

OUTLINE FOR ONLINE PRESENTER UPLOAD FORM

- **Conference dates: October 24-26, 2018 in Portland, OR**
- **Conference location: Crowne Plaza Portland - Convention Center**

Title (70 character limit)

Description: What is the session about? What are the highlights? Why would someone want to attend (benefit to participant)? (1,000 character limit)

Objectives: List 3-5 measurable learning objectives; Include at least one physician-oriented objective for your presentation that supports application in practice. (30 word limit for each objective)

Given that this audience has significant experience caring for children with complex medical needs we are seeking proposals that reflect this level of knowledge. Proposals that present only basic-level information will not be selected.

Phrase learning objectives with what participants will be able to do as a result of attending your session. Focus on acquisition or reinforcement of knowledge or skills. Use specific performance verbs and the desired outcomes. Examples of performance verbs include: define, recognize, describe, design, differentiate and demonstrate. Avoid words not measurable, such as know, think, appreciate, learn, comprehend, remember, perceive, understand, become familiar with or grasp significance.

Outline

How will you present the content of the course, in what order, and what will be included?

References

Where did you find the information you are basing the session on? List title, author, certain research, etc.

Have you presented on this topic before? *(please check one)*

Yes

No

If yes, where?

Session Length (includes 10 minutes for Q&A)

60 minutes

90 minutes

Customizable to 60 or 90 minutes

Presenter

Name

Title

Education/Degree

Organization/Facility

Organization

Address

City / State / Zip

Phone

Cell

Email

Brief bio of Presenter

Feature education, years of experience, current position and responsibilities, specialties etc.
(one to two paragraphs)

Presentation experience level *(Check all that apply)*

Administrator/Senior Management

Faculty

Mid Level Professional

New Professional

Professional Expert on Topic

CV/Resume upload**Disclosure of Relevant Financial Relationships****Co-Presenter**

Name

Title

Education/Degree

Organization/Facility

Organization

Address

City / State / Zip

Phone

Email

Cell

Brief bio of Co-Presenter

Feature education, years of experience, current position and responsibilities, specialties etc.
(one to two paragraphs)

Co-Presenter Presentation experience level *(Check all that apply)*

Administrator/Senior Management

Faculty

Mid Level Professional

New Professional

Professional Expert on Topic

CV/Resume upload**Disclosure of Relevant Financial Relationships**