

The **UCLA** Comprehensive Stroke Center & Cerebrovascular Program present the:

UCLA BRAIN ATTACK! '26

THE **28TH** ANNUAL SYMPOSIUM ON STATE-OF-THE-ART STROKE MANAGEMENT



UCLA Course Director:

- Reza Jahan, MD
Professor and Interventional Stroke Director,
Santa Monica UCLA Medical Center,
Division of Interventional Neuroradiology

Co-Directors:

- Geoffrey P. Colby, MD, PhD
Professor of Neurosurgery and Radiology*
Director, Division of Cerebrovascular Neurosurgery,
Department of Neurosurgery
- May Nour, MD, PhD
Medical Director, UCLA Mobile Stroke Rescue Program,
Assistant Professor of Neurology and Radiology*
UCLA Comprehensive Stroke Center and
Division of Interventional Neuroradiology

UCLA Faculty Planning Committee:

- Gary R. Duckwiler, MD
Director, Division of Interventional Neuroradiology,
Department of Radiology
- Jeffrey L. Saver, MD
Director, Stroke Neurology, Department of Neurology
- Paul M. Vespa, MD
Director, Neurocritical Care,
Departments of Neurosurgery and Neurology

Date and Location

- Saturday, October 10, 2026
- UCLA Carnesale Commons
251 Charles E. Young Drive, West
Los Angeles, California 90095

The 28th Annual UCLA Brain Attack! '26 Schedule

Saturday, October 10th, 2026

TIME	FORMAT	TOPIC
8:00 am	Welcome & Introduction	Opening remarks Reza Jahan, MD
8:15	Interactive Case Discussion	IV Thrombolysis Gray Zones: When the Guidelines Go Quiet - tPA Decisions at the Edges Kyle Kern, MD
9:15	Lecture	Prehospital Stroke Systems of Care: The Stroke Clock Starts in the Field May Nour, MD, PhD, MBA, FSVIN
9:45	Break	Mid-Morning Refreshment Break
10:00	Interactive Case Discussion	The Cases That Keep Us Up at Night: Thrombectomy at the Frontier Reza Jahan, MD
11:00	Lecture	Pictures That Lie: Perfusion Pitfalls and the Posterior Circulation Blind Spot – a practical guide to stroke imaging in 2026 Bryan Y. Yoo, MD
11:30	Lecture	Carotid Revascularization in 2026: Pills, Knife, Stent, or TCAR? Viktor Szeder, MD, PhD, FSVIN
12:00 pm	Lunch	
1:00	Interactive Case Discussion	Aneurysms That Defeat the Catheter: A Surgical Playbook Anthony Wang, MD
1:30	Interactive Case Discussion	Endovascular Management of Challenging Cerebral Aneurysms: The Endovascular Toolbox Under Pressure Satoshi Tateshima, MD
2:30	Interactive Case Discussion	Intracranial Hemorrhage in the Golden Window: Pressure, Reversal, and the Decisions That Save Brain Manuel M. Buitrago Blanco, MD, PhD
3:15	Lecture	The Quiet Revolution in Intracranial Hemorrhage: Who Benefits from Minimally Invasive Surgery – and When? Geoffrey Colby, MD, PhD
3:45	Break	Afternoon Coffee Break
4:00	Lecture	Beyond the Burr Hole: How MMA Embolization Rewrote the Subdural Playbook Jeremiah N. Johnson, MD
4:30	Lecture	The 2026 AHA Stroke Guidelines: Five Things That Will Change Your Practice This Week Jeffrey Saver, MD
5:00 pm	Adjourn	

Target Audience

Neurologists, Neurosurgeons, Interventional Neuroradiologists, Emergency Physicians, Family Practice Physicians, Internists, and other health care professionals who want to enhance their knowledge of the management of patients with cerebrovascular diseases.

Course Description

Presented by the UCLA Comprehensive Stroke Center, UCLA Brain Attack! '26 is a premier, multidisciplinary symposium designed for clinicians and partners committed to advancing excellence across the stroke care continuum.

Stroke remains a leading cause of death and long-term disability in the United States, even as rapid advances in prevention, diagnostics, and intervention continue to reshape clinical practice. Brain Attack! '26 translates this evolving evidence into practical, real-world clinical strategies, focusing on areas where practice variability and implementation challenges persist.

Through expert-led presentations, case-based discussions, and multidisciplinary perspectives, participants will engage with the latest data shaping modern stroke care—including advanced neuroimaging, expanded reperfusion strategies, intracerebral hemorrhage management, and evolving approaches to neurovascular disease and recovery.

Why This Program Matters

Recent trials and guideline updates have expanded indications for intravenous thrombolysis and endovascular thrombectomy well beyond traditional time windows, while innovations in imaging, anticoagulation, and device-based therapies continue to accelerate. At the same time, clinicians and healthcare systems face increasing complexity in patient selection, workflow design, and coordinated care delivery.

UCLA Brain Attack! '26 is designed to meet this moment—bridging the gap between evidence and practice by equipping healthcare professionals with the clinical reasoning frameworks needed to navigate complex and time-sensitive decisions across diverse care settings.

Course Objectives

At the conclusion of this program participants should be able to:

- Apply neuroimaging strategies, including advanced and simplified imaging paradigms, to support diagnostic evaluation and treatment decision-making in ischemic and hemorrhagic stroke.
- Analyze current clinical trial evidence and guideline recommendations supporting acute ischemic stroke therapies, including intravenous thrombolytics, expanded treatment windows, and endovascular thrombectomy.
- Select evidence-based medical, endovascular, or surgical management approaches for intracerebral hemorrhage, subdural hematoma, and cerebral aneurysms based on patient characteristics and disease severity.
- Interpret evolving evidence related to stroke recovery, rehabilitation, and systems of care to inform multidisciplinary care planning across the stroke continuum.

Faculty

Course Director

Reza Jahan, MD

Professor and Interventional Stroke Director,
Santa Monica UCLA Medical Center
Division of Interventional Neuroradiology

Co-Directors

Geoffrey P. Colby, MD, PhD

Professor of Neurosurgery and Radiology*
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Course Faculty

Manuel M. Buitrago Blanco, MD

Associate Professor of Medicine*

Geoffrey P. Colby, MD, PhD

Professor of Neurosurgery and Radiology*
Director, Division of Cerebrovascular Neurosurgery
Department of Neurosurgery

Reza Jahan, MD

Professor and Interventional Stroke Director,
Santa Monica UCLA Medical Center
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Jeremiah N. Johnson, MD

Associate Professor of Neurosurgery*

Kyle C. Kern, MD

Assistant Professor-in-residence, Neurology*

May Nour, MD, PhD, FSVIN

Medical Director, UCLA Mobile Stroke Rescue Program
Assistant Professor of Neurology and Radiology*
UCLA Comprehensive Stroke Center and
Division of Interventional Neuroradiology

Jeffrey L. Saver, MD

Professor and Senior Associate Vice-Chair of Neurology*
Director, UCLA Comprehensive Stroke Center

Viktor Szeder, MD, PhD, MSc, FSVIN

Professor of Radiology, Neurology and Neurosurgery
Division of Interventional Neuroradiology
Director, Fellowship Training Program

Satoshi Tateshima, MD

Professor of Radiology and Neurosurgery*
Division of Interventional Neuroradiology

Anthony Wang, MD

Associate Professor-in-residence, Neurosurgery*
Associate Professor-in-residence, Radiation Oncology*

Bryan Y. Yoo, MD

Assistant Clinical Professor of Radiology*
Division of Neuroradiology

Ischemic Stroke

Medical & Endovascular Emergency Treatment, Prevention, and Rehabilitation

The UCLA Comprehensive Stroke Center presents its annual Brain Attack symposium to review the practical, clinical aspects of stroke prevention, diagnosis, and treatment. The course will cover stroke risk factors, diagnostic testing, and medical and interventional therapy.

Intravenous thrombolysis and neuroendovascular thrombectomy are highly effective techniques for treatment of acute ischemic stroke. The results of recent studies indicate that these reperfusion therapies are beneficial up to 4.5-6 hours after symp-

tom onset in most patients, and up to 24 hours in imaging selected patients. A highly coordinated team approach is required to provide these treatments safely and effectively.

Neuroimaging techniques are playing an increasingly important role in the evaluation of stroke patients. Faculty will provide an in-depth discussion of innovative MR and CT techniques.

The UCLA Comprehensive Stroke Center

The UCLA Comprehensive Stroke Center maintains a comprehensive treatment and clinical trials program for patients with cerebrovascular disorders. The UCLA Comprehensive Stroke Center – the first Joint Commission certified stroke center in Los Angeles County, provides multidisciplinary care for patients with stroke and kindred disorders including prevention, acute brain rescue, interventional

neuroradiological and surgical therapy, and multimodal rehabilitation. The UCLA Comprehensive Stroke Center's treatment approach includes emergency physicians, stroke neurologists, vascular neurosurgeons, vascular surgeons, diagnostic and interventional neuroradiologists, and rehabilitation physician.

Acute Treatment

For patients with new onset stroke symptoms, a "Brain Attack" rapid care program provides:

- Immediate evaluation by emergency physicians and neurologists
- CT / MRI scan within minutes of emergency department arrival
- Prompt neurovascular intensive/intermediate level care
- Trials of novel therapies for ischemic and hemorrhagic stroke and acute interventional and surgical therapies.

Stroke in Children and Young Adults

Experts in pediatric neurology, neurosurgery, interventional and diagnostic neuroradiology, and stroke neurology work together at the UCLA Comprehensive Stroke Center to provide comprehensive evaluation and treatment for pediatric and young adult patients with cerebrovascular disorders including Moyamoya syndrome, sickle-cell anemia, hyper-coagulable states, cardioembolic stroke, arteriovenous malformations, and aneurysms.

Rehabilitation

The California Rehabilitation Institute is a 138 bed free-standing acute rehabilitation hospital in Century City that is a joint venture with UCLA and Cedars-Sinai, and provides state-of-the-art care to maximize recovery for patients with stroke.

Carotid Endarterectomy

Microneurosurgical endarterectomy, with intraoperative brain monitoring, is available for asymptomatic and symptomatic carotid artery stenosis.

Reperfusion

For patients eligible to receive intravenous tPA, thrombolysis is rapidly administered. In addition, neurointerventionalist teams are available around the clock to perform emergency endovascular neurothrombectomy procedures.

Carotid and Intracranial Angioplasty and Stenting

UCLA provides angioplasty and stenting for selected patients with intracranial and extracranial carotid or vertebrobasilar stenoses.

NIH Studies

The UCLA Comprehensive Stroke Center is a co-lead center for the NIH Los Angeles-Southern California StrokeNet (LASC StrokeNet), one of twenty-five regional networks in the country for performing studies of stroke prevention, acute treatment, and recovery.

Prevention

The Stroke Clinic provides comprehensive evaluation and treatment recommendations for individuals at increased risk for ischemic and hemorrhagic stroke, including those with atrial fibrillation, carotid artery stenosis, transient ischemic attacks, and newly diagnosed unruptured aneurysms or vascular malformations.

One Call, Immediate Accept

NEUROCRITICAL CARE RAPID TRANSFER

310-825-0909 - Press 1

Stroke Neurology 310-794-6379

Vascular Neurosurgery 310-825-5111

Interventional Neuroradiology 310-267-8761 – Option 1

UCLA Comprehensive Stroke Center: www.uclahealth.org/stroke

UCLA TeleStroke: www.uclahealth.org/telestroke

UCLA Interventional Neuroradiology: www.uclahealth.org/

medical-services/radiology/interventional-neuroradiology

UCLA Cerebrovascular Program: www.uclahealth.org/cerebrovascular

California Rehabilitation Institute: www.californiarehabinstitute.com

Cerebral Aneurysms, Intracerebral Hemorrhage, Arteriovenous Malformations, and Cerebral Venous Thrombosis

Tremendous strides have been made in the management of complex vascular lesions of the brain and spinal cord. This symposium will provide a review of the basic principles of clinical and interventional management of cerebral aneurysms

and subarachnoid hemorrhage. Developments in microsurgical and endovascular techniques will be discussed. Also, intracerebral hemorrhage, arteriovenous malformations, and cerebral venous thrombosis will be reviewed.

THE UCLA CEREBROVASCULAR PROGRAM

The UCLA Cerebrovascular Program has developed management protocols for the diagnosis and treatment of cerebrovascular disorders which incorporate diagnostic and interventional neuroradiology, microneurosurgery, stereotactic radiosurgery, neuroanesthesiology, neurocritical care, and

intensive medical management.

The members of the UCLA Cerebrovascular team have worked cooperatively for three decades with all of the management components available on-site at UCLA, allowing for efficient coordination of the various techniques.

Neurovascular Disorders Treated at UCLA:

Intracranial Aneurysms

Ruptured intracranial aneurysms may be treated either surgically or by endovascular technique. Postoperatively, transcranial Doppler and cerebral blood flow studies are available to assess for the development of vasospasm. Severe, medically refractory vasospasm is treated using balloon dilation angioplasty and/or pharmacologic intra-arterial infusion, performed by the interventional neuroradiology team. Giant and complex aneurysms often require treatment using new endovascular techniques of flow diversion or extracranial-intracranial arterial bypass.

Arteriovenous Malformations (AVMs)

The Neurovascular Program has extensive experience in the management of large and complex AVMs in children and adults, which are generally treated with embolization followed by microneurosurgical resection. Functional brain mapping for surgical planning is a critical component of management of AVMs. Deep and critically located AVMs are treated with stereotactic radiosurgery which is combined with embolization in larger lesions. Dural arteriovenous malformations are usually treated definitively by embolization alone, but in some complex cases, surgery or combined techniques are necessary. Spinal AVMs are treated by microsurgical excision, endovascular therapy, or most commonly, a combination of the two techniques. UCLA is also a designated HHT (hereditary hemorrhagic telangiectasia) Center of Excellence, and provides treatment for the whole range of lesions, including brain AVMs, that are seen in families.

Cavernous Angiomas of the Brain, Brain Stem, and Spinal Cord

Cavernous angiomas are generally treated by microsurgical excision when they have caused significant symptoms. Lesions of the brain stem and spinal cord can now be treated successfully using microneurosurgical techniques, when appropriate, usually in combination with intraoperative electrophysiologic monitoring.

Vein of Galen Malformations

Transarterial and transvenous endovascular approaches are employed to reduce flow through the fistula, combined in some cases with neurosurgical treatment.

Intracranial Arterial Stenosis

Stroke due to narrowing of the brain arteries carries one of the highest rates of recurrent stroke, as much as 25 percent. Treatment of narrowing of the intracranial arteries is performed by a multidisciplinary team of experts in both medical management and novel endovascular and surgical revascularization techniques, including angioplasty, stenting, bypass, and indirect revascularization surgeries.

UCLA Comprehensive Stroke Center website: www.uclahealth.org/stroke

Stroke Neurology 310-794-6379

Interventional Neuroradiology 310-267-8761

Neurocritical Care 310-267-9448

UCLA Medical Center Facilities:

Stroke Unit

UCLA's Acute Stroke Unit, one of the first in the nation, offers comprehensive, cutting edge acute inpatient care for patients suffering from cerebral infarction, hemorrhage or other cerebrovascular diseases.

UCLA Neurocritical Care

The UCLA Neurocritical Care program is an internationally acclaimed center of excellence in patient care, training, and research. The 24-bed Singleton Neuro-ICU features numerous state-of-the-art technologies including continuous EEG monitoring, cerebral microdialysis, brain oximetry, transcranial doppler, the world's first ICU Robot (InTouch Health), and a comprehensive ICU Supercomputing System.

California Rehabilitation Institute

The California Rehabilitation Institute is the largest acute rehabilitation hospital in the western US and provides care during the initial time of complex medical and neuro-logical recovery post-stroke with the goal of reducing the impairments and disability associated with stroke and maximizing recovery.

UCLA Clinical Image Processing Laboratory

The laboratory is equipped with a full spectrum of 3D, image fusion, and post-processing software for cerebrovascular structural and perfusion study analysis.

Neurosurgical Operating Rooms

The state-of-the-art neurosurgical operating rooms at UCLA, which accommodate more than 1,200 cases annually, include video systems for viewing microsurgical procedures, electrophysiologic equipment for brain monitoring, intraoperative angiography, and a frameless stereotactic imaging workstation (BrainLAB).

UCLA Cerebral Blood Flow Laboratory (Clini

This facility provides comprehensive transcranial Doppler evaluations and cerebral blood flow testing on inpatients and outpatients.

Interventional Neuroradiology Suites

The interventional angiography suites are equipped with the latest digital equipment, including 3-D rotational angiography designated for the performance of endovascular procedures. More than 400 such procedures are performed annually at UCLA.

Stereotactic Radiosurgery

The stereotactic radiosurgery section at UCLA utilizes state-of-the-art instrumentation for the treatment of vascular malformations of the brain. This multidisciplinary effort of neurosurgeons, physicists, radiologists, and radiation oncologists is planned on a three-dimensional and multiplanar computerized model using high resolution brain mapping imaging techniques.

Henry and Arline Gluck Mobile Stroke Rescue Program

UCLA has developed a Mobile Stroke Unit (mobile CT ambulance) for advanced diagnosis, triage, and treatment of prehospital patients, including prehospital thrombolysis for acute ischemic stroke and prehospital reversal of anticoagulation for acute intracranial hemorrhage.

The UCLA Comprehensive Stroke Center:

Selected Advances in Stroke Care and Research

- First device therapy for acute ischemic stroke
 - Coil Retriever, Stent Retriever
 - Invented/Developed at UCLA
- Leading device therapies for cerebral aneurysms
 - Guglielmi detachable coil, Matrix coil
 - Invented at UCLA
- Leading catheter therapy for intracranial arteriovenous malformations and fistulae
 - Onyx liquid embolic agent
 - Developed at UCLA
- First MRI demonstration of successful reversal of advanced stroke injury in humans
- First validated instrument for paramedic recognition of stroke
 - Los Angeles Prehospital Stroke Screen (LAPSS)
- First validated instrument for paramedic recognition of large vessel occlusion (LVO)
 - Los Angeles Motor Scale (LAMS)
- First prehospital neuroprotective treatment of stroke trial
 - Field Administration of Stroke Therapy - Magnesium (FAST-MAG)
- First stroke device studied utilizing FDA approved exception from informed consent under emergency circumstances
- First multi-center trial of body weight-supported treadmill training and drug therapies for stroke
- First clinical cellphone PACS system for remote review of CT and MRI scans in acute stroke
 - Developed at UCLA
- First US multicenter trial of endoscopic treatment for acute intracerebral hemorrhage
- First trial of indirect revascularization for patients with intracranial atherosclerosis
- First routine use of intraoperative digital subtraction angiography for evaluation after surgical aneurysm and AVM treatment
- First Neuro ICU-adjacent comprehensive stroke imaging center with CT, PET, 3T MRI
- First ICU and ED robot for remote monitoring of stroke patients
- First cerebral blood flow laboratory to use bedside xenon CBF studies and TCD for stroke critical care and research
- First clinical information system with acute stroke management dashboard
- First to deploy write-once, write-everywhere stroke note for clinical documentation and automated quality and research data base completion
- First systematic secondary prevention program for cerebral atherosclerosis
 - Preventing Recurrence of Thromboembolic Events through Coordinated Treatment (Stroke PROTECT Program)
- First accredited undergraduate program for Student Stroke Research
 - UCLA Student Stroke Team
- First accredited undergraduate program for Stroke Community Education and Research
 - UCLA Stroke Force
- First confirmation that stroke diagnosis in the field by paramedics and neurologists by cell phone is highly accurate
 - Field Administration of Stroke Therapy - Magnesium (FAST-MAG)
- First validation of wearable, remote wireless health monitoring for stroke
 - Developed by UCLA Wireless Health Institute faculty and students
- First medical system in the Western United States to operate a Mobile Stroke Unit
 - UCLA Arline and Henry Gluck Stroke Rescue Program

Symposium Information

LOCATION

UCLA Carnesale Commons Palisades Ballroom

251 Charles E. Young Drive, West
Los Angeles, CA 90095

(see next page for map and directions)

ENROLLMENT - *Extremely Limited.*

****EARLY ENROLLMENT IS ADVISED****

Registration:

To register using a credit card or

ACH/electronic transfer, please visit

<https://ucla.cloud-cme.com/BrainAttack26>

*Credit card and check payments via
phone, fax, or mail are no longer accepted.

We accept American Express, MasterCard, Visa, and Discover.

ENROLLMENT FEES

In-Person Registration

\$225 Physicians, Nurses and Allied Health

\$150 UC Faculty/Staff

*In-Person fee Includes course registration, access to on-line course materials, continental breakfast, break refreshments, and lunch.

Virtual Registration

\$150 Physicians, Nurses and Allied Health

\$100 UC Faculty/Staff

* The **UCLA Brain Attack! '26 Symposium** will also be available through a live virtual meeting web platform.

- Attendees who choose to attend the live virtual activity will receive a virtual meeting link and password to access the live virtual conference.
- All registrants (live or virtual) will be provided the opportunity to review recorded sessions up to 3 weeks following the conference.
- The recorded sessions are not approved for Continuing Education (CE) credit.

Self Parking

Parking is available at Sunset Village (SV) parking structure located at 200 De Neve Dr., Los Angeles, CA. Parking fee is \$18. Guests will be able to pay for parking at the pay-by-space machines located in the Sunset Village (SV) parking structure. Directional signs will be provided to guide you to the program.

ACCREDITATION

The David Geffen School of Medicine at UCLA is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The David Geffen School of Medicine at UCLA, designates this live activity for a maximum of 7.75 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

The California State Board of Registered Nursing accepts courses approved by the *AMA PRA Category 1 Credits™* as meeting the continuing education requirements for license renewal. Nurses from states other than California should inquire with their local State Board for specific continuing education policies.

DISCLOSURE

The Accreditation Council for Continuing Medical Education (ACCME), Standards for Integrity and Independence mandates that the accreditation manages all identified relevant financial relationship(s) before the program and adequately discloses relationships to learners. The David Geffen School of Medicine at UCLA adheres to the ACCME Standards for Integrity and Independence in accredited continuing education.

The individuals below have been identified as having a position to influence the content of this educational activity. As such, they have disclosed the absence or presence of a relevant financial relationship(s) with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

All of the relevant financial relationships for these individuals have been mitigated. Please follow the link to see the list of individuals.

<https://tinyurl.com/3skvrnye>

REFUND

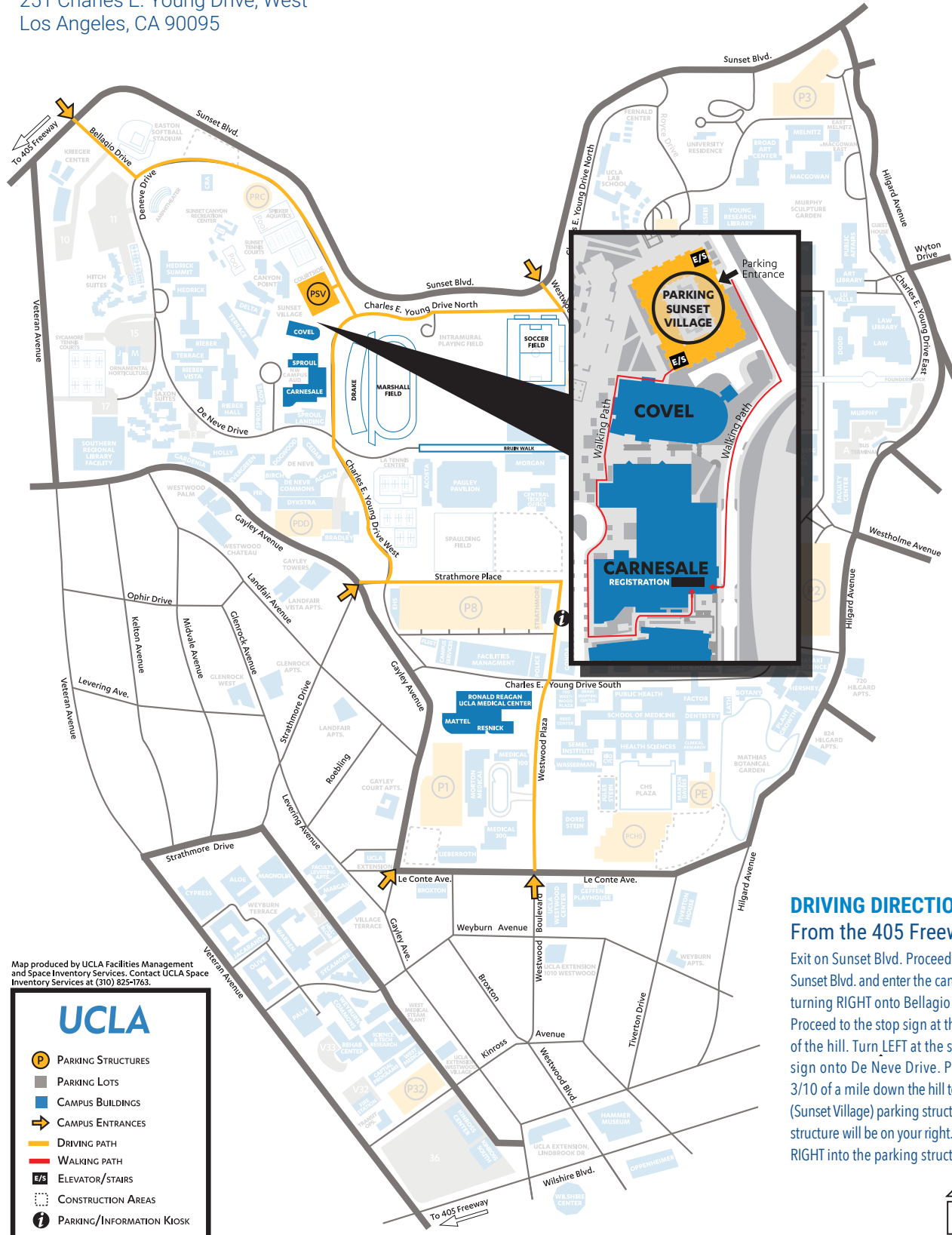
Cancellations must be received via email to ccpd@mednet.ucla.edu by Sunday, September 20, 2026 and will be subject to a \$75 processing fee. No refunds will be granted after that date. David Geffen School of Medicine at UCLA reserves the right to cancel or postpone this course if necessary; in the event of cancellation, course fees will be fully refunded to the original form of payment. We are not responsible for other costs, such as non-refundable airline tickets or hotel penalties.

QUESTION

If you have questions about enrollment, please call (310) 794-2620 or email: ccpd@mednet.ucla.edu.

UCLA Carnesale Commons

251 Charles E. Young Drive, West
Los Angeles, CA 90095



Map produced by UCLA Facilities Management and Space Inventory Services. Contact UCLA Space Inventory Services at (310) 825-1763.

DRIVING DIRECTIONS From the 405 Freeway

Exit on Sunset Blvd. Proceed EAST on Sunset Blvd. and enter the campus by turning RIGHT onto Bellagio Drive. Proceed to the stop sign at the top of the hill. Turn LEFT at the stop sign onto De Neve Drive. Proceed 3/10 of a mile down the hill to the SV (Sunset Village) parking structure. The structure will be on your right. Turn RIGHT into the parking structure.

