

About

The **Continuing Education Series: Ventilation Science & Technology Education Course**, sponsored by **Oxygen Care**, is a detailed and comprehensive course, covering history of ventilation, workstations, electrical Safety. This course will bring participants up to date with current guidelines and practices in managing ventilation systems and safety.

Cost: €10 members /€20 non-members
Location: Green Isle Hotel, St John's Dr, Newlands Cross, Dublin 22
Time: 10.00am – 3.00 pm
Registration: See Below



The course will cover

- Respiratory Physiology and Ventilation Science
- Types and Classes of Ventilators
- Ventilation Modes, Waveforms and Technology
- Ventilation technology and the ICU environment
- Practical Demonstrations: Ventilator Set Up and Checklist Protocols
- Ventilator Fault Finding, Troubleshooting and Testing
- Humidification and Nebulisation
- General Safety and Electrical Safety Standards and Awareness as applied to the Ventilator Environment.
- Ventilator Technology Standards

Speakers Include

- Fran Hegarty
- Tom Larkin
- Grace Fallon
- Ronan MacLoughlin, Science Manager, Aerogen
- Peter Grainger

Who Should Attend?

- Clinical Engineers,
- Allied Health Care Professionals,
- Physiotherapists,
- Health & Social Care Professionals,
- Community Nurses
- Clinicians.

Certification/CPD

This course qualifies for BEAI Certificate of Attendance on Submission of a Learning Participation Document.

Registration & Payment Options

1. Online – Register & Pay Online

- A. Members: [Click Here](#)
- B. Non-Members: [Click Here](#)



2. Registration Form

Please complete your details below and email form to Barbara Conway @admin@beai.ie



Please register me for _____ place(s) for
Continuing Education Series: Ventilation Science & Technology Education Course, 28th March
2019

Personal Details

Name: _____ Family Name _____

Email: _____

Mobile Phone: _____ Direct Dial _____

Hospital/Company: _____

Address _____

County _____ Post Code _____

Payment Options: Members €10/Non-Members €20

1. Card Please charge my card for: _____ Card No _____

Expiry Date _____ Security No: _____

Card Billing Address _____

County _____ Post Code _____



3. Invoice

Please invoice me at by email at _____



4. Pay at the Door

I will pay at the door on the day

