







ENVISION® CONFERENCE

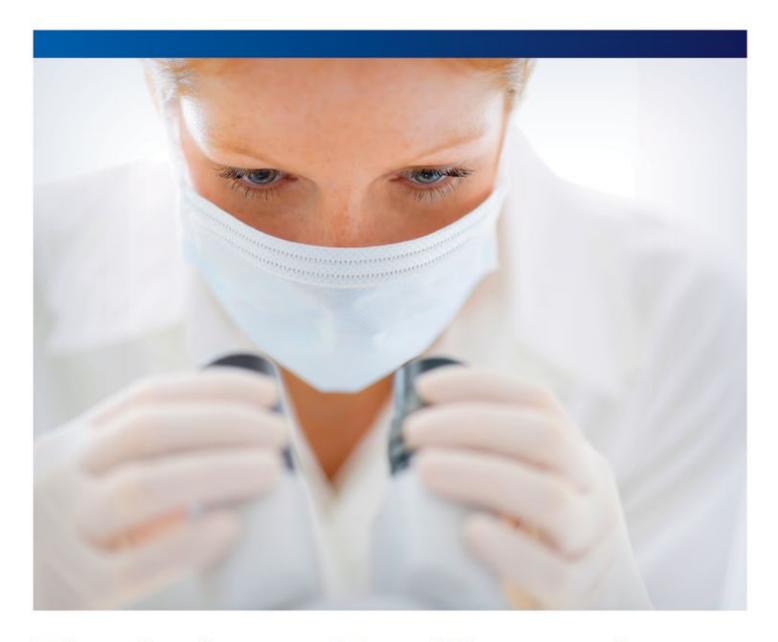
A multidisciplinary low vision rehabilitation & research conference by Envision University

September 19-21, 2013

Hyatt Regency Minneapolis
1300 Nicolett Mall
Minneapolis, Minnesota

www.envisionconference.org





Thanks for making life even better

We applaud Envision for improving the quality of life of—and providing inspiration for—the blind and visually impaired through employment, outreach, rehabilitation, education, and research.

When businesses, organizations, and people come together with a common goal, we believe life gets better.

lifetechnologies.com





About Envision University

The number of individuals in the United States aged 65 or older is expected to more than double to nearly 70 million by 2030. As the population of older adults increases, so too does the number of people with vision impairments that significantly impact their quality of life. Additionally, vision loss or blindness can originate from injury or trauma, congenital or genetic origin, or disease beginning at birth or early childhood. That means virtually every medical professional will come into contact with a patient with low vision. As such, they need the most up-to-date research and education available to make good clinical decisions for patients in their care.

It was with this growing need to educate vision rehabilitation service providers that the Envision Conference was created. In 2006, the Envision Conference was launched as the first multidisciplinary low vision rehabilitation and research conference of its kind. Over the years, hundreds of low vision professionals from multiple fields and disciplines have joined to share their ideas, research and knowledge about the issues that face low vision individuals every day.

Since that first year, Envision's professional education and research program has expanded to include several continuing education



opportunities each year as well as a journal publication, *Visibility*. As the need for education increases, so does our responsibility to provide it. It was with this in mind that Envision University was born.

The mission of Envision University is to provide multidisciplinary continuing education and research opportunities for low vision rehabilitation professionals, establishing best practices to ensure continued research and clinical care for individuals who are blind or visually impaired. Our promise is to collaborate with vision rehabilitation and research professionals to provide relevant multidisciplinary continuing education and research opportunities that address practice gaps in current standards of care and research.

Learn more about Envision University at www.envisionuniversity.org.



A Broader Mission

Since 1933, Envision has become one of the nation's most trusted service and employment providers for people who are blind or low vision. From providing a job to providing much needed resources, the goal is always the same – independence.

Headquartered in Wichita, Kansas, the mission of Envision, Inc. is to improve the quality of life and provide inspiration for the blind and visually impaired through employment, outreach, rehabilitation, education and research.

Learn more at www.envisionus.com.



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Envision Conference Committees

Envision Conference programming is made possible through the hard work and dedication of the following committees:

Clinical Education Peer Review Committee

- Gary Asano, OD, FAAO, Assistant Professor, Southern California College of Optometry;
 Chair, Low Vision Rehabilitation Section, California Optometric Association
- Ellen Bowman, TVI, COMS, UAB Vision Science Research Center, University of Alabama at Birmingham
- Ronald Cole, MD, MVT Visual Rehabilitation Center, Sacramento, CA
- **Michael Epp, MS**, Director of Professional Education & Research, Envision, Inc.
- **Kevin Houston, OD, FAAO**, Instructor in Ophthalmology, Schepens Eye Research Institute, Boston, MA
- Linda Lawrence, MD, Private Practice, Salina, KS
- Pam Simpson, Senior Program Manager, Continuing Education, University of Kansas Medical Center
- Debra A. Sokol-McKay, MS, OTR, CDE, SCLV, CLVT, CVRT, Consultant Private Practitioner

Research Abstract Peer Review Committee

- **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
- **Shirin E. Hassan, BAppSc(Optom), PhD**, Assistant Professor, Indiana University School of Optometry
- Gordon Legge, PhD, University of Minnesota, Minneapolis, MN
- **Olga Overbury, PhD**, School of Optometry, University of Montreal; Department of Ophthalmology, McGill University, Montreal, Quebec, Canada
- **George T. Timberlake, PhD**, Senior Eye/Vision Researcher, Kansas City Veterans Administration Medical Center, Kansas City, Missouri



Envision Oculus Award



August Colenbrander, MD, PhD, has been selected by a panel of his peers to receive the **2013 Envision Oculus Award**. Dr. Colenbrander was born in the Netherlands where he received his medical and ophthalmological training. In 1971, he moved to San Francisco where he became the Medical Director of the California Pacific Low Vision Services. Dr. Colenbrander was a founding board member of the International Society for Low Vision Research and Rehabilitation (ISLRR) and represented the sub-specialty

of Vision Rehabilitation on the Advisory Committee of the International Council of Ophthalmology (ICO) from 2002 until 2012. He also has a long-standing interest in diagnostic classifications. In the 1970's, Dr. Colenbrander coordinated a thorough revision of the eye chapter in the Ninth Revision of the International Classification of Diseases (ICD-9). Presently, he co-chairs the World Health Organization's topic advisory group for ophthalmology.

"August Colenbrander has made outstanding contributions in the fields of education, organization and research in low vision. There has been both national and international impact from his work. Dr. Colenbrander is ready to support young researchers through advice and active contributions. He serves as a promoter of new projects to improve low vision assessment and training, with a wide international network of collaborators." – Gianfrancesco Villani, MD, FEBO, Low Vision and Microperimetry Center, Verona, Italy.

The Envision Oculus Award is presented to the individual(s) or organization whose career or program has had a national or international impact for people who are blind or low vision through professional collaboration, advocacy, research or education. Nominations for the 2014 Oculus Award will be accepted through April 4, 2014, to be presented at Envision Conference 2014 in Minneapolis, Minnesota. A nomination form is included in your attendee resources, or you can visit **www.envisionconference.org** to submit your nomination.



Envision Award in Low Vision Research

Alex Bowers, PhD, will be awarded the **2013 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 peer reviewed and based on research by a scientist having six or more years post-terminal or professional degree research.



Alex Bowers is an optometrist with a PhD in Vision Rehabilitation from Glasgow Caledonian University, Scotland, where she evaluated the effects of vision impairment and magnifiers on reading. She then moved to the U.S. to undertake post-doctoral training in Dr. Eli Peli's lab at Schepens Eye Research Institute, Boston, whe

post-doctoral training in Dr. Eli Peli's lab at Schepens Eye Research Institute, Boston, where her research interests diversified to include walking and driving with vision impairment. She is currently an Assistant Professor at Harvard Medical School, and was the 2010 recipient of the Irvin and Beatrice Borish Young Investigator Award from the American Academy of Optometry. Her ongoing research includes: evaluating the effects of vision impairment on driving skills and behaviors; investigating the relationship between driving performance and novel tests of vision and attention to determine which tests have the greatest potential for identifying at-risk drivers; and evaluating the benefits of optical devices to assist visually impaired people when driving and walking.



Schedule Overview

Wednesday | September 18

2-6 pm **Registration Open** | Nicollet Promenade

Speaker Ready Room Open | Grant Room

4-6 pm **Pre-Conference Research Activity: Translating Research**

Into Clinical Practice | Nicollet B/C

Thursday | September 19

7 am-5:30 pm **Registration Open** | Nicollet Promenade

Speaker Ready Room Open | Grant Room

7-8 am **Continental Breakfast** | Nicollet Promenade

8-9:30 am Plenary Session | Nicollet B/C

9:30-9:45 am **Coffee Break** | Nicollet Promenade

9:45 am-5:30 pm **Conference Sessions** | See Schedule-at-a-Glance

12-8 pm **Exhibit Hall Open**

12-1 pm *Lunch on Your Own*

3-3:30 pm **Coffee Break** | Exhibit Hall

5:30-8 pm Welcome Reception | Exhibit Hall

Friday | September 20

7 am-5:30 pm **Registration Open** | Nicollet Promenade

Speaker Ready Room Open | Grant Room

7 am-1:15 pm Exhibit Hall Open

7-8 am **Continental Breakfast** | Exhibit Hall

8 am-5:30 pm **Conference Sessions** | See Schedule-at-a-Glance

10:15-10:45 am **Coffee Break** | Exhibit Hall

11:45 am-1:15 pm **Buffet Lunch** | Exhibit Hall

3:15-3:30 pm **Coffee Break** | Nicollet Promenade

Saturday | September 21

7 am-5 pm **Registration Open** | Nicollet Promenade

7 am-4 pm Speaker Ready Room Open | Grant Room

7-8 am **Continental Breakfast** | Nicollet Promenade

8 am-5 pm Conference Sessions | See Schedule-at-a-Glance

10-10:15 am **Coffee Break** | Nicollet Promenade

12:15-1:30 pm Lunch on Your Own

3:45-4 pm **Coffee Break** | Nicollet Promenade

Wedne	sday, September 1	8	
2:00 PM	Registration Open, 2-6 pm, Nicollet Promenade		
	Speaker Ready Room Open, 2-6 pm	i, Grant Room	
4:00 PM	Pre-conference Research Activity: Translating Research Into Clinical	Practice, 4-6 pm, Nicollet B/C	
Thursd	ay, September 19		
7:00 AM	Registration Open, 7 am-5:30 pm, N	licollet Promenade	
	Speaker Ready Room Open, 7 am-5	:30 pm, Grant Room	
	Continental Breakfast, 7-8 am, Nico	llet Promenade	
8:00 AM	Plenary Session: Lea Hyvärinen, N	MD, PhD, FAAP, 8-9:30 am, Nicollet B/C	
9:30 AM	Coffee Break, 9:30-9:45 am, Nicolle	t Promenade	
	Nicollet A1	Nicollet A2	
9:45 AM	C1: Too Few Cooks Spoil the Broth: An Update on Pediatric Low Vision Care. <i>Andrew Lewis</i> , OD, MD	C2: Customizing the Reading Experience for the Low Vision Reader. Lupe A. Mejia, OD, FAAO; Jennifer Gendeman, OTD, OTR/L, CLVT	
11:00 AM	C5 : How do Mainstream Lenses Have a Low Vision Application. <i>Gary Asano, OD, FAAO</i>	C6: Addressing Safety in Multidisciplinary Vision Rehab Program. Kimberly Quintal, MS, OTR/L; Lauren Nisbet, OT; Mary Lou Jackson, MD	
12:00 PM	Exhibits Open, 12-8 pm, Exhibit Hall		
	Lunch on your own, 12-1 pm		
1:00 PM	C9: An Overview of CVI From Medical and Educational Perspectives. Amanda Lueck, PhD; Lea Hyvärinen, MD, PhD, FAAP; Linda Lawrence, MD	C10: Functional and Rehabilitation Implications of Common Eye Diseases. Sarah Hinkley, OD, FCOVD	

	Wednes	sday, Septen	nber 18
	Registration Open, 2-6 Speaker Ready Room Op	pm, Nicollet Promenade en, 2-6 pm, Grant Room	2:00 PM
Translating F	Pre-confer Research Into Clinical Practic	rence Research Activity: ce, 4-6 pm, Nicollet B/C	4:00 PM
	Thurs	sday, Septen	nber 19
R	egistration Open, 7 am-5:30	pm, Nicollet Promenade	7:00 AM
Spe	eaker Ready Room Open, 7 ai	• •	
	Continental Breakfast, 7-8	•	0.00 454
Plenary Session: Lea	Hyvärinen, MD, PhD, FAAP,	,	8:00 AM
Coffee Break, 9:30-9:45 am, Nicollet Promenade			9:30 AM
Nicollet D1	Nicollet D2	Nicollet D3	
C3: Demystifying Low Vision Optics. <i>David Lewerenz, OD, FAAO</i>	C4: Low Vision Rehabilitation for Multiple Sclerosis. <i>Julie Nastasi,</i> <i>OTD, OTR/L, SCLV</i>	R1: Low Vision Plus: Comorbidity and Vision Loss. Moderator: Walter Wittich, PhD, FAAO, CLVT	9:45 AM
C7: Clinical and Technical Considerations in Prescribing Bioptic Telescopes. <i>Henry Greene, OD</i>	C8: Keeping Low Vision Caregivers' Needs in Sight. <i>Orli Weisser-Pike,</i> <i>OTD, CLVT, SCLV</i>		11:00 AM
	Exhibits Ope	n, 12-8 pm, Exhibit Hall	12:00 PM
Lunch on your own, 12-1 pm			
C11: "Generize" for Change: Understanding Generational Theory and its Application to Vision Rehabilitation. Colleen O'Donnell, OTR/L, CLVT	C12: Functional Assessment and Rehabilitation With Prosthetic Vision. Duane Geruschat, PhD, CLVT, COMS; Gislin Dagnelie, PhD; Nilima Tanna, OT, CLVT; Jessy Dorn, PhD	R2: Vision Loss and Mobility Issues. <i>Moderator: George Timberlake, PhD</i>	1:00 PM

Thursday, September 19 cont.			
3:00 PM	Coffee Break, 3-3:30 pm, Exhibit Hall		
	Nicollet A1	Nicollet A2	
3:30 PM	C13: From Diapers to Diplomas: Ensuring Academic Success for the Child With Visual Impairment. Sandra Fox, OD	C14: Eccentric Viewing Training: From A to Z Using Older Strategies to Newest Computer Software. <i>Cori</i> <i>Layton, OTR, SCLV; Denny Moyer, BS,</i> <i>COTA, SCALV</i>	
5:30 PM	Welcome Reception, 5:30-8 pm, Exhibit Hall		
Friday,	, September 20		
7:00 AM	Registration Open, 7 am-5:30 pm, Nicollet Promenade		
	Speaker Ready Room Open, 7 am-5:30 pm, Grant Room		
	Exhibits Open, 7 am-1:15 pm, Exhibit Hall		
	Continental Breakfast, 7-8 am, Exhibit Hall		
	Nicollet A1	Nicollet A2	
8:00 AM	C17: Integration of Vision Rehabilitation Strategies in a Multidisciplinary Mobility and Falls Prevention Clinic. <i>Tammy Labreche, BSc, OD; Ann Plotkin, OD</i>	C18: Genetics and Inherited Ocular Disease. <i>Mary Lou Jackson, MD;</i> <i>Emily Place; Lylas Mogk, MD</i>	
9:15 AM	C21: Alzheimer's Disease: Functional and Structural Considerations in the Visual System. <i>Denise A. Valenti, OD</i>	C22: From El Salvador to Tanzania: A Global Approach to Low Vision. <i>Maria Betancourth Zúniga, OD;</i> <i>Rebecca Kammer, OD, FAAO</i>	
10:15 AM	Coffee Break, 10:15-10:45 am, Exhibit Hall		

	Thursday,	September 1	9 cont.
Coffee Break, 3-3:30 pm, Exhibit Hall			3:00 PM
Nicollet D1	Nicollet D2	Nicollet D3	
C15: Designing New Service Pathways in Vision Rehabilitation and Planning for Outcomes Measurement. Deborah Gold, PhD	C16: Prescribing LED Lighting for Low Vision: A Bright Idea! Peter Borden, PhD; Michele Klein	R3: Normal and Impaired Vision in Older Drivers. Moderator: Charles A. Collin, PhD	3:30 PM
	Welcome Reception	, 5:30-8 pm, Exhibit Hall	5:30 PM
	Fr	iday, Septen	nber 20
Ro	egistration Open, 7 am-5:30 p	om, Nicollet Promenade	7:00 AM
Spe	aker Ready Room Open, 7 an	n-5:30 pm, Grant Room	
Nicollet D1	Nicollet D1 Nicollet D2 Nicollet D3		
C19: Using Read- ing Tests to Evaluate Macular Function. Donald Fletcher, MD	C20: Making Sense of e-Readers vs. Portable Magnifiers vs. Zoom Magnifying Apps? <i>Ana Juricic, OD</i>	R4: Social Inclusion and Participation of Older Adults. Moderator: Judith Renaud, OD, PhD	8:00 AM
C23: The IVA System: Documenting How the PERSON Functions. August Colenbrander, MD, PhD	C24: Psychosocial Aspects of Promoting Optical Device Use. Cynthia Bachofer, PhD, TVI, CLVT		9:15 AM
	Coffee Break, 10:1	5-10:45 am, Exhibit Hall	10:15 AM

Friday, September 20 cont.			
	Nicollet A1	Nicollet A2	
10:45 AM	C25: Getting to Acceptance - Low Vision Success is About More Than Optics. <i>Bennett</i> <i>McAllister, OD, FAAO</i>	C26: Electronic Video Binocular Eyewear What's New? <i>Ana Juricic, OD</i>	
11:45 AM	Buffet Lunch, 11:45 am-1:15 pm,	Exhibit Hall	
1:15 PM	C29: Beyond Magnifiers: Addressing the Complexities of Aging With Vision Loss. <i>Mary Warren, PhD, OTR/L, SCLV, FAOTA; Monica Perlmutter, OTD, SCLV</i>	C30: How Do Fields and Filters Help Prescribe in Low Vision? <i>Gary Asano,</i> OD, FAAO	
3:15 PM	Coffee Break, 3:15-3:30 pm, Nicollet	Promenade	
3:30 PM	C33: Illuminating the Lighter Side of Low Vision. Angie Ryan, OTR/L, CLVT; Jenn Shull, CLVT, CVRT; Laurie Hoffman, OD, FAAO	C34: Bigger is Not Always Better: When Visual Impairment in a Child is a Red Herring! <i>Sandra Fox, OD</i>	
Saturday, September 21			
7:00 AM	Registration Open, 7 am-5 pm, Nicollet Promenade		
	Speaker Ready Room Open, 7 am-4 pm, Grant Room		
	Continental Breakfast, 7-8 am, Nicollet Promenade		

	Friday,	September 2	20 cont.
Nicollet D1	Nicollet D2	Nicollet D3	
C27: In the Middle: Helping Visually Impaired Patients With Their Mid-Range Needs. David Lewerenz, OD, FAAO	C28: Providing Low Vision Rehabilitation in the Home - An Essential Guide. Paul Scaglione, MS, OTR, CLVT	R5: Exploring Alternative Vision Rehabilitation Models. <i>Moderator: Donald Fetcher, MD</i>	10:45 AM
	Buffet Lunch, 11:45 a	m-1:15 pm, Exhibit Hall	11:45 AM
C31: There's an App for ThatOne Year Later: What's New in 2013. <i>Ana Juricic, OD</i>	C32: The ABCs of Diabetes Self-Management. <i>Debra</i> Sokol-McKay, MS, OTR/L, CDE, SCLV, CVRT, CLVT		1:15 PM
	Coffee Break, 3:15-3:30	pm, Nicollet Promenade	3:15 PM
C35: Starting a Private Practice in Occupational Therapy: Bringing Low Vision Rehabilitation Therapy to Your Community. Deann Bayerl, MS, OTR/L, SCLV	C36: RP From A to Z. David Lewerenz, OD, FAAO	R7: Older Adults and Vision Loss. <i>Moderator: Olga Overbury, PhD</i>	3:30 PM
Saturday, September 21			
Registration Open, 7 am-5 pm, Nicollet Promenade			7:00 AM
Speaker Ready Room Open, 7 am-4 pm, Grant Room Continental Breakfast, 7-8 am, Nicollet Promenade			

Gatara	ruay, September 21 cont.		
	Nicollet A1	Nicollet A2	
8:00 AM	C37: OD/OT: One Team's Low Vision Rehabilitation Partner- ship - 10 Years in the Making. Melva Perez Andrews, OTR, CLVT, MBA; Sandra Fox, OD	C38: Low Vision Rehabilitation for Macular Degeneration: An Interdisciplinary Approach. <i>Deena Sandall, OD</i>	
10:00 AM	Coffee Break, 10-10:15 am, Nicollet	Promenade	
10:15 AM	C41: Visual Rehabilitation Training With Implantable Miniature Telescope for End-Stage Age-Related Macular Degeneration - Occupational Therapy and Optometry. <i>Karl Hammer, OT; Laura Miller, OD</i>	C42: Occupational Therapy Practice Guidelines for Older Adults With Low Vision. <i>Jennifer Kaldenberg, MSA,</i> OTR/L, SCLV, FAOTA; Stacy Smallfield, OTD, CLVT	
12:15 PM	Lunch on your own, 12:15-1:30 pm		
1:30 PM	C45: Two New Programs to Address Patient Awareness of Binocular Central Visual Field Defects. <i>Gianfrancesco M. Villani, MD, FEBO; Donald Fletcher, MD</i>	C46: Smartphones and Tablets - Is This the Way of the Future? <i>Ana Juricic, OD</i>	
2:45 PM	C47: Vision Rehabilitation Through the Lens of Primary Care. <i>Sarah Hinkley, OD, FCOVD</i>	C48: Movement Disorder and the Visual System: Parkinson's Disease. Denise A. Valenti, OD	
3:45 PM	Coffee Break, 3:45-4 pm, Nicollet Promenade		
4:00 PM	C49: E&M Coding for Low Vision: The Impairment, Not the Disease. <i>Lylas Mogk, MD</i>	C50: Low Vision Rehabilitation in a Long-Term Care Facility: A Pilot Project Overview and Outcomes. <i>Heidi Panchaud, CVRT; Tammy Labreche, BSc, OD</i>	

Saturday, September 21			
Nicollet D2	Nicollet D3		
C40: Low Vision Rehabilitation for AMD: Exam Tips, Easy Tools, and Efficient Team Process. Rebecca Kammer, OD, FAAO	R8: Research on Reading Tests for Vision Rehabilitation. <i>Moderator:</i> Donald Fletcher, MD	8:00 AM	
Coffee Break, 10-10:15	am, Nicollet Promenade	10:00 AM	
C44: Playing Together Nicely: Teachers, Doctors and Parents of Visually Impaired Children. Dennis Siemsen, OD, MHPE; Kristin Oien, COMS, TBVI; Julie Kochevar, COMS, TBVI	R9: Assistive Devices and Optics for Low Vision. <i>Moderator:</i> Olga Overbury, PhD	10:15 AM	
Lunch on your own, 12:15-1:30 pm		12:15 PM	
		3:45 PM	
	C40: Low Vision Rehabilitation for AMD: Exam Tips, Easy Tools, and Efficient Team Process. Rebecca Kammer, OD, FAAO Coffee Break, 10-10:15 C44: Playing Together Nicely: Teachers, Doctors and Parents of Visually Impaired Children. Dennis Siemsen, OD, MHPE; Kristin Oien, COMS, TBVI; Julie Kochevar, COMS, TBVI Lunch on yo	C40: Low Vision Rehabilitation for AMD: Exam Tips, Easy Tools, and Efficient Team Process. Rebecca Kammer, OD, FAAO Coffee Break, 10-10:15 am, Nicollet Promenade C44: Playing Together Nicely: Teachers, Doctors and Parents of Visually Impaired Children. Dennis Siemsen, OD, MHPE; Kristin Oien, COMS, TBVI; Julie Kochevar, COMS, TBVI	





Pre-conference Research Activity

Wednesday, September 18, 4-6 pm | Nicollet B/C

Translating Research Into Clinical Practice

Moderator: Donald C. Fletcher, MD

Research studies with significant results in low vision rehabilitation often lag in their impact on clinical practice. It is not easy to change patterns of patient care, even when evidence that is effective and provides for maximized clinical outcomes indicates needed change. This presentation will focus on creating diverse and innovative ways of translating vision research into clinical practice action. A panel representing occupational therapy, ophthalmology, optometry, researchers and others engaged in the care and education of the low vision patient will fuel a discussion of how best to apply low vision rehabilitation research to close clinical practice gaps.

Instruction Level: Intermediate

Objectives:

- 1. Describe the most current clinical practices in low vision rehabilitation.
- 2. Recognize practice gaps in current standards of care.
- 3. Analyze how to best apply low vision rehabilitation research to close clinical practice gaps.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2; AOTA: 2; COPE: 2; CRCC: 2

Plenary Session

Thursday, September 19, 8-9:30 am | Nicollet B/C



Profile of Visual Functioning for Educational Assessment *Lea Hyvärinen, MD, PhD, FAAP*

Lea Hyvärinen, MD, PhD, FAAP, is a Finnish pediatric ophthalmologist who, after her thesis on experimental fluorescein angiography in Finland, worked from 1967 to 1969 as the Dr. A. Edward Maumenee's Fellow at the Wilmer Institute, Johns Hopkins Hospital in Baltimore, MD. While there, she started the first clinical fluorescein angiographic laboratory, an impor-

tant area in diabetic retinopathy, retinitis pigmentosa and histoplasmosis at that time. At Wilmer Institute, Dr. Hyvärinen became interested in vision rehabilitation and has worked in vision rehabilitation and development of assessment techniques for more than 30 years.

Dr. Hyvärinen is well-known for the research and development of the LEA Vision Test System and the LEA Symbols tests for assessment and screening of vision in children. The LEA Test System now contains 40+ tests for numerous clinical test situations and vision screening and for the assessment of children and adults with different communication needs.

This presentation covers the basic questions related to assessment of vision for early intervention and education using a Profile of Visual Functioning as the way to gather and organize information from medical and optometric specialists, teachers, therapists, and everyone involved in the early intervention and care of the infant or child. The long list contains most of the vision-related functions that may be atypical in a child with anterior visual impairment due to changes in the eyes or visual pathways or a child with posterior visual impairment, visual processing disorders, or both.

Instruction Level: Introductory

Objectives:

- 1. Describe why early development of vision is crucial for development of communication and interaction.
- 2. Describe ways to prevent problems in early visual communication.
- 3. Describe ways to assess for early intervention and education, including "clinical" functional tests; tests to depict early visual processing; tests to assess recognition of persons, objects and pictures; and tests to assess visuomotor functions and spatial awareness.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1; AOTA: 1; COPE: 1; CRCC: 1

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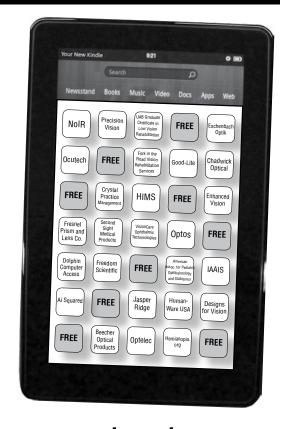
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Visit each **Envision Conference 2013** vendor booth to learn more about their products and services, and secure the unique stickers needed to complete your Bingo card. Return your completed form to the registration table by 5:30 pm on Friday to be eligible for the drawing for a Kindle Fire HD. Late entries will be disqualified; only completed cards will be eligible. Winner to be notified by phone or email.



We hope you have a great Envision Conference experience!



Clinical education sessions are listed with C session numbers.

Research sessions are list with R session numbers.



C1. Too Few Cooks Spoil the Broth: An Update on Pediatric Low Vision Care

Andrew Lewis, OD, MD 9:45-10:45 am | Nicollet A1

The process of evaluation and treatment of visually impaired children will be reviewed. Discussion will cover understanding the many options and considerations involved – from the initial diagnosis and recognition of a visual



problem to the development of an individual treatment plan. The multidisciplinary approach will be reviewed, with emphasis on how the medical and technical aspects of the visual care of the child integrate together with family, teachers and rehabilitative specialists.

Instruction Level: Introductory **Objectives:**

- 1. Identify differences between providing low vision care for children and adults.
- 2. Classify the purposes of vision screening for children who, what, where, when and why.
- 3. Recognize the multidisciplinary nature of evaluating children for visual problems and identify opportunities to improve coordination of care and communication.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

C2. Customizing the Reading Experience for the Low Vision Reader

Lupe A. Mejia, OD, FAAO; Jennifer Gendeman, OTD, OTR/L, CLVT 9:45-10:45 am | Nicollet A2

Reading can be a truly customizable experience for the low vision reader. The presenters will briefly review the psychophysics of reading and discuss how variables such as font style, text size, contrast and illumination can be manipulated to suit the low vision reader.

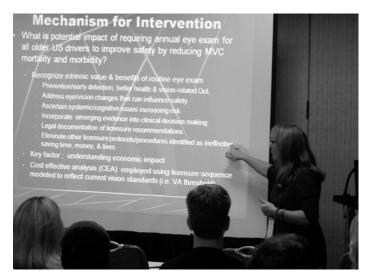
Instruction Level: Intermediate Objectives:

- 1. Characterize how various types of visual impairment affect reading performance.
- 2. Describe ways to alter text electronically to suit the individual reader.
- 3. Recommend other means to enhance reading, such as absorptive filters and illumination.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1





C3. Demystifying Low Vision Optics David Lewerenz, OD, FAAO 9:45-10:45 am | Nicollet D1

Many methods have been proposed to predict magnification from patient exam findings and to then apply that information in the use of various forms of magnification devices. This presentation provides a method that is very simple, evidence-based, and designed for patient success.

Instruction Level: Intermediate Objectives:

- 1. Explain the three major forms of magnification and how to calculate the total magnification from these three.
- 2. Describe how to use visual acuity or the MNRead test to predict a reading add and explain the need for a visual acuity reserve.
- 3. List the various forms of magnification devices and describe how to apply the reading add for each.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

C4. Low Vision Rehabilitation for Multiple Sclerosis

Julie Nastasi, OTD, OTR/L, SCLV 9:45-10:45 am | Nicollet D2

One of the first signs of multiple sclerosis is blurred or hazy vision. Learn more about roles and responsibilities of each member of the rehabilitation team and identify MS-specific screening techniques that facilitate individualized and targeted rehabilitation services.

Instruction Level: Introductory **Objectives:**

- Differentiate the roles and responsibilities
 of each member of the rehabilitation team
 and describe the interplay between each
 professional service.
- 2. Identify MS-specific screening techniques that facilitate individualized and targeted rehabilitation services.
- 3. Recognize the basic and instrumental activities of daily living which should be assessed for intervention.

CEUs: ACCME: 1; ACVREP: 1; AOTA: 1; CRCC: 1

R1. Low Vision Plus: Comorbidity and Vision Loss

Moderator: Walter Wittich, PhD, FAAO, CLVT
9:45-11:45 am | Nicollet D3

9:45 – How Stigmatization May Influence Help-Seeking Among Older Adults With Multiple Age-Related Health Conditions: A Scoping Review. *Kenneth Southall, PhD* 10:05 – The Influence of Vision Loss and Comorbid Conditions on Occupational Performance: Client and Occupational Therapy Practitioner Perspectives.

Beth Barstow, PhD, OTR/L, SCLV

10:25 – Frequency of Falls and Use of Physical Therapy in Low Vision Rehabilitation. Karen Kendrick, OTR/L, CLVT; Donald Fletcher, MD

10:45 – Assessing Hearing-Assistive Technology Through the Eyes of a Low-Vision Client. *Aaron Johnson*, *PhD*

11:05 – Rehabilitation and Research
Priorities in Combined Vision and Hearing
Loss for the Next 10 years.

Walter Wittich, PhD, FAAO, CLVT

Instruction Level: Introductory **Objectives:**

- 1. Characterize the common comorbidities associated with vision loss.
- 2. Analyze the challenges practitioners are presented with in treating patients with vision loss accompanied by other sensory impairments.
- 3. Determine appropriate rehabilitation intervention strategies that include vision loss and comorbidity.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;



C5. How Do Mainstream Lenses Have a Low Vision Application?

Gary Asano, OD, FAAO 11 am-12 pm | Nicollet A1

We are familiar with the optics of low vision aids, but do mainstream ophthalmic lenses made by regular lens companies have a role in low vision? This course will demonstrate many examples of these lenses and optics.

Instruction Level: Intermediate Objectives:

- 1. Recognize why ophthalmic optics are important for prescribing for the low vision patient.
- 2. Recognize how physiological changes in vision are correlated to special vision needs and thus certain lenses are required to compensate.
- 3. Identify new types of optics in low vision aids and applicable mainstream lens manufacturers and why their products apply so well in low vision.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1

C6. Addressing Safety in Multidisciplinary Vision Rehab Program

Kimberly Quintal, MS, OTR/L; Lauren Nisbet, OT; Mary Lou Jackson, MD 11 am-12 pm | Nicollet A2

This presentation demonstrates the multidisciplinary approach required to address home and community safety in a low vision population with a wide range of diagnoses and needs. Patients with vision loss experience safety issues with everyday tasks and would benefit from service where devices and training can be provided to reduce risk of errors and injuries. We will discuss the shift in the patients' needs that we are treating. An overview of our rehabilitation approach will be provided, and specific treatments and outcomes are described in three case studies. Coordination between medical and community care providers will be emphasized, and we will also discuss the challenges and logistical considerations of providing care for a population of wide-ranging diagnoses and ages.

Instruction Level: Intermediate **Objectives:**

- 1. Provide examples of safety needs for patients with various diagnoses and multiple impairments.
- 2. Identify methods for addressing safety in home and community-based settings.
- 3. Review the multidisciplinary approach to rehabilitation of this patient population.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1

C7. Clinical and Technical Considerations in Prescribing Bioptic Telescopes

Henry Greene, OD, FAAO 11 am-12 pm | Nicollet D1

This course presents a practical, clinical approach to evaluating visually impaired individuals for bioptic telescopes. It teaches a clinical protocol for the assessment of an individual's visual needs, clinical methods for determining appropriate patients, and for establishing a prognosis for likely prescription success. Methods for fitting and training patients and practice management tips are also included. It is hoped that the attendee will leave with practical knowledge that they can apply with their next low vision patient.

Instruction Level: Intermediate Objectives:

1. Establish a prognosis for a successful bioptic prescription.

- 2. Determine the type of bioptic to prescribe and know how to order them.
- 3. Manage the patient's expectations, indoctrination and training in the use of bioptic telescopes.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1

C8. Keeping Low Vision Caregivers' Needs in Sight

Orli Weisser-Pike, OTD, CLVT, SCLV 11 am-12 pm | Nicollet D2

An evidence-based individualized education program for caregivers was piloted at the Hamilton Eye Institute Low Vision Service in Memphis, TN. Eight participants were given information in a variety of formats over the course of four to six visits. The positive results of the program are presented.

Instruction Level: Intermediate Objectives:

- 1. Recognize specific challenges faced by people with low vision and their caregivers.
- 2. Refer to examples in literature to justify implementation of caregiver interventions.
- 3. Identify resources for implementing a caregiver program.

CEUs: ACVREP: 1; AOTA: 1; CRCC: 1

C9. An Overview of CVI From Medical and Educational Perspectives

Amanda Lueck, PhD; Lea Hyvärinen, MD, PhD, FAAP; Linda Lawrence, MD 1-3 pm | Nicollet A1

This presentation presents an overview of issues surrounding CVI for medical and educational personnel. The effects of visual processing will be discussed along with their impact on function. Methods to coordinate services to meet the complex needs of children with CVI will be offered.

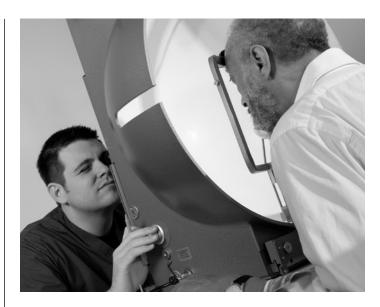
Instruction Level: Intermediate Objectives:

- 1. Identify the early identification, treatment and intervention needs of children with CVI.
- 2. Recognize the effects of CVI on visual processing in schoolchildren and their impact on performance.
- 3. Link assessment and intervention methods for children with CVI in the schools.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

AOTA: 2; COPE: 2; CRCC: 2





C10. Functional and Rehabilitation Implications of Common Eye Diseases

Sarah Hinkley, OD, FCOVD 1-3 pm | Nicollet A2

This course will introduce vision rehabilitation professionals to the most common eye diseases causing impairment of functional vision. Each disease will be briefly summarized. The functional implications of each disease and the most common rehabilitation and magnification strategies for each will be discussed.

Instruction Level: Introductory **Objectives:**

- 1. List five of the most common eye diseases causing functional vision impairment.
- 2. Describe how five of the most common eye diseases affect functional vision.
- 3. Describe rehabilitation and magnification strategies for five common eye diseases.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

C11. "Generize" for Change: Understanding Generational Theory and its Application to Vision Rehabilitation

Colleen O'Donnell, OTR/L, CLVT 1-3 pm | Nicollet D1

Generational theory, the study of a generation's shared experiences and traits, can assist the vision rehabilitation professional in understanding the needs and motivation of the older adult client. This program will discuss specific needs of current generations and suggest strategies to enhance vision rehabilitation through case studies and group interaction.

Instruction Level: Introductory **Objectives:**

- 1. Identify changes in society, science, and aging awareness that affect provision of services to the older adult with vision loss.
- 2. Define Generational Theory and its application to vision rehabilitation.
- 3. Identify generational traits of current adult clients and learn to enhance the vision rehabilitation process when working with clients of different generations.

CEUs: ACCME: 2; ACVREP: 2; AOTA: 2; CRCC: 2

C12. Functional Assessment and Rehabilitation With Prosthetic Vision

Duane Geruschat, PhD, CLVT, COMS; Gislin Dagnelie, PhD; Nilima Tanna, OT, CLVT; Jessy Dorn, PhD 1-3 pm | Nicollet D2

The course offers a comprehensive overview of the state of the art in vision prostheses, including approaches to functional vision assessment and intervention. This topic will be discussed by a multidisciplinary group of experts in the context of the Argus® II Retinal Prosthesis System, which is approved by the FDA.

Instruction Level: Introductory **Objectives:**

- 1. Identify unique features of the patient population for visual prostheses and the assessment and rehabilitation challenges they present.
- 2. Describe the development of a new functional vision assessment for prosthesis users.
- 3. Understand visual rehabilitation (ADL O&M) of prosthetic vision users.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

R2. Vision Loss and Mobility Issues Moderator: George Timberlake, PhD

1-3 pm | Nicollet D3

1:00 – Assistive Technology for Indoor Navigation by Blind and Low-Vision Pedestrians. *Paul Beckmann, PhD*

1:30 – Keeping Track of Position and Orientation During Mobility With Visual Impairment. *Tiana M. Bochsler, PhD Candidate*

2:00 – A Smartphone App to Assist People With Vision Impairment at Signalized Intersections. *Chen-Fu Liao*, *PhD Candidate*

2:30 – Comparability of Visual Performance of Individuals With Low Vision in Real and Virtual Street Intersections. *Ellen Bowman, TVI, COMS*

Instruction Level: Intermediate Objectives:

- 1. Describe unique mobility challenges for people with vision loss or blindness.
- 2. Compare the outcomes of recent mobility and wayfinding research.
- 3. Identify appropriate mobility aids for patients with vision loss.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

AOTA: 2; COPE: 2; CRCC: 2

C13. From Diapers to Diplomas: Ensuring Academic Success for the Child With Visual Impairment

Sandra Fox, OD 3:30-5:30 pm | Nicollet A1

Since 80 percent of learning is thought to be visual, educating a child with visual impairment requires the input of multiple disciplines. This course will focus on the low vision optometrist/ophthalmologist's role as part of the team that ensures the child with visual impairment will have all of the tools and training necessary to succeed. Evaluation techniques and educational goals for children with visual impairment, from infancy to college, will be discussed.

Instruction Level: Intermediate **Objectives:**

- 1. List the visual and developmental milestones from birth to 5 years and the interventions necessary to ensure normal development for the child with visual impairment.
- 2. Describe evaluation techniques for young children and children with multiple handicaps.
- 3. Recognize the educational goals of children from kindergarten to college and the low vision optometrist/ophthalmologist's role in helping the student to achieve those goals through the use of low vision devices and the services of other disciplines.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;



C14. Eccentric Viewing Training: From A to Z Using Older Strategies to Newest Computer Software

Cori Layton, OTR, SCLV; Denny Moyer, BS, COTA, SCALV 3:30-5:30 pm | Nicollet A2

Rehabilitation providers working with older adults with low vision will learn techniques to establish scotoma placement, determine functional implications of the scotoma, and learn innovative treatment strategies in teaching steady eye technique as a precursor of eccentric viewing.

Instruction Level: Intermediate **Objectives:**

- 1. Define the sequence of steps in providing eccentric viewing training.
- 2. Identify and map a scotoma effectively and train client in functional implications of scotomas.
- 3. Employ newer technologies to illicit faster results with teaching eccentric viewing.

CEUs: ACVREP: 2; AOTA: 2; CRCC: 2

C15. Designing New Service Pathways in Vision Rehabilitation and Planning for Outcomes Measurement

Deborah Gold, PhD 3:30-5:30 pm | Nicollet D1

Several new pathways were designed in one agency to deliver more appropriate vision rehabilitation. These service maps will support clients in one of three different service directions relevant to their needs. Let's exchange ideas for creating a reliable triage and decision tree process.

Instruction Level: Intermediate Objectives:

- 1. Describe a process for redesigning service pathways based on admissibility criteria.
- 2. Describe a method for planning for outcomes measurement.
- 3. Depict how older adults with good acuity may be served by a vision rehabilitation agency.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;



C16. Prescribing LED Lighting for Low Vision: A Bright Idea!

Peter Borden, PhD; Michele Klein 3:30-5:30 pm | Nicollet D2

This course explains the concepts and factors critical to the use of advanced Light Emitting Diodes (LEDs) for low vision lighting. Important properties and measures of lighting are described. LEDs are then compared to more traditional lighting sources, to point out their advantages and differences. Use considerations, cost considerations and relevant measures are then reviewed. Finally, some of the advantages of LEDs that will lead to future improvements in LED lighting are reviewed.

Instruction Level: Intermediate Objectives:

- 1. Determine lighting principals and important measures critical for low vision.
- 2. Compare LED sources to other forms of lighting and identify factors that differentiate LED lighting from a low vision perspective.
- 3. Contrast the cost and performance of different LED lighting options.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

AOTA: 2; COPE: 2; CRCC: 2

R3. Normal and Impaired Vision in Older Drivers

Moderator: Charles A. Collin, PhD 3:30-5:30 pm | Nicollet D3

3:30 – Predicting Crash and Traffic Violations in a Large Cohort of Older Drivers

(Candrive II) Using Visual Acuity and Contrast Sensitivity Tests: A Three Year Follow-Up Study. Sylvain Gagnon, PhD

3:50 – Dynamic Scene Processing and Driving Skills in Older Drivers With Road Accidents. *Jocelyn Faubert, PhD*

4:10 – Visual Impairment and Driving. *Joanne Wood, PhD, FAAO*

4:30 – The Effects of Age and Vision Impairment on Scanning and Detection at Intersections. Alex Bowers, PhD, MCOptom

4:50 – Awareness Intervention for Safe and Responsible Automobile Driving (OSCAR) in Older Adults; Importance of Vision and Other Capacities. *Mélanie Levasseur, OT, PhD*

Instruction Level: Intermediate **Objectives:**

- 1. Differentiate between normal and impaired vision in older drivers when predicting fitness to drive.
- 2. Describe specific visual functions which are important for safe driving.
- 3. Characterize the effects of aging and vision impairment on scanning and detection capabilities.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;



C17. Integration of Vision Rehabilitation Strategies in a Multidisciplinary Mobility and Falls Prevention Clinic

Tammy Labreche, BSc, OD; Ann Plotkin, OD 8-9 am | Nicollet A1

Falls are often caused by multiple factors, necessitating the need for a multidisciplinary approach to caring for patients who have fallen or who are at risk of falling. This presentation will describe the role of optometrists in a multidisciplinary mobility and falls prevention team.

Instruction Level: Introductory **Objectives:**

- 1. Describe the role of optometrists in a multidisciplinary falls prevention team.
- 2. Identify individuals at risk of mobility concerns attributable to a visual impairment or other factors.
- 3. Apply the need to educate patients, optometry learners and other professionals concerning the potential impact of vision impairments on mobility and falls.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1

C18. Genetics and Inherited Ocular Disease

Mary Lou Jackson, MD; Emily Place; Lylas Mogk, MD 8-9 am | Nicollet A2

Major advances in the field of genetics, specifically molecular genetic testing, are impacting all areas of medicine - including ophthalmology. Such advances have improved our ability to more accurately diagnose and identify the underlying cause of ocular diseases. Given these advances, patients and families have many questions for their eye care clinicians about the availability and utility of genetic testing. Vision rehabilitation clinicians also have questions about what genetic testing and counseling can currently offer patients. This presentation will address myths and realities in the area of genetic testing and inherited eye disease. The presenters will specifically outline the current American Academy of Ophthalmology recommendations for genetic testing of inherited eye disease, who genetic counselors are and what they can offer, and what comprehensive vision rehabilitation assesses and addresses in the case of three different inherited eye diseases.

Instruction Level: Intermediate Objectives:

- 1. Characterize the principles of inheritance in eye disease and the definition of specific terms, including gene, chromosome, mutation, polymorphism, genotype, phenotype and mosaicism.
- 2. Cite the current American Academy of Ophthalmology key recommendations related to genetic testing.
- 3. Distinguish how a genetic counselor can assist patients with inherited eye disease and their families.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1

C19. Using Reading Tests to Evaluate Macular Function

Donald Fletcher, MD 8-9 am | Nicollet D1

Reading performance utilizing available reading tests can be a valuable tool in clinical low vision rehabilitation. This course reviews the tests available, methods of administration, and correct interpretation of findings.

Instruction Level: Intermediate Objectives:

- 1. Select reading tests for clinical low vision rehabilitation.
- 2. Understand error patterns in relationship to scotomas.
- 3. Predict optimal magnification level.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1

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C20. Making Sense of E-Readers vs. Portable Digital Magnifiers vs. Zoom Magnifying Apps?

Ana Juricic, OD 8-9 am | Nicollet D2

The electronic and digital advancements in the last 10 years have created new tools allowing the visually impaired to read. No longer are handheld and stand-magnifiers the only portable devices one can use for reading. This presentation will focus on comparing various digital readers and e-readers. Magnifying apps available on smartphones will also be addressed in this presentation.

Instruction Level: Introductory **Objectives:**

- 1. Identify features and benefits of various digital readers.
- 2. Differentiate between various e-readers available in the marketplace.
- 3. Describe the various zoom magnifying apps and how they compare to portable digital readers.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;



R4. Social Inclusion and Participation of Older Adults

Moderator: Judith Renaud, OD, PhD 8-10 am | Nicollet D3

8:00 – Improving Social Participation in Older Adults Having Visual or Other Impairments: Definitions and Typologies to Consider and Strategies to Develop.

Mélanie Levasseur. OT

8:20 – Satisfaction and Participation of Older Adults With Visual Impairment. *Judith Renaud, OD, PhD*

8:40 – It's Really Hard: Understanding How Vision Loss Affects Participation and Social Inclusion for Older Adults. *Colleen McGrath, OT, PhD Candidate*

9:00 – Environmental Influences on Occupational Participation Among Seniors With Low Vision: A Critical Ethnographic Study.

Deborah Gold, PhD

9:20 – Evidence From Outside the Vision Rehabilitation Silo: A Cautionary Tale.

Graham Strong, OD, MSc

Instruction Level: Intermediate Objectives:

- 1. Characterize the restrictions in the accomplishment of daily living activities experienced by older adults with vision loss.
- 2. Analyze perceived satisfaction with the accomplishment level of social participation for older adults with visual impairment.

3. Interpret empirical evidence that restriction on participation does not necessarily lead to dissatisfaction.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

AOTA: 2; COPE: 2; CRCC: 2



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C21. Alzheimer's Disease: Functional and Structural Considerations in the Visual System

Denise A. Valenti, OD 9:15-10:15 am | Nicollet A1

Ten million baby boomers in the United States will acquire Alzheimer's disease. Health care providers specializing in the rehabilitation of the visual system can benefit from understanding the impact this neurodegenerative disease has on functions of daily living. This would result in more effective management of the condition and in more effective communication between providers within the primary health care community. Contributions from clinicians, rehabilitation specialists and educators with clinical expertise in vision can contribute to a higher quality of life for those with Alzheimer's disease and their families.

Instruction Level: Introductory **Objectives:**

- 1. Understand the demographics of Alzheimer's disease.
- 2. Describe the impact of Alzheimer's disease on structures and function in the visual system.
- 3. Facilitate the care and triage of those with Alzheimer's disease to provide optimum eye care.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1



C22. From El Salvador to Tanzania: A Global Approach to Low Vision

Maria Betancourth Zúniga, OD; Rebecca Kammer, OD, FAAO 9:15-10:15 am | Nicollet A2

Helping local programs in other countries initiate or improve low vision services requires a public health approach. This presentation will describe the issues of access to care that drove the development of two unique programs in two countries. The two programs have different approaches to closing the gap to access and will provide ideas for anyone considering partnering in international low vision service development.

Instruction Level: Intermediate Objectives:

- 1. Identify two approaches to low vision care in developing countries.
- 2. Identify the steps in taking a public health approach to meeting local low vision needs.
- 3. Describe the issues and potential solutions to initiating global low vision care.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

C23. The IVA System: Documenting How the PERSON Functions

August Colenbrander, MD, PhD 9:15-10:15 am | Nicollet D1

The Interactive Vision Assessment (IVA) system goes beyond how the eyes function by assessing how the person functions. The reading speed module and the oculo-motor search module serve to assess initial performance, to guide the prescription of aids and/or training, and to document the results of rehabilitation. We will discuss their use by rehabilitation professionals.

Instruction Level: Advanced **Objectives:**

- 1. Describe the difference between how the eyes function and how the person functions.
- 2. Explain the use of reading speed tests to diagnose and train perceptual problems, and to document rehabilitation results.
- 3. Illustrate the use of visual search tests to diagnose and train oculo-motor skills and scotoma awareness, and to document rehabilitation results.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1

C24. Psychosocial Aspects of Promoting Optical Device Use

Cynthia Bachofer, PhD, TVI, CLVT 9:15-10:15 am | Nicollet D2

Student rejection of optical devices is a familiar topic for vision teachers. This presentation outlines the primary reasons for rejection and strategies that can build motivation for student use. Explicit instruction for integrating device use into daily routines in the classroom, and beyond, is also discussed.

Instruction Level: Introductory **Objectives:**

- 1. Identify factors that lead to student rejection of optical devices.
- 2. Detect the hook that elicits student buy-in of device use.
- 3. Provide examples of explicit instruction in use of devices.

CEUs: ACVREP: 1; AOTA: 1; CRCC: 1



C25. Getting to Acceptance – Low Vision Success is About More Than Optics

Bennett McAllister, OD, FAAO 10:45-11:45 am | Nicollet A1

Low vision success can prove to be frustratingly elusive despite our best optical efforts. This presentation looks at how the Kubler-Ross grief cycle works to hinder rehabilitation and how the practitioner can recognize and address the roadblocks to success thereby presented.

Instruction Level: Intermediate Objectives:

- 1. Characterize this multifaceted approach to low vision rehabilitation success.
- 2. Recognize the impact of grief processing in prescriptive and referral recommendations.
- 3. Apply cognitive behavior therapy principles in low vision rehabilitation.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1



C26. Electronic Video Binocular Eyewear...What's New?

Ana Juricic, OD 10:45-11:45 am | Nicollet A2

There have been tremendous technological improvements to many electronic near-viewing low vision devices over the past decade. However, advancements with distance-viewing devices have been slower. This presentation will review existing optical distance viewing devices and go through the history of electronic distance viewing devices. Preliminary results from the eSEE study, where patients wore the latest eSight Intelligent Eyewear electronic video eyewear at work and/or home for two weeks, will be revealed. A comparative analysis to existing spectacle-mounted telescopic or binocular aids will be made.

Instruction Level: Introductory **Objectives:**

- 1. Characterize the history of electronic distance viewing devices.
- 2. Identify various optical and electronic distance viewing aids currently available on the market.
- 3. Identify patients or clients who may benefit from electronic distance viewing devices.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

C27. In the Middle: Helping Visually Impaired Patients With Their Mid-Range Needs

David Lewerenz, OD, FAAO 10:45-11:45 am | Nicollet D1

Addressing the low vision patient's mid-range needs, such as music and computer use, is sometimes not given the same emphasis as reading or distance tasks. Telemicroscopes are good options to meet these needs, but have a restricted visual field. In this course we will present a strategy which maximizes the visual field and we will review the features of available telemicroscopic products.

Instruction Level: Intermediate Objectives:

- 1. Describe the specific history-taking and evaluation techniques required for meeting the mid-range needs of a visually impaired patient.
- 2. Describe the principles of magnification that can be used in any magnification system and employ them to design a telescopic system for a particular task.
- 3. Compare available telemicroscopic products and their features.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1

C28: Providing Low Vision Rehabilitation in the Home – An Essential Guide

Paul Scaglione, MS, OTR, CLVT 10:45-11:45 am | Nicollet D2

What does it take to deliver effective low vision rehabilitation services in the home environment? What are the benefits and difficulties for a clinician working in the challenging environment of the client home? Learn the essential tools and assessments you will need to work in the low vision client's home, as well as some practical tips for working on the road.

Instruction Level: Introductory **Objectives:**

- 1. Identify specific opportunities and challenges facing the low vision practitioner in the home.
- 2. Describe the essential tools and supplies needed to deliver low vision services in the home.
- 3. Describe the psychosocial factors to be considered when working within the client's home.

CEUs: ACVREP: 1; AOTA: 1; CRCC: 1



R5. Exploring Alternative Vision Rehabilitation Models

Moderator: Donald Fletcher, MD 10:45-11:45 am | Nicollet D3

10:45 – Optometry and Ophthalmology – Living in Perfect Harmony. *Walter Wittich, PhD, FAAO, CLVT*

11:05 – Albinism in Tanzania: Remote Low Vision Care and Barriers to Utilization.

Rebecca Kammer, OD, FAAO

11:25 – Intensive Mental Training, Intrathecal Baclofen and OMT May Lead to Development of Visual Functions. Lea Hyvärinen, MD, PhD, FAAP; Ilari Kousa

Instruction Level: Introductory **Objectives:**

- 1. Characterize several alternative models of vision rehabilitation not currently in place in the United States.
- 2. Analyze alternative vision rehabilitation models.
- 3. Describe alternative vision rehabilitation intervention strategies.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1



C29. Beyond Magnifiers and Marking: Addressing the Complexities of Aging With Vision Loss

Mary Warren, PhD, OTR/L, SCLV, FAOTA; Monica Perlmutter, OTD, SCLV 1:15-3:15 pm | Nicollet A1

This session will utilize a case study depicting a typical visually impaired older adult to illustrate how factors related to aging, comorbidities and low vision interact to influence participation in everyday activities. Assessments and interventions that enable practitioners to more effectively address aging and vision loss will be discussed.

Instruction Level: Intermediate **Objectives:**

- Identify and describe how intrinsic and extrinsic factors interact to facilitate or inhibit ADL performance and participation in older adults.
- 2. Select assessments that help determine key intrinsic factors that may influence the client's ability to engage in ADLs and benefit from therapy.
- 3. Plan interventions that address aging, comorbidities and vision loss to facilitate participation in daily occupations.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

C30. How Do Fields and Filters Help Prescribe in Low Vision?

Gary Asano, OD, FAAO 1:15-3:15 pm | Nicollet A2

This course will describe how visual acuity can be a somewhat minor factor in prescribing in low vision. Visual field scotomas and selective filters have a large role in determining rehabilitation success and are often overlooked.

Instruction Level: Intermediate Objectives:

- 1. Demonstrate the importance of visual fields in refraction and prescribing.
- 2. Describe why the patient's subjective reaction to selective filters can help tremendously in prescribing low vision spectacles, sunglasses and low vision aids.
- 3. Define why binocularity and dominant eye assessment are critical and often overlooked factors in the successful rehabilitation methods to assess.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

AOTA: 2; COPE: 2; CRCC: 2





C31. There's an App for That...One Year Later: What's New in 2013

Ana Juricic, OD, FAAO 1:15-3:15 pm | Nicollet D1

This presentation will provide a summary of the newest 2013 apps ideal for visually impaired and blind users. This presentation will focus on new apps not previously mentioned at last year's talk "There's an App for That." Attendees will receive a summary of more than 30 top apps mentioned at last year's presentation.

Instruction Level: Introductory **Objectives:**

- 1. Appraise the awareness of the benefits of smartphones for people who are visually impaired and blind.
- 2. Identify the top iPhone/smartphone apps from 2013 for visually impaired/blind users.
- 3. Recommend apps based on real-life scenarios or uses for those who are partially sighted or completely blind.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

C32. The ABCs of Diabetes Self-Management

Debra Sokol-McKay, MS, OTR/L, CDE, SCLV, CVRT, CLVT
1:15-3:15 pm | Nicollet D2

Diabetes requires a team effort headed by the patient. Occupational therapists play a vital role based upon their level of training. A major focus for therapists is addressing vision loss and its impact on the AADE7™ self-care behaviors. Resources are readily available to assist therapists in advancing their level of practice.

Instruction Level: Introductory **Objectives:**

- 1. Define diabetes and describe the major acute and chronic complications, their causes, and interventions/precautions.
- 2. List low vision adaptations for the AADE7[™] self-care behaviors.
- 3. Describe members of the interdisciplinary team, their role, and specifically the role and resources available for advanced practice of the occupational therapist in diabetes education.

CEUs: ACVREP: 2; AOTA: 2; CRCC: 2



C33. Illuminating the Lighter Side of Low Vision

Angie Ryan, OTR/L, CLVT; Jenn Shull, CLVT, CVRT; Laurie Hoffman, OD, FAAO 3:30-5:30 pm | Nicollet A1

This presentation will provide a detailed overview on lighting, with specific emphasis on lighting terminology and different types of lighting and bulbs for both indoors and outdoors. The presentation will conclude with a discussion on how each factor of lighting translates clinically for professionals providing low vision rehabilitation.

Instruction Level: Intermediate Objectives:

- 1. Identify the medical and ocular characteristics of patients who could benefit from a lighting assessment.
- 2. Describe lighting terminology and be able to differentiate the types of lighting for both indoor and outdoor use.
- Recognize the importance of lighting with regards to safety and functional mobility; understand how to utilize lighting effectively for detailed tasks and how to avoid glare.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

C34. Bigger is Not Always Better: When Visual Impairment in a Child is a Red Herring!

Sandra Fox, OD 3:30-5:30 pm | Nicollet A2

Many of the children that present for a low vision evaluation are multiple handicapped children, and a large majority of these children are low birth weight babies. They may have other visual function problems that are adversely affecting learning that have not been identified. The assumption is often made that their poor school performance is due to the visual impairment alone. The low vision optometrist/ophthalmologist can play a crucial role in identifying the other visual skills that are lacking and provide the education team with valuable information that will benefit the child's learning experience.

Instruction Level: Intermediate Objectives:

- 1. List other visual functions in addition to visual acuity that impact learning.
- 2. Determine which tests are necessary to perform with the at-risk child.
- 3. Extrapolate how to appropriately manage the vision-impaired child with other problems that are affecting school performance, including the appropriate referrals.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

AOTA: 2; COPE: 2; CRCC: 2

C35. Starting a Private Practice in Occupational Therapy: Bringing Low Vision Rehabilitation Therapy to Your Community

Deann Bayerl, MS, OTR/L, SCLV 3:30-5:30 pm | Nicollet D1

The need for low vision rehabilitation is high and therapists can be the catalyst to bring services into their community. This presentation is designed for therapists with training or experience in low vision rehabilitation without opportunity to provide low vision services, or those interested in venturing out as a private practitioner.

Instruction Level: Introductory **Objectives:**

- 1. Determine if a private practice in occupational therapy is a viable step to bring low vision rehabilitation services into your practice and community.
- 2. Identify the steps necessary to start a private practice in low vision occupational therapy.
- 3. Recognize documentation and billing requirements required in a low vision occupational therapy private practice.

CEUs: ACVREP: 2; AOTA: 2; CRCC: 2

C36. RP From A to Z

David Lewerenz, OD, FAAO 3:30-5:30 pm | Nicollet D2

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 which address the unique needs of a patient with retinitis pigmentosa.

Instruction Level: Intermediate Objectives:

- 1. Identify the main clinical characteristics of retinitis pigmentosa.
- 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.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

AOTA: 2; COPE: 2; CRCC: 2



R7. Older Adults and Vision Loss

Moderator: Olga Overbury, PhD 3:30-5:30 pm | Nicollet D3

3:30 – Effects of Vision Education Classes on the Well-Being of Older Adults With Macular Degeneration. Silvia Sorensen, PhD; Katherine White, OD

3:50 – A Fine Balance: Older Patients' Perspectives on Vision Care and Rehabilitation. *Deborah Gold, PhD*

4:10 – An Accessible Adult Day Service for Persons With Sensory Impairment.

Walter Wittich, PhD, FAAO

4:30 – Do People With Co-Existing Dementia Benefit From Low Vision Rehabilitation. *Tammy Labreche, BSc, OD*

4:50 – The Stigma Associated With Low Vision and its Rehabilitation.

Sarah Fraser, PhD

Instruction Level: Intermediate **Objectives:**

- 1. Associate the impact vision loss has on older adults.
- 2. Describe the most common types of vision loss experienced by older adults.
- 3. Appraise appropriate rehabilitation interventions available to older adults with vision loss.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;



C37. OD/OT: One Team's Low Vision Rehabilitation Partnership: 10 Years in the Making

Melva Perez Andrews, OTR, CLVT, MBA; Sandra Fox, OD 8-10 am | Nicollet A1

Following a prescribed order from an optometrist, the OT initiates an evaluation and provides treatment within the plan of care as established by the optometrist. This presentation offers practice pearls of an OD/OT 10-year partnership.

Instruction Level: Introductory **Objectives:**

- 1. Identify specific roles of each discipline.
- 2. Identify evaluation and treatment interventions of each discipline.
- 3. Characterize the importance of collaborating with organizations and individuals in their communities to form a low vision coalition to increase low vision resources.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

AOTA: 2; COPE: 2; CRCC: 2

C38. Low Vision Rehabilitation for Macular Degeneration: An Interdisciplinary Approach

Deena Sandall, OD 8-10 am | Nicollet A2

This presentation will examine the low vision rehabilitation process for a patient with macular degeneration. The use of an interdisciplinary approach and how it benefits the patient will be highlighted. The resources, including potential funding sources that are available to help patients, will also be presented.

Instruction Level: Introductory **Objectives:**

- 1. Characterize the visual and daily living difficulties of patients with macular degeneration.
- 2. Determine the best time to refer for low vision rehabilitation services.
- 3. Differentiate characteristics of the interdisciplinary approach to low vision rehabilitation: who is involved and what they do.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

C39. Oh the Places You'll Go... With an iPad: The Low Vision Professional's Perspective

Laurie Hoffman, OD, FAAO; Angie Ryan, OTR/L, CLVT; Jenn Shull, CLVT, CVRT 8-10 am | Nicollet D1

This presentation will outline how an iPad is successfully used as a low vision device, particularly as a closed circuit television (CCTV). Recommendations for accessibility features and apps will be discussed, which take into account both the patient's eye disease and level of vision to determine iPad applicability.

Instruction Level: Introductory **Objectives:**

- Characterize how disease characteristics and different levels of visual impairment determine appropriate utilization of the iPad.
- 2. Identify advantages and disadvantages of using the iPad as a low vision device with particular emphasis on using it as a CCTV and identifying when a standard CCTV is more appropriate.
- 3. Choose resources for low vision professionals for apps, accessories, and tools to be used in conjunction with the iPad for successful use.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

AOTA: 2; COPE: 2; CRCC: 2

C40. Low Vision Rehabilitation for AMD: Exam Tips, Easy Tools, and Efficient Team Process

Rebecca Kammer, OD, FAAO 8-10 am | Nicollet D2

A descriptive and interactive presentation about favorite exam strategies to increase efficiency and capture key elements for a team approach to low vision rehabilitation. A balanced view is provided of optical device prescribing combined with rehabilitation training, including suggestions for when and how to incorporate OT in the team. The presentation is aimed at private practice ODs and OTs who are unsure of how to partner in low vision. Topics will include a brief view of coding and billing, location, and timing of visits from the optometrist's perspective. The lecture will include cases exemplifying a team approach ranging from early AMD with mild impairment to advanced AMD with severe impairment and considerations for the implantable miniature telescope.

Instruction Level: Intermediate Objectives:

- 1. Identify several exam strategies for best practice.
- 2. Identify potential sequencing for introduction of OT/LV therapist.
- 3. Recall favorite diagnostic tools for efficiency in evaluation and prescribing.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

R8. Research on Reading Tests for Vision Rehabilitation

Moderator: Donald Fletcher, MD 8-10 am | Nicollet D3

8:00 – The Influence of Fixation Stability on Balance in Patients With a Central Scotoma. Caitlin Murphy, MSc, PhD Candidate

8:30 – Italian SK READ: A Comparison Between a Normal Sighted and a Scotoma Population. *Gianfrancesco Villani*, *MD*, *FEBO*

9:00 – Implementing the MNRead Reading Acuity Test on an iPad 3.

Aurelie Calabrese, PhD; Gordon E. Legge, PhD; Charles A. Bigelow

9:30 – What People With Central Vision Loss Can Learn From Self-Exploration of Their Visual Field. *Manfred MacKeben, PhD*

Instruction Level: Intermediate Objectives:

- 1. Compare and contrast the efficacy of patient reading tests for vision rehabilitation.
- 2. Analyze reading test outcomes.
- 3. Apply appropriate reading tests in recommending vision rehabilitation strategies.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

AOTA: 2; COPE: 2; CRCC: 2

C41. Visual Rehabilitation Training With Implantable Miniature Telescope for End Stage AgeRelated Macular Degeneration - Occupational Therapy and Optometry

Karl Hammer, OT; Laura Miller, OD 10:15 am-12:15 pm | Nicollet A1

A tiny telescope that is implanted by an ophthalmologist inside the eye has been demonstrated to improve vision and quality of life for the appropriate clients affected by end-stage AMD. This course will explain the new technology of the Implantable Miniature Telescope, its design and use. We will also demonstrate the roles of the optometrist and occupational therapist in the process of determining the candidacy of potential clients that might benefit from the Implantable Miniature Telescope.

Instruction Level: Introductory **Objectives:**

- 1. Describe the Implantable Miniature Telescope and its function.
- 2. Describe the basic visual training/rehabilitation care pathway including the roles of interdisciplinary team members.
- 3. Identify treatment modalities for post Implantable Miniature Telescope.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

C42. Occupational Therapy Practice Guidelines for Older Adults With Low Vision

Jennifer Kaldenberg, MSA, OTR/L, SCLV, FAOTA; Stacy Smallfield, DrOT, MSOT, OTR/L 10:15 am-12:15 pm | Nicollet A2

This session will provide an overview of the Occupational Therapy Practice Guidelines for Older Adults with Low Vision. The occupational therapy process will be described, and a summary of evidence will be presented. Participants will apply the evidence to cases and implications for practice, education, and research will be discussed.

Instruction Level: Intermediate Objectives:

- 1. Describe the occupational therapy process for supporting older adults with low vision in the performance of daily activity.
- 2. Characterize the strength of evidence for the interventions within the scope of occupational therapy practice for the older adult with low vision.
- 3. Apply the evidence for occupational therapy intervention for the older adult with low vision to clinical scenarios.

CEUs: ACVREP: 2; AOTA: 2; CRCC: 2

C43. Building Your Neuro-Vision Toolbox

Colleen O'Donnell, OTR/L, CLVT 10:15 am-12:15 pm | Nicollet D1

The therapist must understand components of visual input, visual processing, and visual-cognitive processing skills to develop a successful neuro-vision toolbox. This program will demonstrate the use of specific tools and methods to grade processing skills, organize and manipulate visual information through cases, hands-on lab and group interaction.

Instruction Level: Intermediate Objectives:

- 1. Identify components of visual input, visual processing, and visuo-cognitive processing.
- 2. Demonstrate the ability to grade activities to enable visual organization and manipulation.
- 3. Demonstrate the ability to grade activities to integrate and generalize visual processing skills in dynamic and challenging settings.

CEUs: ACVREP: 2; AOTA: 2; CRCC: 2



C44. Playing Together Nicely: Teachers, Doctors and Parents of Visually Impaired Children

Dennis Siemsen, OD, MHPE Kristin Oien, COMS, TBVI Julie Kochevar, COMS, TBVI 10:15 am-12:15 pm | Nicollet D2

Visually impaired children have a different set of needs and abilities, and the etiology of their vision loss is different from adults. As a result, using the techniques suitable for rehabilitating visually impaired adults may not be effective for the habilitation and education of children. Connecting the right services with these children can be a difficult task. This presentation will include a pediatric low vision practitioner, a state-wide program administrator, a teacher of the visually impaired, and a parent of a visually impaired child, each discussing their role in the process of caring for visually impaired children.

Instruction Level: Introductory **Objectives:**

- 1. Identify the need for low vision services for school-aged children.
- 2. Explain the process for providing specialized services to visually impaired children.
- 3. Describe how low vision services can be integrated into an educational program for duplicating this model in other states.

CEUs: ACVREP: 2; AOA-CPC: 2; AOTA: 2;

COPE: 2; CRCC: 2

R9. Assistive Devices and Optics for Low Vision

Moderator: Olga Overbury, PhD 10:15 am-12:15 pm | Nicollet D3

10:15 – Long Term Optical Device Use by Young Adults with Low Vision. Cynthia Bachofer, PhD, TVI, CLVT

10:45 – Design and Evaluation of High-Intensity, Low Glare Lighting Optimized for Low Vision. *Peter Borden, PhD*

11:15 – Reliability of Clinical Measurement of Equivalent Dioptric Power of Lens Systems in Low Vision. *Bennett McAllister, OD, FAAO*

11:45 – An Evaluation of the Discourse on Dual Sensory Loss, Aging, and Assistive Devices. Sarah Fraser, PhD

Instruction Level: Intermediate **Objectives:**

- 1. Examine vision rehabilitation interventions available with assistive devices and optics.
- 2. Characterize potential rehabilitative outcomes with assistive devices and optics.
- 3. Integrate assistive devices and optics to maximize quality of life potential for patients.

CEUs: ACCME: 2; ACVREP: 2; AOA-CPC: 2;

C45. Two New Programs to Address Patient Awareness of Binocular Central Visual Field Defects

Gianfrancesco Villani, MD, FEBO; Donald Fletcher, MD 1:30-2:30 pm | Nicollet A1

Research has demonstrated that patients with macular disease usually present with binocular central field defects and that the majority of these patients are totally unconscious of their presence. Clinicians cannot depend on patients to report the presence of significant scotomas; thus, appropriate testing must be performed. Successful rehabilitation requires the clinician trainer and the patient to be aware of their scotomas. We present two novel programs and techniques to accomplish this purpose that can be easily and inexpensively used in clinical practice.

Instruction Level: Intermediate Objectives:

- 1. Define the significance of scotomas in low vision rehabilitation.
- 2. Utilize techniques to increase patient awareness of scotomas.
- 3. Translate scotoma findings to reading performance adaptations.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1

C46. Smartphones and Tablets – Is This the Way of the Future?

Ana Juricic, OD
1:30-2:30 pm | Nicollet A2

This presentation provides an up-to-date look at the benefits of smartphones and tablet use for the visually impaired and blind community. It will address current and future trends in how these devices are helping individuals with vision loss live more independently. The attendee will leave this lecture knowing which features are important for their clients and patients to look for when purchasing a new smartphone or tablet.

Instruction Level: Introductory **Objectives:**

- 1. Name several devices out in the marketplace that fall into the categories of smartphones and tablets.
- 2. Discuss the features and various apps that allow the smartphones and tablets to benefit the visually impaired and blind community.
- 3. Address the question "Are smartphones and tablets making the visually impaired and blind community illiterate?"

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

C47. Vision Rehabilitation Through the Lens of Primary Care

Sarah Hinkley, OD, FCOVD 2:45-3:45 pm | Nicollet A1

This one hour course will emphasize why there is a need for vision rehabilitation professionals and dispel common myths regarding vision rehabilitation practice. The course will also discuss how to get started, equipment and scheduling needs and practice management tips, including the importance of the rehabilitation team approach.

Instruction Level: Introductory **Objectives:**

- 1. Describe the need for vision rehabilitation professionals.
- 2. Dispel three myths concerning vision rehabilitation practice.
- 3. Describe two practical practice management tips that you can implement in vision rehabilitation practice.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1

C48. Movement Disorder and the Visual System: Parkinson's Disease

Denise A. Valenti, OD 2:45-3:45 pm | Nicollet A2

Parkinson's disease (PD) occurs secondary to the loss of dopamine-producing brain cells. PD has deficits in color perception, contrast sensitivity and motion. Circadian changes occur in PD and are likely secondary to retinal changes. Conventional eye examinations may not readily identify the subtle loss in the visual system that is common in PD.

Instruction Level: Intermediate Objectives:

- 1. Identify the demographics of movement disorder Parkinson's disease.
- 2. Comprehend retinal function involved in dopamine/melatonin neuroprocesses.
- 3. Describe the retina, movement disorder and circadian function.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

C49. E&M Coding for Low Vision: The Impairment, Not the Disease

Lylas Mogk, MD 4-5 pm | Nicollet A1

Recognition, by CMS and other insurers, of evaluation and management of low vision as distinct from evaluation and management of a disease is beneficial to the low vision physician for several reasons, and may be essential. A model of E&M coding specifically for a low vision evaluation is presented.

Instruction Level: Introductory **Objectives:**

- Distinguish between E&M elements of an evaluation of ophthalmic disease vs. evaluation of the impairment caused by the disease.
- 2. List the factors included in E&M levels of complexity.
- 3. Discuss billing by elements and billing by time.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

AOTA: 1; COPE: 1; CRCC: 1

C50. Low Vision Rehabilitation in a Long-Term Care Facility: A Pilot Project Overview and Outcomes

Heidi Panchaud, CVRT; Tammy Labreche, BSc, OD 4-5 pm | Nicollet A2

This presentation will describe a pilot program to extend the provision of routine eye care in Long Term Health Care Facilities (LTHC) to include low vision rehabilitation services. The observed outcomes, successes and challenges of this service provision are discussed in the context of four sample case presentations.

Instruction Level: Intermediate Objectives:

- Define the process of providing routine optometric assessments and low vision rehabilitation services to LTHC residents.
- 2. Differentiate the challenges and benefits of providing rehabilitation follow-up services to this demographic.
- 3. Cite effective strategies for addressing specific modifiable challenges in these service provisions.

CEUs: ACCME: 1; ACVREP: 1; AOA-CPC: 1;

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Complete speaker bios can be found at www.envisionconference.org//confsessionsevents.asp.

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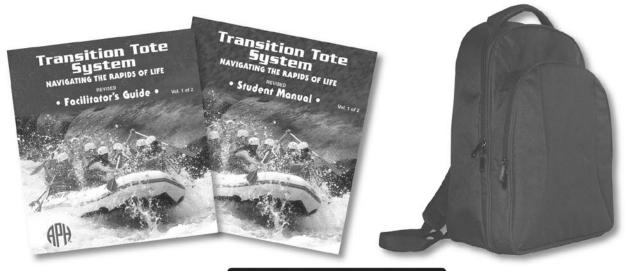
Cylised! Transition Tote System "Navigating the Rapids of Life"

Transition Tote materials teach middle school, secondary, and transition students with visual impairments essential skills for learning about themselves and the world of work. This revised kit adds seven new lessons and includes APH's custom-designed Transition Tote Backpack.

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Exhibit Hall Guide

The following exhibiting companies are listed alphabetically.

All exhibits are located in the Exhibit Hall adjacent to Nicollet Promenade.

See the Exhibit Hall Floor Plan on page 61 for booth locations.

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

Ai Squared

www.aisquared.com Booth 31

Ai Squared is a worldwide leader in screen magnification and reading for the visually impaired. Learn about ZoomText for both the PC and the Mac, ImageReader, ZoomText Camera, our Large-Print Keyboards, and so much more. Grab a free trial plus check out our other products.

American Association for Pediatric Ophthalmology and Strabismus

www.aapos.org Booth 22

AAPOS is the American Association for Pediatric Ophthalmology and Strabismus. The organization's goals are to advance the quality of children's eye care, support the training of pediatric ophthalmologists, support research activities in pediatric ophthalmology, and advance the care of adults with strabismus.

Beecher Optical Products, Inc.

Booth 37

Beecher Optical Products, Inc. has been in the low vision market for 26 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.

Chadwick Optical, Inc.

www.chadwickoptical.com
Booth 11

All New Cool Rx-able wrap frames for light sensitivity and high power prescriptions. Showcasing our incredible Lens Museum. Custom prescription eyeglass solutions for the legally blind: Prescription Medical Filters, Custom lenses available nowhere else! Prismatic Spectacles and Microscopics: stock and customized. We make the impossible happen.

Crystal Practice Management

Booth 20

Crystal PM is the total software package that enables optometric offices to easily perform all essential practice management functions. Crystal is EHR ambulatory certified for all meaningful use incentives.



Designs for Vision, Inc.

www.designsforvision.com Booth 5

Designs for Vision, Inc. is a manufacturer of Low Vision devices for the partially sighted. Providing more cosmetically appealing options in telescopic and microscopic glasses. We offer ClearImageII® and Prismatic spectacles for near viewing, Bioptic, Full Diameter and the Politzer Telescope Series for distance viewing and Spiral Telescopes for multitasking. Exclusive Distributor of E-Scoop® in the US. Rebate program available for all diagnostic fitting kits.

Dophin Computer Access

www.yourdolphin.com Booth 7

It is our vision to deliver independence to people with vision and print impairments worldwide. With over 160 million visually impaired people and 600 million dyslexic or learning disabled people, that's no small challenge but we're determined to make a difference and have been working hard on that goal since Dolphin started. Noel Duffy, Managing Director, Dolphin Computer Access.

Enhanced Vision

www.enhancedvision.com Booth 21

Enhanced Vision is the leading developer of innovative products designed specifically for people who have low-vision conditions. Our company offers the most comprehensive line of electronic magnifying solutions including systems with HD and text-to-speech (OCR). For more information, please call (888) 811-3161 or visit www.enhancedvision.com.

Eschenbach Optik

www.eschenbach.com Booth 36

Eschenbach is a leading manufacturer and distributor of magnifiers (hand-held, stand, spectacle), telescopes, filters, and video magnifiers for the visually impaired. Our exclusive Portable Kit is ideal for rehab professionals and includes a diagnostic assortment of vision aids and in-service training by our sales professionals nationwide.

Fork in the Road Vision **Rehabilitation Services**

www.lowvisionsimulators.com Booth 4

Fork in the Road sells low vision simulators educational tools to help students, staff, colleagues, and family members understand the impact of low vision. We also offer the Pepper Visual Skills for Reading test and the Learn to Use Your Vision Reading Workbook. Great tools for low vision rehabilitation professionals.

Freedom Scientific

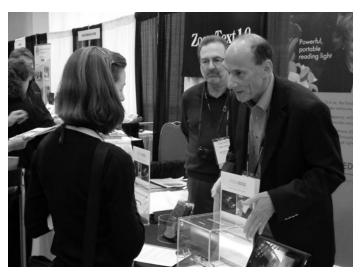
www.FreedomScientific.com
Booth 33

Freedom Scientific is the largest worldwide manufacturer of assistive technology products for those who are blind or have low vision. Freedom Scientific is also the only company with a complete line of products for those with vision impairments. All of these products are tested and guaranteed to work together. Freedom Scientific has been in business for over 10 years and its products are sold in 55 countries and translated into 24 languages.

Fresnel Prism and Lens Co.

www.fresnel-prism.com
Booth 14

Welcome to Minnesota! Fresnel Prism & Lens Co. offers invaluable and affordable products used by low vision professionals. 3M Press-On Prisms, Fresnel Prism Trial Sets, Bangerter Occlusion Foils & Occlusion Patches are just a few. New this year, Prism Adapter and Nomograph Kit. All in stock for same day shipping.





Good-Lite

www.good-lite.com Booth 25

Good-Lite offers a complete range of vision testing products, including the new self-calibrating ETDRS Standardized Viewer, Cortical Visual assessment, LEA Symbols® and LEA Numbers®, high and low contrast and low vision testing. These items and many more will be on display at Envision Conference 2013.

Hemianopia.org

www.hemianopia.org Booth 12

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.
- Other optical aids and filters for brain injury patients.

HIMS Inc.

www.hims-inc.com Booth 27

HIMS presents LifeStyle and CANDY GRIP, desktop and portable HD video magnification products. Patients with low vision due to macular degeneration, diabetes, glaucoma, RP and other vision loss conditions retain and regain their independence and quality of life with HIMS magnifiers. Writing hobbies and crafts, reading in restaurants and stores are all easier and possible.

HumanWare USA Inc

www.humanware.com
Booth 1

World leader in developing assistive technology products for the blind, visually impaired and learning disabled.

International Association of Audio Information Services

www.iaais.org Booth 38

The International Association of Audio Information Services (IAAIS) is the umbrella association of all organizations that put audio materials into a print format (primarily newspapers, magazines, books).

Jasper Ridge Inc., maker of the VisionEdge™

Booth 6

Jasper Ridge announces VisionEdge™, providing bright light without glare. The intense, focused light allows you to easily incorporate high illumination into patient exams and rehabilitation programs. VisionEdge has 12 LEDs, delivering 10-100X the illumination of task lights. Just 0.4 oz., it slips onto glasses or visors. The proprietary, typoscopic optics focus light only on areas being read, reducing eyestrain and glare.

NoIR

www.noirlaser.com Booth 32

NoIR offers eyewear for the visually-impaired to maximize functional vision, increase mobility, enhance contrast and provide relief from light-sensitivity, glare and discomfort. NoIR Low Vision Filters are available in frames for over glasses or as stand-alone styles, delivering affordable ultraviolet, visible and infrared protection to the young and old alike.

Ocutech

www.ocutech.com Booth 23

Ocutech is a developer and manufacturer of VES® low vision telescopic aids, including VES-Sport which provides crisp, bright images and excellent dexterity. Ocutech's new SightScope system is a unique, flip-up design, Galilean bioptic with excellent design features. Ocutech devices were developed and tested with grants from the National Institute of Health and CNIB.

Optelec & ShopLowVision.com

www.ShopLowVision.com
Booth 35

Optelec provides innovative and life changing assistive technology and diagnostic aids for the blind and visually impaired community, by reaching out with simple and effective low vision solutions for personal, work and educational use. ShopLowVision.com, powered by Optelec, provides the latest in professional products and daily living aids.

Optos, Inc.

optos.com Booth 2

Optos, a leading provider of devices to eye care professionals for improved patient care, provides devices that produce ultra-widefield, digital images of approximately 82% or 200° of the retina. Also featured, the OptosOCT SLO with Microperimetry, the only imaging platform available that delivers Structure and Function together.

Precision Vision

www.precision-vision.com
Booth 13

Precision Vision has been the leading producer of vision testing and visual acuity products worldwide for decades. They have been at the forefront of numerous milestones in the field and are still recognized as the premier manufacturer for standard and custom products. Precision Vision continually works to exceed industry standards.

Second Sight Medical Products Inc.

www.2-sight.com Booth 3

World's first and only manufacturer of an FDA-approved retinal prosthesis, the Argus II Retinal Prosthesis System, which partially restores vision to people blinded by retinitis pigmentosa.

UAB Graduate Certificate in Low Vision

www.uab.edu/lowvision
Booth 34

A graduate certificate for occupational therapists to develop clinical expertise in low vision rehabilitation. Students complete five 3-credit hour graduate courses in evaluation and intervention for adults with vision loss from agerelated eye disease and brain injury. Offered through a web-based distance education platform with in-state tuition from UAB.

Vision Care Ophthalmic Technologies, Inc.

www.visioncareinc.net
Booth 28

VisionCare has developed the first FDA-approved telescope prosthesis demonstrated to improve vision and quality of life for individuals with End-Stage AMD. The telescope implant is integral to the CentraSight® treatment program which has been created to help patients follow the necessary steps for proper diagnosis, surgical evaluation, and postoperative care.







EasyConverter

make information acessible







the reading and writing toolbar for dyslexia



for every visual impairment



Come see us at booth 7

www.YourDolphin.com

Envision University



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ANGLE

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DESIGNS FOR VISION, INC.

Jasper Ridge, maker of

VĬSION**EDGE**...

C Thank you for your support!



Exhibitors

- **31** Ai Squared
- 22 American Association for Pediatric Ophthalmology and Strabisims
- **37** Beecher Optical Products, Inc.
- **11** Chadwick Optical Inc.
- **20** Crystal Practice Management
 - **5** Designs for Vision, Inc.
 - 7 Dolphin Computer Access
- **21** Enhanced Vision
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- **35** Optelec & ShopLowVision.com
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- **34** UAB Graduate Certificate in Low Vision Rehabilitation
- **28** VisionCare Ophthalmic Technologies, Inc.

Fork in the Road Vision Rehabilitation Services, LLC



Low Vision Simulators

For teaching families and professionals:

Our simulators demonstrate a reasonably accurate picture of different types and levels of vision impairments. Wearing the simulators and attempting to do everyday tasks can quickly show fully sighted persons the impact of low vision. Simulated impairments includes macular degeneration, glaucoma, diabetic retinopathy, cataracts, RP, hemianopsia and more.



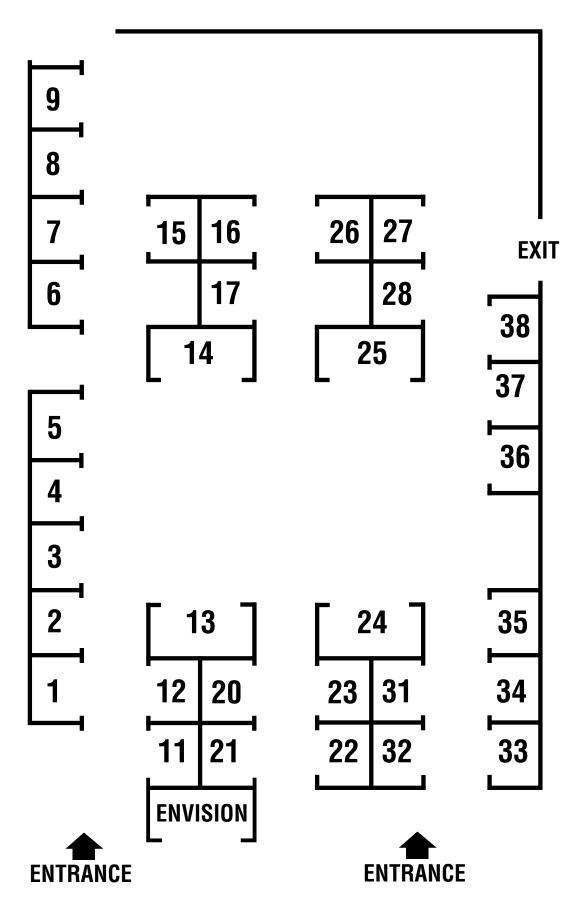
For additional product details

www.LowVisionSimulators.com LowVisionSimulators@Gmail.com 608-233-3464 voice/fax



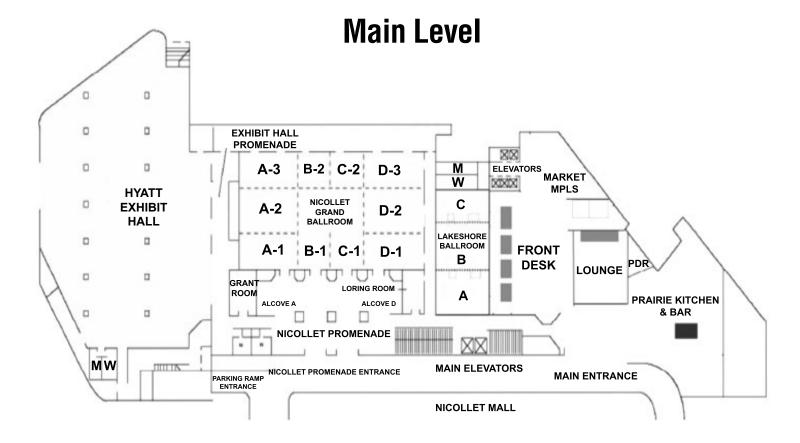


Exhibitor Booth Map





Hotel Floor Plans



ENVISION CONFERENCE- OPTELEC BOOTH #35

LIMITED-TIME OFFER! ONLY \$395 & FREE SHIPPING

Optelec Low Vision Diagnostic Tool

Promo Code: ENV1301. Valid until 10/04/13. Order on-site or 888.239.7195.

www.LowVisionDiagnosticTool.com

15% OFF & FREE SHIPPING on confirmed orders. Excludes ELV, contract or OPTDIAG.

ON-SITE & FACEBOOK CONTESTS

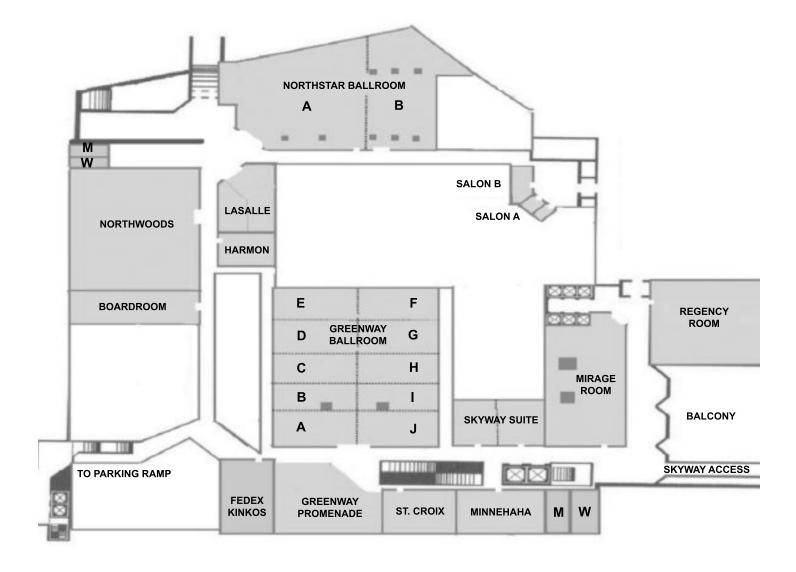
RECEIVE A \$30 SHOPLOWVISION.COM VOUCHER to use towards a future purchase with all confirmed orders over \$75 placed at the show.

Tel: 800.826.4200 www.ShopLowVision.com www.Optelec.com



Hotel Floor Plans

Second Level







Envision University 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 University is an Academy for Certification of Vision Rehabilitation and Education Professionals (ACVREP) Registered Provider of Professional Learning and Education (RPPLE).

Medical Education Grant

Continuing Education Accrediting Agencies

Each session may be approved by one or more of the following agencies:

- ACCME (Accreditation Council for Continuing Medical Education)
- ACVREP (Academy for Certification of Vision Rehabilitation and Education Professionals)
- AOA-CPC (American Optometric Association Commission on Paraoptometric Education)
- AOTA (American Occupational Therapy Association)
- COPE (Council on Optometric Practitioner Education)
- **CRCC** (The Commission on Rehabilitation Counselor Certification)

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

A certificate of participation will be available at the registration desk. Continuing education certificates of documented attendance can be downloaded online at www.envisionconference.org after October 15, 2013. Each attendee will receive an email notification once certificates are available online. You will be required to enter your name and registration or badge number in order to download your certificate.

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 educational 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 University. The University of Kansas Medical Center Office of Continuing Medical Education is accredited by the ACCME to provide continuing medical education for physicians.

The KU Medical Center Office of Continuing Medical Education has been approved for *AMA PRA Category 1 Credit™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Continuing Education Objectives

Envision Conference 2013 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 multidisciplinary 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.
- Develop strategies for strengthening the role of low vision on the public health agenda.
- Address disparities in access to low vision care.
- Provide opportunities and training to address national eye health epidemics.

Make Your Plans to Attend

ENVISIONCONFERENCE

A multidisciplinary low vision rehabilitation & research conference by Envision University



September 17-20, 2014

Hyatt Regency Minneapolis 1300 Nicollet Mall Minneapolis, Minnesota

September 22, 2013

Registration and Submissions Open Online

March 21, 2014

Deadline for Clinical Education and Research Submissions and Edits

July 7, 2014

Early Bird Registration Deadline

July 11, 2014

Deadline for Advance Price Exhibitor Registration

August 22, 2014

Deadline for Presentation Materials and Handouts

August 25, 2014

Hotel Room Block Deadline



www.envisionconference.org



Continuing Education Credits

THURSDAY SESSIONS

NUMBER	ACCME	ACVREP	AOA-CPC	AOTA	COPE	CRCC
Plenary	1	1	1	1	1	1
C1	1	1	1	1	1	1
C2	1	1	1	1	1	1
C3	1	1	1	1	1	1
C4		1		1		1
C5	1	1	1	1	1	1
<u>C6</u>	1	1	1	1	1	1
<u>C7</u>	1	1	1	1	1	1
C8		1		1		1
C9	2	2	2	2	2	2
C10	2	2	2	2	2	2
C11	2	2		2		2
C12	2	2	2	2	2	2
C13	2	2	2	2	2	2
C14		2		2		2
C15	2	2	2	2	2	2
C16	2	2	2	2	2	2
R1	2	2	2	2	2	2
R2	2	2	2	2	2	2
R3	2	2	2	2	2	2

FRIDAY SESSIONS

NUMBER	ACCME	ACVREP	AOA-CPC	AOTA	COPE	CRCC
C17	1	1	1	1	1	1
C18	1	1	1	1	1	1
C19	1	1	1	1	1	1
C20	1	1	1	1	1	1
C21	1	1	1	1	1	1
C22	1	1	1	1	1	1
C23	1	1	1	1	1	1
C24		1		1		1
C25	1	1	1	1	1	1
C26	1	1	1	1	1	1
C27	1	1	1	1	1	1

FRIDAY SESSIONS cont.

NUMBER	ACCME	ACVREP	AOA-CPC	AOTA	COPE	CRCC
C28		1		1		1
C29	2	2	2	2	2	2
C30	2	2	2	2	2	2
C31	2	2	2	2	2	2
C32		2		2		2
C33	2	2	2	2	2	2
C34	2	2	2	2	2	2
C35		2		2		2
C36	2	2	2	2	2	2
R4	2	2	2	2	2	2
R5	1	1	1	1	1	1
R7	2	2	2	2	2	2

SATURDAY SESSIONS

NUMBER	ACCME	ACVREP	AOA-CPC	AOTA	COPE	CRCC
C37	2	2	2	2	2	2
C38	2	2	2	2	2	2
C39	2	2	2	2	2	2
C40	2	2	2	2	2	2
C41	2	2	2	2	2	2
C42		2		2		2
C43		2		2		2
C44		2	2	2	2	2
C45	1	1	1	1	1	1
C46	1	1	1	1	1	1
C47	1	1	1	1	1	1
C48	1	1	1	1	1	1
C49	1	1	1	1	1	1
C50	1	1	1	1	1	1
R8	2	2	2	2	2	2
R9	2	2	2	2	2	2

Attendee Resources

Complimentary Food and Beverage

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

Continental Breakfast

Thursday-Saturday: 7-8 am

Coffee Break

Thursday: 9:30-9:45 am; 3-3:30 pm **Friday:** 10:15-10:45 am; 3:15-3:30 pm **Saturday:** 10-10:15 am; 3:45-4 pm

Welcome Reception

(Drink Tickets Required)

Thursday: 5:30-8 pm

Buffet Lunch

(Ticket Required)

Friday: 11:45 am-1:15 pm



Dining Options at the Hyatt Regency Minneapolis

Prairie Kitchen and Bar

Breakfast: 6:30-11 am Lunch: 11 am-2 pm Dinner: 5-10 pm

Lounge: 11 am-Midnight

Market

Daily: 6 am-8 pm

FedEx Office

FedEx Office is staffed Monday through Friday, 8 am-5 pm. For copier access after hours, use your room key card. For more information or questions regarding the FedEx Office, please call **612-339-5641** or fax **612-339-5995**.

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 Lunch for \$50.

Internet Access

High-speed wireless internet access is available in the hotel lobby and in all guestrooms.

Lost and Found

Lost and found is located at the conference registration desk in Nicollet Promenade.

Message Center

Messages for attendees can be left and retrieved at the conference registration desk in Nicollet Promenade.

Parking Information

Valet Parking: \$28/day Self Parking: \$17/day



Presenters

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

A **Speaker Ready Room** is available in the Grant Room. 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 during the following times:

Wednesday 2-6 pm

Thursday 7 am-5:30 pmFriday 7 am-5:30 pmSaturday 7 am-4 pm

Registration Desk

The Envision Conference 2013 registration desk, located in the Nicollet Promenade, is open during the following times:

Wednesday 2-6 pm

Thursday 7 am-5:30 pmFriday 7 am-5:30 pmSaturday 7 am-5 pm

Notes	Envision Conference 2013

INTRODUCING ENVISION UNIVERS

Improving the quality of low vision care through continuing education and research

- Envision Conference
- Live Continuing Education Events
- Online Education
- Visibility
- Research





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A multidisciplinary low vision rehabilitation & research conference by Envision University

SAVE THE DATE

September 17-20, 2014

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Minneapolis, Minnesota

www.envisionconference.org