Program description
The S.T.A.B.L.E. - Cardiac Module provides general guidelines for the assessment and stabilization of neonates with suspected, severe forms of congenital heart disease (CHD). Prompt, effective, and appropriate care of neonates with severe CHD can reduce secondary organ damage, improve short and long-term outcomes, and reduce morbidity and mortality. Registration fee includes breakfast, breaks, and a Cardiac Module handbook. This information is presented in a highly visual format using an animated PowerPoint® slide presentation, and is divided into three main sections:

Part 1: Physical exam of neonates with suspected CHD and the differential diagnosis
Part 2: Review of the anatomic features, clinical presentation and initial stabilization of neonates with CHD, and emphasizes differentiation of cardiac from pulmonary disease. Specific heart lesions are covered in detail.
Part 3: Modifications to the six S.T.A.B.L.E. assessment components that are necessary when caring for neonates with suspected CHD.

Course Objectives. Upon completion of this course, participants will be able to:
1. Describe the components of physical examination in young infants that may indicate the presence of congenital heart disease.
2. Discuss the clinical presentation of infants with ductal dependent and non-ductal dependent cyanotic congenital heart disease.
3. Explain the pattern of blood flow that is established when prostaglandin E1 is initiated to promote a right-to-left versus a left-to-right ductal shunt.
4. Differentiate between the clinical presentation of cyanotic congenital heart disease versus left outflow tract obstructed congenital heart disease.
5. List two reasons for using a palliative procedure to treat CHD.
6. Understand at least two of the surgical repairs utilized to treat severe forms of CHD.
7. Understand the stabilization care of a critically ill neonate using the S.T.A.B.L.E. mnemonic system.

REGISTRATION: CARDIAC STABLE
Name ___________________________ Phone # ___________________________
Address ___________________________ City ________________ Zip ____________
Hospital affiliated with ___________________________ License # ________ RN RT MD NP DO PA
Email address ___________________________ PRINT EMAIL CLEARLY

Books may be purchased from: http://www.stableprogram.org or www.Amazon.com

Payment is due at time of registration, make checks out to: Kathryn McNitt, 330 Shasta Dr, Vacaville, CA 95687

Visa MC # ___________________________ Exp date: __ __/__ __ CVC code ________

25% cancellation fee for classes cancelled within 14 days of class. There are no refunds for cancellations within 24 hours or failure to show for class.

Perinatal Training Services is approved by the California Board of Registered Nursing for contact hours provider CEP # 16119.