



12th Annual MacHANd Day of Evaluation and Management of the Upper Extremity

WEDNESDAY, NOVEMBER 13, 2019

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:

- » Recognize the criteria for the referral of carpal tunnel syndrome or joint hypermobility to specialists.
- » Recognize the pain and physical profiles of patients with Ehlers-Danlos syndrome.
- » Describe treatment approaches for carpal tunnel syndrome, Dupuytren's disease, and chronic oedema in the upper extremity.
- » Describe how to authorize, administer, dose, and educate patients on medical cannabis.
- » Describe how to assess nerve function in the upper extremity during a physical examination.
- » Describe how to screen patients with upper extremity fractures for risk of subsequent falls and osteoporotic fractures.

TARGET AUDIENCE

Chiropractors, Emergency Medicine Physicians, Family Physicians, Occupational Therapists, Physician Assistants, Psychiatrists, 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, 2019

REGISTER ONLINE: www.chse.mcmaster.ca/machand

MORE INFORMATION

Shawn Locke, CHSE Coordinator

McMaster University, Continuing Health Sciences Education

P: 905-525-9140 x21098 **F:** 905-572-7099

E: lockes1@mcmaster.ca

REGISTRATION INFORMATION

E: cmerreg@mcmaster.ca **P:** 905 525-9140 x22671

NEW CHSE WEBSITE

www.chse.mcmaster.ca



AGENDA

*Activity subject to change

07:30-08:00	REGISTRATION AND BREAKFAST	12:00-13:00	LUNCH & VIEW POSTERS
08:00-08:10	Introductions & Welcome	13:00-13:55	Plenary Session: Joint Hypermobility in the Upper Extremity
08:10-09:10	Plenary Session: Medical Cannabis in Pain Management		Tara Packham, PhD, OT Reg. (Ont.) Assistant Professor, Rehabilitation Science McMaster University
	Allison Blain, MD, FRCPC Assistant Clinical Professor, Anesthesia, McMaster University Staff Anesthesiologist, Hamilton Health Sciences	13:55-14:05	Question & Answer
09:10-09:30	Question & Answer	14:10-15:10	Afternoon Break-out Session 2 (please select one)
09:30-09:50	MORNING BREAK & VIEW POSTERS		1) Lymphedema in the upper limb (targeted audience: therapists)
09:50-10:45	Plenary Session: Carpal Tunnel Syndrome: Mechanisms and Management		2) Clinical examination of nerve testing and function (targeted audience: all health care providers)
	Peter J. Keir, PhD, CCPE Professor, Kinesiology, McMaster University		3) Screening for falls after upper extremity fractures (targeted audience: all health care providers)
	Meg Chiavaras, MD, PhD, FACR, FRCPC Assistant Professor, Radiology, McMaster University Staff Radiologist, Hamilton Health Sciences	15:10-15:25	AFTERNOON BREAK & VIEW POSTERS
	Carolyn Levis, MD, MSc, FRCSC Associate Professor, Plastic Surgery, McMaster University Service Chief, Plastic Surgery, St. Joseph's Healthcare Hamilton	15:25-16:15	Plenary Session: Dupuytren's Disease Treatment Options
10:45-10:55	Question & Answer		Matthew McRae, MD, MSc, FRCSC Assistant Professor, Plastic Surgery, McMaster University Staff Plastic Surgeon, St. Joseph's Healthcare Hamilton
11:00-12:00	Morning Break-out Session 1 (please select one)		Nancy Forget MSc, BScOT, PhD (Candidate) Occupational therapist Handworx, Waterloo
	1) Lymphedema in the upper limb (targeted audience: therapists)	16:15-16:25	Question & Answer
	2) Clinical examination of nerve testing and function (targeted audience: all health care providers)	16:25-16:30	Concluding Remarks
	3) Screening for falls after upper extremity fractures (targeted audience: all health care providers)		

DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST

In keeping with accreditation requirements and the National Standard for Support, McMaster University, Continuing Health Sciences Education Program requires that all speakers, planning committee members, moderators, facilitators and authors participating in this activity must disclose all relationships with for-profit and not-for-profit organizations over the previous two years. Disclosure must be done in print, verbally, and in writing on a slide prior to the speaker's presentation.

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

Co-Chair

McMaster University & Hamilton Health Sciences

Meg Chiavaras, MD, PhD, FACR, FRCPC

McMaster University & Hamilton Health Sciences

Janice Harvey, BSc, MD, CCFP, FCFP, Dip. Sport Med.

McMaster University & College of Family Physicians of Canada

Carolyn Levis, MD, MSc, FRCSC

McMaster University & St. Joseph's Healthcare Hamilton

Margaret Lomotan, BA

McMaster University

Joy MacDermid, BScPT, PhD

McMaster University

Matthew McRae, MD, MSc, FRCSC

McMaster University & St. Joseph's Healthcare Hamilton

Tara Packham, PhD, OT Reg. (Ont.)

McMaster University

Michael Vallely, BA, BScPT – Co-Chair

McMaster University & Innova Health Clinic

Sheilah Laffan

CHSE Program Manager
Continuing Health Sciences Education
McMaster University

Shawn Locke

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 30, 2019** 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

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Wednesday, November 13, 2019

Royal Botanical Gardens, Burlington, ON, Canada



HEALTH SCIENCES
Continuing Health Sciences
Education



REGISTRATION FEES

Physicians/
Other Health Professionals..... \$190 +HST

Trainees/Students/Residents..... \$90 +HST

*All fields are required in order to process your registration

Dr. Mr. Mrs. Miss. Ms.

Surname

Given

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

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

Address

Medical Dept. / Room #

City

Province Postal Code

Area Code Phone

FOR OFFICE USE ONLY
Activity Code: 2019MACHAND

Area Code Fax Cell

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

Payment By: Visa M/C AMEX Cash Cheque
Card Number

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

Amount \$. 0 0 + 13% HST
*HST# 11903 5988 RT0001

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"/>



REGISTER ONLINE: www.chse.mcmaster.ca/machand

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.