



Emergency Medical Services

393 E Town Street, Suite 214  
Columbus, Ohio 43215

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ems@ohiohealth.com  
ohiohealthems.com

**SPRING UPDATE**  
**Issues in Trauma and Critical Care**  
**April 7, 2018**

OhioHealth Grant Medical Center  
Hugenberger Auditorium  
111 South Grant Ave  
Columbus OH 43215

0900-0915	Registration and Continental Breakfast	
0915-0930	Welcome	Holly Herron, DNP, RN, CNP, Paramedic
0930-1020	Trauma Case Scenarios	Shay O'Mara, MD, MBA, FACS
1020-1030	BREAK	
1030-1120	Farm Rescue	Stephen Belville, BSN, RN, NRP
1120-1210	Advances in Cardiac Emergencies	Rodney Bair, RN, Paramedic
1210-1300	LUNCH	
1300-1350	Child Abuse Awareness: Documenting and Reporting	Susan Halter, MPA, LSW, AEMT
1350-1400	BREAK	
1400-1450	Hemorrhage	Holly Herron, DNP, RN, CNP, Paramedic
1450-1500	BREAK	
1500-1550	Geriatric Depression in the Emergency Department	Barbara Dean, BSN, RN, Paramedic
1550-1600	Closing and Evaluations	Holly Herron, DNP, RN, CNP, Paramedic

It is our pleasure to offer this program for a \$25.00 registration fee. Continental breakfast, lunch and CE credit are included. Vouchers are provided for free parking at 340 East Town St. (Green Garage) and 393 East Town St. (Orange Garage).

Registration by Mail: Return the completed form below to  
OhioHealth Emergency Medical Services, 393 E Town St, Suite 214, Columbus, OH 43215-4785

Registration by Email: Send message to [ems@ohiohealth.com](mailto:ems@ohiohealth.com) with all information from the form below

Payment Options:  
 1. Check payable to OhioHealth EMS may be mailed with registration form  
 2. To make credit/debit card payment by phone, call the OhioHealth EMS Office at (614) 566-9111 Option 1

Future Conference Dates: March 10, 2018 (Delaware Update)- OhioHealth Grady Memorial Hospital)  
August 11, 2018 (Summer)  
November 3, 2018 (Fall)

The Ohio EMS Conference: May 21 & 22, 2018 (Greater Columbus Convention Center)

OhioHealth EMS Is Approved By The Ohio Department of Public Safety Division of EMS As A Continuing Education Provider (Approval # 2084).



REGISTRATION: SPRING UPDATE April 7, 2018

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

Title: EMT                  Paramedic                  LPN                  RN                  Physician                  Other

Payment:  Check Payable to OhioHealth EMS is Enclosed                   Credit/Debit Card Payment by Phone