COURSE INSTRUCTOR:

Susan Wade, MSN, RN, CPN, CCRN

Susan is dedicated to preparing pediatric nurses to sit for the CPN Exam. She is an expert in pediatric and pediatric critical care nursing, speaker, and author. Susan has dedicated most of her nursing career to pediatric and pediatric critical care nursing. She maintains an active clinical practice as a Pediatric Clinical Nurse Specialist. She is an authority on the Certified Pediatric Nurse and Pediatric CCRN Exam and review process. Susan presents 2-day review courses onsite at hospitals and at regional review courses across the country.

COURSE AUTHOR:

Louise Jakubik, PhD, RN-BC, CSP

Dr. Louise Jakubik has helped thousands of nurses become certified as pediatric nurses. She is a pediatric nursing expert, speaker, and author. Her publications include the first book ever designed to prepare pediatric nurses for the pediatric nursing certification exam, entitled "Pediatric Nursing Certification Review." She is a national speaker and a leading authority on the pediatric nursing certification review process. Over one thousand nurses each year attend her 2-day Pediatric Nursing Certification Review Course.

Pediatric Nursing Certification Review Course

Presented by
Susan Wade, MSN, RN, CPN, CCRN

Authored by
Louise Jakubik, PhD, RN-BC, CSP

May 2 & 3, 2016
Falls Church, VA

Sponsored by
Inova Children’s Hospital

www.NurseBuilders.net

Pediatric Nursing Certification Review Course

7715 Crittenden Street Box #350
Philadelphia, PA 19118

NurseBuilders

www.NurseBuilders.net

Inova Children’s Hospital
Pediatric Nursing Certification Review Course

COURSE OUTLINE:
Susan Wade will guide the participants through the pediatric nursing certification exam review and preparation process and will provide practical tips for studying and test taking success. This conference includes test taking strategies for success and a thorough pediatric nursing content review. The course is based on the book “Pediatric Nursing Certification Review, 3rd Edition” co-authored by Jakubik (2014) and the exam content outlines for CPN published by the Pediatric Nursing Certification Board (PNCB) and the Pediatric Nurse Exam (RN-BC) published by the American Nurses Credentialing Center (ANCC).

Contact Hours: 13

About Contact Hours:
Provider approved by the California Board of Registered Nursing (provider #15118) and the Florida Board of Nursing (provider #50-9679).

This continuing education activity was approved by the PA State Nurses Association, an accredited approving body by the American Nurses Credentialing Center’s Commission on Accreditation.

2-day course
7:30 - 8:00 a.m. — Registration
8:00 a.m. - 4:00 p.m. — Course Instruction

COURSE OBJECTIVES:
• Identify resources for use in preparing for taking a pediatric nursing certification exam.
• Utilize strategies to promote pediatric nursing certification exam success.
• Verbalize increased confidence in ability to pass a pediatric nursing certification exam.
• Recall information that will enhance individual nursing practice.

TARGET AUDIENCE:
Nurses working in a pediatric care setting preparing to take the Certified Pediatric Nurse examination and interested health providers.

DAILY AGENDA:

DAY 1:
• Test Taking
• Professional Role
• Developmental Care and Anticipatory Guidance
• Endocrine/Metabolic
• Hematology
• Immunology
• Cancer
• Musculoskeletal

DAY 2:
• Gastrointestinal
• Respiratory
• Neurologic
• Renal/Genitourinary
• Immunizations and Infectious Diseases
• Dermatologic
• Altered Psychological Functioning
• Cardiovascular

Feas and Registration Information

Inova Employees
FREE   (Register through HealthStream)

Non-Inova Employees
$350   Early Registration (Before April 1, 2016) (Mail registration form and check)
$375   Regular (April 2 – April 22, 2016) (Mail registration form and check)

REGISTRATION INFORMATION

Name: ________________________________________________
Home Address: _________________________________________
City: __________________________ State: _______ Zip: ________
Daytime Phone: ____________________________
Evening Phone: ________________________________
Email: ______________________________

(Your registration confirmation letter will be sent via email)

Employer: __________________________________________
Amount of check for Fee Enclosed: $ ____________

(CHECKS PAYABLE TO INOVA CHILDREN’S HOSPITAL)

Mail registration form and check to:
Lucilla Gordon-Smith, Pediatric Administration
Inova Fairfax Hospital
3300 Gallows Road
Falls Church, VA 22042
(703) 776-6041