

Registration Closes
October 20, 2021

Continuing Education
for Allied Ophthalmic Personnel

New York AOP Symposium

October 23-31, 2021



Certification and Education for Eye Care Excellence

New York AOP Symposium



Certification and Education for Eye Care Excellence

Courses are available from Saturday, October 23, at 8:00 a.m. Central time to Sunday, October 31, 2021, at 11:59 p.m. Central time.

Complete courses at your own pace, quiz free, and earn up to 7 IJCAHPO Group A credits.*

**IMPORTANT NOTE: There will be no extensions for this program.*

PEDIATRICS SUB-SPECIALTY SESSION (Credits: 2.0 A IJCAHPO)

Brian Forbes, MD, PhD; Gil Binenbaum, MD, MSCE; Mathew Gearing, MD; David Plumley, COA

This session will discuss a variety of pediatric ophthalmology topics. Faculty will present on identifying and reporting child abuse, tips for the pediatric exam, pediatric cataracts and retinopathy of prematurity.

THE OPHTHALMIC TECHNICIAN'S CRITICAL ROLE IN MEDICAL QUALITY AND PATIENT SAFETY

(Credits: 1.0 A IJCAHPO)

Thomasine Gorry, MD

This course will discuss the importance of quality healthcare, patient safety and the role of Allied Ophthalmic Personnel (AOP). We will look at data and discuss the results and their implication for daily practice.

LIFE IN THE TRENCHES: MANAGEMENT, SUPERVISORY AND TRAINING CASE STUDIES (Credits: 0.5 A IJCAHPO)

Nickole Delaney, COA

This course will provide various case studies related to supervising and training technicians.

TRIAGING OCULAR EMERGENCIES: SHOULD THEY COME IN OR NOT? (Credits: 1.0 A IJCAHPO)

Sherry Malone, COT, OSC

This course will discuss how to triage ocular complaints over the phone. Some emergencies have subtle signs and symptoms, and some routine problems can be terrifying to the person calling in. This course will serve as a guide on how to handle these conversations and teach attendees how to distinguish the difference between routine situations and true emergencies.

BEST PRACTICES IN OPHTHALMIC ANESTHESIA: THE TEAM APPROACH (Credits: 1.0 A IJCAHPO)

Carl Wilkins, MD

Eye surgery may be performed under topical, local or general anesthesia. This course will describe the pros and cons of each type of anesthesia and which are best suited for ophthalmic procedures, emphasizing patient comfort and safety. A framework for the best team-based approach will be discussed, focusing on practicality, efficiency and patient satisfaction.

CATARACT SURGERY PREOPERATIVE EVALUATION FOR STANDARD AND PREMIUM LENSES

(Credits: 1.0 A IJCAHPO)

Francis Mah, MD; Elizabeth Viriya, MD

This course will discuss consideration to optimize the ocular surface and confirm accuracy of biometric measurements. It will also review how to anticipate lens selection/intraoperative aids and anticipate cataract surgery, in combination with other procedures, during the patient evaluation for cataract surgery using standard versus premium intraocular lenses (IOLs).

GIANT CELL ARTERITIS: RISK CALCULATOR AND DIAGNOSTIC TESTING (Credits: 0.5 A IJCAHPO)

Edsel Ing, MD, PhD, FRCSC, MPH, CPH, MAID

This course will present a pretest risk calculator for giant cell arteritis based on the patient's symptoms, signs and bloodwork that can guide confirmatory testing with temporal artery biopsy, Doppler ultrasound or magnetic resonance imaging (MRI).

Registration Form

New York AOP Symposium
October 23-31, 2021

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

Registration and Cancellation Deadline: October 20, 2021, 12:00 p.m. Central time

General Information

For additional information regarding registration, contact IJCAHPO at 800-284-3937, e-mail registrations@jcahpo.org, or visit www.jcahpo.org.

HANDOUTS

Any course handouts that have been provided will be accessible from the course platform.

CANCELLATIONS/REFUNDS

All cancellations and requests for refunds must be received by IJCAHPO in writing. A processing fee of \$50 is deducted from each cancelled registration to cover a portion of the costs IJCAHPO incurs. **IMPORTANT NOTE: There will be no extensions for this program.**

CONTINUING EDUCATION CREDITS

IJCAHPO and CA BRN continuing education credits have been approved for this meeting. Continuing education credits earned will be posted on your account at www.jcahpo.org approximately 4-6 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.

REGISTER ONLINE at <http://store.jcahpo.org/calendarschedule.aspx> (preferred)

MAIL form and payment to IJCAHPO, 2025 Woodlane Drive, St. Paul, MN 55125

FAX completed form to 651-731-0410 (credit card orders only)

I wish to register for:

All check payments must be in U.S. funds and drawn on a U.S. bank.

INDIVIDUAL\$95

Complete courses at your own pace
from Saturday, October 23, at 8:00 a.m.
Central time to Sunday, October 31,
at 11:59 p.m. Central time.

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

TOTAL \$ _____

Please **PRINT** clearly using blue or black ink.

Name _____ Professional Credentials _____

IJCAHPO ID# _____ Date of Birth (mm/dd/yy) _____

Home Address

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

Home Telephone _____ E-mail (required for handouts/evaluations) _____

Practice/Business

Address _____

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

Work Telephone _____ Fax _____

PAYMENT INFORMATION

Check enclosed (payable to **IJCAHPO**; U.S. Funds) VISA MasterCard Discover American Express

If paying with a credit card, please complete the information below.

A \$50 fee will be assessed for declined checks and declined credit cards.

IN CASE OF EMERGENCY, PLEASE NOTIFY:

Name _____

Telephone Number _____

_____ - _____ - _____
Credit Card Number Cardholder's Address _____

_____ / _____
Name as it appears on
credit card (please print) _____

_____ / _____
Cardholder's Signature _____

Security Code
(3 or 4 digits on front
or back of credit card)

Expiration Date

Cardholder's Zip Code