

*Samaritan Healthcare invites you to join us for the two-day course;*

## “Excellence in Care with the Ten Steps”

presented by Molly Pessl of Evergreen Perinatal Education

### COURSE DESCRIPTION

This two-day, in-person workshop advances evidence-based infant feeding policies and practices in the hospital or clinic. It also provides the education cornerstone for hospitals who wish to pursue the designation of “Baby-Friendly”. This workshop explores the rapidly changing role of all healthcare professionals in caring for pregnant and new families and is designed to help hospitals and communities provide the basics of early breastfeeding care, with a focus on implementing The Ten Steps to Successful Breastfeeding.

### COURSE DETAILS

*Two date options to choose from:*

#### **AUGUST 2-3, 2016**

Time: 8 am - 5 pm

Fee: \$200.00

Lunch and course materials will be provided.

#### **AUGUST 23-24, 2016**

Time: 8 am - 5 pm

Fee: \$200.00

Lunch and course materials will be provided.

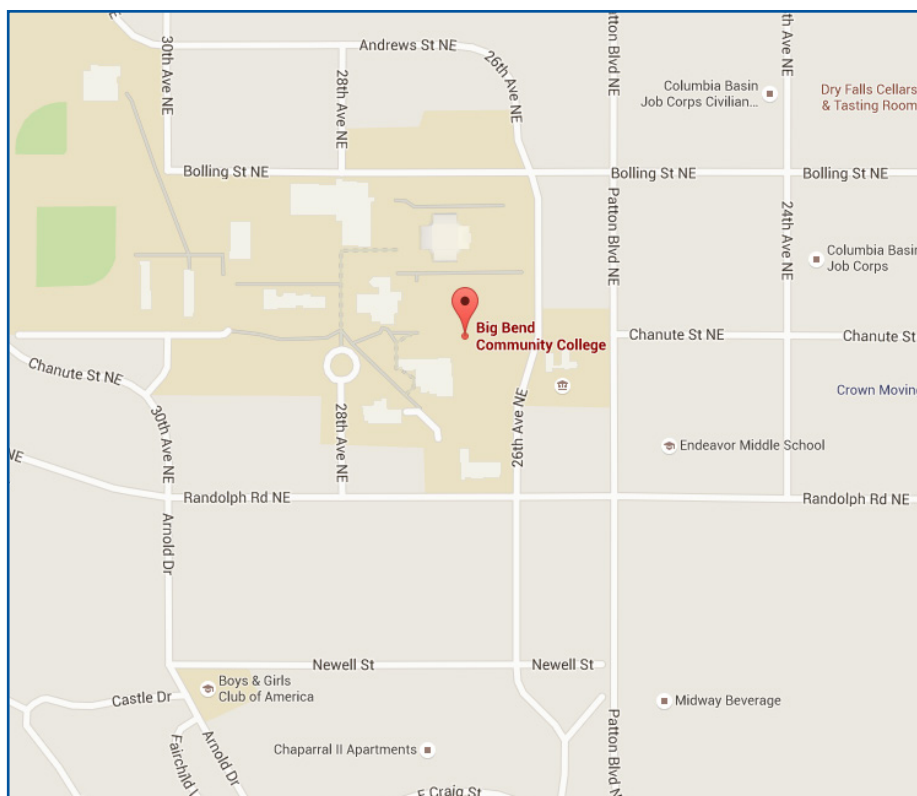
### LOCATION

This course will be hosted at the Big Bend Community College ATEC Building in the Masto Conference Room.

7662 Chanute Street N.E., Moses Lake, WA 98837

For further location instructions visit:

[bigbend.edu/information-center/maps-and-directions/](http://bigbend.edu/information-center/maps-and-directions/)



### FOR COURSE OR PAYMENT QUESTIONS:

Missy Lightel, Education Program Assistant

Phone (509) 793-9690 Fax (509) 764-3229 Email [milightel@samaritanhealthcare.com](mailto:milightel@samaritanhealthcare.com)



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#### COURSE OBJECTIVES, AGENDA & CONTENT

- Describe barriers to effective communication with women about feeding their babies.
- List birthing routines that may influence breastfeeding success.
- Discuss the rationale of skin to skin care for mother and baby.
- Describe how our care influences milk production.
- Describe the basic elements of correct positioning and latch.
- Perform a breastfeeding LATCH score.
- Identify the special needs of babies born too early.
- List ways for mothers to maximize breastmilk production.
- Describe the importance of human milk for human babies.
- List possible negative effects of supplementing babies with breastmilk substitutes.
- Discuss some marketing tactics used by commercial baby food industries.
- Evaluate the current AAP recommendation about infant sleep.
- List several possible responses when women request formula, nighttime nursery care.
- Discuss the rationale of restricting pacifier use in the early weeks of breastfeeding.
- Describe infant feeding cues.
- Develop a care plan to help a mother with nipple pain, engorgement, and/or infection.
- Discuss the importance of providing protection and support to childbearing women.

#### EDUCATION CREDITS

This offering has been approved by the following organizations for the respective hours of continuing education credit.

International Board of Lactation Consultant Examiners,  
Provider Number: CLT108-4

15 CERPs (13 L & 2 E) (For IBCLCs only)

15 instructional hours on the IBLCE Exam Blueprint (for preparation for first IBLCE exam)

Commission on Dietetic Registration

15 CPE hours, Category II (For RDs only)

Provider approved by California Board of Registered Nursing,  
Provider Number: CEP 14127 5

18 contact hours (50 minute hours) (For RNs only)

#### MORE ABOUT EVERGREEN PERINATAL EDUCATION

Visit them online: [evergreenperinataleducation.com](http://evergreenperinataleducation.com)

*Course brought to you in part with  
Big Bend Community College Nursing Program*



**REGISTRATION INSTRUCTIONS**

**Course fee \$200.00 per attendee.** Payment can be made by credit card or check. If paying with a credit card, attendees can register over the phone, by fax, email or mail. If paying with a check, registration form must be returned by mail with the check.

Name	Organization
<input type="text"/>	<input type="text"/>

Professional Title	License Number
<input type="text"/>	<input type="text"/>

Phone	Email
<input type="text"/>	<input type="text"/>

Date of Training I'm registering for (please check one)

August 2-3, 2016

August 23-24, 2016

<b>Payment Information</b>	<input type="checkbox"/> Check enclosed	<input type="checkbox"/> Visa or Mastercard
Cardholder Name	<input type="text"/>	
Card Number	<input type="text"/>	Expiration (mm/yy) <input type="text"/>
Verif. Code	Signature	<input type="text"/>

**\*\*Please make your check payable to: Samaritan Healthcare*****To register by mail (include this form)******Check or Credit Card***

Attn: Education/Missy Lightel  
801 E. Wheeler Rd.  
Moses Lake, WA 98837

***To register by fax (include this form)***

**\*Credit Card registration only**  
(509) 764-3229

***To register by email (include this form)***

**\*Credit Card registration only**  
[milightel@samaritanhealthcare.com](mailto:milightel@samaritanhealthcare.com)

***To register by phone***

**\*Credit Card registration only**  
(509) 793-9690

**For course or payment questions:**

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