

# CFRI Tape Order Form

## 2003 16<sup>th</sup> CFRI Annual Educational Conference

<u>Tape</u>	<u>Topics/Speakers</u>	<u>Time</u>	<u>Cost</u>
1. The Relationship Between Psychosocial Issues and Nutritional Status.	Rebecca Bathon, MSW	44 Minutes	
CF: Living It, Researching It And Where We Are Now.	Paul Quinton, Ph.D.	55 Minutes	\$6.00
2. Antibiotic Treatment of Lung Disease in CF.	Lisa Saiman, M.D.	56 Minutes	
CF and Life adjustments: Coping with Whatever Comes	Rev. Alice Zulli	54 Minutes	\$6.00
3. Challenges of End Stage And Loss - Panel Discussion	Rev. Alice Zulli, Moderator	57 Minutes	
CF In The Classroom	Linda LeNoir, RN & Jeannie Kane, M.A.	60 Minutes	\$6.00
4. Exercise As A Form of Airway Clearance.	Randah Whitley, PT	44 Minutes	
Inhaled Glutathione As A Potential CF Therapy.	Clark Bishop, M.D. & Valerie Hudson, Ph.D.	62 Minutes	\$6.00
5. Gene Therapy Research: How Close are We?	Richard Moss, M.D.	56 Minutes	\$4.00
6. The Endocrine System in Patients with CF: Updates in CF Related Diabetes, Growth and Development and Osteoporosis.	Judy Kalinyak, M.D.	52 Minutes	\$4.00
7. Compliance: Choices And Consequences - Parents/CF Adult Panel Discussion	Hatsuko Arima, LCSW, Moderator	79 Minutes	\$4.00

## **2003 STANFORD CF CENTER EDUCATION DAY-TAPE #1 –**

Noreen Henig, MD - "Introductions",

Julie Matel, RD – "Eating Behaviors in Infants and Toddlers" (24 Minutes),

Manuel Garcia, MD – "GI-Related Issues: Reflux and DIOS in CF" (41 Min),

Zoe Davies, PNP, "Update on Gene Therapy" (20 Minutes),

Beth Sufian, JD, "Legal Rights of Patients and Their Families" (68 Minutes)

## **2003 STANFORD CF CENTER FAMILY EDUCATION DAY-TAPE #2 –**

Colleen Dunn, RCP, "Current and Upcoming Clinical Trials at Stanford" (4 Minutes),

Carol Conrad, MD, "Azithromycin Use in CF" (35 Minutes),

Denise Angst, DNSc, "Factors affecting adherence with medical treatment in CF" (36 Minutes),

Jose Maldonado, MD, "Coping with CF and Depression"(43 Minutes).

(Please circle your selections) Depending upon anticipated orders, your patience is appreciated.

Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Email \_\_\_\_\_ Number of Tapes ordered \_\_\_\_\_

Credit cards: \_\_\_ Mastercard \_\_\_ Visa \_\_\_ Discovercard Other \_\_\_\_\_

Card Account Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Amount Submitted \$ \_\_\_\_\_ Signature \_\_\_\_\_