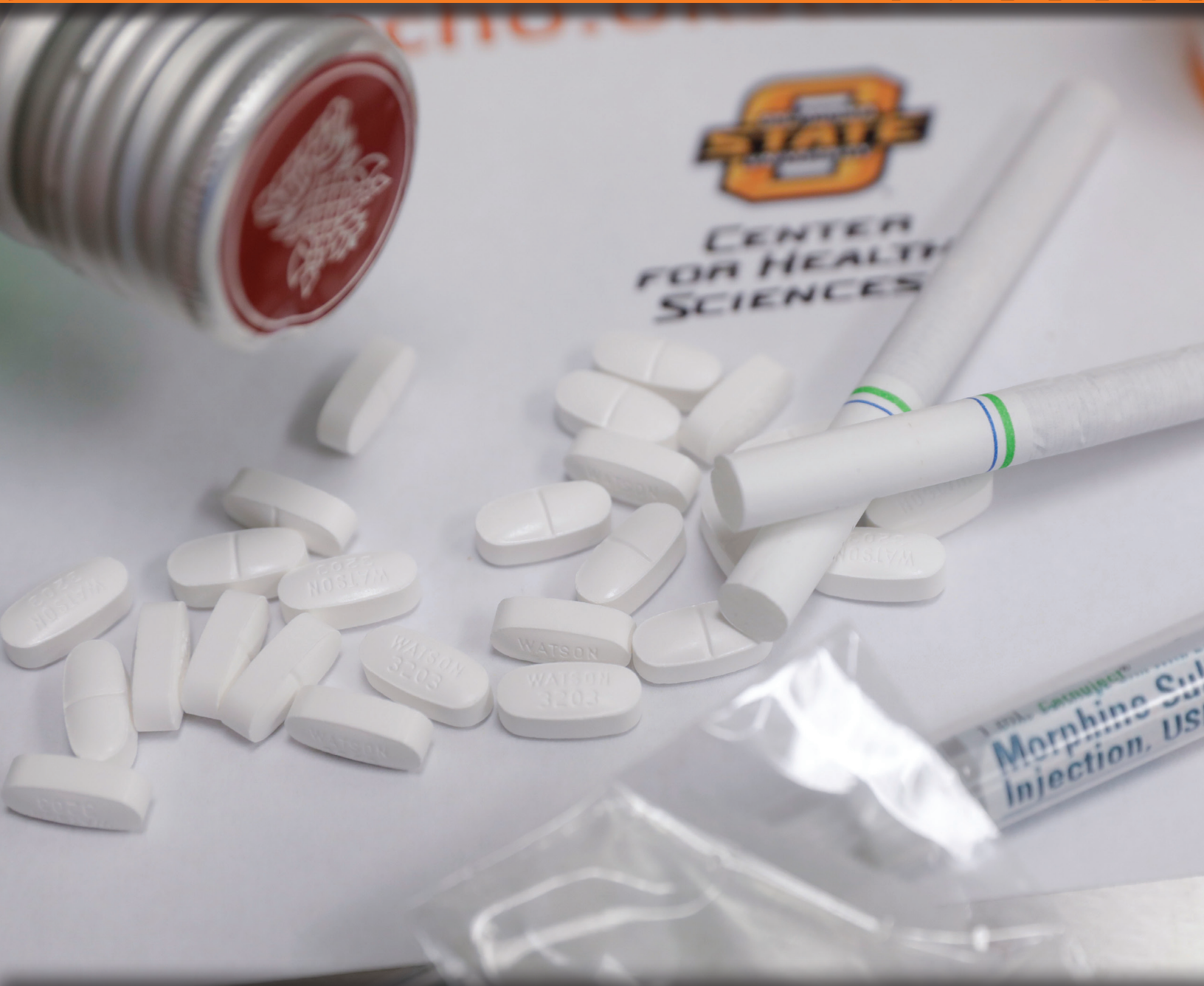


Oklahoma State University

COLLEGE OF OSTEOPATHIC MEDICINE



CME Office

2019 Addiction Medicine Conference

September 11-15, 2019

A.R. & Marylouise Tandy Medical Academic Building
Tulsa, OK



**CENTER
FOR HEALTH
SCIENCES**

JOIN US!

Addiction & Law – September 11, 2019

7 AOA Category 1-A Credits

Addiction & Law will explore the legal aspects of addiction for our state and nation. Educating physicians on both criminal and legal perspectives, we will look at addictive substances, treatment and the overall state of addiction in Oklahoma.

Update in Addiction Medicine – September 12, 2019

6 AOA Category 1-A Credits

The Update in Addiction Medicine is a bonus session which allows physicians to learn what is new and upcoming in addiction medicine. This conference will inform physicians about new prescriptions, changes in the law and different techniques to improve their practice.

Addiction Medicine Board Review September 13-15, 2019

20 AOA Category 1-A Credits

The 2019 Addiction Medicine Board Review is planned to educate physicians that are preparing for a career in addiction medicine or for practicing physicians that want more knowledge on how to manage patients with substance use disorders. This conference will touch on a variety of topics to assist physicians that are preparing for the Addiction Medicine Board Exam. The goal of this conference is to enhance the knowledge of providers in the areas of prescribing and addiction, thereby improving patient outcomes.



CONFERENCE SCHEDULE

Wednesday, September 11	
7:00 – 9:00 a.m.	Breakfast
10:00 – 10:15 a.m.	Morning Break
12:15 – 1:15 p.m.	Lunch
3:15 – 3:30 p.m.	Afternoon Break
Thursday, September 12	
7:30 – 9:30 a.m.	Breakfast
12:00 – 1:00 p.m.	Lunch
Friday, September 13	
7:00 – 9:00 a.m.	Breakfast
10:00 – 10:15 a.m.	Morning Break
12:15 – 1:15 p.m.	Lunch
3:15 – 3:30 p.m.	Afternoon Break
Saturday, September 14	
7:00 – 9:00 a.m.	Breakfast
10:00 – 10:15 a.m.	Morning Break
12:15 – 1:15 p.m.	Lunch
3:15 – 3:30 p.m.	Afternoon Break
Sunday, September 15	
7:00 – 9:00 a.m.	Breakfast

Sponsorship Opportunities

- Signage displayed on tables.
- Logo listed on Digi-signs throughout conference venue.
- Logo on sponsor section on conference website.
- Featured in OSU-CME monthly newsletter.
- Recognition in course materials.

**Breakfast
Buffet
\$750**
(5 available)

**Lunch
Buffet
\$1,250**
(4 available)

**Afternoon
Break
\$500**
(3 available)

**Beverage
Station
\$500**
(5 available)

**Charging
Station
\$1,000**
(1 available)

Exhibitor & Sponsorship Application and Agreement

Oklahoma State University College of Osteopathic Medicine | Continuing Medical Education Office
2019 Addiction Medicine Conference, September 11-15, 2019

Sponsorship Opportunities: (Please check all that apply)

Breakfast Buffet: \$750 (WED) \$750 (THUR) \$750 (FRI) \$750 (SAT) \$750 (SUN)

Lunch Buffet: \$1,250 (WED) \$1,250 (THUR) \$1,250 (FRI) \$1,250 (SAT)

Afternoon Breaks: \$500 (WED) \$500 (FRI) \$500 (SAT)

Beverage Station: \$500 (WED) \$500 (THUR) \$500 (FRI) \$500 (SAT) \$500 (SUN)

Charging Station: \$1,000

Company Information (Please print) *If you would like your company logo used please provide in electronic form.

Contact Name: _____

Company: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Cell/Office Phone: (____) _____ E-mail: _____

Names for exhibitor badge(s).

1. _____ 2. _____ 3. _____ 4. _____

Exhibitor Agreement

This application constitutes an understanding and agreement to comply with the OSU-COM exhibit guidelines as stated in this prospectus.

Name: _____ Company: _____

Signature: _____ Date: _____

Please keep a copy of this form for your files.

Questions: 1-800-274-1972 or osu.cme@okstate.edu

Submit to: OSU-COM CME Office with form of payment and company logo in electronic form by August 30, 2019.

Fax: 918-561-1433

Mail: OSU-COM

CME Office

1111 W. 17th St.

Tulsa, OK 74107-1898

Exhibit space will not be reserved until signed application and payment are received.

Cancellations made after September 6, 2019 will not be eligible for a refund.

Payment Information

Credit card: Visa MasterCard American Express Discover

Check # _____ in the amount of \$ _____

Please make checks payable to **OSU-COM**,
Federal Tax ID #73-1383996.

Amount: \$ _____ Card number: _____ Exp. Date: _____ CVC: _____