

**UC Irvine Division of Trauma, Critical Care & Burn Abstracts Accepted for
Presentation at October 2009 American Association of Trauma meeting in
Pittsburgh**

1. Malinoski DJ, Herbst A, Jafari F, Ardary C, Conniff H, Baje M, Kong A, Barrios C, Cinat ME, Dolich MO, Lekawa ME, Hoyt DB. Standard prophylactic enoxaparin dosing leads to inadequate anti-XA levels and increased DVT rates in critically ill trauma and surgical patients. Accepted for oral presentation at the American Association of Surgery for Trauma, Pittsburgh, PA. 2009.
2. Madhukar PS, Nguyen XT, Malinoski DJ, Hoyt DB. The impact of chronic disease on outcome following trauma: A study from the NTDB Accepted for poster presentation at the American Association of Surgery for Trauma, Pittsburgh, PA. 2009.
3. Kim HD, Malinoski DJ, Borazjani B, Patel MS, Chen J, Slone J, Steward E, Hoyt DB. Inhibition of intraluminal pancreatic enzymes with nafamostat mesilate improves clinical outcomes after hemorrhagic shock in swine. Accepted for oral presentation at the American Association of Surgery for Trauma, Pittsburgh, PA. 2009.
4. Barleben A, Jafari F, Dolich MO, Malinoski DJ, Lekawa ME, Hoyt DB, Cinat ME. Prospective validation of an algorithm defining indications for pelvic radiographs in the evaluation of blunt trauma patients. Accepted for poster presentation at the American Association of Surgery for Trauma, Pittsburgh, PA. 2009.
5. Culhane J, Dolich M, Cinat M, Malinoski D, Barrios C, Hoyt D, Lekawa M. Clinical judgment is better than an arbitrary bedrest protocol for solid organ injury. Accepted for poster presentation at the American Association of Surgery for Trauma, Pittsburgh, PA. 2009.