< Study Day Title Here>

Acute Pain Seminar

**Wednesday 20th March, 2019**

**Registration Time: 08:00 hrs Course Time: 08:15-16:00 hrs**

**Location: NCHER, Level 1, Lecture Theatre 1**

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| **About the Program**  This seminar, run by the Acute Pain Service, is designed for nursing staff with all levels of experience from across Northern Health, interested in building upon their knowledge on the physiology and management of acute pain and chronic pain in the acute setting.  A vast scope of pain management options will be covered and presented by representatives of Anaesthetics, Allied Health and Nursing.  In addition to attending this seminar, participants will be provided pre-reading, which will prepare the foundations for discussion & case studies throughout the day.  Topics include:   * Pain Assessment * Physiology of Pain * Chronic Pain in the Acute Setting * Opioid and Adjuvant Therapies * Ketamine * CADD Pumps   **Course Fees**  Northern Health Staff: $50.00  External Staff: $120.00 |

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| **Registration**  Complete this form and return it to [EducationEnquiries@nh.org.au](mailto:EducationEnquiries@nh.org.au) by Monday March 4,2019  Study Leave does not guarantee a place. An outcome email will be sent to the email address provided on the form.   |  |  | | --- | --- | | **Applicant Name:** Click here | **Employee Number:** Click here | | **Email address:** Click here | **Mobile Number:** Click here | | **Unit/Department:** Click here |  | | **Study Leave Approved?** Yes  No | **NUM/Manager Name:** Click here  **Signature :** Click here  *(not required if coming in own time)* |   **Payment Details:**   |  |  |  |  | | --- | --- | --- | --- | | VISA | MASTERCARD | | CHEQUE | | **CARD NUMBER**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | | **AMOUNT:** Click here  **Expiry Date:** Click here  **CCV number:** Click here. | | | **Card holder name:** Enter text.  **Signature:** Enter text. | | **Date:** Enter date | |   **Terms & Conditions**   * All fields must be completed * No cash payments accepted * Payments will be processed after the registration closing date * No refund after the closing date. Credit will be used for future study day. * Northern Health will make every attempt to provide the program as outlined, however reserve the right to change or cancel the program. * Payment will appear on statement as NH Medical Services * Contact [EducationEnquiries@nh.org.au](mailto:EducationEnquiries@nh.org.au) or **8468 0751 / 8468 0777** if you have not received an email within 1 week of sending your registration form |