

DELIVERY TECHNICIAN CERTIFICATION™ PROGRAM



Thursday
April 15, 2010
 Lisle/Naperville Hilton Hotel
 Lisle, IL

Program Scheduled Time
 8:00 am - 9:00 am Registration
 9:00 am - 3:30 pm Class
Written Test
 3:30 - 4:30 pm

Presented by:



COURSE OUTLINE

- Equipment Operation Review
- Best Delivery Practices
- OSHA Universal Precaution/Infection Control Training
- DOT Regulations & HAZMAT Training
- Accreditation Standards
- HIPPA, Drug and Alcohol, and Reimbursement Basics
- Program Review and Test Instruction

PROGRAM

IAMES and the American Association for Homecare has designed a certification program for delivery technicians in order to recognize persons who have successfully demonstrated their knowledge of a variety of equipment setups, documentation and data needed for company records, as well as the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), Department of Transportation (DOT), and Occupational Safety and Health Administration (OSHA) requirements as it directly relates to their job description.

Drivers will be sent a certificate upon successful completion of the written test. A minimum of 80% is required on the written test for certification.

REGISTRATION FEE

AAH/IAMES Members \$195
 Non-Members \$295

HOTEL INFORMATION

Please call the Hilton at 630.505.0900 to reserve a room or to ask for directions. ***IAMES conference hotel rate of \$115 - limited space available.***


RETURN ATTACHED FORM TO:

IAMES
 1601 N Bond Street, Suite 303
 Naperville, IL 60563
 Phone: 630.369.7782
 Fax: 630.369.3773
 Email: tracy@iames.org

WHO SHOULD ATTEND

HME operations managers, dispatchers and delivery/service technician personnel.

Cancellation Policy: Seminar registration cancellations must be received in writing at IAMES no later than 10 days to the date of the seminar to qualify for a credit. No cash refunds will be granted. IAMES reserves the right to cancel seminars because of emergencies, insufficient registrations, etc.

DELIVERY TECH REGISTRATION FORM	<p>YES, I wish to attend the Delivery Technician Certification Program on Thursday, April 15, 2010, at the Hilton Hotel, Lisle, IL.</p> <p>Please select the appropriate fee:</p> <p><input type="checkbox"/> IAMES Members \$195</p> <p><input type="checkbox"/> Non-Members \$295</p> <p>Questions? Please call Tracy Hodge at 630.369.7782</p> <p>Presented by:</p> 	<p>REGISTRANT INFORMATION (Please photocopy form for additional registrants)</p> <p>Name _____ Title _____</p> <p>Company Name _____</p> <p>Street Address _____</p> <p>City/State/Zip _____</p> <p>Phone _____ Fax _____ Email _____</p>	
	<p>Method of Payment</p> <p><input type="checkbox"/> Payment enclosed (check payable to IAMES)</p> <p><input type="checkbox"/> Bill my credit card: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard</p> <p>Card # _____ Exp. Date _____</p> <p>Name on Card: _____ Signature: _____</p>	<p>Please list total amount enclosed or to be charged:</p> <p>\$ _____</p>	
	<p>Please check here if you will require special assistance to fully participate. Attach a description of all needs. <input type="checkbox"/></p>		