

ASPAN Select Seminar Series

ASPAN Select 3 Knoxville, TN

Date: Saturday, November 9, 2019

Registration: 7:30 AM - 8 AM

Program Time: 8 AM - 11:45 AM

Evaluations (Online): 11:45 AM - 12 PM

Location: Tennova Healthcare Turkey Creek Medical Center

Classroom 1

10820 Parkside Drive Knoxville, TN 37934

https://www.tennova.com/turkey-creek-directions

Pre-Recorded Modules Include:

▶Nerve Blocks: What You Should Know to Protect Your Patients - Linda Ziolkowski, MSN, RN, CPAN

▶Orthopedics: From Preparation to Discharge - Linda Ziolkowski, MSN, RN, CPAN

►Ultra Rapid Metabolizers: What PACU Nurses Need to Know About Drug Metabolism - Nancy Strzyzewski, MSN, RN, CPAN, CAPA

Target Audience:

All perianesthesia nurses

Outcome:

To enable the nurse to increase knowledge on care of the perianesthesia patient with nerve block, care of the orthopedic patient, and on drug metabolism

Overall Program Objective:

Discuss various types of nerve blocks, patient care priorities for the orthopedic patient, and important aspects of ultra rapid metabolizers

Case Presentations:

Any case studies discussed during the seminar are fictional and do not reflect any real persons or events *Disclosure Statement:*

All planners and presenters at continuing nursing education activities are required to disclose to the audience any significant financial relationships with the manufacturer(s) of any commercial products, goods or services. Such disclosures will be made in writing in the course presentation materials.

3.21 Contact Hours

The Registration Form is found on the back of this page. Please photocopy and pass along to other interested colleagues.

American Society of PeriAnesthesia Nurses (ASPAN) is accredited with distinction as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation (ANCC-COA).



Additional provider numbers: Alabama #ABNP0074, California #CEP5197

Fee Schedule Cancellation Policy ASPAN Member Fee.....\$32.00 ■ Full refund upon receipt of documented notice of cancellation postmarked 30 days or more □ Non-Member Fee.....\$85.00 preceding seminar date. An administrative fee of 20% will be charged for any cancellation Please note that registration cannot be accepted or processed postmarked 29 days or less preceding one week of unless accompanied by appropriate tuition payment. ASPAN the seminar date. Please note that seminars will not reserve seats for registrations received without cancelled within one week or less of the seminar payment. date will <u>not</u> be eligible for a refund. This cancellation policy applies regardless of when Register online at www.aspan.org under you register. Refund will be determined by the EDUCATION, ASPAN Webcasts and Seminars, date notice is received in the ASPAN National Office in Cherry Hill, NJ. ASPAN Select Seminars. ■ ASPAN reserves the right to cancel a seminar due to insufficient enrollment or any unforeseen You must be logged in to register. If you do not have an circumstances. All fees will be fully refunded. account, you will need to create a new account. ■ ASPAN cannot be responsible for limited enrollment due to room sizes in some facilities. Onsite registrations are not accepted. You must register at least one week prior to the event. Register Early - space is limited! Please visit www.aspan.org for FULL details about our programs. REMEMBER: A printed syllabus will not be provided. A link to the handout will be on your statement and will be sent to you in an emailed confirmation letter, upon your registration. It is your decision to print all or part of the handout and bring it with you or to download the material to your computer. Wi-Fi will *not* be available the day of the seminar. DO NOT DETACH. Please send back entire form. Please print or type. Use a separate form for each registrant. Duplicate as needed. Registration Form: ASPAN Select 3, Knoxville, TN, Saturday, November 9, 2019 (AS3KTN1918) Name: _____ ASPAN Member # _____ Address: _____ State: _____ Zip: _____ City: ____ Fax: ____ Phone (Work, Home, Cell): Email (mandatory): *** (Confirmation & Handout link delivered via email)*** Method of Payment: ☐ Check (Payable to ASPAN, drawn on U.S. bank in U.S. funds) □ VISA ■ Master Card □ American Express

Federal ID# 06-1024058

FOR MORE INFORMATION OR TO RETURN THIS FORM

Email: dingram@aspan.org

Phone: (877) 737-9696, Ext. 219 Fax: (856) 616-9601

***Please note: Registration is not taken over the phone

ASPAN Seminars 90 Frontage Road

Card Number: _____ Expiration Date: _____

Cherry Hill, NJ 08034-1424 Register online at <u>www.aspan.org</u>