



5 Concourse Parkway, Ste 3000 Atlanta, GA 30328

HOSPICE CERTIFICATION REVIEW COURSE FOR RNs AND LPNs

GHPCO, with Hospice of Northeast Georgia Medical Center, presents a 2-day workshop to provide review of materials and information prior to taking the Certification examination for Hospice and Palliative Nurses (both RNs and LPNs). Course material is based on the approved curriculum authorized by the Hospice and Palliative Nurses Association, with additional supplemental materials provided for review and study.

When: JULY 29 - 30, 2010
9am to 5pm each day

Where: Hospice of Northeast GA Medical Center
Lanier Campus - Blue Ridge Conference Room
675 WHITE SULPHUR RD, GAINESVILLE, GA 30501

Cost: GHPCO Members = \$150, non-members = \$250

**** Fees include continental breakfasts, breaks, materials, lunches and CEUs ****

16.8 CEUs for Nurses will be provided

(GHPCO is an approved provider of Nursing CEUs by the Alabama Board of Nursing, provider # ABNP1402)

Registration Deadline: July 22nd, 2010 - cancellation prior to this date will result in a \$35 processing fee; **no cancellations after July 22nd, 2010** - substitutions accepted for paid registrations.

HOSPICE CERTIFICATION REVIEW COURSE FOR RNS AND LPNS (GENERALIST)

FACULTY:

Nancy Medlock, RN CHPN MPA, Director of Education - Columbus Hospice

Jennifer Hale, RN BS CHPN, Executive Director, GHPCO

Ebbie Tompkins, RN CHPN BSN, Hospice and Palliative Care Liaison - Columbus Hospice

**To Register: Complete form and return with payment to GHPCO by mail or fax
If mailing, please do so by July 15th to ensure timely delivery!**

Name: _____ email: _____ phone: _____

Organization: _____ Member? Y N

Total number of **member** registrants: _____ @ \$150/person = _____

Total number of **non-member** registrants: _____ @ \$250/person = _____

Total = _____

Payment method: _____ check (#_____) _____ Credit card

Credit card info: VISA MasterCard AMEX

Name on card: _____ Card Number: _____

Billing Address: _____ zip _____ Exp date: _____ V Code: _____

Name(s) of attendee(s): _____

Mail to: GHPCO – Jennifer Hale

Fax to: 678-623-0175

5 Concourse Pkwy, Ste 3000

email: jennifer@ghpco.org

Atlanta, GA 30328