



11th Annual MacHAND Day of Evaluation and Management of the Upper Extremity

WEDNESDAY, OCTOBER 24th, 2018

Royal Botanical Gardens, 680 Plains Road West, Burlington, ON, Canada

The **McMaster University Hand, Arm, Nerve (MacHAND) Group** is an interdisciplinary team promoting excellence in education, clinical service, and research for hand and upper limb injuries, diseases, and disorders.

THE LEARNING OBJECTIVES OF MACHAND DAY ARE

By attending this activity, participants will be able to:

- » Describe the etiology and treatments for painful wrist conditions.
- » Recognize the criteria for the referral of wrist conditions to a specialist.
- » Identify the appropriate investigations (e.g., ultrasound) to diagnose wrist conditions.
- » Identify evidence-based, multidisciplinary approaches for managing hand arthritis.
- » Acquire an understanding of the impact of arthritis on the daily activities of patients.

TARGET AUDIENCE

Chiropractors, Emergency Medicine Physicians, Family Physicians, Occupational Therapists, Physician Assistants, Physiatrists, Physiotherapists, Radiologists, Sports Medicine Physicians, Residents, Students, and all other Health Professions interested in upper extremity disorders.

CALL FOR POSTER PRESENTATIONS ON UPPER EXTREMITY RESEARCH

Please submit your poster abstract (word limit: 350) to Margaret Lomotan via e-mail: lomotam@mcmaster.ca by October 1, 2018

FOR MORE INFORMATION

Shawn Locke, CHSE Coordinator

McMaster University, Continuing Health Sciences Education

P: 905-525-9140 ext. 21098 **F:** 905-572-7099

E: lockes1@mcmaster.ca

FOR REGISTRATION INFORMATION

E: cmereg@mcmaster.ca

P: 905 525-9140 ext. 22671

REGISTER ONLINE

www.fhs.mcmaster.ca/conted/machand.html



AGENDA

*Activity subject to change

7:30-8:00	REGISTRATION AND BREAKFAST	12:00-13:00	LUNCH
8:00-8:10	INTRODUCTIONS & WELCOME	13:00-14:15	Panel: Hand Arthritis – The Impact on Patients’ Lives and Treatment Options Moderator: Janice Harvey, BSc, MD, CCFP, FCFP, Dip. Sport Med. Assistant Clinical Professor, Family Medicine McMaster University Interim Director of CPD, College of Family Physicians of Canada
8:10-8:30	Treatment Approaches for Complex Regional Pain Syndrome and Other Painful Wrist Conditions Harsha Shanthanna, MD, MSc, PhD (c) Associate Professor, Anesthesia, McMaster University Staff Anesthesiologist, St Joseph’s Healthcare		Bashar Alolabi, MD, MSc, FRCS(C) Assistant Professor, Orthopaedic Surgery, McMaster University Staff Orthopaedic Surgeon, St. Joseph’s Healthcare Hamilton
8:30-8:35	Question & Answer		Anne Lyddiatt Patient Representative
8:35-9:15	Management of Tenosynovitis, Tendonitis and Ganglions of the Wrist Simran Basi, MD, FRCPC, CSCN Diplomate (EMG) Assistant Clinical Professor, Physical Medicine and Rehabilitation, McMaster University		Joy MacDermid, PT, PhD Professor, Rehabilitation Science, McMaster University
	Matthew McRae, MD, MSc, FRCSC Assistant Professor, Plastic Surgery, McMaster University Staff Plastic Surgeon, St. Joseph’s Healthcare Hamilton	14:20-15:20	Afternoon Break-out Session B (please select one)
9:15-9:25	Question & Answer		1) Wrist Proprioception (Targeted Audience: rehab therapists)
9:25-9:40	An Overview of Wrist Proprioception Rehab Michael Vallely, BA, BSCT Assistant Clinical Professor, Rehabilitation Science McMaster University Director, Upper Ottawa Physiotherapy		2) Clinical Exam of the Wrist (Targeted Audience: all healthcare providers)
9:40-9:45	Question & Answer		3) Basic Home Programs for Chronic Pain Risk, Low Risk and High Risk Fracture of the Wrist (Targeted Audience: all healthcare providers)
9:45-10:10	MORNING BREAK	15:20-15:35	AFTERNOON BREAK
10:10-10:30	Diagnostic Ultrasound of Common Wrist Pathologies Meg Chiavaras, MD, PhD, FACR, FRCPC Assistant Professor, Radiology, McMaster University Staff Radiologist, Hamilton Health Sciences	15:35-15:55	Iatrogenic peripheral nerve injuries in the upper extremity: prevention and management James Bain, MD, MSc, FRCSC Professor, Surgery, McMaster University Staff Plastic Surgeon, Hamilton Health Sciences
10:30-10:35	Question & Answer	15:55-16:00	Question and Answer
10:35-10:55	Medicinal Cannabis for Management of Chronic Non-Cancer Pain Allison Blain, MD, FRCPC Assistant Clinical Professor, Anesthesia, McMaster University Staff Anesthesiologist, Hamilton Health Sciences	16:00-16:20	Primary Care Referrals for Common Wrist Pathologies Carolyn Levis, MD, MSc, FRCSC Associate Professor, Plastic Surgery, McMaster University Service Chief for Plastic Surgery, St. Joseph’s Healthcare Hamilton
10:55-11:00	Question & Answer	16:20-16:25	Question & Answer
11:05-12:00	Morning Break-out Session A (please select one)	16:25-16:30	CONCLUDING REMARKS
	1) Wrist Proprioception (Targeted Audience: rehab therapists)		
	2) Clinical Exam of the Wrist (Targeted Audience: all healthcare providers)		
	3) Basic Home Programs for Chronic Pain Risk, Low Risk and High Risk Fracture of the Wrist (Targeted Audience: all healthcare providers)		

DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST

In keeping with accreditation guidelines, McMaster University, Continuing Health Sciences Education Program requires all speakers and planning committee members participating in this event to disclose any involvement with industry or other organizations that may potentially influence the presentation of the educational materials or program being offered. Disclosure must be done verbally and using a slide prior to the speaker’s presentation.

ACCREDITATION STATEMENTS

6.0

McMaster University, Continuing Health Sciences Education Program (CHSE) is fully accredited by the Committee on Accreditation of Continuing Medical Education (CACME) to provide CFPC Mainpro+ and RCPSC Maintenance of Certification (MOC) study credits for Continuing Medical Education.

This one-credit-per-hour Group Learning program meets the certification criteria of **The College of Family Physicians of Canada** and has been certified by the McMaster University Continuing Health Sciences Education Program for up to **6.0 Mainpro+ credits**.

This activity is an Accredited Group Learning Activity (Section 1) as defined by the Maintenance of Certification program of **The Royal College of Physicians and Surgeons of Canada** and approved by McMaster University, Continuing Health Sciences Education Program for up to **6.0 MOC Section 1 hours**.

Through an agreement between **The Royal College of Physicians and Surgeons of Canada and The American Medical Association**, physicians may convert Royal College MOC credits to AMA PRA Category 1 Credits™. Information on the process to convert Royal College MOC credit to AMA credit can be found at www.ama-assn.org/go/internationalcme.

*Each healthcare provider should claim only those hours of credit that he/she actually spent in the educational activity.

DIRECTIONS

The Royal Botanical Gardens Centre

is located at 680 Plains Road West, on the border of Burlington and Hamilton in Ontario, Canada.

From Toronto and East

- Queen Elizabeth Way to Highway 403 West (Hamilton).
- Exit at Waterdown Rd. Travel 800 metres south along Waterdown Rd. to Plains Rd. West.
- Turn right onto Plains Rd. West and travel 2 km.
- Turn left into the RBG parking lot.

From Kitchener-Waterloo and West including Detroit (U.S.A.)

- Highway 401 East to Highway 6 South.
- Follow Highway 6 South for about 25 km.
- Exit onto York Road, make a left and then a right on the new Plains Rd. and drive south crossing over the 403.
- Turn left at the lights to continue on Plains Rd. West for about 1 km, passing the glass building.
- Turn right into the RBG parking lot.

From the Niagara Region and Buffalo (U.S.A.)

- Queen Elizabeth Way to Highway 403 West (Hamilton).
- Exit at Waterdown Rd.
- Travel 800 metres south along Waterdown Road to Plains Rd. West.
- Turn right onto Plains Rd. West and travel 2 km.
- Turn right into the RBG parking lot.



PLANNING COMMITTEE

Pam Ball, BSc, OT(Reg) ON

McMaster University & Hamilton Health Sciences

Allison Blain, MD, FRCPC

McMaster University & Hamilton Health Sciences

Janice Harvey, BSc, MD, CCFP, FCFP, Dip. Sport Med. – Co-Chair

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Ryan Williams, MD, FRCP(C)

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CHSE Coordinator
Continuing Health Sciences Education,
McMaster University

ACTIVITY PACKAGE

As the registrant your activity package includes breakfast, nutritional breaks, and lunch. Your activity lanyard must be worn at all times throughout the day. If you have a guest accompanying you to the activity, their meals are at their own cost and will be billed directly.

LIABILITY

McMaster University, Continuing Health Sciences Education (CHSE) hereby assumes no liability for any claims, personal injury, or damage:

- To any individual attending this activity.
- That may result from the use of technologies, program, products and/or services at this activity.
- That may arise out of, or during this activity.

PHOTOGRAPHY

Photos will be taken at the activity. Your registration implies your permission for these photos to be used for promotional material. Individuals in photographs will not be identified.

CONFIRMATION OF REGISTRATION

A written acknowledgement of your registration will be sent prior to the activity. Receipts are emailed at the time of registration and an additional email will be sent after the activity, confirming your certificate of attendance is ready to download or print. Your registration is not complete unless a confirmation is received. If you have not received a confirmation within 7 days of registration, please contact the CHSE office.

CANCELLATION POLICY

McMaster University reserves the right to cancel a course due to insufficient registration or any circumstances that are beyond our control. Cancellations received before **October 10, 2018** will be refunded less a 25% administrative fee to a maximum of \$50.00. No refunds will be issued for cancellations received after this date.

Registration Form



HEALTH SCIENCES
Continuing Health Sciences
Education

REGISTRATION FEES

Physicians/
Other Health Professionals..... **\$190.00**

Trainees/Students/Residents..... **\$90.00**

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Wednesday, October 24, 2018

Royal Botanical Gardens, Burlington, ON, Canada



Please note that this is NOT an online registration. This is an electronic PDF form. You can type directly in the spaces provided online using any PDF software. You must then print & submit it to us via mail, fax or in person.

Dr. Mr. Mrs. Miss. Ms.

Surname

Given

Profession: Chiro FP Spec IMG PT SURG RN OT Res Student Other

Specify Specify Specify

Royal College Members (only) ID# (for auto upload of MOC credits)

Address

Medical Dept. / Room #

City

Province

Postal Code

Area Code Phone Area Code Fax Cell

FOR OFFICE USE ONLY
Activity Code: 2018MACHAND

Email *Your registration cannot be processed without an email address.

Payment By: Visa M/C AMEX Cash Cheque

*Please make cheque payable to "McMaster University"
** Registration by cheque cannot be confirmed until payment has been processed.

Amount \$

Card Number

Month Year Signature

CVD (*found on the back of card)

SPECIAL MEAL / DIETARY REQUIREMENTS:
For those with special dietary needs some accommodation may be available:
Vegetarian: Allergies:

Other:

(PLEASE note: special meal requests may require an additional fee. Contact our office for details.)

PLEASE IDENTIFY ANY ACCESSIBILITY NEEDS:

CHILDREN ARE NOT PERMITTED as it distracts from the learners.
If you require **PERSONAL SUPPORT** at this activity, the health aid provider must register in advance at the general public rate.

***Please choose the Break-out Sessions you want to attend;**

Session #1 (select 1)	Session #2 (select 1)
A1 <input type="checkbox"/>	B1 <input type="checkbox"/>
A2 <input type="checkbox"/>	B2 <input type="checkbox"/>
A3 <input type="checkbox"/>	B3 <input type="checkbox"/>



www.fhs.mcmaster.ca/conted/machand.html

BY PHONE
Call **905 525-9140 ext 22671** (Visa, MC or AMEX are accepted)

IN PERSON
Bring your completed registration form with Visa, MC, AMEX, cheque or cash payment to:
McMaster University, Continuing Health Sciences Education
100 Main Street West, 5th Floor, Room 5004, Hamilton, ON L8P 1H6
Mon. to Fri. between the hours of 09:30 – 16:00

BY FAX
Fax the completed registration form to: **905-572-7099**

BY MAIL
Mail your completed registration form to:
McMaster University, Continuing Health Sciences Education
1280 Main St. W., DBHSC, Room 5004, Hamilton, ON L8S 4K1

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

The information on this form is collected under the authority of the McMaster University Act, 1976. The information will be used for administrative purposes, including: your registration in the course; preparation of course materials for your use and to notify you of other courses or pertinent information. Financial information will be used to process applicable fees and will be retained for future reference. This information is protected and is being collected pursuant to section 39 (2) and section 42 of the Freedom of Information and Protection of Privacy Act of Ontario (RSO 1990). Questions regarding the collection or use of this personal information should be directed to the University Secretary, Gilmour Hall, Room 210 McMaster University.