

RICHARD LENDE WINTER NEUROSURGERY CONFERENCE

Jointly Sponsored by the AANS

REGISTRATION FORM

January 27th – February 1st, 2012

Lende Conference: *Registration fee includes morning and afternoon meeting sessions beginning Saturday January 28th - Wednesday February 1st, 2012, five breakfasts (not transferable), four lunches, Opening and Closing Receptions.

\$550.00 per physician \$ _____

\$250.00 per Nurse, Physician Assistant or Nurse Practitioner \$ _____

\$150.00 per Resident or Fellow \$ _____

SOCIAL ACTIVITIES:

BREAKFAST:

ATTENDEE @ N/C

SPOUSES/GUESTS @ \$20.00 ea.

7:00-8:00 am

Certificate will be given to use in Restaurant

Saturday,	Jan 28 th	# _____	\$ <u>N/C</u>	# _____	\$ _____
Sunday,	Jan 29 th	# _____	\$ <u>N/C</u>	# _____	\$ _____
Monday,	Jan 30 th	# _____	\$ <u>N/C</u>	# _____	\$ _____
Tuesday,	Jan 31 st	# _____	\$ <u>N/C</u>	# _____	\$ _____
Wednesday,	Feb 1 st	# _____	\$ <u>N/C</u>	# _____	\$ _____

TOTAL: \$ _____

FRIDAY, January 27, 2012

7:00 – 8:30 pm Lende Opening Reception # attending _____ \$ N/C

SATURDAY, January 28, 2012

12:30 – 2:30 pm	Family Ski Lunch in Golden Cliff	# attending _____	\$ N/C
6:30 – 7:30 pm	Family Special Presentation	# attending _____	\$ N/C
7:30 – 9:00 pm	Family Buffet Dinner in Golden Cliff		
	@ \$35.00 per Adult	# attending _____	\$ _____
	@ \$15.00 per Child	# attending _____	\$ _____

SUNDAY, January 29, 2012

9:00 am Physician's Group Photo
12:30 – 2:30 pm Family Ski Lunch in Golden Cliff # attending _____ \$ N/C

MONDAY, January 30, 2012

12:30 – 2:30 pm Family Ski Lunch in Golden Cliff # attending _____ \$ N/C

TUESDAY, January 31, 2012

12:30 – 2:30 pm	Family Ski Lunch in Golden Cliff	# attending _____	\$ N/C
6:30 – 8:00 pm	Closing Family Reception		
	Adult	# attending _____	\$ N/C
	Child	# attending _____	\$ N/C

WEDNESDAY, February 1, 2012

7:30 am 1st Tram Adventure
@ \$25.00 person # attending _____ \$ _____

TOTAL AMOUNT ENCLOSED: \$ _____

Please make checks payable to: **LENDE NEUROSURGERY CONFERENCE** or **PAY ON LINE** at lendeconference.com

Mail check with this form TO:

Lanette Dunbar, Meeting Coordinator
Department of Neurosurgery
175 North Medical Drive East
Salt Lake City, Utah 84132-2303

Please return your registration form as soon as possible. They are accepted in the order they are received.

(PLEASE TYPE OR PRINT CLEARLY)

NAME: _____

ADDRESS: _____

_____ ZIP: _____

OFFICE #: _____ FAX #: _____ HOME #: _____

E-MAIL ADDRESS: _____

CONTACT PERSON IN OFFICE: _____

Spouse/Partner/Guest's Name: _____

(only if attending)

Children's Name and Age: _____

(only if attending)

IF SUBMITTING A TITLE/ABSTRACT

Please note: Commercial bias in any CME activity is an important and timely issue. Presentations must give a balanced view of therapeutic options. Use of generic names will contribute to this impartiality. If the CME educational material or content includes trade names, where available trade names from several companies should be used, not just trade names from a single company.

In order for your abstract to be considered for review, please return your completed Disclosure of Financial Relationships Form with your abstract submission.

- 1) Type a **BRIEF** abstract on the attached **ABSTRACT FORM** which includes, TITLE, SPEAKER, AUTHORS and ABSTRACT
It will be copied, **AS IS**, and made into booklets for your packets,
- 2) **Submit BEFORE January 10, 2012!**
- 3) If you do not list your special audio/visual needs prior to the meeting, we will be unable to accommodate you at the time of the meeting.
- 4) Talks are 15 minutes in length followed by a 5-10-minute discussion period.

AUDIO VISUAL REQUEST

Standard Equipment in Rooms

LCD Projector for Laptop Computer
Laser pointer

(ANY EQUIPMENT IN ADDITION TO THE ABOVE WILL BE AT YOUR OWN COST)

38th ANNUAL
RICHARD LENDE WINTER NEUROSURGERY CONFERENCE
Jointly Sponsored by the AANS

January 27th – February 1st, 2012
Cliff Lodge Conference Center
Snowbird, Utah

LENDE SNOWBIRD MEETING INTENDED AUDIENCE

This meeting is open to Neurosciences ONLY. It provides a forum for free exchange of ideas and presentation of innovations in neurological surgery and allied fields. This meeting of research and clinical applications in a relaxed setting has endured the test of time as a popular tribute to the memory of Dr. Richard Lende. Registration begins Friday January 27th between 7:00 – 8:30 pm at the Cliff Lodge, Snowbird, Utah.

REGISTRATION FORM

Please visit our website at lendeconference.com. Abstracts are due by January 15, 2012. Registrations are accepted in the order they are received. You may register on line and pay by credit card, at lendeconference.com

GENERAL INFORMATION

The Lende Conference at Snowbird will begin with registration on Friday, January 27th, between 7:00 pm –8:30 pm, with **the actual didactic sessions beginning on Saturday morning, January 28th, 2012.** It is the intention of the planners to keep this meeting an open forum. All participants are encouraged to submit titles for presentation.

REGISTRATION DESK FOR LENDE MEETING AT SNOWBIRD

Lende registration desk will be placed outside Ballroom I of the Cliff Lodge, Snowbird, Utah, Friday, January 27th, 2012 from 7:00 pm – 8:30 pm. On Saturday, January 28th, 2012 you can register outside Ballroom I beginning at 7:00 am.

LODGING FOR SNOWBIRD LENDE MEETING

Lodging: Contact Snowbird Direct, Call 1-800-453-3000 or FAX 1-801-742-3300. When calling or faxing, please indicate that you are with the Richard Lende Winter Neurosurgery Conference, and you will receive our DISCOUNT RATE. *CALL EARLY!!! A block of rooms will be held until December 15, 2011, it is on an as-available basis.

CLIFF LODGE ROOM RATES

Prices only available until December 15, 2011

HOTEL CHECK IN/OUT

Check in: 4:00 pm Check Out: 11:00 am

Cliff Lodge:

Standard Bedroom (1-4 persons).....\$ 289.00 plus tax and \$20.00 Resort Fee per Night.

Four night minimum stay during the months of January, February, and March if a Friday or Saturday is included.

INFORMATION FOR YOUR OFFICE STAFF

While you are staying at Snowbird, your office staff can reach you at 801-742-2222 and at the following fax numbers:

Cliff Lodge.....	801-742-3204	The Inn.....	801-742-2211
Lodge at Snowbird...	801-742-3311	Iron Blossom.....	801-742-3445

CANCELLATIONS

Rooms released 15-29 days prior to arrival will be subject to a cancellation fee of two nights lodging deposit. Rooms released within 14 days prior to arrival will forfeit full deposit. Early departures are considered a cancellation.

TRIP INSURANCE

Snowbird offers trip insurance for cancellations or interruptions. It pays for penalties assessed due to unforeseen circumstances or death, injury or illness.

CHILDREN'S CENTER

If you need to make arrangements for a babysitter, ski school, etc.; please call the Children's Center direct, (801-521-6040, ext. 5026) Infant/child care also available. It is best to call early!

FACULTY LIST

Lende Organizing/Planning Committee consists of Randy Jensen, M.D., Douglas Brockmeyer, M.D., Joel MacDonald, M.D. and William Couldwell, M.D.



ACCREDITATION/DESIGNATION

This live activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of the AANS and the Richard Lende Winter Neurosurgery Conference. The AANS is accredited by the ACCME to provide continuing medical education for physicians.

The AANS designates this live activity for a maximum of 22 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

DISCLOSURES

Before the program, all faculty members will disclose the existence of any financial interest and/or the relationship they or their significant have with the manufacturer(s) of any commercial product(s) to be discussed during their presentation. The AANS and the Richard Lende Winter Neurosurgery Conference control the content and production of this CME activity and attempt to ensure the presentation of balanced, objective information.

ABSTRACTS

Abstracts need to be received no later than **January 15, 2012**. Please type a brief abstract on the enclosed

ABSTRACT FORM, which includes TITLE, SPEAKER, AUTHORS and ABSTRACT. It will be copied, AS IS for our booklet.

REFUND POLICY

There will be a \$50 administrative fee for any cancellations prior to January 15, 2012 , NO REFUNDS after this date.

FUTURE MEETING DATE

February 1st, 2013 – February 5, 2013

*****PLEASE RETURN YOUR REGISTRATION FORM AS SOON AS POSSIBLE*****

METHOD/FORMAT OF INSTRUCTION:

This will be a live presentation, with interactive discussion, and abstract presentations.

LEARNING OBJECTIVES

Upon completion of this live activity, participants should be able to:

- 1) Describe current and new surgical techniques and options pertaining to spinal surgery.
- 2) Describe surgical treatments and outcomes related to vascular, tumor, and movement disorders.
- 3) Recognize the contributions and importance of the pediatric neurosurgeon.

<u>SOCIAL ACTIVITIES</u>			<u>TENATIVE SCIENTIFIC PROGRAM</u>	
FRIDAY Jan 27 th	7:00 – 8:30 pm	Opening Cocktail Party, Ballroom I		
SATURDAY Jan 28 th	12:30 – 2:00 pm 6:30 pm 7:30 pm	Lende Participants Family Ski Lunch Peter Heilbrun Lecturership Family Buffet Dinner (Tickets Required)	SATURDAY	8:00 - 10:30 am Spine 4:00 - 6:30 pm Spine
SUNDAY Jan 29 th	9:00 am 12:30 – 2:00 pm	Physician’s Group Photo Lende Participants Family Ski Lunch	SUNDAY	8:00 - 10:30 am Spine 4:00 - 6:30 pm Spine
MONDAY Jan 30 th	12:30 – 2:00 pm	Lende Participants Family Ski Lunch	MONDAY	8:00 – 10:30 am Pediatric 4:00 – 6:30 pm Vascular
TUESDAY Jan 31 st	12:30 – 2:00 pm 6:30 – 8:00 pm	Lende Participants Family Ski Lunch Closing Family Reception	TUESDAY	8:00 – 10:30 am Stereotactic 4:00 – 6:30 pm Skull Base
WEDNESDAY Feb 1 st	7:30 am	First Tram Adventure (prior to meeting)	WEDNESDAY	9:00 – 11:00 am Tumor/Research

MEETING ABSTRACT FORM

RICHARD LENDE WINTER NEUROSURGERY CONFERENCE
Jointly Sponsored by the American Association of Neurological Surgeons

January 27 – February 1, 2012
Snowbird, Utah

Please submit abstract to: Randy Jensen, M.D., Ph.D.
175 North Medical Drive East, Salt Lake City, Utah 84132-2303

Based on attendee feedback for our 2011 meeting, many attendees requested more information pertaining to spinal nonsurgical and surgical procedures and brain tumor treatment plans and research. We are developing the agenda to meet the learning needs of our attendees. We would like to make a special request to you for abstracts on these topics.

In order for your abstract to be considered for review, please return your completed Disclosure of Financial Relationships Form with your abstract submission.

No later than January 10, 2012

PLEASE REMEMBER TO MAIL DISCLOSURE STATEMENT TOO!

TITLE:

OBJECTIVE:

SPEAKER:

CITY/STATE:

AUTHORS:

ABSTRACT:



AANS Disclosure of Financial Relationships

Name Activity/Date Richard Lende Neurosurgery Conference

ACCME's Updated Standards for Commercial Support requires that anyone in a position to control the content of the education activity has disclosed all financial relationships with any commercial interest (see Glossary of Terms below).

If you indicate on this form that you may have a conflict of interest, you are asked to excuse yourself from any portion of the educational activity where a commercial bias might exist. Please indicate your financial relationships by checking the appropriate box below: (PLEASE NOTE: This disclosure is valid for 12 months...please update as needed). This information will be made available to participants prior to the beginning of any CME activity of which you are a part.

[] I do not have any financial relationships with any commercial interests. (Stop and sign below)

[] I will disclose below the receipt of anything of value from a commercial entity or other party that directly affects the content of any educational activity. Failure to disclose will disqualify me from any discussions where a potential bias could exist. For the purpose of this disclosure, ACCME considers the financial relationships of your spouse/partner/co-author to be included as yours (Please continue and sign below)

- List the names of proprietary entities producing health care goods or services, with the exemption of non-profit or government organizations and non-health care related companies with which you or your spouse/partner or co-authors have, or have had, a financial relationship within the past 12 months. For the purpose of this disclosure, ACCME considers the financial relationships of your spouse/partner or co-authors to be included as yours. Clarify what you or your spouse/partner/co-authors received (ex: salary, honorarium, stock, etc) specify the company name next to your role with the company below.

Company Name

University Grants/Research Support _____

Industry Grant Support _____

Consultant Fee _____

Stock or Shareholder _____

Honorarium _____

Speaker's Bureau _____

Employee [any industry] _____

Fiduciary Position [of any organization outside the AANS] _____

Other Financial or Material Support _____

Glossary of Terms

Commercial Interest

The ACCME defines a "commercial interest" as any proprietary entity producing health care goods or services consumed by, or used on, patients.

Conflict of Interest

Circumstances create a conflict of interest when an individual has an opportunity to affect CME content about products or services of a commercial interest with which he/she has a financial relationship.

Financial relationships

The ACCME defines "financial relationships" as those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (i.e., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received and/or expected. ACCME considers relationships of the person involved in the CME activity to include financial relationships of a spouse/partner.

Relevant financial relationships

The ACCME defines "relevant financial relationships" as financial relationships in any amount occurring within the past 12 months that create a conflict of interest. ACCME focuses on financial relationships with commercial interests in the 12-month period preceding the time that the individual is being asked to assume a role controlling content of the CME activity. ACCME has not set a minimal dollar amount for relationships to be significant. Inherent in any amount is the incentive to maintain or increase the value of the relationship.

Signature

Date

**Failure or refusal to disclose or the inability to satisfactorily resolve the identified conflict will result in the withdrawal of the invitation to participate.

(Please return this form to Lanette Dunbar Fax 801-581-4385)