



AMERICAN ACADEMY OF DISABILITY EVALUATING PHYSICIANS™

YOU KNOW THE PROBLEMS—NOW HERE ARE THE ANSWERS

THE AADEP 24th ANNUAL SCIENTIFIC SESSION AND ADVANCED CLINICAL SKILLS IS READY TO DO JUST THAT WITH YOU BY

**January 6, 2011 – Advanced Clinical Skills Modules
January 7-8, 2011 – 24th Annual Scientific Session
JW Marriott Hill Country, San Antonio, Texas**

- ❖ BEING PART OF THE ANSWER FOR EFFECTIVE DISABILITY EVALUATION BY FACING ITS OBSTACLES HEAD-ON
- ❖ RESOLVING THE CONTINUING CONUNDRUM OF CHRONIC PAIN AND CHOOSING THE RIGHT INTERVENTIONS
- ❖ MAKING EVIDENCE BASED MEDICINE AS THE NEW GOLD STANDARD
- ❖ ATTACKING/ALLEVIATING FRAUD AND ABUSE

INTERACT WITH INTERNATIONAL EXPERTS IN THE FIELD

DEVELOP PERSONAL COMPETENCE

CHANGE YOUR PRACTICE

ANSWER YOUR OWN QUESTIONS IN CONSULTANT CORNER

ENGINEER BETTER INJURED WORKER OUTCOMES

OVERCOME INTERNATIONAL DISABILITY CRISIS

**JOIN YOUR COLLEAGUES IN SAN ANTONIO FOR THE ULTIMATE LEARNING EXPERIENCE WITH THE
*AMERICAN ACADEMY OF DISABILITY EVALUATING PHYSICIANS***

REGISTER TODAY ON THE ATTACHED REGISTRATION FORM AND FOR ADDED VALUE...

Tentatively, Advanced Skills Modules may include:

AMA Sixth Edition (half-day)

AMA Fifth Edition (half-day)

Chronic Pain Issues

The “Black Hole” of Social Security

Evidence Based Medicine

Fraud and Abuse Dilemma

Medical-Legal

American Academy of Disability Evaluating Physicians
223 W Jackson Blvd, Suite 1104, Chicago, IL 60606-6900
Toll-Free: 800/456-6095 • Direct: 312.663.1171 • Fax: 312.663.1175
E-Mail: aadep@aadep.org • Website: www.aadep.org

Registration Form

Please print or type all information. Complete one form per person.

| | | | |
|-----------------------------|-----------------------------|---|------------------|
| NAME _____ | | NICKNAME _____ (As it would appear on a badge) | |
| <input type="checkbox"/> MD | <input type="checkbox"/> DO | OTHER _____ | SPECIALITY _____ |
| ADDRESS _____ | | | |
| CITY _____ | STATE _____ | ZIP _____ | COUNTRY _____ |
| TELEPHONE (O) _____ | FAX NUMBER (O) _____ | E-MAIL ADDRESS _____ | |

Hotel Information
JW Marriott Hill Country
 23808 Resort Parkway
 San Antonio, Texas 78261
 Phone: 1-210-403-3434

HOTEL DEADLINE:
December 15, 2010

GROUP RATE:
\$209 Single/Double.
(Please specify AADEP)

Annual Scientific Session & Business Meeting

Friday - Saturday, January 7-8, 2011

| | <u>Pre-Registration</u> | <u>On-Site</u> |
|--|-------------------------|----------------|
| <input type="checkbox"/> Non-Member Physicians | \$595 | \$670 |
| <input type="checkbox"/> AADEP, Assoc. Member | \$295 | \$370 |
| <input type="checkbox"/> AADEP, Member | \$545 | \$620 |
| <input type="checkbox"/> AADEP, Fellow | \$495 | \$570 |
| <input type="checkbox"/> Other Med. Professional | \$495 | \$570 |
| <input type="checkbox"/> Non-Med Professional | \$495 | \$570 |
| <input type="checkbox"/> Nurse Case Managers | \$195 | \$270 |
| <input type="checkbox"/> Insurance Claims Agents/Adjustors | \$195 | \$270 |

Advanced Clinical Skills

| | <u>Pre-Registration</u> | <u>On-Site</u> |
|--|-------------------------|----------------|
| <input type="checkbox"/> FULL DAY (Choose one AM & one PM) | \$475 | \$550 |
| <input type="checkbox"/> HALF DAY | \$345 | \$420 |

Tentatively, Advanced Skills Modules may include:

- AMA Sixth Edition (half-day)
- AMA Fifth Edition (half-day)
- Chronic Pain Issues
- The "Black Hole" of Social Security
- Evidence Based Medicine
- Fraud and Abuse Dilemma
- Medical-Legal

Registration fee includes nearly 2 full days for the Scientific Session, CD-ROM Syllabus, two continental breakfasts, three refreshment breaks, case presentations, Fellow papers, exhibits, Welcome Reception on Thursday and Fellows Banquet on Friday evening.

You must register to attend either of these events.

Tickets for your guest are \$80.

Pre-registration Deadline: December 16, 2010

Cancellation with refund: December 16, 2010

REGISTER BY FAX: 312-663-1175

Special Events & Extras

CME Special Contribution: \$50

WELCOME RECEPTION & VERITAS MEDICUS AUCTION

Thursday, January 6, 2011

- Yes, I will attend (Complimentary)
- Yes, I have a donation for the auction (call 1-800-456-6095, Ext. 22)
- Guest Reception Ticket # _____ @ \$ 80

FELLOWS BANQUET

Friday, January 7, 2011

- Yes, I will attend (Complimentary)
- Guest Reception Ticket # _____ @ \$ 80

CEDIR EXAM

Saturday, January 8, 2011

- (Requires Separate Advance Application)
- Yes, I will take the CEDIR Exam
 - Fourth Fifth Sixth

\$275 Fellow
 \$375 Member
 \$475 Non-Member

SPECIAL NEEDS

Payment Information

Make Check AADEP
Payable to: 223 W Jackson Blvd Suite 1104
 Chicago, IL 60606-6900

Payment Amount: \$ _____

Card No. Visa MasterCard AmericanExpress

Expiration Date: _____ / _____

Signature _____

CANCELLATION POLICY

There is a \$100 service fee for all cancellations received before 12/16/10. No refunds for cancellations received after 12/16/10 or for NO SHOWS.