

Join Us!

June 22, 2011

Registration

8:30 — 9:00 am

Tardive Dyskinesia: It's All About the Movement

9:00 — 3:00 pm

Lunch will be provided.

Location

Country Inn & Suites, 4257 Haines Rd,
Hermantown, MN

Cost

\$85.00

\$10.00 discount per person if
registering 3 or more individuals

**Walk-ins Welcome. Space limited!
Registration fee is non-refundable
but is transferable.**

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Trillium
Professional Training
Services

**• Tardive Dyskinesia:
It's All About the Movement**

June 22, 2011

Tardive Dyskinesia can be a symptom of long-term or high-dose use of antipsychotic or neuroleptic medications. These involuntary movements can be life altering for the individual. The DISCUS exam is the most widely used screening method for detecting these movements. Join us in learning about Tardive Dyskinesia, the history, medications and effects. Participants will be able to practice identifying Tardive Dyskinesia movements and scoring the DISCUS exam successfully.

5 CEU/Contact Hours in Nursing



Presented by: Cindy Sanders, LPN & Angela Gustafson

Cindy Sanders has been a licensed practical nurse for over 30 years. Her experience includes a background in general medical, emergency room and neurosurgery. She also has medical management experience with insurance companies throughout Minnesota. Cindy is currently employed by Trillium Services, Inc. as the Director of the Nursing Department. She has been responsible for setting up the current medication and psychotropic medication monitoring programs for 60 consumers. She completes all medical paperwork for the company, trains all new employees on policy, procedure and specific medication protocols and assures that the company is kept current with any licensing changes or rule updates.

Tardive Dyskinesia: It's All About the Movement — June 22 2011

Pre-registration appreciated.

Registration fees due prior to the training.

Name(s): _____

Please feel free to make copies of this form if room is needed for additional attendees' names

Phone: _____ **Email:** _____ **Organization:** _____

Address: _____ **City:** _____ **State:** _____ **Zip** _____

How did you hear about this training? _____

What other types of training would you like to attend? _____

I would like to be added to your mailing list. Please notify me by: **Email** **Standard mail**

Please mail registration & payment to:

**Trillium Services, Inc. Attn: Jay Johnson,
4629 Airpark Blvd., Duluth, MN 55811**

For office use only. **Paid in Full** **Amount:** _____

Training(s): _____