



Second Annual
**Lincoln Orthopedic
Evening Series**

PO Box 232
Story City, IA
50248

Thursday March 11, 2010
Lumbar Surgery

- **Surgery for the Lumbar Spine**
 - Dr. Dan Tomes, MD
 - Spine Surgeon
- **Rehabilitation following Lumbar Surgery**
 - Adriaan Louw, PT, M.App.Sc (physio), GCRM, CSMT

Thursday May 6, 2010

Rotator Cuff Injuries

- Dr. Justin Harris, MD
- Orthopedic Surgeon
- PT Speaker/s to be announced

General Information

- Course: 6:00 - 9:00 PM
- Saint Elizabeth Regional Medical Center
- Snacks & beverages provided by Saint Elizabeth Sport & Physical Therapy
- **CEU's applied in NE for Physical Therapy only**
- **ISPI is NOT a NATABOC, OTA or CME provider**
- Cost: \$50 per class or \$90 for the series (6 CEU's)

(Please see cancellation policy and discount information on page 2)

1-866-235-4289

info@ISPIInstitute.com

ISPIInstitute.com

CATHOLIC HEALTH
INITIATIVES

Saint Elizabeth
Regional Medical Center

Spring 2010



Lincoln Spring Orthopedic Evening Series 2010 Registration Form

STEP 1: DEMOGRAPHIC INFO

Name: _____

Address: _____

Phone: _____

Fax: _____

E-Mail: _____

- PT
- PTA
- OT
- COTA

- LAT/ATC
- MD
- DO

*** CEU's only
applied for
Physical
Therapy in KS
& MO;
ISPI is NOT a
BOC, OTA or
CME provider

STEP 2: SELECT COURSE

Signing up for:

- Lumbar Surgery \$50 _____
- Rotator Cuff Injuries \$50 _____
- Both classes \$90 _____

STEP 3: PAYMENT

Check: Number _____ (Make check Payable to International Spine & Pain Institute)

Card Number: _____

Expiration: _____ 3 digit security code: _____

Signature: _____

Does this credit card match the above address? If not—please supply billing address



Cancellation policy:

- ◆ No refund for canceling/not attending.
- ◆ Letter of credit will be issued if cancellation is received up to the day of the class. This letter of credit can be used at any ISPI course within 1 year of the cancellation date for the amount refunded.
- ◆ There is no refund and no letter of credit for not attending the evening class without prior notification.

You can register by mailing a registration form, fax a registration form or call and register over the phone

International Spine & Pain Institute
PO Box 232
Story City, IA
50248

Phone: 1-866-235-4289
Fax: 1-515-733-2744