1st American Scientific Auriculotherapy Symposium

Organized by the Orthopedic Anesthesia Pain and Rehabilitation Society (OAPRS)

February 3-4, 2017

Marriott Marquis
New York, NY

Course Directors
Professor David Alimi
Professor Jacques E. Chelly

REGISTER NOW
COURSE DESCRIPTION
This specific combination of lectures and workshops entails a sequence of up-to-date educational tools used to acquire skills the auriculotherapy practice demands.

COURSE GOALS
• Introduction to Scientific Auriculotherapy
• Review the techniques available to stimulate Auriculotherapy points
• Review of protocols available for Orthopedic Surgery, Pain and Rehabilitation
• Introduction to Battlefield Acupuncture

COURSE LEARNING OBJECTIVES
Upon conclusion of this program, participants should be able to:
• Identify the rational supporting Scientific Auriculotherapy
• Apply the Principles of Battlefield Acupuncture
• Perform most techniques available to stimulate Auricular points
• Recognize the role of Scientific Acupuncture in the management of patients undergoing Orthopedic Surgery and Rehabilitation
• Identify indications of Battlefield Acupuncture

INTENDED AUDIENCE
This course is intended for practicing Anesthesiologists, Certified Registered Anesthesiology Residents and Fellows.

GRANTS AND EXHIBITS
At the time of this printing, a complete listing of commercial supporters (financial or in-kind) was not available. Appropriate acknowledgment will be given to all supporters at the time of the meeting.

Exhibits will be available for viewing at all scheduled breaks.

CREDIT
This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of the American Academy of Medical Acupuncture and OAPRS. American Academy of Medical Acupuncture is accredited by the ACCME to provide continuing medical education for physicians. American Academy of Medical Acupuncture designates this live educational activity for a maximum of ___ AMA PRA Category 1 Credit(s)™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

REGISTRATION
The registration fee includes tuition, continental breakfasts, lunch and break refreshments. Although it is not OAPRS policy to limit the number of registrants for a course, conference room facilities may necessitate closing of enrollment; therefore, early registration is advised. A letter of confirmation will be sent upon receipt of payment with completed online registration.

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<tr>
<th>Physicians/Scientists:</th>
<th>$350</th>
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<td>Residents, Fellows, PAs, Nurses, Allied Health and Retirees:</td>
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<td>Free for military</td>
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CANCELLATION POLICY
If you cancel, your registration fee, less a $75 administrative fee, will be refunded when written notification is received by OAPRS on or before 1/1/17 at OAPRS.ORG@gmail.com. No refunds after 1/1/17. Canceled registrations are non-transferable. OAPRS reserves the right to cancel or postpone any course due to unforeseen circumstances. In the unlikely event we must cancel, OAPRS will refund the registration fee, but is not responsible for any related costs, charges, or expenses to participants, including fees assessed by airline/travel/lodging agencies. Additional information, e-mail: oaprs.org@gmail.com
LODGING
The Marriott Marquis is located at the center of the action, in the heart of Times Square. With its signature architectural design, iconic reputation and contemporary product, the hotel makes for an unrivaled New York City experience in the most desirable location in Times Square. Whether one is visiting for business, leisure or to attend an event, the Hotel is a unique destination in itself — for sightseeing, shopping and diverse dining; all of which can also be found just outside its front doors.

ADVANCE PURCHASE RATE:
Single $179*
Double $179*

LOCATION:
New York Marriott Marquis
1535 Broadway
(between 45 & 46th Streets)
New York, NY 10036

DETAILS:
*Rates are available until January 11, 2017. By providing the group name (OAPRS), individuals will be able to make a reservation by calling 1-877-303-0104. Reservations made after the cut-off date will be based on availability at then current rates. Current tax rates are 14.75% and $3.50 per room (tax and occupancy rates are subject to change).
FRIDAY 2/3

07:15 – 08:15  BREAKFAST
08:15 – 08:30  Welcome and introduction: J.E. CHELLY and D. ALIMI
08:30 – 09:30  Neurophysiological basis of Scientific Auriculotherapy: D. ALIMI
09:30 – 10:30  Detection and Stimulation of ear points: H. GRESSER
10:30 – 10:45  BREAK
10:45 – 11:45  Role of Battle Field Acupuncture in DVPRS and PASTOR, C. Trip BUCKEMAIER III
11:45 – 12:15  Round table discussion
12:15 – 14:00  LUNCH
14:00 – 15:00  Auriculotherapy and Rehabilitation: A. SPASSOVA
15:00 – 16:00  Auriculotherapy and Sleep disorders: G. STANTON
16:00 – 16:15  BREAK
16:15 – 17:15  Auriculotherapy and Cardiac function: S. MANUEL
17:15 – 18:00  Round table general discussion

SATURDAY 2/4

07:15 – 08:15  BREAKFAST
10:15 – 10:30  BREAK
10:30 – 12:30  WORKSHOPS:
   •  Point localization: D. ALIMI, A. SPASSOVA
   •  Point detection: H. GRESSER, S. MANUEL
   •  Laser and others : G. STANTON
   •  Battle field Acupuncture: C. ‘Trip” BUCKEMAIER III

FACULTY

David Alimi, MD
Chester ‘Trip’ Buckenmaier III, MD
Jacques E. Chelly, MD, PhD, MBA
Hubert Gresser, MD
Sophie Manuel, MD
Antoinette Spassova, MD
Gary Stanton, MD
Conference Registration Form

Prefix: __Mr. __Mrs. __Dr. __Ms. __Other, please indicate: _________

First Name: ____________________________  This is how your name will appear on your name badge

Last Name: ____________________________

Suffix (Jr., Sr., etc.): ______

Company/Institutional Affiliation: _________________________

Specialty: _________________________

E-mail address: _________________________

Degree: __MD __DO __Resident/Fellow __PhD __MPH __RN

__Other, please indicate: _________

Address: ______________________________________________________________

City: _________________  State: _______  ZIP: ______________________

Contact Telephone ( ) _________________________

Fax ( ) __________________________________________

Registration Fees
Total Registration fee enclosed $____________________________

PAYMENT MUST ACCOMPANY REGISTRATION.

Method of Payment
The following methods of payment are acceptable for the registration fee:
Checks. Make payable to: OAPRS

NO REGISTRATION WILL BE ACCEPTED WITHOUT PAYMENT.

Mail payment, accompanied by the registration form to:

OAPRS
631 Pitcairn Place
Pittsburgh, PA  15232