Leaders Conference Registration Form

21st Annual ASHP Conference for Pharmacy Leaders (PPM16)
October 17–18, 2016 | Westin, O’Hare | Chicago, Illinois

Note: Attendance is limited on a first-come-first-served basis. It's best to register online at www.ashp.org/LC16

Registration Information
(Please provide home and business information and check preferred address for correspondence)

ASHP Member ID# (if applicable) ________________________________________________________________

Name and ID# of ASHP member pharmacist* (if applicable) _______________________________________

Name ________________________________________________________________ Title ________________

Name for Badge __________________________________________________________

Home Address

City/State/Zip

Business Name

Business Address

City/State/Zip

Daytime Phone: (______ ) __________________________________ Fax (______ ) _________________

Email ________________________________________________________________

Conference Fees* (PPM16) (check one)

<table>
<thead>
<tr>
<th></th>
<th>By Sept 16</th>
<th>Sept 17 and after</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASHP member</td>
<td>$535</td>
<td>$625</td>
</tr>
<tr>
<td>Nonmember</td>
<td>$880</td>
<td>$950</td>
</tr>
<tr>
<td>Second registrant (member)**</td>
<td>$440</td>
<td>$510</td>
</tr>
<tr>
<td>Second registrant (nonmember)**</td>
<td>$745</td>
<td>$795</td>
</tr>
<tr>
<td>Resident (member)</td>
<td>$335</td>
<td>$430</td>
</tr>
<tr>
<td>Resident (nonmember)</td>
<td>$540</td>
<td>$600</td>
</tr>
<tr>
<td>Student (member)</td>
<td>$330</td>
<td>$420</td>
</tr>
<tr>
<td>Student (nonmember)</td>
<td>$540</td>
<td>$600</td>
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Managers’ Boot Camp Workshop (optional)

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<tbody>
<tr>
<td>Member</td>
<td>$330</td>
<td></td>
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<tr>
<td>Nonmember</td>
<td>$380</td>
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TOTAL REGISTRATION $ ______________

What is your primary position? (please check one)

A  ☐ Director
   ☐ Associate or Assistant Director
   ☐ Clinical Coordinator
   ☐ Other Supervisory Position

B  ☐ Staff Pharmacist
   ☐ Clinical Pharmacist-General
   ☐ Clinical Pharmacist-Specialist
   ☐ Faculty

C  ☐ Resident

D  ☐ Student

E  ☐ Technician
   ☐ Physician
   ☐ Nurse
   ☐ Medication/Patient Safety Officer
   ☐ Informatics/Technology Specialist
   ☐ Other: _____________________________

* Note: CEO, CFOs, and other health-system administrators may register at the ASHP member price when they register with a member pharmacist from the same organization. Include ASHP member name and number above. Each registrant must complete a separate registration form, and all forms must be attached and submitted at the same time (by fax or mail only).

** Each registrant must complete a separate registration form, and all forms must be attached and submitted at the same time (by fax or mail only). See www.ashp.org/LC16 for information on registering more than one person from a health system.

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Breakout Sessions

Monday, October 17 and Tuesday, October 18. Please select one extended breakout or two breakout sessions each day that you would like to attend. Note that extended breakouts 1–4 are 3 hours long, while breakout sessions A–D are only 1.5 hours long.

**Monday**

### GROUP A

<table>
<thead>
<tr>
<th>Time</th>
<th>Breakout Sessions</th>
</tr>
</thead>
</table>
| 10:15 a.m. – 11:45 a.m. (continued) | Extended Breakout 1—BK1A 
Controlled Substance Diversion: Active and Proactive Solutions |
|                 | Extended Breakout 2—BK2A 
Leadership Communication for the New Healthcare Environment |
|                 | Extended Breakout 3—BK3A 
Benchmarking and Productivity: Leveraging Data to Drive Results |
|                 | Extended Breakout 4—BK4A 
System-level Thinking to Effectively Achieve Shared Goals |

### GROUP B

<table>
<thead>
<tr>
<th>Time</th>
<th>Breakout Sessions</th>
</tr>
</thead>
</table>
| 10:15 a.m. – 11:45 a.m. | Breakout A—BK5A 
Financial Management: Telling the Patient’s Story Accurately, Completely, and in a Codeable Fashion |
|                 | Breakout B—BK6A 
Leading the Pharmacy Workforce for the Future |

### GROUP C

<table>
<thead>
<tr>
<th>Time</th>
<th>Breakout Sessions</th>
</tr>
</thead>
</table>
| 1:15 p.m. – 2:45 p.m. | Breakout C—BK7A 
Practical Strategies for Compliance with USP <800> |
|                 | Breakout D—BK8A 
Population Health Management: Finding the Sweet Spot for Your Organization |

**Tuesday**

### GROUP A

<table>
<thead>
<tr>
<th>Time</th>
<th>Breakout Sessions</th>
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</thead>
</table>
| 9:30 a.m. – 11:00 a.m. (continued) | Extended Breakout 1—BK1B 
Controlled Substance Diversion: Active and Proactive Solutions |
|                 | Extended Breakout 2—BK2B 
Leadership Communication for the New Healthcare Environment |
|                 | Extended Breakout 3—BK3B 
Benchmarking and Productivity: Leveraging Data to Drive Results |
|                 | Extended Breakout 4—BK4B 
System-level Thinking to Effectively Achieve Shared Goals |

### GROUP B

<table>
<thead>
<tr>
<th>Time</th>
<th>Breakout Sessions</th>
</tr>
</thead>
</table>
| 9:30 a.m. – 11:00 a.m. | Breakout A—BK5B 
Financial Management: Telling the Patient’s Story Accurately, Completely, and in a Codeable Fashion |
|                 | Breakout B—BK6B 
Leading the Pharmacy Workforce for the Future |

### GROUP C

<table>
<thead>
<tr>
<th>Time</th>
<th>Breakout Sessions</th>
</tr>
</thead>
</table>
| 12:30 p.m. – 2:00 p.m. | Breakout C—BK7B 
Practical Strategies for Compliance with USP <800> |
|                 | Breakout D—BK8B 
Population Health Management: Finding the Sweet Spot for Your Organization |

Method of Payment

- Enclosed is my check made payable to ASHP and drawn on a U.S. bank in U.S. funds.
- Enclosed is my U.S. purchase order # _______________________________. Please issue an invoice.
- Charge $ ________ to my: ❑ MasterCard  ❑ VISA  ❑ American Express  ❑ Discover
- Card # _______________________________ Exp. Date __________________
- Signature ____________________________________________________________________________

Conference Registration

Online registration is the preferred method of individual registration and is available June 1 through October 14 at www.ashp.org/LC16.

As an alternative and for multiple registrants from the same facility, complete this registration form and submit to ASHP:

**MAIL:** ASHP Payment Center
PO Box 17693, Baltimore, MD 21297
**FAX:** 301-657-1251
**PHONE:**
- Domestic: 866-279-0681
- Monday–Friday, 8 a.m.–6 p.m. (ET)
- International: 301-664-8700

**Registration Cancellations and Refunds**

To receive a full refund, confirmed registrations must be cancelled in writing on or before September 16, 2016 (postmark or fax date). Written cancellations postmarked or faxed September 17 through October 5 will be subject to a $75 handling fee. Refunds will be issued only for cancellations postmarked or faxed on or before October 5, 2016.