

7am	Registration & Continental Breakfast
745 am	Welcome Cheryl Hoying, PhD, RN, NEA-BC, Senior Vice President Cincinnati Children's Hospital Medical Center
8 am	Trauma Patient Simulator Thomas E. LeMaster, RN, MSN, MEd, REMT-P, Program Director Mike Moyer, MS, EMT-P, Manager Center For Simulation & Research, Cincinnati Children's Hospital Medical Center
9 am	Undiagnosed Cardiac Defects in the Newborn: Presentation & Interventions BethAnn Johnson, MD, Intensivist, Cincinnati Children's Hospital Medical Center
10 am	Break
1030 am	Creating a Patient Safety Culture Stephen E. Muething, MD, Assistant Vice President Patient Safety, Cincinnati Children's Hospital Medical Center
1130 am	Lunch & Exhibits
1230 pm	Training the Respiratory Therapist for a Special Delivery Unit at the Children's Hospital of Philadelphia Leane R. Soorikian, RRT-NPS, Respiratory Clinical Specialist Patricia Clifford, MSN, RNC, Clinical Nurse Specialist Newborn Intensive Care Unit, The Children's Hospital of Philadelphia
1230 pm	Trauma Patient Simulation Lab: Breakout Session #1 Northwest Territory A
130 pm	Respiratory Care for the Neuromuscular Patient Lisa F. Wolfe, MD, Assistant Professor, Northwestern University, Division of Pulmonary & Critical Care Medicine, Chicago, IL, Sponsored by Hill-Rom Inc
230 pm	Trauma Patient Simulation Lab: Breakout Session #2, Northwest Territory A
230 pm	Break/Exhibits
3 pm	The Great Debate: Closed Loop Oxygenation Utilization Rodney Daniels, MD, Clinical Fellow, Division of Critical Care Medicine Jenni L. Raake, MBA, RRT-NPS, Respiratory Clinical Manager, Heart Institute Brandy Seger, BS, RRT, Respiratory Clinical Manager, Pediatric Intensive Care Unit Cincinnati Children's Hospital Medical Center
3 pm 4 pm	Trauma Patient Simulation Lab: Breakout Session #3, Northwest Territory A Evaluation
7 pm – 10 pm	20th Anniversary Celebration @ The Brazenhead Pub <i>Taxi Service Available to Back o Great Wolf Lodge</i>



20th Annual Midwest Neonatal and Pediatric Care Conference



For Electronic Registration, Go To: www.cincinnatichildrens.org/respiratory Click: education options

For Group Discount Registration & Conference Information, contact:

Chana White: 513-636-4248 or 1-800-344-CHMC

7am	Registration & Continental Breakfast
745 am	Welcome Teresa A. Merk, RN, BSN, CMTE, C-NPT Clinical Manager, Transport Team Cincinnati Children's Hospital Medical Center
8 am	International Transport for the Hospital-Based Pediatric Transport Team Billy L. Hutchinson, BA, RRT-NPS, Senior Transport Therapist Transport Team, Texas Children's Hospital
9 am	Live 3D Guidance in the Interventional Radiology Suite Manish N. Patel, D.O., Assistant Professor Department of Radiology, Cincinnati Children's Hospital Medical Center
10 am	Break & Exhibits - Sequoia 1&2 Research Poster Open Forum – Northwest Territory A
1030 am	“Death of a Child”: Parent Panel Moderator: C. Jan Borgman, MSW, LISW-S, FT Pastoral Care, Cincinnati Children's Hospital Medical Center Parent Panel: Chris Lah, Beth Bauers, & Lamont Bryant
1130 am	Lunch – Pre-function area Exhibits – Sequoia 1&2 Research Poster Open Forum – Northwest Territory A
1230 pm	Crossing the Line with Patients and Families James A. Comodeca, Esq, Partner Dinsmore & Shohl LLP Peggy Maggio, Esq, Legal Department Tammy Parks, Risk Management Coordinator, Legal Department Cincinnati Children's Hospital Medical Center
130 pm	Aerosol Delivery in Pediatric Asthma Dominic P. Coppolo, MBA, RRT, FAARC, AE-C Director Clinical Strategy & Product Development, Monaghan Medical Corp, Cherry Valley, NY. Sponsored by Monaghan Medical Corporation
230 pm	Break Research Poster Open Forum – Northwest Territory A
245 pm	Lauren's List: A Patient's Wish List for Hospital Care Sally Sampson, Author and Parent
345 pm	Evaluations
4 pm	Adjournment



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Lodging is available for registration now at the Great Wolf Lodge - Mason, Ohio www.greatwolf.com/mason; give group code 1006CINC: \$149+tax (6/10 & 6/11) and \$179+tax (6/12)

Friday, June 11, 2010: 7pm to 10pm - 20th Anniversary Reception at the Brazenhead Pub

Taxi Service Available Back to the Great Wolf Lodge

Discounted Kings Island Tickets can be purchased in advance of the conference. The tickets are \$29.99 for adults & \$25.99 for jr/sr (over age 2 under 48" or age 62 or older). The tickets are good for usage June 10, 11, 12, & 13 only.

Whether you register electronically or use a printed registration form, please indicate the number of tickets you wish to purchase

Group Discount Conference Registration for non-CCHMC employees is available. 10% off registration fees for those that register by May 3, 2010. Call Chana White 513-636-4248 or 1-800-344-CHMC for more information.

6.25 contact hours will be awarded each day to nurses who attend the conference and complete an evaluation form

Cincinnati Children's Hospital Medical Center (OH-046/9-1-12) is an approved provider of continuing nursing education by the Ohio Nurses Association (OBN-001-91), an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

This conference has applied for continuing education credits from the American Association for Respiratory Care.

Online registration VISA & MasterCard only; AM EXP & checks mail to Cincinnati Children's Hospital, 3333 Burnet Ave - MLC 5032, Cincinnati, OH 45229, include the registration form. Make checks payable to RESPIRATORY CARE FUND.



20th Annual
Midwest
Neonatal and
Pediatric Care
Conference



Registration Fees: Includes breakfast, lunch, refreshments, contact hours, conference materials, and admission to the 20th Anniversary Celebration on Friday, June 11, 2010. If you are registering for one day only, please indicate on this form or on our electronic registration form which day you plan to attend.

Two Day Session: \$175 for 2 day sessions **Friday only:** \$140 for 1 day session **Saturday Only:** \$140 for 1 day session

Note: 10% off conference fees for those that register by May 3, 2010

Kings Island Tickets: \$29.99 Adults _____ \$29.99 Jr (Age 2 to 48") or Age 62 and over _____

Name: _____ E-mail: _____

Professional Title: RN LPN RT EMT/Paramedic (check box if applicable) Other _____

Mailing address: _____ City _____ State: _____ Zip _____

Phone number: () _____ Employer: _____

Employer Address: _____ City: _____ State: _____ Zip _____

Phone number: () _____ AARC Member? Yes No AARC# _____

Payment Method: Check Money Orders CCHMC Cost Transfer *(Mail in only)*

Credit Card: Visa Master Card *(Mail in, Fax, or On-line Registration)*

Account Number: _____ Exp Date: _____

Signature: _____