

Canadian Laser and Aesthetic Specialists Society

ANNUAL EDUCATIONAL SYMPOSIUM

Saturday, November 15, 2025

Montréal, Québec



FACULTY

Dr. Martin Braun Dr. Valerie Doyon

Vancouver, BC Montreal, PQ

Dr. Arusha Campbell-Chambers Dr. Elena Poulos

Montego Bay, Jamaica Toronto, ON

Dr. Geneviève Caron Dr. Vincent Richer

Montréal, PQ Vancouver, BC

Dr. Dusan Sajic Dr. Hani Sinno

Guelph, ON Montréal, PQ

PROGRAM / EXECUTIVE COMMITTEE

Dr. Brandon Howell, President

Dr. Jonathan Shapero, Past President/Treasurer

Dr. Ashlan Alexander, Vice-President Dr Marissa Joseph, Secretary

Dr. Mary Lou Baxter, Member at Large

PROGRAM OBJECTIVES

Participants will learn the treatment of acne with NdYAG laser. The best practices for developing a non surgical body contouring practice will be assessed. Learners will learn multi combination approaches for aesthetic enhancement & rejuvenation to face, eyes and genitalia. Registrants will acquire knowledge for safe team delegation and communication.

Participants will evaluate the safety and efficacy of fillers and biostimulators

PROGRAM Saturday, November 15, 2025 - Ritz Carlton Hotel

0700 – 0800 Registration & Optional Early Bird Satellite Meeting and Breakfast **Green Room**

General Session – Blue Room

0815 - 0820	Introduction and welcome from President	Dr. Brandon Howell	
0820 - 0840	Treatment of acne with 650 microsecond 105 nm NdYAG laser	Dr. Arusha Campbell-Chambers	
0840 - 0900	Eye-opening transformations: The subtle power of eyelid enhancement	Dr. Elena Poulos	
0900 - 0910	Discussion		
0910 - 0950	Best Practices for developing a non surgical body contouring practice	Dr. Martin Braun	
0950 - 1000	Discussion		
1000 - 1030	Coffee Break with Exhibitors – Gold and Gray Room		
1030 - 1040	Laser therapy for burn scars	Dr. Geneviève Caron	
1040 - 1045	Discussion		
1045 – 1130	CMPA- Safe delegation and Supervision/team communication and Delegation	Dr. Jessica Dy	
1130 - 1145	Discussion		
1145 - 1245	LUNCH - Gold and Grey Room		
1245 - 1315	New generation skin care Measuring biological outcomes	Dr. Dusan Sajic	
1315 - 1335	Combining laser, injectables and regenerative therapies for		
	skin rejuvenation	Dr . Arusha Campbell-Chambers	
1335 - 1345	Discussion		
1345 – 1405	Advances in genital rejuvenation: restoring confidence and wellness	Dr. Geneviève Caron	
1405-1435	Fillers and biostimulator injections prior to facelift surgery? A Prospective review of 50 cases	Dr. Hani Sinno	
1435-1445	Discussion		
1445-1515	COFFEE BREAK – Gold and Grey Room		
1515-1520	Update on Blindness from Filler: Review of prognostic factors, management approaches, and a century of published cases (Resident Award Presentation)	Dr. Valerie Doyon	
1520-1600	Pearls from dermatology that changed my cosmetic practice.	Dr. Vincent Richer	
1600-1615	Discussion		
1615	Adjournment &Closing cocktail reception CLASS AGM – Members only		

ACCOMMODATIONS/ VENUE

Ritz Carlton Hotel, Montréal

CLASS Room Block Rate: \$315.00 per night. Cut off date: October 15, 2025

Telephone main: 1-866-344-5050 / on line: **BOOK YOUR HOTEL ROOM** (copy and paste link to browser)

ELIGIBILITY This meeting is open to Fellows of the Royal College of Physicians and Surgeons of Canada;

Fellows of Royal College of Physicians, Fellows of the College of Family Physicians, and their

staff, Residents.

CANCELLATION Full refunds for cancellations received prior to Oct. 15th **POLICY** 50% refunds for cancellations received prior to Nov. 1st

REGISTRATION INFORMATION

After October 15, 2025

Members New member applicants Jr. Specialists in the first 3 yrs of practice	\$250.00 \$350.00 \$150.00	\$350.00 \$450.00 Members who sponsor new Members will receive credit on 2026 Annual Dues \$250.00		
Non-Members Residents	\$600.00 \$ 50.00	\$700.00 Resident fees will be refunded after meeting attendance confirmed		
Nurse/Office staff	\$ 150.00	\$250.00		
Registration Fee HST 13% Total Due				
Payment On line: https://class.ca/shop/class-annual-symposium-registration/ (Visa/MC/Amex)				
Payment by VISA (only - No MC or AmEx) CHEQUE payable to CLASS				
Credit Card Number Exp. Date				
Signature of cardholder				
Name:				
Address:				
City:ProvincePostal code				
Phone: Email				
SPECIALTY Dermatology Plastic	Surgery O	tolaryngology Ophthalmology General Practice Other		
I agree I do NOT agree to share and/or publish contact information in the Participants List				

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