

# EVIDENCE BASED PRACTICE: BUILDING A ROAD TO NURSING EXCELLENCE

(5 contact/clock hours)

CE Approval Codes: NHA(A), RN, LPN

**PURPOSE:** To adopt the concepts of evidence based practice in all aspects of clinical practice to improve patient/resident care.

## OBJECTIVES:

1. Review origins and principles of evidence based practice (EBP).
2. Define EBP as a path to exemplary clinical practice.
3. Choose applicable research (evidence-based) when planning quality improvement activities.
4. Apply EBP findings into the clinical setting.

**PROGRAM:** 8:30 a.m. Registration, 9:00 a.m. - 3:45 p.m. Program

History

EB Paradigm, EBP's Merge Into Nursing Profession

What is EBP in Nursing

Essentials for a Safe Practice

Keeping Evidence Person Centered

Lunch (on your own) 11:45 a.m. - 1 p.m.

Designing the Blueprint

What is Relevant for Quality Improvements

Key Landmarks to Look for When Appraising the Evidence

Apply EBP Findings

Formatting Evidence Into the Clinical Setting

Attributes of an Evidence Based Nurse

## PROGRAM FEES

Member: \$125

Nonmember: \$160

**SPEAKER:** Carolyn Flint, MSN, RN-BC, Assistant Director of Nursing Services, Phelps County Regional Medical Center, Rolla, Missouri. Carolyn provides clinical and personnel oversight and assistance to the ADON on all nursing units.

## DATES & SITES:

April 23

**Springfield,** Ozarks Community Hospital, 2828 N. National, Conference Room. (Take I-44 to Glenstone Ave. exit. Go South on Glenstone Ave., right on Evergreen St. Turn left into hospital parking lot. Enter building at entrance with flagpole and awning.)

May 12

**Rolla,** Phelps County Regional Medical Center, Private Dining Rm. 2, 1000 W. 10th

June 2

**St. Peters,** St. Charles Community College, Student Center, Rooms 205 & 206, 4601 Mid Rivers Mall Dr. (Park in green lot.)

June 23

**St. Joseph,** Ramada Inn, Lotus Room, 4016 Frederick Ave.

June 24

**Lee's Summit,** John Knox Village, Courtyard Community Center, 510 N.W. Peace Pkwy. (Look for the large parking overhang at the Courtyard Commons entrance. Enter the building through the "510" entrance.)

## EVIDENCE BASED PRACTICE:

### BUILDING A ROAD TO NURSING EXCELLENCE

(Please print or type - for multiple registrations, please copy form)

Name \_\_\_\_\_  
Last Four Digits of your S.S. # \_\_\_\_\_  
Home Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Position \_\_\_\_\_  
 NHA  RN  LPN  OTHER \_\_\_\_\_  
Place of Employment \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Work Phone \_\_\_\_\_ Fax # \_\_\_\_\_  
Email \_\_\_\_\_  
Providing your email address authorizes MLN to send you timely information.

PLEASE INDICATE:

Date \_\_\_\_\_ City \_\_\_\_\_

#### Please Check:

MLN Individual Member \$125  MLN Agency Member \$125  
 Nonmember \$160  
 Group Rate Member (3 or more for this workshop) \$115  
 Group Rate Nonmember (3 or more for this workshop) \$150  
 Program & 1 Year MLN Individual Membership \$175  
 Program & 1 Year MLN Agency Membership \$320  
 Agency Membership Dues \$195  
 Individual Membership Dues:  1 year \$50  2 years \$80  
 On-site Registration, Additional \$15  
 Add  \$1  \$5  \$10 to support nursing scholarships

Please check method of payment. We cannot bill you.

Check Enclosed  Debit Card  
 Discover/MasterCard/Visa Total Enclosed \$ \_\_\_\_\_  
Card # \_\_\_\_\_  
Exp. Date \_\_\_\_\_ 3-Digit Security Code \_\_\_\_\_  
Zip Code of Credit Card Billing Address \_\_\_\_\_

Signature \_\_\_\_\_  
Send payment to: Missouri League for Nursing, PO Box 104476, Jefferson City, MO 65110-4476