

Area L AHEC  
Presents



Wednesday, March 31, 2010  
Registration: 7:30 a.m.  
Program: 8:00 a.m. – 4:30 p.m.  
Cost for EMS: \$20.00  
Lunch on your own

Area L AHEC  
Teleconference Room  
1631 South Wesleyan Boulevard  
Rocky Mount, North Carolina

**Trauma Boot Camp**  
Patty C. Collins, MAEd, BSN, RN

**Target Audience:** The target audience will include nurses, EMS personnel, and any other disciplines involved in providing care to trauma patients.

**Program Purpose:** This one-day program is designed to provide nurses, EMS personnel, and any other discipline that provides trauma care with a working knowledge of the major components of trauma management. Appropriate, efficient, and effective initial response is critical to the patient's prognosis and long-term outcome.

**Objectives:** Upon completion of the program, the participant should be able to:

- ❖ Differentiate the various causes of trauma and how this results in physical and psychosocial injury
- ❖ Interpret the mechanism of injury for car crashes and gunshot wounds
- ❖ Apply skills to correctly perform a head-to-toe physical assessment of a trauma patient
- ❖ Discuss the physical aspects of shock and head, neck, chest, abdominal, genitourinary, extremity, burn, OB, and geriatric trauma
- ❖ Interpret steps in forensics management when providing nursing care to the homicide or suicide patient

**CNE:** This program provides **7.0** Continuing Nursing Education (CNE) hours. Area L AHEC is approved as a provider of continuing education in nursing by the North Carolina Nurses Association, which is accredited as an approver of continuing education in nursing by the American Nurses Credentialing Center's Commission on Accreditation.

**CEU:** For participating in this program in its entirety, Area L AHEC will award **7.0** contact hours and **0.70** continuing education units.

**REGISTRATION FEE:** The registration fee is **\$20.00**. The registration fee covers registration, materials, credit, and instruction. Participants who cancel by the registration deadline will receive a refund for the amount they have paid **less 30%**, which must be kept to defray handling costs. There will be no registration fees returned on cancellations that are made after March 25, 2010. Substitutes are generally accepted. Unforeseen circumstances may necessitate speaker substitution or program cancellation. If Area L AHEC cancels the program, all registrants will be notified and refunds will be given as appropriate.

For additional information please call Ms. Deborah Hyman, Area L AHEC, at (252) 972-6958 or e-mail [deborah.hyman@arealahec.org](mailto:deborah.hyman@arealahec.org).



**REGISTRATION FORM**

**Trauma Boot Camp**  
**Wednesday, March 31, 2010**



**NOTE: You must complete this registration form in its entirety to confirm your registration. ONLY OFFICIALLY REGISTERED PERSONS MAY BE PRESENT DURING AHEC PROGRAMS.**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last 4 digits of SS#: \_\_\_\_\_ Degree(s): \_\_\_\_\_  
Specialty/Position: \_\_\_\_\_ Employer: \_\_\_\_\_ Dept. or Section: \_\_\_\_\_  
Employer Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
E-Mail: \_\_\_\_\_ Prefer Mail at: \_\_\_\_\_ Office or \_\_\_\_\_ Home

In order to register, detach this portion and mail with a check made payable to Area L AHEC:

Attention: Registration Area L AHEC Post Office Drawer 7368 Rocky Mount, NC 27804-0368 Telephone: (252) 972-6958 FAX: (252) 972-0419	CASCE Number: Discipline: Registration fee:	30076 Nursing/EMS \$20.00	Signature _____ Payment: By Individual [ ] Agency [ ]
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**NOTE:** If you require reasonable accommodations for a disability in order to participate fully in this continuing education activity, please contact Ms. Deborah Hyman by phone (252) 972-6958, or by fax (252) 972-0419, no later than fourteen days before the activity.



Area L AHEC  
Post Office Drawer 7368  
Rocky Mount, NC 27804-0368

**Nonprofit Organization**  
**U.S. Postage**  
**PAID**  
**Rocky Mount**  
**Permit #21**



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