



IASSM Committee Contact Details

www.wfhss.com and click on Ireland homepage.

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Conference 2007

Revitalizing the Basics



Conference 2007

Revitalizing the Basics



2nd & 3rd November 2007

**Grand Hotel, Malahide,
Co. Dublin**



Registration Form



Conference 2007

Revitalizing the Basics

The 2007 IASSM Conference is designed to continue to meet the growing challenges posed by personnel working in decontamination units in hospitals. There have been significant developments in sterile services since 2006 and this years presentation programme will involve a number of international and national experts speaking on....

1. Key Performance Indicators (KPI) in sterile services
2. Interpretation and validation of Steriliser Print outs
3. Endoscopy in the Decontamination of RIMD
4. Environmental Controls and Management— role of CSSD
5. Implementing EN ISO 17664:2004
6. MRSA — *getting to grips*
7. National Hospital's Office Decontamination Project Update
2007 (Winifred Ryan)
8. Quality Systems
9. Function Tests—automatic and manual controls

Plus

Keep up to date with the latest developments in sterile services technology by attending the 2007 IASSM Conference at the...

Grand Hotel, Malahide, Co. Dublin

Friday 2nd November

&

Saturday 3rd November 2007



Closing Date for registration (with full payment) is :

Friday 26th October 2007

Costs:	Friday	Saturday
Members	€80	€50
Non-members	€90	€60

Dinner (4 course) & Disco on Friday night is €25 per person (enclose payment).

Completed application forms should be returned with payment (draft cheque payable to IASSM) to: Patricia Doheny, CSSD, Kilcrene Hospital, Kilkenny. Tel: 056 7785404

REGISTRATION FORM

Name: _____

Organization: _____

Position: _____

Email address: _____

Mailing address: _____

Telephone Number: _____

IASSM Member : YES NO

I wish to register for the IASSM Conference

2007 on... Friday Dinner

Saturday

I enclose payment of €_____ to

register for the day(s) I would like to attend the conference.

Signature: _____

Official Use only:

Full payment received: _____

Signed: _____

Date: _____