



ASHP RESIDENCY PROGRAM DESIGN AND CONDUCT (RPDC) WORKSHOP

Provided at the Illinois Council of Health-System Pharmacists 2017 Annual Meeting
September 14 - 16, 2017 | Oakbrook Terrace, IL

ICHP is bringing the RPDC to the Midwest during the ICHP 2017 Annual Meeting

Friday, September 15, 2017
8:00am to 5:30pm

This workshop will apply to all types of new and existing residency programs, program directors, preceptors and residents.

We will review accreditation standards for the design and conduct of a residency program, including requirements related to program purpose, competency areas, goals and objectives, program structure, learning experiences, orientation, use of preceptor roles, evaluation, resident development plans, and continuous residency program improvement.

Participants may bring materials from their program for review during the workshop.

Take advantage of the opportunity to have your questions answered and share ideas with your fellow participants.

All Illinois Residency Programs are welcome to have their residency directors, residents and preceptors attend at either a discounted member price (if a member of ICHP) or a non-member price. **Residency program directors, residents and preceptors from outside Illinois may attend at the member price.**

The 2017 Annual Meeting will be held at the Drury Lane Conference Center at 100 Drury Lane, Oakbrook Terrace, IL. Special convention room rates (Single/Double \$139, Triple \$149 and Quad \$159 for Wed - Fri) are available at The Hilton Garden Inn in Oakbrook Terrace (1000 Drury Lane, Oakbrook Terrace, IL). These rates are available by calling The Hilton Garden Inn (1-877-STAYHGI) prior to August 22 and mentioning that you are attending ICHP's Annual Meeting!

Are you starting a new PGY1 or PGY2 residency program?

Revising your existing PGY1 or PGY2 residency program?

Are you a new or existing preceptor?
Or a new or existing residency program director?



The ICHP Residency Showcase will be held on Saturday, September 16th from 1 to 3pm. So if you plan to have a booth at the Showcase, why not attend the RPDC the day before?

Enjoy discounted Annual Meeting attendance for Thursday, September 14 and/or Saturday, September 16, 2017 in addition to the RPDC program on September 15th.

See our registration form for more information!

2017 ICHP ANNUAL MEETING - REGISTRATION FORM

ASHP RESIDENCY PROGRAM DESIGN AND CONDUCT (RPDC) WORKSHOP

Full Name _____
Separate registration form required for each attendee

Badge Name _____
Name as you want displayed on your name badge

Job Title _____

Address _____

City, State, Zip _____

Home Phone _____

Email _____
Email required to receive important meeting information

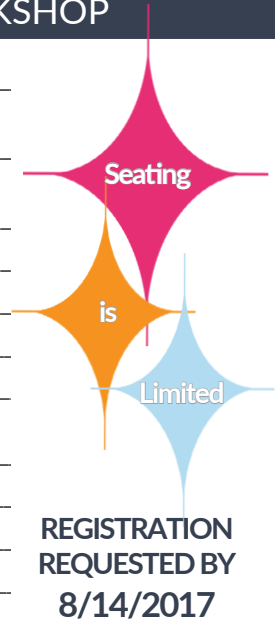
Business/College Name _____

City, State _____

Work Phone _____

Emergency Contact Name _____

Emergency Contact Phone _____



CPE MONITOR

If you plan on obtaining CPE credit by attending Thursday and/or Saturday Annual Meeting programming, you **must** provide your NABP e-Profile ID# and Birthday (as MMDD). Your NABP e-Profile ID is required to receive CPE credit. Visit www.mycpemonitor.net for more information about CPE Monitor and how to obtain your NABP e-Profile ID.

NABP E-Profile ID#: _____ Birthday (MMDD): _____

MEAL SELECTION

We use your registration for space allocation and meal planning. If there is a change in the meals you have indicated, please contact us!

Select the meal(s) you will be attending:

- Thursday Continental Breakfast
- Thursday Lunch Symposium
- Friday Continental Breakfast (ends at 8:00am)
- Friday Lunch & Town Hall Meeting
- Saturday Continental Breakfast
- Saturday Lunch & Awards Program

I need vegetarian meal(s).



METHOD OF PAYMENT

You will receive a receipt in your registration materials at the meeting.

MY TOTAL: \$ _____

- Enclosed is a check or money order made payable to: ICHP
- Charge my credit card
Credit card payments may be faxed to ICHP: (815) 227-9294

Account#: _____

Billing Zip Code: _____ Exp. Date: _____ CVV2 Code: _____

Cardholder Name: _____

Cardholder Signature: _____

SEND PAYMENT AND REGISTRATION FORM TO:

ICHP ANNUAL MEETING • 4055 N. PERRYVILLE ROAD • LOVES PARK, IL 61111-8653
 PHONE: (815) 227-9292 | FAX: (815) 227-9294

I AGREE TO THE FOLLOWING TERMS OF REGISTRATION:

CANCELLATION POLICY: Cancellations will be accepted in writing prior to August 14, 2017. No cancellations will be accepted after that time. Cancellation of the RPDC Workshop Registration voids any associated meeting discounts and requires a new Annual Meeting Registration. A \$25 processing fee will be applied to all cancellations. Refund checks will be issued after October 1, 2017. Note: Payments made to ICHP and ICHP PAC are not deductible charitable contributions for federal income tax purposes. However, they may be deductible under other provisions of the Internal Revenue Code. ICHP Federal Tax ID: #36-2887899.

IMAGE RELEASE NOTICE: I give ICHP permission to use photographs or videos of myself taken at the event. ICHP intends to use such photographs and videos only in connection with ICHP official publications, media promotions, web sites, or social media sites including but not limited to Facebook, Twitter, Instagram, and YouTube, and that these images may be used without further notifying me.

PHARMACIST

REGISTRATION FEES

CONTINENTAL BREAKFAST & LUNCH INCLUDED.
 INDICATE MEALS AT LEFT.

	OUT OF STATE OR	
	MEMBER	NON-MEMBER
RPDC ONLY (No CPE) FRIDAY 9/15	<input type="checkbox"/> \$250	<input type="checkbox"/> \$350
ADD ONE DAY CPE	<input type="checkbox"/> \$80	<input type="checkbox"/> \$120
ADD 2 DAYS CPE	<input type="checkbox"/> \$160	<input type="checkbox"/> \$240

Select the day(s) you will be attending:

- THURSDAY (9/14)
- SATURDAY (9/16)

RESIDENT

REGISTRATION FEES

CONTINENTAL BREAKFAST & LUNCH INCLUDED.
 INDICATE MEALS AT LEFT.

	OUT OF STATE OR	
	MEMBER	NON-MEMBER
RPDC ONLY (No CPE) FRIDAY 9/15 (lunch included)	<input type="checkbox"/> \$250	<input type="checkbox"/> \$350
ADD ONE DAY CPE	<input type="checkbox"/> \$45	<input type="checkbox"/> \$70
ADD 2 DAYS CPE	<input type="checkbox"/> \$70	<input type="checkbox"/> \$110

Select the day(s) you will be attending:

- THURSDAY (9/14)
- SATURDAY (9/16)