LETTER FROM THE CHAPTER PRESIDENT

It gives me great pleasure to invite you to support the Annual Meeting of the Louisiana Chapter of the American College of Surgeons (LA-ACS) and Surgical Association of Louisiana (SAL), taking place January 17-19, 2020 at the Ritz Carlton in New Orleans, LA.

The chapter meeting provides Category 1 CME and also Maintenance of Certification credit, a great commodity with surgeons nationally as they reapply for licensing and board renewal. Approximately 125 surgeons attend the meeting each year. Exhibiting companies will receive one 6’ skirted table, continental breakfasts and daily refreshment breaks within the exhibit space. The fee to exhibit is $1,900. There are also opportunities for your company to provide additional Commercial Support. Recognition of participation will be communicated to attendees in the program book and via signage throughout the meeting.

In supporting this meeting, we are confident you will see the benefits to meeting and reaching out to all types of surgeons in Louisiana. The meeting provides a rich opportunity to network and educate a wide array of surgeons on all areas of surgical technology and innovation. We hope you will consider participating in this program. Thank you in advance for all you do for the field of surgery and surgical innovation. We look forward to seeing you in New Orleans!

Juan Duchesne, MD, FACS
2019-2020 LA-ACS President
LOUISIANA CHAPTER  
ANNUAL MEETING  
JANUARY 17-19, 2020  

ACCOMMODATIONS

RITZ CARLTON  
921 Canal Street  
New Orleans, LA 70112

Room rates begin at $199/night.  
Reservations can be made by booking online at laacs.org.  
Reserve your room by Wednesday, December 18, 2019 to ensure the group rate.

2020 PROGRAM COMMITTEE

Juan Duchesne, MD, FACS  
LA-ACS President

Emad Kandil, MD, FACS  
SAL President

Lance Stuke, MD, FACS  
YFA Co-Chair

Sharven Taghavi, MD, FACS  
YFA Co-Chair

Shauna Levy, MD, FACS  
Women in Surgery Co-Chair

Chrissy Guidry, MD, FACS  
Women in Surgery Co-Chair

Jonathan Babin, MD, FACS  
Program Committee Member

Virck Chiranjiv, MD, FACS  
Program Committee Member

Niazy Selim, MD, FACS  
Program Committee Member
ANNUAL MEETING EXHIBITOR - $1,900

The Exhibitor Fee of $1,900 includes the following:

- Admittance of two representatives per table (additional representatives will be $150 each)
- One 6’ skirted table and two chairs
- Admittance to Continental Breakfasts and Breaks
- Participation in our “Exhibitor Passport” program where attendees collect signatures from each booth to win a prize.

TENTATIVE EXHIBIT HOURS

SATURDAY, JAN 18
6:00am - 7:00am  Set-up
7:00am - 5:00pm  Display Hours
7:00am - 8:00am  Breakfast
10:30am - 10:50am  Break
3:00pm - 3:20pm  Break

SUNDAY, JAN 19
7:00am - 10:30am  Display Hours
7:00am - 8:00am  Breakfast
10:15am - 10:30am  Break
10:30am  Teardown

RESIDENT SURGICAL SKILLS OLYMPICS

The Louisiana ACS will host a Surgical Skills Olympics Competition designed to foster relationships among surgical residents across the state. Stations will be designed to mimic common surgical situations and tasks, to test both the skills and teamwork of the surgical trainees. Potential Stations include Vascular Patch, Knot tying, Wound VAC, FLS TBD (Peg Transfer or Suture with Intra-corporeal Knot) and/or Laparoscopic Precision Cutting.

Commercial Support Opportunities (in-kind donation or monetary) are available.
**EDUCATIONAL GRANT OPPORTUNITIES**

**UNRESTRICTED EDUCATIONAL GRANT LEVELS**

The Louisiana Chapter also invites you to provide support through an Unrestricted Educational Grant. Your company will receive recognition based on level of support on our chapter website, in various meeting materials and signage.

<table>
<thead>
<tr>
<th>Level</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Platinum Level</td>
<td>$10,000</td>
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<tr>
<td>Gold Level</td>
<td>$5,000</td>
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<tr>
<td>Silver Level</td>
<td>$3,000</td>
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<tr>
<td>Bronze Level</td>
<td>$2,500</td>
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**MARKETING SUPPORT**

You may also specify that your educational grant supports specific aspects of the meeting. Your company will receive recognition of your support on our chapter website, in various meeting materials and signage at the specific event.

1. **Scientific Sessions** *(3 Available)* $2500
2. Surgical Oncology
3. Trauma & Acute Care
4. Surgical Education & Training
5. Miscellaneous (Multispecialty)
6. **Poster Session** *(3 available)* $2,500
7. **Continental Breakfast** *(2 Available)* $1,500
8. **Networking Break** *(3 Available)* $1,000
9. Mock Orals $2,500
10. Resident Jeopardy $5,000
11. **Resident Surgical Skills Competition** $5,000
12. Women in Surgery Luncheon $3,000
13. Attendee Charging Station $1,500

Please contact LA-ACS Headquarters by phone at 504-841-0145 or email at janna@laacs.org if you are interested in Commercial Support Opportunities.

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**2020 EXHIBITOR AGREEMENT**
https://form.jotform.com/92194994236166

**MARKETING & VISIBILITY OPPORTUNITIES AGREEMENT**
https://form.jotform.com/92195319530155
EXHIBIT & COMMERCIAL SUPPORT CONTRACT
Exhibiting companies will be given a 6’ tabletop display, along with recognition in the final program, meeting signage and chapter website. Companies can participate in the LA-ACS Annual Meeting as an Exhibitor for a fee of $1,900. Per ACCME regulations, please note that the exhibit fee of $1,900 is separate from any grant fees.

COMPANY NAME (Please list exactly as you would like it to appear on the recognition signage and name badges)  CONTACT NAME

MAILING ADDRESS  CITY, STATE, ZIP

CONTACT PHONE NUMBER  E-MAIL ADDRESS

EXHIBITOR
Exhibitor Fee ($1,900)  $__________

EDUCATIONAL GRANTS
Offer an Unrestricted Grant  $__________

MARKETING SUPPORT
Specify number associated with meeting session on page 4  $__________

TOTAL DUE  $__________

EXHIBIT SPECIAL REQUESTS
Each exhibiting company will receive a 6’ table top display. Any additional requests such as electric and high speed internet will be arranged with the hotel at the individual company’s expense.

☐ Electrical  ☐ High Speed Internet Access

LIST COMPANIES YOU WOULD PREFER TO NOT BE LOCATED IN PROXIMITY TO

PAYMENT INFORMATION
☐ Check — payable to LA-ACS and mailed to LA-ACS address listed above. Tax ID #: 23-7431289
☐ Credit Card — Indicate credit card to be charged, fax to or scan/email to janna@laacs.org
☐ AmEx  ☐ MC  ☐ VISA  ☐ Discover

NAME AS IT APPEARS ON CARD

CARD NUMBER  EXPIRATION DATE  SECURITY CODE

SIGNATURE

STREET ADDRESS AND ZIP CODE CREDIT CARD STATEMENTS ARE SENT TO

REGISTRATION
As an exhibitor, you will receive (2) complimentary registrations. Please print names exactly as you would like them to appear on the name badge.

FIRST & LAST NAME EMAIL ADDRESS

FIRST & LAST NAME EMAIL ADDRESS