

Advanced Course in **TOXICOLOGICAL** **EMERGENCIES**

Friday 22 July 2016 (full day) and Saturday 23 July 2016
(half day)

**Seminar Room 1, University Club, UWA CAMPUS
NEDLANDS WA**

An advanced course in the assessment and management of acute poisoning tailored for specialists and advanced trainees and general practitioners in adult and paediatric Emergency Medicine and Intensive Care.

The WA Toxicology Service comprise Clinical Toxicologists within the national poison centre network and have a wealth of bedside experience in the care of toxicological presentations. They are enthusiastic and experienced educators having taught widely at national and international levels. They have recently authored the 3rd edition *Toxicology Handbook* that is provided for course participants.

Major Topics

General approach to the poisoned patient

Resuscitation

ECG in toxicology

Common poisonings

Potentially lethal poisonings

Paediatric poisoning

Recent advances in envenoming

- **Cost (GST Inclusive): \$620 for doctors in training (Advanced trainees/Registrars/RMOs)**
\$670 for Specialists
- This is a one and a half day course and includes tuition, meals and refreshments, course material and a copy of the Toxicology Handbook (3rd ed).
- **Registration queries:** Roz Jaworski (*Email:* Roz.Jaworski@uwa.edu.au) Ph: (08) 9346 4354
- **Course queries:** Dr Ioana Vlad (*Email:* Ioana.Vlad@health.wa.gov.au)
- **This activity has not been submitted to the RACGP for approval in the CPD program. However, GPs may self-apply for category 1 points via the RACGP website.**

To register, please complete the attached Registration Form



REGISTRATION FORM

Advanced Course in Toxicological Emergencies University Club, UWA Campus, 22 and 23 July 2016

NAME -----

ADDRESS -----

TELEPHONE NO -----

EMAIL ADDRESS -----

FOR CATERING PURPOSES PLEASE INDICATE IF YOU HAVE ANY SPECIAL DIETARY REQUIREMENTS:

- Vegetarian
 Vegan
 Other (please indicate) -----

Payment: (a tax invoice/receipt will be issued upon receipt of payment)

Credit Card (*Diners or AMEX not accepted*)

Visa Card MasterCard

Credit card payment amount: \$.....

Cardholder's full name -----

Card Number

Expiry Date: /

Signature of cardholder

If you would prefer to make payment via direct credit, please email Roz Jaworski for details.

Registration form to be returned to:

Roz Jaworski
Emergency Medicine Academic Unit
2nd Floor, R Block, QE11 Medical Centre
NEDLANDS WA 6009
Email: Roz.Jaworski@uwa.edu.au