



The Ohio Podiatric Medical Association *presents*

GXMO Courses

for students with OR without GXMO licenses

*Initial Courses, Continuing Ed,
Clinical Positioning (Digital)*



GOT GXMO?
We got GXMO!

March 26—28, 2010

Columbus State Community College

Columbus, OH

Questions about GXMO?
Need more info?
You can now access GXMO
information on www.opma.org!



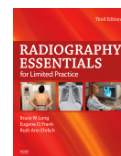
1960 Bethel Road, Ste 140
Columbus, OH 43220
Phone: 614-457-6269
Fax: 614-457-3375
E-mail: lstewart@opma.org

Dates

Friday, March 26—Didactic Day #1
Saturday, March 27—Didactic Day #2
Sunday, March 28—Clinical

Materials / Textbook

Textbook is **required** for those **without** a license,
optional for those **with** a license



Radiography Essentials for Limited Practice, 3rd Ed.

by Eugene D. Frank, Bruce W. Long, Ruth Ann Ehrlich
Publisher: Elsevier Health Sciences
Pub. Date: Feb 2009, ISBN#: 978-1-4160-5763-5

*You MUST purchase your textbook **PRIOR TO THE CLASS**. Refer to the registration page to determine whether or not you need to purchase this book. For a link to purchase the book from the publisher, visit www.opma.org. Book can also be found online at www.bn.com, www.amazon.com or at the Columbus State Community College bookstore, Discovery Exchange online.*

Other Suggested materials: Pens, paper, highlighters—whatever you need to take notes; sweater/sweatshirt (classroom may be cold); drink/snacks or money for machines

Instructors

James Byrne is the Radiography Coordinator, Associate Professor at Columbus State Community College (CSCC) and Program Director for the Radiography Program at CSCC. Mr. Byrne holds a Masters degree from Ohio University and a Bachelor of Science in Allied Health from Ohio State University. He is a member and past Chairman of the Board of Ohio Society of Radiologic Technologists.

Amy Bidlack is a Clinical Instructor at Columbus State Community College. She received her Bachelor of Science degree in Allied Health Professions from Ohio State University.

Additional Info

The Ohio Podiatric Medical Association maintains responsibility for this program.

If you have a disability that requires special accommodation or need assistance to attend this event, please call OPMA.

This program has been approved by the Ohio Department of Health under the program titles of Radiology for the Podiatric Medical Assistant: Didactic Training, Radiology for the Podiatric Assistant: Continuing Education and Radiology for the Podiatric Assistant: Clinical Training.

AGENDA

DIDACTIC: Friday, March 26, 2010

8:00 AM—NOON	Introduction and lecture
NOON—1:00 PM	Lunch (on your own)
1:00 PM—5: 00 PM	Lecture

DIDACTIC: Saturday, March 27, 2010

8:00 AM—NOON	Introduction and Lecture
NOON—1:00 PM	Lunch (on your own)
1:00 PM—5: 00 PM	Lecture

CLINICAL: Sunday, March 28, 2010

Track 1:	8AM—11AM
Track 2:	11AM—2PM

Location

**Columbus State Community College
389 Grant Ave., 'GR' Building**

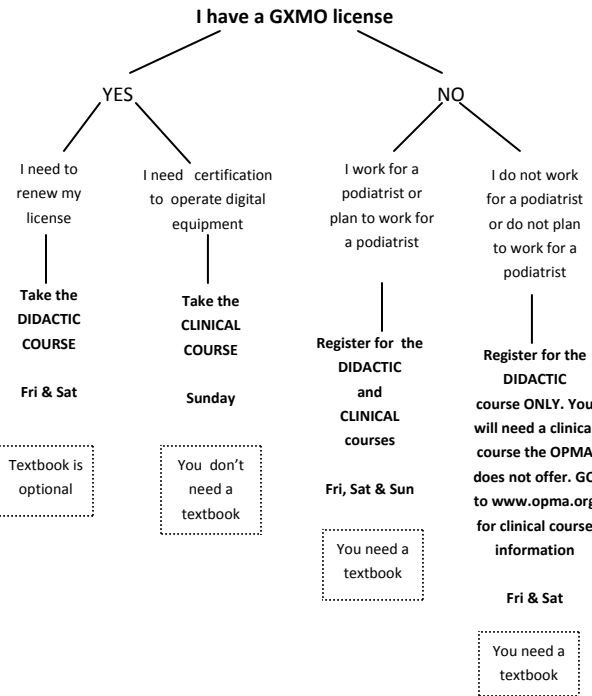
***Map, directions, instructions and parking passes provided
with registration confirmation***

**Holiday Inn is offering
GXMO students a special
rate! \$79 + tax/night!**
*Less than 3 miles from class—includes a free
shuttle! Newly remodeled hotel with indoor
pool, restaurant & lounge*
Call 877-859-5095 for Reservations



Holiday Inn
175 Town Street, Columbus, OH 43215
877 859 5095

What class should you take?



At this time, OPMA only offers a podiatric-specific clinical course. For other clinical course providers, visit www.opma.org and click "Other Course Providers" under GXMO

Questions? Call OPMA @ 614-457-6269

Cancellation Policy

We ask that you register and pay at least seven days prior to the event. On-site registrations cannot be guaranteed. There will be no refund for no shows.

Cancellations before March 19, 2010:

Refunded less a \$50 per-person cancellation fee

Cancellations March 20, 2010—March 24, 2010:

Refunded for 50% of total price paid

Cancellations March 24, 2010—March 26, 2010 :

Sorry, no refunds

Questions? Call OPMA @ 614-457-6269

STEP 1: Choose Your Class

Check all that apply

DIDACTIC COURSE: Member

I work for an OPMA or OSCA member

Member's Name: _____

DIDACTIC COURSE: Non - Member

I work for someone who is not a member of OPMA or OSCA OR

I do not currently have a job

CLINICAL COURSE: Member*

I work for an OPMA or OSCA member

Member's Name: _____

CLINICAL COURSE: Non - Member*

I work for someone who is not a member of OPMA or OSCA OR

I do not currently have a job

*CLINICAL COURSE STUDENTS:

SELECT YOUR TRACK— Please specify which (one) track you prefer. OPMA will do its best to accommodate your first choice, but keep in mind that each track is filled on a first-come first-served basis.

CLINICAL COURSE: Track 1

Sunday, March 28, 2010 from 8:00 am to 11:00 am

CLINICAL COURSE: Track 2

Sunday, March 28, 2010 from 11 :00 am to 2:00 pm

STEP 2: Total it Up

One registrant per form. Fees DO NOT include textbook.

A 3% discount is given to those that pay by check.

Price below reflects this discount.

DIDACTIC: MEMBER *paying by* CHECK (\$159) \$ _____

DIDACTIC: NON-MEMBER *paying by* CHECK (\$259) \$ _____

DIDACTIC: MEMBER *paying by* CREDIT CARD (\$164) \$ _____

DIDACTIC: NON-MEMBER *paying by* CREDIT CARD(\$267)\$ _____

CLINICAL: MEMBER *paying by* CHECK (\$139) \$ _____

CLINICAL: NON-MEMBER *paying by* CHECK (\$239) \$ _____

CLINICAL: MEMBER *paying by* CREDIT CARD (\$143) \$ _____

CLINICAL: NON-MEMBER *paying by* CREDIT CARD(\$246) \$ _____

TOTAL: \$ _____

Questions? Call OPMA @ 614-457-6269

STEP 3: Pay for it



I am paying by check.

Make checks payable to OPMA



I am paying by credit card.

Complete form below with credit card information

CREDIT CARD #:

EXPIRATION DATE:

SECURITY CODE :

NAME ON CARD:

BILLING ADDRESS FOR CREDIT CARD (IF DIFFERENT THAN PRACTICE ADDRESS):

STEP 4: Tell us who you are

Form **MUST** be complete to be registered.

ATTENDEE NAME:

MEMBER NAME (if applicable):

ADDRESS FOR CERTIFICATE TO BE MAILED:

PHONE: _____

FAX: _____

EMAIL FOR CONFIRMATION:

STEP 5: Send it



EMAIL as a PDF to: lstewart@opma.org



MAIL to OPMA: 1960 Bethel Rd. #140,
Columbus, OH 43220



FAX to: 614-457-3375

You will receive a registration confirmation to the email you provided above