



**The Academy for Continued Healthcare Learning
And
Inland Empire Health Plan
Present This Jointly Sponsored CME Program:

Parenteral Nutrition**

Educational Objectives

At the conclusion of the program, participants should be able to:

- Identify appropriate uses of enteral nutrition, parenteral nutrition, or a combination of both types of nutrition support
- Describe data for risk associated with caloric deficit in various patient populations
- Summarize the advances in the safety of parenteral nutrition to decrease risk of bloodstream infections
- Analyze goal-directed therapy in optimizing parenteral nutrition to improve patient outcomes

FEATURING

John A. Tayek, M.D.

Professor of Medicine-In Residence
David Geffen School of Medicine at UCLA
Harbor-UCLA Medical Center
Los Angeles, California

Where: Inland Empire Health Plan
303 E. Vanderbilt Way
San Bernardino, CA 92408

Date: Wednesday, September 1, 2010

Time: 6:30 p.m. Dinner Included

Disclosure Policy

Current guidelines require that participants in CME/CE activities be made aware of all affiliations or financial interests that may be perceived as affecting the presentation of the faculty member. The Academy for Continued Healthcare Learning (ACHL) ensures that all faculty and staff involved in the planning, development, and implementation of ACHL activities disclose all potential conflicts of interest and resolve them before the CME/CE activity occurs. Complete information will be provided to participants prior to the start of the educational activity.

Intended Audience

This activity is intended for physicians, pharmacists, nurses, and dietitians with an interest in parenteral and enteral nutrition.

RSVP by Monday, August 30, 2010

There are 3 ways to register

- Email to Ramirez-Ca@iehp.org including all your information
- Fax this form to (909) 891-1577
- Log on to www.accessCME.org. Choose **Live Event** and select the corresponding program.

Name _____ **Degree** _____ **Lic #** _____

Address _____ **City** _____ **Zip** _____

Phone _____ **Fax** _____

Email _____

