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Southern Illinois University Edwardsville  
School of Nursing  
Continuing Education

Presents

**School Nursing 2008:**

*A is for  
ADD/ADHD,  
Asthma,  
Added pounds,  
Antibiotic  
misuse/MRSA,  
& Autism*

**Saturday, February 23, 2008**

at

**Southern Illinois University Edwardsville  
Morris University Center, Second Floor  
Edwardsville, IL**

SOUTHERN ILLINOIS UNIVERSITY  
**EDWARDSVILLE**

**School Nursing 2008:  
*A is for ADD/ADHD,  
Asthma, Added pounds,  
Antibiotic misuse/MRSA,  
& Autism***

**General information:** The registration fee includes all handouts, breaks, and breakfast. On-site check-in will begin at 8:00 a.m. in the conference center (second floor) of the Morris University Center at SIUE.

For additional registration information contact the Office of Educational Outreach at 618/650-3210, [ecoffin@siue.edu](mailto:ecoffin@siue.edu). For additional program information, contact Dr. Karen Kelly at 618/650-3908, [kkelly@siue.edu](mailto:kkelly@siue.edu). Registration is limited to the first 100 registrants. Proof of enrollment must be presented on-site for student registration rate.

Note: If you have moved, or are planning a move in the near future, please contact the Office of Continuing Education, 618/650-3210, or [coned@siue.edu](mailto:coned@siue.edu), to provide your new mailing address. Thank you.

Southern Illinois University Edwardsville  
School of Nursing and  
Office of Educational Outreach  
Campus Box 1084  
Edwardsville, IL 62026-1084

## School Nursing 2008:

*A is for ADD/ADHD, Asthma, Added pounds, Antibiotic misuse/MRSA, & Autism*

**Goal:** This program will provide school nurses with an opportunity to examine five health care issues of interest to school nurses.

**Contact Hours:** This program is offered for 4.3 contact hours by the Southern Illinois University Edwardsville, School of Nursing, which is an approved provider of continuing education by the Illinois Nurses Association which is an accredited approver by the American Nurses Credentialing Center.

### Planning Committee

**Karen Kelly, EdD, RN, CNA, BC**  
Coordinator, Continuing Education  
SIUE School of Nursing

**Caroline Champion, CSN, MS, BSN, ADN, RN**  
Certified School Nurse  
Pontiac School District #105  
Fairview Heights, IL

**Roxann Tuetken, NCSN, MS, BSN, ADN, RN**  
Nationally Certified School Nurse  
Coolidge Middle School  
Granite City, IL

**Valerie Griffin, MSN, APN, BC**  
Instructor, SIUE School of Nursing

**Rhonda Comrie, PhD, RN**  
Assistant Professor  
SIUE School of Nursing

## AGENDA

- 8:00 a.m. Registration  
Continental breakfast
- 8:25 a.m. Welcome
- 8:30 a.m. **ADD/ADHD**  
Valerie Griffin
- 9:15 a.m. **Added pounds**  
Valerie Griffin
- 10:00 a.m. Break
- 10:20 a.m. **Asthma**  
Rhonda Comrie
- 11:30 a.m. Lunch
- 12:45 p.m. **Antibiotic misuse/MRSA**  
Valerie Griffin
- 1:30 p.m. Break
- 1:45 p.m. **Autism**  
Karen Kelly
- 2:30 p.m. Evaluation
- 2:40 p.m. Adjournment

**Advance registration** is preferred. Please complete registration form and return to: Office of Educational Outreach, Box 1084, SIUE, Edwardsville, IL 62026-1084, Registrations will also be accepted by telephone at 618/650-3210 or fax 618/650-2669.

Registration: School Nursing 2008:  
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Saturday, February 23, 2008

Name \_\_\_\_\_ Employer \_\_\_\_\_  
Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Day Phone (\_\_\_\_) \_\_\_\_\_ Evening Phone (\_\_\_\_) \_\_\_\_\_  
Check as appropriate: \_\_\_\_\_ Certified School Nurse \_\_\_\_\_ School Nurse \_\_\_\_\_ Student  
\_\_\_\_\_ Other (please specify) \_\_\_\_\_  
\_\_\_\_\_ Elementary School \_\_\_\_\_ Middle School \_\_\_\_\_ High School  
Registration fee is \$65 through February 13. After that date the fee is \$75. The student rate is \$45/\$60.  
Make check payable to: SIUE or charge MasterCard/VISA/Discover. Signature \_\_\_\_\_ Exp. Date \_\_\_\_\_  
Account No. \_\_\_\_\_

Mail Registration to: Office of Educational Outreach, Box 1084, SIUE, Edwardsville, IL 62026-1084