

A watercolor palette with various colors (blue, green, orange, yellow, brown) and a paintbrush with a wooden handle and dark bristles are visible in the background. The palette is slightly out of focus, while the brush is in the foreground.

The Art of Orthopaedic Practice in 2024 - Exhibit Information

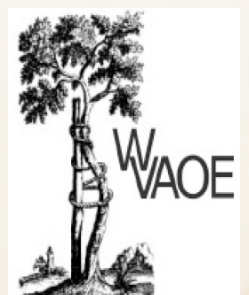
West Virginia Orthopaedic Society

Co-provided by the CAMC Health Education and Research Institute

WV Association of Orthopaedic Executives

April 19-20, 2024

Stonewall Resort, Roanoke, WV



Welcome

Dear Exhibitor,

You are invited to join the West Virginia Orthopaedic Society and the West Virginia Association of Orthopaedic Executives for our annual "Spring Break" Meeting. This year's meeting will take place on Friday and Saturday, April 19 and 20, at Stonewall Jackson Resort in Roanoke, West Virginia. The program is co-provided by the CAMC Health Education and Research Institute. The meeting theme is "The Art of Orthopaedic Practice in 2024."

The fee for Friday activities and Saturday exhibiting is \$750.

Online conference registration is available at www.wvos.org, and payment can be made through PayPal. Hotel reservations must be made by **March 19** by calling 888.278.8150 or 304.269.7400 and asking for the WVOS room block. You can also make your room reservation [online](#). Rates are \$249 per person single/\$179 per person double on Friday night (plus taxes and resort fee) and includes your sleeping room, meals, onsite parking, in-park shuttle service, high speed internet access and Wi-Fi, use of fitness equipment, indoor/outdoor pool, sauna, steam room, paddle boats, canoes, kayaks, excursion boat, mountain bikes, basic fishing equipment and many other amenities. Please **call 888-278-8150 by March 19** and mention you are with WVOS to get our special rate. We have negotiated special rates of \$151 per night for Thursday night and Saturday night.

This year, we are including a variety of social events for everyone, so bring your family and friends to enjoy the fun. We will have a golf scramble tournament Friday morning, April 19. The tournament is open to the **first 24 players**, and foursomes will be assigned by the WVOS tournament director. If you're interested in playing, please contact [Karim Boukhemis](#) by **March 19**. Golf rates are \$65 per person. Lunch is available in Stillwaters Restaurant. After dinner, join us when the physicians celebrate "Fright Night Friday" with cases that created unexpected opportunities to think. We're featuring a bourbon tasting (including one from the Hatfield Distillery).

Friday's activities will focus on leisure and family and you are welcome to play golf with our physicians and participate in other activities. Saturday's sessions will focus on clinical topics for both physicians and practice managers relating to "The Art of Orthopaedic Practice in 2024." You are welcome to sit in on either set of sessions in the morning and the afternoon orthopaedic topics.

We will have opportunities for you to meet with physicians and practice managers during leisure and social activities Friday night and during our meeting breaks on Saturday. Continental breakfast, morning and afternoon breaks will take place in the exhibit hall area Saturday. You may set up after 4:00 p.m. Friday and will need to be set up by 7:30 a.m. Saturday and you can close your booth after 4:00 p.m. Saturday.

You are welcome to join us for lunch Saturday and sit in on sessions for physicians or practice managers. We will have an outstanding array of speakers and are confident these practice managers and physicians will enhance our programs.



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Shafic Sraj, MD
Vice President
Ryan Murphy, MD
Secretary-Treasurer
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Immediate Past President
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Executive Director
Diane Slaughter, APR, Fellow PRSA
304.984.0308

We are asking you to participate in the program as an exhibitor, as a sponsor or by providing an educational grant for our resident presentations. Whether you choose to exhibit, sponsor or provide a grant, we encourage you to take advantage of the opportunity to meet personally with physician and practice manager attendees during the meeting. Our attendees will have opportunities to spend quality time with you throughout the weekend.

I have enclosed an exhibitor application, commercial support agreement and Standards for Commercial Support of Continuing Medical Education. The information also can be found at <http://www.wvos.org>. The conference brochure will be sent to you electronically. Payment should be made prior to the meeting.

Bring a little extra cash and take the opportunity to buy \$20 raffle tickets to support the Josh Tuck Memorial Scholarship through the WV Association of Orthopaedic Executives.

We look forward to hearing from you by March 19, 2024, and thank you in advance for your support of the West Virginia Orthopaedic Society and the West Virginia Association of Orthopaedic Executives. Please feel free to contact me at 304.984.0308 if you have any questions.

Sincerely,
Diane Slaughter, APR, Fellow PRSA
Executive Director

Friday, April 19, 2024

A day for fun and business!

According to the December 24, 2021, issue of [OrthoEvidence](#), 41,692 physicians in the United States who logged golf rounds in the US Golf Association database as of August 2018 were included in an observational study assessing differences in golf habits and performance across specialties. The results of this observational study suggest that amongst golfing physicians in America, the majority of whom are men, orthopaedic surgeons are amongst the most frequent and best golfers around.

This study was limited by the self-reported golf performance, which could be subject to bias due to an overstating of their golf ability. Future research is required to understand whether golf performance is associated with superior patient outcomes and physician wellbeing.

Prove them right and be among the first 24 physicians, residents, practice administrators and exhibitors to [register for our golf event!](#)

8:30 a.m. **Scramble golf tournament**

4:00 p.m. **Exhibit Hall Opens**

Lower Foyer

4:00 p.m. **Meeting of the WVOS Board of Directors**

Greenbrier Room

6:00 p.m. **Dinner in Stillwaters Restaurant**

7:30 p.m. **Fright Night Friday:
Cases that made you think
(cash bar featuring bourbon tasting)**
Pecan Room/Maple Patio
John Taras, MD, Moderator



Saturday, April 20, 2024

The Art of Orthopaedic Practice in 2024

WVOS Program Committee: John Taras, MD, Shafic Sraj, MD and Matt Bullock, DO

7:30 a.m.	Registration/Breakfast with Exhibitors	Lower Foyer
8:00 a.m.	Welcome to WVOS 2024 Shafic Sraj, MD, WVOS President	Pecan Room
8:05 a.m.	Morning Sessions John Taras, MD, Moderator	
8:10 a.m.	Hip preservation and periacetabular osteotomy Andrew Parsons, MD, WVU Orthopaedics, Morgantown	
8:35 a.m.	Augmented rotator cuff repair Alexander Bitzer, MD, WVU Orthopaedics, Martinsburg	
9:00 a.m.	New meds affecting Ortho patients Weight reduction: Skyler Smith, MD, Marshall University Rheumatology: William Wallace, MD, Marshall University	
9:30 a.m.	AI in orthopaedics Grant Mueller, Gale AI	
10:00 a.m.	Refreshment Break/Visit Exhibitors	Lower Foyer
10:30 a.m.	Dr. Frank Shuler Memorial Resident Presentations John Taras, MD, CME Conference Chair, Moderator , MD, Marshall Orthopaedics , MD, WVU Orthopaedics , MD, Marshall Orthopaedics , MD, WVU Orthopaedics , MD, Marshall Orthopaedics , MD, WVU Orthopaedics	
12:00 p.m.	Lunch	Stillwaters
1:00 p.m.	Introduction of Dr. Matthew Dietz Shafic Sraj, MD, West Virginia University	Pecan Room
1:05 p.m.	Starting with Why, but Stuck on How: Opportunities and Challenges in Orthopaedics Matthew Dietz, MD, WVU Orthopaedics	
1:30 p.m.	Orthopaedic Education Panel with Q&A Matthew Dietz, MD, WVU Orthopaedics Ali Oliashirazi, MD, Marshall Orthopaedics	
2:00 p.m.	Medicare Coding and Billing Bootcamp Dan Grant, MD, Moderator Felix Cheung, MD, Marshall Orthopaedics Lanie Christman, Marshall Orthopaedics	
2:30 p.m.	Refreshment Break and Visit Exhibitors	Lower Foyer
2:45 p.m.	Security in the office and the hospital: Keeping doctors, staff and patients safe Joe Corcoglioni, Stonewall Resort Bill Talbert, Stonewall Resort	Pecan Room
3:30 p.m.	Presentation of OREF Plaque Shafic Sraj, MD, West Virginia Orthopaedic Society Shafic Sraj, MD, WVOS President	
3:40 p.m.	Dr. Frank Shuler Memorial Award Presentations Ali Oliashirazi, MD, Marshall Orthopaedics Shafic Sraj, MD, President, WVOS	
4:00 p.m.	Legislative update Joe Prud'homme, MD, WVU Orthopaedics Richard Topping, MD, Davis Hospital	
4:30 p.m.	Annual Business Meeting	
5:00 p.m.	Meeting adjourns Shafic Sraj, MD, WVOS President	



Objectives:

The participant will be able to:

- 1)
- 2)
- 3)
- 4)
- 5)
- 6)
- 7)
- 8)
- 9)
- 10)

Disclosures:

It is the policy of the CAMC Health Education and Research Institute that any faculty (speaker) who makes a presentation at a program designated for AMA Physician's Recognition Award (PRA) Category I or II must disclose any financial interest or other relationship; (i.e. spouses/partners, grants, research support, consultant, honoraria) that faculty member has with the manufacturer(s) of any commercial product(s) that may be disclosed in the educational presentation. Program Planning Committee Members must also disclose any financial interest or relationship with commercial industry that may influence their participation in this conference. The following disclosures have been shared:

- Faculty relationships with industry, if any, will be made available on-site and disclosure made from the podium to the participants. All presentations are HIPAA compliant.

Accreditation:

In support of improving patient care, this activity has been planned and implemented by The West Virginia Orthopaedic Society (WVOS) and CAMC Health Education and Research Institute. CAMC Health Education and Research Institute is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team. Attendees are responsible for an online CE processing fee to receive CE credit. The processing fee is separate from any registration fees. On the day of the program, attendees will receive a unique log-in, URL link, and instructions. The CE credit processing fee per attendee is \$20 and is paid by participants through CAMC's online CE registration system.



Credit Hour Statement:

The CAMC Institute designates this live activity for a maximum of 8 hours for AMA PRA Category I Credit(s)[™] for Saturday, April 20th. Physicians should only claim credit commensurate with the extent of their participation in the activity.



The Art of Orthopaedic Practice in 2024

WVAOE Program Chair: Chad Fisher, JD

7:30 a.m.	Registration/Breakfast with Exhibitors	Lower Foyer
8:00 a.m.	Welcome to WVAOE 2024 Chad Fisher, JD, WVAOE President	Greenbrier Room
8:05 a.m.	Using AI for your practice and your patients Tina Cobb, Associated Systems Professionals, South Charleston	
9:30 a.m.	The Wheels of Change: Integrating organizational culture Chuck Stump, The Performance Group, Hurricane	
10:30 a.m.	Refreshment Break/Visit Exhibitors	Lower Foyer
11:00 a.m.	Patient termination: Options and procedures TBD	Greenbrier Room
12:00 p.m.	Lunch	Stillwaters
1:00 p.m.	Introduction of Dr. Matthew Dietz Shafic Sraj, MD, West Virginia University	Pecan Room
1:05 p.m.	Starting with Why, but Stuck on How: Opportunities and Challenges in Orthopaedics Matthew Dietz, MD, WVU Orthopaedics	
1:30 p.m.	Orthopaedic Education Panel with Q&A Matthew Dietz, MD, WVU Orthopaedics Ali Oliashirazi, MD, Marshall Orthopaedics	
2:00 p.m.	Medicare Coding and Billing Bootcamp Dan Grant, MD, Moderator Felix Cheung, MD, Marshall Orthopaedics Lanie Christman, Marshall Orthopaedics	
2:30 p.m.	Refreshment Break and Visit Exhibitors	Lower Foyer
2:45 p.m.	Security in the office and the hospital: Keeping doctors, staff and patients safe Joe Corcoglioniti, Stonewall Resort Bill Talbert, Stonewall Resort	Pecan Room
3:30 p.m.	Presentation of OREF Plaque Shafic Sraj, MD, West Virginia Orthopaedic Society Shafic Sraj, MD, WVOS President	
3:40 p.m.	Dr. Frank Shuler Memorial Award Presentations Ali Oliashirazi, MD, Marshall Orthopaedics Shafic Sraj, MD, President, WVOS	
4:00 p.m.	Legislative update Joe Prud'homme, MD, WVU Orthopaedics Richard Topping, MD, Davis Hospital	
4:30 p.m.	Annual Business Meeting Chad Fisher, JD, WVAOE President	Greenbrier Room
5:00 p.m.	Meeting adjourns	



Application for Exhibit Space

West Virginia Orthopaedic Society and
West Virginia Association of Orthopaedic Executives
Stonewall Resort, Roanoke, WV

April 19-20, 2024

Due March 19, 2024

Name of company: _____

Name, title and address of person responsible for agreement:

Signature: _____ Date: _____

Cell number: _____ Email: _____

Name and type of products to be exhibited:

Representatives scheduled to work booth:

Name

Email

Cell Phone

FEES and TERMS:

_____ Exhibit space	\$ 750/booth
_____ Breaks (3) sponsorship	\$ 500/each
_____ Lunch sponsorship	\$2000
_____ Speaker sponsorship	\$2000
_____ Educational grant	\$1500
_____ Resident prizes	\$1500
_____ Friday reception	\$1000

Check made payable to the West Virginia Orthopaedic Society is to be sent with completed application to WVOS, PO Box 13604, Charleston, WV 25360, or paid online at www.wvos.org.

Exhibit space consists of one 6' skirted table and two chairs.

Tax identification number: 55-0667004.

Exhibit booth refunds will be given if written request is received by March 19, 2024. Refunds, less the \$50 processing fee, will be made after May 1, 2024, only if the space is resold. No refunds will be made for requests received after March 19, 2024.

Please contact Executive Director Diane Slaughter, APR, Fellow PRSA with any questions: by phone, 304.984.0308; by e-mail, info@wvos.org.

Send check and completed application to:

WV Orthopaedic Society, PO Box 13604, Charleston, WV 25360-0604

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. West Virginia Orthopaedic Society	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) <u>5</u> Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	
<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.	
<input type="checkbox"/> Other (see instructions) ▶ Nonprofit Corporation	
5 Address (number, street, and apt. or suite no.) See instructions. PO Box 13604	Requester's name and address (optional)
6 City, state, and ZIP code Charleston, WV 25360	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
or									
Employer identification number									
5	5	-	0	6	6	7	0	0	4

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶ Dane Slaughter	Date ▶	2 January, 2024
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)
 - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

WVOS Letter of Agreement

TERMS, CONDITIONS, AND PURPOSES OF AN EDUCATIONAL GRANT

_____ agrees to support the WV ORTHOPAEDIC SOCIETY through an educational grant for the 2024 Spring Break Meeting taking place Friday thru Saturday, April 19-20, 2024.

Commercial Supporter

(Company name/branch): _____

Address: _____

City, State, Zip: _____

Telephone (____) - _____ Fax (____) - _____

Email: _____

Contact Person: _____

The above company wishes to provide support for the named continuing medical education activity by means of (indicate which option):

1. Unrestricted educational grant for support of the CME activity in the amount of \$ _____
2. Restricted grant to reimburse expenses for:
 - A. _____ \$1500 Resident(s) presentation prizes
 - 1) _____
 - 2) _____
 - To Include: All Expenses _____ Travel Only _____
Honorarium Amount (to be determined by Course Director) _____
 - B. Support for catering functions (specify) _____
In the amount of \$ _____
 - C. Other (e.g., equipment loan, brochure distribution, etc.)
In the amount of \$ _____

SIGNATURES

We have read and agree to the attached West Virginia Orthopaedic Society "Standards for Commercial Support of Continuing Medical Education" and to the terms stated above:

Company Representative: _____

Date: _____

Activity Director: _____

Date: _____

Program Director for CME: _____

Date: _____

Please return completed agreement to:

West Virginia Orthopaedic Society

Post Office Box 13604

Charleston, WV 25360

Conditions of agreement on next page



President

Shafic Sraj, MD

Vice President

Ryan Murphy, MD

Secretary-Treasurer

Karim Boukhemis, MD

Immediate Past President

Manny Molina, MD

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Alex Bitzer, MD

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Sandy Brown

Immediate Past President

Antoinette Summers

Director

Juanita Dempsey

Executive Director

Diane Slaughter, APR, Fellow PRSA
304.984.0308

CONDITIONS

1. **Statement of Purpose:** Program is for scientific and educational purposes only and will not promote a company's products, directly or indirectly.
2. **Control of Content & Selection of Presenters & Moderators:** WV ORTHOPAEDIC SOCIETY is ultimately responsible for control of content and selection of presenters and moderators. Company, or its agents, will respond only to WV ORTHOPAEDIC SOCIETY initiated requests for suggestions of presenters or sources of possible presenters. Company will suggest more than one name (if possible); will provide speaker qualifications; will disclose financial or other relationships between company and speaker; and will provide this information herein. WV ORTHOPAEDIC SOCIETY will seek suggestions from other sources, and will make selection of presenter(s) based on balance and independence.
3. **Disclosure of Financial Relationship:** WV ORTHOPAEDIC SOCIETY will ensure disclosure to the audience of (a) company funding, and (b) any significant relationship between the sponsor and the company (e.g., grant recipient) or between individual speakers or moderators and the company.
4. **Content Involvement:** There will be no "scripting," emphasis or influence on content by the company or its agents.
5. **Ancillary Promotional Activities:** No promotional activities or advertisements will be permitted in the same room as the educational activity.
6. **Objectivity & Balance:** WV ORTHOPAEDIC SOCIETY will make every effort to ensure that data regarding the company's products (or competing products) are objectively selected and presented, including balanced discussion of prevailing information on the product(s) and/or alternative treatments.
7. **Limitations of Data:** WV ORTHOPAEDIC SOCIETY will ensure, to the extent possible, disclosure of limitations of data (e.g. ongoing research, interim analysis, preliminary data or unsupported opinion.)
8. **Discussion of Unproved Uses:** WV ORTHOPAEDIC SOCIETY will require that presenters disclose when a product is not approved in the United States for the use under discussion.
9. **Opportunities for Debate:** WV ORTHOPAEDIC SOCIETY will ensure opportunities for questioning or scientific debate.
10. **Independence of Sponsor in the Use of Contributed Funds:**
 - A. Funds should be in the form of an educational grant made payable to **The WEST VIRGINIA ORTHOPAEDIC SOCIETY** (Tax ID# 55-0667004) and mailed to the WV ORTHOPAEDIC SOCIETY, PO Box 13604, Charleston, West Virginia 25360 or paid online at www.wvos.org. All funds should be submitted to WVOS within 30 days prior to program date.
 - B. All other support associated with this CME activity (e.g., distributing brochures, preparing slides) must be given with the full knowledge and prior approval of the WV ORTHOPAEDIC SOCIETY Office of CME.
 - C. No other funds from the commercial company will be paid to the program director, faculty, or others involved with the CME activity (e.g. additional honoraria, extra social events, etc.).
 - D. The terms, conditions and purposes of the educational grant will be documented in this letter of agreement.

AGREEMENTS

The Commercial Supporter agrees to:

1. Abide by all requirements of the CAMC Health Education and Research Institute Standards for Commercial Support of Continuing Medical Education, and the provisions of the AMA's Code of Medical Ethics. Copies available from the WV ORTHOPAEDIC SOCIETY.

Commercial Company Authorized Representative:

Signature _____ Date _____

WEST VIRGINIA ORTHOPAEDIC SOCIETY agrees to:

1. Abide by the CAMC Health Education and Research Institute Standards for Commercial Support of Continuing Medical Education;
2. Publicly acknowledge educational support from the commercial company; and
3. Upon request, furnish the commercial supporter a report concerning the expenditure of the funds provided.

WV ORTHOPAEDIC SOCIETY Authorized Representative:

Signature _____ Date _____



PO Box 13604
Charleston, WV 25360



2024 Spring Break Meeting
April 19-20, 2024
Stonewall Jackson Resort
Roanoke, WV