



Register with at least 3 or more people and get 10% off additional registrations in your group with VIP code **GROUP10**

VIP Code: _____

1. CONTACT INFORMATION (Required to confirm registration)

Name _____
 Title _____
 Credentials _____
 Facility _____
 Address _____
 City _____ State/Province _____
 Zip/Postal Code _____ Country _____
 Phone _____ Ext _____
 Cell Phone _____
 Email _____

SUBMIT YOUR REGISTRATION

Mail this completed form to:
OR Business Management Conference
 PO Box 775986
 Chicago, IL 60677-5986

Email this form to clientservices@accessintel.com

For questions, please call **1-888-707-5814** or email clientservices@accessintel.com

2. REGISTRATION & FEES

- PREMIER PASS**
 The Premier Pass grants you access to a pre-conference workshop, all conference sessions, table tops, breakfasts and lunches, networking reception, 1 ticket to Night Out event, 1-year Premium (digital) subscription to OR Manager monthly magazine, and all session recordings.
- ALL ACCESS PASS**
 The All Access Pass grants you access to a pre-conference workshop, all conference sessions, table tops, breakfasts and lunches, networking reception and all session recordings.
- CONFERENCE PASS**
 The Conference Pass gives you access to all conference sessions, table tops, breakfasts and lunches, networking reception and all session recordings.

	Early Bird Rate Ends 10/16/23	Advanced Rate Ends 1/8/24	Regular Rate After 1/8/24
<input type="checkbox"/> PREMIER PASS	\$1,345	\$1,545	\$1,645
<input type="checkbox"/> ALL ACCESS PASS	\$1,195	\$1,395	\$1,495
<input type="checkbox"/> CONFERENCE PASS	\$1,025	\$1,225	\$1,345

>> ADD ON OPTIONS

NIGHT OUT: CHICKEN N PICKLE <input type="checkbox"/> 1 TICKET <input type="checkbox"/> 1 GUEST TICKET* Join us at this new facility that's walking distance from the hotel and enjoy food, drinks, and games like pickleball, bocce, and corn hole. Bring your sneakers and a fun attitude. *GUESTS MUST BE 21 OR OLDER	\$90 per person <i>(1 ticket included in Premier Pass)</i>
ONE YEAR, PREMIUM SUBSCRIPTION TO OR MANAGER <input type="checkbox"/> DIGITAL ONLY <input type="checkbox"/> PRINT	Digital only \$229; Print \$249 <i>(Digital subscription included in Premier Pass)</i>

TOTAL COST \$ _____

3. PAYMENT INFORMATION

Check Enclosed PO/Bill Me Credit Card: Visa MasterCard American Express Discover

Card Number _____ Expiration Date _____ CVC # _____ Signature _____ Name as Shown on Card _____

Credit card payments will be reflected as Access Intelligence
 Access Intelligence Federal Tax ID#: 52-2270063



4. CREATE YOUR PROFILE

1. How many years have you attended the OR Business Management Conference?

- First Time Attendee
- 2 years
- 3 years
- 4 years
- 5 or more years

2. What best describes where you are employed?

- Academic Hospital
- Ambulatory Surgery Centers (Free-standing, In-hospital or Office-based)
- Children's Hospital
- Community Hospital
- Manufacturer/Vendor
- Tertiary Hospital
- VA Hospital
- Other _____

3. What types of procedures does your facility focus on? (Check all that apply)

- Cardiac
- Cosmetic
- Ophthalmology
- Orthopedic
- Pediatric
- Podiatry
- Other _____

4. Number of operating rooms in your facility

- 1 to 3
- 4 to 6
- 7 to 9
- 10 or more

5. What best represents your professional title?

- Administrator
- Anesthesiologist/Nurse Anesthetist
- Business Manager/Director
- Consultant
- Director of Operations
- Director of Surgical Services/ Director of Nursing
- Educator/Staff Development
- Executive Officer
- Financial Planning & Analysis Management
- Medical Director/Chief Surgeon
- OR Manager/Supervisor
- PACU Manager/Director
- Purchasing/Procurement
- Recruiter
- Supply Chain Management
- Surgical Technologist
- Other _____

6. Which of these areas fall under your responsibilities? (Check all that apply)

- Anesthesia Support Personnel
- Cardiac Cath Lab
- Central Processing
- CRNAs
- Emergency Department/Trauma Services
- GI/Endoscopy
- ICU
- Inpatient Nursing Unit
- Labor and Delivery
- Materials Management for OR
- Outpatient/Same-Day Surgery
- Pain Management
- Perfusion Services
- Post Anesthesia Care
- Preadmission Services
- Preop Unit
- Sterile Processing
- Other _____

7. What is your role in purchasing new products and services at your institution? (Check all that apply)

- Final decision-making authority on purchases
- Member of purchasing/evaluation committee
- Recommend new products
- Specify suppliers to evaluate products and services
- Veto Authority

8. What products do you plan to purchase over the next 12 months?

- Anesthesia Products
- Asset Tracking/RFID
- Billing
- Capital Equipment
- Career/Staffing/Recruitment
- Cleaning/Sterilization
- Education
- Fluid Management Systems
- Furniture
- Instrumentation/Surgical Tools
- IT/Software/Hardware
- Monitors/Cameras/Video Devices
- OR Tables
- Patient Safety
- Positioning
- Scheduling
- Smoke Evacuation Systems
- Surgical Lights
- Uniforms/Personal Protective Equipment
- Wound Care Products/Infection Prevention
- Other _____

9. How did you hear about the conference?

- Email
- Friend or Colleague
- Advertisement Online
- Advertisement in OR Manager
- Website
- Trade Show
- Referred by Program Committee Member
- Referred by Speaker
- Brochure or Post Card

10. How long have you been in an OR management role with your current employer?

- 1-3 years
- 4-6 years
- 7-9 years
- 10+ years

11. Do you have any special needs, requests or food allergies?

REGISTRATION TERMS AND CONDITIONS

CANCELLATIONS: All cancellations must be made in writing and will be subject to a \$600 cancellation fee (per attendee). Registrants who cancel before **December 11, 2023**, will receive a refund of their payment minus the service fee. Registrants who do not cancel prior to **December 11, 2023** will be liable for the full registration fee. If for any reason, Access Intelligence decides to cancel or postpone this conference, Access Intelligence is not responsible for covering airfare and other travel costs incurred by clients. Refunds due to registrant error will be charged a \$199 processing fee. Non-payment or non-attendance does not constitute cancellation and will not be entitled to a credit or refund.

QUALIFICATION: Premier, All-Access, and Conference passes are reserved for healthcare professionals representing a health system or facility. Manufacturer and vendor representatives do not qualify, and must be an exhibitor or sponsor to attend. Access Intelligence reserves the right to cancel registrations for unqualified individuals. All cancellations are subject to the \$199 processing fee.

SUBSTITUTION/REPRINT POLICY: Registrations can be altered and edited up until the badge is printed. Access Intelligence recognizes the information in the registration system, NOT the confirmation e-mail, as the most current and valid information. Substitutions may be made at any time for the confirmed registrants of OR Business Management Conference 2024; however printed badges are non-transferable once collected at the conference. Notice of substitution must be made in writing by the original registrant to clientservices@accessintel.com or: OR Business Management Conference 2024, Attn: Registration, 9211 Corporate Blvd., 4th Floor, Rockville, MD, 20850.

AGE POLICY: No one under the age of 21 is permitted to register for or attend OR Business Management Conference 2024