

**CCRCA's CERF Clinic**  
**Wednesday, May 7, 2008**  
**1:00 PM – ????????**

**CCRCA will be offering a CERF Clinic on May 7, 2008, from 1:00 PM – ???? at the specialty host hotel, Hotel Carlisle.**

**Dr. Robert L. Peiffer, DVM, PhD, DACVO, will be conducting the eye examinations for us. The cost is \$25.00.**

Dr. Peiffer received his veterinary degree from the University of Minnesota in 1971 and earned his board certification in veterinary ophthalmology in 1978. Dr. Peiffer continued advanced studies in comparative ophthalmology and completed a PhD in 1980.

Dr Peiffer is a highly accomplished clinician, author, and academician. He is past president of the American College of Veterinary Ophthalmology, American Society of Veterinary Ophthalmology, the International Society of Veterinary Ophthalmology, and the International Society of Ocular Toxicology. He is recipient of multiple awards for his contributions to the veterinary profession, including the American Animal Hospital Association "Gaines" award for practitioner of the year, the American Veterinary Medical Association career achievement award and World Small Animal Veterinary Medical Association award for contributions to the profession. During his career Dr. Peiffer has authored over 200 scientific articles, numerous book chapters and is author/editor of 4 textbooks on veterinary ophthalmology. He was the first editor-in-chief of the specialty's journal and has served on numerous editorial boards.

He is Professor Emeritus of Ophthalmology and Pathology, School of Medicine of the University of North Carolina and is currently a Clinical Associate and co-director of the ocular pathology laboratory of the Scheie Eye Institute of the University of Pennsylvania. Additionally, he serves as a senior investigator for Merck & Research Laboratories.

(To Attend, Please Cut and Return Bottom Portion)

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**Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_ **# Attending** \_\_\_\_\_

**Please return this form to:**

**Kelly Clark-Ryan**  
**2008 CCRCA National Specialty**  
**318 S. 2<sup>nd</sup> Street**  
**Harrisburg, PA 17104**

**Or e-mail your intention to attend, with the above-referenced information to: [laketower@verizon.net](mailto:laketower@verizon.net)**

**You will need to complete the hospitality form and send payment to the address listed on that form!!**