“Excellence in Research”

Envision 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
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### 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.

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### 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](http://www.envisionus.com).


“Excellence in Advocacy” Award Winner
American Optometric Association Vision Rehabilitation Section

Gary S. Rubin, PhD

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 – 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 validation of new clinical vision tests used in a wide range of eye diseases including cataracts, macular degeneration and diseases of the optic nerve.

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.
### Friday, September 23

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<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
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<tbody>
<tr>
<td>11:45 AM</td>
<td>Buffet Lunch, 11:45 am-11:55 pm, Arch View Ballroom</td>
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<tr>
<td>1:15 PM</td>
<td>C29: Lenses, Lighting and Luminaires: Getting Back to the Basics: Sandra Fox, OD; Melva Perez-Andrews, OT, CVRT</td>
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<tr>
<td>1:30 PM</td>
<td>C30: Vision Rehab Boot Camp II: Taking Vision Impairment to the Mat! Lori Grover, OD</td>
</tr>
<tr>
<td>1:45 PM</td>
<td>C31: West Virginia Biopic Driving Program: Overview &amp; Update: Chuck Huss, COMS, CDMS</td>
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<tr>
<td>2:00 PM</td>
<td>C32: Employability Skills Training for Adults With Visual Impairments: Karen Wolfe, PhD</td>
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<tr>
<td>2:15 PM</td>
<td>R6: Functional Performance and Outcomes: Ronald A. Schuchard, PhD</td>
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<td>7:00 AM</td>
<td>Continental Breakfast, 7-8 am, Grand Foyer</td>
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<tr>
<td>8:00 AM</td>
<td>C33: Depression and Dementia: Managing Comorbidities in Vision Rehabilitation: Patricia Grant; Kara Crumbliss, OD; David Rakofsky, PsyD; Alfred Rosenbloom, Jr., OD</td>
</tr>
<tr>
<td>9:00 AM</td>
<td>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, SOLV</td>
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<td>10:00 AM</td>
<td>C35: Basic Concepts in Vision Rehabilitation: Stages of Visual Acuity vs. Visual Utility: August Colenbrander, MD</td>
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<td>11:00 AM</td>
<td>C36: Educational Concerns for Students With Ablism: Chryssy Cowan, TVI</td>
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<tr>
<td>12:00 PM</td>
<td>Lunch on your own, 12:15-1:30 pm</td>
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<tr>
<td>1:00 PM</td>
<td>C37: OT: Optics for Therapists: James Deremeik, CLVT; Alexis Malkin, OD; Robert Massot, PhD</td>
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<tr>
<td>2:00 PM</td>
<td>C38: Visual Changes in Veterans Following Blast Injuries: Kia Eldred, OD; Tonya Mennem, OT, CLVT</td>
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<tr>
<td>3:00 PM</td>
<td>C39: Special Considerations for the Older Patients in Low Vision Rehabilitation: Jennifer Gendeman, OTD; Lauren Wiesb, OT; Kimberly Schoessow, OTD</td>
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<tr>
<td>4:00 PM</td>
<td>C40: Severe Brain Injury and Vision Loss: Challenges and Steps Toward Progress: B.J. Lesqueur, CRC, CVRT</td>
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<tr>
<td>5:00 PM</td>
<td>R8: Low Vision Research: Hot off the Press: George Timblake, PhD; Ronal Schuchard, PhD</td>
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<td>C48: Free and Practical Ways of Providing PC Access to Low Vision Patients: Deborah Gilden, COMS, PhD</td>
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<td>C50: Vision Development for Children With Low Vision: Bill Takeshita, OD</td>
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<td>C51: Vision Rehabilitation: Using Theory and Research in the Exam Room: Shrin Hassan, OD, PhD; Eli Kollbaum, OD</td>
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<td>C52: Low Vision Technology: Resources for Keeping Abrace of What’s New: Ike Presley, TVI, CLVT</td>
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<td>R10: Low Vision Psychological Functioning: Laura Drer, PhD</td>
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<td>C55: Medicare Reimbursement and Low Vision Rehabilitation: Current Status: James Deremeik, CLVT</td>
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<td>C56: Seize the Moment! Video Documentation of Student Performance: John Rose, MA; Splid EC-12, ELA 8-12</td>
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<td>C57: Writing for Publication: What’s the Difference? Deborah Gold, PhD; J. Vernon Odum, PhD</td>
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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. Rubin 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

Thursday, September 22, 12-1 pm

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:


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.
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 neuropsychological 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.

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
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, CBS
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, ADVP: 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, CVLT
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:
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, ADVP: 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
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
Amy Wheeler, OT
Ana Perez, OD
8:30-10:30 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 improve patient outcomes. The presentation will utilize clinical case studies and discuss how each discipline can provide pertinent assessment data that can guide treatment.

C3. Addressing Health Literacy in Older Adults With Low Vision
Mary Warren, OT
8:30-10:30 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 improve patient outcomes. The presentation will utilize clinical case studies and discuss how each discipline can provide pertinent assessment data that can guide treatment.
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
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

R2. 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 eye 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

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
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 multi-disciplinary 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

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 smartphone models. 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 smartphone models.

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
2. 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 Sandal, 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.
3. Feel more comfortable and confident working with low vision kids.

CEUs: ACME: 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:
1. Summarize past trends in key areas of low vision education.
2. List influences that led to past and current practices.
3. List broad categories of employment success facilitators.

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

C15. Trends in Low Vision Education: Learning From the Past; Looking Toward the Future
Amanda Luuck, 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. 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.
3. 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

C16. Assisting Clients With Employment Preparation: How to Use the CNIB TAPE Measure
Alexander Shaw, 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: Introductory
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
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.

Objectives:
1. Understand the basic principle components of a low vision assessment.
2. Be familiar with the team of professionals involved in the driver rehab process.

Instruction Level: Introductory
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.

Objectives:
1. Identify gaps/priorities in dual impairment rehabilitation.
2. Select visual tests based on predictive power of risk.
3. Be familiar with the team of professionals involved in the driver rehab process.

Instruction Level: Intermediate
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.

Objectives:
1. Identify young people with neurological vision impairment.
2. List aspects of pedagogy and approaches to learning that will result in positive learning outcomes for these individuals.

Instruction Level: Introductory
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 biotics for the role of active passenger.

Objectives:
1. Select visual tests based on predictive power of risk.
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 pigmentosa.

Instruction Level: Intermediate
CEUs: ACCME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

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.

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

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2
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 identify, track and administer medications.
2. Explain several discipline-specific tools to assess use of medicines and assist with mobility outside the home.
3. Support youth with visual impairments in their employment searches.

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-seeking skills, as well as an organizational tool – a backpack designed for use of by youth with impaired sight – and a Teacher’s Guide.

Instruction Level: Intermediate
Objectives:
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

R4. Mobility Panel
Moderator: Shirin Hassan, OD, PhD
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 Link) 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

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

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’d 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
C28. Plants, Predictions and Possibilities
Kathi Zuniga, M.Ed.
10:45-11:45 am | Gateway 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.
3. List examples of sensory-rich activities that foster self-discovery and prediction of outcomes based on open-ended 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 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 Stelmac, 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 prescriptive 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:
1. Solidify full-scope VR clinical skills through review of nuanced diagnostic and treatment methodology.
2. Run the marathon of comprehensive treatment options including optical systems, therapy and non-medical resources.
3. 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 Biopic 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 biopic driving. This presentation will provide an overview and two-year update of progress regarding the formalized program of biopic driving services offered by the West Virginia Division of Rehabilitation Services.

Instruction Level: Introductory
Objectives:
1. Gain a better understanding of the basic program structure and its criteria for admission through driver licensure, license renewal, removal of driving restrictions and oversight practices.
2. Gain insight into two-year update of progress made with clients served, ancillary services provided and future considerations for this formalized program of biopic driving services.
CEUs: ACVREP: 2, AOTA: 2, CRCC: 2

C32. Employability Skills Training for Adults With Visual Impairments
Karen Wolfe, 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
### C33. Depression and Dementia: Managing Common Comorbidities in Vision Rehabilitation

**Patricia Grant**

**Kara Crumblish, OD**

**David Rakovsky, PsyD**

**Alfred Rosenblum Jr., OD**

1:30-3:30 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:** ACOME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2


**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. Provide accurate medical and educational information to their families.
2. Understand the role of the Teacher of Students with Visual Impairments across the age span, and resources available to support students and their families.

**CEUs:** ACOME: 2, ACVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

### R6. Functional Performance and Outcomes

**Moderator:** Ronald A. Schuchard, PhD

**Ava Bittner,** OD, 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, FAAD, 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 Depression 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 that rehabilitation plans must reflect the differences.
4. Identify and describe relevant screening/assessment and intervention options.
5. Identify research/evidence base supporting selected interventions.

**CEUs:** ACOME: 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, OTVL, 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:** ACOME: 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

**Alfred Rosenbloom Jr., OD**

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.

**Bijana Zovata,** 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 Wolfe,** PhD

4:45 pm – Supervising People Who Are Blind or Visually Impaired: A Qualitative Study of Employer Attitudes.

**Deborah Gold,** PhD

**Instruction Level:** Intermediate
C37. OT: Optics for Therapists
James Deremeik, CLVT
Alexis Makin, 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 gain 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 aid. Therapists will become more confident and comfortable in training low vision patients.

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

Saturday, September 24

C38. Visual Changes in Veterans Following Blast Injuries
Kia Ensted, 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. Residents of 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. LaJeune, 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.
3. Participants will recognize the uniqueness and challenges associated with brain injury.

CEUs: ACCME: 2, ACVREP: 2, AOTA: 2, COPE: 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
Objectives:
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 eye 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

Envision Conference 2011

Sessions
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: ACME: 1, ACVREP: 1, COPE: 1, CRCC: 1


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 intracocular 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: ACME: 1, ACVREP: 1, AOTA: 1, COPE: 1, CRCC: 1

C43. Home Lighting Assessment and Modifications

Monica Perlmutter, OT, CLVT
Nancy Kusen, 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 situations. 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:
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

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

Jennifer Coy, TVI, CLVT, COMS
Scott McDougall, 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: ACME: 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
Objectives:
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.

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: AVREP: 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: AVREP: 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 bimocular 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, AVREP: 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 among 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, AVREP: 2, AOTA: 2, COPE: 2, CRCC: 2

C51. Vision Rehabilitation: Using Theory and Research in the Exam Room
Shirin Hassan, OD, PhD
Eli Kolbaum, 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, AVREP: 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: AVREP: 2, AOTA: 2, CRCC: 2
R10. Low Vision and Psychological Functioning
Moderator: Laura Drexel, 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: 1, ACVREP: 1, AOTA: 1, CRCC: 1

C54. Determining Statutory Blindness and Visual Disability
David Lewenz, 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

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
Objectives:
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, CRCC: 1

C55. Medicare Reimbursement and Low Vision Rehabilitation: Current Status
James Dremenic, 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 provide 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
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
Objectives:
1. Describe three pitfalls in writing for publication.
2. Describe the process for scientific peer review of manuscripts.
3. List four advantages to publishing written work.

CEUs: ACVREP: 1, AOTA: 1, CRCC: 1
Erika Andersen, CLVT
E20. 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 eye.

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 tools to monitor disease and therapeutic outcomes. 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 Eye 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**

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 impairment at the Education Service Center - Region 13 for 16 years, and is currently the Statewide Mentor Coordinator in the TSBVI Outreach Department. She earned a Bachelor of Science in Education with an endorsement in Deficient Vision (1974) and a master's degree in Special Education, Infant/ Early Childhood (1984), both from the University of Texas at Austin. Ms. Cowan’s current areas of special interest include mentoring new VI professionals, programming for students with low vision, performing literacy media assessments for low vision students, and low vision device training.

**Jennifer Coy, TVI, CLVT, COMS**

C46. **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.

**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 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 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’audologie, faculté de médecine, 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

Deborah Gilden, PhD, is the Associate Director of the Rehabilitation Engineering Research Center at The Smith-Kettlewell Eye 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

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.
and visual function in low vision patients. Ms. Grant has an
instrumental in providing training for patients with macular
Chicago, Department of Ophthalmology. Ms. Grant has been
involved with VA research for seven years in collaboration
R10. Low Vision and Psychological Functioning
Comorbidities in Vision Rehabilitation
Patricia Grant
C33. Depression and Dementia: Managing Common
R18. 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
On!
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 provid-
ers. 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
WC. 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 Rock-
hurst 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, cardiovas-
cular 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 con-
tinuing nursing education provider in the state of Kansas.
Ms. Hagan is a member of numerous professional nursing
organizations. She holds certifications in diabetes education
diabetes and 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 gradu-
ated with an Optometry degree from the Queensland Universi-
ty 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 prac-
ticed 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
WS. 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 Mas-
sachusetts Eye and Ear Infirmary and Scheepens 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 appoint-
ment 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 Huss, COMS, CDRS

Mary Lou Jackson, MD

Chuck Huss, COMS, CDRS

Ana M. Juricic, OD

Elli Kollbaum, OD

K. Bradley Kehler, OD, FAAO

Eli Kollbaum, OD

Kendall Krug, OD

Nancy Krusen, OT, PhD
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 ABP 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


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 part-time 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 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

C46. 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 VA Medical Center in Houston, Texas, where she advocates for Vision services for Operation Enduring Freedom/Operation Iraqi 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.
Limited or no vision.

Tutorials that may help to improve quality of life for people with 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.

R8. Low Vision Research: Hot off the Press

Amy Nau, OD

R9. 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 peer-reviewed 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, where he also served 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.

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

R6. 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 Laurnburg, 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.

C6. Contact Lenses as an Adjunct of Vision Rehabilitation

William Park, OD, FAAO

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

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.

R5. Difficulties in Designing Clinical Trials: Finding Solutions

Alan R. Morse

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.

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

William Park is a graduate of the University of Akron and the Case Western Reserve University, the School of Optometry of the University of California at Berkeley, and the University of Florida. Dr. Park 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.

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 ofUTHSCSA. Her teaching focus is in the area of low vision and vision rehabilitation.
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.
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-Kettlewel Eye 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 perimeter testing methods. He has many publications and presentations on the topic of macular perimeter, especially as it relates to vision rehabilitation and monitoring of macular disease progression and treatment. Dr. Schuchard is a Research Career Scientist at 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

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 self-management 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 OD 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.

Kara Sternberg, OT, CLVT
C47. Incorporating Leisure and Social Participation into the Clinical Setting

Kara Sternberg has been an occupational therapist for more than three years and has specialized in low vision for the past two years. Currently, Kara 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, Kara 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). Kara’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. Kara 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 1967, 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 consumer-focused 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 Nova Southeastern University. He completed post-doctoral 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 the Università degli Studi “La Sapienza” di Roma and his specialist in ophthalmology from the II Scuola di Specializzazione di Università degli Studi “La Sapienza” di Roma in 1986. His appointments have included Ophthalmology Consultant of Associazione Nazionale Italiana Difesa degli Interessi dei Difettivi, 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 co-author 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 CRUDEM, 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 JIBV, 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.
Kathi Zuniga, M.Ed.
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. Biljana 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.

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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 Foyer.

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 ZoomText Express!

Alphapointe
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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.

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AOA Vision Rehabilitation Section
Booth 20
The AOA Vision Rehabilitation Section supports the interdisciplinary 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

Chadwick Optical is the world’s largest company devoted solely to making products designed specifically for people who are legally blind.

Chadwick Optical offers 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.

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.

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.

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Fork in the Road Vision Rehabilitation Services, LLC
www.LowVisionSimulators.com
Booth 15
Fork in the Road offers 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.

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International Association of Audio Information Services-IAIAS
www.iaias.org
Booth 21
IAIAS 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 Magnified 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 eye 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.

Precision Vision
www.precision-vision.com
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) ProxTalker (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.

Ocutech, Inc.
www.ocutech.com
Booth 14
Ocutech is a manufacturer of state-of-the-art biopic telescope systems for the blind and visually impaired.

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NEW – Glasses for Prism Adaptation Therapy (Neglect)

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
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.aerbi.org
Booth 4
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.

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.

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### Continuing Education

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)
- The Commission on Accreditation of Rehabilitation Facilities (CARF)
- The Commission on Accreditation of Vision Rehabilitation and Education Professionals
- The Foundation for Research and Education (TFARE)
- The Board for Certification of Vision Rehabilitation Therapists (VCRT)
- Consultant, Private Practitioner
- The Commission on Accreditation of Vision Rehabilitation Therapists (VCRT)
- Consultant, Private Practitioner

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 Accredited Provider is responsible for 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 education methods, and the evaluation of the activity.

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### 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, CVLT, Envision Vision Rehabilitation Center
- Anne Riddering, OTR/L, CVLT, COMS, Henry Ford Center for Low Vision Rehabilitation and Research
- Debra A. Sokol-McKay, MS, OTR, CDE, SCLV, CLVT, CVRT, Consultant, Private Practitioner

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#### WEDNESDAY WORKSHOPS

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#### THURSDAY SESSIONS

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#### FRIDAY SESSIONS

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### 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.

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### Continuing Education CEUs

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### Keynote Speakers

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Attendee Resources

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

- **Tuesday**: 3-7 pm
- **Wednesday**: 7 am-6 pm
- **Thursday**: 7 am-6 pm
- **Friday**: 7 am-5:30 pm
- **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 Cafe 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):**
- Wednesday, 8-9 am; Thursday-Friday, 7-8 am
- Available daily from 6-12 am.

**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, 10:10-10:15 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 9-11 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.

**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**
- **Busch Stadium**: 1 block S
- **Kiefer Plaza**: 1 block W
- **Old Court House**: 1 block W
- **Gateway Arch**: 2 blocks E
- **City Center**: 0.03 miles SW
- **Eugene Field House and Toy Museum**: 0.04 miles E
- **Scottrade Center**: 0.2 miles W
- **City Garden**: 0.2 miles
- **Edward Jones Dome**: 0.4 miles N
- **Intl. Bowling Museum**: 0.4 miles S
- **Laclede’s Landing**: 0.4 miles S
- **St. Louis Convention Center**: 0.4 miles N
- **Union Station**: 0.9 miles W
- **City Museum**: 1 mile W
- **Anheuser-Busch Brewery**: 2 miles
- **St. Louis Art Museum**: 5 miles W
- **St. Louis Science Center**: 5 miles W
- **St. Louis Zoo**: 5 miles W
- **St. Louis Childrens Museum**: 12 miles W
- **Grant’s Farm**: 12.1 miles S
- **Six Flags St. Louis**: 25 miles SW

**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 Foyer.

**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:

- **Tuesday**: 3-7 pm (in Grand Foyer)
- **Wednesday**: 7 am-6 pm
- **Thursday**: 7 am-6 pm
- **Friday**: 7 am-5:30 pm
- **Saturday**: 7 am-4 pm

**Attendee Resources**

**Attendee Registration**
Guest Registration and Check-In is located in the main lobby at the following desk:
- **Registration Desk**: Open daily from 7 am-5:30 pm.

**Parking Information**
- **Valet Parking**: $25/day.
- **Self-Parking**: Available daily from 6:30 am-10 pm.

**Lost and Found**
- **Registration Desk**
  Messages for attendees can be left and retrieved at the Conference Registration Desk.
- **Messages for Attendees**: In the Grand Foyer.

**Lost and Found**
- **Registration Desk**
  **Lost and Found**
  Lost and found is located at the Conference Registration Desk in the Grand Foyer.

**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:

- **Tuesday**: 3-7 pm (in Grand Foyer)
- **Wednesday**: 7 am-6 pm
- **Thursday**: 7 am-6 pm
- **Friday**: 7 am-5:30 pm
- **Saturday**: 7 am-4 pm

**Attendee Resources**
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
13. OCUTECH, Inc.
14. Fork in the Road Vision Rehabilitation Services, LLC
15. American Foundation for the Blind (AFB)
16. University of Alabama at Birmingham
17. Freedom Scientific
18. AOA Vision Rehabilitation Section
19. International Association of Audio Information Services - IAAIS
20. ProxTalker.com, LLC
21. Alphapointe
22. American Printing House for the Blind
23. Magnified Vision, Inc.

Meeting Room Floor Plans

Hilton St. Louis at the Ballpark | Lobby Level

Premium Booth in Arch View Foyer
Nidek, Inc.

Premium Booth in Arch View Foyer
Precision Vision

Hilton St. Louis at the Ballpark | Meeting Rooms
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September 26, 2011
Registration and Submissions Open Online

March 19, 2012
Deadline for Clinical Education and Research Submissions and Edits

April 20, 2012
Clinical Education and Research Presentation Selection Notification

June 29, 2012
Early Bird Registration Deadline
Deadline for Presentation Materials and Handouts

July 6, 2012
Deadline for Advance Price Exhibitor Registration

August 6, 2012
Cancellation Deadline

August 17, 2012
Hotel Room Block Deadline
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