

REGISTRATION FORM

2ND HEART AND LUNG NURSES EDUCATION DAY

The Kerry Packer Education Centre, RPAH
Saturday, 15 September 2018



PERSONAL INFORMATION

NAME: _____

HOSPITAL: _____ DEPARTMENT: _____

EMAIL: _____ PHONE: _____

Cost: \$70.00 per person (includes GST)

Payment method: Cheque/Money order payable to The Baird Institute

Mastercard [] Visa [] Amex []

Card number _____ / _____ / _____ / _____ Expiry Date _____ / _____

EFT: The Baird Institute Ltd, NAB BSB 082 057 Account number 537 82 2979

Ref: Please include full name and email remittance to info@bairdinstitute.org.au

Please email completed registration form to info@bairdinstitute.org.au or mail to
The Baird Institute, 305 / 100 Carillon Avenue, NEWTOWN, NSW 2042

WORKSHOP PREFERENCES

Please indicate in order of preference the workshops you would like to attend. Each delegate will attend 2 workshops and we will endeavour to accommodate your request but numbers are limited to 20 participants per session - each session will be repeated once

Cardiac Anatomy and Valve Prothesis (wet labs) []

Cardiac Advanced Life Support (CALs) []

V.A.C. and Prevena therapies []

Epicardial Pacing : temporary pacemaker management []

Navigating dry and wet suction drains []

CXR Interpretation []