CME Office
2019 Addiction Medicine Conference
September 11–15, 2019
A.R. & Marylouise Tandy Medical Academic Building
Tulsa, OK
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

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:00 – 9:00 a.m.</td>
<td>Breakfast</td>
</tr>
<tr>
<td>10:00 – 10:15 a.m.</td>
<td>Morning Break</td>
</tr>
<tr>
<td>12:15 – 1:15 p.m.</td>
<td>Lunch</td>
</tr>
<tr>
<td>3:15 – 3:30 p.m.</td>
<td>Afternoon Break</td>
</tr>
</tbody>
</table>

## Thursday, September 12

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:30 – 9:30 a.m.</td>
<td>Breakfast</td>
</tr>
<tr>
<td>12:00 – 1:00 p.m.</td>
<td>Lunch</td>
</tr>
</tbody>
</table>

## Friday, September 13

<table>
<thead>
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<td>7:00 – 9:00 a.m.</td>
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<td>3:15 – 3:30 p.m.</td>
<td>Afternoon Break</td>
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</tbody>
</table>

## Saturday, September 14

<table>
<thead>
<tr>
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<tr>
<td>7:00 – 9:00 a.m.</td>
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<td>3:15 – 3:30 p.m.</td>
<td>Afternoon Break</td>
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</table>

## Sunday, September 15

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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</thead>
<tbody>
<tr>
<td>7:00 – 9:00 a.m.</td>
<td>Breakfast</td>
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</table>
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

• The purpose of the program is educational and not promotional.

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

☐ Check #____________ in the amount of $____________  Please make checks payable to OSU-COM, Federal Tax ID #73-1383996.

Credit card:  ☐ Visa  ☐ MasterCard  ☐ American Express  ☐ Discover

Amount: $_________  Card number: ________________________________  Exp. Date: _________  CVC:________