



A Portrait of Alzheimer's

Insight & Strategy for Healthcare Professionals

The Alzheimer's Association, WV Chapter's Annual Alzheimer's Education Conference is the only comprehensive educational venue in West Virginia dedicated to Alzheimer's disease and improving the way you care for individuals with Alzheimer's.

Thursday, November 19

8 am Registration Opens

9 am Welcome

9:15 am Creating Moments of Joy – Jolene Brackey

10:30 am Break

10:45 am cont. Creating Moments of Joy – Jolene Brackey

Noon Lunch & Speaker TBA

1:15 pm Breakout 1 (1 h 15 m)

- A. Enhanced Dining – Jolene Brackey
- B. Stress Busting Your Life – Aila Accad, RN, MSN
- C. A Picture of Movement: Maintaining Functionality Throughout the Disease – Ester Jones, CS/PM/OTR/L
- D. Enhancing Your Memory: Creative Aging & the Brain – Eric VanVlymen, MSW

2:45 Breakout 2 (1h 15 m)

- A. Enhanced Dining – Jolene Brackey
- B. Stress Busting Your Life – Aila Accad, RN, MSN
- C. A Picture of Movement: Maintaining Functionality Throughout the Disease – Ester Jones, CS/PM/OTR/L
- D. VA Benefits: The Big Picture – Elizabeth Ladow, MSW

4 pm Painting the Future of Alzheimer's Disease: The Latest in Research – Dr. William H. Theis

*open to the public

Friday, November 20

8 am Registration Opens

8:15 am Breakfast & Speaker

Creating Your Ethical Will – Susie Turnbull

9:30 am Breakout 3 (1 h 15m)

- A. Pharmacotherapy of Dementia – Related Behaviors – Dr. A.G. Lorenzo
- B. The Boomers Are Coming: Bingo Won't Cut it Anymore – Jane Marks & Melissa Gandee, LSW
- C. Eating & Swallowing Problems in the Person With Dementia – Erin Ball, MA, CCC/SLP

11:15 am Enhancing Your Memory – Jolene Brackey

REGISTRATION FORM

Please fill out the following information to register for the 2009 Annual Education Conference. Refer back to the conference schedule to choose your workshops. Please note that breakout selections are not guaranteed. Questions? Please contact the Alzheimer's Association, WV Chapter at 1.800.491.2717 or at www.alz.org/wv

Name: _____

Organization: _____

Address: _____

City/State/Zip: _____

Daytime phone: _____ Email: _____

Fees:

Professional: _____ \$175 Conference Registration
_____ \$105 Thursday only
_____ \$250 Conference Registration + Exhibit Space

Family Caregiver/Student: _____ \$85 Total Conference
_____ \$55 Thursday only

Payment:

___ Enclosed is my check. Make your check payable to: Alzheimer's Association, West Virginia Chapter

___ Please bill me at the above address. Invoices are due upon receipt

___ Please charge my credit card:

NAME ON CARD _____

CARD NUMBER _____ EXP. DATE _____

SIGNATURE _____

Please mark the breakout workshop you would like to attend:

Breakout Session 1

___ Workshop A ___ Workshop B ___ Workshop C ___ Workshop D

Breakout Session 2

___ Workshop A ___ Workshop B ___ Workshop C ___ Workshop D

Breakout Session 3

___ Workshop A ___ Workshop B ___ Workshop C

Please mail or fax completed registration to:

Alzheimer's Association, WV Chapter • 1218 Market Street • Parkersburg, WV 26101 • fax: 1.304.865.6776