

**President:**  
**Denise Rounds**



**Address:**  
**Sheraton Fairplex Hotel**  
**601 W. McKinley Ave.**  
**Pomona, CA 91768**

**Save the Date:**  
**September 19, 2019**

## *a view from the inside*

*"I was always looking outside myself for strength and confidence but it comes from within. It is there all the time." Anna Freud*

**7:30 am – 8:00 am Breakfast**

**8:00 am – 9:00 am**  
**Mark Davidson, MD**  
**Gastroenterology Updates**

**Break 9:00 am – 9:15 am**

**9:15 am – 10:15 am**  
**Frank Pefley**  
**The Braille Institute-Resources and Educational Support for the Legally Blind**

**Break 10:15 am – 10:30 am**

**10:30 am – 11:30 am**  
**Tina Odjaghian, Esq. - Odjaghian Law Group**  
**Legal Perspective on Understanding Traumatic Brain Injuries and All the Medical Consequences**

**Date: Thursday, September 19, 2019**

**Registration: 7:30 am – 8:00 am**

**Meeting: 8:00 am – 11:30 am \*Breakfast included**

**Place: Sheraton Fairplex**

**601 W. McKinley, Ave., Pomona, CA 91768**

**Phone 562-426-0555**

**CONTACT HOURS:**

**3 CONTACT HOURS**

**BRN – CEP 14032\***

**CCM – ACTIVITY CODE PENDING**

**APPROVAL CODE PENDING**

**\*Provider approved by the California Board of Registered Nursing, Provider #CEP14032 for 3 contact hours**

**Make check payable to CMSA-SCC (NO REFUNDS FOR THIS EVENT)**

**Please mail payments to: 2700 Dawson • Signal Hill, California 90755**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Company: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ CMSA Member #: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Method of Payment**

- |                                                                                               |                                                                               |
|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| <input type="checkbox"/> \$25 Member Paid Pre-registration                                    | <input type="checkbox"/> \$35 Member Walk-in or Non Paid Pre-registration     |
| <input type="checkbox"/> \$40 Non-Member Paid Pre-registration                                | <input type="checkbox"/> \$50 Non-Member Walk-in or Non Paid Pre-registration |
| <input type="checkbox"/> \$5 Full-Time Nursing Student Pre-Registration Only/\$10 at the door |                                                                               |

**Please note that a check must be received by CMSA no later than September 18, 2019 in order to be pre-registered**  
**You may also register and pay online at CMSASCC.org or by phone**  
***If you have questions, please call (562) 997-9077***