



**NYSASN**  
**Pediatric Emergency Workshop**  
**March 20, 2010**

**LOCATION: Rochester Marriott Airport**  
**located at 1890 West Ridge Road, Rochester, NY 14615**  
**585-225-6880**

**(there is a limited number of rooms available if needed at \$119/night)**

*React and respond with professional calm...join us to learn and practice techniques for meeting emergency challenges in school settings! This comprehensive one-day program will cover Pediatric Trauma assessment, case studies, triage, planning for emergencies and legal concerns. Don't miss this wonderful opportunity to sharpen your skills. Due to the hands on clinical components of this training, registration will be limited to the first 100 requests.*

**PRESENTER: Janice Rogers, MS, RN, CS, CPNP-AC**

*Janice is a Pediatric Nurse Practitioner at the University of Rochester Medical Center Emergency Department in Rochester, NY. She also is Assistant Professor, at the University of Rochester Medical Center, School of Nursing.*

**Saturday, March 20<sup>th</sup>, 2010**

**Registration from 8:30-9:00am**  
**Conference begins promptly at 9:00am running until 5pm**

**Cost: \$100 per Participant**  
(This cost includes conference materials,  
continental breakfast and lunch)

*This activity has been submitted to the New York State Nurses Association for approval to award contact hours. The New York State Nurses Association is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.*

## **2010 NYSASN Pediatric Emergency Workshop Registration Form**

Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School District \_\_\_\_\_

School Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: Home (\_\_\_\_) \_\_\_\_\_ School (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

**Cost: \$100 per Participant**

**(This cost includes conference material, continental breakfast and lunch)**

Payment in the form of personal check, money order or purchase order must accompany registration. We are unable to accept credit cards at this time.

**Please make checks payable to NYSASN**

**Mail Completed Registration Form and Payment to:  
Cynthia Sharpe, Registrar  
3138 East River Road  
Grand Island, NY 14072**

**Registration Deadline: March 12, 2010**

Participation is limited to REGISTERED PROFESSIONAL NURSES  
It is the responsibility of the school nurse applicant to be sure the school district business office has mailed all forms and fees to the correct address. Questions may be sent to the Conference Registrar, Cynthia Sharpe, via email at nysasnweb@yahoo.com or by phone at 716-773-8850 ext 2 (w) or 716-773-2279 (h)