

## Travel

Each confirmed student will fill out a Travel Request form upon receiving confirmation of registration.

## Transportation

Students will be provided with bus schedules, bus tickets, and taxi vouchers for transport to the various locations on the schedule throughout the week.

## Accommodation

Accommodation for the visiting students will be arranged through Education Services, Glenrose Rehabilitation Hospital. Students will be staying at Shaffer Hall on the University of Alberta campus.

# 2009 Summer Institute in Geriatrics

June 22 - 26, 2009  
Edmonton, Alberta

## Program and Registration

## Course Description

This five-day conference will provide medical students who are entering their first or second year of medical school, an exciting opportunity to gain exposure to clinical work and academia in Geriatric Medicine. Activities include interactive presentations, patient/problem-based learning, and exposure to a variety of Geriatric services as well as site visits to clinical programs. We will also provide students with opportunities to experience the City of Edmonton. Faculty members will include specialists in Geriatric Medicine, Care of the Elderly physicians, and Geriatric Psychiatry physicians. The goal of the Geriatrics Summer Institute is to stimulate interest in pursuing careers in Geriatric Medicine and Research.

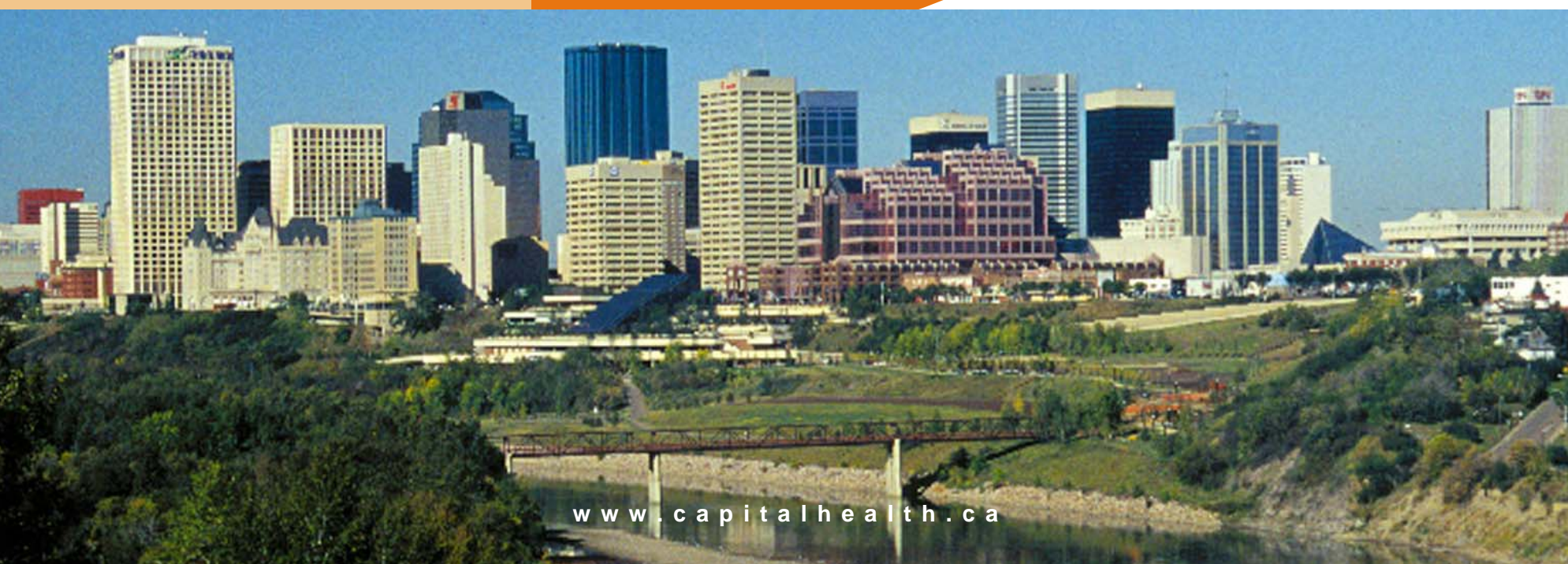
## Registration Process

A registration form is included in this brochure. All universities will receive an email with a brochure that can be downloaded to their local Geriatric Medicine website. The brochure will also be posted on the Canadian Geriatrics Society website. Registration forms should be completed by interested students and submitted to their "home" University, Division of Geriatric Medicine office. Approval signatures and payment from the University are required to accompany the registration. Please see registration form for further information.

**Registration deadline is March 30, 2009.**

## Successful Applicants

Each university will have their own selection criteria to choose first or second year medical students from their school, and then forward the student information to Education Services, Glenrose Rehabilitation Hospital. The cost for each student will be subsidized by the Canadian Geriatrics Society, and the student's local University. This will cover the cost of travel, lodging, meals, etc. Details and schedule will be distributed to all registered students prior to the conference.



### Preliminary Schedule

**Sunday, June 21, 2009**  
Students arrive in Edmonton

**Monday, June 22, 2009**  
**Glenrose Rehabilitation Hospital**  
Orientation  
Keynote Speakers  
Tour of Geriatric Programs  
Patient Centered Learning  
Welcome Dinner

**Tuesday, June 23, 2009**  
**Katz Building, University of Alberta**  
Problem-Based Learning  
Interactive Presentations  
Geriatrics  
Free Evening

**Wednesday, June 24, 2009**  
**Misericordia Community Hospital**  
Problem-Based Learning  
Tour of Geriatrics Facilities  
West Edmonton Mall  
Free Evening

**Thursday, June 25, 2009**  
**Various Hospitals**  
Clinical Experience: Units, Consult, Clinics,  
Outreach  
Farewell Dinner

**Friday, June 26, 2009**  
**Glenrose Rehabilitation Hospital**  
Spotlight on Research  
Student Presentations  
Summary/Evaluations  
Depart from Edmonton

### Course Materials

Registered students will be emailed an orientation manual and suggested reading materials prior to the conference.



### For further information:

Education Services  
Glenrose Rehabilitation Hospital  
Room 19, 10230-111 Avenue  
Edmonton, AB T5G 0B7  
Phone: 780-735-7912  
Toll Free: 1-877-877-8714  
Email: GRHedServices@capitalhealth.ca

### Registration Information

Conference registration fees include all Conference materials and most meals.

#### Registration and Refund Policy

Payment can be made by cheque or credit card and must accompany the registration form. Cancellations will be accepted until March 30, 2009. A processing fee of \$50 will be charged for cancellations made after March 30, 2009.

#### Confirmation and Receipts

A letter of confirmation and receipt of payment will be sent via email within 5 days of receiving your completed registration form and full payment. If an email address is not provided on the registration form, the information will be sent by mail.

#### Freedom of Information and Protection of Privacy Act

The registration information is collected under the authority of the "Freedom of Information and Protection of Privacy Act". The information you provide is required to register you in the course, prepare material for your use and will be used to notify you of other courses or pertinent information. Financial information is used to process applicable fees and is not retained for future reference. If you have any questions about the collection or use of this information please call us.

#### Please send registration form and full payment to:

**By Mail:** Glenrose Rehabilitation Hospital  
Education Services  
Room 19, 10230 111 Avenue  
Edmonton, AB. T5G 0B7  
**By Fax:** 780-735-7924

## 2009 Summer Institute in Geriatrics Student Registration

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Title \_\_\_\_\_ Organization \_\_\_\_\_

Address: please indicate Work or Home \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email address \_\_\_\_\_

### University Approval/Payment

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Title \_\_\_\_\_ Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email address \_\_\_\_\_

#### Approval Signature

**Registration Fee: \$1000.00**

#### Method of Payment

- Cheque:** payable to **Alberta Health Services**
- VISA**  **MasterCard**  **American Express**

Name on card \_\_\_\_\_

Card Number \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Expiry Date \_\_\_\_ / \_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_