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**Regional  
CE Event**



**Certification and Education  
for Eye Care Excellence**



*Continuing Education for Allied Ophthalmic Personnel*

**VIRTUAL**

# Practice Management AOP Symposium

**DEC 12–DEC 22, 2025**

REGISTRATION CLOSING DATE: DECEMBER 11, 2025



**Courses are available from Friday, December 12, 2025,  
at 8:00 a.m. CT through Monday, December 22, 2025, at 11:59 p.m. CT.  
Complete courses at your own pace, quiz free, and earn up to 6.5 IJCAHPO CE credits.**

### **THE SUPER TECH YOUR OPHTHALMOLOGIST ALWAYS WANTED**

**Michael Stewart, MD**

**0.75 IJCAHPO CE Credit**

This course offers the perspective of an Ophthalmologist on what is needed from top techs and practice managers to ensure maximum efficiency and exceptional patient care. Case studies will be discussed to help attendees consider the relationship between practice managers, techs, physicians, and patients.

### **TECH TRAINING: AOP TRAINING & ASSESSMENT IN ACTION**

**Craig Simms, MEd, COMT, CDOS, ROUB, CRT**

**1.5 IJCAHPO CE Credit**

As an ophthalmic technician you started your career working up patients and completing diagnostic testing. Now you find yourself the practice trainer. This course will provide you with the tools to embrace the challenge of training AOP. This course will discuss scope of practice, barriers to on-the-job training, prior learning assessment, clinical skills training techniques, and assessment of competency from checklists to rubrics.

### **PHONE TRIAGE FOR THE OPHTHALMOLOGY PATIENT**

**Sherry Malone, BA, COMT, OSC**

**0.75 IJCAHPO CE Credit**

This course is designed to train staff in the structured process of triaging an ophthalmology patient over the phone. Discussions include identification of emergency symptoms and signs, mitigating factors, and how to recognize the true emergency patient. Multiple scenarios will be presented for the audience to assess.

### **PIVOT! A TECHNICIAN'S GUIDE TO BATTLING BOTTLENECKS**

**Ashley Grant, COT**

**1.0 IJCAHPO CE Credit**

In this course, we'll explore how to anticipate challenges, adjust on the fly and pivot in real time to keep patient flow steady—transforming a frustrating trickle into a smooth, efficient stream. You'll sharpen your skills, boost your confidence and learn how to take control of clinic chaos with the poise of a pro.

**Alongside this course**, you will also find, "ER Management: How to Maximize Your Staff Potential," presented by Natalie Loyacano, COMT, ROUB, OSA, OCSR, (F)ATPO, and Christine McDonald, COE, COA, ROUB, OSC, CTC, OCS.

Description: This course will review the 3 E's and the 3 R's needed to maximize your staff potential. It will discuss key topics such as how to educate and engage your staff, identify deficiencies, and help employees succeed in their roles. **(Must complete the full video with bonus content to earn credit).**

### **MAXIMIZING CLINICAL EFFICIENCIES**

**Amanda Folse, COA; Alysse Rivera, COT; Julissa Valdez Guerra, COA; William Yates, COT**

**1.0 IJCAHPO CE Credit**

This course will provide an introductory overview on how to identify and implement clinical efficiencies. By using a variety of tools and a team approach, this course will help you improve and streamline processes to help lead your clinic to improved productivity and staff satisfaction

### **ROLE OF OFFICE STAFF IN MEDICAL MALPRACTICE CLAIMS**

**Hans Bruhn, OMIC Risk Manager**

**1.0 IJCAHPO CE Credit**

This course explores the crucial role ophthalmology office staff play in preventing and managing medical malpractice claims. Participants will learn how documentation, communication, and patient interactions affect legal risk. Real-world ophthalmic case examples highlight practical strategies to enhance patient safety, compliance, and overall risk management within clinical practice.

### **TASK SHIFTING AND CROSS-TRAINING YOUR TECH TEAM**

**Craig Simms, MEd, COMT, CDOS, ROUB, CRT**

**0.50 IJCAHPO CE Credit**

This course will discuss the cross-training of AOP and task-shifting of tasks from the ophthalmologist to trained AOP. A discussion of each will illustrate how to use these to increase

# Registration Form

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

Practice Management AOP Symposium

December 12–December 22, 2025

6.5 IJCAHPO CE Credits

**REGISTRATION AND CANCELLATION DEADLINE: DECEMBER 11, 2025, 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 canceled registration to cover a portion of the costs IJCAHPO incurs.

### Continuing Education Credits

This program has been accredited for 6.5 IJCAHPO CE Credits. Continuing education credits earned will be posted on your account at [www.jcahpo.org](http://www.jcahpo.org) approximately 4–6 weeks after the program for participants who complete evaluations.

*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.*

### I wish to register for:

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

IJCAHPO CERTIFIED (INDIVIDUAL) . . . . . \$95 USD

OTHER REGISTRANTS (INDIVIDUAL) . . . . \$125 USD

Complete courses at your own pace from Friday, Dec 12, at 8:00 a.m. CT through Monday, Dec 22, at 11:59 p.m. CT.

Please add a contribution to the IJCAHPO Education and Research Foundation . . . . . \$ \_\_\_\_\_

**TOTAL \$ \_\_\_\_\_**

For additional information regarding registration, contact IJCAHPO at 800-284-3937, e-mail [registrations@jcahpo.org](mailto:registrations@jcahpo.org), or visit [www.jcahpo.org](http://www.jcahpo.org).

**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 651-683-5005 (credit card orders only)

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 \_\_\_\_\_

### What race or ethnicity do you identify most with?

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|---|--|--|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Hispanic or Latino                        | <input type="checkbox"/> Multiracial or Multi-ethnic |
| <input type="checkbox"/> Asian or Asian American          | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | <input type="checkbox"/> Other _____                 |
| <input type="checkbox"/> Black or African American        | <input type="checkbox"/> White or Caucasian                        | <input type="checkbox"/> Prefer Not to Answer        |

### PAYMENT INFORMATION

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

The following information is required to process credit card orders:  
A \$50 fee will be assessed for declined checks and declined credit cards.

IN CASE OF EMERGENCY, PLEASE NOTIFY:

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

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Credit Card Number

Cardholder's Address \_\_\_\_\_

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

Name as it appears on credit card (please print) \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_