** At the floor of the sphenoid sinus, identify the palatosphenoidal artery as it exits the pterygopalatine fossa and enters the nasopharynx. The vertical process of the palatine bone covering the palatosphenoidal artery should be removed. At this level, dissect laterally until you identify the vidian canal.
2. **Pituitary transposition.** Lift up the pituitary gland and drill out the posterior clinoids.
3. **Transclival approach (extradural).** Remove the bone of the clivus to expose the dura from the sella to the lower clivus.
4. **Transclival approach (intradural).** Open the dura to expose the vertebral and basilar arteries.
5. **Transodontoid approach.** Remove the soft tissues between the Eustachian tubes to the level of the soft palate. Remove cortical bone of the clivus from the sphenoid floor to the foramen magnum. Remove the lower edge of the clivus (foramen magnum). Expose the ring of C1 and remove the central portion. Drill out the dens down to the level of the body of C2.
6. **Reconstruction with mucosal flap.** Position mucosal flap in different areas of the skull base to see limits of reach and surface area of reconstruction.
7. **Medial petrous apex.** Drill the bone medial and deep to the ICA at the level of the clival recess. Open air cells of the petrous apex. Identify the course of the 6th cranial nerve.

ANATOMICAL DISSECTION SCHEDULE

Saturday, November 12, 2022: Lab Sessions 7 & 8

1. Perform a middle meatal **antroostomy** on each side. Remove the uncinate process and enlarge the opening posteriorly and inferiorly. Make sure that you preserve the sphenopalatine arteries.
2. **Sphenopalatine artery ligation.** Expose the sphenopalatine and posterior nasal arteries and transect them.
3. **Transpterygoid approach.** Transect the sphenopalatine and posterior nasal arteries and open the pterygopalatine space. Elevate the soft tissue to expose the bone of the base of the pterygoids. Identify the vidian artery and nerve.
4. Exposure of **petrous ICA.** Drill the bone inferior and medial to the vidian artery and follow the vidian artery to the 2nd genu of the internal carotid artery.
5. **Middle cranial fossa approach (suprapetrous).** Identify V2 and drill the bone between V2 and the vidian artery to expose the petrous ICA. Open Meckel's cave lateral to the vertical segment of the ICA.
6. **Lateral cavernous sinus.** Dissect superior to Meckel's cave, lateral to the ICA. Identify the contents of the cavernous sinus.
7. **Infratemporal skull base.** Identify the medial and lateral pterygoid plates inferior to the base of the pterygoids. Follow the lateral pterygoid plate to foramen ovale and identify V3. Resect the medial portion of the Eustachian tube. Open the space between the pterygoid plates and dissect the medial and lateral pterygoid muscles. Follow the Eustachian tube along the skull base and identify the ICA where it enters the skull base.
8. **Infrapetrous approach.** Transect V3 and drill the bone along the inferior aspect of the petrous bone to expose the petrous ICA.
9. **[your name here] approach.** Discover a new approach to the cranial base and put your name on it.

DISCLOSURES

All individuals in a position to control the content of this education activity have disclosed all financial relationships with any companies whose primary business is producing, marketing, selling, re-selling, or distributing health care products used by or on patients. All of the relevant financial relationships for the individuals listed below have been mitigated.

The following relevant financial relationships were disclosed:

Paul A. Gardner, MD

Medexus Pharma, Inc.	Consultant
NX Development Corporation	Grant/Research Support
Peter Lazic US, Inc.	Consultant
Renerva	Ownership Interest
SPIWay, LLC	Consultant

Michael M. McDowell, MD

LICA-Tech	Consultant
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Carl H. Snyderman, MD, MBA

Peter Lazic US, Inc.	Consultant
Respair, Inc.	Ownership Interest
SPIWay, LLC	Consultant

Georgios A. Zenonos, MD

Recursion Pharmaceuticals, Inc.	Grant/Research Support
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No other members of the planning committee, speakers, presenters, authors, content reviewers and/or anyone else in a position to control the content of this education activity have relevant financial relationships with any companies whose primary business is producing, marketing, selling, re-selling, or distributing health care products used by or on patients.

RELATED PUBLICATIONS

Peer-Reviewed (from 2014-present)

1. Pinheiro-Neto CD, Paluzzi A, Fernandez-Miranda JC, Scopel TF, Wang EW, Gardner PA, Snyderman CH. Extended dissection of the septal flap pedicle for ipsilateral endoscopic transpterygoid approaches. *Laryngoscope*. 2014 Feb;124(2):391-6.
2. Rastelli Jr MM, Pinheiro-Neto CD, Fernandez-Miranda JC, Wang EW, Snyderman CH, Gardner PA. Application of ultrasonic bone curette in endoscopic endonasal skull base surgery: technical note. *J Neurol Surg B*. 2014 Apr;75:90-5.
3. Fernandez-Miranda JC, Gardner PA, Snyderman CH, Devaney KO, Mendenhall WM, Suarez C, Rinaldo A, Ferlito A. Clival chordomas: a pathological, surgical and radiotherapeutic review. *Head Neck*. 2014 Jun;36(6):892-906.
4. Koutourousiou M, Fernandez-Miranda JC, Stefko ST, Wang EW, Snyderman CH, Gardner PA. Endoscopic endonasal surgery for suprasellar meningiomas: experience with 75 patients. *J Neurosurg*. 2014 Jun;120(6):1326-39.
5. Fernandez-Miranda JC, Gardner PA, Rastelli MM Jr, Peris-Celda M, Koutourousiou M, Peace D, Snyderman CH, Rhoton AL Jr. Endoscopic endonasal transcavernous posterior clinoidectomy with interdural pituitary transposition. *J Neurosurg*. 2014 Jul;121(1):91-9.
6. Paluzzi A, Fernandez-Miranda JC, Stefko ST, Challinor S, Snyderman CH, Gardner PA. Endoscopic endonasal approach for pituitary adenomas: a series of 555 patients. *Pituitary*. 2014 Aug;17(4):307-19.
7. Choby GW, Pinheiro-Neto CD, de Almeida JR, Cardenas Ruiz-Valdepenas EC, Wang EW, Fernandez-Miranda JC, Gardner PA, Snyderman CH. Extended inferior turbinate flap for endoscopic reconstruction of skull base defects. *J Neurol Surg B*. 2014 Aug;75(4):225-30.
8. Koutourousiou M, Vaz Guimaraes Filho F, Costacou T, Fernandez-Miranda JC, Wang EW, Snyderman CH, Rothfus WE, Gardner PA. Pontine encephalocele and abnormalities of the posterior fossa following transclival endoscopic endonasal surgery. *J Neurosurg*. 2014 Aug;121(2):359-66.
9. Koutourousiou M, Fernandez-Miranda JC, Wang EW, Snyderman CH, Gardner PA. Endoscopic endonasal surgery for olfactory groove meningiomas: outcomes and limitations in 50 patients. *Neurosurg Focus*. 2014 Oct;37(4):E8.
10. Liu J, Pinheiro-Neto CD, Fernandez-Miranda JC, Snyderman CH, Gardner PA, Hirsch BE, Wang E. Eustachian tube and internal carotid artery in skull base surgery: an anatomical study. *Laryngoscope*. 2014 Dec;124(12):2655-64.
11. Choby GW, Mattos JL, Hughes MA, Fernandez-Miranda JC, Gardner PA, Snyderman CH, Wang EW. Delayed nasoseptal flaps for endoscopic skull base reconstruction: proof of concept and evaluation of outcomes. *Otolaryngol Head Neck Surg*. 2015 Feb;152(2):255-9.
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Textbooks

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UPMC ENDOSCOPIC ENDONASAL SURGERY EQUIPMENT & INSTRUMENT SETS

UPMC-Presbyterian

STRYKER SPINE/EEA DRILL

Printed: 12/04/2018 10:11
Revised: 03/15/2018 11:05

Preferred Sterilization Method: Steam 1

Comments / Instructions:

Item Description	Std Qty	Actual Qty	1st	2nd	Add	Final	Manufacturer	Catalog
LONG ANGLED	1						Stryker	5407-120-472
X-LONG ANGLED	1						Stryker	5407-120-482
PI DRIVE PLUS (BLACK MOTOR)	1						Stryker	5407-300-000

Total Instrument Count 3

Assembled By: Printed using View a Count Sheet

12/04/2018 10:11

5/2/2022

Censitrac



PUH NEURO ICG CAMERA&LIGHT CORD

DESCRIPTION	CATALOG	QTY	CNT1	CNT2	CNT3
STORZ LIGHT CORD	Karl Storz 495 ND	1			
SPIES ICG CAMERA (IMAGE HD)	Karl Storz H3-Z FI TH102	1			
Total		2			

Last Definition Rev.:	1UPMC-ACCTweirs	12/16/2021 10:51:24 AM
CS		5/2/2022 04:13:47 PM
Printed	1UPMC-ACCT\schoffstallrp	5/2/2022 12:13:47 PM
Scrub		
Circulator		
Room #		

5/2/2022

Censitrac



PUH NEURO ENDOSCOPES

DESCRIPTION	CATALOG	QTY	CNT1	CNT2	CNT3
0° ICG SCOPE	Karl Storz 28164 AC	1			
45 DEGREE SCOPE	Karl Storz 7230FVA	1			
30 DEGREE SCOPE	Karl Storz 7230BA	1			
70 DEGREE SCOPE	Karl Storz 7230CVA	1			
Total		4			

Last Definition Rev.:	1UPMC-ACCTweirs	12/15/2021 11:03:27 AM
CS		5/2/2022 04:14:11 PM
Printed	1UPMC-ACCT'schoffstallrp	5/2/2022 12:14:11 PM
Scrub		
Circulator		
Room #		

UPMC-Presbyterian

PISTOL GRIP BIPOLAR - PUH

Printed: 10/10/2016 12:54
 Revised: 12/27/2012 10:03

Preferred Sterilization Method: Sterrad 1

Comments / Instructions:

Item Description	Std Qty	Actual Qty	1st	2nd	Add	Final	Manufacturer	Catalog
GRAY CORD	1						KStorz	26176LA
BLACK HANDLE	2						KStorz	26184HM
COLLAR	2						KStorz	28164HSS
INSERTS								
SIDE WINDER	1						KStorz	28164FGL
STRAIGHT	1						KStorz	26184PTS
UP TOE ANGLED	1						KStorz	28164F6M

Total Instrument Count 8

Assembled By: Printed using View a Count Sheet

10/10/2016 12:54

5/2/2022

Censitrac



PUH ENDO PENS (RED/SILVER) GREEN TAPE

DESCRIPTION	CATALOG	QTY	CNT1	CNT2	CNT3
ENDO PEN	Sutter 700986S	1			
ENDO PEN	Sutter 700958S	1			
ENDO PEN	Sutter 700957S	1			
ENDO PEN	Sutter 700987S	1			
Total		4			

Last Definition Rev.:	Censisad	9/21/2021 03:35:53 PM
CS		5/2/2022 04:14:38 PM
Printed	1UPMC-ACCT\schoffstallrp	5/2/2022 12:14:38 PM
Scrub		
Circulator		
Room #		

UPMC-Presbyterian

NEURO PROTOTYPE SINUS TRAY - PUH

Printed: 12/04/2018 09:33
 Revised: 09/13/2013 13:28

Preferred Sterilization Method: Steam 1

Comments / Instructions:

Item Description	Std Qty	Actual Qty	1st	2nd	Add	Final	Manufacturer	Catalog
TOP SHELF								
LARGE PITUITARY (STORZ 455500 B)	1						Karl Storz	RH551657
MICRO PITUITARY (DECKER) (CODMAN 53-4000)	2						V Mueller	NL6250
SINUS SCISSORS - STRAIGHT (STORZ 449201)	1						V Mueller	RH550-051
SINUS SCISSORS - RIGHT (STORZ 449202)	1						V Mueller	RH550-052
SINUS SCISSORS - LEFT (STORZ 449203)	1						V Mueller	RH550-053
REVERSE PUNCH (BACKBITER)	1						Karl Storz	459016
THRUCUT LONG - STRAIGHT (STORZ 451000B)	1						V Mueller	RH551-091
THRUCUT 45 DEGREES LONG (STORZ 4515000B)	1						V Mueller	RH551-092
STRUMPEL VOSS FORCEPS, STR, SZ 0, 3.5MM (STORZ 456101)	1						V Mueller	VM104-6755
STRUMPEL VOSS FORCEPS UP (STORZ 456121)	1						V Mueller	VM104-6756
ETHMOID LONG - STRAIGHT (STORZ 456001B)	1						V Mueller	RH551-681
ETHMOID LONG UP 45DEG	1						Storz	456500B
ETHMOID 90 DEGREE (STORZ 456801B)	1						V Mueller	RH550-072
BLAKESLEY SUCTION FORCEP STR SIZE # 1 (STORZ 456003B)	1						V Mueller	VM104-6770
ETHMOID 45/90 DEGREES	1						Karl Storz	456511B
KURZE SCISSORS RD. BARREL - STRAIGHT	1						Karl Storz	28164MZB
KURZE SCISSORS RD. BARREL - RIGHT	1						Karl Storz	28164MZC
KURZE SCISSORS RD. BARREL - LEFT	1						Karl Storz	28164MZD
LURZE SCISSORS RD. BARREL - 45 DEGREE	1						Karl Storz	28164MZE
ROTATABLE SCISSORS	1						Karl Storz	66327
MICRO THRUCUT - STRAIGHT	1						Karl Storz	663251
MICRO THRUCUT - RIGHT	1						Karl Storz	663255
MICRO THRUCUT - LEFT	1						Karl Storz	663256
MICROTHRUCUT - 45 DEGREES	1						Karl Storz	663257
CUP FORCEPS - STRAIGHT	1						Karl Storz	663202
CUP FORCEPS - RIGHT	1						Karl Storz	663205
CUP FORCEPS - LEFT	1						Karl Storz	663206
CUP FORCEPS - 45 DEGREES	1						S & T	663207
MIDDLE SHELF								
RETRACTABLE KNIFE	1						Karl Storz	28164A
MALLEABLE SUCTION	1						Karl Storz	663818
MALLEABLE FRAZIER SUCTION	1						Karl Storz	649183
"J" CURRETTE CLOSED (STORZ 628712)	1						V Mueller	RH550-207

UPMC-Presbyterian

NEURO PROTOTYPE SINUS TRAY - PUH

Printed: 12/04/2018 09:33
 Revised: 09/13/2013 13:28

Preferred Sterilization Method: Steam 1

Comments / Instructions:

Item Description	Std Qty	Actual Qty	1st	2nd	Add	Final	Manufacturer	Catalog
ANTRUM CURETTE FORWARD SMALL (STORZ 629703)	1						V Mueller	VM104-6645
BALL PROBE DOUBLE ENDED (STORZ 629820)	1						V Mueller	RH550-251
COTTLE ELEVATOR (W. LORENZ 02-0044)	1						V Mueller	RH980
OLIVE TIP SUCTION - LARGE (STORZ 586240)	2						V Mueller	RH551-432
OLIVE TIP SUCTION - SMALL (STORZ 586030)	2						V Mueller	RH551-431
BOTTOM SHELF								
KERRISONS - KARL STORZ PREFERRED, CODMAN ACCEPTABLE								
#1 ANGLED KERRISON	1						Karl Storz	662121
#2 ANGLED KERRISON	1						Karl Storz	662122
#3 ANGLED KERRISON	1						Karl Storz	662123
90 DEGREE UP KERRISON	1						Karl Storz	662102
90 DEGREE DOWN KERRISON	1						Karl Storz	662112

Total Instrument Count 45

Assembled By: Printed using View a Count Sheet

12/04/2018 09:33

UPMC-Presbyterian

NEURO EEA TRAY - PUH

Printed: 12/04/2018 09:35
 Revised: 03/28/2014 12:16

Preferred Sterilization Method: Steam 1

Comments / Instructions:

Item Description	Std Qty	Actual Qty	1st	2nd	Add	Final	Manufacturer	Catalog
BOTTOM PAN LEFT TO RIGHT								
ADSON WITH TEETH (CODMAN 30-1186)	2						V Mueller	NL1400
GOLDTOP BAYONET FORCEPS - CUSHING CLASSIC PLUS TISSUE FORCEPS (CODMAN 36-6007)	2						V Mueller	NL1464
GERALD FORCEP 1X2 TEETH	2						V Mueller	NL1440
FRAZIER SUCTION 7FR	2						V Mueller	NL1900
#9 FRAZIER SUCTION - SHORT (CODMAN 70-1080)	2						V Mueller	NL1900-9
#11 FRAZIER SUCTION - SHORT (CODMAN 70-1081)	2						V Mueller	NL1900-11
#7 FRAZIER SUCTION - LONG (CODMAN 70-1087)	1						V Mueller	NL1905
#9 FRAZIER SUCTION - LONG (CODMAN 70-1088)	1						V Mueller	NL1906
#11 FRAZIER SUCTION - LONG (CODMAN 70-1089)	1						V Mueller	NL1907
#8 BLACK SUCTION	1						KLS Martin	18-523-18
#10 BLACK SUCTION	1						KLS Martin	18-523-20
SECOND ROW								
SMALL WEITLANER 5 1/2 IN - SHARP	1						V Mueller	SU3110
THIRD - ROW								
2" NASAL SPECULUM (SMALL) (CODMAN 79-7011)	1						V Mueller	RH102
2 1/2" NASAL SPECULUM (MEDIUM) (CODMAN 79-7012)	1						V Mueller	RH101
3" NASAL SPECULUM (LARGE) (CODMAN 79-7013)	1						V Mueller	RH100-1
FOURTH ROW								
DECKER MICRO BIOPSY FORCEP (CODMAN 53-4000)	1						V Mueller	NL6250
SELLA PUNCH 1MM BITE (CODMAN 80-1344)	1						V Mueller	VM81-1271
2MM KERRISON (CODMAN 80-1340)	1						V Mueller	NL3785-165
PAPER BAG								
#3 SAFETY KNIFE HANDLE	1						BARD-PARKER	374030
#3 KNIFE HANDLE (CODMAN 11-5530)	1						V Mueller	SU1403-001
#7 KNIFE HANDLE (CODMAN 11-5534)	1						V Mueller	SU1407
FREER ELEVATOR	1						V Mueller	RH750
COTTLE ELEVATOR	1						V Mueller	RH980
SKIN HOOK DOUBLE 10MM	2						V Mueller	RH1135
MCELVEEN DISSECTOR	1						Bausch & Lomb	N1706
HOOK ENUCLEATOR - LEFT (AESULAP FF651R)	1						V Mueller	NL3785-132
HOOK ENUCLEATOR - RIGHT (AESULAP FF621R)	1						V Mueller	NL3785-131
DISSECTOR DOWN (HARDY) (CODMAN 80-1316)	1						V Mueller	NL3853-003

UPMC-Presbyterian

NEURO EEA TRAY - PUH

Printed: 12/04/2018 09:35
 Revised: 03/28/2014 12:16

Preferred Sterilization Method: Steam 1

Comments / Instructions:

Item Description	Std Qty	Actual Qty	1st	2nd	Add	Final	Manufacturer	Catalog
DISSECTOR, TRANS 9.5" ANGLED UP 240MM (CODMAN 80-1315)	1						V Mueller	NL3785-136
STRING								
MOSQUITO CURVED (CODMAN 30-4517)	4						V Mueller	SU2702
CRILE ARTERY FORCEPS 5-1/2" STR	4						V Mueller	SU2730
KELLY FORCEP 6 1/2" (CODMAN 32-4071)	1						V Mueller	SU2760
ALLIS 6IN (CODMAN 32-7000)	4						V Mueller	SU4054
KOCHER FORCEP CURVED 6 1/4" (32-4110)	2						V Mueller	SU2800
SAROT NEEDLEHOLDER (CODMAN 36-3020)	2						V Mueller	CH2416
RYDER NEEDLE HOLDER (CODMAN 36-3012)	1						V Mueller	CH2508
REGULAR NEEDLE HOLDER (CODMAN 36-2016)	1						V Mueller	SU16060
METZENBAUM SCISSOR (STILLE 817-18)	1						V Mueller	MO1600-S
MAYO SCISSOR STR (CODMAN 36-5051)	1						V Mueller	SU1804
MAYO SCISSOR CVD (CODMAN 36-5061)	1						V Mueller	SU1814
TENOTOMY SCISSOR (PILLING 640280)	1						V Mueller	CH5675
PREP STICKS (CODMAN 36-6036)	3						V Mueller	GL650
ADJUSTABLE HEMOCLIP APPLIER	1						Medtronic	MCEN21R
PAPER BAG								
COTTON SWABS (Q-TIPS)	6						NO MANUFACTURER PROVIDED	

Total Instrument Count 69

Assembled By: Printed using View a Count Sheet

12/04/2018 09:35

UPMC-Presbyterian

FUKUSHIMA SUCTIONS - PUH

Printed: 10/10/2016 12:57
 Revised: 12/27/2012 12:22

Preferred Sterilization Method: Steam 1

Comments / Instructions:

Item Description	Std Qty	Actual Qty	1st	2nd	Add	Final	Manufacturer	Catalog
SHORT SUCTIONS								
TAPERED SUCTION 4FR.	2						NO MANUFACTURER PROVIDED	LI-M004
TAPERED SUCTION 6FR.	2						NO MANUFACTURER PROVIDED	LI-M006
TAPERED SUCTION 8FR.	2						NO MANUFACTURER PROVIDED	LI-M008
TAPERED SUCTION 9FR.	2						NO MANUFACTURER PROVIDED	LI-M009
MEDIUM SUCTIONS								
TAPERED SUCTION 4FR.	2						V Mueller	NL1955-004
TAPERED SUCTION 6FR.	2						V Mueller	NL1955-006
TAPERED SUCTION 8FR.	2						V Mueller	NL1955-008
TAPERED SUCTION 9FR.	2						V Mueller	NL1955-009
LONG SUCTIONS								
TAPERED SUCTION 4FR.	2						V Mueller	NL1956-004
TAPERED SUCTION 6FR.	2						V Mueller	NL1956-006
TAPERED SUCTION 8FR.	2						V Mueller	NL1956-008
TAPERED SUCTION 9FR.	2						V Mueller	NL1956-009

Total Instrument Count 24

Assembled By: Printed using View a Count Sheet

10/10/2016 12:57

UPMC-Presbyterian

KLS MARTIN PITTSBURGH DISSECTORS - PUH

Printed: 10/10/2016 12:54

Revised: 06/18/2013 14:34

Preferred Sterilization Method: Steam 1

Comments / Instructions:

Item Description	Std Qty	Actual Qty	1st	2nd	Add	Final	Manufacturer	Catalog
#1 MODIFIED SACHS DISSECTOR MEDIUM STRAIGHT	1						KLS Martin	07-005-01-07
#2 MODIFIED SACHS DISSECTOR LARGE STRAIGHT	1						KLS Martin	07-005-02-07
#3 MODIFIED FISCH DISSECTOR RIGHT STRAIGHT	1						KLS Martin	07-005-03-07
#4 MODIFIED FISCH DISSECTOR LEFT STRAIGHT	1						KLS Martin	07-005-04-07
#5 HOOK WITH BALL DISSECTOR STRAIGHT	1						KLS Martin	07-005-05-07
#6 CURETTE BLUNT 90° UP DISSECTOR STRAIGHT	1						KLS Martin	07-005-06-07
#7 MODIFIED COTTLE DISSECTOR STRAIGHT, MEDIUM	1						KLS Martin	07-005-07-07
#8 MODIFIED COTTLE DISSECTOR STRAIGHT, LARGE	1						KLS Martin	07-005-08-07
#9 MODIFIED RHOTON (ROSEN) DISSECTOR STRAIGHT SMALL	1						KLS Martin	07-005-09-07
#10 MODIFIED RHOTON (ROSEN) DISSECTOR STRAIGHT LARGE	1						KLS Martin	07-005-10-07
DISSECTOR HANDLE	4						KLS Martin	07-005-20-07

Total Instrument Count 14

Assembled By: Printed using View a Count Sheet

10/10/2016 12:54

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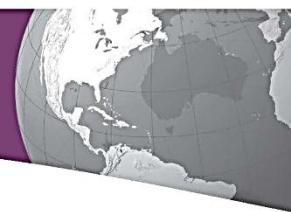
UPMC Center for Cranial Base Surgery
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WEBSITES:

www.UPMC.com/skullbasesurgery
<http://www.neurosurgery.pitt.edu/>
<http://www.skullbasecongress.com>



UPMC Global Care: Bridging Patient Care Partnerships Around the World

What is UPMC Global Care?

UPMC firmly believes that patients should have access to quality health care close to home whenever possible. However, medical treatment is not always possible in their home country. To serve medical needs of this nature, UPMC created the Global Care program.

The vision of UPMC Global Care is to offer an innovative service model for international patients that coordinates the care plan before the patient's arrival, provides superior quality care and clinical monitoring while in Pittsburgh, and enables the seamless transition of care, with regular follow-ups after discharge.

Our key differentiator is our total commitment to a service-oriented approach and our emphasis on an excellent and satisfying experience, not only for the patients and their families, but also for their referring physicians and financial sponsors. Referring physicians can communicate directly with our clinical experts at UPMC regarding treatment plan, discharge instructions, and follow-up care upon their patient's return home.

Last year, 22,000 patients traveled from around the world to access our top-rated care.



The Global Care program serves patients through clinical expertise, telemedicine consultations, and health care treatment at a number of facilities in the United States, Ireland, and Italy.

At UPMC, patients can expect:

- Timely responses to inquiries for care, with initial response occurring within one business day
- One point of access for pre-arrival, care delivery, and post-discharge communication
- A single price and single invoice for all services provided.

Why Choose UPMC Global Care?

Patients that receive treatment at UPMC, and their families have unique needs due to cultural barriers and the complexity of the health care system in the United States. To create the most comfortable atmosphere possible, hospitality teams provide a variety of services for each patient, including:

Clinical Care

Clinical care coordinators actively collaborate with physicians and treatment teams to create a comprehensive health plan and monitor the health of patients during treatment. Our physicians establish relationships with referring physicians throughout the care process and in an on-going capacity to ensure safe discharge and continuity of care upon patient's return home.

Patient Hospitality

Multilingual hospitality coordinators serve as cultural liaisons for patients and their families. They provide a single point of contact for each patient and serve to meet all non-medical needs, including communication, travel, housing, dietary, religious, and recreational needs.

Housing and Recreational Services

Hospitality coordinators will review local accommodation options and ensure patients and their families receive safe, convenient housing. For patients requiring extended stay in Pittsburgh, Hospitality coordinators will also assist patients to arrange local cell phone service and open bank accounts. Voted the "Most Livable City in the United States", Pittsburgh has many dining, cultural, shopping, and entertainment options to help patients relax and make the most of their visit.

Patient Financial Coordinators

Patient financial coordinators provide patients with a clear explanation of payment for services at UPMC and assist patients with communicating with insurance companies, sponsoring organizations, or embassy offices.

Visa and Travel Assistance

Medical acceptance letters will be provided for patients and their traveling companions to facilitate their visa application process and in-country interview at their respective US Consulate.

Patient Escort and Navigation

Our multilingual interpreters accompany patients and their companions to their medical appointments to alleviate the stress of having to find their way around the hospital, to facilitate patient registration, and to ensure culturally-sensitive communication with their healthcare provider.

Connect with UPMC Global Care | Find out more about UPMC's programs and services at UPMCGlobalCare.com.