



OAPA ANNUAL CONFERENCE – SEPTEMBER 16-18, 2016
Marriott Columbus Northwest, Dublin, OH

AGENDA (Subject to Change)

"OAPA is applying for 21 CME credits. Total number of approved hours yet to be determined."

Friday, September 16

7:00 – 8:00	Registration and Continental Breakfast
8:00 – 9:00	Opioids – Coroner’s Office
9:00 – 10:00	Zika Virus: An Emerging Threat
10:00 – 10:30	Break w/Detail Tables
10:30 - 11:30	Hand
11:30 – 12:30	Elbow/Shoulder
12: 30 – 1:30	Lunch
1:30 – 2:30	Pediatric Topic
2:30 – 3:30	PAs in the Electronic Age
3:30 – 4:00	Break w/Detail Tables
4:00 – 5:00	Precepting
5:00 – 6:00	TBD
6:00 – 7:00	Cocktail Reception
7:00	Dinner with CME

Saturday, September 17

7:00 – 8:00	Breakfast and Registration
8:00 – 10:00	Motivational Interviewing
10:00 – 10:15	Break
10:15 – 11:15	Dermatology
11:15 – 12:15	Diversity
12:15 – 2:00	Lunch w/Membership Meeting
2:00 – 3:00	Common Behavior Problems in Pediatrics
3:00 – 4:00	Pain Management – Non-opioid Therapies
4:00 – 4:15	Break
4:15 – 5:15	Testosterone Treatment
5:15 – 6:15	Perioperative Care of the Total Joint Patient
6:15	Dinner on your own

Sunday – September 18

7:00 – 8:00	Breakfast and Registration
8:00 – 9:00	Zebra Talk
9:00 – 10:00	The Art of Medicine: Beginning at the End
10:00 – 10:15	Break
10:15 – 11:15	Enhanced Recovery after Surgery
11:15 – 12:15	TBD

REGISTRATION FORM

NAME _____

YOUR FIRST NAME FOR YOUR NAME BADGE _____

YOUR PRACTICE SPECIALTY FOR YOUR NAME BADGE _____

MAILING ADDRESS _____

CITY/STATE _____

PHONE _____ EMAIL _____

SPECIAL NEEDS _____

Inclusive (Friday, Saturday and Sunday) Conference Rates:

Includes All Meals and Breaks – Does NOT Include Printed Syllabus

	Pre-Registration Deadline 9/11/16	After 9/11/16 and On-Site Registration	
OAPA Member	\$400	\$400	\$ _____
Non-member	\$575	\$675	_____
OAPA Student Member	\$200	\$200	_____
Student Non-member	\$225	\$225	_____

Daily Rates:

Friday, September 16 OR Saturday, September 17 Specify Day _____

OAPA Member	\$160	\$160	\$ _____
Non-member	\$260	\$260	_____
OAPA Student Member	\$100	\$100	_____
Student Non-member	\$125	\$125	_____

Sunday, September 18

OAPA Member	\$ 80	\$ 80	\$ _____
Non-member	\$180	\$180	_____
OAPA Student Member	\$ 0	\$ 0	_____
Student Non-member	\$ 10	\$ 10	_____

Printed Syllabus \$ 10 \$ _____

Guest - Friday Dinner and CME \$ 50 _____

TOTAL: \$ _____

YES, I will attend the Friday Dinner and CME _____

This is this FIRST OAPA conference I have attended. YES____ NO____

REGISTRATION PAYMENT

Make Checks Payable to OAPA

Visa or MasterCard ONLY:

Credit Card # _____ Exp. Date _____

Signature _____

Mail Registration Form and Payment to:

OAPA

4700 Reed Road, Suite N

Columbus, OH 43220

You may also register with a credit card on line at the OAPA website:

www.ohiopa.com

or fax with a credit card to 614/824-2103

Questions? Call OAPA at 800/292-4997

Full refund (minus \$25 processing fee) available upon written request, postmarked on or before September 11, 2016. ***No refunds after SEPTEMBER 11, 2016. No refunds for no shows.***

HOTEL INFORMATION

Hotel Room Rates: \$122.00

Mention OAPA when you contact the Marriott Columbus Northwest to make your room reservations – 888-801-7133. Hotel Registration Deadline is **August 25, 2016.**