



ORL Essentials Boot Camp



July 12, 2014
8 a.m.-5 p.m.

Clinical Simulation Center
University of Michigan
G2400 Towsley Center
1500 E. Medical Center Dr.
Ann Arbor, MI 48109

ORL ESSENTIALS BOOT CAMP

Learn airway management from intubation to tracheostomy, drainage of peritonsillar abscess, myringotomy with tube insertion, adenoidectomy and basic sinus surgery skills. Assess on-call readiness and management of common ORL emergency scenarios through hands-on experience using high-technology manikins.

With emphasis on experience and practice rather than lectures and formal didactics, learners leave with increased comfort and confidence as they embark on their early careers!



Curriculum

- Direct Laryngoscopy
- Bronchoscopy
- Foreign Body Removal
- Cricothyrotomy
- Adult Tracheostomy
- Pediatric Tracheostomy
- Myringotomy Tubes
- PTA Drainage
- Complex Scenarios

Schedule

7:30 a.m.	Check-In and Continental Breakfast
	Introduction
	Morning Session
	Lunch
	Afternoon Session
	Debrief
5 p.m.	End Course

University of Michigan Course Instructors



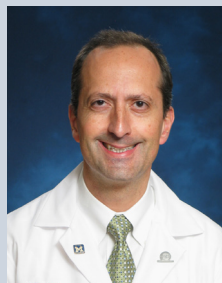
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Hotel Accommodations

The following hotels are within just a few miles of the University of Michigan Health System campus.

Bell Tower Hotel
300 S. Thayer St.
Ann Arbor, MI
(734) 769-3010

Holiday Inn Hotel Ann Arbor
3600 Plymouth Rd.
Ann Arbor, MI
(734) 769-9800

Hampton Inn
2300 Green Rd.
Ann Arbor, MI
(734) 996-4444

Microtel Inns and Suites
3610 Plymouth Rd.
Ann Arbor, MI
(800) 337-0050

Parking

Please park in the P2 parking structure, which is attached to the Taubman Center. Take the elevator to level 2. Once on level 2, follow the signs to the Clinical Simulation Center.

Registration

Registration is **\$200 per person** and includes all course materials and supplies, a parking coupon, breakfast and lunch. You may register online or via mail. **Online registration is preferred.**

Online Registration

To register online and pay via credit card, please visit orlessentialsbootcamp.com.

Mailed Registration

If you prefer to pay via cash or check, please complete and return this registration packet to the address below. Checks should be written to "University of Michigan."

Amanda Thatcher
1500 E. Medical Center Dr.
1904 Taubman Center
Ann Arbor, MI 48109-5312

Name: _____

Organization: _____

Address: _____

City: _____ State _____ Zip: _____

Phon _____ E-mail: _____

What will be your resident year in July? _____

Dietary Restrictions (Check all that apply.):

Vegetarian

Vegan