

# The S.T.A.B.L.E. Program Registration Form

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## **S.T.A.B.L.E. Learner Course Renewal – Two Options** (updated 4.8.2019)

Learner Course completion cards are valid for two years, therefore, renewal is recommended every two years. Currently, two options are available for Learner course renewal. Two factors need to be considered when selecting an option:

1. The level of facility where newborn care is delivered – level 1 (basic), level 2 (intermediate), or level 3 - 4 (intensive care).
2. The student's experience with sick newborns and their neonatal knowledge base.

### **Option ONE: Course Type – Full-length Course.**

- Teach a full-length learner course.
- Participants must have access to the most current edition of the Learner manual and the instructor must utilize the most current edition of program materials.
- Quizzes and Testing: Participants must take all quizzes in the program and achieve a final mixed module passing score of 0 to 2 wrong.

### **Option One is recommended for:**

- a) Level 1 facilities or facilities without obstetric services.
- b) Health care providers who predominantly work with well newborns or mildly ill newborns in level 2 and 3 facilities.
- c) Facilities with a low transport or transfer volume due to a low number of infants born who are ill and/or premature.
- d) Participants who previously scored 5 or more wrong on the mixed module test and were not awarded a course completion card.

### **Option TWO: Course Type – Short-length Renewal.**

- Teach a renewal (shorter duration) learner course. The renewal presentation is designed to be approximately 4-5 hours in length. Slightly less than half of the S.T.A.B.L.E. learner course slides have been removed from the full-length course and it is expected the pace of the course will be faster than when teaching a full-length learner course to less experienced personnel.
- Participants must have access to the most current edition of the Learner manual and the instructor must utilize the most current edition of program materials.
- Quizzes and Testing: Participants must take all quizzes in the program and achieve a final mixed module passing score of 0 to 2 wrong.
- Lead instructor submits a student roster indicating RENEWAL.

### **Option Two is recommended for:**

- a) Students who previously completed a full length learner course.
- b) Nurses, respiratory therapists and physicians who work with newborn intensive care unit patients. Please consider the knowledge base and work area of participants when selecting Option Two.

**Note:** The Lead instructor is responsible for verifying the student's course completion card and that they previously passed a full length learner course.

The renewal course slides are also designed to serve as the physician edition 5-hour program. Please note that the shortened physician edition program is intended for post-residency physicians. Those students renewing under Option Two may also attend with physicians if desired.

**\*\* If attending the renewal course, previously earned S.T.A.B.L.E learner card MUST be brought to class. \*\***

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**\*\* If attending the renewal course, previously earned S.T.A.B.L.E learner card MUST be brought to class.\*\***

See description of class for recommended choice

## Full Length Course

- June 15, 2020- Bldg. 1- LL  
 October 19, 2020- Rvsd. 2<sup>nd</sup> Fl.

Time: 745-1715

**FEE: \$20.00** payment is non-refundable

## Short length RENEWAL

- April 20, 2020- Bldg. 1- LL  
 August 31, 2020- Bldg. 1- LL  
 December 14, 2020- Rvsd. 2<sup>nd</sup> Fl

Time: 0745-1300

**FEE: \$10.00** payment is non-refundable

**IMPORTANT:** To satisfy the requirements for this activity, the learner must attend the entire course, complete the written post-test with a passing score, and complete the evaluation form.

## **PLEASE PRINT**

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

\*HOME Address: \_\_\_\_\_

\*Confirmation will be mailed to your **HOME** address.

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

Daytime Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

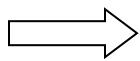
Institution/Office Affiliation: \_\_\_\_\_

Department: \_\_\_\_\_ Email \_\_\_\_\_

Cost includes additional course materials. Please dress in comfortably and in layers.

**\*Fee Does NOT include the S.T.A.B.L.E.® book. Each student should have access to a S.T.A.B.L.E book prior to class, if not, one will be provided during the in class session.**

**The 6<sup>th</sup> Edition book can be ordered at [www.AAP.org](http://www.AAP.org) or [www.stableprogram.org](http://www.stableprogram.org).**



Fax to 815-971-9359 or 815-968-5742 prior to class.

Call Heidi 815-971-6359 for availability and payment options, if needed.

Receipt of the faxed registration is a commitment by the hospital, office or attendee.

**Class size is limited and on a first come first served basis; early registration is advised.**

## Check Made Payable To: Javon Bea Hospital

**Mail** copy of Registration Form with  
Non-Refundable Check to:  
Northwest Illinois **Perinatal Center**  
2400 N. Rockton Ave.  
Rockford, IL 61103

<b>Mercyhealth Internal Use ONLY</b>
Manager Signature of Approval
Cost Center to Charge