

# NCEMSF NEWS

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***"Campus EMS creates an extremely strong bond between people..."***

## Message from the President

Dr. George J. Koenig, Jr., NCEMSF President

This past month, I headed back to Bucknell University, my alma mater, to celebrate the wedding of Barbara Black. There are probably very few of you that remember Barb, but she was the first NCEMSF Secretary. Her ideas and creativity still remain woven in our Foundation documents and handbooks. Our early successes as a Foundation can be attributed to her persistence to keep me focused. I still remember the constant phone calls reminding me to complete certain tasks or to write articles for our newsletter.

Her wedding also gave me the opportunity to catch up with some old friends most of whom were involved in campus EMS. As we relived the past, I noticed and appreciated the bond that we shared. Campus EMS creates an extremely strong bond between people. I believe that the bond is created because of the critical situations that we face and the teamwork that is necessary to help our patients. The bond that we share extends beyond our immediate campus group. It extends to the campus EMS community as a whole. This phenomenon is witnessed every year when we gather for our Annual Conference.

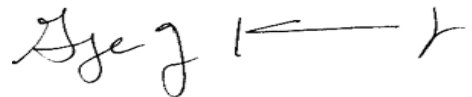
The 12th Annual Conference will be February 25-27, 2005 in Philadelphia, Pennsylvania. We will continue to have our three traditional tracks: administrative, medical, and potpourri. In total, there will be about 20 lecturers from which you can choose. The student speaker competition will be held on Saturday morning. I encourage each of you to submit an abstract for this competition. We also have planned a special event for our alumni. Consider arriving early and visiting national historic landmarks such as Independence Hall, the Liberty Bell and the National Constitution Center, or the Philadelphia Art Museum. Join us and experience this opportunity to learn and share ideas while meeting new friends. We anticipate attendance to exceed 500 delegates from across the country. More

information regarding registration can be found on our web site at <http://www.ncemsf.org/>

If you have additional questions about the conference that aren't addressed by the comprehensive information on the Web site, please e-mail the Conference Committee at [conf2005@ncemsf.org](mailto:conf2005@ncemsf.org).

Each year as the Board plans the Annual Conference we strive to provide the absolute best possible educational program with lectures given by people that are accomplished in their given fields. This month while completing my trauma rotation at the Hospital of the University of Pennsylvania, I asked one of the trauma surgeons if he would be interested in speaking at the next NCEMSF Conference. He was initially hesitant to commit to the speaking engagement, but eagerly agreed once he understood the audience would be collegiate EMS providers. The expression on his face totally changed to one of joy as he told me that he was once a member of the campus EMS group at SUNY Binghamton. It is our bond of collegiate EMS that enables us to recruit phenomenal speakers. Approximately 80% of our scheduled speakers were active in EMS while in college. The program that we have put together is truly the best ever.

I look forward to seeing you at our conference,



George J. Koenig Jr. M.S., D.O.  
President NCEMSF



## Your Membership is the Foundation of NCEMSF

Karolina A. Schabses, NCEMSF Membership Coordinator

Many of you have already taken the necessary steps to call yourself a member of NCEMSF. Thank you.

For those of you who haven't, now is the time. Please take a moment now to join or renew your NCEMSF membership.

Your membership allows us to continue supporting and advocating for collegiate EMS throughout the country. From promoting National Collegiate EMS week and producing our newsletters, to organizing our annual conferences and updating our web site, your membership is the foundation of NCEMSF.

Personal memberships allow you to call yourself a member of NCEMSF. Student memberships are only \$10 a year, with student life memberships only \$75. Non-students can become a member for \$20 annually, or \$150 for life. We even have a special life

membership discount rate for alumni of campus EMS - only \$100.

Institutional memberships allow your EMS organization to show its ongoing support for NCEMSF. Institutional memberships are just \$25 annually and provide for the essential functions of our organization. Institutional memberships entitle you to EMS consulting for your organization from the NCEMSF leadership. Another benefit of institutional membership is potential recognition through our "Striving for Excellence" program, a self-evaluative recognition program to identify quality campus EMS organizations. Furthermore, if you wish to compete for the NCEMSF recognition awards given at our annual conference, your institutional membership is required.

But wait - it gets even better! With our institutional value pack you can

get 10 annual personal student memberships and your institutional membership for only \$100.

Becoming a member of NCEMSF is easy. Log on to our web site at [www.ncemsf.org](http://www.ncemsf.org) and click on "Membership". All it takes is a couple of simple steps and a few clicks of your mouse and you are a member. We are happy to accept payment by credit card through PayPal, checks, money order, or purchase orders.

Memberships follow the academic year and expire at the end of May. Don't wait until the NCEMSF conference to become a member! Act now, and receive the benefits of membership longer.



## Alumni Corner: More than Just Money

S. Corey Pitts, NCEMSF Alumni Coordinator

Greetings everyone. My name is Corey Pitts and I'm the new Alumni Coordinator for NCEMSF. Sitting down to write this article I started to think what it meant to be an alumnus of my squad, the Virginia Tech Rescue Squad. When thinking about what the university or the department you graduated from wants from you, the answer is usually money. Although, I'm sure my squad and yours would love to receive a check from you, I think there is much more we can offer back to our squads. I think that those of us who continue in the medical field, whether it be EMS or something further, can offer knowledge and experience back to our collegiate squad. It might be coming back to teach a CE class or helping them come up with a new aspect of their program through something your new squad has been doing or just started. Something as

simple as listening to the new leadership bounce policy ideas off of you could have an impact as well.

I feel that the one thing we should never do as alumni is criticize our squads for changes they may make after we graduate. We should always be willing to help them out and offer advice, but negative advice will get us no where. We must realize that even if we were Captain of our squad when we were there, there is new leadership now and they are just as capable of making the same decisions we did when we were in charge. We should respect the fact that it is "their" squad now.

In the coming months I will be polling current alumni and future alumni (yes, class of 2005 you are almost there) for ideas about what you would like to see NCEMSF do with

its alumni program. With the 2004 Collegiate EMS Week in our recent memory, think back on the fun times you had when you ran in college and give the squad a call to get an update on what is new, and if there is anything you can do to help.

I look forward to hearing all of your ideas and meeting many of you in Philadelphia for the conference.



*Editor's Note: Please help us in welcoming Corey to his new NCEMSF role. You may contact him at [alumni@ncemsf.org](mailto:alumni@ncemsf.org). The previous Alumni Coordinator, David I. Bacall, now serves as our Startup Coordinator and can be reached at [startup@ncemsf.org](mailto:startup@ncemsf.org).*

## Professor Squirrel

Serious Campus EMS Advice from a Nut

*Dear Professor Squirrel,*

*We've had some issues with members abusing the privilege of having access to a vehicle. Not many students on my campus have cars, but members have access to the ambulance/QRS vehicle for calls and other activities (within reason). Recently the vehicle has been seen (by administrators no less) making trips to locations further and further off campus. How can we curtail this practice? Obviously it is reasonable for a crew on duty to need to go places, and we are OK with the vehicle being a perk. What policies are you aware of that are reasonable that extend the appropriate amount of freedom to crews and act as a significant enough incentive to entice people to want to be on call?*

First of all, it is imperative to stay on campus and stay in your coverage territory. We campus squirrels can't have you sharing your lunch with the town squirrels. Many campus squads have policies about how the vehicles can be used and it's generally only for business purposes. The fact that you are driving around in a flashy vehicle with your organization's name on it in reflective lettering makes you a moving billboard for your organization. Every time someone sees you parking in a no parking zone or fire lane, making a food or laundry run, or giving rides to friends and crew members (I call that the clown ambulance, where 14 people get out of the vehicle at the corner McFood stop), they form an opinion about your group especially if they are helping to pay your costs. I know you

have to eat on shift (feed the squirrels), but you have to remember what image you present to the public and your administrators. Many squads have shift reports or vehicle logs where drivers must record the mileage at the beginning of shift, for every call, and end of shift, and also note any problems with the vehicle that the on duty crew is unable to correct. The officer in charge of vehicle maintenance reviews this log regularly for problems. You also need to consider your budget for fuel and wear and tear on the vehicle. Some squads establish a coverage area and require the crew to contact a supervisor before they can leave campus. Consider the image you are presenting to your community, clearly define the vehicle perks in view of that, and make sure your members understand. The fact of life is you are in a fishbowl. Squirrels like to watch the fish.

See you around campus!  
Professor Squirrel



Professor Squirrel has been hanging out on campus begging for food from students and keeping an eye on campus EMS for many years. Send your questions to the Professor at professor@ncemsf.org. The Professor will answer the best ones in the NCEMSFS newsletter and on the NCEMSFS General-L list. Your name and school will be kept confidential.

## The VP's View Point

Dr. Scott C. Savett, NCEMSFS Vice President

As collegiate EMS providers we strive to serve our campus communities. While some campuses are larger than cities (Clemson becomes the 3rd largest "city" in South Carolina on football game days), small liberal arts campuses tend to foster a tight-knit everybody-knows-everybody feeling. Especially on these small campuses, this intimacy can lead to difficulty when dealing with patients or their friends.

Imagine this scenario: you respond to a campus residence hall for what seems to be an otherwise routine call. You arrive to find a classmate from your o-chem class complaining of sharp pain in her abdomen. Suspecting either a GI problem or OB/GYN problem, you ask about her menstrual cycle. She hesitatingly reports missing her last period. Her roommate stands in the corner, listening to the conversation.

As her EMS provider, your relationship with this person has changed. You are no longer just classmates who quiz each other on Grignard reactions at a study session. You now know intimate details of this person's life. The patient-caregiver relationship has been established, and patient privacy must be guarded.

As EMS providers, how do we deal with concerned members of the campus community? Later that evening after you return from transporting this patient to the hospital, the patient's roommate phones your squad office for a status update. She asks three simple questions: "How was the ride to the hospital?"

"Will she be OK? Is she pregnant?" While you'd like to spill the beans and tell the roommate that you think her friend has an ectopic pregnancy, you can't. It would be a breach of patient confidentiality, and it simply wouldn't be right.

Two weeks later your classmate is back at o-chem study group, feverishly trying to make up lost ground on Diels-Alder reactions. What do you say to her? Can you even mention your encounter a couple weeks back? In this case, discretion is the key. If she initiates the conversation about her treatment, you can safely assume that it's OK to discuss — at least in private. But keep in mind that she still has a right to privacy, and details of her healthcare aren't meant for public consumption. Discussion of the call at the o-chem study group wouldn't be appropriate.

What is the bottom line for you? Your squad should have a *clearly defined* patient confidentiality agreement in place. Squad leadership should ensure that everybody understands it before a member runs even one call. From trainees to upper squad officers, the policy should be enforced uniformly across all levels of membership.

It doesn't matter whether you are running EMS on a campus of 1,200 or in a city of 3,000,000, tenets of patient confidentiality still apply.

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## Hands-On Medical Direction

Michael Hilton, NCEMSF New York Regional Coordinator

One of the great benefits of being involved in collegiate EMS is the opportunity to have a close working relationship with a dedicated and caring Medical Director involved in the quality improvement and training of the EMS service. Collegiate EMS groups are, generally, smaller than traditional EMS organizations and are composed of a population which is inclined to learning. As student groups, they also attract advisors and Medical Directors who want to be a part of the EMS organization. It is important that collegiate EMS agencies develop ways to take advantage of the access to the Medical Directors that they have. Selection of a Medical Director is thus also important.

The Medical Director should be involved in the quality improvement program of the service. This should include regular, either weekly or biweekly, review of care reports by the physician. This should be followed by a meeting with the physician and all members who write the reports to go over any issues of documentation or protocol. These are also usually very interesting because it provides an opportunity to discuss interesting cases. The care reports should be read often, because this allows for discussions with the Medical Director to be relevant in

terms of recent calls; calls which the EMS providers are most likely to remember. These should be meetings and not lectures; they should feature a two-way dialogue between the EMS providers and the physician in an informal setting so that providers feel free to ask questions.

Another way to involve the medical director is to have him/her attend membership meetings and lecture on topics which he/she feels there is a need to cover or on topics which are requested by the membership themselves. This should be a more formal setting and will allow for a broader based-learning experience which is less focused on call specifics (that a crew chief would need to know) and more relevant to background knowledge of the science behind medicine which would benefit all members.

In the collegiate EMS setting, the Medical Director should thus become less of a figure head to sign forms to allow us to defibrillate and use certain medications and more of an integral part of our organizations. Having one so involved in training dictates that the physician selected should be willing to spend this extra time with the organization. Also, he/she should also have a background

which allows them to be knowledgeable about the types of calls we see in collegiate EMS. Thus, an internist, emergency medicine physician, or family medicine physician would make sense as a medical director. A cardiologist or surgeon may not. Ideally, the physician will have some knowledge of EMS and your local EMS system. If not, the organization should familiarize the physician with EMS in general, the local EMS system, and all protocols, SOPs, and health department advisories. Organizations should carefully select a Medical Director because they should be more than signatories on forms.

Our medical directors usually have years of experience and to have such access to their knowledge and insight into medicine is an under-utilized resource in collegiate EMS. Taking advantage of this would allow your organization to take advantage of something that is unique to collegiate EMS.

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## Publicize it, and They Will Come

Joshua A. Marks, NCEMSF Secretary

This November, like every November, we celebrated NCEMSF Collegiate EMS Week. The NCEMSF EMS Week team again produced an information packet for collegiate groups to download supplying them with sample handouts, event ideas, and press releases. The intended purpose of Collegiate EMS Week, like National EMS Week observed in May, is to educate the public on the services provided and to introduce the community to the people providing those services. It is an opportunity to gloat and congratulate ourselves on a job well done. When planning an event to mark such an occasion though, how can one ensure people will attend? How can one identify if the message was delivered and received?

Time and money go into planning events and corps, especially those operating on

a limited budget, need to be able to justify any expense by experiencing the returns. There is nothing worse than holding an Open House or other similar event and having only our own members circulating about the quarters. Simply hosting an event may not be enough to draw the crowds. We need to create frenzy, determine the attraction, and publicize it!

Much of the administrative track at recent NCEMSF annual conferences has focused on interacting with the media (including campus media) and releasing your corps' message. This year in Philadelphia will be no exception. Several speakers from the University of Pennsylvania's Wharton School and television and print media are scheduled to speak on topics from marketing to conducting a televised interview.

Our goal is to provide the highest quality of service possible, but also to educate the community, let it know about those services we provide and, in many cases, to let them know that we cannot continue without their support. Many take the emergency services for granted. They expect them to be there when they need them yet rarely pay any attention to them. EMS Week gives us the opportunity to focus the spotlight on our organizations. It is up to us to actually pull people's attention though. I hope you had both a productive and successful EMS Week, and I look forward to seeing you in Philadelphia in February to continue to learn how to grow and publicize our services.

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## From the Southeast Region

Julie Daniel, NCEMSF Southeast Regional Coordinator

Aitan Zacharin, an undergrad at **University of South Florida**, is forming a University Emergency Medical Services Association (UEMSA) to provide BLS and first response service on campus. UEMSA has six members so far, including four EMTs and one paramedic. They are currently working on final revisions of their constitution and are beginning SOPs. In addition, UEMSA has been actively networking with both Tampa General Hospital and Tampa Fire Rescue, who currently serve the USF campus. Aitan identified the need for this service through personal long-response time from across the city when working for American Medical Response in Tampa. This squad is off to a great start.



name of academic freedom, despite the fact that 80,000 people signed an online petition against the conference and hundreds to thousands of protesters were expected to come to campus. In response, Duke EMS worked with the Director of Disaster Preparedness in the Duke University Medical System to devise a medical operations plan to respond to a potential mass casualty incident. The event made the Duke and the Durham communities address many issues that had never before been considered. Luckily, the weekend's conference and protests ended peacefully. Duke EMS was fortunate enough to participate in extensive planning and collaboration with the Duke Medical Center, Durham County EMS, Duke Police, Durham Police, Durham Sheriff's Office and Durham Fire.



On the weekend of October 15-17 **Duke University** hosted the controversial Palestine Solidarity Movement (PSM) conference. Duke was determined to let the conference proceed in the



## From the Massachusetts Region

Jonathan Sham, NCEMSF Massachusetts Regional Coordinator

Hello Everyone, I am really excited about serving as your regional coordinator this year. Massachusetts may be a small state, but we have a lot of EMS groups and I look forward to meeting all of you in person.

A few more schools in our region are looking to develop programs on their campuses. **Wheaton College** in Norton, MA has recently chartered the Wheaton Emergency Response Team (WERT). The group is still developing membership and protocol and hopes to be in service by next February.



Students at **Harvard University** in Cambridge, MA are also looking to start their own campus EMS squad. They are currently working with administration to resolve liability issues and hope to be in service by the end of the academic year.



Both of these fledgling organizations would benefit greatly from the support of all of the existing groups in the Massachusetts region. If you would like to help out, or have any questions for me personally, please feel free to contact me at [ma-rc@ncemf.org](mailto:ma-rc@ncemf.org). Good luck in finishing the Fall Semester!



## From the Pennsylvania Region: Penn State Takes Delivery of New Ambulance

Patrick Gomella and Matt Valocchi, Penn State University Ambulance Service (UAS)

The **Pennsylvania State University** took delivery of a 2004 McCoy Miller ambulance on October 18, 2004. The McCoy Miller, built on a 2004 Ford E350 chassis, is currently certified by the Pennsylvania Department of Health as a BLS Transport ambulance and has since been placed into service as the first out unit from the University Ambulance Service (UAS) fleet. The ambulance is equipped with numerous up to date features such as a back-up camera, LED lights on the rear doors, an upgraded console, and a more EMT-friendly design inside the box.

The new ambulance, numbered 20-50, has replaced the current 20-51. 20-51, also a McCoy Miller, will stay in the fleet but its main role will be that of an event ambulance to cover the many events on campus that require an on-site ambulance. 20-51 will be put into service as a second emergency ambulance during times that have an anticipated high call volume, which includes mostly weekend evenings.

20-50 is now a part of the UAS fleet which includes another BLS transport ambulance, 2 John Deere® Gators, and multiple EMS equipped bikes. UAS has provided EMS care to Penn State students since the 1950s and thanks to the hard work of its administrative staff and EMTs, the addition of a second BLS unit will ensure Penn State University and its surrounding area receive the highest quality emergency care for years to come.



## From the Northeast Region

Robert T. Hart, NCEMSF Northeast Regional Coordinator

By the time you have read this I'm sure you all will have had a fun-filled EMS week and will be looking forward to the 2005 Conference in Philadelphia!!! In an effort to make the upcoming conference the biggest and the best, start planning your trip. Make sure to research funding alternatives on your campus such as student senate, university administration, and fundraisers. The more of you at the conference the more enjoyable and productive it will be for everyone.

I would also like to encourage all of you to update your information in the NCEMSF database, especially your CONTACT INFORMATION! This data is vital to the Regional Coordinators and the Board as we try to contact you to offer help and guidance and get you involved in NCEMSF events. Despite a few problems with contact information, I'm proud to let you all in on some of the groups on in the Northeast Region.

The University of Rhode Island EMS has embarked on a major administrative and policy revision campaign that will be completed by January 1, 2005. URIEMS has taken it upon themselves to reinvent their Command structure and establish corps policies that create a solid chain of command and an efficient use of all resources for the betterment of the corps members and the community. URIEMS is also proud to announce that over two



years of work creating a communications upgrade proposal has resulted in a \$35,000 grant from Homeland Security to install a dedicated EMS communications system for the university that will increase their range of communications throughout southern Rhode Island.

**Brown University EMS** has started the semester off with a bang, with over 105 runs in September alone; they have also started a Rhode Island EMS-Cardiac Course for eight of their students and will be hosting another class this summer. All information regarding this class as well as information about the corps and pictures can be seen at the groups' updated website [http://www.brown.edu/Student\\_Services/Health\\_Services/EMS.htm](http://www.brown.edu/Student_Services/Health_Services/EMS.htm).



**BROWN**

So far this semester seems to be going well for everyone; you are all working hard getting your corps in top shape and doing the best to serve your communities. In the next newsletter I hope to be able to report on more schools from my region! Remember, your regional coordinators are here to help you and promote all the things you do to the rest of the regions. Have a great rest of the semester!!!



## From the North Central Region

Andy Jou, NCEMSF North Central Regional Coordinator

As the new North Central Regional Coordinator, the last few months have been very busy for me. Not only have I been adjusting to my new role with NCEMSF, but also the busy schedule of a first-year medical student. Even so, medical school has brought me closer to the North Central region, where I attended the University of Illinois as an undergraduate and first began my career in EMS.

Speaking of beginnings, I recently had the pleasure of speaking with members of the **St. Olaf** EMT (SOEMT) squad from Northfield, MN. The 14-member roster of EMTs and First Responders recently secured a \$4,700 grant from the St. Olaf Student Government Association to update communications and patient care equipment. In addition, SOEMT is looking to increase their hours of operation to include 24-hour coverage on weekends. With these changes, they are beginning a search for a medical director to approve updated protocols.

Updating protocols is also in the works for

the members of Illini Emergency Medical Services (IEMS) operating at the **University of Illinois, Urbana-Champaign**. Under the direction of Provena Regional EMS System, IEMS is looking to expand their protocols to include epinephrine auto-injectors to their on-hand medications. In addition, they will be expanding their education regimen to include a student-run First Responder course to be held concurrently with their already established National Registry EMT-Basic course in the spring.

I encourage any organization within the North Central Region to network with other schools in the region as well as the other squads associated with NCEMSF. As such, I strongly encourage everyone in the region to look into attending the 12th Annual NCEMSF Conference in Philadelphia. If there is anything I can do to assist your squad, please feel free to contact me at [northcentral-rc@ncemsf.org](mailto:northcentral-rc@ncemsf.org). Until then, keep safe and keep up the great work!



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**“Advancement of your organization also involves its marketability through community outreach...”**

#### **About This Publication**

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## **Keep the Momentum Going**

Kelly M. Schirmer, NCEMS National Coordinator

Greetings to all the membership and supporters of NCEMS. It has been an excellent beginning of the year for collegiate EMS. Schools all across the nation continuously work to advance their organizations through operational and directorial improvements. It is truly motivational to see leadership and members in organizations striving to fulfill their mission to provide quality patient care in their collegiate communities. We must not stop there. Advancement of your organization also involves its marketability through community outreach. National Collegiate EMS Week is an excellent opportunity for schools to improve visibility with students on campus as well as attain deserved consideration from administrators and supporters of campus EMS.

During this year's EMS week, held November 8-14th, a concerted effort was seen from schools throughout the country to exemplify the importance of EMS on college campuses. As in past years, NCEMS provided an EMS Week resource packet to schools interested in

ideas for campus outreach programs. Schools also incorporated health promotion activities to give the campus community awareness on health issues such as hypertension and diabetes. NCEMS hopes that all schools will participate in this beneficial event in the future; therefore, it is important to keep up the momentum into the next calendar year.

Regional Coordinators (RCs) will be in contact with their respective schools prior to the conference in Philadelphia. The goal of the RCs this year will be to work with each school in order to allow for the largest number of your organization's members to attend the conference. It is important to keep in contact with your RC, informing him or her of your organization's accomplishments and of your plans to attend the conference. Communication within the broad NCEMS network is a primary vehicle for campus EMS advancement.



## **Mock DUI on Muhlenberg Campus Attracts Onlookers**

Carin Minchew, Muhlenberg College EMS

On October 13, 2004, Muhlenberg College Emergency Medical Services (MCEMS) sponsored their first DUI demonstration as part of the college's alcohol awareness choice week. The accident, caused by a driver who was under the influence of drugs or alcohol, involved a head-on collision between two vehicles in the center of Muhlenberg's campus. More than two hundred students and faculty watched as MCEMS, in conjunction with Allentown Fire Department, Cetronia Ambulance Corps, and Muhlenberg College Department of Campus Safety, responded to the scene. As MCEMS and Cetronia Ambulance began to care for the patients, the drunk driver, who sustained only minor injuries, was arrested by MCPD. Unfortunately, the driver of the other vehicle, who was ejected through the windshield, was DOA. She was removed from the hood of the car and placed on the pavement for the crowd to see. Several EMTs rapidly extricated a severely injured patient, who suffered cardiac arrest shortly after. While members worked the code, AFD used the jaws-of-life to extricate another passenger who was entrapped. During the call, the audience was kept informed by an MCEMS member explaining the measures being taken to save the lives of the victims. This event was a dramatic depiction of the harsh reality that can result from irresponsibly

getting behind the wheel. Our demonstration, which was broadcast on the local TV news, sent a clear and resonating message illustrating the consequences of drinking and driving.





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***This year's  
Collegiate EMS  
Week was  
November 8-14.  
Read about  
squad activities  
on the Local  
News section of  
our Web site.***

**Don't forget the upcoming 12th Annual  
NCEMSF Conference in Philadelphia! Mark  
your calendar now for February 25-27, 2005.  
Visit the NCEMSF Web site for conference  
information including:**



- **Conference Schedule**
- **Workshop Topics**
- **Skills Competition**
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- **Transportation Information and Discounts**
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- **Online Conference Registration (beginning on December 1)**

**Register and pay for the conference by January 21, 2005 to lock in the best price.**