

## Payment Options

SCHN Staff member (No charge)

Non-SCHN Staff \$400.00 (inc. GST)

**Payment enclosed** (Cheque or money order payable to The Sydney Children's Hospitals Network) **OR**

**Credit card payment** (BankCard, Visa, Mastercard only):

Bankcard  Visa  Mastercard Amount \$ .....

Card number:

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Card holder's name (as shown on card):

.....

Expiry date:     /     /

Card holder's signature:

.....

## Please complete and return to:

The Children's Hospital at Westmead, Education Centre,  
Locked Bag 4001 Westmead NSW 2145  
Tel: (02) 9845 0506     Fax: (02) 9845 2999

## Cancellations and refunds

Cancellations made prior to 21 June 2012 will be charged a cancellation fee of \$87.00 (GST inc.). Cancellations made on or before 28 June 2012 will be charged a cancellation of \$120.00 (GST Inc.). No refunds will be issued after December 8. Application for a refund must be made in writing and sent with the original tax invoice/receipt for course payment.

**Privacy:** Your privacy is respected – personal information you supply on this form will only be used by The Children's Hospital at Westmead and will not be disclosed to third parties without your express consent.

**Delegate/substitution:** Substitute delegates may be made at any time, but please advise details of the person attending.

## Venue

Kim Oates Australian Paediatric Simulation Centre,  
The Children's Hospital at Westmead

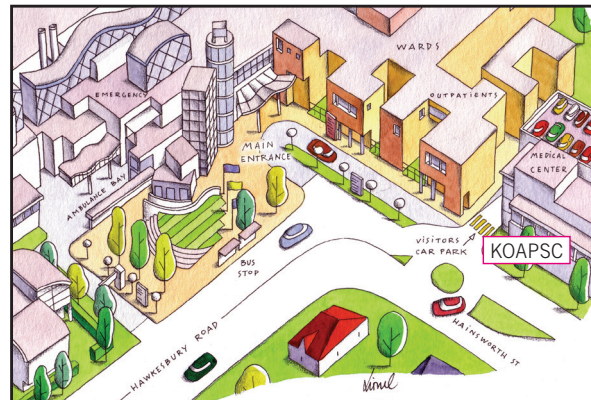
## How to get there

**The Children's Medical Centre, Cnr Hawkesbury Road & Hainsworth Street Westmead NSW 2145**

KOAPSC is located within the Children's Medical Centre, directly adjacent to the public car park off Hainsworth Street. As you enter the building on the ground floor, go straight ahead to the end of the corridor.

## Parking

Limited parking is available in the visitors' car park at \$16.00 per day (inc GST).



the children's hospital at Westmead

The Children's Hospital at Westmead, The Children's Medical Centre  
Locked Bag 4001 Westmead NSW 2145.  
Tel: (02) 9845 3566 Fax: (02) 9845 2999

# Tiny Tots Trauma

**Saturday 21 July 2012**

Kim Oates Australian Paediatric Simulation Centre



## Convened by

**Dr S V Soundappan**  
Deputy Head of Trauma

**Ella Scott**  
Manager/Co-Lead Simulation SCHN

## Further information

Ella Scott, Co-Lead Simulation/Manager  
KOAPSC  
Tel: (02) 9845 0709  
ella.scott@health.nsw.gov.au

*Course Numbers will be restricted, early registration is encouraged. Open to nurses and doctors from all sources.*



## Objectives

- 1 - Early assessment and a structures approach to resuscitation and management of the injured child.
- 2 - Exploring the role of the trauma team and human factors
- 3 - Practice and reflect on the management of simulated real-life paediatric emergencies

We ask for you to come dressed in usual work uniform and or clothes, as this adds to realism of the simulation environment.

## Who should attend?

This course is aimed at all doctors, nurses and paramedics who are involved in the early assessment and management of traumatised children.

## Course faculty includes:

### SVS Soundappan

Deputy Head of Trauma CHW

### Ella Scott

Manager/Co-Lead Simulation SCHN

### Kellie Wilson

CNC Trauma SCH

### Prof Andrew Holland

Paediatric General and Burns Surgeon

### Jennifer Major

NE ED CHW

## Programme

0745-0800	Registration
0815-0830	Team training
0830-0900	Paediatric Trauma What's Different?
0900-0945	Familiarisation to simulation environment
0940-1010	Paediatric Head Injury
1010-1040	Morning tea
1040-1110	Burns
1100-1200	Simulated scenario and debrief
1200-1230	Paediatric Abdominal Trauma
1230-1315	Lunch
1315-1400	Simulated scenario and debrief
1400-1430	Submersion
1430-1500	Simulated scenario and debrief
1500-1515	Afternoon Tea
1515-1600	Simulated scenario and debrief
1600	Evaluation and close

## Staff Cancelations

Course cancellations will only be accepted from SCHN staff up to 72 hours in advance of the scheduled start time. SCHN staff who cancel within 72 hours of a course or who fail to attend a booked course will be not be considered for other courses within the KOAPSC for a period of 12 months. This penalty has been introduced to make KOAPSC courses available to as many staff as possible.

## Registration form

Tiny Tots Trauma  
21 July 2012

TAX INVOICE

ABN 53 188 579 090

This form becomes a tax invoice for GST purposes on completion of payment.  
Please keep a copy for your records. PLEASE USE BLOCK LETTERS

### Personal details

Title: \_\_\_\_\_ Surname: \_\_\_\_\_

First name(s): \_\_\_\_\_

Postal address/Dept: \_\_\_\_\_

Postcode: \_\_\_\_\_

Phone (daytime): \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Hospital/Employer: \_\_\_\_\_

Medical  Nursing (please tick)

Please briefly state your background and experience (if any) in simulation based training: \_\_\_\_\_

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See over for payment options