

Atlantic Home Respiratory Providers



Annual Education Day

October 1, 2016

*Inn on the Lake
Fall River, Nova Scotia*

www.ahrp.ca

*The Atlantic Home Respiratory Providers Association would like to
thank our Associate Members for their Support of our 2016
Education Day*



Yes, you can:

Become an associate member of The Atlantic Home Respiratory Providers Association and enjoy the following benefits of your membership:

- 1. No charge to advertise in our Association Newsletter*
- 2. No charge for exhibitor space at all Association events throughout the year*
- 3. Ability to interact with the Respiratory Service Providers in Atlantic Canada*

Contact the Association for information on becoming a member at:

Atlantic Home Respiratory Providers Association

*Box 142
5657 Spring Garden
Road
Halifax, NS B3J 3R4
Tel: (902) 425-2445
Fax: (902) 425-2441*

info@ahrp.ca

AHRP Education Day Agenda
Saturday, October 1, 2016

8:00 AM to 8:15 AM	Registration
8:15 AM to 8:30 AM	Opening Remarks & Welcome
8:30 AM to 9:15 AM	Update on Idiopathic Pulmonary Fibrosis <i>Dr. Scott Rappard MD,CM - Internal Medicine</i>
9:15 AM to 10:00 AM	Women and Sleep <i>Doug Scullion-Resmed Clinical Specialist</i>
10:00 AM to 10:30 AM	Break
10:30 AM to 11:00 AM	CPAP masks <i>Brent MacFarlane- Fisher & Paykel Healthcare- Regional Sales Manager</i>
11:00 AM to 11:30 PM	Product Review <i>Sebastian Pham-Product Specialist for Kego</i>
11:30 AM to 12:15 PM	Topic and Speaker TBA
Lunch Break 12:15 PM to 1:00 PM (provided)	
1:00 PM to 1:45 PM	Does good PAP compliance data translate to success? <i>Dr. Gosia Phillips, MD Neurology</i>
1:45 PM to 2:30 PM	COPD and Non-Invasive Ventilation <i>Steve Bouchard- Respironics Clinical Specialist</i>
2:30 PM to 3:00 PM	Break
3:00 PM to 3:30 PM	New Portable Oxygen Concentrator <i>Bert Richer, Regional Sales Manager for Invacare</i>
3:30 PM to 3:45 PM	Closing Remarks

Hotel Information

Inn on the Lake
3009 Highway 2
Fall River, NS B2T 1J5
(902) 861-3480

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REGISTRATION FORM 2016

Name:

Current address:

City:		Province:	Postal Code:
Fax Number:		Phone Number:	E Mail:
Phone number:		Email Address:	
Association Member:	<input type="checkbox"/> Y <input type="checkbox"/> N	Will Attend:	Will Not Attend:

REGISTRATION FEE

Registration Fees: \$ 50.00

Associate Members Fee: No Charge

Registration Fee Exhibitor (non Member): \$ 500.00

REGISTRATION INFORMATION

Send Registration to:

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Please RSVP by September 26, 2016

Hot Lunch and snacks will be provided.
