



Director:

Christine T. Barry, PhD

Associate Professor

Division of Developmental Behavioral Pediatrics
and Psychology

University Hospitals

Rainbow Babies & Children's Hospital

Co-Director:

Kathy Maxwell, RN, MSN

Certified Nurse Practitioner

Division of Pediatric Neurology

University Hospitals

Rainbow Babies & Children's Hospital

Location:

UH Westlake Medical Center

960 Clague Road (1st floor)

Westlake, OH 44145

Directions:

Coming from the West: (Avon, Sheffield Lake, Lorain):
I-90 East to Columbia Rd. exit. Turn right onto
Columbia Rd. Quickly move to left lane. Turn left at
traffic light onto Detroit Rd. Travel approximately 8/10
of a mile. The Medical Center will be on your left, just
before the intersection of Clague & Detroit Rds.

Coming from the East: I-90 West to Clague Rd. exit.
Turn left at traffic light onto Clague Rd. Quickly
move to right lane. Entrance to the Medical Center
will be on your right.

Coming from the South: I-71 North to 480 West.
Exit at Clague Rd. and turn right. Entrance to
the Medical Center is on your left, just past the
intersection of Clague and Detroit.



FOURTEENTH ANNUAL AUTISM Seminar Series

**A Better Understanding
of the Spectrum of Autism
and Practical Intervention
Strategies**



**The Division of Developmental
Behavioral Pediatrics and Psychology**

**Wednesday Evenings
7:00 p.m. to 8:30 p.m.
October 5, 2016
through April 5, 2017**

Dates and Topics

- **October 5, 2016**
Sleep and Preschool Issues in ASD
Max Wiznitzer, MD
- **November 9, 2016**
When Picky Eating Becomes a Problem:
Feeding Issues Among Children with Autism
Cara Cuddy, Ph.D.
- **January 18, 2017**
Co-Morbid Disorders and treatment issues in
adolescent with ASD
Christine T. Barry, PhD
Kathy Maxwell, MSN, CNS
- **February 15, 2017**
Technology Tools and Software Programs for
Children with ASD
Christian Karter, MA
- **March 15, 2017**
Social/Communication Issues
Lisa R. Audet, PhD, CCC-SLP
- **April 5, 2017**
Transition to Adulthood:
Creating and Maintaining a Successful Transition
Beth Thompson, MSSA, LSW

Location

UH Westlake Medical Center
960 Clague Road (1st floor), Westlake, OH 44145

Directions on back panel

About the Course

This series is designed to improve understanding of the medical, behavioral, social, sensory, and educational issues related to Autism Spectrum Disorders. An emphasis will be placed on practical intervention techniques. Presenters are local and national experts in the field of autism UH Rainbow Babies & Children's Hospital.

Presenters

Lisa Audet, PhD, CCC-SLP
Assistant Professor, Speech Pathology & Audiology
Kent State University

Christine T. Barry, PhD
Associate Professor of Pediatrics
Case Western Reserve University
UH Rainbow Babies & Children's Hospital

Cara Cuddy, Ph.D.
Psychologist & Director of Pediatric Feeding Program
Cleveland Clinic Children's Hospital for Rehabilitation

Christian Karter, MA
Educational Technology Specialist
Monarch Center for Autism

Kathy Maxwell, MSN, CNS
Certified Nurse Practitioner
University Hospitals
UH Rainbow Babies & Children's Hospital

Beth Thompson, MSSA, LSW
Program Director
Milestones Autism Resources

Max Wiznitzer, MD
Professor of Pediatrics
Case Western Reserve University



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Registration Form

Cost is \$100 for the entire series.
Participants may join at any point in the series.
Students and paraprofessionals may attend entire series for \$20. NO REFUNDS WILL BE GIVEN.
Please make check payable to: Autism Seminar Series.
Credit card payments will not be accepted. Fee includes all six lectures, handouts, and refreshments. Space is limited to 120 participants, so please register early. **If you have any other questions, please leave a message at (216) 844-1289.**

FOURTEENTH ANNUAL **AUTISM** Seminar Series

To register, mail completed form and check, postmarked by **September 26, 2016** to the following:

Division of Pediatric Neurology
Attention: Kathy Maxwell, MSN, CNS
University Hospitals
Rainbow Babies & Children's Hospital
11100 Euclid Avenue
Cleveland, OH 44106

To register by email:
Kathleen.Maxwell@uhhospitals.org

Name(s): _____

Address: _____

Telephone (daytime): _____

Telephone (evening): _____

E-Mail: _____

Please mail your check with this completed registration form. Thank you.