

2015 Indiana Psychiatric Society Fall Symposium *Suicide and the Physician*

***Accredited for 4.25 AMA PRA Category 1 Credit™ * 4.25 CE Credits**

September 12, 2015, Indianapolis Marriott Downtown

REGISTER ONLINE @ WWW.PDALLC.COM

The American Psychiatric Association in joint providership with the Indiana Psychiatric Society invites you to participate in this 2015 event held in conjunction with the 166th Indiana State Medical Association's Annual Convention.

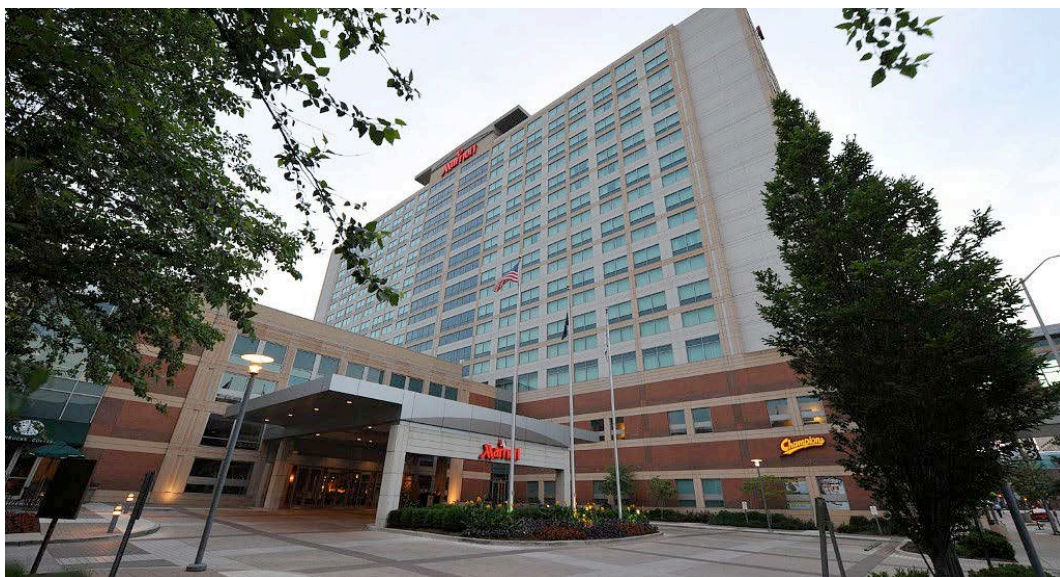
PROGRAM DESCRIPTION

The most devastating of outcomes in mental health, a completed suicide, has lasting effects on a patient's families, friends, community, and care providers. The exact nature of these effects can be difficult to understand, however. Furthermore, what happens when those tasked with caring for individuals with mental illness succumb to the very thing they are supposed to prevent? With a recent rash of suicides and increasing rates of provider burn out, more attention than ever is being paid to the monitoring and prevention of suicide.

This event, accredited for 4.25 AMA PRA Category 1 Credits, will highlight some of the many ways suicide by patients and providers may impact survivors. We'll hear from a physician survivor of two family suicides. We'll address the significant impact of suicide in the community at large and on a more individual level, with a focus on risk identification and prevention. And finally, we will discuss issues of liability when a patient attempts or successfully completes suicide. Please join us for this critical discussion.

SYMPOSIUM HOTEL

A repeated winner of the Meetings & Conventions Gold Key Award as one of the finest meeting properties, this 4-Diamond hotel in downtown Indianapolis is sure to delight any traveler. The Indianapolis Marriott Downtown boasts 622 guest rooms, junior suites and concierge level rooms, which include luxurious linens, signature bath products, flat-screen TVs with HD programming and functional work areas. Connected via skywalk to the Indiana Convention Center and Circle Centre Mall, this downtown Indianapolis hotel is ideal for business travel, just steps from Lucas Oil Stadium, Victory Field and a short walk to Bankers Life Fieldhouse. In this sports-minded city, the Indianapolis Marriott Downtown is home to Champions Sports Bar - voted by MSN as the best place to watch the NFL in Indy and outfitted with over 25 flat-screen TVs. Just eight miles from the airport, our hotel features a fitness center, indoor pool and whirlpool, free Wi-Fi in the intimate lobby, and 40,000 sq. ft. of meeting space.



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AGENDA

7:30 AM

Check in, registration, and breakfast available

7:55 AM

Welcome & introductions

8:00 – 9:00 AM

Managing Risk When Treating Patients with Suicidal Behaviors

Charles David Cash, JD, LLM – Assistant Vice President of Risk Management, PRMS, Arlington, VA

9:00 – 9:15 AM

Coffee break with exhibitors

9:15 – 10:15 AM

Suicide Prevention, Local Efforts & SAMSHA Grant – “Zero Suicides for Indiana Youth”

Syed Khan, MD – President of the Psychiatry Section of Community Health Network, Principle Partner in Serenity Medical Group and Medical Director of Sycamore Springs, Indianapolis, IN

10:15 – 10:30 AM

Coffee break with exhibitors

10:30 – 11:30 AM

An Exploration of the Problem of Physician Suicide

Tracy Gunter, MD – Associate Professor, Clinical Psychiatry, Indiana University School of Medicine, Indianapolis, IN

11:30 – 11:45 AM

Coffee break with exhibitors

11:45 AM – 1:00 PM

Personal Observations on a Spouse's Suicide

Margaret R. Watanabe, MD, PhD – Assistant Clinical Professor Emerita, Indiana University School of Medicine, Indianapolis, IN

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LEARNING OBJECTIVES

At the conclusion of this program, the participant will:

- Be able to incorporate a formal suicide risk assessment tool into clinical practice
- Be able to perform an adequate assessment of patients at risk for homicide/suicide
- Be able to document the reasoning behind clinical choices
- Be able to understand that patient safety is an exception to confidentiality
- Have greater awareness of suicide in the community
- Have greater awareness of regional efforts to reduce child suicide rates
- Understand the problem of physician suicide over the life of the physician
- Understand areas of overlap and difference between the impaired provider and the provider at risk for suicide
- Be able to discuss possible strategies for improving crisis management and mitigating known risk factors for suicide
- Have better awareness of how physicians differ from the usual patient

ACCREDITATION AND DISCLOSURE STATEMENTS

Accreditation Statement

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of the American Psychiatric Association (APA) and the Indiana Psychiatric Society (IPS). The APA is accredited by the ACCME to provide continuing medical education for physicians.

Designation Statement

The APA designates this live activity for a maximum of 4.25 *AMA PRA Category 1 Credit™*. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Disclosure Statement

It is the policy of the APA to comply with the ACCME Standards for commercial support of CME. Planning committee members and related staff disclosures must be on file annually with disclosures made available on program materials. Faculty participating in sponsored or jointly sponsored programs by APA are required to disclose to the program audience any real or apparent financial relationships with commercial interests related to the content of their presentation. Faculty are also responsible for disclosing any discussion of off-label or investigational use of a product.

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REGISTRATION DETAILS AND FEES

Three easy ways to register:

*Online: Visit www.pdallc.com – credit card payment only

*Fax: Complete form with credit card information and fax to 888.477.9119

*Mail: Complete form, make check payable to IPS and mail to:

Indiana Psychiatric Society

Attn. Fall Symposium

P.O. Box 30413

Indianapolis, IN 46230

***Confirmation of your registration will be emailed within 24 hours of receipt. If you do not receive confirmation within 10 days of submission, contact Sara at lizgroupllc@yahoo.com or 888.477.9119.*

REGISTRATION FORM

****All information required for registration. Information will be kept confidential. Please print. Be sure to circle category in grid indicating items purchased.***

Full name and degree (MD, DO, RN, etc.) _____

Affiliation/category (ie: IPS, APA, other) _____

Email address _____

Mailing address _____

Mailing city/state/zip _____

Daytime phone number _____

- Fee includes CME/CE credits, electronic access to syllabus, complimentary continental breakfast and coffee breaks.
- To receive the early bird rate, registration and payment must be received before July 11, 2015.
- To receive the regular rate, registration and payment must be received July 11 - August 14, 2015.
- Registrations received August 15-31, 2015 will be subject to full price.
- Onsite reservations, if space is available, will incur a \$25 charge above the highest rate. Check the PDA website to ensure space is available before coming to the Marriott.
- Please circle appropriate category(ies) below.

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Categories	Before July 11	July 11 – August 14	August 15 - 31
Members of the Indiana Psychiatric Society and other APA members	\$109.00	\$134.00	\$159.00
APA Early Career Psychiatrist Members	\$99.00	\$124.00	\$149.00
APA Resident Fellow Members	\$59.00	\$59.00	\$59.00
Physicians (Not APA members)	\$169.00	\$194.00	\$219.00
Non- physician (ie: PhD, LCSW, RN, etc.)	\$139.00	\$164.00	\$189.00
Other medical residents & students	\$69.00	\$94.00	\$119.00

Additional Options	Before August 31 (onsite not available)
Printed syllabus	\$10.00
Flash drive	\$5.00
Resident scholarship	

PAYMENT INFORMATION

Payment method:

Please circle: Check Credit Card Amount included/to be charged: _____

Credit card type and number _____

Name on credit card _____

Credit card expiration date _____

Credit card security code (3 or 4 digit code on back of card) _____

Credit card billing address (include street number, street, city, state, zip) _____

Credit card phone number _____

CANCELLATIONS: A 50% refund will be made if notification is made in writing and received by 08/15/15. NO REFUNDS AFTER 08/15/15.