

FCPA



THE FLORIDA
CLEFT PALATE
CRANIOFACIAL
ASSOCIATION

2018 Florida Cleft Palate Craniofacial Association Meeting



Loews Sapphire Falls Resort - Orlando, Florida
January 13, 2018



INVITED FACULTY

Dr. Alvaro Figueroa	Orthodontics for Cleft and Craniofacial Patients
Dr. Jose Larumbe	Dentofacial Orthopedics
Dr. Normidaris Jimenez	Anesthesiology and Pediatric Anesthesiology
Dr. Paul Tiwana	Cleft Orthognathic Surgery
Dr. Kristen DeLuca	Speech and Language Pathology
Dr. Deborah Levine	Prenatal Ultrasound Imaging and Craniofacial Diagnosis
Dr. Jason Hirsch	Silver Diamine Fluoride in Caries Management
Dr. John Riski	Speech Pathologist

FCPA Preliminary Program

Saturday, January 13, 2018

8:00AM- 10:30 AM - Breakout sessions

Nursing Room: Suzanne Greenleaf-Martin Moderator

Speech Room: Joann Vargas Moderator

Other Room: Jason Portnof Moderator

11:00AM- 12:00PM - 60 minute presentation Keynote Speaker 1 (Orthodontics for Cleft Orthognathic Surgery) Dr. Alvaro Figueroa

12:00PM- 1:00PM - Lunch

1:00PM- 1:30PM - 30 min presentation (Nasal Conformer) Dr. Jose Larumbe

1:30PM-2:00PM - 30 min presentation (Anesthesia/ PRS Normidaris Jimenez MD)

2:00PM-3:00PM - 60 minute presentation Keynote Speaker 2 (Cleft Orthognathic Surgery) Dr. Paul Tiwana

3:00PM- 3:30PM - 30 min presentation (Speech and Language Pathology) Kristen DeLuca MS, CCC-SLP

3:30PM- 4:00PM - 30 min presentation (psychology/ bullying)

4:00PM- 4:30PM - 30 min presentation (Prenatal US Imaging) Dr. Deborah Levine

4:30PM-5:00PM - 30 min presentation (Silver Diamine Fluoride in Caries Management) Jason Hirsch DMD MPH

5:00PM-6:00PM - 60 min Key note presentation

2017 FCPA REGISTRATION FORM

January 13, 2018 - The Loews Hotel in Orlando, Florida

Main Registrants Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

REGISTRATION FEES	Before	After	Onsite
	11/30/17	11/30/17	
Members			
Professionals (W/voting Privileges)	___\$175	___\$225	___\$250
Residents/Fellows/CFY	___\$60	___\$60	___\$75
Students (undergrad)	Free	Free	Free
Nurse	___\$125	___\$125	___\$125
Speech Therapist	___\$125	___\$125	___\$125
Non Members (does not include membership)			
Professional Non Member	___\$325	___\$375	___\$400
Residents/Fellows/CFY	___\$100	___\$100	___\$125
Nurse	___\$225	___\$225	___\$225
Speech Therapist	___\$225	___\$225	___\$225

If paying by credit card please complete the section below and e-mail or fax your registration form to the FCPA office. E-mail: kpalmer@hdplanit.com or fax (435)487-2011.

Payment Information: Credit Card Number _____ Exp. _____

CVV Code: _____ Name on Card: _____

Signature: _____

Billing Address if different from above: _____

If paying by check please send the completed registration form along with you payment to:

Florida Cleft Palate Craniofacial Association (FCPA)
6300 Sagewood Drive, Suite H255
Park City, UT 84098

Questions? Contact the FCPA Office at (435) 602-1329 or kpalmer@hdplanit.com.

A confirmation of registration will be e-mailed to you once your payment is processed.

Cancellation Policy: Full refunds minus a \$50 service charge will be considered if written notice of cancellation is received on or before November 1, 2017. No refunds will be given after November 1, 2017.