

**ADVANCED WOUND  
DEBRIDEMENT:  
A CUT ABOVE THE REST**

**REGISTRATION FORM**

PLEASE PRINT CLEARLY

Name

Credentials License number

Address

City State Zip

Email

Phone

Date and Course Location Choice

**Registration Fee:**

\$355 Early Bird Price

\$395 (Less than 30 days from course date)

Method of Payment:

American Express  Visa  MC  Discover

Credit Card Number

Expiration Date Security Code\*\*

Billing Address

City State Zip

\*\* 3 or 4 digit code printed on the back of the card in reverse italic at the top of the signature panel.

**ADA Statement:**

Please contact me, I have special needs.

**Submit completed application and fee to:**

**INFINITUS, LLC**  
**928 S Balthazar Dr**  
**Santa Claus, IN 47579**  
**Or Fax to 866-925-5532**

Make checks or money orders payable to :  
"Infinitus, LLC"

\* Early Bird application and payment must be postmarked 30 days prior to course date.

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**Comprehensive presentation of wound bed**

**preparation utilizing conservative sharp debridement.**

**PURPOSE:**

The overall Purpose/goal of this program is to provide advanced education regarding conservative sharp wound debridement to licensed health care professionals.

**TARGET AUDIENCE:**

Physical Therapists, Physical Therapy Assistants, Nurses, Nurse Practitioners, Physicians and Physicians Assistants.

**LEARNING OBJECTIVES:**

Upon completion of program participants will be able to:

- Describe anatomy and physiology of viable and non-viable tissues and structures encountered in wound care.
- Recognize anatomical structures and types of tissue commonly seen in sharp debridement.
- Identify the 5 different types of debridement and understand the indications & contraindications of each with specific wound types.
- Identify tools used in the sharp debridement process.
- Discuss the appropriate terminology and documentation used in sharp debridement.
- Demonstrate sharp debridement techniques.
- Discuss legal implications and policy and procedures related to debridement.

**ACCREDITATION STATEMENT:**

Provider approved by the California Board of Registered Nursing, Provider Number 14269 for 6.6 contact hours. Infinitus, LLC is an approved Illinois Physical Therapy Education Sponsor, License number 216.000207. This course is approved for 8 CEU's. Approved for 7.5 Elective credits (Category 1 CME) by the American Academy of Family Physicians.

NOTE: Upon completion of this course attendees are still required to function within their licensed scope of practice. Supervised clinical check-off by a physician/trainer is required for competency

**INSTRUCTORS**

Bill Richlen, PT, WCC, DWC

Denise Richlen PT, WCC, DWC, CLT

Theresa Ferrante PTA, WCC

**REGISTRATION**

(Must be postmarked 30 days prior to seminar. Space is limited)

**Your Registration includes:** Classroom training sessions, all classroom handouts, hands-on lab practicum, supplies for lab and certificate of completion.

**CANCELLATION POLICY**

INFINITUS, LLC reserves the right to cancel or reschedule this course due to an insufficient number of registrants or other unforeseen circumstances. Under these circumstances, seminar fees will be returned in full to the registrant.

All cancellations must be submitted in writing. For cancellations received 14 days before the seminar date, the seminar fee will be returned less a \$25.00 administration fee. Within 14 days of the seminar, no refunds will be made, although the seminar fee is transferable to another person or may be used at future course offering dates.

**SPECIAL NEEDS**

If you need special assistance to participate in an educational activity sponsored by INFINITUS, LLC.

For current dates and locations of this course please go to:

[www.sharpdebridement.com](http://www.sharpdebridement.com)

or

Contact us at **866-925-5532** or [cutabove@sharpdebridement.com](mailto:cutabove@sharpdebridement.com)