MERI | GENESIS

MC.001—Spinal Procedures

Scientific Merit for Achievement:
The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objective:
To perform, teach, and/or perfect spinal surgical procedures involving all levels of the spine that will translate to live patient surgeries utilizing as minimal of an access incision as possible to still allow for the execution of a proper stabilization technique.

Methodology to Achieve Objective:
By utilizing fresh-frozen, embalmed, or embalmed and injected cadaver specimens, the sponsor will perform, teach, and/or perfect spinal surgeries by following as closely as possible the methodology utilized in live patient surgery. The utmost care will be taken to make the most minimal incision possible to preserve any future potential for research and education, and to maintain the aforementioned consistency with live patient surgery. These include, but are not limited to minimal access to the cervical, thoracic, lumbar or sacrum spinal procedures, open access to the cervical, thoracic, lumbar and/or sacrum spinal procedures.

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

- General Surgical Instrumentation
- Surgical Instrumentation and Implants Provided by Sponsor
- C-arm Fluoroscopic Unit with Technician
- Lead Aprons and Thyroid Shields
- Surgical Microscope
- Surgical Drill
- Endoscopic Light Source
- Electrosurgical Unit (Bovie)
- Suction Source
- PPEs (Gloves, Gowns, Masks with Shields, Caps, and Shoe Covers)
- Other specialty items specified by sponsor or MERI

Qualified Learners/Participants:
These individuals shall include board certified physicians, resident physicians, physician assistants, nurses, and other medical and non-medical learners/participants. Typically, the students are of the same specialties and of the same position in the medical/surgical field, field of study or the medical device industry.

Sponsors Approved in Utilization of Curriculum:

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- Category "B"-Independent board-certified physicians, healthcare professionals and others shall be subject to MERI's Sponsor Application process.

Faculty Approved for Instruction of Curriculum:

1) Client Sponsored Event:

   Credentials review of Sponsor's faculty and other teaching specialists is exempt from MERI'S Academic Review Board review. However, MERI expects that normally maintained faculty, teaching specialists, and Sponsor representatives are educated and trained in the content outlined in the curriculum and have other demonstrated competencies within the specific discipline or field of study to instruct learners so they maintain and improve the quality of medical care by enhancing professional skills. A fully executed "Sponsor Agreement" between MERI and outside organizations shall serve as assurance of faculty competency.

2) MERI Sponsored Event

   a) None at this time.

Escorted by MERI Personnel or Non-Escorted:

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MC.002—Orthopaedic Surgical Procedures

Scientific Merit for Achievement:
The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objective:
To perform, teach, and/or perfect various types of Orthopaedic procedures that will translate to live patient surgeries utilizing as minimal of an access of incisions as possible to still allow for the execution of proper techniques.

Methodology to Achieve Objective:
By utilizing fresh-frozen cadaver specimens, the sponsor will perform, teach, and/or perfect varying degrees and types of Orthopaedic surgery by following as closely as possible the methodology utilized in live patient surgery. The utmost care will be taken to make the most minimal incision possible to preserve any future potential for research and education, and to maintain the aforementioned consistency with live patient surgery. The procedures include, but are not limited to hip or knee replacement or revision, femoral or tibia trauma surgery, foot or ankle procedures, humeral shoulder trauma, forearm and/or wrist trauma, and arthroscopy procedures.

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

- General Surgical Instrumentation
- Surgical Instrumentation and Implants Provided by Sponsor
- Surgical power such as sag saw, drill and reamer
- C-arm Fluoroscopic Unit with Technician if Requested
- Lead Aprons and Thyroid Shields
- Electrosurgical Unit (Bovie)
- Suction Source
- Positioning equipment such as peg boards
- PPEs (Gloves, Gowns, Masks with Shields, Caps, and Shoe Covers)
- Other specialty items specified by sponsor.

Qualified Learners/Participants:
These individuals shall include board certified physicians, resident physicians, physician assistants, nurses, and other medical and non-medical learners/participants. Typically, the students are of the same specialties and of the same position in the medical/surgical field, field of study or the medical device industry.

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2) MERI Sponsored Event

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MC.003—Vascular and Endovascular Procedures

Scientific Merit for Achievement:
The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objective:
To perform, teach, and/or perfect various vascular and/or endovascular procedures (open and/or less invasive), involving all areas of the vascular system, and to include those of the heart and brain that will translate to live patient surgeries. These surgeries are typically practiced in the fields of medicine to include but are not limited to the specialties of vascular surgery, general surgery, cardio surgery, interventional neuroradiology surgery, neurosurgery and other qualified professionals or educators relevant to the specialties.

Methodology to Achieve Objective:
By utilizing fresh-frozen, embalmed, or embalmed and injected cadaver specimens, the sponsor will perform, teach, and/or perfect surgeries of the vascular system, the heart, and the brain. The utmost care will be taken to make the most minimal incision possible to preserve any future potential for research and education, and to maintain aforementioned consistency with live patient surgery. The specimen may be flushed beforehand to remove some of the remaining thrombi in the vessels. In addition, the specimen may also be perfused during the procedure to simulate flow. Synthetic replicators, flow models and/or simulators may also be used with or without specimens. These procedures can include but are not limited to:

Vascular and Endovascular surgeries such as:

- Endovascular or open repair of abdominal aortic aneurysms, thoracic aortic aneurysms, thoracoabdominal aneurysms that can include stenting or grafting
- Open surgical reconstructions and balloon angioplasty and stenting in all vascular areas
- Carotid endarterectomy and carotid artery stenting
- Bypass surgery and endovascular therapy for peripheral artery disease
- Endovascular and open surgical treatment for peripheral artery aneurysms
- Endovascular surgical interventions such as angioplasty and stenting in all vascular areas
- Varicose vein therapies
- Endovascular and open surgical reconstruction for deep vein occlusions
- Hemodialysis access
- Treatment of vascular malformations

Cardio surgeries such as:

- Aortic root surgery
- Cardiac catherization
- Cardiac ablation
- Coronary bypass and/ or repair surgeries

- Heart valve surgeries
- Minimally invasive heart and/ or open-heart surgeries
- Transcatheter aortic valve replacement (TVAR)
- Pacemaker surgeries
- Ventricular assist device

Neurosurgeries, interventional neuroradiology surgeries, such as:

- Arteriovenous malformations (AVM)
- Brain aneurysm surgeries
- Carotid angioplasty and stenting
- Carotid artery stenosis
- Carotid endarterectomy
- Cavernous malformations
- Stroke prevention or repair
- Vertebral or basilar stenosis
- Brain tumor surgeries

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

- General Surgical Instrumentation
- Surgical Instrumentation, Catheters, Implants, Guide wires Provided by Sponsor
- C-arm Fluoroscopic Unit with Technician if Requested
- Lead Aprons and Thyroid Shields
- Contrast Medium
- Vascular pump or pressure bag
- Suction Source
- PPEs (Gloves, Gowns, Masks with Shields, Caps, and Shoe Covers)
- Other specialty items specified by sponsor.

Qualified Learners/Participants:

These individuals shall include board certified physicians, resident physicians, physician assistants, nurses, and other medical and non-medical learners/participants. Typically, the students are of the same specialties and of the same position in the medical/surgical field, field of study or the medical device industry.

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Faculty Approved for Instruction of Curriculum:

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2) MERI Sponsored Event

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MC.004—Head and Neck Surgery

Scientific Merit for Achievement:
The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objective:
To perform, teach, and/or perfect surgical procedures involving all regions of the head and neck that will translate to live patient surgeries utilizing as minimal of an access incision as possible to still allow for the execution of a proper technique.

Methodology to Achieve Objective:
By utilizing fresh-frozen, embalmed, or embalmed and injected cadaver specimens, the sponsor will perform, teach, and/or perfect surgeries involving the head and neck by following as closely as possible the methodology utilized in live patient surgery. The utmost care will be taken to make the most minimal incision possible to preserve any future potential for research and education, and to maintain the aforementioned consistency with live patient surgery. Many of these procedures are performed opened, endoscopic or with less-invasive incisions, with the exception of anatomy dissections, which are more targeted to the investigation of holistic orientation of multiple structures requiring larger incisions. These procedures are practiced in medicine for the treatment of multiple diagnoses for ailments of the head and neck regions including but not limited to the areas of: General Surgery, ENT, Neurosurgery/Neurologic, Vascular, Dental, Oral and maxillofacial, Plastic and reconstructive. These procedures include but are not limited to: thyroid or laryngeal tumor surgeries, bronchoscopy, tracheostomy, hearing deficit surgery, tonsillectomy, endoscopic frontal, ethmoidal, or maxillary sinus surgeries, the removal of brain, spinal and skull-based tumors, craniotomies, shunt placement, ventricular catheter insertion, and cranial repair, trigeminal neuralgia, deep brain or vagus nerve stimulation, hemifacial spasms, hemorrhages, cerebral aneurysm, AVM's, carotid stenosis, plastic and reconstructive surgeries, dental surgeries, ophthalmic dissection and procedures and anatomical dissection of all of the aforementioned regions.

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

- General and Micro Surgical Instrumentation
- Surgical Instrumentation and Implants Provided by Sponsor
- C-arm Fluoroscopic Unit with Technician
- Endoscope and/or Microscope
- IV tubing and pressure bag with solution
- Lead Aprons and Thyroid Shields
- Mayfield Clamp
- Pneumatic Surgical Drill
- Electrosurgical Unit (Bovie)
- Suction Source

- PPEs (Gloves, Gowns, Masks with Shields, Caps, and Shoe Covers)
- Other specialty items specified by sponsor.

Qualified Learners/Participants:

These individuals shall include board certified physicians, resident physicians, physician assistants, nurses, and other medical and non-medical learners/participants. Typically, the students are of the same specialties and of the same position in the medical/surgical field, field of study or the medical device industry.

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2) MERI Sponsored Event

   a) None at this time.

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MC.005—General Surgery and Anatomy

Scientific Merit for Achievement:

The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objective:

To perform, teach, and/or perfect surgical procedures of General Surgery and to understand the anatomical structures of the human anatomy that will translate to live patient surgeries utilizing as minimal of an access incision as possible, more precision, less damage to the surrounding tissue, and subsequently faster recovery times.

Methodology to Achieve Objective:

General Surgery is a surgical specialty that focuses on abdominal contents including esophagus, stomach, small bowel, colon, liver, pancreas, gallbladder and bile ducts, and often the thyroid gland. General Surgery can also include but not limited to diseases involving the skin, breast, soft tissue, trauma, vascular surgery and hernias.

By utilizing fresh-frozen, embalmed, or embalmed and injected cadaver specimens, the sponsor will perform, teach, and/or perfect surgeries involving General Surgery by following as closely as possible the methodology utilized in live patient surgery. The utmost care will be taken to make the most minimal incision possible to preserve any future potential for research and education, and to maintain the aforementioned consistency with live patient surgery. These procedures are performed opened, endoscopic/laparoscopic or with other less-invasive incisions, with the exception of anatomy dissections, which are more targeted to the investigation of holistic orientation of multiple structures on any area of the cadaver requiring larger incisions. These procedures are practiced in medicine for the treatment of multiple diagnoses for ailments of the aforementioned regions that include but are not limited to surgical emergency surgery to stabilize a patient such as thoracotomy, cricothyroidotomy, compartment fasciotomies and emergency laparotomy, ruptures of the appendix, small bowel obstruction; and laparoscopic or open surgery for gallbladder, appendix, colon, hernia repair, also breast surgeries such as biopsy and lumpectomy, endocrine surgeries such as thyroid gland, transplant surgeries (of kidneys, liver, pancreas).

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

- General Surgical Instrumentation
- Endoscopic tower with various scopes
- Electrosurgical Unit (Bovie)
- Suction Source
- PPEs (Gloves, Gowns, Masks with Shields, Caps, and Shoe Covers)
- Other specialty items specified by sponsor.

Qualified Learners/Participants:

Revised 8/1/09, 11/10/09, 4/26/10 ,8/8/16, 1/8/17, 5/31/19

These individuals shall include board certified physicians, resident physicians, physician assistants, nurses, and other medical and non-medical learners/participants. Typically, the students are of the same specialties and of the same position in the medical/surgical field, field of study or the medical device industry.

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Faculty Approved for Instruction of Curriculum:

1) Client Sponsored Event:

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2) MERI Sponsored Event

   a) None at this time.

Escorted by MERI Personnel or Non-Escorted:

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MC.006—Pain Management Procedures

Scientific Merit for Achievement:
The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objective:
To perform, teach, and/or perfect various methods of pain management procedures that will translate to live patient surgeries utilizing as minimal of an access incision as possible, more precision, less damage to the surrounding tissue, and subsequently faster recovery times.

Methodology to Achieve Objective:
By utilizing fresh-frozen, cadaver specimens, the sponsor will perform, teach, and/or perfect various methods of pain management procedures by following as closely as possible the methodology utilized in live patient surgery. The utmost care will be taken to make the most minimal incision possible to preserve any future potential for research and education, and to maintain the aforementioned consistency with live patient surgery. Many of these procedures are performed opened, endoscopic or with less-invasive incisions, with the exception of anatomy dissections, which are more targeted to the investigation of holistic orientation of multiple structures requiring larger incisions. These procedures are practiced in medicine for the alleviation of pain and the regions directly affected by these areas due to age or trauma, which leads to the restoration of quality of life. These procedures include, but are not limited to: nerve blocks, joint access for medication injection, discography, epidural injections, nerve stimulation lead placement, subcutaneous pockets for nerve stimulation generators, tunnels for placement of the leads, vertebroplasty, discectomies and/or fusions.

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

- General Surgical Instrumentation
- C-arm Fluoroscopic Unit with Technician, if requested
- Lead Aprons and Thyroid Shields
- PPEs (Gloves, Gowns, Masks with Shields, Caps, and Shoe Covers)
- Other specialty items specified by sponsor.

Qualified Learners/Participants:
These individuals shall include board certified physicians, resident physicians, physician assistants, nurses, and other medical and non-medical learners/participants. Typically, the students are of the same specialties and of the same position in the medical/surgical field, field of study or the medical device industry.

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Faculty Approved for Instruction of Curriculum:

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2) MERI Sponsored Event

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MERI | GENESIS

MC.007—Obstetrics and Gynecological/Urological/Andrological Procedures

Scientific Merit for Achievement:
The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objective:
To perform, teach, and/or perfect various procedures in the field of OB-GYN, Urology, Urogynecology, Andrology as well as General Surgery that will translate to live patient procedures with much smaller incisions, more precision, less damage to the surrounding tissue, and subsequently faster recovery times.

Methodology to Achieve Objective:
Ob/Gyn is the medical practice dealing with the health of the female reproductive systems and the breasts, etc. Urology is the branch that focuses on male and female urinary tract and male reproductive organs (as does Andrology), etc. Urogynecology includes the knowledge or specialties of both combined.
By utilizing cadaver specimens, the sponsor will perform, teach, and/or perfect surgeries involving the aforementioned specialties by following as closely as possible the methodology utilized in live patient surgery. The utmost care will be taken to make the most minimal incision possible to preserve any future potential for research and education, and to maintain the aforementioned consistency with live patient surgery. Many of these procedures are performed opened, or with less-invasive procedures, with the exception of anatomy dissections, which are more targeted to the investigation of holistic orientation of multiple structures requiring larger incisions. These procedures include but are not limited to: Pelvic floor anatomy, bladder reconstruction, bladder suspension, vaginal, cervical, or uterine anatomy, and prostate gland procedures.

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

- General Surgical Instrumentation
- C-arm Fluoroscopic Unit with Technician
- Lead Aprons and Thyroid Shields
- Endoscopic tower with various scopes
- Electrosurgical Unit (Bovie)
- Suction Source

- PPEs (Gloves, Gowns, Masks with Shields, Caps, and Shoe Covers)
- Other specialty items specified by sponsor.

Qualified Learners/Participants:

These individuals shall include board certified physicians, resident physicians, physician assistants, nurses, and other medical and non-medical learners/participants. Typically, the students are of the same specialties and of the same position in the medical/surgical field, field of study or the medical device industry.

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Faculty Approved for Instruction of Curriculum:

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2) MERI Sponsored Event

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MC.008—Plastic Surgery – Reconstructive and Cosmetic

Scientific Merit for Achievement:
The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objectives:
To perform, teach, and/or perfect various types of plastic surgery procedures, both reconstructive and cosmetic in multiple regions of the body that will translate to live patient surgeries with smaller incisions, more precision, less damage to the surrounding tissue, and subsequently faster recovery times.

Methodology to Achieve Objective:
By utilizing fresh-frozen cadaver specimens, the sponsor will perform, teach, and/or perfect various types of plastic surgery procedures, both reconstructive and cosmetic in multiple regions of the body. The utmost care will be taken to make the most minimal incision(s) possible to preserve any future potential for research and education, and to maintain the aforementioned consistency with live patient surgery. Plastic surgery is a medical specialty concerned with the correction or restoration of and function. Though cosmetic or aesthetic surgery is the best-known kind of plastic surgery, many plastic surgery procedures are not cosmetic: plastic surgery includes many types of reconstructive surgery, hand surgery, microsurgery, and the treatment of burns.

- Reconstructive plastic surgery is performed to correct functional impairments caused by burns; traumatic injuries, such as facial bone fractures and breaks; congenital abnormalities, such as cleft palates or cleft lips; developmental abnormalities; infection and disease; and cancer or tumors. Reconstructive plastic surgery is usually performed to improve function, but it may be done to approximate a normal appearance. The range of procedure types performed at the MERI may vary, but will remain within what is considered to be standard practice on living patients.

- Cosmetic or aesthetic plastic surgery involves techniques intended for the “enhancement” of appearance through surgical and medical techniques, and is specifically concerned with maintaining normal appearance, restoring it, or enhancing it beyond the average level toward some aesthetic ideal. Again, the range of cosmetic procedure types performed at the MERI may be broad, even within a single course, but will remain within what is considered to be standard practice on living patients, maintaining dignity and respect for the donor. The most prevalent aesthetic/cosmetic procedures that maybe performed include, but are not necessarily limited to:

- Abdominoplasty (“tummy tuck”): reshaping and firming of the abdomen

    - Liposuction (“suction lipectomy”): removal of fat deposits by traditional suction technique or ultrasonic energy to aid fat removal

- Buttock augmentation (but implant") enhancement of the buttocks using silicone implants or fat grafting ("Brazilian butt lift") and transfer from other areas of the body
- Buttock lift: lifting, and tightening of the buttocks by excision of redundant skin

Mammoplasty:

- Breast augmentations ("breast implant"): augmentation of the breasts by means of fat grafting, saline, or silicone gel prosthetics, which was initially performed to women with macromastia.
- Reduction mammoplasty ("breast reduction"): removal of skin and glandular tissue.
- Mastopexy ("breast lift"): Lifting or reshaping of breasts to make them less saggy, often after weight loss (after a pregnancy, for example). It involves removal of breast skin as opposed to glandular tissue

Facial Procedures:

- Blepharoplasty ("eyelid surgery"): reshaping of the eyelids or the application of permanent eyeliner, including Asian blepharoplasty
- Lip enhancement: Surgical improvement of lips' fullness through enlargement
- Rhinoplasty ("nose job"): reshaping of the nose
- Otoplasty (ear surgery"/"ear pinning"): reshaping of the ear, most often done by pinning the protruding ear closer to the head.
- Rhytidectomy ("face lift"): Removal of wrinkles and signs of aging from the face
- Browplasty ("brow lift" or "forehead lift"): elevates eyebrows, smooths forehead skin
- Midface lift ("Cheek lift"): tightening of the cheeks
- Chin augmentation (chin implant"): implants to the cheek
- Orthognathic Surgery: manipulation of the facial bones through controlled fracturing
- Fillers injections: collagen, fat, and other tissue filler injections, such as hyaluronic acid
- Laser skin resurfacing

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

- General Surgical instrumentation
- Surgical instrumentation and implants Provided by Sponsor
- C-arm Fluoroscopic Unit with Technician if Requested
- Lead Aprons and Thyroid Shields
- Electrosurgical Unit (Bovie)
- Suction Source
- Positioning Board for Lateral Procedures
- PPEs (Gloves, Gowns, Masks with Shields, Caps, and Shoe Covers)
- Other specialty items specified by sponsor

Qualified Learners/Participants:

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Faculty Approved for Instruction of Curriculum:

1) Client Sponsored Event:

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2) MERI Sponsored Event

   a) None at this time.

Escorted by MERI Personnel or Non-Escorted:

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MERI | GENESIS

MC.010—Airway Management Procedures

Scientific Merit for Achievement:
The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objective:
To perform, teach, and/or perfect various airway management procedures that will translate to establishing a patent airway through which effective optimal ventilation with the fewest complications can take place and/or to provide an artificial airway to replicate a patient's natural airway as close as possible.

Methodology to Achieve Objective:
By utilizing simulation in conjunction with fresh-frozen cadaver specimens (if requested), the sponsor will perform, teach, and/or perfect various airway management procedures. The utmost care will be taken to make the most atraumatic intubation possible to preserve any future potential for research and education, and to maintain the aforementioned consistency with live patient care. These procedures include, but are not limited to, orotracheal intubation, nasotracheal intubation, flexible fiberoptic intubation, rigid fiberoptic intubation, retrograde intubation, glidescope assisted intubation, bougie assisted tracheal intubation, rapid sequence intubation, laryngeal mask airway ventilation, tracheal tube exchange, percutaneous cricothyrotomy, surgical cricothyrotomy, tracheotomy, percutaneous tracheotomy, and chest tube insertion (tube thoracostomy). During the practice or perfection of many of the aforementioned techniques the possibility to have available a difficult airway for the sponsor may be requested. The most effected method to simulate the requested airway condition will be determine by MERI and the sponsor during the individual courses planning process. These procedures are practiced in medicine to provide a patent airway, protect the airway from obstruction or aspiration, and facilitate positive pressure ventilation and airway control for diagnostic and therapeutic measures.

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

- Endotracheal Tubes of various sizes and manufactures as requested by the sponsor
- Laryngoscope – Model Specific to the needs of the course and sponsor
- AmbuBag – Adult and Pediatric
- Bronchoscope – Model Specific to the needs of the course and sponsor
- Glidescope – Model Specific to the needs of the course and sponsor
- LMA – Model Specific to the needs of the course and sponsor
- Tracheostomy Tube – Model Specific to the needs of the course and sponsor
- Suction Source
- General Surgical Instrumentation (MERI provided)

- PPEs (Gloves, Gowns, Masks with Shields, Caps, and Shoe Covers)
- Other specialty items specified by sponsor.

Qualified Learners/Participants:

These individuals shall include board certified physicians, resident physicians, physician assistants, nurses, and other medical and non-medical learners/participants. Typically, the students are of the same specialties and of the same position in the medical/surgical field, field of study or the medical device industry.

Sponsors Approved in Utilization of Curriculum:

- Category "A"-Sponsors shall mean medical device companies, professional societies, and federal, state or local government agencies.

- Category "B"-Independent board-certified physicians, healthcare professionals and others shall be subject to MERI's Sponsor Application process.

Faculty Approved for Instruction of Curriculum:

1) Client Sponsored Event:

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2) MERI Sponsored Event

   a) None at this time.

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MC.011—Emergency Medical Services/Procedure Lab

Scientific Merit for Achievement:
The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objective:
To provide a hands-on procedure lab in a safe learning environment that may enhance the understanding, skills and abilities of emergency services providers such as Air Medical Transports, EMTs, Paramedics, Firefighters, Military, and Emergency Room staff.

Methodology to Achieve Objective:
The procedure lab provides opportunity for healthcare participants to understand and practice hands-on various procedures utilizing cadaveric specimens (if requested) with alternative training materials and didactic information in a safe learning environment.

A typical lab may be formatted to take participants through a variety of stations covering medical procedures and techniques. Procedures may include, but are not limited to:

- Anatomy
- Airway Management (Bag valve, oral intubation, video laryngoscopy, cricothyrotomy, bougie, etc.)
- Ventilator Management
- Chest Tube Insertion and Drainage
- Needle Decompression and Placement
- Intraosseous Placement
- Central venous catheters, artery catheter placements or other controlled bleeding catheters, such as rebola
- Ports
- Escharotomy
- Ultrasound Guided Access
- Pericardiocentesis
- Wound Management and Trauma
- Arthrocentesis
- Open Thoracotomy
- Bladder Aspiration
- Transport
- Other specialty items specified or provided by sponsor

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

- General Surgical Instruments (i.e. pickups, scissors, retractors)
- Suction Source
- General Instrumentation (MERI provided)

- PPE (Gloves, Gowns, Masks with Shields, Caps, and Shoe Covers)
- Sponsor Provided Materials
- Other specialty items specified by sponsor

Qualified Faculty and Students/Participants:
These individuals generally include, but are not limited to, pre-hospital providers (i.e. air transport, EMTs, Paramedics, technical rescue), military personnel, firefighters, board certified physicians, residents, other qualified, non-medical educators in the area of emergency medicine, anesthesiology, nursing, and first responders.

Typically, the students are of the same specialties and of the same position in the medical/surgical field, emergency rescue or the medical device industry as the faculty members.

Sponsors Approved in Utilization of Curriculum:
Sponsors may generally include, but are not limited to medical device companies, professional medical societies, universities, hospitals, other healthcare providers and/or education facilities, and federal, state or local government agencies.

Independent board-certified physicians, residents, physician assistants, nurses, EMTs and others will be subject to MERI's Sponsor Application process.

Faculty Approved for Instruction of Curriculum:

- Category "A" – Sponsors shall mean medical device companies, professional societies, and federal, state or local government agencies.

- Category "B" – Independent board-certified physicians, healthcare professionals and others shall be subject to MERI's Sponsor Application process.

Faculty Approved for Instruction of Curriculum:

1) Client sponsored events:
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2) MERI sponsored events:
   a. None at this time

Escorted by MERI Personnel or Non-Escorted:

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MC.012—Forensic Investigation and Analysis for Fire Related Deaths

Scientific Merit for Achievement:

The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objective:

To illustrate and learn from how the human body burns for arson and death investigators. Lectures will cover topics of accidental fires and normal burn patterns as it applies to forensic casework, and features of homicide, particularly identification of traumatic injury for differentiating manner of death between accidental or criminal attempts to destroy evidence of the body with fire. Frequently evidence can be misinterpreted and an innocent person is wrongfully charged with a crime. The best way to minimize these problems is through scientific education and training for officers of the law who investigate difficult cases of fatal fires.

Methodology to Achieve Objective:

By utilizing fresh-frozen cadaver specimens, the sponsor will perform, teach, and/or perfect various methods to investigate fire related deaths in a variety of settings. The utmost care will be taken in handling the donors with the most atraumatic approach possible to preserve the utmost respect and honor for the donor, and to maintain the aforementioned consistency with true to life forensic cases. These procedures, analyses, and investigations include, but are not limited to, survey of different types of normal heat damage to tissues of the body, victim charting and burn patterns associated with accidental house and car fire cases, introduction to normal burn patterns of the body and the pugilistic posture, normal burn patterns of the arms and legs that show the process before, during, and after the fire, features of the pugilistic posture, fat, muscle, and burn patterns to bone as permanent evidence of how the body burned, the effects of traumatic injury to the body prior to the fire, and how trauma produces deviations in how the body burns, examples of penetrating injury of deep wounds, broken bones and evidence of injury in burned human remains (as obtained from procedures performed at MERI prior to this study), normal burn patterns of the head, followed by the effects of gunshot wounds, blunt force injury, and sharp force injury and what survives the fire for forensic analysis, myths of the skull changes and burn patterns of the teeth for recovery and personal identification, postmortem interval- when was the body burned and the effects of decomposition, and accelerants on the body and their burn patterns. During the practice or perfection of many of the aforementioned techniques the presence of MERI staff will be imperative to maintain strict adherence to this curriculum. Additionally, due to the variant nature of this course from the majority of the MERI curriculums, notification will be made to the family and/or legal authorizing party of any donors participating in this course, prior to the course.

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

- General Instrumentation (MERI provided)
- PPEs (Gloves, Gowns, Masks with Shields, Caps, and Shoe Covers)
- Other specialty items specified by sponsor.

Qualified Learners/Participants:

These individuals shall include board certified physicians, resident physicians, physician assistants, nurses, and other medical and non-medical learners/participants. Typically, the students are of the same specialties and of the same position in the medical/surgical field, field of study or the medical device industry.

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Faculty Approved for Instruction of Curriculum:

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2) MERI Sponsored Event

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MC.013—Mass Casualty Incident

Scientific Merit for Achievement:
The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objectives:
To expose learners to an environment that supports education and instruction related to human anatomy and physiology regarding pre-hospital procedures used during the treatment of injuries encountered in patients as a result of a mass casualty incident (MCI) natural or man- made.

To expose learner in an interactive session with regard to the proper use of the Incident Command System(ICS) with focus on operational aspects, with particular emphasis on the Medical Branch and its functions.

Methodology to Achieve Objective:

- A full day of courses, lectures and debriefings (8 hours)
- Students will be divided into two groups (A&B). One for procedural lab and one for Mass Casualty Incident (MCI) event.
- The disaster simulation scenarios and procedural cadaver lab training will run concurrently, with each group of 25 students alternating in the afternoon.
- MCI Exercise will include simulators, mannequins, and actors, staged around the assigned rooms.
- MCI Exercise will simulate a real-life disaster scenario.
- There will be four general areas of the disaster scenario: Search and Rescue, Triage, Treatment, and Transport. These students will be divided into groups that will rotate to the different divisions during this exercise.
- With the use of proper PPE and equipment /supplies, paramedics and EMTs will perform search and rescue, triage, and treat simulated patients as they would in real world event.
- The format of the cadaveric portion of the course will be practice of advanced life-saving skills, including intubation, use of hemorrhage control devices, intraosseous venous access, external jugular access and IV access within a more complex, MCI disaster frame of reference. There will be three learning environments in this lab they are:
    - General Anatomy and Physiology
    - Focused airway/chest anatomy with variation in intubation and advanced airway techniques

  - Anatomy of the upper and lower extremities- vascular access- IO insertion – various sites.

- The entire experience will be recorded for further review following the course to assess competency and determine opportunities for additional training needs.

Scenario:
To be read to participants prior to entering the building will be dependent on the disaster chosen, explosive device, tornado, earthquake, and active shooter. The number of victims will be dependent on the number of participants in the course.

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

Equipment Needed:
MCI:

- Jurisdictional approved Triage Tags
- Portable patient tracking devices with laptops with wireless capability
- ICS command boards, identifying vest, and radios.
- Endotracheal Tubes, Combi-tubes, BVMs, Glide scopes, Oral and Nasal Airways, King Airways, Bougie, SALT Airway, Porta-vent, various dressings and bandages- For treatment area.
- Long Backboards, Straps, C-collars, tape, head restraints, stretchers (2)
- MCI Trailer for various supplies and equipment.
- Hemorrhage control, I/O equipment and initial treatment bags

Procedural Lab:

- LMA,
- King Airway,
- Endotracheal tubes,
- Asherman chest seals,
- 14 G 3inch IV,
- EZ IO Device with proper needles,
- Bag-Valve-Mask,
- Oral and Nasal Airways,
- Combitubes,
- CPAP Device -Mask
- Glide Scope
- Porta-vent
- Hemorrhage control devices

Rooms Needed:

- Auditorium – Opening Didactic
- Labs at 44 South Cleveland – Anatomical models (airway, anatomy, etc.)
- 1381 Madison building – MCI Exercises

Simulators Needed:

From MERI:

Static mannequins, high fidelity mannequins patient, standardize patients for walking wounded, moulage

Anatomical Specimens Needed:

- Cadavers for intubation practice
  - one with hemi-dissection for airway and jugular anatomy
  - one with no dissection for blind airway insertion
- Cadaver for anatomy, hemorrhage control, and intraosseous injection access all sites (full dissection)

Time Frame (General):

- Welcome, Incident Command and the Medical Branch, Improvised Explosive Devices (1.5 hrs)
- 2 – hour sessions (Concurrent Simulation Scenario and Cadaveric Sessions)
  - Disaster Scenarios
    - Search and Rescue (30-45 minutes)
    - Triage and Transport (30-45 minutes)
    - Transport – Patient Tracking (30-45 minutes)
  - Cadaver Labs
    - Anatomy of the Airway and Chest with Intubation
    - Variation in Intubation
    - Variation in Intubation, Anatomy and I/O Injections, hemorrhage control

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Qualified Learners/Participants:

These individuals shall include board certified physicians, resident physicians, physician assistants, nurses, and other medical and non-medical learners/participants. Typically, the students are of the same specialties and of the same position in the medical/surgical field, field of study or the medical device industry.

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Faculty Approved for Instruction of Curriculum:

1) Client Sponsored Event:

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2) MERI Sponsored Event

a) None at this time.

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MC.014—Implantable Tissue Recovery Training

Scientific Merit for Achievement:
The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objective:
To perform, teach, and/or perfect various types of tissue recovery processes and procedures in multiple regions of the body that will translate to actual recovery cases in the areas of tissue and organ donation for implantation and/or processing for implants.

Methodology to Achieve Objective:
By utilizing fresh-frozen cadaver specimens, the sponsor will perform, teach, and/or perfect various types of tissue recovery processes and procedures in multiple regions of the body by following as closely as possible the methodology utilized in actual recovery cases. The utmost care will be taken to make the most minimal incision possible to preserve any future potential for research and education, and to maintain the aforementioned consistency with actual tissue recovery cases. The recovered tissue from donors can be utilized for a wide variety of life saving applications, with just a few listed below.

- Bone
  - Used in spinal surgeries
  - Used in reconstructive surgeries to repair broken bones.
  - Large donated bone grafts can be an alternative for people facing arm and leg amputations
- Soft tissue
  - Used to repair tendons and ligaments from sports or other injuries
  - Aids in strengthening the bladder for individuals with incontinence
- Veins
  - Used to restore circulation for people with blocked veins and arteries
  - Donated veins can be used in heart bypass surgery
  - Often used for dialysis access needs
- Eyes
  - Donated corneas are used to restore vision for those who have blindness
  - Donated sclera is used for those who have injured that part of the eye
  - Can also be used for research and for ophthalmology education
- Skin
  - Used as a temporary dressing for burn victims
  - Aids in strengthening the bladder for individuals with incontinence
- Heart Valves
  - Used to replace diseased valves in adults and children
  - Repairs congenital defects in children

The procedures are typically performed by trained technicians or by technicians in training with guidance from qualified faculty. The procedures taught and learned in this course include but are not limited to the harvesting and processing of the humerus, radius, ulna, femur, tibia, fibula, iliac crest, skin, select tendons/ligaments, pericardium, heart for valves, corneas, mandible, and saphenous veins. These procedures will be practiced in order to ensure the accurate and proper technique is utilized in actual recovery cases, so that the gift of tissue donation will be maximized.

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

- General Surgical Instrumentation
- Surgical Instrumentation and Implants Provided by Sponsor
- Electrosurgical Unit (Bovie)
- Suction Source
- Positioning Board for Lateral Procedures
- PPEs (Gloves, Gowns, Masks with Shields, Caps, and Shoe Covers)
- Other specialty items specified by sponsor.

Qualified Learners/Participants:

These individuals shall include board certified physicians, resident physicians, physician assistants, nurses, and other medical and non-medical learners/participants. Typically, the students are of the same specialties and of the same position in the medical/surgical field, field of study or the medical device industry.

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Faculty Approved for Instruction of Curriculum:

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2) MERI Sponsored Event

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MC.015—NDLS COURSES

Scientific Merit for Achievement:

The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objective:

The students will be introduced to concepts and principles used to prepare professionals for the management of injuries and illnesses caused by disasters and public health emergencies.

Methodology to Achieve Objective:

BDLS

This 1-day course introduces concepts and principles to prepare professionals for the management of injuries and illnesses caused by disasters and public health emergencies. The primary focus of the BDLS course is incorporation of an "all-hazards" approach to mass casualty management and population-based care across a broad range of disasters.

ADLS

ADLS® is an intensive, 2-day course that allows students to demonstrate competencies in casualty decontamination, specified essential skills, and mass casualty incident information systems/technology applications. The course uses simulated, all-hazards scenarios and mass causality incidents, ADLS® makes use of four interactive sessions in which participants treat simulated patients in various disaster drills and situations. Training is focused on the development of hands-on skills to allow participants to apply the knowledge learned in BDLS

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

BDLS

• This is a lecture only course but information that is relevant to the region concerning disaster management can be used to supplement information

ADLS

• Supplies as indicated in the instructor's manual
• Requested simulators and related equipment and supplies for decontamination, triage and treatment
• General Instrumentation (MERI provided) if cadaver is used
• PPEs (Gloves, Gowns, Masks with Shields, Caps, and Shoe Covers)

Qualified Learners/Participants:

These individuals shall include board certified physicians, resident physicians, physician assistants, nurses, and other medical and non-medical learners/participants. Typically, the students are of the same specialties and of the same position in the medical/surgical field, field of study or the medical device industry.

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2) MERI Sponsored Event

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MC.016—AHA Courses

Scientific Merit for Achievement:
The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Goal
To optimize the likelihood that a cardiac arrest victim regardless of age will receive the highest-quality evidence-based care.

Objective:

- Students will demonstrate proper procedures based on the AHA principals for the care of critically ill and arrest patient
- Students will recognize, assess, treat, and manage a wide range of medical conditions based on the teaching of evidence-based practice utilizing AHA scenarios and teaching methodology
- The students will demonstrate an increase in the knowledge and procedures involved in the care of the critical ill and arrest patient

Methodology to Achieve Objective:

AHA online course check off
All online course requires the student to complete the didactic portion of the course at www.onlineaha.org and bring a copy of the certificate of completion of part one. They are then required to complete part two of the course, which involves hand on instruction, and return demonstration. More advanced course may involve participation in a scenario involving high fidelity simulations.

AHA instructor led courses
Heartsaver
AHA's Heartsaver course is designed to prepare students to provide first aid, CPR, and use an AED in a safe, timely, and effective manner. Heartsaver Instructor-led courses include group interaction and hands-on coaching and feedback from an AHA Instructor. They are classroom-based courses and video based.

BLS for healthcare providers
The AHA's BLS Course provides the foundation for saving lives from cardiac arrest. It teaches both single-rescuer and team basic life support skills for application in both pre-hospital and in-facility environments, with a focus on high-quality CPR and team dynamics.

ACLS

Medical professionals who respond to cardiovascular emergencies in and out of the hospital enhance their treatment knowledge and skills through the AHA's ACLS training courses. The ACLS

class offering highlight the importance of team dynamics and communication, systems of care and immediate post-cardiac arrest care. They also cover airway management and related pharmacology. The course includes video education, simulated scenarios based on the healthcare providers environment.

PALS

AHA's PALS course offerings are for healthcare providers who respond to emergencies in infants and children. The goal of the AHA's PALS courses is to improve the quality of care provided to seriously ill or injured children, resulting in improved outcomes. The PALS class, just like the ACLS class. offering highlight the importance of team dynamics and communication, systems of care and immediate post-cardiac arrest care. They also cover airway management and related pharmacology. The course includes video education, simulated scenarios based on the healthcare providers environment.

PEARS

PEARS® helps healthcare providers develop the knowledge and skills needed for emergency evaluation and treatment of seriously ill infants and children.

PEARS teaches providers how to recognize respiratory distress, shock and cardiac arrest, and provide appropriate lifesaving interventions within the initial minutes of response until the child is transferred to an advanced life support provider. The goal of PEARS is to improve the quality of care provided to seriously ill or injured infants and children, resulting in improved outcomes.

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

All equipment needed for these courses can be found in the instructor's manual. The instructor needs to be affiliated with a training center to teach the course. The MERI is a training facility and does not train instructors.

Qualified Learners/Participants:

These individuals shall include board certified physicians, resident physicians, physician assistants, nurses, and other medical and non-medical learners/participants. Typically, the students are of the same specialties and of the same position in the medical/surgical field, field of study or the medical device industry.

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Faculty Approved for Instruction of Curriculum:

1) Client Sponsored Event:

Credentials review of Sponsor's faculty and other teaching specialists is exempt from MERI'S Academic Review Board review. However, MERI expects that normally maintained faculty, teaching specialists, and Sponsor representatives are educated and trained in the content outlined in the curriculum and have other demonstrated competencies within the specific discipline or field of study to instruct learners so they maintain and improve the quality of medical care by enhancing professional skills. A fully executed "Sponsor Agreement" between MERI and outside organizations shall serve as assurance of faculty competency.

2) MERI Sponsored Event

a) None at this time.

Sponsors Approved in Utilization of Curriculum:
Baptist College of Health Sciences
Baptist Memorial Healthcare Corporation
City of Bartlett EMS / FD
City of Collierville EMS / FD
City of Germantown EMS / FD
City of Memphis Paramedics
Jackson Madison Regional Hospital

Memphis City EMS/Paramedics
Methodist LeBonheur Healthcare
The Regional Medical Center
St. Francis Hospital, Memphis
Shelby County EMS
Southwest Tennessee Community College
University of Memphis
University of Tennessee
Union University
The VA Hospital
Other healthcare provider and/or education facilities, such as hospitals, clinics, universities, etc.

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MC.017—Canine Search and Recovery Investigation and Training

Scientific Merit for Achievement:

The cadaveric specimens provide an opportunity for learners to have hands-on practice and testing with human anatomy. The learners may receive training via three or more ways such as simulation, live animal and NAM. Each of these training modalities provides a different perspective to the overall procedure. Overall, the NAM portion of the training is pivotal for the completeness of the learning process.

Objective:

To illustrate and train cadaver dogs to locate (recover) human remains and forensic evidence. Depending on the nature of the search, these dogs may be trained to locate entire bodies (including those buried or submerged), body fragments (including blood, tissues, hair, and bones), or skeletal remains.

Methodology to Achieve Objective:

By utilizing fresh-frozen anatomical material, the sponsor will perform, teach, and/or perfect various methods to train cadaver dogs specific applications for recovery of human remains and forensic evidence. The utmost care will be taken in handling the donors with the least traumatic approach possible to preserve the respect and honor for the donor, and to maintain the aforementioned training consistency with true to life forensic recovery cases. These procedures, analyses, and investigations include, but are not limited to, training specifically in wilderness and urban settings. During the practice or perfection of many of the aforementioned techniques the presence of MERI staff will be imperative to maintain strict adherence to this curriculum.

NAM may only be provided for sponsors who request escorted events only. No un-escorted NAM shall be provided for any type of canine search and recovery investigation and/or training scenarios or curriculums.

Additionally, due to the variant nature of this course from the majority of the MERI curriculums, notification will be made to the family and/or legal authorizing party of any donors participating in this course, prior to the course.

Equipment, Supplies, and/or Instrumentation Potentially Required for Methodology:

- General Instrumentation (MERI provided)
- PPEs (Gloves, Gowns, Masks with Shields, Caps, and Shoe Covers)
- Other specialty items specified by sponsor.

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Qualified Learners/Participants:

These individuals shall include board certified physicians, resident physicians, physician assistants, nurses, and other medical and non-medical learners/participants. Typically, the students are of the same specialties and of the same position in the medical/surgical field, field of study or the medical device industry.

Sponsors Approved in Utilization of Curriculum:

- Federal, State and Local Emergency Management Agencies
- Forensic Investigation Team(s) or Societies
- Law Enforcement Agencies

Escorted by MERI Personnel or Non-Escorted:

- Category "A"-Sponsors as listed in "Sponsor Approved for Utilization of Curriculum" are approved to utilize MERI services both escorted and non-escorted.
- Category "B"-Sponsors as listed in "Sponsors Approved for Utilization of Curriculum" are subject to utilization of escorted and/or non-escorted services through MERI's "Sponsor Application" process.