REGISTRATION FORM **Obstetric Ultrasonography**

Dates:	January 16 through 19, 2	<u>2002</u>				
Location:	Building #500, (Main Building) Fitzsimons Campus, UCHSC 13001 East 17 th Place Aurora CO 80045-7238					
Tuition: \$8 Make check	350 a payable to: Department of Far	mily Medicine, UCSHC.				
Name: Print or Type Address:						
Voice phone E-mail addr		FAX number:				
Location: ur	private solo group residual suburban rural access to ultrasound equipment:					
Describe your	plan for further supervised practice					
Yes I including	No If yes, please attach a	ection of this course as described in the cover letter? copy of your typical 2 nd /3 rd trimester ultrasound report images you collect for a typical scan and describe here				
Mail this regi	istration form and tuition check to:	Mary Jo Bush Department of Family Medicine, UCHSC 1180 Clermont Street Denver Colorado 80220 Voice: 303-315-9753 / Fax: 303-315-9748 e-mail: mary.bush@uchsc.edu				

Upon receipt of your registration information, we will send information on local hotel accommodations and recommended pre-course study materials.

OBSTETRIC ULTRASONOGRAPHY



DENVER, COLORADO. --- **JANUARY 16** — 19, 2002

Sponsored by:

The University of Colorado Department of Family Medicine And

The University of Southern California Department of Family Medicine

This comprehensive four-day course consists of approximately half lecture and half closely-supervised, hands-on scanning. The course is designed for individuals who intend to perform standard diagnostic antepartum obstetric ultrasound scans including fetal biometry and anatomic surveys according to commonly accepted standard examination criteria. Although designed for beginners, previous diagnostic ultrasound experience is extremely helpful. Those who are accepted for attendance are expected to complete recommended readings prior to the course. Attendees should have a plan for access to ultrasound equipment and a plan for further supervised practice or proctorship after completing the course.

If there is sufficient interest, an advanced section will be offered to individuals who can demonstrate competence in fetal biometry and wish to spend all their workshop time concentrating on the sonographic fetal anatomy survey.

Attendance will be limited to 40 participants. If you would like to register for this course, complete and return the attached registration form. Upon receipt of your registration form and payment, further information on nearby hotels and recommended pre-course study materials will be sent to you.

Mark Deutchman, M.D.

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Denver, Colorado

Richardo Hahn, M.D. Los Angeles, California

Draft Schedule:

Obstetric Ultrasonography January 16 - 19, 2002

1:30 Historical perspective 1:45 Approach to OBUS 2:30 CNS normal and abnormal 4:00 Sonographic procedure guidance 4:30 Practice puncture technique 5:00 Adjourn	Day #1	:	Day #2	2:
5:30 Adjourn	8:00 8:15 9:15 9:30 10:30 12:30 1:30 1:45 2:30 3:30	Welcome and announcements Practical physics and knobology Fetal life, number, presentation Introduction to fetal biometry Scanning practice Lunch Historical perspective Approach to OBUS CNS normal and abnormal Scanning practice	9:00 10:00 12:00 1:00 2:00 3:00 4:00 4:30	Placenta, cord and membranes Scanning practice Lunch Fetal growth, biophysical and fluid Chest and abdomen Signs of chromosome abnormalities Sonographic procedure guidance Practice puncture technique

Day #3:			
08:00	Psychological impact		
08:30	Questions and answers		
09:00	Scanning practice		
11:00	First trimester: normal and abn.		
12:30	Lunch		
1:30	Scanning practice		
3:00	Equipment and financial		
3:30	The routine scanning debate		
4:30	Fetal anatomy/anomaly		
unkno	wns		
5:00	Adjourn		

Day #4:		
8:00	MSAFP screening	
8:30	Gynecologic applications	
9:00	Scanning practice: complete study	
11:15	Written test	
12:00	Lunch	
1:00	Scanning test	
3:00	Panel discussion on these topics:	
	a) further training	
	b) residency training	
	c) reimbursement & accreditation	
4:30	Adjourn	

Note: topics and times are subject to change.