# "Excellence in Research"

# CONFERENCE 2011

A multi-disciplinary low vision rehabilitation and research conference

September 21-24, 2011
Hilton St. Louis at the Ballpark
St. Louis, Missouri

www.envisionconference.org





### Welcome to

# **Envision Conference 2011**

### **About the Envision Conference**

The Envision Conference began in 2006 as the first multidisciplinary low vision rehabilitation and research conference of its kind. For the first time, low vision professionals from multiple fields and disciplines joined to share their ideas, research and knowledge about the issues that face low vision individuals every day.

Every year, hundreds of professionals join us in our mission to improve the quality of low vision care through excellence in professional collaboration, advocacy, research and education. Participants include occupational therapists, optometrists, ophthalmologists, low vision rehabilitation therapists, teachers of the visually impaired, nurses, vision researchers and other low vision rehabilitation professionals. Additionally, the Envision Conference benefits special education teachers, community agency personnel, government policymakers, rehabilitation engineers, and assistive technology practitioners and suppliers.

### **Benefits of Attending**

- Increase your knowledge and skill set for career enhancement with practical and up-to-date educational sessions.
- · Earn valuable continuing education credits.
- Access the latest low vision products and services in the exhibit hall.
- Network with colleagues and industry representatives.
- Grow personally and professionally.



### **Meet Your Host**

Envision is a non-profit organization based in Wichita, Kansas, dedicated to serving individuals who are blind or low vision through employment, vision rehabilitation and education.

Learn more at www.envisionus.com.







# **Awards**

### "Excellence in Advocacy" Award Winner

**American Optometric Association Vision Rehabilitation Section** 

Nominated by Envision Conference 2010 attendees, the "Excellence in Advocacy" Award will be presented to the American Optometric Association Vision Rehabilitation Section (AOA VRS). The mission of the AOA VRS is to advance the profession and serve optometrists in meeting the low vision rehabilitation needs of the public.

According to one nomination, "The AOA VRS continues to lead the way in advocacy, policy and clinical care for individuals of all ages with visual impairment through major contributions made to our field, especially in the last several decades. ... Over the years, countless members of the AOA

VRS have served as members of groups/committees/advisory boards critical to all individuals with visual impairment. ... VRS members have provided countless hours of trans-disciplinary continuing education, resource material, testimony and legislative evidence promoting the interdisciplinary approach to rehabilitation. The AOA VRS continues to advocate at the national level for the involvement of individuals from diverse backgrounds in the vision rehabilitation field – from both traditional and more recently recognized team service providers – and continues to support collaborative ideals as the field has evolved."

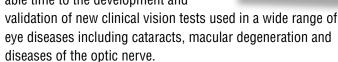
### **Envision Award in Low Vision Research**

Gary S. Rubin, PhD

Gary S. Rubin, PhD, will be awarded the 2011 **Envision Award in Low Vision Research**. The award is presented each year to a mid-career senior investigator in low vision and vision rehabilitation research. Selection is based on research by a scientist having six or more years post-terminal or professional degree research.

Dr. Rubin is a Gold Fellow of the Association for Research in Vision and Ophthalmology and an Honorary Fellow of the College of Optometrists in the UK. In addition to publishing more than 100 scientific papers and book chapters, some of his noted research includes reading and face recognition

in people with impaired vision, a study sponsored by the National Eye Institute. He has also researched the effect of vision impairment on older people's daily lives, a study sponsored by the National Institute on Aging. Rubin has devoted considerable time to the development and



# Announcing the "Excellence in Research" Award

The Envision "Excellence in Research" Award will be presented to the individual, individuals or organization that has demonstrated an outstanding career, program, research outcome or effort in low vision research with national or international impact for people who are blind or low vision.

A nomination sheet is included in your attendee materials, or you can visit **www.envisionconference.org** to submit your nomination. Deadline for nominations is October 7, 2011. The "*Excellence in Research*" Award will be presented at Envision Conference 2012 in St. Louis, Missouri.



# **Schedule Overview**

### Tuesday, September 20

**3-7 pm** Registration Open | Grand Foyer

### Wednesday, September 21

7 am-6 pm Registration Open | Grand Foyer 8-9 am Continental Breakfast | Grand Foyer 9 am-4 pm Pre-conference Workshops |

See Schedule-at-a-Glance

**4-6 pm** Pre-conference Research Roundtable |

Grand Ballroom B

### Thursday, September 22

7 am-6 pm Registration Open | Grand Foyer7-8 am Continental Breakfast | Grand Foyer

8-9:30 am "Excellence in Research"

Plenary Session | Grand Ballroom C, D

9:30-9:45 am Coffee Break | Grand Foyer 9:45 am-5:30 pm Conference Sessions |

See Schedule-at-a-Glance

12-8 pm Exhibit Hall Open | Arch View Ballroom 12-1 pm Regional Lunches | *See Page 22* 

3-3:30 pm Coffee Break in Exhibit Hall | Arch

View Ballroom

5:30-8 pm Welcome Reception in Exhibit Hall |

### Friday, September 23

7 am-6 pm Registration Open | Grand Foyer
7 am-1:15 pm Exhibit Hall Open | Arch View Ballroom
7-8 am Continental Breakfast in Exhibit Hall |

Arch View Ballroom

8 am-5:30 pm Conference Sessions |

See Schedule-at-a-Glance

10:15-10:45 am Coffee Break in Exhibit Hall | Arch View

Ballroom

11:45 am-1:15 pm Buffet Lunch in Exhibit Hall | Arch View

Ballroom

3:15-3:30 pm Coffee Break | Grand Foyer

### Saturday, September 24

**7 am-5 pm** Registration Open | Grand Foyer **7-8 am** Continental Breakfast | Grand Foyer

8 am-5 pm Conference Sessions |

See Schedule-at-a-Glance

See Schedule-al-a-Glance

**10-10:15 am** Coffee Break | Grand Foyer **3:45-4 pm** Coffee Break | Grand Foyer





Schedule-at-a-Glance Envision Conference 2011 Envision Conference 2011 Schedule-at-a-Glance

3:00 PM	Registration Open and Speaker Ready Room Open, 3-7 pm, Grand Foyer								
Wednes	sday, September 21								
7:00 AM	Registration and Speaker Ready Room Open, 7 am-6 pm, Grand Foyer								
7.00 AW			un-o pin, arana royer						
	Continental Breakfast, 8-9 am, Grand Foyer  Grand Ballroom A Grand Ballroom E, F Grand Ballroom B Grand Ballroom G Gateway Ballroom								
0.00 AM		-	W3: Evaluating the		Gateway Ballroom				
9:00 AM	W1: Workshop on Prism Adaptation Therapy for Hemispa- tial Neglect Associated With Brain Injury or Stroke: Kevin Houston, OD; Kia Eldred, OD	<b>W2:</b> Applied Optics of Low Vision Devices: David Lewerenz, OD	W4: Overview and Field Practice Using Accessible GPS Devices to Create Routes and Establish a Position in Space: Part I: Craig Phillips, MS Ed, TVI, COMS						
12:00 PM	Lunch on your own								
1:00 PM	W5: Hands-on Workshop on Rehab of Hemianopia: Rose- mary Armour, OT; Kevin Houston, OD	W6: Diabetes and the Low Vision Rehabilita- tion Team: The Great Escape: Emilie Hagan, ARNP-CNS, MS, CDE;	W7: Adding Low Vision Services in Your Private Practice: Kendall Krug, OD; Lori Grover, OD	ision Services in Field Practice Using Accessible GPS endall Krug, OD; Devices to Create					
		William Park, OD; Karen Kendrick, OTR/L, CLVT		Part II: Craig Phillips,					
4:00 PM	Where and How Should	Karen Kendrick, OTR/L, CLVT  rch Roundtable: Current d Scientists Be Focusing 1		Part II: <i>Craig Phillips, MS Ed, TVI, COMS</i> d Vision Rehabilitation	Research:				
		Karen Kendrick, OTR/L, CLVT  rch Roundtable: Current d Scientists Be Focusing 1		Part II: <i>Craig Phillips, MS Ed, TVI, COMS</i> d Vision Rehabilitation	Research:				
	Where and How Should	Karen Kendrick, OTR/L, CLVT  rch Roundtable: Current d Scientists Be Focusing 1		Part II: <i>Craig Phillips, MS Ed, TVI, COMS</i> d Vision Rehabilitation	Research:				
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Thursda 7:00 AM 8:00 AM 9:30 AM	Where and How Should by, September 22 Continental Breakfast, Registration and Speak "Excellence in Resear Coffee Break, 9:30-9:49 Grand Ballroom A C1: Driving and Visual Impairment: Lori Grover, OD; Kendall Krug, OD	CLVT  rch Roundtable: Current d Scientists Be Focusing 1  7-8 am, Grand Foyer for Ready Room Open, 7 arch" Plenary Session, Grand Ballroom E, F  C2: Bridging the Gap Between Low Vision Optometry and Occupational Therapy to Improve Patient Outcomes: Amy Wheeler,	am-6 pm, Grand Foyer and Ballroom C, D   Ga  Grand Ballroom B  C3: Addressing Health Literacy in Older Adults With Low Vision: Mary Warren, OT	Part II: Craig Phillips, MS Ed, TVI, COMS  d Vision Rehabilitation rand Ballroom B  ary S. Rubin, PhD  Grand Ballroom G  C4: Reading Literacy Intervention for Students With Low Vision: Chrissy Cowan, TVI	Gateway Ballroom R1: Health States of Patients Seeking Outpatient Low Vision Rehabilitation Services Within LOVRNET: Judith Goldstein, OD				
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Thursday, September 22 cont.											
	Grand Ballroom A	Grand Ballroom E, F	Grand Ballroom B	Grand Ballroom G	Gateway Ballroom 4						
2:00 PM			C11: Documentation and Billing of Low Vision Rehabilitation Services: Kendall Krug, OD	C12: Clinical Low Vision Examinations and the IEP Process: What Do Parents Really Think? Kerry Lueders, TVI, COMS, CLVT	·						
3:00 PM	Coffee Break, 3-3:30 p	m, Arch View Ballroom									
3:30 PM	C13: Pediatric Low Vision Rehabilitation: Deena Sandall, OD	C14: Measuring and Evaluating Reading Disability in Glaucoma and Dry Eye: <i>Pradeep</i> Ramulu, MD, MHS, PhD	C15: Trends in Low Vision Education: Learning From the Past, Looking Toward the Future: Amanda Lueck, PhD  C16: Assisting Clients With Employment Preparation: How to Use the CNIB TAPE Measure: Deborah Gold, PhD; Alexander Shaw, PhD		<b>R3:</b> Dual Sensory Impairment: <i>Walter</i> <i>Wittich, PhD</i>						
4:30 PM	4:30 PM  C17: Low Vision 101  - Overview of Low Vision Devices: Ana M. Juricic, OD  C18		C19: My Eyes Work but My Brain Doesn't See: How Do We Unlock the Potential of Young People With Neurological Vision Impairment? Carolyn Palmer, TVI	C20: Adjusting to Driving Cessation: Training Distance Visual Skills and Use of Bioptics for the Role of Active Passenger: Erika Andersen, CLVT							
5:30 PM	Welcome Reception,	5:30-8 pm, Arch View Ba	Ilroom								
Friday S	September 23										
7:00 AM	Continental Breakfast, 7-8 am, Arch View Ballroom										
	Exhibits Open, 7 am-1:15 pm, Arch View Ballroom										
	Registration and Speaker Ready Room Open, 7 am-5:30 pm, Grand Foyer										
	Grand Ballroom A	Grand Ballroom E, F	Grand Ballroom B	Grand Ballroom G	Gateway Ballroom 4						
8:00 AM	C21: RP From A to Z: David Lewerenz, OD  C22: VEP-Guided Retinal Image Translocation: New Frontiers in Low Vision Treatment: Ronald Siwoff, OD		C23: Pills and Potions: It Isn't Magic Tools, Tips and Techniques for Medication Management: Debra Sokol-McKay, CVRT, CLVT, CDE	C24: Preparing Youth for Employment: Karen Wolffe, PhD	R4: Mobility Panel: Shirin Hassan, OD, PhD						
10:15 AM	Coffee Break, 10:15-10:45 am, Arch View Ballroom										
10:45 AM	C25: In the Middle: Helping Visually Impaired Patients With Their Mid- range Needs: David Lewerenz, OD  C26: Vision Reh Boot Camp I: Br Vision Impairme On! Lori Grover,		<b>C27:</b> Pearls From Challenging Geriatric LVR Cases: <i>Donald</i> <i>Fletcher, MD</i>	C28: Plants, Predictions and Possibilities: Kathi Zuniga	R5: Difficulties in Designing Clinical Trials: Finding Solutions: Gary S. Rubin, PhD						

Schedule-at-a-Glance Envision Conference 2011 Envision Conference 2011 Schedule-at-a-Glance

11:45 AM	Buffet Lunch, 11:45 am-1:15 pm, Arch View Ballroom									
	Grand Ballroom A	Gateway Ballroom 4								
1:15 PM	G29: Lenses, Lighting and Lemonade: Getting Back to the Basics: Sandra Fox, OD; Melva Perez- Andrews, OT, CVRT	C30: Vision Rehab Boot Camp II: Taking Vision Impairment to the Mat! Lori Grover, OD	C31: West Virginia Bioptic Driving Program: Overview & Update: Chuck Huss, COMS, CDRS	C32: Employability Skills Training for Adults With Visual Impairments: Karen Wolffe, PhD	R6: Functional Performance and Outcomes: Ronald A. Schuchard, PhD					
3:15 PM	Coffee Break, 3:15-3:3	0 pm, Grand Foyer								
3:30 PM	C33: Depression and Dementia:  Managing Common Comorbidities in Vision Rehabilitation: Patricia Grant; Kara Crumbliss, OD; David Rakofsky, PsyD; Alfred Rosenbloom, Jr., OD  C34: Beyond "Loc to the Left" Unstanding Unilatera Visual Neglect (U" Anatomy, Assessment and Intervention Options With Links to Evidence based Practice: K Gentry, MS, OTRA		C35: Basic Concepts in Vision Rehabilitation: Stages of Visual Acuity vs. Visual Utility: August Colenbrander, MD	C36: Educational Concerns for Students With Albinism: Chrissy Cowan, TVI	R7: Research on Employment: Deborah Gold, PhD					
Saturda 7:00 AM	y, September 24  Continental Breakfast, 7-8 am, Grand Foyer									
7.00 /1111		ter Ready Room Open, 7 a	am-5 pm, Grand Fover							
	Grand Ballroom A	Grand Ballroom E, F	Grand Ballroom B	Grand Ballroom G	Gateway Ballroom					
8:00 AM	C37: OT: Optics for Therapists: James Deremeik, CLVT; Alexis Malkin, OD; Robert Massof, PhD  C38: Visual Changes in Veterans Following Blast Injuries: Kia Eldred, OD; Tonya Mennem, OT, CLVT		c39: Special Considerations for the Oldest Patients in Low Vision Rehabilitation: Jennifer Gendeman, OTD; Lauren Nisbet, OT; Kimberly Schoessow, OTD	C40: Severe Brain Injury and Vision Loss: Challenges and Steps Toward Progress: B.J. LeJeune, CRC, CVRT	R8: Low Vision Research: Hot off the Press: George Timberlake, PhD; Ronald Schuchard, PhD					
10:00 AM	Coffee Break, 10-10:15 am, Grand Foyer									
10:15 AM	C41: The Visually Impaired Driver - An Optometric Perspective: <i>Deena</i> Sandall, OD	C42: 2011: What's New? 1) New Ideas About Charles Bonnet Syndrome; 2) The Implantable Miniature Telescope Update; 3) What's New in Macular Perimetry: Mary Lou Jackson, MD	C43: Home Lighting Assessment and Modifications:  Monica Perlmutter, OT, CLVT; Nancy Krusen, OT, PhD	C44: Vision Impairment: The Impact on Social Cognition and Social Ability: Carolyn Palmer, PhD	<b>R9:</b> Diagnostics and Assistive Technology <i>Robert Massof, Phl</i>					

Saturda	ay, September 24 cont.							
	Grand Ballroom A	Grand Ballroom E, F	Grand Ballroom B	Grand Ballroom G	Gateway Ballroom 4			
11:15 AM	c45: Utilizing a Nonprofit for Providing Comprehensive Statewide Low Vision Care to School-age Children: Jennifer Coy, TVI, CLVT, COMS; Scott McDougal, OD; John Thompson	<b>C46:</b> Managing Vision and Patients in the Anti-VEGF Era: <i>Judith Goldstein, OD</i>	C47: Incorporating Leisure and Social Participation into the Clinical Setting: Karla Sternberg, OT, CLVT	C48: Free and Practical Ways of Providing PC Access to Low Vision Patients: Deborah Gilden, COMS, PhD				
12:15 PM	Lunch on your own, 12	2:15-1:30 pm						
1:30 PM	C49: Use of Prism in Vision Rehabilitation: Kia Eldred, OD; Tonya Mennem, OT, CLVT  C50: Vision Development for Children With Low Vision: Bill Takeshita, OD		C51: Vision Rehabilitation: Using Theory and Research in the Exam Room: Shirin Hassan, OD, PhD; Elli Kollbaum, OD	C52: Low Vision Technology: Resources for Keeping Abreast of What's New: Ike Presley, TVI, CLVT	R10: Low Vision Psychological Functioning: Laura Dreer, PhD			
3:45 PM	Coffee Break, 3:45-4 pm, Grand Foyer							
4:00 PM	<b>C53</b> : Optometric Management of Peripheral Field Loss: <i>Ana Perez, OD</i>	<b>C54:</b> Determining Statutory Blindness and Visual Disability: David Lewerenz, OD	C55: Medicare Reimbursement and Low Vision Rehabilitation: Current Status: James Deremeik, CLVT	C56: Seize the Moment! Video Documenta- tion of Student Performance: John Rose, MA, SpEd EC-12, ELA 8-12	C57: Writing for Publication: What's the Difference? Deborah Gold, PhD; J. Vernon Odom, PhD			







# **Special Events**

### **Pre-conference Research Roundtable**

Wednesday, September 21 | 4-6 pm | Grand Ballroom B

### **Current Trends in Low Vision and Vision Rehabilitation Research:**

Where and How Should Scientists Be Focusing Their Efforts?

**Moderators:** Laura Dreer, PhD; Shirin E. Hassan, OD, PhD; Robert Massof, PhD; Ronald Schuchard, PhD; George T. Timberlake, PhD

Many trends, practical applications, and funding or lack thereof dictates the topics of research chosen by the scientific community. This roundtable discussion is designed to provide a venue for scientists to discuss current relevant issues in low vision and vision rehabilitation science. Topics to be discussed also include areas of research that may be coming up short based on inconclusive or contradictory findings and areas of research that hold the most promise for the future.

### "Excellence in Research" Plenary Session

Thursday, September 22, 8-9:30 am | Grand Ballroom C, D

**Gary S. Rubin**, **PhD**, is a Gold Fellow of the Association for Research in Vision and Ophthalmology and an Honorary Fellow of the College of Optometrists in the UK. In addition to publishing more than 100 scientific papers and book chapters, some of his noted research includes reading and face recognition in people with impaired vision, a study sponsored by the National Eye Institute. He has also researched the effect of vision impairment on older people's daily lives, a study sponsored by the National Institute on Aging. Rubin has devoted considerable time to the development and validation of new clinical vision tests used in a wide range of eye diseases including cataracts, macular degeneration and diseases of the optic nerve.

Rubin received his PhD in experimental psychology in 1983 from the University of Minnesota. After completing a postdoctoral fellowship in low vision in 1985, he joined the faculty of the Wilmer Eye Institute at Johns Hopkins University School of Medicine as Director of Low Vision Research. In 1999, Dr. Rubin was appointed as the Helen Keller Professor of Visual Rehabilitation at the Institute of Ophthalmology in London. In addition to serving as this year's keynote speaker, Rubin will also moderate a vision research symposium.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1



Regional lunches are a great networking opportunity. Meet face-to-face with low vision professionals in your area. Share cases, encourage cross-referral, and build your regional contact list. Enjoy this free lunch-and-learn opportunity.

### Regional Breakdown:

West: Alaska, Arizona, California, Colorado, Hawaii, Idaho.

Montana, Nevada, New Mexico, Oregon, Utah,

Washington, Wyoming

**Northeast:** Connecticut, Maine, Massachusetts, New Hampshire,

New Jersey, New York, Pennsylvania, Rhode Island,

Vermont

**South:** Alabama, Arkansas, Delaware, District of Columbia,

Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina,

Tennessee, Texas, Virginia, West Virginia

Midwest: Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota,

Missouri, Nebraska, North Dakota, Ohio, South Dakota,

Wisconsin

International Attendees: You are welcome to join any of these

groups.

### Regional Lunch Rooms:

West Regional Lunch: Gateway Ballroom 2
Northeast Regional Lunch: Gateway Ballroom 3
South Regional Lunch: Grand Ballroom C

Midwest Regional Lunch: Grand Ballroom D | Sponsored by Alphapointe

### **Welcome Reception**

Thursday, September 22, 5:30-8 pm Arch View Ballroom

Join us and unwind. The Envision Conference Welcome Reception is a great chance to meet and network with colleagues and speakers while exploring the exhibit hall. Each guest will receive two complimentary drinks, and there will be plenty of hors d'oeuvres.

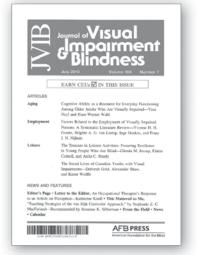


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- Take an in-depth look at hot topics challenging the field in *JVIB*'s annual special issue. *JVIB* will release its special issue on *Orientation and Mobility* in 2011.



Practitioners and researchers, policymakers and administrators, counselors and advocates rely on the *Journal of Visual Impairment & Blindness (JVIB)* for

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Envision Conference 2011

# Workshops

Wednesday, September 21

### W1. Workshop on Prism Adaptation Therapy for Hemispatial Neglect Associated With Brain Injury or Stroke

Kevin Houston, OD Kia Eldred, OD 9 am-12 pm | Grand Ballroom A

Hemispatial neglect is a common and debilitating condition occurring after brain injury characterized by a failure to respond to sensory stimuli on, or execute movements towards, the side of the body opposite the brain lesion. Prism adaptation has been shown to be a leading treatment option for left neglect. This



workshop will include a lecture portion including background on the disorder and literature review of prism adaptation and neuroimaging studies. Videos will be used to illustrate testing and treatment with actual patients. The second half will be hands-on where the participant will pair up with a partner to learn to perform prism adaptation therapy with the intent of having the skills to implement the treatment in their clinic.

# **Instruction Level:** Intermediate **Objectives:**

- 1. Educate patients and caregivers on evidence base for prism adaptation therapy.
- 2. Conduct diagnostic neuropyschological and eye-hand coordination testing.
- 3. Proficiently perform prism adaptation therapy. **CEUs:** ACCME: 3, ACVREP: 3, AOTA: 3, COPE: 3, CRCC: 3

### W2. Applied Optics of Low Vision Devices

David Lewerenz, OD

9 am-12 pm | Grand Ballroom E, F

This course is a combination lecture/hands-on workshop that will present the basic optical principals of low vision devices. Their features, as well as relative advantages and disadvantages, will be discussed. Training tips on the effective use of each category of low vision device will be explained and demonstrated.

Workshops

# Instruction Level: Intermediate Objectives:

- 1. Apply one very simple formula to solve many low vision optical questions.
- 2. List the features and relative advantages and disadvantages of each class of magnification device.
- 3. Describe how to begin training a low vision patient on each type of optical low vision device.

CEUs: ACCME: 3, ACVREP: 3, AOTA: 3, COPE: 3, CRCC: 3

# **W3.** Evaluating the Macula and Establishing PRL for Low Vision Rehabilitation

Donald Fletcher, MD
Karen Kendrick, OTR/L, CLVT
9 am-12 pm | Grand Ballroom B

The purpose of this workshop is to provide a better understanding of the etiologies and implications of central field defects. Participants will gain knowledge on how to perform macula scotoma and Preferred Retinal Locus (PRL) assessments. This session will identify the progression of visual skills to obtain good PRL fixation for completion of daily activities. Participants will also have a hands-on opportunity with central visual field screening tools.

# Instruction Level: Introductory Objectives:

- 1. Understand the etiology and implications of central visual field defects.
- 2. Identify compensatory visual skills for scotoma avoidance and for non-foveal fixation.
- 3. Be able to administer performance testing to evaluate effectiveness of compensatory strategies and scotoma placement.

CEUs: ACCME: 3, ACVREP: 3, AOTA: 3, COPE: 3, CRCC: 3

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# W4. Overview and Field Practice Using Accessible GPS Devices to Create Routes and Establish a Position in Space: Part I

Craig Phillips, MS Ed, TVI, COMS 9 am-12 pm | Grand Ballroom G

Participants will learn about the basics of Global Positioning Systems (GPS) for the traveler who is blind and visually impaired, the basic functions of accessible GPS devices, and how to integrate these devices into orientation and mobility lessons. Participants are asked to bring a GPS device. Additionally, a Trekker Breeze will be available for the day. Portions of this workshop will take place on the streets of downtown St. Louis, as participants learn hands-on applications of the devices.

Instruction Level: Introductory Objectives:

- 1. Establish a position in space using GPS.
- 2. Demonstrate mapping on the street and in open areas.
- 3. Demonstrate an understanding of how to create GPS landmarks.

CEUs: ACVREP: 3, AOTA: 3, CRCC: 3

# **W5.** Hands-on Workshop on Rehab of Hemianopia

Rosemary Armour, OT, CBIS Kevin Houston, OD 1-4 pm | Grand Ballroom A

Hemianopia is common after neurological injury and correlates with poor functional recovery. This workshop will teach a protocol used by a multidisciplinary vision rehab program composed of optometry and occupational therapy in an inpatient and outpatient neuro-rehab facility. Learning will be hands-on as participants pair up and use hemianopic glasses to simulate visual loss. Each participant will learn assessment, therapy and incorporation of hemianopic prisms.

Instruction Level: Intermediate Objectives:

- 1. Apply techniques to improve the patient's awareness of their field loss.
- 2. Conduct visual scanning therapy.
- 3. Teach eccentric gaze and anchoring techniques.

CEUs: ACCME: 3, ACVREP: 3, AOTA: 3, COPE: 3, CRCC: 3



# W6. Diabetes and the Low Vision Rehabilitation Team: The Great Escape

Emilie Hagan, ARNP-CNS, MS, CDE William Park, OD Karen Kendrick, OTR/L, CLVT 1-4 pm | Grand Ballroom E, F

Diabetes presents with a complex metabolic nature of ongoing long-term challenges. Diabetic retinopathy is the most common cause of blindness in adults. Treatment and management plans require multifaceted interventions of pharmacotherapy, patient education and rehabilitation to manage the patient's long-term health. The diabetic dilemma can only be overcome by treating the patient through a multidisciplinary team approach.

Instruction Level: Intermediate Objectives:

- 1. Verbalize an increased understanding of diabetic pathology and treatment.
- 2. Describe the role of the diabetic educator as part of the multidisciplinary low vision rehabilitation team.
- 3. Explain underlying concepts of a multidisciplinary approach to comprehensive vision rehabilitation and diabetes education for the visually impaired.

CEUs: ACCME: 3, ACVREP: 3, AOTA: 3, COPE: 3, CRCC: 3

# W7. Adding Low Vision Services in Your Private Practice

Kendall Krug, OD Lori Grover, OD 1-4 pm | Grand Ballroom B

A practical, how-to guide to providing low vision services in private practice. Exam pearls to include entrance questionnaires, exam techniques, dispensing of different types of aids and practice management considerations to making this service viable. Current CMS documentation and billing requirements will be discussed, along with instructions on how to write a low vision rehabilitation treatment plan.

Instruction Level: Introductory
Objectives:

1. Understand the additional equipment, testing and office management needed to provide vision

- rehabilitation care in a private optometry or ophthalmology practice.
- 2. Be able to calculate the starting magnification required for distance and near devices.
- 3. Identify three referral sources for low vision patients.

CEUs: ACCME: 3, ACVREP: 3, COPE: 3, CRCC: 3

# W8. Overview and Field Practice Using Accessible GPS Devices to Create Routes and Establish a Position in Space: Part II

Craig Phillips, MS Ed, TVI, COMS
1-4 pm | Grand Ballroom G

Participants will learn the advanced features of the Global Positioning System (GPS) including how to create routes from preset Points of Interest (POIs) and self-created landmarks, the address entry function, and the parameters of travel in open areas. Participants are asked to bring a GPS device. Additionally, a Trekker Breeze will be available for the day. Portions of this workshop will take place on the streets of downtown St. Louis, as participants learn hands-on applications of the devices.

# Instruction Level: Introductory Objectives:

- 1. Demonstrate how to create routes with GPS.
- 2. Demonstrate how to enter a destination address to set a route using GPS.
- 3. Demonstrate an understanding of how to address the 50-foot resolution.

CEUs: ACVREP: 3, AOTA: 3, CRCC: 3



OUT OF SIGHT, NOT OUT OF MIND

Personal and Professional Perspectives on Age-Related Macular Degeneration

### LINDY BERGMAN with the Chicago Lighthouse

Foreword by Jonathan Safran Foer, award-winning author of Everything Is Illuminated and Extremely Loud and Incredibly Close

Introduction by Janet P. Szlyk, Ph.D., President and Executive Director, The Chicago Lighthouse for People Who Are Blind or Visually Impaired

oming this winter, an in-depth examination of ■ the impact of age-related macular degeneration (AMD) that also offers up-to-the-minute information about the causes and approaches to treatment of this increasingly common cause of vision loss. In an expanded and revised edition of Out of Sight, Not Out of Mind, Part I of the book, written by 93-yearold Lindy Bergman, illustrates the ways in which life with low vision can be lived with independence,

dignity, and personal satisfaction. Part II presents all-new essays written by world-renowned experts from The Chicago Lighthouse for People Who Are Blind or Visually Impaired with the latest information about the causes of AMD, the importance of psychological support for individuals experiencing vision loss, and effective ways of delivering low vision services. This new resource for your personal library will inform professionals and patients alike.

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### **Projected Table of Contents**

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Written by expert contributors from The Chicago Lighthouse for People Who Are Blind or Visually Impaired

Vision and Aging: General and Clinical Perspectives Alfred A. Rosenbloom, Jr., M.A., O.D., D.O.S., Founder and Chief Emeritus — Low Vision Clinic

### Age-Related Macular **Degeneration: Causes and Current Medical Perspectives** Gerald Fishman, M.D., Director,

The Pangere Center for **Inherited Retinal Diseases** 

Emotional and Psychosocial **Responses to Age-Related Macular Degeneration** David Rakofsky, Psy.D., Director, The Bergman Institute for Psychological Support

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### • The Low Vision Eye Exam: What to Expect

OUT OF SIGHT. NOT OUT OF MIND

LINDY BERGMAN

Kara Crumbliss, O.D., Director of Clinical Services, Low Vision Clinic

- Integrating Low Vision Rehabilitation and **Assistive Technology** Thomas Perski, M.A., Director of Rehabilitation Services
- The Impact of Age-Related **Macular Degeneration: Research in Low Vision** Patricia Grant, M.S., Director of Low Vision Research

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# **Sessions**

Clinical education sessions are listed with C session numbers. Research sessions are listed with R session numbers.

### Thursday, September 22

### C1. Driving and Visual Impairment

Lori Grover, OD Kendall Krug, OD 9:45-11:45 am | Grand Ballroom A

Driving with visual impairment is an important clinical and public health issue facing optometrists and their patients. This course reviews patient characteristics, clinical consideration and treatment strategies, legal and advocacy issues related to the population of patients who wish to drive who have, or are at risk for, visual impairment. A review of relevant statistical information and current research data is presented and the role of the optometrist is discussed. Specifically, regulatory and programmatic issues relevant to Maryland drivers are highlighted.

### **Instruction Level:** Intermediate **Objectives:**

- 1. Understand the role of the optometrist in addressing vision and driving-related issues.
- 2. Recognize characteristics of the patient population who drive and are at risk for, or who have, visual impairment.
- 3. Promote comprehensive clinical rehabilitation to include prescriptive treatment options and refer for patient/family counseling for driving-related issues.

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

### C2. Bridging the Gap Between Low Vision **Optometry and Occupational Therapy to Improve Patient Outcomes**

Amv Wheeler, OT Ana Perez, OD 9:45-11:45 am | Grand Ballroom E, F

The purpose of this presentation is to explore a model of practice that facilitates effective communication between low vision optometry and occupational therapy to improve

patient outcomes. The presentation will utilize clinical case studies and discuss how each discipline can provide pertinent assessment data that can guide treatment.

### **Instruction Level:** Introductory Objectives:

- 1. Discuss the model of delivery between low vision optometry and occupational therapy at the Michael E. DeBakey Veterans Affairs Medical Center.
- 2. Identify important components of a low vision optometry and a low vision occupational therapy assessment.
- 3. Recognize how assessment data can guide treatment and improve patient outcomes for engagement in meaningful, goal-directed pursuits (occupations).

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

### Addressing Health Literacy in Older Adults With Low Vision

Mary Warren, OT 9:45-11:45 am | Grand Ballroom B

Lecture, case example and demonstration are used to educate the participant in the importance of promoting adequate health literacy skills to prevent further vision loss in older adults with age-related eye disease and how to modify written communications to ensure they are visible and readable for persons with low vision.

### **Instruction Level:** Introductory Objectives:

- 1. Describe why health literacy is now considered a critical component of providing effective health services to older adults.
- 2. Identify the health behaviors older adults must possess to manage age-related eye disease and reduce additional vision loss.
- 3. Describe principles and provide examples of how to



Sessions



increase print visibility and readability when creating printed client education materials and home programs.

CEUs: ACVREP: 2, AOTA: 2, CRCC: 2

### C4. Reading Literacy Intervention for Students With Low Vision

Chrissy Cowan, TVI 9:45-11:45 am | Grand Ballroom G

This session will review the effects of different eve conditions on reading fluency, present ways to measure reading fluency and stamina, and discuss instructional strategies to compensate for poor reading fluency in order to improve the reading literacy performance of the academic student with low vision.

**Instruction Level:** Introductory Objectives:

- 1. Adjust the reading environment to augment vision.
- 2. Assess reading fluency and stamina.
- 3. Apply the repeated reading strategy to increase students' reading speed.

CEUs: ACVREP: 2, AOTA: 2, CRCC: 2



### **R1.** Health States of Patients Seeking **Outpatient Low Vision Rehabilitation Services Within LOVRNET**

Moderator: Judith Goldstein, OD 9:45-11:45 am | Gateway Ballroom 4

Patients seeking vision rehabilitation services often report other co-morbidities or otherwise impaired health states. This research panel looks at the health states of nearly 800 patients within the Low Vision Research Network (LOVRNET) study.

9:45 am - Introduction to Health States in Low Vision Patient. Judith Goldstein. OD

9:55 am - Visual Impairment Measure and Functional **Ability in Patients Within Low Vision Research Network** (LOVRNET). John Coalter, OD

10:15 am - The Relationship Between Physical Ability and Functional Ability in Patients Seeking Outpatient Services Within the Low Vision Research Network (LOVRNET). Kimberly Schoessow, OTD

10:35 am – Functional Ability and Depressed Mood Among Patients in the Low Vision Research Network (LOVRNET). Judith Goldstein, OD

10:55 am – The Prevalence of Cognitive Deficits in Patients Within the Low Vision Research Network (LOVRNET) and Their Relationship to Functional Ability. Katherine White, OD

11:15 am – The Measurement of Personality and Social **Support Systems Among Patients in the Low Vision** Research Network (LOVRNET). K. Bradley Kehler, OD

**Instruction Level:** Intermediate Objectives:

- 1. Describe the relationship between physical health and functional ability of people seeking LVR services.
- 2. Better understand the prevalence and significance of depressed mood in patients seeking outpatient LVR services and its relationship to functional ability.
- 3. Understand the relationship between cognition and functional ability in those seeking LVR services.

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

### C5. Reading Rehabilitation With Video Camera Magnifiers – A Review

Jennifer Wallis, PhD Mary Lou Jackson, MD Kimberly Schoessow, OTD 1-2 pm | Grand Ballroom A

This course presents a discussion of low vision reading rehabilitation with video camera magnifiers based on recent findings on the effectiveness of these devices. We will discuss subjective versus objective reading measures, study design of research studies evaluating reading rehabilitation, and train in the use of video camera magnifiers.

**Instruction Level:** Introductory Objectives:

- 1. List benefits and potential disadvantages of video camera magnifiers as a reading rehabilitation device.
- 2. Identify reading aspects measured by objective versus subjective measures.
- 3. Recognize patient characteristics that influence reading success.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

### C6. Contact Lenses as an Adjunct of Vision Rehabilitation

William Park. OD 1-2 pm | Grand Ballroom E, F

Contact lenses are often ignored as a component of providing low vision rehabilitation for the visually impaired. This course emphasizes contact lenses should be the first choice for best corrected visual acuity with high refractive error and/or nystagmus, aniridia, albinism, cone dystrophies and ocular trauma. Age should not be a factor in inclusion or exclusion for fitting a pediatric patient.

### **Instruction Level:** Intermediate Objectives:

1. Recognize when contact lenses are paramount in consideration for obtaining best-corrected visual acuity due to ocular disease and differentiate how contact lenses contribute to enhanced visual function and quality of life.

- 2. Cite practice management for pediatric patients and that age of fitting does not matter in realization of success.
- 3. Differentiate the impact of fitting children at an early age as part of the Youth Low Vision Program (Michigan) and the Children's Vision Rehabilitation Program (CVRP-WV) and the outcomes short and long term (21 years of successful wear).

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

### C7. Physical Activity and Low Vision: How Do We Facilitate This Important Occupation?

Beth Barstow, MS. OTR/L, SCLV 1-2 pm | Grand Ballroom B

Due to limitations in occupational performance and confounding factors associated with aging, older adults with vision loss are often unable to participate in regular leisure time and vigorous physical activity to support a healthy lifestyle. This presentation will discuss significance of these issues, review the literature supporting engagement in physical activity for older adults with low vision and investigate the service provider's role in evaluation and intervention of this important occupation.

### **Instruction Level:** Intermediate Objectives:

- 1. State the importance of participation in physical activity for older adults with low vision.
- 2. State the role of the low vision service providers in facilitation of physical activity.
- 3. Describe evaluation strategies to identify, and intervention strategies to facilitate, participation in physical activity.

CEUs: ACVREP: 1, AOTA: 1, CRCC: 1





# C8. Beyond Retinopathy of Prematurity: Ocular Finding and Interventions in the Preterm Infant

Linda Lawrence, MD 1-2 pm | Grand Ballroom G

In the United States, premature births below 37 weeks gestation occur in up to 13 percent of live births. Pathologies in these preterm infants are associated with all parts of the visual pathway and occur at the rate of five to 23 percent. These pathologies are independent of whether or not the infant has had prior diagnosis of retinopathy of prematurity (ROP). Preterm infants without ROP are often not referred for eye care, neglecting them from early vision intervention, which affects the infants' general development. The literature will be reviewed. A model used in Salina, Kan., in collaboration with the Early Childhood Program, will be presented with

emphasis on the importance of coordinating assessment and treatment with the multi-disciplinary early childhood team.

Instruction Level: Intermediate

### Objectives:

- 1. Identify literature regarding ocular pathology in the preterm infant.
- 2. Refer pediatric patients that can benefit from a multidisciplinary model for early identification and interventions for preterm infants with visual impairment.
- 3. Identify when to advocate for the preterm infant in their need for comprehensive eye care, including multidisciplinary rehabilitation.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

# IOVS LICENS LICE

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# R2. Trouble Seeing...Trouble Sleeping: How Are They Related?

Moderator: Olga Overbury, PhD 1-3 pm | Gateway Ballroom 4

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This panel presents previously unconsidered issues related to the relationships between sleep disorder and visual impairment, including the relationship between sleep quality and visual impairment, prevalence rates of sleep disorders among the visually impaired, and the physical and cognitive effects of sleeplessness, as well as others.

**1 pm – Sleeplessness and Its Consequences.** *Olga Overbury, PhD* 

1:25 pm – Eyes Wide Shut: Lens Properties and Sleep Disturbances. *Walter Wittich, PhD* 

1:50 pm — Visual Impairment and Sleep Quality: Searching for the Link. *Xi* (Sheila) Huang, MD

2:15 pm – Prevalence of Circadian Rhythm Disorders Among Blind People With and Without Light Perception. Erin E. Flynn-Evans, PhD

2:40 pm – Photic and Nonphotic Effects on Human Circadian Rhythms in the Blind. *Joseph T. Hull, PhD* 

# **Instruction Level:** Intermediate **Objectives:**

- 1. Understand the perceptual, cognitive and behavioral effects of sleep disturbance.
- 2. Be informed about the effect of cataract surgery and choice of implant on sleep.
- 3. Appreciate the relative frequency of sleep problems in visually impaired people.

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

# C9. Seeing Is Believing – Case Presentations of How Low Vision Devices Can Help

Ana M. Juricic, OD 2-3 pm | Grand Ballroom A

This course will present real-life case presentations of the benefits and vision outcomes achieved through various distance viewing, near viewing and glare controlling devices. Patients of all ages suffering from eye conditions, such as macular degeneration, Stargardt's, glaucoma and bilateral hemianopsias, will be highlighted. Clinical pearls will be shared.

# Instruction Level: Intermediate Objectives:

- 1. Have a clinical understanding of the help that is available through low vision aids.
- 2. Choose low vision devices based on clinical presentations.
- 3. Predict possible results using the low vision aids.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

# C10. "Will I Be Able to See Well Enough to Use a Smartphone?" Visual Demands for Popular Smartphones

Kevin Houston, OD 2-3 pm | Grand Ballroom E, F

This course is designed for any clinician working with people with visual impairment. Smartphones are a primary communication tool that people have come to rely on for the everyday management of social relationships, scheduling, navigation, photo and video, internet, voice calling and more. The small size of these devices is an area of great concern for the visually impaired population. We performed a research study where we collected data on the size of the keys and buttons on the most popular models and artificially induced vision impairment in two subjects using a plus-to-blur technique. We will discuss the results of this study and provide clinical pearls to assist practitioners who may be advising visually impaired patients concerning this important technology.

### Instruction Level: Intermediate

### Objectives:

- 1. Provide data to patients regarding smartphone visual demands.
- 2. Provide accurate advice to visually impaired patients on the most popular smartphone models.
- 3. Understand the role of Critical Acuity Demand when prescribing lenses for patients with a goal of smartphone use.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

Investigative Ophthalmology & Visual Science

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# C11. Documentation and Billing of Low Vision Rehabilitation Services

Kendall Krug, OD 2-3 pm | Grand Ballroom B

A discussion of the current documentation and billing strategies for low vision rehabilitation services as required by Medicare. A special emphasis will be placed on specific billing codes and the proper documentation for both low vision consultation services and rehabilitation services.

# Instruction Level: Introductory Objectives:

- Review the necessary documentation to support and bill specialized low vision services required by CMS.
- 2. Know how to write a low vision rehabilitation plan and provide or refer for these services.
- 3. Become familiar with the use of self-reported Health and Quality of Life questionnaires.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

# C12. Clinical Low Vision Examinations and the IEP Process: What Do Parents Really Think?

Kerry Lueders, TVI, COMS, CLVT 2-3 pm | Grand Ballroom G

This presentation explores the relationship and gaps between clinical low vision examinations and the Individualized Education Program (IEP) process via the experience of parents of children who have low vision. Results of a parent survey administered by the William Feinbloom Vision Rehabilitation Center (Philadelphia, Pa.) will be presented.

# Instruction Level: Intermediate Objectives:

- 1. Identify relationships and gaps between clinical low vision examinations and the IEP process.
- Identify ways in which parents of children with low vision connect the relationship between clinical low vision examinations and the IEP process.

 Identify ways in which various professionals and organizations connect the relationship between clinical low vision examinations and the IEP process.

CEUs: ACVREP: 1, AOTA: 1, CRCC: 1

### C13. Pediatric Low Vision Rehabilitation

Deena Sandall, OD 3:30-4:30 pm | Grand Ballroom A

Treating children with vision impairments or special needs can sometimes be intimidating. This lecture will give the participants greater ease in interacting with visually impaired or special needs children.

# Instruction Level: Introductory Objectives:

- 1. Learn about the most common pediatric ocular pathologies.
- 2. Identify the treatments and/or devices that work well for kids with vision impairments.
- Feel more comfortable and confident working with low vision kids.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

# C14. Measuring and Evaluating Reading Disability in Glaucoma and Dry Eye

Pradeep Ramulu, MD, MHS, PhD 3:30-4:30 pm | Grand Ballroom E, F

While most currently available reading tests measure reading aloud over short durations, many patients have complaints regarding book or magazine reading, which involve reading silently over long durations. Such complaints are particularly common in diseases that affect sight but preserve visual acuity, i.e. glaucoma or dry eye. Here, we discuss the ideal methods to measure reading disability in dry eye and glaucoma, and how testing of sustained silent reading can be performed, and why it likely better reflects patients' disability in these eye diseases.

**Instruction Level:** Intermediate

### Objectives:

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- Compare the relative impacts of glaucoma and reading on reading aloud over short time periods and silent reading over long time periods.
- 2. Describe the concept of reading fatigue and how it can be measured with a silent reading test.
- Compare the utility of different types of reading tests in capturing reading difficulty in glaucoma and dry eye patients.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

# C15. Trends in Low Vision Education: Learning From the Past; Looking Toward the Future

Amanda Lueck, PhD 3:30-4:30 pm | Grand Ballroom B

This presentation examines past and present trends in key areas of education for children with low vision. Current practices are placed into historical and research-based perspectives, leading to a discussion of critical directions for the development of collaborative models of educational-medical services in the future, including personnel preparation needs.

# **Instruction Level:** Advanced **Objectives:**

- 1. Summarize past trends in key areas of low vision education.
- 2. List influences that led to past and current practices.
- 3. List elements to consider in the evolution of future collaborative service systems and some proactive steps to attain them.

CEUs: ACVREP: 1, AOTA: 1, CRCC: 1

# C16. Assisting Clients With Employment Preparation: How to Use the CNIB TAPE Measure

Alexander Shaw, PhD
Deborah Gold, PhD
3:30-4:30 pm | Grand Ballroom G

At Envision Conference 2010, results were presented of a study conducted at CNIB to explore success facilitators of employment and to develop a psychometric instrument (called the CNIB TAPE) that could be used to assess preparedness for the world of work by people who are blind or visually impaired. In this presentation, we will instruct members of the audience on the use of the TAPE. We will also present several case examples of clients who are blind or partially sighted who have used the TAPE (alone or alongside vocational counselors) to help improve their opportunities for employment.

# Instruction Level: Intermediate Objectives:

- 1. Administer and score the CNIB TAPE.
- 2. Identify strategies for improving scores on the TAPE.
- 3. List broad categories of employment success facilitators.

CEUs: ACVREP: 1, AOTA: 1, CRCC: 1

### **R3.** Dual Sensory Impairment

Moderator: Walter Wittich, PhD 3:30-5:30 pm | Gateway Ballroom 4

In the coming decades, the number of seniors affected with dual sensory impairment (hearing/vision) will drastically increase; rehabilitation agencies need to prepare for efficient service provision. Resource allocation is based, in part, on the clientele profile; however, little information is available describing this population.

3:30 pm – Dual Sensory Impairment Rehabilitation.

Walter Wittich, PhD

3:55 pm – The Relevance of Providing Both Auditory and Visual Speech Cues to Older Adults With Sensory Impairments. *Jean-Pierre Gagne*, *OD* 

4:20 pm – Pilot Studies in Speech-Reading and Way-Finding With Dual Sensory Loss Impairments. *John Brabyn, PhD* 

4:45 pm – Professional Preparation in Dual Sensory Impairment Rehabilitation: The Story of a Social Worker. Kenneth Cooper. MSW

5:10 pm – Psychosocial Adjustment for Persons Aging With Hearing and Vision Loss. B.J. LeJeune, CRC, CVRT

**Instruction Level**: Introductory





### **Objectives:**

- 1. Have a better understanding of dual sensory impairment (vision/hearing).
- 2. Identify gaps/priorities in dual impairment rehabilitation.
- 3. Consider vision- and hearing-loss rehabilitation as one integrated service.

CEUS: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

### C17. Low Vision 101 – Overview of Low Vision Devices

Ana M. Juricic, OD 4:30-5:30 pm | Grand Ballroom A

This presentation provides a general understanding of distance viewing, near viewing and glare controlling aids that are used in a low vision examination and expected vision outcomes.

**Instruction Level:** Introductory

### Obiectives:

- 1. Understand the basic principle components of a low vision assessment.
- 2. Be familiar with distance viewing, near viewing and glare controlling aids.
- 3. Discuss the newest advancements in high-tech and digital low vision devices.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

### C18. Evidence-based Visual Assessment for Driving

Kevin Houston, OD 4:30-5:30 pm | Grand Ballroom E, F

This course is intended for optometrists, ophthalmologists, driving specialists and other professionals working with or interested in vision and driving. The session will review important studies related to vision and driving and suggest an in-office testing protocol. Eye doctors and driving specialists are often faced with the uncomfortable task of requesting that a patient stop driving. An in-depth knowledge of the research data allows a doctor to objectively assess a patient. The doctor

can then confidently discuss their recommendation with the patient citing the supporting research. A multidisciplinary approach is discussed and emphasized.

### **Instruction Level:** Intermediate **Objectives:**

- 1. Cite research studies about driving risk as it relates to exam room tests.
- 2. Select visual tests based on predictive power of risk.
- 3. Be familiar with the team of professionals involved in the driver rehab process.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

### C19. My Eyes Work but My Brain Doesn't See: How Do We Unlock the Potential of Young People With Neurological Vision Impairment?

Carolyn Palmer. PhD 4:30-5:30 pm | Grand Ballroom B

This presentation raises critical issues in relation to understanding and working with this group of students to ensure that positive learning outcomes occur. The findings emerge from an in-depth study of current literature on this topic and consultation with experts in this field. The findings to be presented focus on the implications for the education and rehabilitation of students with neurological vision impairment. The presentation will define the condition, outline associated behaviors and provide an overview of educational intervention and important pedagogical and rehabilitation considerations.

### **Instruction Level:** Intermediate Obiectives:

- 1. Identify young people with neurological vision impairment.
- 2. Differentiate between neurological vision impairment and ocular vision impairment.
- 3. List aspects of pedagogy and approaches to learning that will result in positive learning outcomes for these individuals.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

### C20. Adjusting to Driving Cessation: Training **Distance Visual Skills and Use of Bioptics** for the Role of Active Passenger

Erika Andersen. CLVT 4:30-5:30 pm | Grand Ballroom G

Driving cessation often poses a significant barrier to independence. When driving cessation is indicated secondary to decreased vision, development of visual skills for travel may offer increased opportunities for independence. For example, an individual who can read street signs and identify landmarks may feel more confident taking public transit or providing directions to a driver to arrive at a desired, but unfamiliar location. This presentation addresses the development and use of visual skills and bioptics for the role of active passenger.

### **Instruction Level:** Introductory **Objectives:**

- 1. Describe three best practices for training the use of distance vision.
- 2. Identify a minimum of three components of a training protocol for teaching visual skills for the role of active passenger.
- 3. List a minimum of five resources for helping individuals with visual impairment adjust to driving cessation.

CEUs: ACVREP: 1, AOTA: 1, CRCC: 1



### Friday, September 23

### C21. RP From A to Z

David Lewerenz, OD 8-10 am | Grand Ballroom A

All facets of the family of diseases known as retinitis pigmentosa will be explored, including the clinical characteristics, genetics, nutritional and medical technological therapies and vision rehabilitation strategies that address the unique needs of a patient with retinitis pigmentosa.

### **Instruction Level:** Intermediate Obiectives:

- 1. Identify the main clinical characteristics of retinitis
- 2. Describe research on nutritional supplements and new technological therapies for a patient with retinitis pigmentosa.
- 3. List the rehabilitation strategies for a patient with retinitis

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

### C22. VEP-Guided Retinal Image Translocation: **New Frontiers in Low Vision Treatment**

Ronald Siwoff, OD

8-10 am | Grand Ballroom E, F

VEP-Guided RIT Therapy has helped patients with profound visual loss. In many cases, the loss has existed for a very long time. Follow-up and management with an interdisciplinary team is often necessary to get the maximum benefits of treatment.

### Instruction Level: Advanced **Objectives:**

- 1. Learn the history of use of prisms to correct vision and understand how VEP-Guided RIT Therapy differs and improves on the old methods.
- 2. Describe the required equipment and methodology used in VEP-Guided RIT Therapy.
- 3. Identify patients who might benefit from this new technology. CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

Sessions **Envision Conference 2011 Envision Conference 2011** Sessions



### C23. Pills and Potions: It Isn't Magic – Tools. **Tips and Techniques for Medication** Management

Debra Sokol-McKay, CVRT, CLVT, CDE 8-10 am | Grand Ballroom B

The CDC reports 40 percent of persons over 65 take five or more medications per week; 12 percent use 10 or more. Explore assessment tools different healthcare disciplines use to evaluate medication management ability. Discover the numerous interventions that are available to assist your client to safely identify, track and administer medications.

### **Instruction Level:** Introductory Objectives:

- 1. Describe current data to support the critical need to individualize medication management for both the population in general, as well as for populations with visual impairment and other co-morbid special needs.
- 2. Explain several discipline-specific tools to assess understanding and implementation of a medication regimen.
- 3. Identify a range of tools, techniques and resources to enable patients with vision loss and other disabilities to more effectively, consistently and safely follow through on taking medication.

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, CRCC: 2



### C24. Preparing Youth for Employment

Karen Wolffe, PhD

8-10 am | Grand Ballroom G

Dr. Wolffe will describe the newly revised Transition Tote System, a curriculum for youth that includes structured learning activities to promote self-awareness, career exploration, job-seeking skills, and job-keeping skills, as well as an organizational tool – a backpack designed for ease of use by youngsters with impaired sight - and a Teacher's Guide.

### **Instruction Level:** Intermediate Objectives:

- 1. Describe the Transition Tote System: Student Manual, Backpack and Teacher's Guide.
- 2. Enhance career education programming with youth who are blind or have low vision.
- 3. Support youth with visual impairments in their employment searches.

CEUs: ACVREP: 2. AOTA: 2. CRCC: 2

### **Mobility Panel** R4.

Moderator: Shirin Hassan, OD, PhD 8-10 am | Gateway Ballroom 4

8 am - Can Pedestrians Judge the Time-to-Arrival of Approaching Vehicles? Shirin Hassan, OD, PhD

8:25 am – The Development of the Falling Less in Kansas (Falling LinKS) Toolkit. Shannon Riley, MA; Karen Kendrick, OTR/L, CLVT

8:50 am - Enhanced Orientation and Mobility in the Visually Impaired Using Virtual Audio-Based Environments. Erin Connors

9:15 am - Restriction of Travel Outside the Home in Glaucoma and AMD: Direct Measurement Using a Cellular Network-Based Tracking Device. Pradeep Ramulu, MD, MHS. PhD

9:40 am - Objective Measurement of Real-World Physical **Activity in Glaucoma and Macular Degeneration Using** Accelerometer Devices. Pradeep Ramulu, MD, MHS, PhD

### **Instruction Level:** Intermediate **Objectives:**

- 1. Understand aspects of mobility outside the home.
- 2. Be informed about tools developed to prevent falls in the home for older adults in rural areas.
- 3. Be presented with technologies designed to measure and assist with mobility outside the home.

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

### C25. In the Middle: Helping Visually Impaired **Patients With Their Mid-range Needs**

David Lewerenz, OD 10:45-11:45 am | Grand Ballroom A

A procedure is proposed to determine telemicroscope parameters allowing the accomplishment of mid-range goals providing the widest possible field of view, an important aspect of telemicroscope design. A review of available products assists the low vision clinician to compare features and select the device with the best opportunity for success.

### **Instruction Level:** Intermediate **Objectives:**

- 1. List the particular challenges of meeting the mid-range needs of visually impaired patients.
- 2. Describe the specific history-taking and evaluation techniques required for meeting the mid-range needs of a visually impaired patient.
- 3. Employ the principles of magnification to design a telescopic system for a particular task.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

### C26. Vision Rehab Boot Camp I: Bring Vision Impairment On!

Lori Grover, OD 10:45-11:45 am | Grand Ballroom E, F

Are you ready to take on vision impairment? Let's rock your practice in a new direction! Get set for an intense interactive lecture packed with clinical drills targeting those "soft spots" of vision rehabilitation (VR) care. New to OD VR? Haven't VR'ed since school? We want YOU! You'll emerge

toned and tight with tools of strength to grow VR patient care. The only doc's permission needed for this training program is YOURS! And you get it all in only 60 minutes! (Recommended for newbies as prerequisite to VR Boot Camp II.)

### **Instruction Level:** Intermediate Objectives:

- 1. "Strengthen" knowledge of current VI treatment through drills in roles, language, policy and third-party issues.
- 2. "Tone" skills for primary care examination and management of patients with VI.
- 3. "Circuit train" through the evaluation and treatment process, focusing on treatment options and available resources for patients and our practice.

CEUs: ACCME: 1, ACVREP: 1, COPE: 1, CRCC: 1

### C27. Pearls From Challenging Geriatric LVR Cases

Donald Fletcher, MD 10:45-11:45 am | Grand Ballroom B

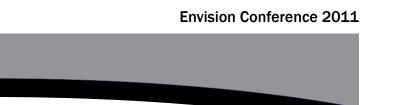
Several challenging cases of geriatric visual impairment will be presented and discussed to illustrate some of the issues that can complicate rehabilitation. Issues of variation in visual function parameters, as well as personalities and lifestyles, will be considered. Audience participation will be encouraged.

### **Instruction Level:** Intermediate Objectives:

- 1. Recognize typical and atypical patterns of scotoma interference with ADLs.
- 2. Identify complicating factors commonly encountered in LVR.
- 3. Utilize visual function tests more effectively.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

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### **C28.** Plants, Predictions and Possibilities

Kathi Zuniga, M.Ed. 10:45-11:45 am | Grand Ballroom G

Students with visual impairments struggle to gain understanding of visual concepts in science. This presentation reviews goals and activities from a TSBVI summer program fostering use of graphic organizers, scientific processes and vocabulary acquisition for elementary students. Content includes suggestions for collaborating with general educators and designing sensory-rich activities.

# Instruction Level: Introductory Objectives:

- 1. Identify ways to collaborate with general educators in an effort to increase student participation in science activities.
- 2. Review various graphic organizers and ways to generalize use across the core curriculum.
- List examples of sensory-rich activities that foster selfdiscovery and prediction of outcomes based on openended questions.

CEUs: ACVREP: 1, AOTA: 1, CRCC: 1

# R5. Difficulties in Designing Clinical Trials: Finding Solutions

Moderator: Gary S. Rubin, PhD 10:45-11:45 am | Gateway Ballroom 4

Recent needs assessments and the National Eye Institute's National Plan for Eye and Vision Research reflect common goals in low vision rehabilitation research, including: Determining which interventions are most effective and scientifically evaluated, leading to improved clinical and rehabilitative care; cost/benefit analysis included in outcome studies and tracking healthcare utilization; and efficacy of assistive way-finding technology or other technology-based replacement vision strategies. This research panel discussion looks at three challenging areas and offers solutions.

10:45 am – The Efficacy of Clinical Trials in the Context of Public Policy. Alan R. Morse, JD, PhD

**11 am – Recruitment and Retention in Clinical Trials**. *Joan Stelmack*, *OD* 

11:15 am – Abandonment of Assistive Devices at the Completion of a Clinical Trial. *Graham Strong, OD, MSc* 

# Instruction Level: Introductory Objectives:

- 1. Identify how the efficacy of clinical trials has the potential to influence public policy.
- 2. Identify the challenges in recruiting and retention in clinical trials.
- 3. Recognize the indications for patient abandonment of assistive devices at the completion of a clinical trial.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

# C29. Lenses, Lighting and Lemonade: Getting Back to the Basics!

Sandra Fox, OD

Melva Perez-Andrews, OT, CVRT

1:15-3:15 pm | Grand Ballroom A

This course will discuss the importance of utilizing lenses to enhance functional vision in the low vision patient and provide tips on refracting, prescribing and training, as well as utilizing lighting to enhance task performance. Guiding the patient in realistic goal setting and addressing depression will be discussed.

# Instruction Level: Introductory Objectives:

- 1. Recognize the importance of utilizing lenses to enhance visual performance in the low vision patient.
- 2. Recognize the importance of addressing lighting needs to enhance task performance as well as improve safety.
- 3. Recognize the importance of realistic goal setting and address the emotional aspects of vision loss in the patient with new vision loss.

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

# C30. Vision Rehab Boot Camp II: Taking Vision Impairment to the Mat!

Lori Grover, OD 1:15-3:15 pm | Grand Ballroom E, F

Ready to kick it to the top? Boot Camp II prepares you to go the VI distance! An extensive, in-depth regimen of diagnostic and prescribing pearls hones your clinical muscle. A comprehensive review of treatment options, combined with specific patient population strategies, pushes you to the front! Work through special "circuits" including contact lenses, neurological and pediatric care to refine and sculpt, and power through important analytical applications for diagnosis/treatment needed to fuel the VR fire!

# Instruction Level: Advanced Objectives:

**Envision Conference 2011** 

- 1. Solidify full-scope VR clinical skills through review of nuanced diagnostic and treatment methodology.
- Run the marathon of comprehensive treatment options including optical systems, therapy and non-medical resources.
- Strength train in the areas of contact lens treatment and issues related to neurological, driving and pediatric VR care.

CEUs: ACCME: 2, ACVREP: 2, COPE: 2, CRCC: 2

# C31. West Virginia Bioptic Driving Program: Overview and Update

Chuck Huss, COMS, CDRS 1:15-3:15 pm | Grand Ballroom B

Following passage of legislation (2008) and promulgated rules (2009), the State of West Virginia now allows bioptic driving. This presentation will provide an overview and two-year update of progress regarding the formalized program of bioptic driving services offered by the West Virginia Division of Rehabilitation Services.

# Instruction Level: Introductory Objectives:

1. Gain a better awareness of the advocacy and legislative efforts that resulted in the passage of WV HB 4139.

- 2. Gain a better understanding of the basic program structure including its criteria for admission through driver licensure, license renewal, removal of driving restrictions and oversight practices.
- 3. Gain insight into two-year update of progress made with clients served, ancillary services provided and future considerations for this formalized program of bioptic driving services.

CEUs: ACVREP: 2, AOTA: 2, CRCC: 2

# C32. Employability Skills Training for Adults With Visual Impairments

Karen Wolffe, PhD 1:15-3:15 pm | Grand Ballroom G

Two new offerings for visually impaired adults will be described: Employability Skills Program (ESP), a short-term intensive program, and Pre-Employment Program (PEP), a longer-term program for hard-to-employ adults. Both programs focus on teaching participants how to effectively match themselves to jobs that are available, apply for those jobs and successfully interview.

# Instruction Level: Intermediate Objectives:

- 1. Learn about employment curriculum options for adults with visual impairment.
- 2. Determine what employment training approach (short-term, intensive versus longer-term, more supportive) is most appropriate for different client needs.
- 3. Explore the two curriculum options and discuss how to use them with clients who are blind or have low vision.

CEUs: ACVREP: 2, AOTA: 2, CRCC: 2





### **R6. Functional Performance and Outcomes**

Moderator: Ronald A. Schuchard, PhD 1:15-3:15 pm | Gateway Ballroom 4

1:15 pm – Impact of Glaucoma on Activity Participation. Monica Perlmutter, OT, CLVT; Anjali Bhorade, MD

1:40 pm - Visual Field Loss Due to Neurological Event; The Team Approach to Rehabilitation vs. the Prescription of Gottlieb Prisms. William Park, OD, FAAO; Shannon Riley, MA

2:05 pm - Key Life Stages and Transition Points for Young **People With Sensory Impairments Between Birth and Age** 25 Years. Carolyn Palmer, PhD

2:30 pm - Sleep Disturbances in Retinitis Pigmentosa (RP) are Predicted by Reduced Vision and Physical Inactivity. Ava Bittner, OD, PhD

2:55 pm - Increased Visual Field Variability in Newly Diagnosed Glaucoma Patients is Partly Related to Increased **Depressive Symptoms or Worry About Blindness.** Ava Bittner, OD, PhD

### **Instruction Level:** Introductory **Objectives:**

- 1. Understand selected outcomes of glaucoma research.
- 2. Know the effect of sleepiness/stress on acuity measures.
- 3. Understand the outcomes of team rehabilitation versus lens prescription alone.

CEUS: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

### C33. Depression and Dementia: Managing **Common Comorbidities in Vision** Rehabilitation

Patricia Grant Kara Crumbliss. OD David Rakofsky, PsyD Alfred Rosenbloom Jr., OD 3:30-5:30 pm | Grand Ballroom A

Depression and dementia are prevalent in patients undergoing vision rehabilitation. Subtle case presentation may not be identified by the low vision practitioner. Research has shown that effective identification and management of these comorbidities is important to successful vision rehabilitation outcomes. This presentation will provide an overview of medical literature indications about memory lapses, depression, mild and advanced cognitive impairment including Alzheimer's disease. Clinical tests for diagnosis will be reviewed. Psychologic and research perspectives on the management and indications for advanced treatment will be discussed in the context of illustrative cases involving clinical diagnostic findings and management options.

### **Instruction Level:** Intermediate **Objectives:**

- 1. Understand key concepts regarding the incidence and clinical characteristics of memory loss from age-related impairment to several types of dementia.
- 2. Identify psychological responses to acquired vision loss in older adults.
- 3. Incorporate management strategies for depression and dementia into clinical practice.

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

### C34. Beyond "Look to the Left"...Understanding Unilateral Visual Neglect (UVN): Anatomy, **Assessment and Intervention Options With Links to Evidence-based Practice**

Keith Gentry, MS, OTR/L, SCLV 3:30-5:30 pm | Grand Ballroom E, F

A growing body of evidence suggests that there are a variety of interventions to address neglect which collectively represent a move toward a multi-sensory approach. Applications for limb activation, VST, neck muscle vibration, electrical stimulation, trunk rotation and prism adaptation, among others, will be explored.

### **Instruction Level:** Intermediate Objectives:

- 1. Identify and describe the types/sub-types of neglect.
- 2. Identify and describe relevant screening/assessment and intervention options.
- 3. Identify research/evidence base supporting selected interventions.

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, CRCC: 2

### **C35.** Basic Concepts in Vision Rehabilitation: Stages of Visual Processing and Visual **Acuity vs. Visual Utility**

August Colenbrander, MD 3:30-5:30 pm | Grand Ballroom B

The course discusses a systematic approach to topics that are fundamental to vision rehabilitation, but that are often taken for granted, without in-depth discussion. These include: aspects of vision and vision loss - how the eye functions versus how the person functions; assessment of visual functioning – different aspects require different assessments; stages of visual processing – the mental model versus the retinal image; estimates of Visual Utility – the sharpness of vision versus its usefulness; and the Functional Vision Score – putting numbers to visual functioning.

### **Instruction Level:** Introductory Objectives:

- 1. Understand that terms used to describe how the eye functions do not necessarily define how the person functions.
- 2. Describe the difference between visual function and functional vision.
- 3. Understand that rehabilitation plans must reflect the differences between individuals. Eligibility rules are deliberately based on statistical averages in order to ignore individual

CEUS: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

### C36. Educational Concerns for Students With **Albinism**

Chrissy Cowan, TVI 3:30-5:30 pm | Grand Ballroom G

This presentation provides an overview of educational services, including psychosocial intervention, needed to support students with albinism, beginning with early childhood through high school. Topics will include eligibility, literacy, role of the Teacher of Students with Visual Impairments across the age span, and resources available to support students and their families.

### **Instruction Level:** Introductory **Objectives:**

- 1. Provide accurate medical and educational information to families and students.
- 2. Make informed recommendations for educational accommodations.
- 3. Access tools and methods to support psychosocial and self-advocacy needs of students.

CEUs: ACVREP: 2, AOTA: 2, CRCC: 2

### **R7.** Research on Employment

Moderator: Deborah Gold, PhD 3:30-5:30 pm | Gateway Ballroom 4

3:30 pm - Pre-employment Skills for Children Aged 5-14 With Vision Loss: An Evidence-Based Model for Resource Development. Biljana Zuvela, MA

3:55 pm – Transition Services that Lead to Competitive **Employment Outcomes for Transition-age Individuals with** Blindness or Visual Impairments.

B.J. LeJeune. CRC. CVRT

4:20 pm – UK Employment Pilot Projects: Research to Practice. Karen Wolffe, PhD

4:45 pm - Supervising People Who Are Blind or Visually Impaired: A Qualitative Study of Employer Attitudes. Deborah Gold, PhD

**Instruction Level:** Intermediate



### Objectives:

- 1. Identify research findings on childhood preparation, transition, employment preparation and employer attitudes.
- 2. Compare and contrast very different types of research methods in employment issues.
- 3. Describe the range of issues affecting different age groups when it comes to employment.

CEUs: ACVREP: 2, AOTA: 2, CRCC: 2

# Saturday, September 24

### C37. OT: Optics for Therapists

James Deremeik, CLVT Alexis Malkin, OD Robert Massof, PhD 8-10 am | Grand Ballroom A

This presentation will be a lecture and hands-on workshop to gain a clinical understanding of optics. Theory and practical application will allow therapists to communicate with prescribing doctors and have an interactive session to master training techniques with optical devices for near tasks emphasizing spectacle and hand-held magnifiers.

### **Instruction Level:** Introductory Objectives:

- 1. Therapists and low vision clinicians (optometrists and ophthalmologists) will be able to communicate effectively in a common language regarding the magnification needs and requirements of the low vision patient.
- 2. Participants will garner an understanding of the optical and functional characteristics of low vision devices from hands-on experiential training simulation.
- 3. Participants will develop a strong working knowledge of the principles of optics as they relate to clinical low vision, emphasis will be placed upon equivalent add. Therapists will become more confident and comfortable in training low vision patients.

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

### C38. Visual Changes in Veterans Following **Blast Injuries**

Kia Eldred, OD Tonya Mennem, OT, CLVT 8-10 am | Grand Ballroom E, F

This presentation explores the most frequently identified visual changes in veterans following blast injuries. Screening questions and examination procedures will be discussed. Intervention strategies, case studies and results of training will demonstrate the benefit of OT/OD intervention.

### **Instruction Level:** Intermediate **Objectives:**

- 1. Identify evidence-based literature available on visual changes following blast injuries.
- 2. Identify screening questions to increase ability to recognize visual changes and to identify examination steps to diagnose and objectively measure visual changes following blast injuries.
- 3. Identify best practice interventions following blast injuries. CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2



### S39. Special Considerations for the Oldest **Patients in Low Vision Rehabilitation**

Jennifer Gendeman, OTD Lauren Nisbet, OT Kimberly Schoessow, OTD 8-10 am | Grand Ballroom B

This presentation will explore unique factors affecting uptake of vision rehabilitation by the oldest of the old including personal and environmental barriers associated with aging. Residential options for the elderly will be discussed. Data will demonstrate how changing an OT model in one clinic enhanced rehabilitation for the oldest patients.

### **Instruction Level:** Introductory Objectives:

- 1. Understand barriers to providing low vision rehabilitation to the oldest members of our population.
- 2. Describe pros and cons of aging in place versus living in senior housing communities.
- 3. Describe environmental modifications that can increase participation for patients who live in senior housing.

CEUs: ACVREP: 2, AOTA: 2, CRCC: 2

### **S40.** Severe Brain Injury and Vision Loss: **Challenges and Steps Toward Progress**

B.J. LeJeune, CRC, CVRT 8-10 am | Grand Ballroom G

This introductory presentation is designed to help clinical and instructional staff who may be working for the first time with a person who has had a severe brain injury in addition to vision loss. The discussion will include an overview of various brain functions impacted by injury including vision, methods of measuring brain injury severity, potential impact of brain injury on behaviors and functional abilities, implications for teaching and learning, and resources.

### **Instruction Level:** Introductory Objectives:

1. Participants will learn to identify issues that are related to different areas and types of brain injuries.

2. Participants will be able to identify some strategies that are useful in assessing, teaching and optimizing functioning and behavior.

**Sessions** 

3. Participants will recognize the uniqueness and challenges associated with brain injury.

CEUs: ACVREP: 2, AOTA: 2, CRCC: 2

### **R8.** Low Vision Research: **Hot off the Press**

Moderators: George Timberlake, PhD: Ronald Schuchard, PhD 8-10 am | Gateway Ballroom 4

This symposium presents late-breaking low vision research recently approved for publication. Current topics in addressing interventions for the low vision patient will be discussed.

8 am - A Survey of Demographic Traits and Assistive Device Use in a Blind Cohort. Amy Nau, OD

8:20 am - Barriers to Vision Rehabilitation: The Montreal Study. Olga Overbury, PhD; Walter Wittich, PhD

8:40 am - Does Improving Vision Reduce the Risk of Falls? A Review. J. Vernon Odom. PhD

9 am - Effect of Bilateral Macular Scotomas From AMD on Reach-to-Grasp Hand Movement. George T. Timberlake, PhD

9:20 am - A Test of Face Discrimination Ability in Aging and Vision Loss. Ronald A. Schuchard. PhD

### **Instruction Level:** Intermediate Obiectives:

- 1. Identify leading demographic traits in assistive device use.
- 2. Identify major barriers to patients accessing vision rehabilitation services
- 3. Recognize the impact of age-related eve disease to patient risk for falls, decreased reach-to-grasp movement and decreased face discrimination ability.

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2



# C41. The Visually Impaired Driver – An Optometric Perspective

Deena Sandall, OD 10:15-11:15 am | Grand Ballroom A

This presentation addresses the topic of treating the visually impaired driver. There are many things to consider when approaching the topic of driving with a visually impaired patient. The emotional, physical and legal aspects of driving will be discussed.

# Instruction Level: Introductory Objectives:

- 1. Discuss the emotional, physical and legal aspects of treating the visually impaired driver.
- 2. Receive an introduction to fitting bioptics.
- 3. Discuss the differences between treating a new driver versus an elderly driver.

CEUs: ACCME: 1, ACVREP: 1, COPE: 1, CRCC: 1

### C42. 2011: What's New? 1) New Ideas About Charles Bonnet Syndrome; 2) The Implantable Miniature Telescope Update; 3) What's New in Macular Perimetry

Mary Lou Jackson, MD 10:15-11:15 am | Grand Ballroom E, F

This presentation will discuss new information related to three important topics in vision rehabilitation. 1) Charles Bonnet Syndrome is diagnosed when patients with vision loss experience visual hallucinations and have insight into the unreal nature of the images they see. Recent literature presents new ideas about this syndrome which will be outlined in this presentation. 2) The Implantable Miniature Device is a telescope that is implanted into the eye when a cataract is removed, rather than implanting an intraocular lens. This device recently obtained FDA approval in the United States. The status of insurance coverage and implantation will be reviewed. 3) Macular perimetry allows for central field assessment even when patients cannot fixate centrally due to macular disease. Three devices are currently available in the United States and they will be reviewed and compared.

# Instruction Level: Intermediate Objectives:

- 1. Review recent literature and theories related to Charles Bonnet Syndrome.
- 2. Review the status of funding, implantation and patient selection for the Implantable Miniature Telescope.
- 3. Review options for macular perimetry and appreciate the evaluation of scotomas and fixation.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

# C43. Home Lighting Assessment and Modifications

Monica Perlmutter, OT, CLVT
Nancy Krusen, OT, PhD
10:15-11:15 am | Grand Ballroom B

The purpose of the session is to enable practitioners to understand the effects of age and disease on vision, understand lighting needs, and the benefits of optimal lighting. Participants will learn about the development of a home environment lighting measure, apply lighting modifications and identify resources for additional learning.

# Instruction Level: Intermediate Objectives:

- 1. Describe the effects of age and disease on the eye and impact on lighting needs.
- 2. Identify the benefits of optimal lighting and lighting standards, applying practical lighting modifications.
- 3. Explain the development of a new home environment lighting measure.

CEUs: ACVREP: 1, AOTA: 1, CRCC: 1

# C44. Vision Impairment: The Impact on Social Cognition and Social Ability

Carolyn Palmer, PhD 10:15-11:15 am | Grand Ballroom G

This presentation focuses on the social ability of a small group of students with vision impairment. Two aspects were investigated – students' levels of social cognition and their ability to process social cues appropriately in various situa-

tions. Data was gathered from parent and teacher interviews and three aspects of the Social Emotional Dimensional (SEDS) questionnaire, which was used to measure teachers' perceptions of students' social understanding and social behavior. The data revealed that the most obvious aspects of social ability that were of concern were social cognition, particularly in respect to students with albinism and the likelihood that these children, as reflected in this study, may say and do inappropriate things and show inappropriate feelings.

# Instruction Level: Intermediate Objectives:

**Envision Conference 2011** 

- 1. Recognize that social cognition is considered an important mediator in the socialization process.
- 2. Identify the impact of vision impairment on students' levels of social cognition.
- 3. Recognize the impact of vision impairment on young people's ability to process social cues appropriately in various situations.

CEUs: ACVREP: 1, AOTA: 1, CRCC: 1

### **R9.** Diagnostics and Assistive Technology

Moderator: Robert Massof, PhD 10:15 am-12:15 pm | Gateway Ballroom 4

10:15 am – The BrainPort® Vision Device: A Visual Information Prosthetic for the Blind. *Amy Nau, OD* 

10:40 am – The Retinal Locus for Reading: What We Can Learn From Text Location on the Retina Just Before Word Enunciation. *Joshua Pratt, OD* 

11:05 am – Evaluation of Fixation Stability by Bivariate Contour Ellipse Area (BCEA) Using the MP-1 Microperimeter in Mild Visually Impaired Patients. *Maria Enzo Vingolo, MD, PhD; Serena Salvatore, MD* 

11:30 am – Developing a Model to Predict Low Vision Users' Performance When Operating Small Visual Displays. Lisa Maunev. MS

11:55 am – Envision Assistive Technology Camp: Results of Computer Training for Youth With Low Vision and Blindness. Shannon Riley, MA

# Instruction Level: Intermediate Objectives:

- 1. Present information on a device designed to communicate visual information to blind individuals.
- 2. Present findings from the use of audio recordings combined with Scanning Laser Ophthalmoscopy (SLO) in the assessment and treatment of four patients with bilateral central scotomas.
- 3. Present the results of a computer and assistive technology training camp for youth who are blind or have visual impairment

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

# C45. Utilizing a Nonprofit for Providing Comprehensive Statewide Low Vision Care to School-age Children

Jennifer Coy, TVI, CLVT, COMS
Scott McDougal, OD
John Thompson
11:15 am-12:15 pm | Grand Ballroom A

This presentation highlights the outcomes of using a nonprofit for supporting a comprehensive, multidisciplinary, mobile low vision clinic for providing comprehensive care to school-age children with low vision. Discussion centers on how to provide exceptional pediatric care that embraces the student and family, the student's educational team and the learning environment.

# Instruction Level: Introductory Objectives:

- 1. Identify steps for developing a model low vision program.
- 2. Describe key components of a low vision program that uses a best practice approach for providing services.
- 3. List resources for teaching strategies for instructing students on how to use devices.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1



### C46. Managing Vision and Patients in the **Anti-VEGF Era**

Judith Goldstein, OD 11:15 am-12:15 pm | Grand Ballroom E, F

This course introduces the team of rehabilitation professionals to the considerations of vision, function, prescribing and intervention for vision enhancement in patients receiving anti-angiogenic/anti-VEGF therapy for neovascular macular degeneration.

### **Instruction Level:** Intermediate Obiectives:

- 1. Understand the clinical and functional course of patients receiving anti-angiogenic therapy.
- 2. Review preliminary data of responsiveness to low vision intervention by patients in various visual acuity subgroups as observed in the Low Vision Rehabilitation Outcomes Study.
- 3. Using clinical case studies, understand how to best measure, assess and prescribe for improving reading function in patients with macular disease.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

### C47. Incorporating Leisure and Social Participation into the Clinical Setting

Karla Sternberg, OT, CLVT 11:15 am-12:15 pm | Grand Ballroom B

This presentation will identify factors that limit social and leisure participation in the older adult with vision impairment and identify strategies to assess a person's level of social functioning, engagement and mental health status. Intervention strategies, including the implementation of a social program to promote engagement in these areas of occupation, will be detailed.

### **Instruction Level:** Introductory **Objectives:**

1. Review current literature regarding social participation, engagement in occupation, and depression in the older adult population with vision impairment.

- 2. Describe standardized assessment tools used to identify social functioning, engagement in daily activities and depression, as well as use of standardized assessment tools to provide outcome measures.
- 3. Describe the development of a pilot program designed to address social and leisure participation needs within an outpatient clinical setting.

CEUs: ACVREP: 1, AOTA: 1, CRCC: 1

### C48. Free and Practical Ways of Providing PC **Access to Low Vision Patients**

Deborah Gilden, COMS, PhD 11:15 am-12:15 pm | Grand Ballroom G

This presentation demonstrates how features built into MS Windows, MS Office applications, web browsers and computer mice can serve as affordable tools for providing PC access to many with low vision. It also includes information on some inexpensive hardware solutions, and tips on designing more visible PowerPoint presentations.

### **Instruction Level:** Intermediate Objectives:

- 1. Show patients at least four ways of enlarging text on a PC without using Windows Accessibility features.
- 2. Enlarge displays in web browsers and email messages.
- 3. Change the contrast of Word documents and PowerPoint presentations, and save these as new defaults.

CEUs: ACVREP: 1, AOTA: 1, CRCC: 1

### C49. Use of Prism in Vision Rehabilitation

Kia Eldred, OD Tonya Mennem, OT, CLVT 1:30-3:30 pm | Grand Ballroom A

This presentation explores both temporary and permanent prism as a tool in vision rehabilitation. Specific methods to determine the amount, direction and position of prism, as well as time line for use and training that should accompany the fitting of prism, will be reported. Diagnoses that will be discussed include binocular vision disorders, visual field loss and hemispatial neglect.

### **Instruction Level:** Introductory **Objectives:**

- 1. Differentiate uses of prism for varying diagnoses in vision rehabilitation.
- 2. Identify methods to rehabilitate patients with diplopia, visual field loss, ergonomic limitations and hemispatial neglect.
- 3. Recognize methods to train patients to utilize prism to enhance vision for functional tasks.

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

### C50. Vision Development for Children With Low Vision

Bill Takeshita. OD 1:30-3:30 pm | Grand Ballroom E, F

This workshop will teach attendees about the most common causes of vision impairment among children, and how to promote vision development in children with cortical vision impairment, optic nerve hypoplasia, and retinopathy of prematurity. The use of patching and glasses will also be discussed.

### **Instruction Level:** Intermediate Objectives:

- 1. Describe the most common causes of vision impairment of children.
- 2. Describe how vision is learned and developed.
- 3. Describe various treatment activities, as well as visual aids/technology to enhance the vision of children.

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

### C51. Vision Rehabilitation: Using Theory and **Research in the Exam Room**

Shirin Hassan, OD, PhD Elli Kollbaum, OD 1:30-3:30 pm | Grand Ballroom B

Using real-life case examples, this course will show how low vision theory and the results of low vision research can be successfully applied to the clinical management of functional problems presented by individuals with visual impairment. The clinical cases that will be presented will cover such topics

as prescribing distance and near magnification, assessing and managing the low vision driver, and maintaining the efficiency and safety of ambulatory mobility in low vision patients.

### **Instruction Level:** Intermediate Objectives:

- 1. Learn about the theory and the procedures used for assessing vision and functional performance in low vision patients in the areas of low vision and driving, mobility and prescribing distance and near magnification.
- 2. Learn about the results of low vision research that has shaped the clinical assessment and management of low vision patients for driving, mobility and prescription of distance and near magnification.
- 3. Develop an understanding on how to successfully manage a variety of functional problems commonly presented by individuals with visual impairment.

CEUs: ACCME: 2. ACVREP: 2. AOTA: 2. COPE: 2. CRCC: 2

### C52. Low Vision Technology: Resources for **Keeping Abreast of What's New**

Ike Presley, TVI, CLVT 1:30-3:30 pm | Grand Ballroom G

The rapidly changing world of low vision technology makes it difficult for practitioners to stay abreast of the latest developments in hardware and software. The American Foundation for the Blind has developed numerous online resources and a cadre of trainers to meet this need

### **Instruction Level:** Introductory **Objectives:**

- 1. Identify three resources that can be used to keep up with the latest developments in low vision technology.
- 2. Identify at least three major categories of low vision technology.
- 3. Identify at least three categories of low vision technology that are experiencing rapid growth and change.

CEUs: ACVREP: 2, AOTA: 2, CRCC: 2



### R10. Low Vision and Psychological Functioning

Moderator: Laura Dreer. PhD 1:30-3:30 pm | Gateway Ballroom 4

The link between visual impairment and reduced psychological functioning is now well-established, particularly for older adults. Psychological status can influence the severity of vision-related disability, affecting recreational activities, activities of daily living and driving. This presentation explores the impact low vision has on psychological functioning.

1:50 pm - The Impact of Depression on the Actual and Perceived Effects of Reading. Patricia Grant, MS

2:10 pm - Vision Impairment: The Impact on Social Cognition and Social Ability. Carolyn Palmer, PhD

2:30 pm - On-Road Driving Performance of Moderate/ Advanced Glaucoma Patient. Anjali Bhorade, MD

### **Instruction Level:** Introductory **Objectives:**

- 1. Recognize the impact low vision has on patient's psychological functioning.
- 2. Explore how depression is related to quantitative outcome measures of visual function.
- 3. Identify the impact of emotional support and counseling intervention services provided as part of an integrated low vision rehabilitation pathway.

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, CRCC: 2

### C53. Optometric Management of Peripheral Field Loss

Ana Perez, OD 4-5 pm | Grand Ballroom A

Peripheral field defects cause functional disability in daily living activities. Treatment options will concentrate on overall constrictions and hemianopsias. Specifics for choosing good candidates, prescribing, fitting, and initial training will be addressed, recognizing that a multidisciplinary approach is essential to ensure the in-office skills are transferred into a real-world setting.

### **Instruction Level:** Introductory Obiectives:

- 1. Understand the need to consider optical intervention in cases of peripheral field loss.
- 2. Determine the most appropriate optical intervention based on the patient's clinical data.
- 3. Understand the necessary initial training skills needed for successful adaptation.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

### C54. Determining Statutory Blindness and Visual Disability

David Lewerenz, OD 4-5 pm | Grand Ballroom E, F

Since 2007, modern methods of assessing visual acuity and visual fields can be used to evaluate patients for statutory blindness. Evaluating the suspected malingerer, ethical considerations and providing documentation are related issues. Determining percent of vision requires use of the AMA's Guides to the Evaluation of Permanent Impairment.

### **Instruction Level:** Intermediate Objectives:

- 1. Describe how a person might qualify for statutory blindness in light of changes in regulations that have been in effect since 2007.
- 2. Identify evaluation tools for a suspected malingerer and explain the ethical considerations for discussing statutory blindness.
- 3. List the features of a document that satisfactorily provides authentication of statutory blindness.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1



### C55. Medicare Reimbursement and Low Vision **Rehabilitation: Current Status**

James Deremeik, CLVT 4-5 pm | Grand Ballroom B

This presentation will give a brief history of Medicare reimbursement for low vision rehabilitation services and equipment. Current Medicare policy for low vision rehabilitation services and equipment will be reviewed. Strategies will be identified for future consideration for reimbursement by Medicare for low vision service providers and equipment.

### **Instruction Level:** Introductory Objectives:

- 1. Understand the history of Medicare reimbursement for low vision rehabilitation services and equipment.
- 2. Identify low vision rehabilitation service providers who are eligible for Medicare reimbursement.
- 3. Identify strategies to obtain Medicare reimbursement for low vision rehabilitation services and equipment.

CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, CRCC: 1

### C56. Seize the Moment! Video Documentation of Student Performance

John Rose, MA 4-5 pm | Grand Ballroom G

Advances in digital technology (e.g. flip cameras, phones, consumer-editing software) have made video documentation of student performance an accessible component for recording progress. This presentation describes strategies for effective videography and methods for sharing videos so that students' educational teams can develop goals and implement academic and ECC skills.

### **Instruction Level:** Introductory Objectives:

- 1. Identify uses of video to document student performance for establishment of goals and evidence of progress.
- 2. Analyze student video for documenting progress and for classroom application.
- 3. Describe techniques of effective filming and editing using affordable equipment in the educational setting.

CEUs: ACVREP: 1, AOTA: 1, CRCC: 1

### C57. Writing for Publication: What's the Difference?

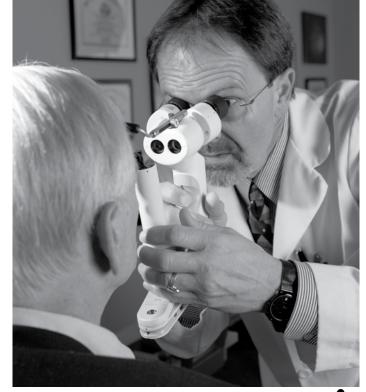
Deborah Gold, PhD J. Vernon Odom, PhD 4-5 pm | Gateway Ballroom 4

This session aims to provide participants (whether graduate students, new researchers, clinicians or rehabilitation providers) with all of the concrete tools for understanding the scholarly publication process. This session will provide a variety of perspectives to deliver the workshop. A publisher, an editor, two reviewers and at least two published authors will provide their views, give examples from their experiences, and answer questions of those who wish to learn more about becoming published.

### **Instruction Level:** Intermediate Obiectives:

- 1. Describe three pitfalls in writing for publication.
- 2. Describe the process for scientific peer review of manuscripts at one journal.
- 3. List four advantages to publishing written work.

CEUs: ACVREP: 1, AOTA: 1, CRCC: 1





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# **Speakers**

Speakers are listed alphabetically followed by the sessions they are presenting and their biography. If a session number is preceded with the letter C or R, see the Sessions section for a course description. If preceded with a W, see the Workshops section.

### Erika Andersen, CLVT

**C20.** Adjusting to Driving Cessation: Training Distance Visual Skills and Use of Bioptics for the Role of Active **Passenger** 

Erika Andersen is a certified low vision therapist practicing on the Visual Impairment Services Outpatient Rehabilitation (VISOR) team at the Eastern Colorado Health Care System Medical Center in Denver, Colorado. She has presented nationally and internationally on low vision topics and has been active on subject matter expert committees for low vision therapy. Most recently, Erika co-authored the chapter, "Instruction in the Use of Optical Devices for Children and Youths with Low Vision" in the second edition of *Foundations in Low Vision* published in 2010.

### Rosemary Armour, OT, CBIS

W5. Hands-on Workshop on Rehab of Hemianopia

Rosemary Armour is currently the Vision and Driving Program Director at the Rehabilitation Hospital of Indiana (RHI) and has more than 15 years experience in vision rehabilitation. She received her occupational therapy degree in 1989, but did not get her start in vision rehabilitation until after her daughter went through vision therapy at Ossip Optometry. Shortly after, she began working at Ossip and obtained postgraduate training by completing Mitch Schiemann's and Mary Warren's course. She worked with Ossip for seven years, and then started her own practice with Ossip where she added a driving program and three occupational therapists with vision rehab experience. RHI bought the practice three years ago. Rosemary works primarily with brain injury and stroke patients, but also sees children with learning disabilities and low vision patients.

### Beth Barstow, MS, OTR/L, SCLV

C7. Physical Activity and Low Vision: How Do We Facilitate This Important Occupation?

Beth Barstow, MS, OTR/L, SCLV, is an assistant professor of Occupational Therapy at University of Alabama at Birmingham. She joined the faculty in 2004 to lend her expertise to completing the development of the graduate certificate program and to teach in the program. Beth has extensive clinical experience working with persons with spinal cord injury, stroke and low vision. Prior to joining the UAB faculty, she directed the occupational therapy services at the UAB Center for Low Vision Rehabilitation. Beth possesses AOTA Specialty Certification in Low Vision Rehabilitation.

### Anjali Bhorade, MD

**R6.** Functional Performance and Outcomes

R10. Low Vision and Psychological Functioning

Dr. Anjali Bhorade is an assistant professor in the Department of Ophthalmology and Visual Sciences at Washington University School of Medicine in St. Louis. She sees patients at the Center for Advanced Medicine Eye Center located on the Kingshighway medical campus. Her specialties include the diagnosis and management of adult glaucoma, imaging of the optic nerve and nerve fiber in glaucoma, and neurological disorders of the eve.

### Ava Bittner, OD, PhD

**R6.** Functional Performance and Outcomes

Dr. Ava Katherine Bittner received her Optometry degree from the Pennsylvania College of Optometry in Philadelphia, and her PhD in clinical investigation from the Johns Hopkins School of Public Health. She completed a clinical research post-doctoral fellowship at the Johns Hopkins Wilmer Eye Institute before joining the faculty as an assistant professor. Dr. Bittner's research is examining the relationships between

psychosocial factors and day-to-day variations in vision or photopsias among visually impaired patients with retinal degeneration or glaucoma, and she aims to design and conduct clinical trials involving interventions for these patients in the future. Her research interests include the psychophysical assessment of the healthy and diseased visual system, both to increase the understanding of this system and to develop tools to monitor disease and therapeutic outcomes.

### John Brabyn, PhD

**R3. Dual Sensory Impairment** 

Dr. Brabyn is the CEO/Executive Director of the Smith-Kettlewell Institute. Dr. Brabyn's research interests are in blindness, visual impairment and their rehabilitation. The research goal at the Rehabilitation Engineering Research Center at Smith-Kettlewell is to develop and apply new scientific knowledge and practical, cost-effective devices to better understand and address the real-world problems of blind, visually impaired and deaf-blind consumers.

### John Coalter, OD

R1. Health States of Patients Seeking Outpatient Low Vision Rehabilitation Services Within LOVRNET

Dr. John Coalter is Clinical Director at Spectrios Institute for Low Vision Services in Wheaton, III.



### August Colenbrander, MD

C35. Basic Concepts in Vision Rehabilitation: Stages of Visual Processing and Visual Acuity vs. Visual Utility

Dr. Colenbrander's principal clinical interest is in low vision rehabilitation. From 1974 to his clinical retirement in 1998, he served as Director of the California Pacific Low Vision Services. He has promoted a multidisciplinary team approach for service delivery for the visually handicapped, conducted several studies of vision requirements in the work environment and served on national and international committees, including the Committee on Low Vision Rehabilitation of the American Academy of Ophthalmology. He was a founding Board member of the International Society for Low Vision Research and Rehabilitation (ISLRR) and represents the sub-specialty of Vision Rehabilitation on the Advisory Committee of the International Council of Ophthalmology (ICO). He is a member of the faculty of the Department of Ophthalmology at California Pacific Medical Center and an affiliate scientist at the Smith-Kettlewell Eve Research Institute.

### Erin Connors

R4. Mobility Panel

Erin Connors is a research assistant at the Vision Rehabilitation Center of the Massachusetts Eye and Ear Infirmary.

### Kenneth Cooper, MSW

**R3.** Dual Sensory Impairment

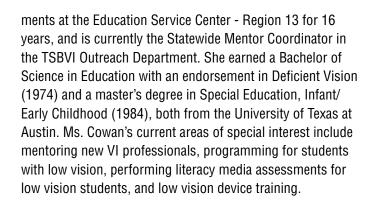
Kenneth Cooper received his Master of Social Work degree from McGill University in Montreal in 1998. He currently serves as Clinical Coordinator and Social Worker for the Deaf and Hard of Hearing Program at the Montreal Association for the Blind (MAB), where he has worked since 1995.

### Chrissy Cowan, TVI

C4. Reading Literacy Intervention for Students With Low Vision

C36. Educational Concerns for Students With Albinism

Chrissy Cowan has been an itinerant teacher for children with visual impairments in Austin and surrounding areas for 15 years, an education specialist in the area of visual impair-



### Jennifer Coy, TVI, CLVT, COMS

C45. Utilizing a Nonprofit for Providing Comprehensive Statewide Low Vision Care to School-age Children

Jennifer is a certified low vision therapist, teacher of students with visual impairments, and orientation and mobility specialist. She has nearly 15 years of experience teaching children with low vision. She has been lead director of two statewide low vision projects and has authored or co-authored numerous publications on the topic of low vision and teaching children how to use optical devices.

### Kara Crumbliss, OD

C33. Depression and Dementia: Managing Common **Comorbidities in Vision Rehabilitation** 

Dr. Crumbliss received her optometry degree from the Illinois College of Optometry in 2003 and completed a residency in Low Vision and Ocular Disease at the ICO and the Deicke Center for Visual Rehabilitation in 2004. Upon joining the faculty of the Illinois College of Optometry on a part-time basis in 2004, she also began practice as a low vision consultant with The Chicago Lighthouse. Dr. Crumbliss is currently the Director of Clinical Services at The Chicago Lighthouse. She also works as the Coordinator of ICO's Low Vision and Ocular Disease Residency and as an Associate Clinical Professor in the Primary Care and Low Vision Rehabilitation Services of the Illinois Eye Institute. Her research interests include the association of low vision with Charles Bonnet Syndrome, cognitive impairment and Alzheimer's.



James Deremeik, CLVT

C37. OT: Optics for Therapists

C55. Medicare Reimbursement and Low Vision **Rehabilitation: Current Status** 

James Deremeik is the Education/Rehabilitation Program Manager at the Johns Hopkins Lions Low Vision Research and Rehabilitation Center of the Wilmer Eye Institute in Baltimore, Maryland. Mr. Deremeik is a faculty member of the Johns Hopkins University School of Medicine, participating in collaboration on research projects, teaching professionals low vision rehabilitation, and the provision of low vision rehabilitation care to low vision patients in his role as Education/Rehabilitation Program Manager. He has served in this position since December 1994.

### Laura Dreer. PhD

**R10.** Low Vision and Psychological Functioning

Laura Dreer, PhD, is Assistant Professor of Ophthalmology at the University of Alabama at Birmingham. Dr. Dreer also has secondary appointments in the Department of Neurology and Psychology. She is a licensed clinical psychologist with specialty training in medical rehabilitation psychology, health behaviors, aging, psychosocial intervention development and neuropsychology. Laura's areas of clinical-research concentration are two-fold: examining the role of problem-solving strategies and psycho-educational interventions in the adjustment process to serious chronic medical conditions and evaluating impairment and recovery of competency (i.e., medical decision-making, finances) in chronic health conditions. Her previous clinical-research has included spinal cord injury, chronic pain, brain tumors, traumatic brain injury, stroke, congestive heart failure, and Alzheimer's disease, and she is now extending her expertise in rehabilitation and neuropsychology to the field of low vision rehabilitation.



### Kia Eldred, OD

W1. Workshop on Prism Adaptation Therapy for Hemispatial Neglect Associated With Brain Injury or Stroke

C38. Visual Changes in Veterans Following Blast Injuries

C49. Use of Prism in Vision Rehabilitation

Dr. Eldred received her Optometry degree at the University of Houston College of Optometry and served on the faculty there for 20 years. She is currently employed as a staff optometrist at the Michael E. DeBakey VA Medical Center in the VISOR program. She is affiliated as an adjunct professor at the University of Houston College of Optometry and works with children with multiple disabilities in the NOVA clinic. Dr. Eldred had been a consultant at the Institute for Rehabilitation and Research in the Texas Medical Center for 18 years. She serves as a vision rehabilitation consultant to Region III and Region IV Educational Service Centers in the state of Texas. She is a Low Vision Diplomate in the American Academy of Optometry and serves as the Chair of the TBI Optometric Workgroup for the VA system. Other interests in optometry include international mission trips with the Fellowship of Christian Optometrists.



### Donald Fletcher, MD

W3. Evaluating the Macula and Establishing PRL for Low **Vision Rehabilitation** 

C27. Pearls from Challenging Geriatric LVR Cases

Donald C. Fletcher, MD, is a clinician and researcher in the field of retinal diseases and low vision rehabilitation. Dr. Fletcher is a medical doctor and ophthalmologist who has completed fellowship training in both retinal diseases and in low vision rehabilitation. For the last 23 years he has focused on rehabilitation of the visually impaired, caring for more than 20,000 low vision patients, teaching many others how to perform this work and contributing with his research colleagues to create better understanding of rehabilitation. He currently holds positions at Smith-Kettlewell Eye Research Institute and California Pacific Medical Center Department of Ophthalmology in San Francisco, Calif., Helen Keller Foundation for Research and Education in Birmingham, Ala., Retina Consultants of Southwest Florida in Fort Myers, Fla. and serves as the Medical Director for the Envision Vision Rehabilitation Center in Wichita, Kan.

### Erin Flynn-Evans, PhD

R2. Trouble Seeing...Trouble Sleeping: How Are They Related?

Erin Elizabeth Flynn-Evans, PhD, is a research fellow in medicine at Harvard Medical School and a research associate for the Department of Medicine, Brigham and Women's Hospital. Her major research interests include determining what photic and non-photic factors affect total melatonin production, and thereby might influence risk of breast cancer in women. Her research employs epidemiological methods to survey approximately 12.000 blind women in order to obtain estimates of the distribution of known risk factors for breast cancer.

### Sandra Fox. OD

C29. Lenses, Lighting and Lemonade: Getting Back to the Basics!

Sandra Fox obtained her Optometry degree from the University of Houston College of Optometry in 1986. She established a solo private practice in Corpus Christi, Texas, and provided low vision services within a general optometry practice. She joined the University of Texas Health Science

Center at San Antonio Department of Ophthalmology in 1999 to help develop a low vision service. The Lions Low Vision Center of Texas was established in 2003 and utilizes a multidisciplinary approach to low vision rehabilitation that includes ophthalmology, optometry and occupational therapy. She helped establish the San Antonio Low Vision Task Force to improve community awareness concerning low vision rehabilitation and is involved with Haven for Hope in San Antonio.

### Jean-Pierre Gagné, PhD

**R3.** Dual Sensory Impairment

Jean-Pierre Gagné obtained a doctorate from the Central Institute for the Deaf, Washington University (St. Louis, Mo.). Dr, Gagné holds a Master of Science in Audiology and Aural Rehabilitation from McGill University (1978) and a PhD in Communication Sciences and Audiology from Washington University (1983). Presently, he is a Professor at the École d'orthophonie et d'audiologie, faculté de medicine, at the Université de Montréal where he teaches undergraduate and graduate-level courses in Audiological Rehabilitation.

### Jennifer Gendeman, OTD

C39. Special Considerations for the Oldest Patients in Low **Vision Rehabilitation** 

Jennifer Gendeman, OTD, is an occupational therapist at Envision Vision Rehabilitation Center, serving additional patients in Northeast Kansas. She graduated from Washington University in St. Louis, Mo., in 2010 with a doctorate in Occupational Therapy. She then completed a fellowship at the Massachusetts Eye and Ear Infirmary in Boston, Mass. Her research interests include occupational performance of older adults with low vision and assessment of lighting and treatment using lighting modifications.

### Keith Gentry, MS, OTR/L, SCLV

C34. Beyond "Look to the Left"...Understanding Unilateral Visual Neglect (UVN): Anatomy, Assessment and **Intervention Options With Links to Evidence-based Practice** 

With more than a decade of experience in addressing core visual skills across the life span, Mr. Gentry has promoted the inclusion of functional visual evaluation and intervention as an essential area of occupational therapy practice and draws

from diverse clinical experience in multiple settings across the continuum of care. Mr. Gentry has earned the AOTA Specialty Certification in Low Vision (SCLV), has served as a portfolio reviewer for the AOTA specialty certifications and currently serves on the AOTA Board for Accreditation and Specialty Certification (BASC). Additionally, Mr. Gentry serves as adjunct faculty for Radford University in the MSOT program on the topic of Neuro and Low Vision.

### Deborah Gilden, PhD, COMS

C48. Free and Practical Way of Providing PC Access to Low **Vision Patients** 

Deborah Gilden, PhD, is the Associate Director of the Rehabilitation Engineering Research Center at The Smith-Kettlewell Eve Research Institute in San Francisco. As a result of her work at Smith-Kettlewell and her degrees in Speech Therapy, Orientation and Mobility for the Blind, and Experimental Psychology, she brings an eclectic perspective to the area of computer access by people with low vision. Dr. Gilden also brings a special understanding to those who feel uncomfortable with computers, as she herself has migrated from being computer phobic to being computer addicted.

### Deborah Gold, PhD

C16. Assisting Clients With Employment Preparation: How to Use the CNIB TAPE Measure

**R7. Research on Employment** 

C57. Writing for Publication: What's the Difference?

Deborah Gold joined CNIB in 2000, and since 2002 she has been responsible for the development of CNIB's social research program. In this role, she has acquired funding for several key research projects and established valuable partnerships with academics and research funders. Dr. Gold holds a PhD in Special Education from Syracuse University (1995). focusing on social policy and disability. She has worked in the disability field as a researcher, academic lecturer, administrator, residential counselor and recreation therapist.





R1. Health States of Patients Seeking Outpatient Low Vision Rehabilitation Services Within LOVRNET

C46. Managing Vision and Patients in the Anti-VEGF Era

Dr. Goldstein is Chief of Low Vision Clinical Services at Johns Hopkins University and directs clinical and teaching activities at Wilmer Eye Institute, provides low vision rehabilitative care to patients, and participates in clinical research. A graduate of the State University of New York at Binghamton, Dr. Goldstein earned her doctorate in Optometry at the State University of New York College of Optometry in 1993 and completed her residency at the Baltimore Veterans Administration Medical Center in conjunction with Wilmer Eye Institute at Johns Hopkins. Specially trained in low vision care and ocular diseases, Dr. Goldstein provided low vision care to patients at her private clinical practice for over a decade while directing the Low Vision Service at University of Maryland. Dr. Goldstein joined Wilmer Eye Institute in 2006 to lead the clinical care and teaching program, and in 2008, developed the Johns Hopkins accredited Lions Fellowship Training Program. A Fellow of the American Academy of Optometry, Dr. Goldstein has lectured on the identification and treatment of retinal disorders and vision rehabilitation at national and international conferences. Her current major research activities include the development and management of a 30-site research network to perform ongoing clinical trials in vision rehabilitation.

### **Patricia Grant**

C33. Depression and Dementia: Managing Common Comorbidities in Vision Rehabilitation

R10. Low Vision and Psychological Functioning

Patricia Grant, Director of Low Vision Research, has been involved with VA research for seven years in collaboration with the Jesse Brown VAMC and the University of Illinois at Chicago, Department of Ophthalmology. Ms. Grant has been instrumental in providing training for patients with macular disease in the reading rehabilitation program funded by the Department of Veterans Affairs. Her research interests include methods for assessing vision loss in retinal diseases and investigating the relationship between the psychological status and visual function in low vision patients. Ms. Grant has an

educational background in psychology, her Master of Science in Public Health from the University of Illinois at Chicago and is now pursuing her PhD.

### Lori Grover, OD

W7. Adding Low Vision Services in Your Private Practice

C1. Driving and Visual Impairment

C26. Vision Rehab Boot Camp I: Bring Vision Impairment

C30. Vision Rehab Boot Camp II: Taking Vision Impairment to the Mat!

Dr. Grover is nationally recognized in the field of vision impairment and rehabilitation. She is an assistant professor of Ophthalmology at the Johns Hopkins University School of Medicine, Wilmer Eye Institute and is a PhD Candidate in Health Services Research and Policy at The Johns Hopkins Bloomberg School of Public Health where she recently earned a Certificate in Health Economics. Most recently, she has collaborated with public health and health care professionals on projects including the Optometrists' Tobacco Cessation Intervention Study, conjoint analysis methodology for patient populations with special needs, and measurement strategies for estimating rehabilitation potential among service providers. She is currently the principle investigator on an NEI-funded K23 Clinician Research Training Award Grant investigating chronic vision impairment and clinical decision-making, team strategies for care delivery, and access to vision rehabilitation in the US.

### Emilie Hagan, ARNP-CNS, MS, CDE

W6. Diabetes and the Low Vision Rehabilitation Team: The Great Escape

Emilie Hagan, ARNP-CNS, MS, CDE, is an independent Clinical Nurse Specialist with a BA in Philosophy from Rockhurst College, Kansas City, Mo., a BS in Nursing from St. Mary of the Plains College, Dodge City, Kan., and a Master of Nursing degree from Wichita State University, Wichita, Kan. Ms. Hagan has practiced nursing for more than 30 years in a variety of clinical settings including, but not limited to, hospital nursing, critical care, hospice care, case management and medical-legal consulting. For the past 25 years, Emilie has

been in private practice specializing in diabetes, cardiovascular disease, hyper-tension, peripheral vascular disease and lifestyle modifications. Emilie's clinical practice, an integration of nursing care with medical care, is focused on assisting patients in their response to, or lack of resources to respond to, their health conditions/problems. In addition to her clinical practice, she is an independent nurse educator experienced in professional and patient education and an approved continuing nursing education provider in the state of Kansas. Ms. Hagan is a member of numerous professional nursing organizations. She holds certifications in diabetes education and diabetes foot care.

### Shirin Hassan, OD, PhD

**R4.** Mobility Panel

C51. Vision Rehabilitation: Using Theory and Research in the Exam Room

Dr. Shirin E. Hassan has been Assistant Professor in Optometry at the Indiana University School of Optometry, Bloomington, Ind., since November 2007. Dr. Hassan graduated with an Optometry degree from the Queensland University of Technology (QUT), Brisbane, Australia, in 1996. She then pursued her PhD studies at QUT, focusing on low vision and orientation and mobility. While completing her PhD, she practiced part time as a primary care and low vision optometrist where she specialized in the visual rehabilitation of visually impaired people. In November 2000, she undertook a post-doctoral research fellowship at the Lions Vision Research and Rehabilitation Center at the Wilmer Eye Institute, Johns Hopkins University, Baltimore, Md. Dr. Hassan went on to serve as Assistant Professor of Ophthalmology at the Wilmer Eye Institute from 2003 until November 2007.



### **Kevin Houston, OD**

W1. Workshop on Prism Adaptation Therapy for Hemispatial Neglect Associated With Brain Injury or Stroke

W5. Hands-on Workshop on Rehab of Hemianopia

C10. "Will I Be Able to See Well Enough to Use a Smartphone?" Visual Demands for Popular Smartphones

C18. Evidence-based Visual Assessment for Driving

Dr. Houston is a Doctor of Optometry specializing in vision rehabilitation. He is trained to examine patients with vision loss due to eye disease, eye injury, or neurological injury and provide them with special visual aids and training to allow the highest possible level of function. Dr. Houston currently holds a faculty appointment with Harvard University's Massachusetts Eye and Ear Infirmary and Schepens Eye Research Institute. He was selected for an NIH K-12 grant in 2011 for research training and is currently studying Peli Prisms for patients with hemianopia and hemineglect. Prior to the appointment at Harvard, Dr. Houston held a faculty appointment with Indiana University in the departments of Optometry and Ophthalmology where he trained fourth-year optometry students and first-year (PGY-2) Ophthalmology residents in clinical vision rehabilitation. Additionally, he held clinical privileges at the Rehab Hospital of Indiana from 2007-2011, where he helped the hospital develop the first comprehensive inpatient vision rehabilitation service in the state of Indiana.

Dr. Houston has lectured extensively to multidisciplinary groups such as speech therapists, teachers of the visually impaired, occupational and physical therapists, neurologists and physiatrists.

### Sheila Xi Huang, MD

R2. Trouble Seeing...Trouble Sleeping: How Are They Related?

Sheila Xi Huang, MD, is with the Department of Ophthalmology at McGill University, Montreal, Quebec.



### Joseph Hull, PhD

R2. Trouble Seeing...Trouble Sleeping: How Are They Related?

Joseph T. Hull, PhD, is a Postdoctoral Research Fellow in Medicine. Harvard Medical School and Research Fellow. Division of Sleep Medicine, Department of Medicine, Brigham and Women's Hospital. Dr. Hull's research over the past seven years has been concentrated on the study of the human circadian pacemaker, including measurements of sleep and neurobehavioral function in blind individuals who have no light perception (NLP) to develop a better understanding of the effects of photic input (and the lack thereof) on the human circadian timing system. Conducting research in this particular population provides a unique opportunity to study how the human circadian pacemaker is affected by photic time cues (ocular light exposure, including its timing, intensity, duration and wavelength) and nonphotic time cues (timing of sleepwake, meals and exercise).

### Chuck Huss, COMS, CDRS

C31. West Virginia Bioptic Driving Program: Overview and Update

Mr. Huss, a driver rehabilitation specialist, is known nationally for his work and expertise in the area of formalized bioptic driver training and assessment. The latter has included coordinating and serving as one of the principal researchers for the West Virginia Pilot Low Vision Driving Study from 1985 through 1988, and its continuum of direct and indirect related services from 1989 through 2008. Mr. Huss also serves as a certified orientation and mobility specialist (COMS) with several West Virginia county school systems under private contract, working with visually challenged students of preschool age through grade 12.





### Mary Lou Jackson, MD

C5. Reading Rehabilitation With Video Camera Magnifiers A Review

C42. 2011: What's New? 1) New Ideas About Charles Bonnet Syndrome; 2) The Implantable Miniature Telescope Update; 3) What's New in Macular Perimetry

Dr. Mary Lou Jackson is an ophthalmologist and Director of the Vision Rehabilitation Clinic at the Massachusetts Eye and Ear Infirmary in the Harvard Department of Ophthalmology. She is also the current Chairperson of the American Academy of Ophthalmology Vision Rehabilitation Committee. Her current research interests include contrast sensitivity, Charles Bonnet visual hallucinations, outcomes of vision rehabilitation and effective models of care.

### Ana M. Juricic, OD

C9. Seeing Is Believing – Case Presentations of How Low **Vision Devices Can Help** 

C17. Low Vision 101 – Overview of Low Vision Devices

As a leading authority and educator in the field of Low Vision in Canada, Dr. Ana Juricic has helped maximize the vision of thousands of individuals over the past 15 years. She is the Director of the Low Vision Clinic at the Clearview Institute in Toronto, Canada. Previously, she was a successful owner of a full-scope optometric practice incorporating a low vision center. Dr. Juricic's passion and expertise in the field of low vision is evident in her high success rate in helping her patients meet their vision goals. Dr. Juricic is committed to helping progress the field of low vision through her many speaking engagements and work as a clinic supervisor for fourth-year optometry students at the University of Waterloo.

### K. Bradley Kehler, OD, FAAO

R1. Health States of Patients Seeking Outpatient Low Vision **Rehabilitation Services Within LOVRNET** 

Dr. Kehler's area of focus is low vision rehabilitation for visually impaired patients, post-surgical and medical contact lens fitting, and adult primary care. He specializes in unique optical solutions for all vision problems. Dr. Kehler enjoys working with the patient over 40 who desires a customized optical solution for near-point and computer activities. Dr. Kehler currently serves as an Assistant Professor of Ophthalmology at Vanderbilt University.

### Karen Kendrick, OTR/L, CLVT

W3. Evaluating the Macula and Establishing PRL for Low Vision Rehabilitation

W6. Diabetes and the Low Vision Rehabilitation Team: The Great Escape

**R4. Mobility Panel** 

Karen Kendrick, OTR/L, CLVT, is a practicing occupational therapist and certified low vision therapist at Envision Vision Rehabilitation Center, practicing outpatient low vision therapy with emphasis in neuro-visual deficits. Ms. Kendrick is currently active in a community-based research project on fall prevention with the Wichita State University Regional Institute on Aging.

### Elli Kollbaum. OD

C51. Vision Rehabilitation: Using Theory and Research in the Exam Room

Dr. Kollbaum is a Clinical Associate Professor and Chief of the Vision Rehabilitation Service at the IU School of Optometry. Her responsibilities include patient care and clinical instruction in the Vision Rehabilitation Service and in the Primary Care Service, as well as classroom teaching on the topics of vision rehabilitation and low vision optics. She has recently taken on the role of Director of Externships for the School.

Dr. Kollbaum is a Fellow in the American Academy of Optometry, a member of the American Optometric Association, and a member of the AOA Vision Rehabilitation Section. She has presented continuing education lectures and research data nationally on vision rehabilitation topics. Dr. Kollbaum currently serves on the steering committee for the ASCO Low

Vision Educators' Special Interest Group.

Dr. Kollbaum holds a bachelor's degree from the University of Notre Dame and graduated from the IU School of Optometry with her Doctor of Optometry degree. She completed residency training in hospital-based optometry and low vision rehabilitation with the Chicago Veterans Administration Healthcare System. She also practiced optometry and vision rehabilitation in central lowa before joining the faculty at IU School of Optometry in 2000.

### Kendall Krug, OD

W7. Adding Low Vision Services in Your Private Practice

C1. Driving and Visual Impairment

C11. Documentation and Billing of Low Vision **Rehabilitation Services** 

Dr. Kendall Krug lectures at the regional and national levels on the documentation and billing of low vision services and on providing low vision care in the primary practice setting. In 2002, he received the Eleanor Wilson Award from the Kansas Association for the Blind & Visually Impaired for enhancing public education and awareness of the visually impaired. Dr. Krug received his Doctor of Optometry degree from the Southern College of Optometry and completed additional training in Low Vision Rehabilitation at the New York Lighthouse for the Blind. Before returning to private practice, he was Director of the Stock Eye Institute-Low Vision Clinic at St. Francis Hospital in Topeka, Kan. In addition, he completed a term on the American Optometric Association - Low Vision Rehabilitation Section Council.

### Nancy Krusen, OT, PhD

C43. Home Lighting Assessment and Modifications

Dr. Krusen is currently on the faculty of the School of Occupational Therapy at Pacific University near Portland, Oregon. She has practiced in a wide variety of areas, including rehabilitation, home accessibility and home care with older adults. Dr. Krusen's research interests revolve primarily around adaptation to challenges presented during life changes. She is particularly interested in negative relative mastery - learning from life challenges that do not go as planned. She is also interested in the contribution of the human environment in the process of adaptation.



### B.J. LeJeune, CRC, CVRT

**R3. Dual Sensory Impairment** 

**R7. Research on Employment** 

C40. Severe Brain Injury and Vision Loss: Challenges and **Steps Toward Progress** 

B.J. LeJeune is the Training Coordinator at the Rehabilitation Research and Training Center on Blindness and Low Vision at Mississippi State University. She has years of experience working in a variety of direct service positions and currently serves as an agency administrator, college instructor and researcher. She has a master's degree in Rehabilitation Teaching (now known as Vision Rehabilitation Therapy) from the University of Arkansas, and has completed all coursework toward a doctoral degree in Rehabilitation Counseling at Mississippi State University. She has served on multiple state and national committees in the areas of aging, education, vision rehabilitation therapy and dual sensory loss. Ms. LeJeune has led or served on a number of qualitative and quantitative research projects, conducted a number of state program evaluations for older blind programs, and provides pre-service and continuing education training for rehabilitation counselors and blindness rehabilitation staff. In 2003, her husband, who was legally blind, acquired a severe traumatic brain injury. She has presented on the topic numerous times and includes it in the curriculum of the Vision Specialist graduate certificate for Rehabilitation Counselors. This prompted inclusion of a brief overview of the program that was recently published in JVIB.

### David Lewerenz. OD

W2. Applied Optics of Low Vision Devices

C21. RP From A to Z

C25. In the Middle: Helping Visually Impaired Patients With Their Mid-range Needs

C54. Determining Statutory Blindness and Visual Disability

Following a career in private practice, Dr. David Lewerenz has been on the faculty of Northeastern State University Oklahoma College of Optometry since January 2008, where he teaches the Vision Rehabilitation course and is Chief of Low Vision Services.

### Amanda Lueck, PhD

C15. Trends in Low Vision Education: Learning From the Past. Looking Toward the Future

Dr. Amanda Hall Lueck has been in the field of visual impairments for more than 35 years, providing direct service and conducting research related to individuals with low vision across the lifespan in the United States and other countries. She is the author of numerous articles addressing the needs of people with vision impairments and has edited several books including Functional Vision: A Practitioner's Guide to Evaluation and Intervention from AFB Press. Dr. Lueck is currently a Professor at San Francisco State University where she coordinates the Program in Visual Impairments.

### Kerry Lueders, TVI, COMS, CLVT

C12. Clinical Low Vision Examination and the IEP Process: **What Do Parents Really Think?** 

Kerry S. Lueders is a Certified Orientation and Mobility Specialist, Teacher of the Visually Impaired and Certified Low Vision Therapist. She is Co-Director of the Low Vision Rehabilitation Program at Salus University and provides low vision rehabilitation services at the William Feinbloom Vision Rehabilitation Center at The Eye Institute in Philadelphia, Pa.

### Alexis Malkin. OD

C37. OT: Optics for Therapists

Dr. Malkin is a graduate of Emory University and completed her optometry training at New England College of Optometry, where she graduated salutatorian. She completed her residency at the Northport VA Hospital with a focus in primary care optometry, low vision rehabilitation and vision therapy. Dr. Malkin then completed the Lions Vision Rehabilitation Fellowship at Johns Hopkins in 2010. Dr. Malkin is involved in private practice low vision, and continues her work as parttime faculty at Wilmer. She instructs the Wilmer staff and ophthalmology residents in the area of low vision and is a clinical mentor for the low vision fellow. She is particularly interested in clinical research, including better understanding quality of life outcome measures. She has lectured on bioptic telescopes as well as technology in low vision, both in the low vision community and as a clinical instructor at Johns Hopkins University School of Medicine. She has presented research at



### Robert Massof, PhD

C37. OT: Optics for Therapists

**R9.** Diagnostics and Assistive Technology

Robert W. Massof, PhD, is Professor of Ophthalmology and Professor of Neuroscience at the Johns Hopkins University School of Medicine. He is founder and Director of the Lions Vision Research and Rehabilitation Center, a division of the Johns Hopkins Wilmer Eye Institute. Dr. Massof received his PhD in Physiological Optics from Indiana University in 1975. Dr. Massof's research areas include health outcomes measurements, clinical and basic vision psychophysics, physiological optics and psychometrics. His work has been supported by grants from the National Eye Institute, the National Institute on Aging, the National Science Foundation, NASA, the VA Rehabilitation Research and Development Service, the Multiple District 22 Lions Vision Research Foundation and several different corporations and private foundations. Dr. Massof is a Fellow of the Optical Society of America and has served on the Society's Board of Directors. He is also a Fellow of the American Academy of Optometry and the Association for Research in Vision and Ophthalmology. He has authored

more than 160 published scientific papers and book chapters, edited a book on low vision policy and service delivery issues, and holds five patents and three software copyrights on instruments that he developed.

### Lisa Mauney, MS

**R9.** Diagnostics and Assistive Technology

Ms. Mauney is a PhD student in the School of Psychology, Georgia Tech. Her interests include individual differences in the perception and comprehension of auditory displays, auditory graphs and sonifications, as well as assistive technology and how people with low vision read.

### Scott McDougal, OD

C45. Utilizing a Nonprofit for Providing Comprehensive Statewide Low Vision Care to School-age Children

Dr. McDougal is an optometrist practicing in Cape Girardeau, Mo. His services include primary care, contact lenses, nursing home clinics, low vision and vision therapy. He has particular interest in serving children who have low vision and their families.

### Tonya Mennem, OT, CLVT, SCLV

C38. Visual Changes in Veterans Following Blast Injuries C49. Use of Prism in Vision Rehabilitation

Tonya Mennem has been an occupational therapist for 18 years and has specialized in neurological injuries and vision loss for the last 15 years. She currently practices as a low vision therapist at the Michael E. DeBakey Veterans Affairs Medical Center in Houston, Texas, where she advocated for vision services for Operation Enduring Freedom/Operation Iragi Freedom veterans. In 2008, she earned her specialty certification in low vision (SCLV) from the American Occupational Therapy Association (AOTA) and became a certified low vision therapist (CLVT) through the Academy for Certification of Vision Rehabilitation and Education Professionals (ACVREP). Previously, her professional experiences included the development of two low vision programs. She has lectured nationally on vision loss as a result of neurological injuries and serves as a teaching assistant for the Low Vision Rehabilitation Certificate Program through the University of Alabama at Birmingham.



### Alan R. Morse, JD, PhD

**R5.** Difficulties in Designing Clinical Trials: Finding **Solutions** 

Alan R. Morse is President and Chief Executive Officer of The Jewish Guild for the Blind and its subsidiaries where he has worked since 1968. His interests include the influence of vision loss on health care utilization and cost, optimizing the delivery of vision and healthcare services, and the functional implications of vision loss, particularly when combined with cognitive impairment. Dr. Morse is an Adjunct Professor of Ophthalmology at Columbia University, a trustee of the Healthcare Association of New York State, and a director of the Alliance for Advancing Nonprofit Healthcare, the Center to Promote Health Care Studies. The Home Care Association of New York State, Jewish Home Lifecare, and a member of the advisory board of the Eye Research Institute of the University of Wisconsin - Madison. He is author of numerous peerreviewed publications and is a regular participant on government panels, workgroups and committees. Currently, he is a member of the Managed Long Term Care Implementation and Waiver Redesign Work Group of the New York State Medicaid Redesign Team. He is a peer reviewer for many professional publications including Archives of Ophthalmology, where he also serves on the editorial board. Dr. Morse received his BA from Franklin College, MS from Indiana University, JD from Pace University and PhD from Fordham University.

### Amy Nau, OD

R8. Low Vision Research: Hot off the Press

**R9.** Diagnostics and Assistive Technology

Amy Nau, OD, is an optometrist and Director of UPMC Eye Center's Contact Lens and Low Vision Services. Her work focuses on the development of research and clinical innovations that may help to improve quality of life for people with limited or no vision.

### Lauren Nisbet, OT

C39. Special Considerations for the Oldest Patients in Low **Vision Rehabilitation** 

Lauren Nisbet is an occupational therapist at the Massachusetts Eye and Ear Infirmary in Boston. Prior to this position, she spent five years working in Neurological Rehabilitation, in both inpatient and outpatient settings.

### J. Vernon Odom. PhD

R8. Low Vision Research: Hot off the Press

C57. Writing for Publication: What's the Difference?

J. Vernon Odom, PhD, heads the West Virginia Lions Visual Function Laboratory. He is a Professor of Ophthalmology and Physiology with an adjunct appointment in Psychology. A native of Laurinburg, NC, Dr. Odom graduated from Davidson College with a bachelor's degree and obtained his master's and doctorate degrees in Psychology from the University of North Carolina at Greensboro. Following postdoctoral work at Case Western Reserve University, the School of Optometry of the University of California at Berkeley, and the University of Florida, Dr. Odom joined WVU's Department of Ophthalmology in 1982. He has published more than 130 articles, book chapters and abstracts. His research has centered on clinical assessment of visual function using electrophysiology and psychophysics, including visual fields and eye movements, as means of assessing visual disability.

### Olga Overbury, PhD

R2. Trouble Seeing...Trouble Sleeping: How Are They Related?

R8. Low Vision Research: Hot off the Press

Olga Overbury, PhD, is Associate Professor, School of Optometry, University of Montreal, and Department of Ophthalmology. Her research interests lie in the area of acute and chronic visual impairment and its sensory, perceptual and psychosocial impact. The goal of her research is to gain a better understanding of the perceptual abilities of individuals with vision loss in order to better tailor rehabilitation training to their unique needs.

### Carolyn Palmer, PhD

C19. My Eyes Work but My Brain Doesn't See: How Do We Unlock the Potential of Young People With Neurological **Vision Impairment?** 

**R6.** Functional Performance and Outcomes

C44. Vision Impairment: The Impact on Social Cognition and Social Ability

R10. Low Vision and Psychological Functioning

Dr. Carolyn Palmer is an associate professor in the School of Education at Flinders University in South Australia. She currently chairs the School of Education Leadership and Management Research Collective, is the Director of Studies of the Master of Education program at Flinders and coordinates the Master of Education (Generic) and the Graduate Certificate in Education (Vision Impairment). She is an active member of the School of Education Teaching and Learning Committee and the Area of Strategic Research Initiative Committee. She chairs the Master of Education Work Group and has just retired as the Deputy Chair of the Faculty of Education, Law. Humanities and Theology (ELHT) Student Progress Committee. She has extensive experience in working with children with vision impairment and currently runs programs of study in vision impairment within the Master of Education and Graduate Certificate of Education (Vision Impairment), both in South Australia and Western Australia.

### William Park, OD, FAAO

W6. Diabetes and the Low Vision Rehabilitation Team: The Great Escape

C6. Contact Lenses as an Adjunct of Vision Rehabilitation

**R6.** Functional Performance and Outcomes

William L. Park, OD. FAAO, is in private practice in Wichita, Kan. Dr. Park is committed to outreach efforts in stemming the epidemic of diabetes. He works exclusively with patients referred for low vision evaluation, low vision rehabilitation and neurological vision loss. He is a past Director of Low Vision Services, Lions Research & Rehabilitation Center, Wilmer Eye Institute-Johns Hopkins University.

### Ana Pérez. OD

C2. Bridging the Gap Between Low Vision Optometry and Occupational Therapy to Improve Patient Outcomes

C53. Optometric Management of Peripheral Field Loss

Dr. Pérez established and directed the Low Vision Service at Baylor College of Medicine, Department of Ophthalmology. From 2004 to 2007, she served as the Director of the Center for Sight Enhancement at the University of Houston. From 2007 until February 2010, she was Director for the Low Vision Rehabilitation Residency. She has recently taken a position at the Michael E. DeBakey VA Hospital, VISOR Program working with visually impaired veterans in a rehabilitative setting. She continues providing her services at the University of Houston, Center for Sight Enhancement to serve pediatric low vision patients as an adjunct faculty.

Dr. Pérez has published and presented lecture in her area of specialty both nationally and internationally. She maintains an adjunct faculty position at the University of Houston, College of Optometry where she enjoys clinical teaching and lecturing to students working on their optometric degrees. Dr. Pérez finds great satisfaction working with the educational system to help prepare children with visual impairments in obtaining the necessary tools and skills needed to become successful in their education and future vocational goals.

### Melva Perez-Andrews, OT, CVRT

C29. Lenses, Lighting and Lemonade: Getting Back to the

Melva Perez-Andrews graduated with her Bachelor of Science in Occupational Therapy from Texas Woman's University in Denton, Texas, in 1989 and her MBA from Our Lady of the Lake University in San Antonio, Texas, in 2001. She has 20 years clinical experience assessing and treating individuals with neurological impairments. Melva is an occupational therapist and a certified low vision therapist working in collaboration with a low vision optometrist at the Lions Low Vision Center of Texas located on the Greehey Academic and Research Campus of UTHSCSA. Her teaching focus is in the area of low vision and vision rehabilitation.



### Monica Perlmutter, OT, CLVT

**R6.** Functional Performance and Outcomes

C43. Home Lighting Assessment and Modifications

Ms. Perlmutter is an instructor in the Occupational Therapy Program at Washington University and is the lead OT for the program's Community Practice Low Vision Program. Her research studies have focused on the development of a measurement model to assess the impact of vision loss on older adults and examination of the affect of glaucoma on daily activities and quality of life. A new line of research aims to develop a standard method of assessing home lighting and to examine the efficacy of approaches to lighting modifications.

### Craig Phillips. MS Ed. TVI. COMS

W4. Overview and Field Practice Using Accessible GPS **Devices to Create Routes and Establish a Position in Space:** Part I

W8. Overview and Field Practice Using Accessible GPS **Devices to Create Routes and Establish a Position in Space:** Part II

Craig Phillips serves as the Certified Orientation and Mobility Specialist and Teacher of the Visually Impaired for the Shawnee Mission School District in Shawnee Mission, Kan. He recently retired from Missouri State University, Springfield, Mo., and its program to train dual-licensed Teachers of the Blind and Visually Impaired and Orientation and Mobility Specialists. Among his numerous teaching awards, he was named as the Outstanding Teacher of the Year in 1997 for his work at the Kansas State School for the Blind by the Council of Schools for the Blind (COSB) where he taught English and Braille.

### Joshua Pratt. OD

**R9.** Diagnostics and Assistive Technology

Joshua Pratt is an optometrist and current PhD candidate and Optics Lab Teaching Assistant at the University of Houston College of Optometry, Houston, Texas.

### Ike Presley, TVI, CLVT

C52. Low Vision Technology: Resources for Keeping Abreast of What's New

Ike Presley is the current National Project Manager at the American Foundation for the Blind (AFB) National Literacy Center in Atlanta. During the past 10 years with AFB, he has developed the curriculum for and presented numerous professional development courses for service providers working with adults and youth who are blind or visually impaired. He has taught courses at Georgia State University on assistive technology and given national and international presentations on this topic. Before coming to AFB, he served as an assistive technology specialist with the Georgia Department of Education's Project for Assistive Technology.

### David Rakofsky, PsyD

C33. Depression and Dementia: Managing Common **Comorbidities in Vision Rehabilitation** 

Dr. David Rakofsky is the Associate Director of Psychological Services at The Chicago Lighthouse. Trained as a generalist in the field of clinical psychology, Dr. Rakofsky has spent the majority of his career treating a highly diverse clientele within a range of settings, including his Chicago private practice, several hospitals where he is on staff, and in community mental health centers that serve some of the most economically disadvantaged outpatients in an urban context.



### Pradeep Ramulu, MD, MHS, PhD

C14. Measuring and Evaluating Reading Disability in Glaucoma and Dry Eye

**R4.** Mobility Panel

Pradeep Y. Ramulu, MD, PhD, was born in Chicago and received his bachelor's degree at Stanford University. He completed his medical degree at Johns Hopkins Medical School where he has also received a master's degree in Clinical Investigation and a PhD in Molecular Biology and Genetics. After his ophthalmic residency at the Wilmer Institute, he did a glaucoma fellowship at the Bascom Palmer Eye Institute in Miami. He joined the Wilmer Glaucoma faculty in 2006, where he specializes in caring for both routine and complex glaucoma. including glaucoma requiring repeat operations, glaucoma occurring in the context of corneal or retinal disease, and glaucoma occurring in newborns and young children.

### Shannon Riley, MA

**R4.** Mobility Panel

**R6.** Functional Performance and Outcomes

**R9.** Diagnostics and Assistive Technology

Shannon Riley is the Research and Analytics Associate for the Envision Foundation in Wichita, Kan.

### John Rose, MA, SpEd EC-12, ELA 8-12

C56. Seize the Moment! Video Documentation of Student Performance

John Rose is a teacher in Special Programs. In addition, he assists with admissions, leads the pilot project for video retention of skills, and works as a TA. He has completed his Special Education and ELA teaching certification and is applying for the Texas Tech University Master of Education program in Special Education with a focus on visual impairment. This year, he has coordinated a new program, ACL: Music and Songwriting, as well as two established programs, Math Tools and Capitol Experience. He presented at TAER this year on video retention of skills based on the data gathered during the pilot video retention program. This is his second year at TSBVI, where he has worked in almost all departments as a float TA and as a Teacher and TA in summer

programs. John has a master's degree in Social Sciences with a focus in Anthropology and History, and is interested in student communication and language development.

### Alfred Rosenbloom, Jr., OD

C33. Depression and Dementia: Managing Common **Comorbidities in Vision Rehabilitation** 

Dr. Rosenbloom is one of the founders of The Chicago Lighthouse Low Vision Rehabilitation Service, and has been the driving force for opening low vision satellite locations. Dr. Rosenbloom is the former Distinguished Professor of the Illinois College of Optometry (ICO) and served as ICO's Dean. then President, for over 25 years. He is a Clinical Professor in the Department of Ophthalmology at the University of Illinois Medical Center and is a Diplomate of the Low Vision Section of the American Academy of Optometry. In his role as Past President of Volunteer Optometric Services to Humanity (VOSH), he completed more than 25 eye missions to foreign countries to provide free eye examinations and eyeglasses to individuals in need. He was recognized for his contributions as VOSH/International's 2007 Humanitarian of the Year.

He is the author of numerous scientific papers and a contributing author and editor to several textbooks, including the third edition of Vision and Aging. Dr. Rosenbloom has received the Lifetime Achievement Award from The Chicago Lighthouse and Prevent Blindness America, as well as the Distinguished Service Award from the American Optometric Association where he served previously as Acting Chair of their Low Vision Rehabilitation and Geriatric Services. He is also a recipient of the William Feinbloom Memorial Award for Excellence in Low Vision Services and the Migel Medal from the American Foundation for the Blind.

### Serena Salvatore. MD

**R9.** Diagnostics and Assistive Technology

Dr. Salvatore is with the Università La Sapienza Hospital in Rome, Italy.



### Deena Sandall, OD

C13. Pediatric Low Vision Rehabilitation

C41. The Visually Impaired Driver – An Optometric Perspective

Dr. Deena Sandall has been practicing low vision rehabilitation optometry since 2005. She began her career at Envision Rehabilitation Center in Wichita, Kan.

### Kimberly Schoessow, OTD

R1. Health States of Patients Seeking Outpatient Low Vision **Rehabilitation Services Within LOVRNET** 

C5. Reading Rehabilitation With Video Camera Magnifiers A Review

C39. Special Considerations for the Oldest Patients in Low Vision Rehabilitation

Kim Schoessow has earned her clinical doctorate from the top occupational therapy graduate school in the nation. She completed a clinical and research pre-doctoral fellowship at Smith-Kettlewell Eve Research Institute in San Francisco, and worked as Lead Occupational Therapist at the Massachusetts Eye and Ear Infirmary. As an occupational therapist specializing in low vision, her clinical interests lie in assisting people with vision impairments to maintain participation in meaningful roles and activities.

### Ronald A. Schuchard, PhD

**R6.** Functional Performance and Outcomes

R8. Low Vision Research: Hot off the Press

Dr. Ronald Schuchard is recognized as an expert in visual impairment assessment including macular perimetry testing methods. He has many publications and presentations on the topic of macular perimetry, especially as it relates to vision rehabilitation and monitoring of macular disease progression and treatment. Dr. Schuchard is a Research Career Scientist in the VA Rehabilitation R&D Service and a Clinical Associate Professor at Stanford University.

### Alexander Shaw, PhD

C16. Assisting Clients With Employment Preparation: How to Use the CNIB TAPE Measure

Alexander Shaw has a PhD in Experimental Psychology. His training and experience in quantitative methods of analyses provided him with the background to develop the CNIB TAPE (Tool to Assess Preparedness for Employment) which is the subject of this clinical presentation. Dr. Shaw has worked at Canadian National Institute for the Blind since 2003, and has been involved in a number of studies centered on the quality of life of persons with vision loss. He has explored a broad range of topics including employment, physical activity, social adjustment and barriers to vision rehabilitation.

### Ronald Siwoff, OD

C22. VEP-Guided Retinal Image Translocation: New Frontiers in Low Vision Treatment

Dr. Siwoff is a member of the National Physician's Advisory Board, from which he received the 2004 Physician of the Year award. Other awards for his service to the blind and visually impaired community include the Outstanding Scientific Achievement award from the New Jersey Society of Optometric Physicians and the New Jersey Department of Human Services award for Outstanding Accomplishments and Contributions to the Blind and Visually Impaired Community. Prior to his present position as Director of the Siwoff Low Vision Center, Dr. Siwoff was Clinical Assistant Professor of Ophthalmology at the University of Medicine and Dentistry of New Jersey, where he directed the Low Vision Clinic. He later became Director of the Gerald E. Fonda Low Vision Center at Saint Barnabas Hospital in Livingston, New Jersey, Dr. Siwoff holds several patents for technologies to improve the vision of the visually impaired. He has conducted joint research with the NIH and Harvard Medical School.

### Debra Sokol-McKay, MS, OTR/L, CDE, CVRT, CLVT. SCLV

C23. Pills and Potions: It Isn't Magic – Tools, Tips and **Techniques for Medication Management** 

Debra Sokol-McKay is a licensed occupational therapist with more than 26 years of clinical experience. She holds certifications as a diabetes educator, vision rehabilitation therapist and low vision therapist, and has been awarded a specialty certification in low vision by the American Occupational Therapy Association (AOTA). She is the American Association of Diabetes Educators' (AADE) liaison to the National Eye Institute and the second lead writer of AADE's 2009 Disabilities Position Statement. In 2005/2006 and in 2010. Debbie served as the chairperson of AADE's Disabilities Specialty Practice Group. Her expertise ranges from adaptive diabetes selfmanagement training to implementing activities of daily living for patients with visual, physical, psychosocial and cognitive disabilities. Ms. Sokol-McKay is a widely published author on adaptive diabetes self-management.

### Joan Stelmack, OD

R5. Difficulties in Designing Clinical Trials: Finding Solutions

Joan Stelmack received her Doctorate of Optometry from Illinois College of Optometry and her Master of Public Health degree from Johns Hopkins Bloomberg School of Public Health. At the Hines VA Hospital Blind Rehabilitation Center. Dr. Stelmack serves as Co-Director of the Optometry Residency in Ocular Disease/Low Vision Rehabilitation, Preceptor of a Low Vision Rehabilitation Rotation for ICO students, Supervisor of the Low Vision Rehabilitation Outpatient Clinic and Director of the Low Vision Research Program. Dr. Stelmack also serves a Director of the Low Vision Service at the University of Illinois at Chicago, College of Medicine. Dr. Stelmack's research focuses on the outcomes of vision rehabilitation. She directed development and validation of the Low Vision Visual Functioning Questionnaire. Dr. Stelmack is the principal investigator for two clinical trials measuring outcomes of low vision rehabilitation for patients with macular diseases.

### Karla Sternberg, OT, CLVT

C47. Incorporating Leisure and Social Participation into the **Clinical Setting** 

Karla Sternberg has been an occupational therapist for more than three years and has specialized in low vision for the past two years. Currently, Karla practices as an occupational therapist in the Vision Impairment Outpatient Rehabilitation program at the Michael E. DeBakey VA Medical Center, in Houston, Texas. In 2007, Karla obtained a Master of Occupational Therapy (MOT) degree from Texas Woman's University in

Houston and in 2009 she became a certified low vision therapist (CLVT) through the Academy for Certification of Vision Rehabilitation and Education Professionals (ACVREP). Karla's previous experience includes collaboration with a neuro-ophthalmologist and development of a low vision program at a world-renowned cancer institution based in Houston. Karla has lectured at both the state and national level regarding occupational therapy low vision practice.

### **Graham Strong, OD, MSc**

**R5.** Difficulties in Designing Clinical Trials: Finding Solutions

Graham Strong is a former Director and Associate Dean of Science for Optometry at the University of Waterloo. He has worked in the field of low vision rehabilitation for more than 40 years. Since 1987, he has served as Director of the Centre for Sight Enhancement (CSE), an internationally acclaimed low vision service and research facility. Since 2007, he has served as Vice President of the US-based National Accreditation Council for Agencies Serving People with Blindness or Visual Impairment (NAC). Strong's primary research activities are in the fields of low vision rehabilitation and consumerfocused assistive technology development. With significant support from industry partners, his research has culminated in the development and commercialization of a procession of award-winning vision rehabilitation products. In recognition of these achievements, Strong's laboratory received a Computerworld Smithsonian Award and he was inducted as a Computerworld Smithsonian Laureate in 1999. In addition, Strong is a court-recognized Forensic Optometrist who has been consulted in numerous homicide investigations and prosecutions. An episode of the syndicated television series *Forensic* Files describes one of his more noteworthy investigations.

### Bill Takeshita, OD

C50. Vision Development for Children With Low Vision

Dr. Takeshita is a developmental pediatric low vision optometrist who has lectured extensively across the nation on the topic of vision. Dr. Takeshita earned his doctorate degree from the Southern California College of Optometry in 1987. He is a fellow of both the College of Optometrists in Vision Development, and the American Academy of Optometry. He presently serves as the Director of Low Vision Education at



the Braille Institute of America, Chief of Optometry at the Center for the Partially Sighted, adjunct professor at the Southern California College of Optometry, and an instructor at California State University, Los Angeles.

### John Thompson

C45. Utilizing a Nonprofit for Providing Comprehensive Statewide Low Vision Care to School-age Children

John Thompson is President of Lighthouse for the Blind (LHB) in St. Louis. He has been with Lighthouse for 11 years. In that time, John has created over 20 programs supported by LHB that benefit children and adults who are blind or visually impaired in the state of Missouri. His dedication for improving the lives of individuals with vision impairment has impacted hundreds of families.

### George Timberlake, PhD

**R8.** Low Vision Research: Hot off the Press

Dr. Timberlake received his PhD in Physiological Psychology from Northeastern University. He completed postdoctoral training in neuroscience and ophthalmic physics at the Eye Research Institute in Boston. Dr. Timberlake previously served as an Associate Scientist at the Schepens Eye Research Institute and Harvard Medical School, where he directed the physiological optics group. Currently, Dr. Timberlake is a professor at Kansas University Medical Center, and Director of Research Department of Ophthalmology. He holds appointments as Director, Kansas Lions Sight Foundation Eye Research Fund; Senior Eye/Vision Researcher, Kansas City VA Medical Center; Joint Appointment, Associate Professor, Dept. of Anatomy & Cell Biology and Adjunct Associate Professor. Dept. of Chemistry, University of Kansas. Dr. Timberlake is internationally-recognized for his contributions to ophthalmic laser technology and low vision research.

### Enzo Maria Vingolo, MD, PhD

**R9.** Diagnostics and Assistive Technology

Dr. Vingolo received his medical doctorate in 1982 from zione of Università degli Studi "La Sapienza" di Roma in 1986. His appointments have included Ophthalmology Consultant of

Associazione Nazionale Italiana Difesa degli Interessi dei Diabetici, and head of Inherited Retinal Diseases Department of Clinica Oculistica dell' Università "La Sapienza" of Rome from 1990 to present. Dr. Vingolo received his PhD in "Fisiopatologia del Microcircolo Oculare" in 1992 from the Institute of Ophthalmology of Università di Roma "La Sapienza." He is author or coauthor of more than 400 publications and presentations nationally and internationally. He has published 31 papers on indexed journals.

### Jennifer Wallis. PhD

C5. Reading Rehabilitation With Video Camera Magnifiers -A Review

Dr. Jennifer Wallis graduated from the University of Cologne in Germany in 2005, and received her research PhD in Psychology from the University of Queensland, Brisbane. Australia, in 2010. Dr. Wallis has extensive experience including teaching research methodology to undergraduate students and 10 years practicing social work. She currently works as the Research Coordinator of the Vision Rehabilitation Clinic at Massachusetts Eye and Ear Infirmary. Her time is spent enrolling patients into various research studies, performing data collection and analysis and managing the vision rehabilitation research program. She is a co-investigator on a project investigating reading rehabilitation with video camera magnifiers.

### Mary Warren, MS, OTR/L, SCLV

C3. Addressing Health Literacy in Older Adults With Low Vision

Mary Warren is an associate professor of Occupational Therapy and Director of the Graduate Certificate in Low Vision Rehabilitation at the University of Alabama at Birmingham. She is the Editor of a self-paced clinical course on low vision and co-editor of the textbook *Occupational Therapy Interventions* for Adults with Low Vision, both published by the American Occupational Therapy Association Press. She chaired the AOTA panel that developed specialty certification in low vision rehabilitation for occupational therapy practitioners. She has presented numerous workshops on low vision rehabilitation and on visual perceptual dysfunction following acute brain injury; she is an internationally recognized authority in this area. Her research has been published in the American Journal of Occupational Therapy and she has contributed chapters

to several rehabilitation textbooks including *Occupational Therapy: Practice Skills for Physical Dysfunction.* She is the author of the Brain Injury Visual Perceptual Battery for Adults. She is a 2010 recipient of the UAB President's Award for Excellence in Teaching.

### Amy Wheeler. OT

C2. Bridging the Gap Between Low Vision Optometry and Occupational Therapy to Improve Patient Outcomes

Amy Wheeler has been an occupational therapist for 12 years working in multiple practice settings. In 2008, she accepted a position in the Blind Rehabilitation Department at the Michael E. Debakey Veterans Affairs (VA) Medical Center as a blind rehabilitation specialist working in adaptive computer training. She became a certified low vision therapist (CLVT) in 2009 and accepted a position as the Blind Rehabilitation Outpatient Specialist (BROS) for the VA in Houston. Working in the BROS capacity, she enjoys working with veterans diagnosed with low vision to address ADL/IADL adaptive computer, and low vision needs in both the clinic and the home settings. In the summer of 2011, she completed the Post-Graduate Certificate in Low Vision Rehabilitation through the University of Alabama-Birmingham.

### Katherine White. OD

R1. Health States of Patients Seeking Outpatient Low Vision **Rehabilitation Services Within LOVRNET** 

Dr. White is the Managing Director of Low Vision Services at ABVI-Goodwill. After consulting as a low vision specialist for 27 years, Dr. White joined ABVI-Goodwill fulltime where she provides direct patient care, supervises optometry students and is involved in research and program development.

### Walter Wittich. PhD

R2. Trouble Seeing...Trouble Sleeping: How Are They Related?

**R3.** Dual Sensory Impairment

R8. Low Vision Research: Hot off the Press

Walter Wittich completed his doctoral studies in the Integrated Program in Neuroscience at McGill (2010). His graduate work has mainly focused on the functional, behavioral and perceptual

effects of age-related vision impairment. As a result of his post-doctoral work at the CRIUGM, he is now focusing on age-related dual sensory loss (vision and hearing) under the supervision of Dr. Jean-Pierre Gagné at the MAB-Mackay Rehabilitation Centre, Montreal, Quebec.

### Karen Wolffe. PhD

C24. Preparing Youth for Employment

C32. Employability Skills Training for Adults With Visual **Impairments** 

**R7.** Research on Employment

Karen Wolffe manages a private practice as a career counselor and consultant in Austin, Texas. She is the former Director of Professional Development at the American Foundation for the Blind. Prior to establishing her own practice, she was a faculty member in the Department of Special Education at the University of Texas (UT) in Austin. While teaching at UT, Dr. Wolffe also directed the Job Readiness Clinic, an applied learning lab for people with disabilities looking for work and university students studying to become rehabilitation counselors or special education teachers. From 1992 to 2002, Dr. Wolffe taught correspondence courses for the Hadley School for the Blind related to transition and employment issues. She also taught a distance education course for the University of Arkansas at Little Rock (Placement in the 21st Century for People with Visual Disabilities). She is the author of *Career* Counseling for People with Disabilities: A Practical Guide to Finding Employment, co-author of the Transition Tote System 2nd edition, and editor of Skills for Success: A Career Education Handbook for Children and Youth with Visual Impairments. She also co-authored *Transition Issues for Students* with Visual Disabilities. AFB's Focused on...Social Skills series, and Teaching Social Skills to Students with Visual *Impairments*. She has published numerous chapters and articles in JVIB, RE:view, and other significant journals based on her work with blind and low vision individuals, both in rehabilitation and education settings. In addition, she has lectured extensively both nationally and internationally. Her research and writing interests include the importance of career education, social skills development, transition issues, employment opportunities for people with disabilities and literacy in the workplace.

the Università degli Studi "La Sapienza" di Roma and his specialist in ophthalmology from the II Scuola di Specializza-



C28. Plants, Predictions and Possibilities

Kathi Zuniga has worked as a teacher's assistant at Texas School for the Blind and Visually Impaired since fall of 2009. In addition to working with basic-skills elementary students on campus she has participated as a speaker on many panels for topics related to visual impairment, taught summer school, and served as a job coach with DARS. Kathi received her master's in Special Education from Texas State University, San Marcos. She is currently completing her certification process as a teacher of the visually impaired. Professional interests include working with low vision students and transitioning students, and development of expanded core curriculum skills.

### Biljana Zuvela, MA

R7. Research on Employment

Biljana Zuvela began working for CNIB on a full-time basis in 2003. Since that time, she has been involved in a number of research and evaluation projects. These include a project aimed at learning more about gaps in Canadian social policy as they affect individuals living with vision loss. a nationwide needs study examining quality-of-life issues faced by blind and partially sighted Canadians, as well as formative and summative evaluations of community learning network facilitating the use of the CNIB Digital Library. Biliana is currently coordinating a study aimed at exploring and supporting the pre-employment skills for children aged 5 to 14 who are blind or partially sighted in Canada. She is currently pursuing a PhD in Vocational Psychology at Belgrade University, with a concentration on employment barriers and success facilitators for blind and partially sighted working-age people in Serbia.



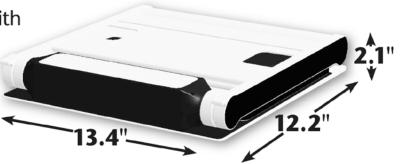


A revolutionary new reading device!

First in its class of portable desktop magnifiers, the VisioBook® is a high quality, full-color reading device for visually impaired users of all ages.

### **Features**

- Lightweight, ultra-portable
- 12-inch HD widescreen monitor
- Choice of several viewing modes
- Intuitive operation with clearly marked buttons
- Smart folding mechanism with 3 safe articulated joints
- HD camera
- Lithium-ion battery with
   4+ hours of operating time
- Much more!



http://shop.aph.org



American Printing House for the Blind, Inc.

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# **Exhibitors**

The following companies are exhibiting at Envision Conference 2011. Companies are listed alphabetically. All exhibits are in the Arch View Ballroom and Arch View Fover. See the Exhibit Hall Floor Plan on page 70 for booth locations.

**Exhibit Hours:** Thursday, 12-8 pm and Friday, 7 am-1:15 pm

### Ai Squared

www.aisquared.com Booth 2

Ai Squared is a worldwide leader in computer access software for the visually impaired. Stop by and see what's new in ZoomText, the industry standard for screen magnification and reading. Get a hands-on demonstration, free trial software, and check out our ZoomText Large-Print Keyboard and Zoom-Text Express!

### **Alphapointe**

www.alphapointe.org Booth 23

**Alphapointe** is a premier provider of vision rehabilitation services to people with vision loss throughout the Midwest. Since 1911, Alphapointe has existed to better the lives of people with vision loss through vision rehabilitation, support and employment services.

### American Foundation for the Blind (AFB)

www.afb.org

Booth 16

### The American Foundation for the Blind (www.afb.org)

broadens access to technology; elevates the quality of information and tools for the professionals who serve people with vision loss; and promotes independent and healthy living for people with vision loss by providing them and their families with relevant and timely resources.

### **American Macular Degeneration Foundation**

www.macular.org

Booth 9

The mission of the American Macular Degeneration Foundation is to work for the prevention, treatment and cure of macular degeneration by raising public awareness and knowledge

about the increasing threat of macular degeneration, providing support and advocacy for those afflicted with the disease and their families and supporting scientific research.

### **American Printing House for the Blind**

www.aph.org Booth 24, 25

**APH** is the world's largest company devoted solely to making products for people who are visually impaired, and is the official supplier of educational materials for blind students in the U.S. Visit our website at www.aph.org or call one of our friendly Customer Service representatives at 800-223-1839 for more information.

### **AOA Vision Rehabilitation Section**

Booth 20

The **AOA Vision Rehabilitation Section** supports the interdisiplinary approach to vision rehabilitation of patients who are legally blind and/or visually impaired.

### ARVO: Association for Research in Vision and Ophthalmology

www.arvo.org

Booth 4

**ARVO** is a community of more than 12,500 vision and ophthalmology researchers from 80 countries; we are the largest and most respected eye and vision research organization in the world. Our aim is to help cure and prevent blindness by encouraging and offering assistance in research, training, publication and knowledge sharing in vision and ophthalmology.

### **Beecher Optical Products, Inc.**

Booth 17

Beecher Optical Products, Inc., has been in the Low Vision market for 25 years. We manufacture headbourne telescopic aids for the visually impaired market. These aids are designed in many magnifications; near viewing for computer work or hobbies, and distant viewing at sport events or watching television.

### **Brightlines Paper**

www.brightlinespaper.com

Booth 5

**Brightlines** paper is adaptive writing paper effective for low vision, visual-perception and attention disorders. The lower half of the writing area is highlighted in yellow or blue. The tablets come in three widths: wide, regular and narrow. A new style has been released: raised line in regular and wide. The lower line is raised to provide visual and tactile cues!

### Chadwick Optical, Inc.

chadwickoptical.com

Booth 7

Custom prescription eyeglass solutions for the legally blind.

- Prescription Medical Filters (for visual stress, contrast enhancement and glare control)
- Customized lenses: high add bifocals, laminates, franklins, button and sector prisms and the PeliLens™
- Prescription prismatic spectacles and microscopics Showcasing our incredible Lens Museum. We make the impossible happen.

### **Enhanced Vision**

www.enhancedvision.com

Booth 11

**Enhanced Vision** is the leading developer of innovative products designed specifically for people who are legally blind, have macular degeneration or other low-vision conditions. Offering a comprehensive line of electronic magnifying solutions, we provide individuals with the ability to read, write, watch TV, enjoy hobbies and maintain an active lifestyle.



### Eschenbach Optik

www.eschenbach.com

Booth 3

**Eschenbach** manufactures and distributes a complete line of magnifiers, telescopes, filters and video magnifiers for vision impairments resulting from macular degeneration and other eye conditions. Our Complete Low Vision Program includes in-office staff training, a comprehensive diagnostic system of low vision aids, marketing, and practice management support materials.

### Fork in the Road Vision Rehabilitation Services. LLC

www.LowVisionSimulators.com

Booth 15

Fork in the Road sells low vision simulators - excellent educational tools for helping students, staff, colleagues and family members understand the impact of low vision; the Pepper Visual Skills for Reading Test (VSRT); and the Learn to Use Your Vision (LUV) Reading Workbook. Great tools for low vision rehabilitation professionals.







www.freedomscientific.com

Booth 19

Freedom Scientific manufactures the world's most complete line of products for vision impairments. Visit our booth to see our latest innovations including SARA™ CE, the next-generation scanning and reading appliance for blind or low vision users; our MAGic® Large Print Keyboard; and our newly redesigned TOPAZ and TOPAZ XL video magnifiers.

### **Good-Lite**

www.good-lite.com

Booth 6

Manufacturer of the Lea Test System including Lea Symbols and Lea Numbers. Complete range of vision testing products including the new self-calibrating ETDRS Standardized Viewer. Low vision, color vision, preferential looking tests and much more will be on display at Envision Conference 2011.

### Hemianopia.org

Hemianopia.org

Booth 8

BIG BAND AID FOR FIELD CUTS - The Peli Lens™

- Expands visual field up to 30 degrees.
- · Aids in obstacle avoidance and mobility.
- 74% patient acceptance rate in NEI-NIH funded clinical trials

NEW – Glasses for Prism Adaptation Therapy (Neglect)

### **INSIGHT Journal/Allen Press** (formerly AER JOURNAL)

www.aerbvi.org

Booth 1

INSIGHT Journal: Research and Practice in Visual Impairment and Blindness is AER's newest member benefit, providing information on excellent research that can be applied in a practical setting. The journal also features best practice examples that contain enough detail to be implemented by other practitioners. The journal reports on informative and helpful practices, research findings, professional experiences, experiments and controversial issues. Institutions can purchase INSIGHT Journal from Allen Press.

### **International Association of Audio Information** Services- IAAIS

www.iaais.org

Booth 21

**IAAIS** is a volunteer-driven membership organization providing services that turn text into speech for people who cannot see, hold or comprehend the printed word, and who may be unable to access information due to a disability or health condition.

### Magnified Vision, Inc.

www.magnifiedvision.net

Booth 26, 27

Since 1985, Optelec has set the standard for assistive technology and video magnification. Eyes For You and Magni**fied Vision** are the authorized dealers in Missouri, Kansas. Arkansas and Illinois. Come see us and learn more about our free demos and trials, lifetime support and excellent reseller/ referral conditions.

### **Mutual of America**

www.mutualofamerica.com

Booth 12

**Mutual of America** is a highly rated company specializing in group retirement plans since 1945. We have salaried representatives in 34 Regional Offices across the United States to provide personalized one-on-one service. Our full-service approach means you only need to contact one location for your every need.

### Nidek, Inc.

usa.nidek.com

**Premium Booth, Arch View Foyer** 

**NIDEK** is a global leader in eve care products for Ophthalmology and Optometry. With diversified clinical research and continual development, an array of Laser and Optical Scanning products are offered that lead the way for improved diagnosis and treatments. The relentless commitment to customer satisfaction means NIDEK will do whatever it takes to continually exceed expectations.



www.ocutech.com

Booth 14

Ocutech is a manufacturer of state-of-the-art bioptic telescope systems for the blind and visually impaired.

### Precision Vision

www.precision-vision.com

Premium Booth, Arch View Foyer

**Precision Vision** will display quality high and low contrast vision tests, low vision tools, interactive computerized acuity systems, the World Standard ETDRS Illuminator Cabinet® and ETDRS charts, portable illuminator cabinet, color tests, occluders, fixation tools and more. Visit and pick up a new catalog and learn more about us and our products or discuss custom product development needs.

### ProxTalker.com, LLC

Booth 22

**ProxTalker.com** is the manufacturer of the Logan (R) Prox-Talker (R) AAC Device, providing moveable picture communication. Encoded picture sound tags are used to form sentences and produce voice output. The Logan (R) BrailleCoach (TM) Braille teaching device accelerates the attainment of Braille literacy by allowing convenient, independent self-teaching of Braille.

### The Hadley School for the Blind

www.hadley.edu

Booth 10

Get "the scoop" about **The Hadley School for the Blind**:

NEW courses offered online, in Braille, audio and large print. Courses and webinars for adults who are blind, high school students, family members and low vision professionals – all offered through distance education. Visit the Hadley booth and get the latest scoop!

### University of Alabama at Birmingham

www.uab.edu/lowvision

Booth 18

The University of Alabama at Birmingham provides a graduate certificate for occupational therapists to develop clinical expertise in providing low vision rehabilitation. Students complete five three-credit hour graduate courses in evaluation and intervention for adults with vision loss from age-related eye disease and brain injury. The program is offered through a web-based distance education platform.







Envision Vision Rehabilitation Center is an American Occupational Therapy Association (AOTA) Approved Provider. The assignment of AOTA CEUs does not imply endorsement of specific course content, products, or clinical procedures by AOTA.

Envision is a COPE-approved administrator/provider of CE events.

### **Continuing Education Accrediting Agencies**

- Council on Optometric Practitioner Education (COPE), Association of Regulatory Boards of Optometry (ARBO) Partial COPE Approval
- Accreditation Council for Continuing Medical Education (ACCME)
- Academy for Certification of Vision Rehabilitation and Education Professionals (ACVREP)
- The Commission on Rehabilitation Counselor Certification (CRCC)

This activity is for scientific and educational purposes only and will not promote any specific proprietary business interest of a commercial interest. The Accredited Provider is responsible for all decisions regarding the identification of educational needs, determination of educational objectives, selection and presentation of content, selection of all persons and organizations that will be in a position to control the content of the CE/CEU, CME/CNE, selection of education methods, and the evaluation of the activity.

Physicians: This 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 University of Kansas Medical Center Office of Continuing Medical Education and Envision. The University of Kansas Medical Center Office of Continuing Medical Education is accredited by the ACCME to provide continuing medical education for physicians.

The KU Medical Center Office of Continuing Medical Education designates this live activity for a maximum of 27 AMA PRA Category 1 Credits ™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

### **Continuing Education Committee**

- **Brenda Chezek**, Senior Program Manager, Continuing Education, University of Kansas Medical Center
- **Michael Epp, MS**, Director of Professional Education, **Envision Foundation**
- **Donald C. Fletcher, MD**. University of Kansas Department of Ophthalmology; Medical Director, Envision Vision Rehabilitation Center; Smith-Kettlewell Eye Research Institute and California Pacific Medical Center Department of Ophthalmology; Helen Keller Foundation for Research and Education
- **Kevin Houston, OD, FAAO**, Harvard School of Medicine, Department of Ophthalmology
- Karen Kendrick, OTR/L, CLVT, Envision Vision Rehabilitation Center
- Anne Riddering, OTR/L, CLVT, COMS, Henry Ford Center for Low Vision Rehabilitation and Research
- Debra A. Sokol-McKay, MS, OTR, CDE, SCLV, CLVT, **CVRT**, Consultant, Private Practitioner

### **Continuing Education Objectives**

Envision Conference 2011 plenary and concurrent sessions enable participants to:

- Describe the most current clinical practices in low vision rehabilitation.
- Recommend appropriate patients who could benefit from low vision rehabilitation.
- Recognize the multi-disciplinary nature of professionals involved in the continuum of care of patients.
- Assess the potential of patients for maximizing functional vision through low vision rehabilitation.
- Select appropriate resources and adaptive strategies for patients with permanent vision loss.
- Recognize practice gaps in current standards of care.

All participants are required to have their badge scanned in each session attended. Continuing education credit will be prorated according to documented attendance. Blank evaluations are included in your attendee materials. It is the attendee's responsibility to complete and return an evaluation at the end of each session attended in order to receive continuing education credit.

WEDNESDAY WORKSHOPS					FRIDAY S	FRIDAY SESSIONS cont.					
IUMBER	ACCME	ACVREP	AOTA	COPE	CRCC	NUMBER	ACCME	ACVREP	AOTA	COPE	CR
V1	3	3	3	3	3	C26	1	1		1	1
V2	3	3	3	3	3	C27	1	1	1	1	1
V3	3	3	3	3	3	C28		1	1		1
14		3	3		3	C29	2	2	2	2	2
/5	3	3	3	3	3	C30	2	2		2	2
/6	3	3	3	3	3	C31	_	2	2	_	2
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9	1	1	1	1	1	C39		2	2		- :
10	1	1	1	1	1	C40		2	2		1
11	1	1	1	1	1	C41	1	1		1	
12	-	1	1	•	1	C42	1	1	1	1	
13	1	1	1	1	1	C43		1	1		
14	i	i	i	i	i	C44		1	1		
15		1	i	·	1	C45	1	1	1	1	
16		1	i		i	C46	1	1	i	1	
17	1	1	i	1	i	C47	•	i	i	•	
18	1	i	i	i	i	C48		1	1		
19	1	i	1	1	1	C49	2	2	2	2	:
20		i	1	1	1	C50	2	2	2	2	
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						R9	2	2	2	2	2
23	2	2	2		2	R10	2	2	2		2



# **Attendee Resources**

### **Registration Desk**

The Envision Conference 2011 registration desk, located in the Grand Foyer, is open during the following hours:

3-7 pm Tuesday Wednesday 7 am-6 pm 7 am-6 pm Thursday 7 am-5:30 pm Friday Saturday 7 am-5 pm

### Internet Access

The Hilton St. Louis at the Ballpark Business Center offers complimentary high-speed internet. In addition, an Internet Café is located in the main lobby as well as the Grand Foyer. Internet is also available in all guest rooms.

### ATM

An ATM is located in the main lobby.

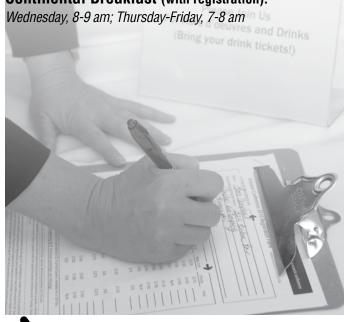
### **Business Center**

The Hilton St. Louis at the Ballpark Business Center offers complimentary high-speed internet, as well as free printing.

### Complimentary Food and Beverage

Complimentary food and beverage is provided throughout the conference with registration.

### **Continental Breakfast** (with registration):



### **Coffee Break** (with registration):

Wednesday, 10:30-10:45 am, 2:30-2:45 pm; Thursday: 9:30-9:45 am, 3-3:30 pm; Friday: 10:15-10:45 am, 3:15-3:30 pm; Saturday: 10-10:15 am, 3:45-4 pm

**Regional Lunch (with registration):** Thursday, 12-1 pm

Welcome Reception (with registration, drink tickets

required): Thursday, 5:30-8 pm

**Buffet Lunch** (with registration, ticket required):

Friday, 11:45 am-1:15 pm

### Dining Options at the Hilton St. Louis at the **Ballpark**

→ Imo's Pizza

Casual | Pizzeria Open daily from 11 am-11 pm.

→ Market Street Bistro and Bar

Casual | American Cuisine Open daily from 6:30 am-10 pm.

→ Starbucks Coffee

Casual | Coffee Bar Open daily from 6 am-9 pm.

→ Mike Shannon's

Business Casual | Steak and Seafood Open Monday-Friday from 11 am-11 pm and Saturday-Sunday from 5-11 pm.

→ Yo My Goodness

Casual | Frozen Yogurt Open daily from 6:30 am-9 pm.

→ Lobby Bar

Casual | Drinks and Bar Fare Open Monday-Saturday from 4 pm-12 am.

→ Three Sixty Rooftop Bar

Indoor/Outdoor Lounge and Bar Open Monday-Sunday starting at 3 pm.

→ In-room Dining

Available daily from 6-12 am.

### **Guest Registration**

Guest registration is for a family member or guest of an attendee over the age of 17. Guest registration includes access to the exhibit hall and admission to the Welcome Reception. Registered guests may purchase tickets separately for the plenary session for \$60 and the Friday Buffet Luncheon for \$45. Guest registration does not include attendance to the sessions. The guest must be registered at the same time as the attendee. Individuals under the age of 17 will not be permitted to attend the conference without adult supervision.

### **How to Contact Us**

If you need to reach Envision or meeting personnel while at Envision Conference 2011, call (314) 259-3387 during registration hours.

### **Lost and Found**

Lost and found is located at the Conference Registration Desk in the Grand Fover.

### **Message Center**

Messages for attendees can be left and retrieved at the Conference Registration Desk.

### **Parking Information**

Self-parking is available for \$18/day and valet is available for \$25/day.

### **Presenters**

All presenters should check in with the Registration Desk staff upon arrival at the hotel, and at least one hour in advance of their scheduled presentation time. Your presenter's packet will contain information about your specific presentation including time and location, setup instructions and audio-visual support.

A **Speaker Ready Room** is available in Grand Suite II. Upon check-in at the Conference Registration Desk, please make your way to the Speaker Ready Room to ensure we have the most recent version of your presentation. The Speaker Ready Room will be open at the following times:

**3-7 pm** (in Grand Foyer) Tuesday

Wednesday 7 am-6 pm Thursday 7 am-6 pm Friday 7 am-5:30 pm Saturday 7 am-4 pm

# Meet Me in St. Louis!

St. Louis offers more free major attractions for the entire family than any place outside the nation's capital. The city is filled with trendy shops, charming neighborhoods, exceptional arts, as well as many historical, cultural and entertaining family attractions and top-notch restaurants. St. Louis has it all. If you have trouble deciding where to go and what to do, visit the Concierge Desk.

### **Entertainment and Attractions**

1 block S
1 block W
1 block W
2 blocks E
0.03 miles SW
0.04 miles E
0.2 miles W
0.2 miles
0.4 miles N
0.4 miles S
0.4 miles S
0.4 miles N
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1 mile W
2 miles
5 miles W
5 miles W
5 miles W
12 miles W
12.1 miles S
25 miles SW

# **Exhibitor Booth Map**

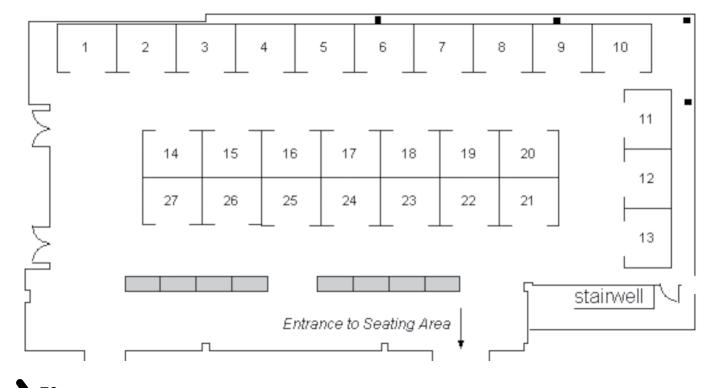
- 1. INSIGHT Journal/Allen Press (formerly AER JOURNAL)
- 2. Ai Squared
- 3. Eschenbach Optik
- **4.** ARVO: Association for Research in Vision and Ophthalmology
- 5. Brightlines Paper
- **6.** Good-Lite
- 7. Chadwick Optical Inc
- 8. Hemianopia.org
- **9.** American Macular Degeneration Foundation
- 10. The Hadley School for the Blind/ACVREP
- 11. Enhanced Vision
- 12. Mutual of America
- 14. OCUTECH, Inc.
- 15. Fork in the Road Vision Rehabilitation Services, LLC
- **16.** American Foundation for the Blind (AFB)

- 17. Beecher Optical Products, Inc.
- 18. University of Alabama at Birmingham
- 19. Freedom Scientific
- 20. AOA Vision Rehabilitation Section
- 21. International Association of Audio Information Services - IAAIS
- 22. ProxTalker.com. LLC
- 23. Alphapointe
- 24, 25. American Printing House for the Blind
- 26, 27. Magnified Vision, Inc.



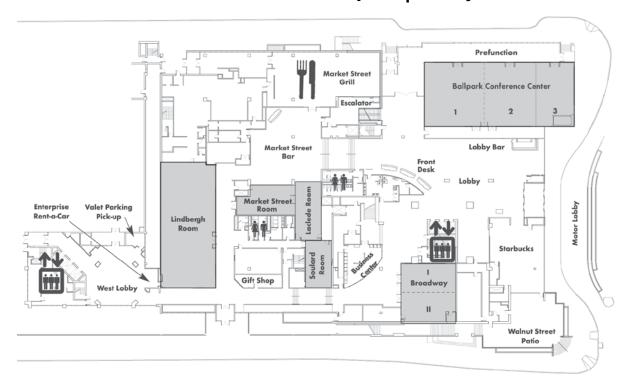
Premium Booth in Arch View Foyer **Precision Vision** 

# **ARCH VIEW BALLROOM**

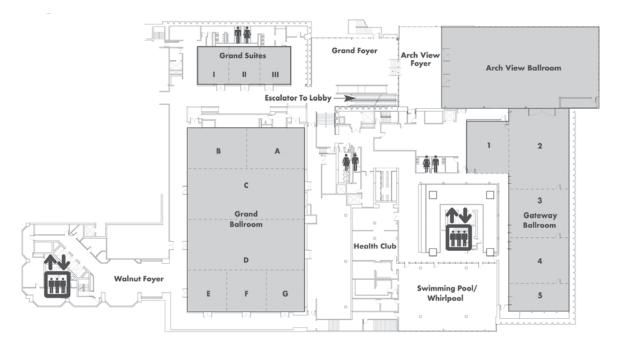


# **Meeting Room Floor Plans**

♣ Hilton St. Louis at the Ballpark | Lobby Level



### **↓** Hilton St. Louis at the Ballpark | Meeting Rooms



### enhanced vision

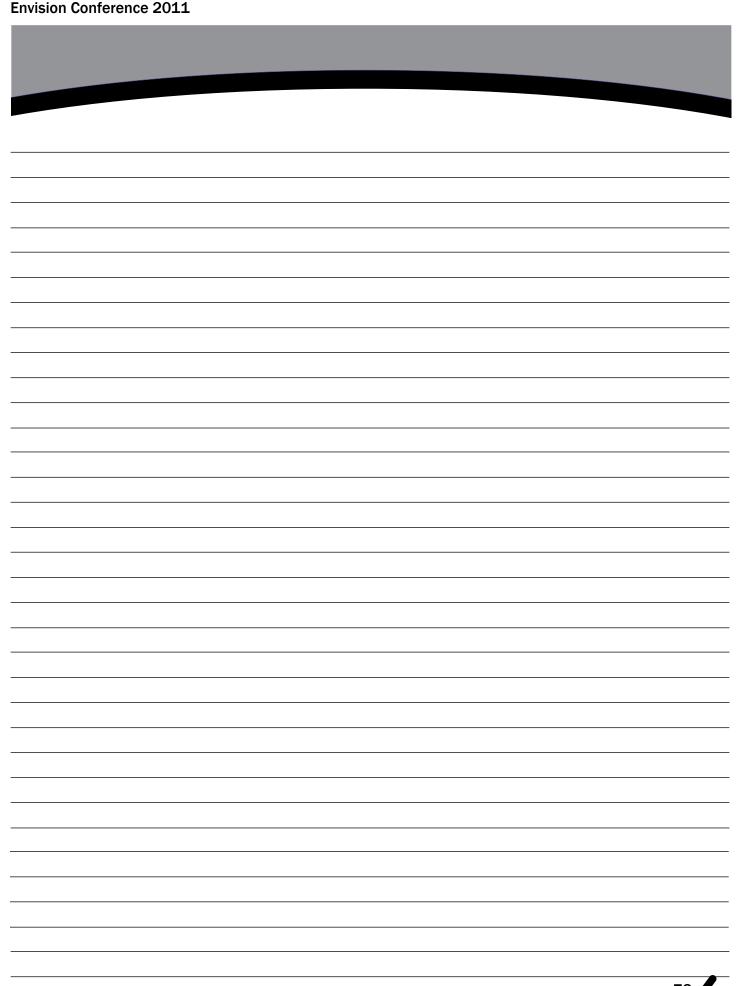


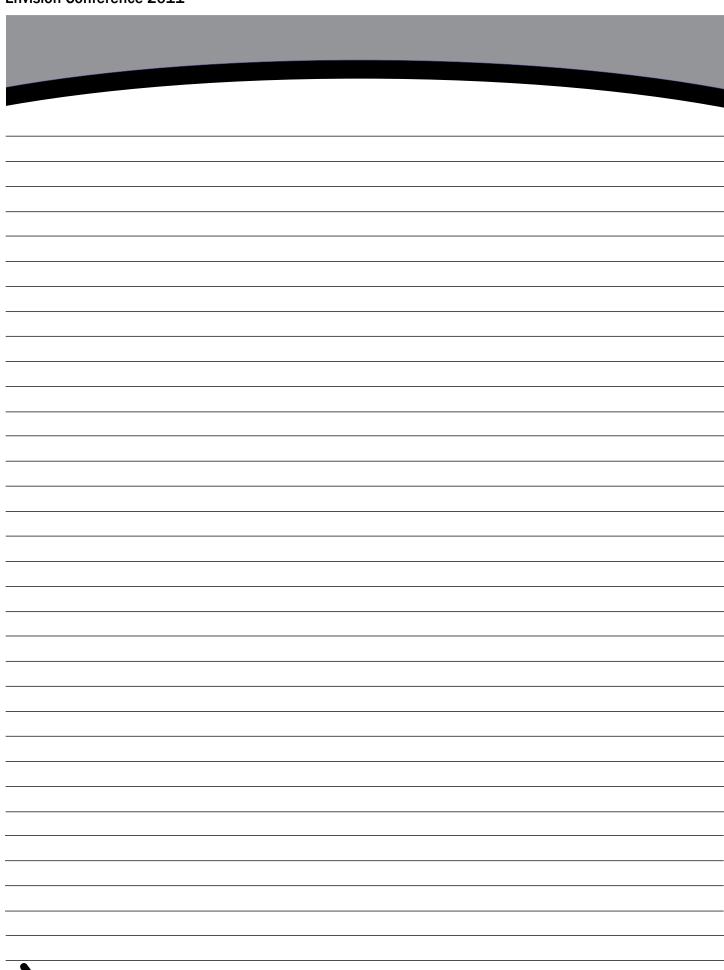
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