

2013 Communicable Disease Program Alert #2

TO: N.C. Local Health Department Communicable Disease Program Staff;
Correctional Facility Health Care Staff; Infection Prevention Staff in
Long Term Care Facilities; and Public Health Epidemiologists

SUBJECT: 4th Annual Communicable Disease Conference
May 20-22, 2013



Skills Development Training

Patients, Partnerships and Public Health *"World Vision, Local Solutions"*

May 20-22, 2013

Special Note: The content of this training is intended to partially satisfy requirements for both Local Health Department Accreditation and selected Agreement Addenda

Holiday Inn
Wrightsville Beach, North Carolina

Tentative Agenda

Monday: May 20, 2013 8:30 am – 11:00 am Early Bird Workshop

Legal Aspects of Billing, Coding and Medical Record Documentation in STD and TB Clinics & Working with the Electronic Medical Record in STD Clinic

12:30 pm – 5:00 pm STD/STI Plenary Sessions

The End of AIDS in North Carolina and the World
The Next Top Five Emerging Infections
Integration of HIV/STD/TB/Hepatitis Services for At Risk Populations
HIV/STD Linkages to Care

Tuesday: May 21, 2013 8:30 am – 12:00 pm General CD Plenary Sessions

The Interaction of Correctional Health and Public Health
Health Care Associated Infections – Infection Control Breaches in Long Term Care Facilities
Human Risk Assessment in Animal Rabies Exposure
Pharmacy Changes in TB/STD Programs: 340B Drug Purchasing & Compliance with Federal Regulations

1:00 pm – 4:00 pm Breakout Sessions

Interviewing Sick & Angry People
Public Reporting of Hospital Infections
Pertussis and Other Vaccine Preventable Disease Outbreaks
Generating NC EDSS Data Reports for Community Health Assessments
Social Distancing/Isolation & Quarantine in a Public Health Emergency
Transition of VPD Surveillance to Communicable Disease Branch

Tuesday: May 21, 2013 4:00 pm – 6:00 pm LHD Recognition

Local Health Department Recognition Awards & Poster Reception (Invitation only)

Wednesday: May 22, 2013 8:00 am – 8:30 am Early Morning Discussion
Legal Aspects of Asking for Identification and Providing Testing Services for Immigrants

9:00 am – 12:00 pm Tuberculosis Plenary Sessions
The State of the State in Tuberculosis Control, Prevention and Care
Immune Reconstitution Immune Syndrome (IRIS) in Patients CO-infected with HIV and TB
Difficult Tuberculosis Cases presented by Local TB Nurses

REGISTRATION: You must register for this conference through Wake AHEC. Payment options are available through Wake AHEC. **Because space is limited, there will be no on-site registration.**

WEBSITE: www.wakeahec.org

- Early Bird Registration: Opens Thursday, March 20, 2013 – Monday, April 15, 2013 - **\$75.00**
 - Registration: April 16 – May 16, 2013 - **\$125.00**
- Registration includes credit (estimated 15 contact hours), lunch (Day 2) and breaks (Day 1, 2 and 3).*

CREDIT:

Wake AHEC will award credit for each day (no credit will be awarded for the recognition/awards and early morning discussion session. A participant must attend 100% of each day to receive credit for that day. No partial credit will be given for partial days. Credit will be awarded for the pre-workshop separately.

Nursing

Wake AHEC, Nursing Education, is an Approved Provider of continuing nursing education by the North Carolina Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

Credit Allocation:

Monday pre-workshop: 2.25 CNE/2.25 Contact hours/.2 CEU
Monday plenary sessions: 4.25 CNE/4.25 Contact hours/.4 CEU
Tuesday plenary and breakouts: 5.75 CNE/5.75 Contact hours/ .6 CEU
Wednesday plenary sessions: 2.75 CNE/ 2.75 Contact hours/ .3 CEU

Total possible: 15 CNE/ 15 Contact hours/ 1.5 CEU

Hotels: A Block of Rooms is being held at the following Hotels:

1. Holiday Inn Wrightsville Beach - \$158.00 with tax - held until May 6 (1-4 people)
 2. Mainstay Suites Wilmington - \$69.00 plus tax –held until May 6 (double/single)
 3. Holiday Inn Wilmington - \$80.00 plus tax –held until May 6 (double/single)
- Mention the "Communicable Disease Conference" to get the special rate! You may not reserve rooms until after March 20, 2013.*

Sponsored by: NC Division of Public Health - Communicable Disease Branch
Co-sponsors: Wake Area Health Education Center

Wake AHEC
Educating present and future healthcare providers
Part of the North Carolina AHEC Program

Disclaimer: Final conference authorization is subject to the approval and availability of funding through federal grants to the N.C. Division of Health and Human Services.

Communicable Disease Branch · Epidemiology Section · Division of Public Health
N.C. Department of Health and Human Services
Raleigh, N.C. · www.ncdhhs.gov

**2013 Communicable Disease Program: Skills Development Training
Monday, May 20, 2013 – Wednesday, May 22, 2013**

Early Bird Registration fee (before May 16, 2013): **\$75**

Registration Fee (after May 15, 2013): **\$125**

Check all sessions you will be attending

<p>Monday, May 20, 2013</p> <p><input type="checkbox"/> Early Bird Workshop</p> <p><input type="checkbox"/> STD/STI Plenary Sessions</p>	<p>Tuesday, May 21, 2013</p> <p><input type="checkbox"/> General CD Plenary Sessions</p> <p>Breakout Sessions - Choose two</p> <p><input type="checkbox"/> Interviewing Sick & Angry People</p> <p><input type="checkbox"/> Public Reporting of Hospital Infections</p> <p><input type="checkbox"/> Transition of VPD Surveillance to Communicable Disease Branch</p> <p><input type="checkbox"/> Pertussis and other Vaccine Preventable Disease Outbreaks</p> <p><input type="checkbox"/> Generating NC EDSS Data Reports for Community Health Assessments</p> <p><input type="checkbox"/> Social Distancing/Isolation & Quarantine in a Public Health Emergency</p>	<p>Wednesday, May 22, 2013</p> <p><input type="checkbox"/> Early Morning Discussion (no credit)</p> <p><input type="checkbox"/> Tuberculosis Plenary Session</p>
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PID#: _____ (Last name + last 4 digits of Social Security #). If you have attended a Wake AHEC program in the last 6 months, we only need your Personal ID (PID) number and a phone number. If there are changes to your personal data, please update your information below.

Dr. Mr. Ms. Mrs.



First Name MI Last Social Security # (last 4 digits only)

Clinical Specialty Degree(s) (e.g., MD, PharmD, MS, BS)

Home Address City

State Zip Home County Home Phone

Employer Job Title

Work Address City

State Zip Work Fax Work Phone

Department Work E-mail

By providing your fax number, email address and telephone number, you have granted permission for us to contact you via the numbers and address indicated.

Payment Options Payment of check, credit card or supervisor signature must accompany registration.

Check enclosed. (Make check payable to Wake AHEC.)

Charge my: Corporate Card Personal Card MasterCard Visa AMEX Discover

Card # Exp. Date

Authorized Signature Name as it appears on card

Employer will make payment. Supervisor completes below and fax registration to 919-350-0470.

Supervisor's Name Printed Title

Supervisor's Signature Phone

By signing, I am certifying that agency payment will follow.

Register Today!

Online: www.wakeahec.org • **Fax:** 919-350-0467
Mail: Wake AHEC, Attn: Lorie Houston,
3261 Atlantic Avenue Suite 212, Raleigh, NC 27604

Place a check (✓) if needed.

Vegetarian Meal Option _____
Gluten Free Meal Option _____
Lactation room _____