

# Evidence Review in Emergency Medicine 2009

Following on from last year's success, the NSW faculty of ACEM in conjunction with the PHEMC group takes pride in presenting the NSW Scientific meeting. The meeting consists of small group sessions reviewing the latest evidence in emergency medicine.

Through a series of interactive workshops, Rod Bishop, Anthony Delaney, Alan Giles & Geoff Isbister will critically examine the latest emergency medicine literature and provide practical insights into its clinical application.

**DATES: Thursday 12 & Friday 13 March 2009**

**VENUE: Crowne Plaza, Terrigal NSW**

## **PROGRAMME:**

### **Thursday 12 March**

0900 – 0930 Registration  
0930 – 1130 Geoff Isbister & Colin Page – Toxicology Evidence  
1130 – 1200 Morning Tea  
1200 – 1330 4.10 Presentations  
1330 – 1430 Lunch  
1430 – 1630 Anthony Delaney – Evidence in Critical Care  
1800 – 1900 Drinks

### **Friday 13 March**

0900 – 0930 Registration  
0930 – 1130 Rod Bishop – Evidence behind Controversies  
1130 – 1200 Morning Tea  
1200 – 1300 4.10 Presentations  
1300 – 1400 Lunch  
1400 – 1600 Alan Giles – Trauma Evidence



# EVIDENCE REVIEW IN EMERGENCY MEDICINE

Thursday 12 & Friday 13 March 2009

Surname ..... First Name.....

Hospital/Organisation.....

Position .....

Address.....

Suburb..... Postcode.....

Email.....

Phone..... Mobile.....

## REGISTRATION

	Before 31 January 2009	After 31 January 2009	
<b>SPECIALIST</b>	\$ 685.00	\$ 735.00	_____
Day Only	\$ 475.00	\$ 525.00	_____
Please indicate which day	_____		
<b>TRAINEE</b>	\$ 345.00	\$ 345.00	_____
Day only	\$ 245.00	\$ 245.00	_____
Please indicate which day	_____		
<b>OTHER</b>	\$ 635.00	\$ 685.00	_____
Day only	\$ 425.00	\$ 475.00	_____
Please indicate which day	_____		

## ACCOMMODATION

**Full Registration includes accommodation on Thursday 12 & Breakfast on Friday 13 March at the Crowne Plaza**

Please tick that you require accommodation  **included**

Extra nights accommodation & Breakfast are available @ \$205.00 per person per night  
Please indicate extra date/dates you require \_\_\_\_\_

## TOTAL

\$.....

**DUE TO THE FORMAT OF THIS MEETING PLACES ARE STRICTLY LIMITED**

Tax Invoice (ABN 86 398 340 872). This document will be a Tax Invoice.  
Confirmation and receipt will be sent via email.

I have enclosed a cheque (Made Payable to PHEMC Inc) OR

I wish to pay by credit card:  Visa  Bankcard  Mastercard

Card Number \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Expiry Date \_\_\_\_ / \_\_\_\_

Card Holder Name \_\_\_\_\_ Signature \_\_\_\_\_

REGISTRATION BY FAX 02 9481 7650

OR c/- Conference Magic, 7 Fiona Rd, Beecroft, NSW 2119 More information call Denby on 02 9481 7650

**FOR ALL 4.10 PRESENTATION ENQUIRIES PLEASE CONTACT  
Shalini Arunanthy on shalin\_arunanthy@wsahs.nsw.gov.au**