

S.T.A.B.L.E.

New Hampshire AWHONN presents "S.T.A.B.L.E." a course for nursery, OB and ED nurses, physicians, and respiratory therapists in community hospitals who care for sick newborns. It addresses what follows after the Neonatal Resuscitation Program, emphasizing six important areas of concern: Sugar, Temperature, Artificial Breathing, Blood Pressure, Laboratory Tests, and Emotional Support. The mnemonic-based program developed by Kris Karlsen, PhD, MSN, RNC, NNP, is designed to optimize learning, retention, and recall of information.

Our instructor, Lisa McNeerney, BSJ, MA, RN, is a clinical staff educator at Parkland Medical Center, Derry, NH.

IMPORTANT ACTION ITEMS FOR S.T.A.B.L.E. ATTENDEES

- * Participants are requested to read the Learner Manual (5th edition) prior to coming to class. Books may be borrowed, if they are available, at the participant's hospital or they may be ordered by going either to www.aap.org or www.stableprogram.org. (Allow two weeks for delivery of text book).
- * Your e-mail or mailing address are necessary in order to send you a pre-test that you will need to complete prior to the class.

Registration begins at 7:30 a.m. Class starts promptly at 8:00 a.m. and will run until 4:30 p.m.

Date: Friday, March 2, 2012

Time: 8:00 am - 4:30 pm (Registration begins at 7:30 a.m.)

Location: Concord Hospital

250 Pleasant St

Concord, NH 03301 (Room A, 3rd floor, Payson Center)

Breakfast and lunch will be provided!

*"Please bring 2 pencils, calculator,
2 pens, ruler and a sweater"*

FEE: AWHONN MEMBERS - \$ 95.00 NON-MEMBERS - \$ 105.00

8 CONTACT HOURS WILL BE AWARDED

For further information, call Ann Hillman at (603) 227-7000, ext. 2909 or e-mail: ahillman@crhc.org

NO CONFIRMATION OF REGISTRATION WILL BE SENT!

MEMBERSHIP NUMBER REQUIRED ON THE REGISTRATION FORM!

REGISTRATION

CHECKS PAYABLE TO: NH AWHONN or register online at www.nhawhonn.org

S.T.A.B.L.E. Course, 3/2/12

Please mail registration form and check to:

Ann Hillman, The Family Place at Concord Hospital, 250 Pleasant Street, Concord, NH 03301

NAME: _____ TITLE: _____

ORGANIZATION: _____ PHONE: _____

MAILING ADDRESS: _____ REQUIRED
AWHONN # _____

CITY: _____ STATE: _____ ZIP: _____

E-Mail: _____

FOR DIRECTIONS TO THE WORKSHOP, PLEASE GO TO Concord Hospital web-site www.concordhospital.org

FOR MORE INFORMATION ON OUR WORKSHOPS GO TO www.nhawhonn.org. CLICK ON EDUCATIONAL PROGRAMS FOR 2012.

Ann Hillman
The Family Place at Concord Hospital
250 Pleasant Street
Concord, NH 03301

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Concord, NH

NEW HAMPSHIRE SECTION
AWHONN 
*Association of Women's Health,
Obstetric and Neonatal Nurses*

CANCELLATION AND REFUNDS: Notify NH AWHONN by e-mail (ahillman@crhc.org) *at least 72 hours* ahead of a conference if you will not be able to attend. A processing charge of 25% of the registration fee will be assessed. No refund will be made for failure to notify NH AWHONN *less than 72 hours* ahead of conference.