

# Hilton Garden Inn Sioux Falls South

## Do Not Forget to Reserve a Room!

Rooms will be available Thursday and Friday night at \$109. You will need to mention SD Society of Medical Assistants when calling to reserve. Deadline is March 1<sup>st</sup>, 2019.

Call: 605-444-4500

Address: 5300 South Grand Circle, Sioux Falls, SD 57108

Reserve Rooms online:

<http://hiltongardeninn.hilton.com/>

### Friday March 29<sup>th</sup>

- 7:00-8:15am: Breakfast & Registration  
8:15-8:30am: Welcome  
8:30-9:30am: **Clinical Coding – Jessica Kurle**  
9:30-9:50am: Break – Vendor Rounds  
9:50-10:30am: State Meeting  
10:30-11:30am: **HPV Vaccination – Dr. Mary Millroy & Corryn Clemer**  
11:30-12:30pm: **Lunch & Meetings**  
    11:30-12:00pm: Sioux Empire  
    12:00-12:30pm: Northern Plains  
12:30-1:00pm: Break – Vendor Rounds  
1:00-2:00pm: **Population Health – Dr. Preston Renshaw**  
2:00-3:00pm: **HIPAA – Susie O’Hara**  
3:00-3:20pm: Break – Vendor Rounds  
3:20-5:20pm: **Treatment Beyond Pain – Dr. Justin Wuebben**  
5:20-5:45pm: Break – Vendor Rounds – Prep for Knowledge Bowl  
5:45-7:45pm: **Knowledge Bowl & Mixer**

### Saturday March 30<sup>th</sup>

- 7:00-8:00am: Breakfast & Registration  
8:00-9:00am: **Deskercise – CJ Wehrkamp**  
9:00-10:00am: **Dr. Lauren Wood Thum**  
10:00-11:00am: **Helping Yourself to Help Patients - Amos Buelow**  
11:00-11:30am: Break – End of Silent Auction  
11:30-1:30pm: **Domestic Violence – Angie Mesenberg, The Beacon Center**  
1:30pm: Closing

### Registration Fees

#### Members

Both Days: \$100

Daily Rate: \$75

#### Non-Members

Both Days: \$130

Daily: \$105

**Students: \$75**

Registration is due March 15<sup>th</sup>.  
Additional \$10 will be added after this date.

**No refunds** after March 15<sup>th</sup>.

#### Additional Meals

Meals are included for **attendees** in the registration fee for Convention. If your guest is **NOT** a registered attendee of the Convention, they must pay \$20 per meal. If you are attending you do not need to pay the additional \$20.

Checks payable to: SDSMA

#### **Send Registration to:**

Suzie Weir  
48255 256th  
Garretson, SD 57030

### Registration

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Member: \_\_\_\_\_ Non-Member: \_\_\_\_\_ Student: \_\_\_\_\_

#### **I Plan to Attend:**

**Friday:** Convention: \_\_\_\_\_ Breakfast: \_\_\_\_\_ Lunch: \_\_\_\_\_ (# of attending)

**Saturday:** Convention: \_\_\_\_\_ Breakfast: \_\_\_\_\_ (# of attending)