

The North Texas Regional Extension Center (NTREC) Presents Health Information Technology (HIT) Workshop with CME

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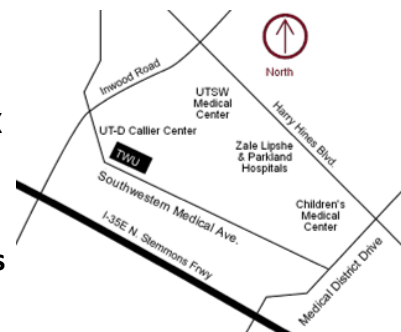
Thursday, June 16, 2011

TWU College of Nursing
5500 Southwestern Medical Ave, Dallas, TX

Schedule

- 1:00 PM – 6:00 PM: HIT workshop**
- Electronic Health Record (EHR) Vendor Demos**
- 6:00-6:30 PM: NTREC Service Overview**
- 6:30-7:00 PM: North Texas HIE Update**
- 7:00 PM: Patient Privacy & Safety CME**
- Guest speaker with catered dinner**

**Dinner and CME for providers only.*



The NTREC provides assistance with selecting, implementing and optimizing EHR systems to achieve meaningful use. The NTREC is physician-centric and provides on-site services at \$300 per year for primary care physicians.

Call (469) 648-5140, E-mail info@ntrec.org or visit www.ntrec.org to sign up for services today.



Awardee of The Office of the National Coordinator for Health Information Technology

HIT Workshop:

Looking to implement an EHR, but not sure which system to use? Beginning at 1:00 PM, there will be 30-minute demonstrations of some of the leading EHR systems in Texas.

Patient Privacy & Patient Safety

Explore the inherent conflicts and challenges of patient rights, patient safety, feasibility, and the de-identification of data.

Speakers:

Bryan K. White

Bryan White has served as the executive director for the Partnership HIE since its inception in November of 2010.

Dr. Michael Stearns

e-MDs' CEO/President. Dr. Stearns is a board certified neurologist and one of the more experienced physician health care informaticists in the nation. With more than 10 years of experience in the health information technology sector, he has provided leadership to several high profile projects.

Featured Sponsor:



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- And others...

Funds provided by the Office of National Coordinator, Department of Health and Human Services Grant #90RC0048.

RSVP to the NTREC by June 10: e-mail info@NTREC.org or fax (469) 648-5048

Count me for: HIT Workshop CME Presentation and Dinner

Full Name: _____ Organization: _____

Mailing Address: _____ City: _____ State/Province: _____

Zip/Postal Code: _____ Telephone: (____) _____

E-mail: _____