

## **ASPAN Select Seminar Series**

# ASPAN Select 1 - Buffalo, NY

Date: Saturday, November 5, 2022

Sign-In: 9 AM - 9:30 AM

**Program Time:** 9:30 AM - 10:45 PM

**Evaluations:** Access is granted after attendance verification – no later than 4 PM ET

the first business day after the sign in sheet is returned to the National Office.

Location: Buffalo Marriott at LECOM HARBORCENTER

Olmsted Room 95 Main Street Buffalo, NY 14203

https://www.marriott.com

#### Pre-Recorded Modules Include:

►Multimodal Pain Management Therapy and Adjuvants – Ramona Irabor MSN RN-BC AGCNS-BC CPAN *Target Audience:* 

All perianesthesia nurses

#### Outcome:

To enable the nurse to increase knowledge on multimodal pain management

#### Case Presentations:

Any case studies discussed during the seminar are fictional and do not reflect any real persons or events *Standards for Integrity and Independence:* 

The ASPAN ANCC Accredited Provider Unit will collect information from all individuals in a position to control content regarding financial relationships with ineligible companies, analyze the data for relevant financial relationships related to the educational content; and mitigate relevant financial relationships. The results of this analysis will be reported in the course presentation materials on the required handout.

### 1.25 Contact Hours

American Society of PeriAnesthesia Nurses, (ASPAN) is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.



Provider approved by the California Board of Registered Nursing, Provider Number CEP5197, for 1.25 contact hours.

Additional provider numbers: Alabama ABNP0074.

## Fee Schedule Cancellation Policy ■ Full refund upon receipt of documented notice of ☐ ASPAN Member Fee.....\$15.00 cancellation postmarked 30 days or more □ Non-Member Fee.....\$40.00 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 not be eligible for a refund. This cancellation policy applies regardless of when Register online at <a href="https://learn.aspan.org">https://learn.aspan.org</a>. you register. Refund will be determined by the date notice is received in the ASPAN National You must be logged in to register. If you do not have an Office in Cherry Hill, NJ. account, you will need to create a new account. ■ ASPAN reserves the right to cancel a seminar due to insufficient enrollment or any unforeseen Onsite registrations are not accepted. You must register at least circumstances. All fees will be fully refunded. one week prior to the event. ■ ASPAN cannot be responsible for limited enrollment due to room sizes in some facilities. Please note that if you have the RETIRED Membership status, you *cannot* earn contact hours through ASPAN. Please contact Register Early - space is limited! the National Office to update your membership to ACTIVE, if you wish to receive contact hours. REMEMBER: A printed syllabus will not be provided. ❖ A link to ASPAN Learn 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 1, Buffalo, NY, Saturday, November 5, 2022 (AS1BNY2292) Name: ASPAN Member # Address: \_\_\_\_\_ \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone (Work, Home, Cell): \_\_\_\_\_\_ Fax: \_\_\_\_\_\_ Fax: \_\_\_\_\_ Email (mandatory): \_\_\_

Federal ID# 06-1024058

FOR MORE INFORMATION OR TO RETURN THIS FORM

Email: dingram@aspan.org

Signature: \_\_\_\_\_

□ VISA

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

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

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■ American Express

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Register online at <a href="https://learn.aspan.org">https://learn.aspan.org</a>