# TB Program Managers’ Workshop

**OCTOBER 3 - 5**

**8:00 AM - 4:30 PM**

**NEWARK, NEW JERSEY**

**Presented by**

New Jersey Medical School Global Tuberculosis Institute

This program is an activity of the

NORTHEASTERN REGIONAL TRAINING & MEDICAL CONSULTATION CONSORTIUM

### COURSE DESCRIPTION

This is an interactive workshop designed to enhance the managerial skills of new and seasoned TB supervisors and managers.

### TARGET AUDIENCE

Entry level and mid-level managers and experienced supervisors in TB control programs.

### OBJECTIVES

Upon completion of this course participants will be able to:

- Apply TB surveillance data to program management and evaluation
- Understand laboratory techniques for the diagnosis of TB
- Discuss recommended anti-TB therapy and how it applies to the management of TB cases, suspects, and high-risk individuals
- Apply principles of TB transmission to facility management and supervision of contact investigations
- Define cultural competency in the context of TB programs
- Evaluate aspects of a TB program in order to improve quality and outcomes
- Develop TB programs through training and community collaborations

### COURSE REQUIREMENTS

Enrollment is limited to supervisors and managers in TB control. Participants must be familiar with the basic of tuberculosis, as outlined in the CDC Self-Study Modules on Tuberculosis prior to attendance at this course. The modules can be found at: [http://www.cdc.gov/tb/pubs/ssmodules/default.htm](http://www.cdc.gov/tb/pubs/ssmodules/default.htm)

### REGISTRATION PROCESS

Please complete the attached application, and return it to:

NJMS Global Tuberculosis Institute

PO Box 1709

225 Warren Street

Newark, NJ 07079-1709

Attention: Valerie Gunn

### FEE

$75.00 fee is required prior to the start of the course.
TRAINING LOCATION

New Jersey Medical School Global Tuberculosis Institute
225 Warren Street
First Floor, West Wing
Newark, NJ 07103

LODGING

For your convenience, we have reserved a block of rooms at the Hampton Inn & Suites - Newark Riverwalk. Please mention GROUP CODE: PMC to receive the group rate of $114.99 per night (plus tax). Directions will be provided in the confirmation letter.

For more information, please contact Valerie Gunn at (973) 972-9103 or email at gunnvl@umdnj.edu
**TB Program Managers’ Workshop**  
**October 3-5, 2007**

**Application Form**

*Note:* Completion of this form does not guarantee acceptance. If your application is accepted, you will receive a confirmation letter.

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<th><strong>Background Information</strong></th>
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<tr>
<td><strong>Name:</strong></td>
<td><strong>Degree(s) used after name:</strong></td>
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<td><strong>Job Title/Position:</strong></td>
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<td><strong>Department:</strong></td>
<td><strong>Preferred name for name tag:</strong></td>
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<th><strong>Mailing Address</strong></th>
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<tr>
<th><strong>Job History and Responsibilities</strong></th>
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<tr>
<td><strong>Percentage of work time devoted to TB:</strong></td>
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<td><strong>Years of experience in the field of TB:</strong></td>
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<tr>
<th><strong>Do you currently manage a TB control program?</strong></th>
<th><strong>Yes</strong></th>
<th><strong>No</strong></th>
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<th><strong>How many employees does your program have?</strong></th>
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<th><strong>Please describe your general work responsibilities:</strong></th>
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Please check the item that most closely describes your organization / workplace

- State or territorial TB control program
- Local (city or county) TB control program
- Federal agency
- University / educational institution / school
- Hospital
- Correctional Facility
- Non-profit / non-governmental organization
- Other

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<tr>
<th><strong>Needs and Expectations for Workshop</strong></th>
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<td><strong>What specific knowledge do you hope to gain at this workshop?</strong></td>
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Please specify any special accommodations you may need.

How did you learn about this workshop?

Payment Method (Please check one method)
Fee: $75.00

[ ] Check or Money Order  Check #: 
[ ] Purchase Order  Money Order #: 

Make payable to: NJMS Global TB Institute

Purchase Order #: 

Please complete this application as soon as possible and indicate method of payment. Applicants will be notified of acceptance, and registration will be confirmed once payment has been received. Applicants should confirm with their agency or organization to verify that payment has been made, as payment is required to attend the course.

Return this form by mail, fax, or email

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**Attn: Valerie Gunn** | (973) 972-1064 Attn: Valerie Gunn | gunnvl@umdnj.edu |