

FAX FORM TO:
615.255.3528
 or mail to:
 TPA
 500 Church Street
 Suite 650
 Nashville, TN 37219
 QUESTIONS?
 Call 615.256.3023

CARING FOR THE AGES

2010 GERIATRIC & LONG-TERM CARE CONFERENCE

BROUGHT TO YOU BY THE
 Tennessee Society of Long-Term Care Pharmacists
 AND THE Tennessee Pharmacists Association

24th Annual Seminar · August 18-19, 2010 · Franklin Marriott Cool Springs · Franklin, TN

T E N T A T I V E A G E N D A

WEDNESDAY, AUGUST 18, 2010 (7.5)

- 7:30 am REGISTRATION and COFFEE
- 8:00 am **Recent Pharmacological Developments Affecting Long-Term Care (2.0)**
 064-000-10-137-L01-P
 Glen Farr, Pharm.D.
- 10:00 am REFRESHMENT BREAK
- 10:15 am **Health Care Reform: DEA, Implementing Technology, Improving Quality, and Enhancing Access (2.0)**
 064-000-10-138-L04-P
 Rachelle F. Spiro, R.Ph., FASCP, President, ASCP
- 12:15 pm LUNCH BREAK and VISIT WITH EXHIBITORS
- 1:15 pm **Diabetes Management in the Elderly (2.0)**
 064-000-10-139-L01-P
 Scot Drab, Pharm.D.
- 3:15 pm REFRESHMENT BREAK
- 3:30 pm **Cardiovascular Update (1.5)**
 064-000-10-140-L01-P
 Kelly Rogers, Pharm.D.
- 5:00 pm ADJOURNMENT

THURSDAY, AUGUST 19, 2010 (7.5)

- 7:30 am REGISTRATION and COFFEE
- 8:00 am **Medication Management and Palliative Care: Preparing for the End (1.0)**
 064-000-10-141-L01-P
 Nathan Rawls, Pharm.D.
- 9:05 am **Nursing Home Survey and Regulations Panel (1.0)** 064-000-10-142-L03-P
 Diane Crutchfield, Pharm.D., CGP, Moderator
- 10:05 am BREAK
- 10:15 am **Psychotherapy of Depression: Treatment Resistance Case Studies (1.0)**
 064-000-10-143-L01-P
 Nathan Rawls, Pharm.D.
- 11:15 am LUNCH
- 12:15 pm **Best Practices and Lessons Learned Panel (1.0)** 064-000-10-144-L04-P
 Linda O'Bannon, Pharm.D., Moderator
- 1:20 pm **Infectious Diseases: C-DIFF and MRSA (1.5)** 064-000-10-145-L01-P
- 2:50 pm BREAK
- 3:05 pm **Legal & Regulatory Issues in Long-Term Care Practices (1.0)**
 064-000-10-146-L03-P
 Kevin Eidson, Pharm.D., Executive Director, Tennessee Board of Pharmacy
- 4:10 pm **TBD (1.0)** 064-000-10-147-L01-P
- 5:10 pm ADJOURNMENT

REGISTRATION is required for admission to the Conference. Registration includes all educational sessions, a copy of the handouts, access to the exhibits, refreshment breaks, and lunches. One-day registrants are entitled to the handouts and all sessions and lunch for that day.

Please copy form for additional registrants.

I will attend the seminar on (check one): August 18 & 19
 Wednesday, August 18, only Thursday, August 19, only
 Information entered below will be used to update your record in the TPA database.

_____ FULL NAME

_____ PREFERRED/CALL-BY NAME _____ TENN. LICENSE NO. _____

_____ PLACE OF EMPLOYMENT _____ STORE NO. _____

_____ PREFERRED ADDRESS FOR TPA CORRESPONDENCE _____ THIS ADDRESS IS MY:
 HOME WORK

_____ CITY _____ STATE _____ ZIP _____

_____ WORK PHONE _____ HOME PHONE _____ CELL PHONE _____

_____ FAX _____ MEMBERSHIP RECEIPT NO. (SEE DUES RECEIPT OR CALL TPA) _____

_____ EMAIL ADDRESS _____

_____ ALTERNATE EMAIL ADDRESS _____

HOTEL INFORMATION

Make your hotel reservation at the Franklin Marriott Cool Springs at the TPA rate of \$120.00 by calling 615-261-6100 by **July 9**.

CANCELLATION

All written cancellations received by August 1 will receive a refund minus \$50 administration fee. No refunds will be issued for cancellations received after August 1, 2010.

Faxed or Postmarked:

TPA MEMBER

	EARLY	After 7/9
___ Pharmacist Full Registration	\$275	\$295
___ Pharmacist One-Day Registration	\$150	\$160

NON-MEMBER

___ Pharmacist Full Registration	\$360	\$395
___ Pharmacist One-Day Registration	\$240	\$275

PAYMENT

Amount remitted = \$ _____

Check Credit Card: ___ Visa ___ MasterCard ___ AmEx

_____ NAME ON CARD

_____ CREDIT CARD NUMBER

Security Code: 3 digits after card number on back of Visa and MasterCard; 4 digits above card number on front of AmEx.

_____ EXPIRATION DATE

_____ SECURITY CODE

_____ CREDIT CARD BILLING ADDRESS IF DIFFERENT FROM ABOVE

_____ AUTHORIZED SIGNATURE (REQUIRED)

Request for Special Accommodations: If you have a disability requiring special assistance to attend this meeting, please contact TPA at 615-256-3023.

Dietary Requirements: ___ Vegetarian ___ Vegan