

NY15

PODIATRIC CLINICAL CONFERENCE & EXHIBITION

JANUARY 23–25, 2015
NEW YORK MARRIOTT MARQUIS

GENERAL INFORMATION

CECH APPROVAL

The Foundation for Podiatric Medicine is approved by the Council on Podiatric Medical Education as a sponsor of continuing education in podiatric medicine. Approval of 21.25 continuing medical education contact hours is pending for general lectures. Workshop participants earn one continuing medical education contact hour per hour of instruction.

CECH SIGN-IN/SCANNING POLICY

Each attendee will receive an electronic badge to be scanned at the end of each half-day session to determine exact times of attendance and to assign continuing medical education contact hours accordingly. Total contact hours will be calculated using information collected from the electronic scanners. General lecture attendees will be scanned twice each day to verify attendance. Workshop tickets will be collected at the beginning of each session. Signature is required to receive the certificate of attendance.

MEALS

Breakfast and lunch are designed to be free time for attendees to visit with exhibitors or attend ancillary sessions. Educational and non/educational sponsored lunches may be available each day for pre-registration. Please check www.nyspma.org/ny15 for updates and to register online.

SLEEPING ROOMS

\$254.00 s/d + tax

A block of sleeping rooms has been reserved at the New York Marriott Marquis for NY15 attendees. Rooms may be reserved until Friday, December 19, 2014 or until block is filled.

Reserve online: www.nyspma.org/ny15

Reserve by phone: 877-303-0104

Please mention NY Podiatric Clinical Conference and Exhibition 2015 to receive our special conference rate.

NON-DPM GUESTS

Each registrant may bring a maximum of two (2) non-DPM guests, including spouses or family members.

CONFERENCE REGISTRATION

Cancellation Policy - Registration fees are refundable, minus a \$79.00 administrative fee, when requested in writing on or before Friday, December 19, 2014. Registration fees are not refundable after this date. Residents MUST provide Proof of Residency to qualify for reduced rates. Students must bring ID. Please contact ExpoTrac at 1-877-415-FEET (3338) with registration questions.

Those registrants not wishing to register on-line may fax or mail their form and payment to ExpoTrac. Mailed forms may take up to two weeks to process. Please forward all registration forms directly to ExpoTrac, not NYSPMA.

CONFERENCE CONFIRMATION

Confirmation letters will be e-mailed following receipt of your registration. Workshop tickets and other registration materials will be mailed to pre-registered attendees beginning January 10, 2015. NYSPMA members who have not paid their third quarter membership dues will have their conference materials held until payment has been received.

ON SITE REGISTRATIONS

Conference pre-registration will close on Thursday, January 15, 2015 at 5:00pm EST. No on-line registration or faxed registrations will be accepted after that date.

NONDISCRIMINATION

No person shall be denied registration or participation in any continuing education program provided by this Foundation for reasons of race, religion, sex, national origin or physical ability.

CONTACT

Sarah Hansen
646-386-2528
shansen@nyspma.org

ACKNOWLEDGEMENTS

The Foundation for Podiatric Medicine would like to thank the following people and organizations for their contributions to the 2015 Clinical Conference:

American Society of Podiatric Medical Assistants
Andrew J. Oster Design and Photography
Office & Professional Employees International Union

NY15 REGISTRATION FORM

REGISTRANT INFORMATION

Title (Dr., Mr., Ms.) _____ First Name _____ MI _____ Last Name _____
Practice/Employer Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Special Accessibility Needs _____
Email Address _____ May we share your email with exhibitors? ☐ Yes ☐ No

NON-DPM GUESTS

1. _____ 2. _____

MEMBERSHIP STATUS

☐ NYSPMA Member ☐ APMA Member ☐ CPMA Member ☐ Not a Member ☐ Membership ID# _____
Degree ☐ DPM ☐ MD ☐ Resident DPM ☐ DPM Student ☐ PMAC ☐ Other _____
(Residents and Students must fax proof of residency/student status or provide it at conference check-in.)

DPM LICENCE NUMBERS

NY License# _____ State _____ License# _____ State _____ License# _____

REGISTRATION OPTIONS

	Early Rate Until 11/14	Regular Rate 11/15–12/19	On-site Rate After 12/19	PAYMENT INFORMATION
DPM Lectures and Exhibit Hall				Total Due \$ _____ <input type="radio"/> Check <input type="radio"/> Visa <input type="radio"/> MC <input type="radio"/> AMEX Credit Card Number _____ Exp. _____ CVV Code _____ Signature _____ Payment must be submitted with registration for the registration to be processed. An administrative fee of \$79.00 will be imposed for any cancellation.
<input type="radio"/> NYSPMA Member	\$0.00	\$0.00	\$99.00	
<input type="radio"/> APMA/CPMA Member	\$299.00	\$399.00	\$499.00	
<input type="radio"/> Non-Member	\$699.00	\$799.00	\$899.00	
<input type="radio"/> DPM Resident/Student	\$0.00	\$0.00	\$49.00	
EXHIBIT HALL ONLY				
<input type="radio"/> NYSPMA/APMA/CPMA Member	\$0.00	\$0.00	\$99.00	
<input type="radio"/> Non-Member	\$99.00	\$149.00	\$199.00	

PRE-CONFERENCE SEMINARS

		NYSPMA MEMBER	APMA/CPMA MEMBER	NON MEMBER	RESIDENT/ STUDENT
<input type="radio"/> PC1–NGS/Medicare	1/22 5:30pm–6:30pm	\$0.00	\$0.00	\$99.00	\$0.00
<input type="radio"/> PC2–PICA Seminar/Cocktail Hour	1/22 6:30pm–9:30pm	\$0.00	\$0.00	\$99.00	\$0.00

WORKSHOPS

		NYSPMA MEMBER	APMA/CPMA MEMBER	NON MEMBER
<input type="radio"/> 1–Arthrodesis (Cadaver Lab)	1/23 8am–Noon	\$99.00	\$149.00	\$199.00
<input type="radio"/> 2–Sawbones Workshop	1/23 8am–Noon	\$49.00	\$79.00	\$99.00
<input type="radio"/> 3–Biopsy Techniques	1/23 2pm–5pm	\$29.00	\$49.00	\$79.00
<input type="radio"/> 4–Calcaneal Fractures (Sawbone)	1/24 8am–Noon	\$49.00	\$79.00	\$99.00
<input type="radio"/> 5–OSHA Training & Certification	1/24 9am–Noon	\$29.00	\$29.00	\$29.00
<input type="radio"/> 6–HIPAA Training & Certification	1/24 1pm–4pm	\$29.00	\$29.00	\$29.00
<input type="radio"/> 7–Sawbones Workshop	1/24 1pm–5pm	\$49.00	\$79.00	\$99.00
<input type="radio"/> 8–Musculoskeletal Ultrasound—1	1/25 8am–10am	\$129.00	\$149.00	\$229.00
<input type="radio"/> 9–Residency Forum & Case Studies	1/25 9:30am–1:30pm	\$0.00	\$0.00	\$0.00
<input type="radio"/> 10–Mucsuloskeletal Ultrasound—2	1/25 10am–Noon	\$129.00	\$149.00	\$229.00
<input type="radio"/> 11–Musculoskeletal Ultrasound—3	1/25 1pm–3pm	\$129.00	\$149.00	\$229.00

NY15 CODINGLINE FOOT AND ANKLE SEMINAR REGISTRATION

REGISTRANT INFORMATION

Title (Dr., Mr., Ms.) _____ First Name _____ MI _____ Last Name _____
Practice/Employer Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Special Accessibility Needs _____
Email Address _____ May we share your email with exhibitors? ☐ Yes ☐ No
Discount Code (Codingline Gold Level Subscribers Only) _____

<input type="radio"/> Doctor (or initial staff member)	\$279.00
<input type="radio"/> Non-Physician Staff	\$149.00
<input type="radio"/> DPM Resident/Student	\$49.00

PAYMENT INFORMATION
Total Due \$ _____
☐ Check ☐ Visa ☐ MC ☐ AMEX
Card Number _____
Expiration Date _____ CVV Code _____
Signature _____

Payment must be submitted with registration for the registration to be processed. An administrative fee of \$79.00 will be imposed for any cancellation.

REGISTER ONLINE
www.nyspma.org/ny15

FAX
401-765-6677

MAIL
Mail form and payment
ExpoTrac
Clinical Conference
PO Box 1280
Woonsocket, RI 02895

NY15 PODIATRIC ASSISTANT’S PROGRAM REGISTRATION

REGISTRANT INFORMATION

Title (Dr., Mr., Ms.) _____ First Name _____ MI _____ Last Name _____
Practice/Employer Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Special Accessibility Needs _____
Email Address _____ May we share your email with exhibitors? ☐ Yes ☐ No

	Early Rate Until 11/14	Regular Rate 11/15–12/19	On-Site Rate After 12/19
<input type="radio"/> Friday Clinical Track/Saturday Workshops	\$99.00	\$149.00	\$199.00
<input type="radio"/> Friday Administrative Track/Saturday Workshops	\$99.00	\$149.00	\$199.00

NY15

THANK YOU TO OUR 2015 CLINICAL CONFERENCE EXHIBITORS (as of September 1, 2014)

20/20 Imaging	Microwize Technology, Inc.
Aerolase	Midmark Corporation
Aetrex Worldwide	Miltex, an Integra Company
AliMed Inc.	MiMedix
AllPro Imaging	Moberg Pharma North America – Kerasal
American Board of Multiple Specialties in Podiatry (ABMSP)	MTI
American Board of Podiatric Medicine (ABPM)	New York College of Podiatric Medicine
Amerx Health Care Corporation	Officite
Applied Biologics, LLC	Ortho-Rite, Inc.
Bako Integrated Physician Solutions	OsteoMed, LLC
BME, Inc.	PAL Health Technologies
BNA Burz North America	Pedalign
ComfortFit Orthotic Laboratories	Pedicis Research, LLC
Compulink Business Systems, Inc.	PediFix
CryoProbe	Performance Health / Biofreeze, Pedigenix & Thera-Band & Cramer
DARCO International, Inc.	Physician Claim
Delta Surgical Instruments	Physician Web Pages
Derma Sciences, Inc.	Podiatry Insurance Company of America (PICA)
Dia-Foot	Podiatry Today
DoctorsInternet.com	Powerstep
Dr. Comfort	Propét USA
Dr. Jill's Foot Pads	Redi-thotics
Dr.'s Remedy Enriched Nail Polish	SafeStep
East River Medical Imaging	Sarapin—High Chemical Company
European Footcare Supply	Smith & Nephew (Biotherapeutics)
FAPA Fraternal Corp.	SOLO Laboratories, Inc.
Fiber Orthotics	SOLS Systems
Footmaxx	Stratus Pharmaceuticals Inc.
Fresenius Vascular Care	Stryker Foot and Ankle
Gill Podiatry Supply Co.	STS Company
Gordon Laboratories	Superfeet Worldwide Inc.
gSource, LLC	SureFit
Henry Schein Foot & Ankle	TEI Medical Inc.
Hersco Ortho Labs	Tekscan, Inc.
ICS Software Ltd - The Sammy Systems	Televere Systems
Integra	The New York Times
Jan L Vacuums/Drills/Burs/Instruments/Orthotics	The Orthotic Group
Juzo	The Tetra Corporation
KCI	TLD Systems
Keryflex Nail Restoration System	Topricin Foot Therapy Cream
Koven Technology, Inc.	Total Vein Systems
Krasity's Medical & Surgical Supply	TRAKnet PM
Langer Biomechanics	Universal Imaging, Inc.
Light Age Inc.	Upsher-Smith Laboratories, Inc.
Maxibrace Orthopedic Supplies	Valeant Pharmaceuticals USA
McClain Laboratories, LLC	Vilex, Inc.
Medical IT Systems	X-Cel X-Ray Corporation
MediTouch EHR/HealthFusion	Zimmer MedzinSystems
Metasurg	

For information about available exhibit space and sponsorship opportunities please contact Sarah Hansen at shansen@nyspma.org or 646-386-2528.