

## Herbal Medicine: Facts and Folklore (5 hours)

**TARGET AUDIENCE:** NHA, RN, LPN, AD, DM, RD/DTR, SW

**CE APPROVED:** NHA (5 hours; Patient Care)

**PROGRAM:** Registration 8:30 a.m., Program 9 a.m. – 3:30 p.m., Lunch 12-1 p.m.

**PURPOSE:** To provide knowledge of common herbal supplements, their use, contraindication, and interactions.

### OBJECTIVES

1. Discuss the history of herbal medicine.
2. Identify commonly used herbal supplements.
3. Describe the purpose and use of herbs.
4. Recognize pharmacological/herbal interactions
5. Distinguish between fact, fiction, and folklore.

**PROGRAM:** *Registration 8:30 a.m., PROGRAM 9 a.m. – 3:30 p.m., Lunch 12 – 1 p.m.*

The History of Herbal Medicine

Past, Present, Future

Pictures and Samples of Herbs

Commonly Used Herbal Supplements

Identify Herbs, Origin of Herbs, Use of Herbs

Side Effects of Herbal Supplements

Contraindications and Interactions

Interpret Labels of Herbal Supplements

Pharmacological/Herb Interactions

Instruct Side Effects and Interactions

Herbal Supplements Fact, Fiction, and Folklore

How Society Accepts and/or Declines Herbal Use

**SPEAKER:** **Becky Duwe, BSN, RN, CNLCP, CM**, Owner, Collaborative Medical-Legal Consulting, LLC ; Owner, Absolute Essentials, Mt. Vernon, Missouri. Becky is active in the field and has been studying herbal medicine since 1976. She has developed four essential oil blends for medicinal use.

### DATES & SITES:

**May 24** **Springfield**, Ramada Plaza Hotel and Oasis Convention Center, Kalahari Room, 2545 North Glendstone Ave

**June 2** **Cape Girardeau**, Chateau Girardeau, Event Room, 3120 Independence St

**June 3** **St. Louis**, Cardinal Ritter Sr. Services on the Cardinal Carberry Campus, Mother of Perpetual Help Bldg, Lally Room, 7601 Watson Rd

# Registration Information

**REGISTRATION FEES** include course materials and CE/certificates of attendance. Lunch is on your own.

**MEMBER DISCOUNTS**, up to 35% off the Regular registration fees are available to **Professional Members** and all employees of an **Organizational Member**, seeking continuing education (CE) hours. Individual Members cannot receive administrative or patient care CE hours without an organizational or professional membership. Individual members may attend for professional development at the discounted NO CE rate available to all memberships levels.

**BUNDLE OPTIONS** are available to Professional Members and all employees of an Organizational Member.

- Pick 2: Two 5 hour one-day workshops and 5 hours web-based courses
- Pick 3: Three 5 hour one-day workshops and 2 hours web-based courses
- Pick 4: Four 5 hour one-day workshops

	Member Rate	Regular Price
Pick 2	\$350	\$400
Pick 3	\$380	\$435
Pick 4	\$400	\$500

**GROUP RATE DISCOUNTS** are only available to Organizational Members.

Three or more registrations for the same workshop topic will each receive a \$10 discount. Registrations must be received together with one payment. No credits or refunds will be granted for group rate cancellations.

**NO CE RATE DISCOUNT** is available to Individual Members, Professional Members and ALL employees of an organizational member seeking professional development who do not want CE hours.

**PAYMENT OF REGISTRATION FEES:** Registration payments must be received by noon the day prior to the educational offering. *WE CANNOT BILL YOU.* Registrations may be submitted by mail, phone between normal business hours of 8:30 a.m. - 4:30 p.m., fax, or online at [www.mlnmonursing.org](http://www.mlnmonursing.org). Discover/MasterCard/Visa accepted. There is a \$30 service charge on all returned checks. NOTE: Late registrations must register according to the onsite registration policy.

**ON-SITE REGISTRATIONS:** On-site registrations are accepted if space is available on a first-come, first-served basis with payment of fees plus an additional \$15.

**SUBSTITUTIONS AND CANCELLATIONS:** Substitutions are allowed. You may cancel up to 48 hours prior to the workshop and receive full credit or upon written request a refund less a \$25 processing fee. Cancellations less than 48 hours may send a substitute or transfer registration to another workshop within 6 months. Refunds/credits are not offered if registrant fails to attend without prior notification. MLN reserves the right to cancel workshops for low enrollment (a credit or full refund will be offered). MLN reserves the right to substitute presenters without notice.

**CONFIRMATION OF REGISTRATION:** Confirmations are sent to the email address given on the registration form. Please provide a copy to your employer if necessary.

**AMERICANS WITH DISABILITIES ACT:** If you have special needs addressed by this Act, please notify the MLN. Reasonable efforts will be made to accommodate your needs.

**ADDITIONAL INFORMATION:** Income tax deductions are permitted by U.S. Treasury Regulation 1.162-5 for educational purposes. Please bring a sweater or jacket due to variations in meeting room temperatures. Smoking, use of cell phones, and children will not be allowed in the meeting room.

**MEMBER DISCOUNTS** are available on a wide range of programming. Join now and SAVE up to 35% on a wide range of CE workshop registration fees and up to \$100 or more on professional conferences. Call the MLN office for more information.

# MLN Registration Form & Membership Application

(Please print or type - for multiple registrations, please copy form.)

Name \_\_\_\_\_ Last Four Digits of your S.S. # \_\_\_\_\_

MLN ID# \_\_\_\_\_ Employer MLN ID# \_\_\_\_\_

Home Address \_\_\_\_\_ Home City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Home Email \_\_\_\_\_ Place of Employment \_\_\_\_\_

Position \_\_\_\_\_ Credentials \_\_\_\_\_

Work Address \_\_\_\_\_ Work City, State, Zip \_\_\_\_\_

Main Work Phone \_\_\_\_\_ Fax # \_\_\_\_\_

Work Email \_\_\_\_\_

**Confirmation/ certificate will be sent via email. Providing your email authorizes MLN to send you timely information.**

## Indicate workshop information for which you are registering:

1. Workshop Title: \_\_\_\_\_ Date: \_\_\_\_\_ City: \_\_\_\_\_

2. Workshop Title: \_\_\_\_\_ Date: \_\_\_\_\_ City: \_\_\_\_\_

3. Workshop Title: \_\_\_\_\_ Date: \_\_\_\_\_ City: \_\_\_\_\_

4. Workshop Title: \_\_\_\_\_ Date: \_\_\_\_\_ City: \_\_\_\_\_

## 3 hour One-Day Workshops:

Regular \$100       Organizational/Professional Member \$75       NO CE \$35 (all membership levels)

## 5 hour One-Day Workshops:

Regular \$169       Organizational/Professional Member \$125       NO CE \$75 (all membership levels)

## Other Rates (pricing is for 3 or 5 hour programs):

Student \$50     Student Member \$35     Organizational/Student Member Group Rate (3 or more) receive \$10 off per registrant

## SpringFest:

Both Days:     Regular \$340       Organizational/Professional Member \$260

One Day:       Regular \$190       Organizational/Professional Member \$150    *If attending one day only, specify day \_\_\_\_\_*

## Bundle Pricing for Organizational and Professional Members:

- Pick 2: Two 5 hour one-day workshops and 5 hours web-based courses (Submit web-based learning registration form.)
- Pick 3: Three 5 hour one-day workshops and 2 hours web-based courses (Submit web-based learning registration form.)
- Pick 4: Four 5 hour one-day workshops

**SAVE: Add a membership with this registration.** Call the MLN office for details.

\$250 Organizational     \$250 Professional     \$80 Individual

Add  \$5     \$10     \$20     Other: \$\_\_\_\_\_ to support nursing scholarships.

**Please check method of payment. We cannot bill you.**

Check Enclosed     Discover/MasterCard/Visa    **Total Enclosed \$ \_\_\_\_\_**

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ 3-Digit Security Code \_\_\_\_\_

Billing Zip Code \_\_\_\_\_ Signature \_\_\_\_\_

**Mail payment to: Missouri League for Nursing | 604 Dix Road | Jefferson City, MO 65109 | fax 573-635-7908**

Register online | [www.mlmonursing.org](http://www.mlmonursing.org)