



EMERGENCY MEDICINE RESEARCH DAY 2017

Thursday, April 13, 2017

07:00-16:00

ACH Amphitheatre, Alberta Children's Hospital

DR. AMY PLINT

Senior Scientist, CHEO Research Institute

Physician, Director of Emergency Medicine, CHEO

Associate Professor, Department of Medicine,
Faculty of Medicine, University of Ottawa

University of Ottawa Research Chair in
Pediatric Emergency Medicine



INTERSECTION BETWEEN CLINICAL
CARE AND CLINICAL RESEARCH IN
THE EMERGENCY DEPARTMENT

EMERGENCY MEDICINE RESEARCH DAY - APRIL 13th, 2017

ACH Amphitheatre, Alberta Children's Hospital

There is **no charge** for attending this event. For planning purposes, **we request advance registration**. Receipt of your completed registration form will be acknowledged by email.

Note: Drop-in registration will also be accepted as space and catering limits permit.

When you check in at the registration desk on April 13th, you will receive a folder containing all conference materials. You may attend any or all of the presentations. It is expected that you will evaluate each presentation that you attend. You **must** complete and submit the study credit form and the evaluation form to staff at the registration desk after the last session you attend to receive CME credit.

A certificate of participation will be sent to you after the conference by email.

For more information on this event, please contact:

Kat Koger

Phone: 403-944-3264

Email: katrina.koger@albertahealthservices.ca

Registration form for 2017 Emergency Medicine Research Day:

(Advance Registration Closes **March 31st, 2017**. Advance registration guarantees a conference package.)

Name: _____

Address: _____

City/Town: _____

Province: _____ **Postal Code:** _____

Email: _____

Contact Phone #: (____) _____ **Fax #:** (____) _____

Profession: (check one) ☐ MD ☐ RN ☐ Other (specify): _____

Registration information is collected under the authority of the "Freedom of Information and Protection of Privacy Act" and the "Universities Act". The information you provide is required to register you in the course, prepare material for your use and will be used to notify you of other courses or pertinent information. If you have any questions about the collection, use and storage of this information, please contact Physician Education Services (403) 943-2946.

Email, mail or fax completed registration form to:

Katrina Koger

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