

Introductory Palliative Care Course

Course Registration Form

This is a one day workshop for allied health, registered and enrolled nurses in the acute care setting. The course aims to assist clinicians develop an understanding of palliative care principles, undertake symptom assessment and management required to care for people with a life limiting illness, including best practice end-of-life care. This is an interactive and practical day including self-care and pain management strategies, pain assessment tools and an opioid conversion workshop.

I am registering to attend the INTRODUCTORY PALLIATIVE CARE Course commencing: _____

☐ SESLHD nursing
employee

Subsidized by SESLHD

☐ External nursing/allied health participant \$75.00 (plus GST)

First Name: _____ Last Name: _____

Work location: _____ Level/Role: _____

Postal Address: _____ Post Code: _____

Phone: _____ Email: _____

Cancellation Terms and Conditions:

Cancellations within 5 weeks of the course date will incur the full course fee. If you are applying for a refund outside the 5 week period then a full refund will be offered or the option to reschedule the course to another date.

☐ I have read, and agree to the above Cancellation Terms and Conditions.

I will be paying by:

☐ Cheque (including address and phone contact details on back of cheque)

☐ Visa / Mastercard (complete details below)

CREDIT CARD NUMBER (exp)

NAME ON CARD

AMOUNT: \$ _____

SIGNATURE

Please return completed registration form to Kylie Fraser at the St George Clinical Skills Centre.

Kylie.Fraser@health.nsw.gov.au

Fax: 02 9113 1839 Ph: 02 9113 2425