

OBJECTIVES

1. Discuss the treatment options for Scoliosis.
2. Explain both the specific types of Scoliosis and the progression of untreated curves.
3. Describe the key components of the Spinal Screening Program.
4. Identify assessment questions for the child with Asthma.
5. Identify short and long term therapies to maintain functioning in school.
6. Describe the new NHLBI Guidelines for Pediatric Asthma that impact the role of the school nurse.
7. Contrast and compare alternative and conventional treatment options for use in the pediatric population.
8. Discuss integration of herbal and dietary supplements in treating and managing ADHD, Diabetes, Low Immune Function.
9. Discuss the new trend of alcoholic energy drinks.
10. Identify the effects of consuming energy drinks on the body.
11. Define strategies for impacting youth regarding the consumption of alcopops.

Texas Nurses Association District 4 is an approved provider of continuing nursing education by the Texas Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission of Accreditation.

This activity meets Type I criteria for mandatory continuing education requirement toward relicensure as established by the Texas Board of Nursing.

LOCATION:



**ABRAMS BUILDING
904 ABRAMS ROAD**

**RICHARDSON,
TEXAS 75081**

8:30 AM – 4:30 PM

**Presented by TSNO Region X
in conjunction with
Texas Nurses Association,
District Four
www.tnad4.org
d4tna@flash.net
214/282-7832**

**This program will address
current practice issues for
nurses in school settings.**

**PRE-REGISTRATION
CUT-OFF DATE IS:
JUNE 30, 2008**

**“EXCERPTS
FROM THE
EXPERTS:
WHAT’S
COMING
DOWN THE
PIPELINE”**



Saturday

July 12, 2008

8:30 AM – 4:30 PM

***This activity provides 5.5 contact
hours. Must attend entire day and
submit completed evaluation to
receive contact hours***

CONFERENCE SCHEDULE

- 8:30-9:00 Registration (Continental Breakfast)
- 9:00-9:15 **Welcome/Announcements**
Cynthia Thichava, RN, President,
TSNO & Colleen Hines, MS, RN,
President, TNA, D-4
- 9:15-10:30 **“Scoliosis – What to Expect After
the Screening Process”**
Richard A. Hostin, M.D., Orthopedic
Spinal Surgeon, Baylor Regional
Medical Center at Plano, Baylor
Scoliosis Center, Plano, Texas
- 10:30-10:45 **BREAK, Exhibits**
- 10:45-12:00 **“Addressing the Needs of the
School-Age Child with Asthma”**
Mark W. Millard, M.D., F.C.C.P., Baylor
Martha Foster Lung Care Center,
Dallas, Texas
- 12:00-2:00 **Lunch (Provided), Exhibits,
TSNO BUSINESS MEETING**
- 2:00-3:15 **“Alternative and Holistic Treatment
Options vs. Conventional Medicine in
Pediatrics”** Dennis W. Song, Rph,
Registered Pharmacist/Certified Herbal
Consultant, Owner, Flower Mound
Pharmacy, Flower Mound, Texas
- 3:15-4:25 **“Alcopops – Sweet Drinks with Sour
Results”** Victor M. Cheatham, B.A.,
Consultant, Safe & Drug-Free Schools
/School Health, Region 10 Education
Service Center, Richardson, Texas
- 4:25-4:30 Questions/Answers/Evaluation

FEATURED SPEAKERS

RICHARD A. HOSTIN, M.D.

Orthopedic Spinal Surgeon, Baylor Regional
Medical Center at Plano, Baylor Scoliosis
Center, Plano, Texas

MARK W. MILLARD, M.D., F.C.C.P.

Medical Director, Baylor Martha Foster Lung
Care Center, Dallas, Texas; Clinical Ethics
Consultant, Baylor University Medical
Center, Dallas, Texas

DENNIS W. SONG, RPH

Registered Pharmacist/Certified Herbal
Consultant, Owner, Flower Mound Pharmacy,
Flower Mound, Texas

VICTOR M. CHEATHAM, B.A.

Consultant, Safe & Drug-Free Schools/School
Health, Region 10 Education Service Center,
Richardson, Texas

PLANNING COMMITTEE:
TSNO Region X and
Texas Nurses Association,
District Four Board of Directors

REGISTRATION

General Registration \$ 50.00
TNA Members

TNA Non-Members \$ 60.00

TSNO Members.....\$ 50.00

TSNO Non-Members \$ 60.00

Video Conference Center..... \$ 40.00

An additional \$5 will be charged for on-site
registration the day of the conference.

Early registration is recommended due to limited
space. No Refunds.

For additional information go to TNA District 4’s
website at: <http://www.tnad4.org>
214/282-7832



Please Print

Name: _____

Mailing Address: _____

City, State, Zip: _____

Birthday Month/Day: _____

TSNO # _____ Expiration Date: _____

Email: _____

Video Conference Center-Check Location:
Van Alstyne _____ Waxahachie _____

Please mail the above along with registration fee to:

TNA, District 4
P. O. Box 35503 Dallas, TX 75235
d4tna@flash.net www.tnad4.org