



Kennedy Krieger Institute

*A comprehensive  
resource for children  
with disabilities*

## **Overview of Developmental Disabilities: Diagnosis and management**

**Alec Hoon, MD**

Effective management of children with developmental disabilities requires a thorough understanding of the causes, manifestations and management options. Maintaining open lines of communication between a wide variety of medical, rehabilitative and community practitioners who treat the myriad of presentations and variable patterns of clinical expression is required. Early identification facilitates the establishment of effective management plans. Inclusion of families in decision making is critical to optimizing outcome



Presenter Confirmation Form
Annual Fall Conference
Care Management- The Juggling Act
Tuesday, October 7, 2008

1. I confirm my participation at CMSA of the Chesapeake's Annual conference as a concurrent session presenter on Tuesday, October 7, 2008, from 11:00 AM - 12:15 PM

Signature required [Handwritten signature]

2. Please complete the following information as you wish it to appear in the conference brochure.

Name: [Handwritten: ALEC HOON, MD]

Educational Credentials (ie PhD, RN, CCM, JD) [Handwritten: MD]

3. Please provide your preferred mailing address and telephone number. All future correspondence will be sent to this address.

Preferred mailing address:

ALEXANDER H. HOON, JR., M.D.
ASSOCIATE PROFESSOR OF PEDIATRICS
JOHNS HOPKINS UNIVERSITY SCHOOL OF MEDICINE
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707 NORTH BROADWAY
BALTIMORE, MD 21205

E-mail Address: [Handwritten: hoon@kennedykrieger.org]

Telephone Number: [Handwritten: 443-923-9141] Fax [Handwritten: 3-9145]

Home [Handwritten: 410-480-0645]

35-50 word abstract to describe substance of presentation. This will be used in conference brochure.

2-3 objectives for participants to gain from your presentation

1. [Handwritten: understand the work-up and management of a child with developmental disability]

[Handwritten scribble]



We will need a brief bio to be included in the conference handouts and to assist with introductions of all presenters.

We will also need a copy of your curriculum vitae to apply for CEUs for this program. See attached

Please complete the AV Equipment request section.

**Audiovisual Equipment Request**

<input type="checkbox"/> LCD projector. (Presenter is responsible for providing computer) Your computer model is: _____	<input checked="" type="checkbox"/> (1) podium Microphone  <input checked="" type="checkbox"/> (1) Lavalier clip on Microphone
<input type="checkbox"/> 35mm slide projector with remote <input type="checkbox"/> Carousel for 35 mm slide projector	<input type="checkbox"/> Overhead projector <input type="checkbox"/> Front projection Screen
<b>Standard Room Set</b> <ul style="list-style-type: none"> <li>• Podium</li> <li>• 6 foot draped &amp; skirted table</li> <li>• Seating to maximize room (Theatre or classroom style)</li> </ul>	<i>Large erasable board and dry erase markers</i>

**Supplemental Material** (for inclusion in conference manual)

This can be in the form of a comprehensive session outline, important related articles, copies of your 35 mm slides, or PowerPoint presentation with room for note-taking, etc.

- Please limit to 10 pages
- Material submitted must have ¼” margins to accommodate the manual
- Material can be emailed (Microsoft Word or PowerPoint) to [fdevine@devinecm.com](mailto:fdevine@devinecm.com)

**Please note:** Presenters electing to bring their own handouts to the session are responsible for providing enough copies for their session and for all cost related to reproduce and ship.

Please return the completed form and requested information by July 1,2008

Cathy Bland  
 CMSA of the Chesapeake  
 Fax #

Questions or concerns:

Email:

Phone: