

APNA Updates in Primary Health Care Workshop



Refresh your knowledge and skills with the newest recruit to our CPD events calendar!

REGISTER NOW

This workshop delves into the nitty gritty, and provides you with a thorough update of various topics you encounter in your day to day work life. The ever-changing program keeps things fresh and diverse, and allows for something new at each event. Session information is available on our website, www.apna.asn.au/education/updates

Members can access this event for \$200

Day one of this workshop includes presentations and case studies presented in conjunction with Perth Children's Hospital. A diverse range of topics to be explored include:

- Eczema
- Allergy
- Anaphylaxis
- Asthma
- Immunotherapy

Day two of this workshop continues to provide a fresh and diverse update to Primary Health Care! Topics covered are:

- Men's Health by Healthy Male
- Iron workshop, including iron infusion, by Vifor Pharma

Don't miss out! Register today.

REGISTRATION

WHERE: ATI-Mirage
Level 1, Cloisters
863 Hay Street,
Perth CBD

DATE: Tuesday 08 October
and Wednesday
09 October

9.00am to 5.00pm both days
Registration 8.40am

APNA member \$200
Non-member \$450

Registration includes resources, completion certificate, full day catering and an opportunity for two days of professional development and support.

FIND OUT MORE:

e: events@apna.asn.au
ph: 1300 303 184
fax: 03 9322 9599
web: apna.asn.au/events

YOUR DETAILS

Name.....
Date of birth / / APNA Member Number (if applicable)
Email Phone
Health Care Setting: General Practice Other
Organisation Postcode
Nursing qualification: EN RN Nurse Practitioner Other
Career stage: recent grad experienced nurse, new to primary health care
 experienced nurse, skilled in primary health care
Dietary requirements/special needs

PAYMENT

Do you wish to join APNA today to access the member rate?
 Yes, \$294 No, thank you
Registration: \$ Promo code:
TOTAL (AUD): \$ Promo discount: \$
 Please debit my credit card MasterCard/Visa
Card number [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] []
Expiry date [] [] [] [] CVV [] [] []
Cardholder's name
I have paid via direct deposit on / / referencing my first and last name in the transaction description.
BSB: 033 165 Account number: 182 624 Account name: APNA
Signature: Date: / /

