THE CLEVELAND CLINIC

The Sarcoidosis Center of Excellence at The Cleveland Clinic Presents

Integrating Sarcoidosis Care: Trends And Treatment In 2005

The Third Annual Sarcoidosis **Awareness Conference**





AUGUST 20-21, 2005

InterContinental Hotel & MBNA Conference Center The Cleveland Clinic Cleveland, OH

Integrating Sarcoidosis Care: Trends And Treatment In 2005

August 20-21, 2005

2:15 pm - 2:50 pm

Anenda is subject to revision. A final anenda will be provided to participants onsitu

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Friday, August 19, 2005				
6:00 pm - 9:00 pm	Registration Desk Open	2:50 pm - 3:05 pm	Afternoon Break	
Saturday, August 20, 2005		3:05 pm - 3:45 pm	Advance Directives Rosemary Lann L.I.S.W.	
7:00 am - 7:00 pm	Registration Opens Continental Breakfast	3:05 pm - 3:45 pm	Cosmetic demonstrations (To be announced)	
8:30 am - 8:40 am	Welcome Drs. Culver and Kavuru		(10 be almounced)	
0.4E am 10.00 am	Overview of Owner	3:05 pm - 3:45 pm	Oxygen Therapy & Appliances	
8:45 am - 10:00 am	Overview of Organ Involvement/Treatment Options Drs. V. Perez, Sherrie Williams., J. McDonnell	3:05 pm - 3:45 pm	Exercises: Health and Motivati Sherron Sowell N.D.E. I.T.A. Certif	
10:00 am - 10:15 am	Mid-morning Break	5:00 pm - 7:00 pm	Evening Reception	
10:15 am - 11:00 am	What is Your Doctor Thinking?	Sunday, August 21, 2005		
	Dr. J. Chapman	7:00 am - 12 pm	Registration Opens	
11:10 am - 11:55 am	Current Thoughts on the Cause of Sarcoidosis Dr. M. Judson	7:15 am - 8:00 am	Relaxation Exercises (requires full participation) Joanna Hardis L.I.S.W., Heather Olsen M.S.W., L.S.W.	
12:00 pm - 1:15 pm	Lunch and Keynote Speaker			
	Sarcoidosis Research: What is happening at the bench?	8:00 am	Continental Breakfast	
	Dr. Kiley	8:30 am - 9:15 am	Getting Your Relationship Through Sarcoidosis: Family	
1:30 pm - 2:10 pm	Lung Transplant Dr. M. Budev		Issues and Chronic Disease Joanna Hardis L.I.S.W., Heather Olsen M.S.W., L.S.W.	
1:30 pm - 2:10 pm	Pulmonary Function Tests:		neduler Olsen IVI.S.VV., L.S.VV.	
	What does it all mean? Kevin McCarthy RCPT	9:20 am - 10:15 am	How to Start A Support Grou Theresa Lamons, Columbus	
1:30 pm - 2:10 pm	Nuts and Bolts of Herbal and Natural Medicines		Support Group, Nancy Ivansek P.AC, M.A.	
	Mandy Leonard Pharm.D.	10:15 am - 10:30 am	Mid-morning Break	
1:30 pm - 2:10 pm	Health Maintenance and Prevention Activities	10:15 am - 11:00 am	Networking Talks Ann Coughlin RN, BS, MBA	

11:15 am - 12 pm

Celebration of Life

Rev. Earl Preston Phd

Repeat of 1:30 pm sessions

Dr. Aladesanmi

Cleveland Clinic Faculty

Oluranti Aladesanmi M.D., M.P.H.

Director of Patient Education Sarcoidosis Center of Excellence

Marie Budev D.O., M.P. H.

Pulmonary, Allergy and Critical Care

Jeffrey Chapman M.D.

Pulmonary, Allergy and Critical Care

Daniel Culver D.O.

Medical Director Sarcoidosis Clinic Sarcoidosis Center of Excellence

Mani Kavuru M.D.

Medical Director.

Sarcoidosis Center of Excellence

Jonelle McDonnell M.D.

Assistant Education Program Director Department of Dermatology

Victor Perez M.D.

Associate Staff

Cornea & Uveitis Service

Laboratory of Ocular Immunology & Transplantation
Cole Eye Institute

Ann Coughlin R.N., M.B.A.

Wellness Coordinator

Euclid Community Service

Rosemary Lamm L.I.S.W.

Social Worker

Lung Transplant Center

Kevin McCarthy RCPT

Manager Pulmonary Function Laboratory

Mandy Leonard Pharm.D.

Drug Information Specialist

Scott Marlow R.R.T.

Pulmonary Rehabilitation Coordinator

Nancy Ivansek P.A.-C., M.A.

Clinical Coordinator.

Sarcoidosis Center of Excellence

Guest Faculty

Robert Baughman M.D.

Professor of Medicine

ILD and Sarcoidosis Clinic

University of Cincinnati Cincinnati, Ohio

Marc Judson M.D.

Professor of Medicine

Division of Pulmonary and Critical Care Medicine

Medical University of South Carolina

Charleston, South Carolina

Rev Earl Preston Phd

Pastor, Morning Star Baptist Church

Joanna Hardis L.I.S.W.

Therapist, Private Practice

Theresa Lamons

President and Founder

Columbus Sarcoidosis Support Group

Heather Olsen M.S.W., L.S.W.

Therapist, Private Practice

Serron Sowell N.D.E.I.T.A. Certified

Group Fitness Instructor Cleveland, Ohio

Sherri Williams M.D., M.H.S.

Assistant Professor

Case Western Reserve University Medical Director of Pulmonary Rehabiliation

MetroHealth Medical Center

Cleveland, Ohio

This day and a half program is aimed at educating Sarcoidosis patients, their families and support persons in the latest information on disease management, treatments and support mechanisms available for patients with Sarcoidosis.

Conference sessions and breakouts include an overview of organ involvement and treatment options, progress of lung transplant, update about sarcoidosis research and herbal and natural medicines, discussions regarding family issues and chronic diseases.

CONFERENCE REGISTRATION INFORMATION

Conference Fee

The fee includes attendance to both Saturday and Sunday conference sessions. There is not a special rate for one-day attendance.

Cancellation Policy

In case of cancellation, a full refund will be made if cancelled by **August 12**, **2005**. After **August 12**, **2005**, a **\$10** fee will be deducted from your refund. Written notification of your cancellation is required and must be received in the Cleveland Clinic Educational Foundation office by **5:00** pm on **August 12**, **2005**. No refunds will be issued for "no shows' and after **September 2**, **2005**.

A **\$20** fee will be charged for any returned check. All credit card transactions are processed in US dollars and are subject to the current exchange rate.

TRAVEL AND HOTEL ACCOMODATION INFORMATION

The conference will be held at the InterContinental Hotel. Guest rooms have been reserved at a special conference rate until **July 20, 2005**:

 The InterContinental Hotel
 The InterContinental Suites
 The Cleveland Clinic Guesthouse

 \$159.00
 \$99.00
 \$80.00

 9801 Carnegie Avenue
 8800 Euclid Avenue
 9601 Euclid Avenue

 Cleveland, OH
 Cleveland, OH 44106
 Cleveland, OH

 216-707-4100
 1-800-843-6664
 1-877-707-8999

 216-707-4300
 216-707-4300

Guest reservations must be made individually and directly with the selected hotel reservations no later than 5:00 PM (Eastern Time) on July 20, 2005. In order to receive the conference rate, please identify your participation with the Sarcoidosis Conference when making reservations. All reservations must be guaranteed by major credit card, check, or money order. Any reservations guaranteed by check or money order has 10 days to provide a guarantee. If the guarantee is not received within 10 days, the reservation will be cancelled. Cancellations for individual guest reservations must by made directly to the hotel by 4:00 PM (Eastern Time) on the day prior to the scheduled arrival date to avoid a no-show charge.

OPTIONAL ACTIVITIES

Guests who choose to participate in the following activities are responsible for securing their individual tickets and transportation.

GOODTIME III Cruise

Join conference attendees and their guests for a pre-conference kick-off, fellowship, and networking while cruising along the Cuyahoga River and Lake Erie. A discount coupon is available in the brochure.

Cleveland Indians versus Baltimore Orioles at Jacob's Field

August 19, 2005: First Pitch is 7:05 PM August 20, 2005: First Pitch is 7:05 PM

August 21, 2005: First Pitch is 1:05 PM

For tickets: 1-800-550-7556

Registration Form

Integrating Sarcoidosis Care:

Trends And Treatment In 2005

The Third Annual Sarcoidosis Awareness Conference August 20-21, 2005 InterContinental Hotel, Cleveland, Ohio

Please print or type. This address will be used to mail your registration confirmation.							
Name							
		Country					
Daytime Phone							
		ning Phone					

Please call (216) 445-0574 with any

- other dietary needs or if you have a disability that may require special arrangements
- questions regarding the program

REGISTRATION FEES

\$40.00 for Saturday and/or Sunday

PAYMENT TYPE

Valid form of payment must accompany registration.

Check payable to:

The Cleveland Clinic Educational Foundation (see "mail to" instructions below)

□ VISA	$\square \mathbf{MasterCard}$	$\ \square \ \textbf{American Express}$	□ Disco	ver
Expiration	Date			020333
Print Card	lholder's Name			Office Use Only Fee
Signature				Date
Total Amo	ount To Be Charge	ed: \$		CXL

Mail registration form and fee to:

The Cleveland Clinic Educational Foundation PO Box 931653, Cleveland, OH 44193-1082 Or Fax form to: **216-297-7305**