

# Phoenix AOP Symposium



Certification and Education for Eye Care Excellence

Courses are available from Friday, August 5, at 8:00 a.m. Central time through Monday, August 15, 2022, at 11:59 p.m. Central time.

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

## ASSESSING OPHTHALMIC CLINICAL SKILLS

# Craig Simms, BSc, COMT, ROUB, CDOS

Whether you are responsible for evaluating ophthalmic technicians or you are looking for ways to assess your own skills, this course will discuss principles and practical tools for clinical skill assessment.

## **EMERGENCIES IN THE EYE CENTER**

## Misha Faustina MD, FACS

This case-based intermediate level course will review patient interactions for screening and triage of ophthalmic emergencies in the office setting including handling chemical burns, initial assessment of ocular traumas, and assisting patients in distress.

# **KERATOCONUS: DIAGNOSIS AND MANAGEMENT**

## **Kevin Tozer, MD**

This course will cover several aspects of keratoconus. Epidemiology, pathophysiology, diagnosis, medical, and surgical treatments will be discussed.

# OCULAR ONCOLOGY: SAVING LIVES AND SAVING EYES

## Aparna Ramasubramanian, MD

This course will discuss common benign and malignant intraocular tumors in children and adults including diagnostic features and treatment options.

# **PUPILS, FIELDS, AND POTPOURRI**

# Joanne Shen, MD

In this lecture, examination of pupils and the significance of afferent pupillary defect will be discussed. In addition, automated visual fields will be reviewed with an emphasis on neurologic visual field loss. Lastly, a potpourri of clinical cases will be discussed with diagnosis and management.

#### **RETINA CLINIC 101**

# Rima Patel, MD

This course will feature a review of common retinal conditions.

# WHAT IS THE ASSOCIATION BETWEEN REFRACTIVE ERRORS AND RETINAL DISEASES?

## Michael Stewart, MD

High magnitude refractive errors usually correlate with the eye's axial length and both abnormally long (myopia) and short (hyperopia) axial lengths predispose to the development of pathologic retinal conditions. High myopia is associated with myopic maculopathy (maculoschisis, RPE atrophy, and choroidal neovascularization), tilted disc, and retinal tears and detachments. High hyperopia is associated with choroidal folds and uveal effusions. This course will discuss many of these conditions from a clinical perspective.

# **Registration Form**

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

Virtual Phoenix AOP Symposium AUGUST 5-15, 2022 7 IJCAHPO CE CREDITS

# REGISTRATION AND CANCELLATION DEADLINE: JULY 27, 2022, 12:00 P.M. CENTRAL TIME

#### **GENERAL INFORMATION**

#### 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.

#### **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.

For additional information regarding registration, contact IJCAHPO at 800-284-3937, e-mail <a href="mailto:registrations@jcahpo.org">registrations@jcahpo.org</a>, or visit <a href="https://www.jcahpo.org">www.jcahpo.org</a>.

# I wish to register for:

All check payments must be in U.S. funds and drawn on a U.S. bank. Complete courses at your own pace from from Friday, August 5, at 8:00 a.m. Central time through Monday, August 15, 2022, at 11:59 p.m. Central time.

IJCAHPO CERTIFIED (INDIVIDUAL)\$95 OTHER REGISTRANTS (INDIVIDUAL) \$125
Please add a contribution to the JCAHPO  Education and Research Foundation \$
TOTAL \$

REGISTER ONLINE at <a href="http://store.jcahpo.org/calendarschedule.aspx">http://store.jcahpo.org/calendarschedule.aspx</a> (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)

Please <b>PRINT</b> clearly us	sing 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 INFORMAT		5		IN CASE OF EMERGENCY, PLEASE NOTIFY:		
	ayable to IJCAHPO; U.S. tion is required to proce:	•	rCard ☐ Discover ☐ American Express	Name	Telephone Number	
_		s and declined credit cards.				
			Cardholder's Address			
Credit Card Number			Name as it appears on credit card (please print)			
Security Code (3 or 4 digits on front or back of credit card)	Expiration Date	Cardholder's Zip Code	Cardholder's Signature			