



Continuing Education Program

for Ophthalmic Allied Health Personnel

MYRTLE BEACH SOUTH CAROLINA

Friday & Saturday

September 11-12, 2009

Sponsored in conjunction with the

**NORTH CAROLINA SOCIETY OF EYE
PHYSICIANS AND SURGEONS (NCSEPS),
SOUTH CAROLINA SOCIETY OF
OPHTHALMOLOGY (SCSO),
and
NORTH CAROLINA OPHTHALMIC
PERSONNEL SOCIETY (NCOPS)**

Program Topics

- ADVANCES IN CORNEA, CATARACT, AND REFRACTIVE SURGERY: WHAT SHOULD I KNOW AS A TECHNICIAN?
- EYE INJURIES: HOW TO HANDLE THE COMMON AND AVOID THE TRAGIC: PITFALLS TO AVOID
- EVALUATING DIPLOPIA
- EXAMINING THE PEDIATRIC PATIENT
- INTRAVITREAL INJECTIONS
- IOL MASTER + CIRRUS HD WORKSHOPS
- RETINA EMERGENCY
- RETINOSCOPY – MORE THAN CHILD'S PLAY
- SEVEN HABITS FOR PROVIDING EXCELLENT GLAUCOMA CARE

Location

Myrtle Beach Marriott Resort at Grande Dunes
8400 Costa Verde Drive
Myrtle Beach, SC 29572

Program Chairs:

Tammye S. Wilson, COT
Tina M. Brown, COT
Sandra C. Gay, RN, COT

Sponsorship for this program provided by:



Lectures

North and South Carolina Continuing Education Program

Myrtle Beach Marriott Resort at Grande Dunes / Myrtle Beach, SC

September 11-12, 2009

Friday, September 11, 2009

7.5 Group A JCAHPO CE Credits

- 7:30 - 8:00 a.m. **REGISTRATION (Continental Breakfast in the Exhibit Hall)**
- 8:00 - 9:00 a.m. **ADVANCES IN CORNEA, CATARACT, AND REFRACTIVE SURGERY: WHAT SHOULD I KNOW AS A TECHNICIAN?**
(1 A Credit) Clark L. Springs, MD
This course will provide an introductory overview to the technician in cornea, cataract, and refractive surgery, and recent advances in the field. Specific topics to be addressed include appropriate candidates for newer technologies such as lamellar keratoplasty, lens, and corneal based refractive surgeries, and current and ongoing FDA trials.
- 9:00 - 10:00 a.m. **THE TECHNICIAN'S ROLE IN TRIAGING THE RED EYE** • Lori Zhand, COT
(1 A Credit) This course will discuss common signs and symptoms associated with a red eye. Knowledge to help with telephone triage of red eye complaints will be provided.
- 10:00 - 10:15 a.m. **BREAK (Exhibit Hall)**
- 10:15 - 11:15 a.m. **EYE INJURIES: HOW TO HANDLE THE COMMON AND AVOID THE TRAGIC: PITFALLS TO AVOID** • V. Al Pakalnis, MD
(1 A Credit) The course will describe how to handle the most common eye injuries that are likely to present in an office setting by applying general principles as well as giving specific examples. The recognition of key characteristics of different types of injuries will be emphasized in order to enable the technician to better recognize the extent of the damage and the part of the eye that is involved.
- 11:15 - 12:15 p.m. **INTRAVITREAL INJECTIONS** • Reginald Williams, MD
(1 A Credit) This course will describe steroid injections, VEGF inhibition, VEGF trap, and RNA inhibitors. Participants will also learn about injection safety, risks associated with injections, and systemic risks.
- 12:15 - 1:00 p.m. **LUNCH (Oleander Room)**
- 1:30 - 3:15 p.m. **IOL MASTER WORKSHOP (Oleander Room)** • Kevin Ott
(2 A Credits) This course will be an introduction to optical coherence biometry and its use in calculating IOLs. It will cover the operation of the IOL Master for measuring axial lengths, Ks and ACD, and database management of the instrument. There will be time for hands-on experience with the instrument.
- 3:15 - 3:30 p.m. **BREAK**
- 3:30 - 5:00 p.m. **CIRRUS HD WORKSHOP (Oleander Room)** • Kevin Ott
(1.5 A Credits) This course will serve as an introduction to high definition optical coherence tomography, an imaging modality that uses cross-sectional imaging in the assessment of eye diseases. Scan modes, analysis, and techniques needed to capture high quality images will be reviewed and demonstrated. A hands-on workshop will be offered following a lecture.

Saturday, September 12, 2009

7.75 Group A JCAHPO CE Credits

- 7:30 - 8:00 a.m. **REGISTRATION (Continental Breakfast in the Exhibit Hall)**
- 8:00 - 9:00 a.m. **EVALUATING DIPLOPIA** • Jonathan Trobe, MD
(1 A Credit) This course will evaluate case examples to demonstrate methods and pitfalls of diagnostic evaluation.
- 9:00 - 10:00 a.m. **EXAMINING THE PEDIATRIC PATIENT** • Edward W. Cheeseman, MD
(1 A Credit) This course will discuss the unique quality of the eye exam of a child and how best to perform this type of exam. Participants will learn how to interact with children and what materials and testing should be used.
- 10:00 - 10:15 a.m. **BREAK (Exhibit Hall)**
- 10:15 - 11:15 a.m. **SEVEN HABITS FOR PROVIDING EXCELLENT GLAUCOMA CARE** • Brent Bond, MD
(1 A Credit) This course will discuss the seven habits of providing excellent glaucoma care to your patients. Participants will learn careful and accurate measurement of IOPs, how to obtain high quality visual field testing, and provide quality education to the patient.
- 11:15 - 12:15 p.m. **RETINOSCOPY – MORE THAN CHILD'S PLAY** • Ronald Teed, MD
(1 A Credit) This courses will introduce the retinoscope as a handy, easy-to-use tool. At the end of the course, participants will have a working knowledge of how and when to use this often neglected instrument.
- 12:15 - 1:15 p.m. **LUNCH (Oleander Room)**
- 1:15 - 2:45 p.m. **BASIC TONOMETRY SKILLS AND USE OF THE SLIT LAMP WORKSHOP** • Jennifer Hung, MD and Daniel Wee, MD
(1.75 A Credits) The basic skill-transfer of acquiring intra ocular pressure through the use of various tonometry techniques will be presented. The basic transfer skills of the ophthalmic bio-slit lamp will also be shown. The participant will learn how to detect normal pathology or any deviations of the ocular anatomy. The participant will understand the principles behind the various instruments used to acquire intra-ocular pressure for the detection of the glaucomas. Lombart equipment will be used.
- 2:45 - 3:00 p.m. **BREAK**
- 3:00 - 4:00 p.m. **GLAUCOMA SURGERY UPDATE** • Leon Herndon, MD
(1 A Credit) This course will discuss several new procedures in glaucoma surgery. For years, the gold standard for glaucoma surgery had been trabeculectomy. There have been known complications associated with this surgery and now there are newer techniques that have been introduced to the market that are designed to be safer than trabeculectomy. Several of these new techniques will be introduced featuring video descriptions.
- 4:00 - 5:00 p.m. **RETINA EMERGENCY** • Esther Bowie, MD
(1 A Credit) This course will describe the symptoms, signs, and management of retina emergencies.
- 5:00 p.m. **ADJOURN**

Registration Form

North and South Carolina Continuing Education Program

Registration form may be duplicated. Please use one form per registrant.

September 11-12, 2009

**Registration Deadline:
August 28, 2009**

- Course fees include: course materials, JCAHPO CE credits, continental breakfast, lunch, and refreshments during breaks.
- A processing fee of \$75.00 will be deducted from each cancelled registration.
- If your registration total is less than \$75.00, no refunds will be made. ATPO Memberships are non-transferable and non-refundable.
- All cancellations and requests for refunds must be received by JCAHPO in writing no later than **August 28, 2009**. No refunds will be granted after that date, regardless of the reason, unless the conference is cancelled by JCAHPO.
- Fees paid in American currency, checks, bank drafts drawn on U.S. banks, VISA, MasterCard, Discover, or American Express are accepted. Registration by fax or online is accepted if fees are charged to a credit card.

I wish to register for:

- One-year ATPO Membership\$65.00
(Receive ATPO Member Price below)
- Full Lecture Registration**
 - JCAHPO Certified **or** ATPO Member \$230.00
 - Other Registrants \$255.00
- Group Discount*:**
 - JCAHPO Certified **or** ATPO Member \$220.00
 - Other Registrants \$245.00
- One-Day Only Lecture Registration:** (Please select one)
 - Friday Lectures or** **Saturday Lectures**
 - JCAHPO Certified **or** ATPO Member .. \$150.00
 - Other Registrants \$175.00



This meeting is held in conjunction with the North Carolina Ophthalmic Personnel Society (NCOPS).

NCOPS Member Rate \$200.00

NCOPS ID # _____

Please add a \$ _____ contribution to the JCAHPO Education and Research Foundation ... \$ _____

* Group Discount applies when 3 or more OMP from one clinic register for a meeting. Forms must be sent together.

TOTAL \$

- Register Online: <http://www.jcahpo.org/registration/>
- Mail form and payment to: JCAHPO - 2025 Woodlane Drive, St. Paul, MN 55125
- Fax this completed form to: (651) 731-0410 (Credit card charges only)

Special Dietary Needs: Please indicate any dietary restrictions:

Please PRINT clearly using blue or black ink.

Name _____ Professional Credentials _____

JCAHPO ID#/ATPO Member # _____ Date of Birth (mm/dd/yy) ____/____/____

HOME ADDRESS _____

City _____ State (Province) _____ Zip (Postal Code) _____ Country _____

Home Telephone (____) _____ Preferred E-mail _____

PRACTICE/BUSINESS _____

Address _____

City _____ State (Province) _____ Zip (Postal Code) _____ Country _____

Work Telephone (____) _____ Fax (____) _____

PAYMENT INFORMATION

- Check enclosed
(All check payments must be in U.S. funds and drawn on a U.S. bank.)
- VISA MasterCard Discover American Express

IN CASE OF EMERGENCY, PLEASE NOTIFY:

Name Telephone Number

The following information is required to process credit card orders:

Credit Card Number _____ Security Code _____ Expiration Date _____ Cardholder's Zip Code _____
(3 or 4 digits on front or back of credit card)

Cardholder's Address _____

Name as it appears on credit card (please print) _____ X _____
Cardholder's Signature

Activity Registration Form

North and South Carolina Continuing Education Program

September 11-12, 2009

NCSEPS/SCSO Optional Friday Dinner Registration Form for JCAHPO Attendees

SEPTEMBER 11, 2009 • MYRTLE BEACH MARRIOTT RESORT AT GRANDE DUNES, MYRTLE BEACH, SC

I. PERSONAL INFORMATION (PLEASE PRINT)

Complete registration form (one per person) and **return to the NCSEPS** by fax or mail with payment due.

NAME: _____ DEGREE(S): _____

PRACTICE NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: () _____ FAX: () _____

E-MAIL: _____

PREFERRED NAME FOR BADGE: _____

SPOUSE/ADULT GUEST NAME, IF ATTENDING: _____

CHILD(REN) NAMES & AGES, IF ATTENDING: _____

EMERGENCY CONTACT: (NAME) _____ (PHONE) _____



SPECIAL NEEDS: _____

DIETARY RESTRICTIONS: _____

2. ACTIVITY FEES **(To ensure we have adequate food and seating for everyone, please indicate number attending each function; pre-registration is required for all events.)**

Optional Friday Dinner:
(family-friendly, casual buffet with music and entertainment)

_____ JCAHPO Participant\$75
_____ Spouse/Adult Guest.....\$75
_____ Child(ren) ages 12-18.....\$25
_____ Child(ren) ages 12 and under\$10

Total Activity Fees \$ _____

3. TOTAL FEES No refunds after August 31, 2009

Enclosed is check # _____ for \$ _____ payable to NCSEPS.

Credit Card Type: Visa _____ MasterCard _____ 3-Digit Code on Back of Card: _____

Name as it appears on Credit Card: _____

Account #: _____ - _____ - _____ Expiration Date: _____

Billing Address: _____

City/State/Zip: _____

Please mail or fax this form to:
NCSEPS, PO Box 27167, Raleigh, NC 27611 / FAX (919) 833-2023

General Information

North and South Carolina Continuing Education Program

For additional information regarding registration, contact JCAHPO at (800) 284-3937 or e-mail registrations@jcahpo.org.

REGISTRATION

Participants must submit a completed registration form and payment by **August 28, 2009**. Registration by fax to (651) 731-0410 or online at <http://www.jcahpo.org/registration/> is accepted if fees are charged to a credit card.

CONFIRMATION

Acknowledgment of registration will be mailed or e-mailed to you. Please present your confirmation at the registration desk to claim a syllabus and name badge.

CANCELLATIONS/REFUNDS

All cancellations and requests for refunds must be received by JCAHPO in writing no later than **August 28, 2009**. No refunds are granted after that date, regardless of the reason, unless JCAHPO cancels the conference. A processing fee of \$75 is deducted from each cancelled registration to cover a portion of the costs JCAHPO incurs. If your registration total is less than \$75, no refunds are made. ATPO Memberships are non-transferable and non-refundable.

CONTINUING EDUCATION CREDITS

This program has been awarded 15.25 Group A JCAHPO continuing education credits. Continuing education credits earned will be posted on your account at www.jcahpo.org approximately 6-8 weeks after the program for participants who complete evaluation forms.

NOTE: Attendance is monitored for each hour of instruction. Participants absent for more than 15 minutes of any given hour will not receive credit for that hour.

NOTE: Please be advised that temperatures in meeting facilities are difficult to regulate; therefore, for your comfort, please bring a jacket or sweater. Cell phones **MUST** be turned off during the program, or you may be asked to leave the classroom. Thank you.

HOTEL

Myrtle Beach Marriott Resort at Grande Dunes
8400 Costa Verde Drive
Myrtle Beach, South Carolina 29572
For reservation information call (800) 228-9290 or visit www.marriott.com.

Please reference the 2009 North Carolina Society of Eye Physicians and Surgeons (NCSEPS) and the South Carolina Society of Ophthalmology (SCSO) when you make your reservations for the base meeting rate of \$159 per night, plus tax, resort fee. Reservation deadline is **August 10, 2009**.

PARKING

\$10.00 per day self-parking / \$18.00 per day valet. Parking fees are subject to change.

ATTRACTIONS/ENTERTAINMENT

Myrtle Beach is a bustling city known for more than just fabulous golf courses. The entire family will enjoy over 60 miles of sandy beach coastline, interesting historic sites, exciting festivals and world-class entertainment venues.

THURSDAY RECEPTION

All JCAHPO attendees receive a complimentary ticket to the Welcome Reception on Thursday from 6:00 - 9:00 p.m.



2025 Woodlane Drive
St. Paul, MN 55125-2998



JCAHPO® Sponsored

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**Myrtle Beach,
South Carolina**

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