

INTERNATIONAL CHILDREN'S ANOPHTHALMIA NETWORK

**ican 12th International
Conference July 15-17, 2022
Philadelphia, PA**

FROM THE PRESIDENT

Dear ican Families and Friends,

The Planning Committee of the ican Conference invites you to the 2022 International Children's Anophthalmia Network conference in Philadelphia, PA. As you read through this registration packet, know that the Planning Committee is working hard on your behalf to make this an informative and rewarding conference. You will hear excellent speakers and attend workshops in which participants share experiences and learn not only from the experts leading the sessions, but also from one another.

If you are unable to participate, but would like to help out in other ways, or if you know of anyone who may be willing to donate to this worthy cause, please email us at ican@anophthalmia.org. We will email or mail all necessary forms to you.

Ryan McGrady
President, ican



ican 12TH INTERNATIONAL CONFERENCE AT-A-GLANCE

The conference will be held at the Notary Hotel in Philadelphia, a world renowned Hotel and Conference site owned by Marriott Hotels. The ICAN clinic on Friday, July 15 will also be held at the Children's Hospital of Philadelphia and hosted by professionals from Children's Hospital of Philadelphia, Legrand Associates, and select independent professionals. Please note that separate registration for the clinic is required (documents are below).

Child care will be provided by a team who is experienced working with children who are blind or visually impaired (additional details below). Accommodations at a special ican Conference Rate of \$169/night at the Notary Hotel.

FRIDAY, July 15

9:00 am–4:00 pm	A/M Clinic	Children's Hospital of Philadelphia
6:00 pm–9:00 pm	Coffee and Dessert Social	The Notary Hotel Philadelphia

SATURDAY, July 16

8:00 am–8:45 am	Childcare Drop Off	The Notary Hotel Philadelphia
9:00 am–4:00 pm	Conference Sessions	The Notary Hotel Philadelphia
6:00 pm–10:00 pm	Banquet	The Notary Hotel Philadelphia

SUNDAY, July 17

9:00am–11:00 pm	Brunch	The Notary Hotel Philadelphia
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CONFERENCE REGISTRATION

Registration will be open through 6/15/22 (it is necessary to close registration 30 days prior to the event to provide final numbers for Childcare and Meals). The registration fee includes the Friday night social, breakfast, lunch, dinner and snacks on Saturday and brunch on Sunday, the facility for our sessions, printed materials, and speaker costs.

REGISTRATION FEES

Participant	BEFORE 5/1/2022	5/2/19-6/15/22
Adult(s)	\$150.00	\$200.00
Child(ren)	\$100.00	\$100.00
MD	\$175.00	\$225.00
Other Professional	\$150.00	\$200.00

REGISTRATION REFUND POLICY

Refund requests must be received in writing and postmarked no later than June 15, 2022. A \$50 service fee will be charged for cancellations made under these terms.

Financial Support – if financial support is required, please contact Ryan McGrady & Erin Rosenberg for more details. Financial support will be limited and is dependent on generous donations from our ican partners.

Emails - rpmcgrady@yahoo.com & erinkkrosenberg@gmail.com

TRAVEL INFORMATION - UPDATE

AIR TRANSPORTATION

<https://www.phl.org/>

ACCOMMODATIONS

The Notary Hotel, Autograph Collection
21 North Juniper Street, Philadelphia USA Pennsylvania 19107
Tel: [+1 215-496-3200](tel:+12154963200)

Discover a compelling blend of historic architecture and modern luxury at The Notary Hotel, Autograph Collection. Listed on the National Register of Historic Places, our landmark hotel in downtown Philadelphia showcases an inspired 1920s décor combined with all of today's modern amenities. Unpack in recently-renovated accommodations with complimentary high-speed Wi-Fi, luxurious beds, pristine marble bathrooms and expansive work stations. Satisfy your cravings with Spanish tapas and sangria at our signature restaurant, fuel up with a latte at our onsite coffee house or stay fit in our modern gym. Easily explore Philadelphia from our hotel's prime Center City location near the Liberty Bell, City Hall, Kimmel Center, Reading Terminal Market and the Convention Center. If visiting for event planning reasons, you'll appreciate our sophisticated venues with 10,500 square feet of versatile space. We provide everything you need for an unforgettable stay in Philadelphia at The Notary Hotel, Autograph Collection.

Link to ICAN Rate

<https://book.passkey.com/e/50229989>

FREE CHILD CARE

Childcare will be on site at the Notary Hotel and will be provided by Corporate Kids Events (a company specializing in event childcare, including children with special needs). This will allow parents to come and go easily from the sessions to check in with their children. There will also be some fun activities for the children during this time that will be provided by Corporate Kids Events.

SPONSORS NEEDED FOR THE CONFERENCE SCHOLARSHIP FUND

Some of ican members wish to attend the educational conference but due to financial constraints may not be able to do so. We are looking for people to donate to the Conference Scholarship Fund to help those who cannot afford to come. If you are interested in fully or partially sponsoring those in need, send a check to the address below. Your donation is tax-deductible and a great way to help others touched by A/M.

ican
Ryan McGrady
4527 Deep Creek Way
Doylestown PA 18902



ican 12th INTERNATIONAL CONFERENCE | JULY 15-17, 2022

COMPLETE CONFERENCE SCHEDULE

Times, Location and speakers are tentative and subject to change

FRIDAY, JULY 15

9:00 am—4:00 pm **A/M CLINIC: Children's Hospital of Philadelphia – REGISTRATION REQUIRED – Clinic Appointments to be provided after registration (Scheduled created in June)**

Free medical consultations with Ocularists, an oculoplastic surgeon, ophthalmologist, geneticists and genetic counselors

6:00 pm—10:00 pm

Coffee and Dessert Social

Notary Hotel Philadelphia – Grand Ballroom & Foyer

SATURDAY, July 20

CONFERENCE: Notary Hotel – Grand Ballroom & Foyer

8:00 am—8:45 am

Registration, Breakfast and Child Drop-off

Notary Hotel – Logan/Rittenhouse/Washington Room

9:00 am — 9:15 am

Introductory Remarks – Ryan McGrady and Adele Schneider

9:15- am — 10:00 am

Genetics Discussion – Dr. Alanna Strong

10:00 am —10:30 am

Ophthalmology – Dr. Gil Binenbaum (CHOP)

10:30am – 11:00am

Ocular plastics – Dr. Karen Revere (CHOP)

11:00 am —12:00 pm

Education Discussion – Donna McNear

12:00 pm — 1:00 pm

Lunch – Grand Ballroom

1:00 pm — 1:45 pm

Ocularist – Joe Legrand

1:45 pm – 2:45 pm

Beth Ramella – Overbrook School for the Blind

2:45 pm – 3:45 pm

Panel Discussion/Breakout Sessions (Lead by Erin Rosenberg)

3:45 pm – 4:00 pm

Wrap Up – Ryan McGrady

4:00 pm

Childcare Pickup –Notary Hotel– Logan/Rittenhouse/Washington

6:00pm – 10:00pm

Dinner and Reception – Notary Hotel – Grand Ballroom

SUNDAY, July 21

BREAKFAST: Notary Hotel – Grand Ballroom

9:00 AM – 11:00 AM



FREE A/M CLINIC – Registration Required

FRIDAY, JULY 15

ICAN will host a Free Anophthalmia/Microphthalmia Clinic on Friday, July 15 with participating physicians from CHOP. Participants will have the opportunity to consult with pediatric ophthalmologists, Ocularists, an oculoplastic surgeon, geneticists and genetic counselors. If you would like to have your child evaluated by any of the specialists, please answer the following questions and mail this form back with your registration form. We invite anyone interested to request an evaluation. We will contact you to let you know if your child is eligible for these consultations.

Name of Child _____ Date of Birth _____

Parent's Name _____ Phone # _____

Address _____

Unilateral or Bilateral (circle one) Anophthalmia or Microphthalmia (circle one)

Other medical conditions or developmental delay? Yes _____ No _____

If yes, please describe _____

Nearest Medical Center _____

Distance from your home _____

Name of Medical specialists who care for your child:

Ocularist _____

Ophthalmologist _____

Oculoplastic Surgeon _____

Genetics _____





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REGISTRATION FORM

Name of Attendees _____

Address _____

City

State

Zip Code

E-mail _____

Telephone (day) _____ Cell _____

INFORMATION ABOUT THE PERSON WITH A/M IN YOUR LIFE

Name _____ Age _____

Name _____ Age _____

SPECIAL REQUESTS

Any hotel-related special requests (i.e. cribs, refrigerators, or roll away cots) should be taken up with the hotel staff.

Would you like to be included in our Conference Directory of Attendees? Yes _____ No _____

CONFERENCE REGISTRATION FEES AND PAYMENT METHODS

Conference Attendee	# of people	Fee BEFORE 5/1/19	Fee AFTER 5/1/19	TOTAL
Adult(s)	_____	\$150.00	\$200.00	_____
Child(ren)	_____	\$100.00	\$100.00	_____
MD	_____	\$175.00	\$225.00	_____
Other Professional	_____	\$150.00	\$200.00	_____
GRAND TOTAL				_____

TO REGISTER

Please mail your completed form with **check payable to ican** to:

Ryan McGrady
4527 Deep Creek Way
Doylestown, PA 18902

Each family is responsible for their hotel room or lodging; it is not a part of registration. The registration fee includes the Friday night mixer, breakfast, lunch, dinner and snacks on Saturday and brunch on Sunday, the facility for our sessions, and speaker costs

CHILD CARE REGISTRATION (FREE)

_____ Yes, I will need child-care.

Please reserve for # _____ children.

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

INFORMATION ABOUT THE PERSON WITH A/M

Name _____ Birth date ____/____/____

Name of Parent/Guardian _____

Child's primary means of communication?

Speech ____ Sign Language ____ Gestures ____ Other _____

Does your child speak English? Yes ____ No ____

Does your child understand English? Yes ____ No ____

Additional information you want us to know:

PLEASE NOTE THE FOLLOWING

- Please remember to provide diapers, a change of clothes and any other essential items or equipment for the childcare room. All items (strollers, infant seats, clothing, diaper bags, etc.) should be clearly labeled with child's full name.
- Games and activities will be provided.
- Childcare participants must wear a name tag. Name tags will be provided in your registration packet.
- You must provide food if your child has any dietary restrictions or formula for infants.

I understand and agree that neither I nor any cosponsoring organization, nor their respective chapters, officers, directors, employees, agents, members or volunteers shall assume or have any responsibility or liability for expenses or medical treatment or for compensation for injury I or my child may suffer during or resulting from our participation in this program.

Parent Signature _____ Date _____