

2010 Critical Care Transport Medicine Conference

Sheraton Gunter Hotel - San Antonio, Texas

April 12-14, 2010

All topic submissions are due no later than **August 15, 2009**.

Your submission will NOT be considered if the objectives and outline are missing. A separate set of forms must be completed for all co-presenters.

Submit your topic electronically to Ppeter1111@aol.com; you will receive confirmation. CCTMC offers the primary speaker a \$200.00 honorarium and complimentary registration to the conference (travel expenses are not reimbursed).

Name & Degree: _____

Title & Facility: _____

Email: _____

Preferred Mailing Address: _____

Phone Number: _____ Fax Number: _____

Education:	Degree/Major	Institution/Location	Year
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Summarize your professional experience related to presentation/committee member: (Include previous presentations, published articles, clinical experience related to the topic)

This person's participation in this offering includes:

Development of:

____ Objectives

____ Content

____ Evaluation Tools

____ Other (describe) _____

Selection of:

____ Teaching Methods

____ Handouts and Bibliography

List your three most notable presentations including:

1) Title of presentation

2) Name of conference

3) Year

4) Audience Size

Proposed Course Offering

Presentation Title:

Presentation Description: (brief paragraph)

Category of Presentation: ____ Clinical ____ Education ____ Management ____ Research
____ Professional Development

Depth of the presentation should be intermediate or advanced.

Presentation Objectives:

1. _____

2. _____

3. _____

Outline of Presentation: (an outline of the presentation must be included with this submission).

Teaching Method: (List all that apply)

- | | |
|------------------|-----------------------|
| _____ Lecture | _____ Discussion |
| _____ Slides/LCD | _____ Hands on Skills |

Thank you.