



Phone Toll Free: (888) 459-4913
or Fax: (888) 842-7442

Schedule a group class at your facility!

Short IV Insertion Class 2017

<http://www.piccresource.com>

Short IV Insertion Class Overview: Prerequisites: Designed for RN, LPN, NP, PA, MD, RT and other healthcare personnel. **NOTICE:** It is the responsibility of the program attendee to ensure that the course subject matter is within the attendee's clinical scope of practice prior to signing up for the program, All attendees, and in particular non-licensed healthcare professionals must be diligent to ensure attendance is appropriate for their profession.

- * Pre-procedure steps
- * Order verification
- * Patient Identification
- * Patient teaching
- * Anatomy and Physiology related to peripheral short IV catheter insertion
- * INS Standards, AVA, JC, CDC guidelines & recommendations
- * Preparation of supplies and equipment
- * Patient and clinician comfort
- * Vein site selection
- * Catheter and introducer device and size election
- * Use of visualization aide technologies
- * Site preparation
- * Insertion & flushing procedures
- * Catheter securement
- * Documentation
- * Complication identification and management
- * Legal Issues
- * Common problems
- * Tips for success
- * Simulated IV catheter insertions lab practicum
- * Certificate of contact hours awarded from ANCC Approver valid nationally**
- * Instruction led by practicing infusion and vascular access nurse specialist (CRNI & VA-BC) with 20+ years experience.

FLYER, ISSUE 38 UPDATE:

May 20TH 2017

Discounts for three or more!

Date(s):	Place	Time
07/15/2017,	PICC RESOURCE 865 River Rd Suite 201 Shelton, CT	09:00 am- 02:30 pm

Price: \$195.00 per participant

We prefer to have registrations in by 4 weeks prior to the class start date, but we continue to take registrations after that time until a class is full.

Registration and payment can be done online, phone, fax, or by regular mail.

Online at:

<http://cart-catalog.piccresource.com>

Phone Toll Free: (888) 459-4913

We have a customer support rep available during regular office hours.

After hours: To sign up for a class; follow the prompts for our Registration Operators available daily 24/7 to take registrations and payments. For questions; press extension 1003.

Fax: (888) 842-7442

See page 2 for our mailing address.

Day of the Class-Be Prepared to...

Wear comfortable clothing class is informal; jeans or scrubs are fine.

Ask questions, join in the discussion! Learn and laugh!

Have lunch with us! A light lunch is included on us.

You'll receive a link to travel information to our area within the registration confirmation email.

Stay!: Two very comfortable hotels on our travel list are close to our office: The Homewood Suites is less than 1 mile away OR the Hyatt House is just under 3 miles away.

Short IV Insertion Classes

Target audience: Nurses and other health care professionals who may insert intravenous catheters as part of their job.

Overall goal of the activity: To instruct nurses and health care professionals in short IV catheter insertion procedures, and in short IV catheter complication prevention and management .

Requirements for Successful Completion: Successful demonstration of the IV insertion procedure, and attendance of the full program.

Commercial Support/ Conflict of Interest: There is no commercial support or conflict of interest for this activity.

Classes are held at our new office & training center: 865 River Road, Suite 201, Shelton, Connecticut 06484. Accomodations nearby: The Homewood Suites on Main Street in Stratford is located less than one mile from our office on the same road (Route 110). The Hyatt House is approximately 2-1/2 miles away on Bridgeport Avenue in Shelton. Download our hotel travel file here: <http://piccresource.com/2013-Hotel-Travel-NEW.pdf> To sign up for the class by fax or mail in; call us first to check availability. Otherwise register online.

<http://cart-catalog.piccresource.com>

Name of Attendee: _____

Address of Attendee: _____

Telephone number: _____

Email Address: _____

Comments or additional Information: _____

Fax of credit card– Enter card Type: _____

Card#: _____

Expiration date: _____ Security Code: _____

Billing name & address match registrant? If not enter here: _____

Checks payable to: PICC Resource Associates, LLC

Mailing address: 865 River Road, Suite 201

Shelton, CT 06484

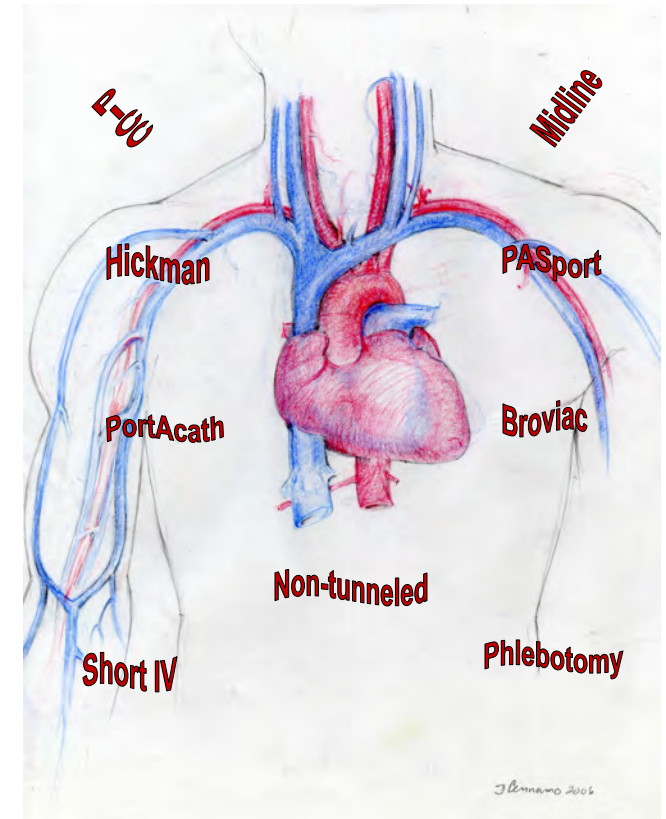
Phone: (888) 459-4913, press option 1 to register 24/7.

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