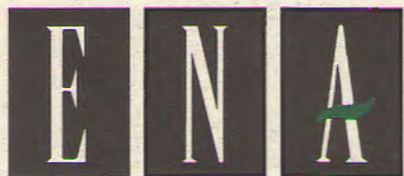


# Setting the Pace '99

Saratoga Springs, New York



EMERGENCY NURSES ASSOCIATION  
New York State Council

P.O. Box 23451  
Rochester, New York 14692

*Annual Conference / April 30 & May 1, 1999*

# Conference Schedule

Thursday, April 29, 1999

- 8:00a - 6:00p Council Meeting - open to all  
6:00a - 6:30p Conference Registration  
6:30a - 7:30p Opening Cocktail Reception

Friday, April 30, 1999

- 7:00a - 8:00p Registration - Continental Breakfast with Exhibitors  
8:00a - 9:30p **Rekindling the Flame: Nurturing the Nursing Spirit In You**  
Cathy Norton Lind  
9:30a - 10:15p Coffee with Exhibitors

BREAKOUT SESSION (select A or B)

- 10:15a - 11:45p **A Developing a Team Approach: Finding a Common Culture That Work**  
Cathy Norton Lind  
**B Pediatric Puzzlers: An Advance Practice Approach**  
Susan M. Fendrick  
11:45a - 1:15p Lunch - Dessert with Exhibitors

BREAKOUT SESSIONS (Select C or D)

- 1:15p - 2:30p **C Managing Acute Pediatric Airway Diseases**  
Susan M. Fendrick  
**D Forensic Nursing Applications in the Emergency Setting - Rena M. Rovere**  
2:30p - 3:15p Break with Exhibitors

BREAKOUT SESSIONS (select E or F)

- 3:15p - 4:30p **E Gastric Decontamination - Daniel J. Cobaugh**  
**F Always Sick: Dealing with Munchausen's Syndrome - Terry M. Foster**  
5:00p - 7:00p Chinese Auction/ Cocktail Reception  
7:00p - **Awards Banquet "A Night at the Races"**  
DJ/Dancing (wear your racing silks)

Saturday, May 1, 1999

- 8:00a - 8:30p Continental Breakfast  
8:30a - 10:00p **Mistakes: Yours, Mine and Ours - Ruth Hart**  
10:00a - 10:30p Coffee Break  
10:30a - 12:00p **Latex Sensitization: Do We Have the Sense to Stop It!**  
Michelle Silliker  
12:00p - 1:00p Lunch  
1:00p - 2:30p **Only an Emergency Nurse Would Understand This!**  
Terry M. Foster

*ENA Continuing Education Contact Hours have been applied for.*

# Setting the Pace '98

## Conference Registration

Name \_\_\_\_\_ ENA # \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Hospital/Organization \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
 Phone \_\_\_\_\_ SS# \_\_\_\_\_

Session Choices: (circle one for each time)

TOTAL FEE ENCLOSED \_\_\_\_\_

Friday  
 10:15      A      B  
 1:15        C      D  
 3:15        E      F

Make checks payable to: NYSCENA

Mail to: Carol Vosburgh  
 374 Victory Highway  
 Painted Post, NY 14870  
 (607) 962-5394

Thank you for requesting reservations at the Sheraton Saratoga Springs. Our entire staff would like to extend a warm welcome to you during your upcoming meeting.

YOUR RESERVATION WILL BE CONFIRMED UPON RECEIPT OF ONE NIGHT'S DEPOSIT. ADVANCE DEPOSIT IS REFUNDABLE IF RESERVATION IS CANCELLED 72 HOURS IN ADVANCE.

Reservations must be received no later than the cut off date (below) in order to receive the discounted group rate. Otherwise, the full published rates will apply.

If the room will be shared by more than one person, please include the names of the additional occupants.

Check out time is 11:00 a.m. and rooms may not be available for check in until 3:00 p.m.



**Sheraton**  
**SARATOGA SPRINGS**

**WELCOMES**

**NYS EMERGENCY NURSES**

April 28, 1999

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 May 1, 1999

**CUT OFF DATE**

**Wednesday, April 7, 1999**

Arrival Date: \_\_\_\_\_

Departure Date: \_\_\_\_\_

TO GUARANTEE RESERVATION ONLY

Credit Card No. \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Expiration Date \_\_\_\_\_

Credit Card will be used for:

Guarantee Only \_\_\_\_\_ Payment of Charges \_\_\_\_\_

PRINT OR TYPE

NAME: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE NO.: \_\_\_\_\_

SHARING ROOM WITH: \_\_\_\_\_

\$97.00 single occupancy, per room, per night • \$107.00 double occupancy, per room, per night  
 (Rates do not include 11% sales tax.)

PLEASE CHECK PREFERRED ACCOMMODATIONS:    King Size Bed \_\_\_\_\_    2 Double Beds \_\_\_\_\_

The Hotel will attempt to accommodate your request; however, at times, this may not be possible, but we will provide the best available room.

MAKE CHECK OR MONEY ORDER PAYABLE TO:

SHERATON SARATOGA SPRINGS  
 HOTEL AND CONFERENCE CENTER  
 534 BROADWAY  
 SARATOGA SPRINGS, NY 12866

DO NOT SEND CURRENCY

TELEPHONE (518) 584-4000  
 FAX (518) 584-7430

# Conference Faculty

## FEATURED SPEAKER

**Terry M. Foster, RN, MSN, CEN, CCRN**

*Clinical Nurse Specialist*

Critical Care & Emergency Department

St. Elizabeth's Medical Center

Covington, KY

## GUEST FACULTY

**Daniel J. Cobaugh, Pharm.D., ABAT**

*Managing Director*

Finger Lakes Regional Poison Control Center

Assistant Professor of Emergency Medicine

University of Rochester Medical Center

Rochester, NY

**Susan M. Fendrick, RN, MSN, CNS, PNP**

*Nurse Manager, Clinical Nurse Specialist,*

*Pediatric Nurse Practitioner*

United Health Services

Johnson City, NY

**Ruth Hart, MD, FACEP**

*Clinical Assistant Professor, Emergency Medicine*

SUNY - Health Science Center

Syracuse, NY

**Cathy Norton Lind, RN, MSN, CEN, FNP**

*Director of Nursing*

Emergency and Ambulatory Care Services

Bellevue Hospital

New York, NY

**Rena M. Rovere, RN, MS, CEN, CNS**

*Sexual Assault Program Director/*

*Clinical Nurse Specialist*

Emergency Dept.

Albany Medical Center

Albany, NY

**Michelle Silliker, RN, CEN, EMT-D**

*Assistant Nurse Manager*

Emergency Department

Olean General Hospital

Olean, NY

# Conference Fee

FEES:	Postmarked by April 7		Postmarked after April 7	
	ENA Member	Non Member	ENA Member	Non Member
Both Days	\$175	\$195	\$195	\$215
Friday Only <i>(does not include Banquet)</i>	\$100	\$110	\$115	\$120
Saturday Only	\$75	\$80	\$90	\$95

Guest Banquet Fee \$30

*All prices include breaks, meals and materials for that day*

REFUND POLICY: Received in writing 15 days prior – 75%, Received in writing 10 days prior – 50%

All registrations postmarked after April 7, 1999 will be processed at late registration fee.

On-site registration will be accepted on a space available basis.

HOTEL REGISTRATION: You are responsible for making your own hotel reservations.

## DIRECTIONS TO SHERATON SARATOGA SPRINGS:

**From North:**

Take I-87 (Northway) South to Exit 15 (Route 50). Travel West for 1 mile.

**From South:**

Take I-87 (NYS Thruway) North to Exit 24 at Albany. Follow I-87 (Northway) North to Exit 15 (Route 50). Travel West for 1-1/2 miles.

Please contact the hotel for further information.

## Conference Committee

Linda Yonkin, RN, CEN – Chair  
Kathy Conboy, RN, BS, CEN  
Mary Hayes, RN, MSN, CEN  
Marylou Killian, RNC, MS, CS, CEN  
Susan D. Knapp, RN, BS, CEN  
Dottie Krause, RN, CEN  
Anna McClane, RN, BA, BS  
Carol Vosburgh, RN, BSN, CEN  
Mel Wilson, RN, BA, BS, CEN

Bulk Rate  
U.S. Postage  
**PAID**  
Rochester, NY  
Permit No. 1404

EMERGENCY NURSES ASSOCIATION  
New York State Council  
P.O. Box 23451  
Rochester, New York 14692

