Cleveland Academy of Osteopathic Medicine

377 Lear Road #161 Avon Lake, Ohio 44012 Phone: (440) 653-5110 Email: info@caomed.com

Fax: (216) 282-3780

Cleveland Academy of Osteopathic Medicine

28th Annual Westside Seminar

Saturday, September 30, 2017

LaCentre Conference Facility 25777 Detroit Rd Westlake, OH 44145 Phone: (440)250-2000

ANTICIPATED 7 CREDITS OF CATEGORY 1-A CME

This education program is designed to provide information to assist osteopathic physicians in efforts to enhance patient health, further their knowledge of emerging therapies and carry out diagnosis and treatment strategies more effectively and efficiently.

DIRECTIONS TO LACENTRE:

From the East—Head west on I-90 to the Columbia Rd Exit (159). Head south on Columbia Rd. Turn right on Detroit Rd. LaCentre will be shortly on the left.

From the West—Head east on I-90 to the Columbia Rd Exit (159). Head south on Columbia Rd. Turn right on Detroit Rd. LaCentre will be shortly on the left.

SATURDAY, SEPTEMBER 30, 2017—SCHEDULE

7:00 AM REGISTRATION OPENS

7:45 AM -8:00 AM
OPENING REMARKS
PROGRAM CO-CHAIRS

8:00AM - 9:00AM
DIFFUSE PARENCHYMAL LUNG DISEASE
DR. DANIEL CULVER, DO

9:00AM - 10:00AM

DISC REPLACEMENT IN THE SPINE

DR. JOEL SIEGAL, MD

10:00AM - 10:20AM
SCIENTIFIC BREAK/VISIT EXHIBITS

10:20AM - 11:20 AM
HYDRATION IMPORTANCE IN THE PEDIATRIC ATHLETE
DR. DANIEL HARRINGTON, DO

11:20AM - 12:20PM

ACID REFLUX DISEASE UPDATE DR. JOHN DUMOT, DO

12:20PM - 1:15PM

LUNCH

CAOM MEMBERSHIP MEETING

FOR MEMBERS ONLY

1:15PM - 2:15PM
EMERGENCY CARE UPDATE
DR. GREGORY BLOXDORF, DO

2:15PM - 3:15PM
TICKBORNE DISEASES
DR. JENNIFER HANRAHAN, DO

3:15PM - 4:15PM
TELEMEDICINE BENEFITS
DR. TIM LAW, DO

4:15PM – 4:30PM ADJOURNMENT

SPEAKERS AND TOPICS ARE SUBJECT TO CHANGE WITHOUT NOTICE

CME CREDIT

The Cleveland Academy of Osteopathic Medicine will submit your credit hours to the AOA. To receive credit, you will need to complete, return and have proper signature of the CME Form before departing the seminar. Credits will not be issued to physicians failing to get their CME Form signed.

REGISTRATION INFORMATION

The Seminar Registration Form, along with payment must be received no later than **September 15**, **2017** to receive the early registration rate. Registrations received after **September 15**, **2017** will be charged the walk-in rate. **CANCELLATIONS**, **REFUNDS** AND **GRIEVANCES**

No refunds will be applied once payment is received and processed.

28TH ANNUAL WESTSIDE SEMINAR

SATURDAY, SEPTEMBER 30, 2017

ADVANCED REGISTRATION FORM

No Advanced Registration will be accepted after Sept. 15, 2017

TO PAY BY CHECK Return this form by mail, email, or fax to:

CAOM 377 Lear Road #161 Avon Lake, Ohio 44012 Email: info@caomed.com

Fax: 216-282-3780

TO PAY BY CREDIT CARD VISIT <u>WWW.CAOMED.COM</u> AND FOLLOW LINK TO WSS REGISTRATION

	4			By 9/1	<mark>5/2017</mark>
□CAOM Members (Active and Retired)			7	\$150	
□OOA/AOA/ACOFP Member				\$	180
□Nonmembers				\$2	200
☐Retired Non-Member or Physician Assistant				\$150	
☐Osteopathic Residents & Students Do you need Resolution 42 Credit?	yes	no		F	ree
WHEN PAYING BY CHECK:	Please	compl	ete all	informatio	on below
		1/			
NAME:				OA UMBER:	
NAME: OFFICE ADDRESS:			N C	_	
			N G	UMBER: OLLEGE/YR	
OFFICE ADDRESS:			N G	UMBER: OLLEGE/YR RAD: FFICE	
OFFICE ADDRESS: OFFICE CITY/STATE/ZIP:			N G	UMBER: OLLEGE/YR RAD: FFICE	