

## CONFERENCE OBJECTIVES

Upon completion of this activity, participants should be able to:

- Identify current treatments for Sickle Cell Disease
- Discuss complications related to Sickle cell disease
- Discuss SCDAI'S Programs

## CONFERENCE PURPOSE AND TARGET AUDIENCE

This conference is designed for nurses, health care professionals, educators, social workers, parents, students, and the community at large. The purpose of this educational activity is to strengthen participants' knowledge base about sickle cell disease and sickle cell carrier status through lecture, discussion, and sharing of current and future treatment regimens.

The Sickle Cell Disease Association of Illinois' (SCDAI'S) primary mission is to enhance the quality of life for people with Sickle Cell disease and their families. To effectively achieve this goal, SCDAI acts as an advocate for improved health care and services for Sickle Cell patients by educating and informing the community through outreach programs.

## CONFERENCE DETAILS

Directions:  
From Downtown Chicago:  
I-55 south to Cicero Avenue south to 94th Street and turn left to the hotel.

From O'Hare/Milwaukee/Northern Suburbs:  
I-294 south to 95th Street Exit East. 95th Street Exit East to Cicero Avenue north. Go 1 block north on Cicero Avenue and turn right to the hotel.

From Midway Airport:  
South on Cicero to 94th Street and turn left to hotel.

From Indiana/Southern Suburbs:  
I-80/I-94 to I-294 North to Cicero Avenue Exit North. Cicero Avenue north to 94th Street and turn right to hotel.

From Western Suburbs:  
I-88 East to I-294 South to 95th Street Exit East. 95th Street East to Cicero Avenue North. Go 1 block on Cicero Avenue north and turn right to hotel.

Hotel also accessible via public transportation.

**OAK LAWN HILTON**  
9333 S. Cicero Ave. • Oak Lawn, IL 60453



**Sickle Cell Disease Association of Illinois**  
8100 S. Western Ave. Chicago, Illinois 60620  
Phone: (312) 345-1100—Fax: (773) 526-5012

A Proud Member of the:  
Sickle Cell Disease Association of America  
Community Health Charities of Illinois

The conference is supported in part by Project #H46MC00267D0 from the Maternal and Child Health Bureau (Title V, Social Security Act), Health Resources and Services Administration, Department of Health and Human Services.

For additional information:  
312-345-1100 • [scdai@mcleodusa.net](mailto:scdai@mcleodusa.net)  
or visit us at  
[www.sicklecelldisease-illinois.org](http://www.sicklecelldisease-illinois.org)



**Sickle Cell Disease Association of Illinois**  
8100 S. Western Ave. Chicago, Illinois 60620



## Sickle Cell Disease Association of Illinois

Presents

### Management of Sickle Cell Disease Conference 2009

Wednesday, September 23, 2009  
8:00 am - 4:00 pm

**OAK LAWN HILTON**  
9333 South Cicero Avenue  
Oak Lawn, IL 60453-2517

312-345-1100  
[www.sicklecelldisease-illinois.org](http://www.sicklecelldisease-illinois.org)  
[scdai@mcleodusa.net](mailto:scdai@mcleodusa.net)

## PROGRAM SPEAKERS

Jo Ann Allen, MSN, RN, Hemoglobinopathy Counselor, Sickle Cell Disease Association of Illinois

John M. Cunningham, MD, Professor and Chief, Section of Hematology /Oncology, University of Chicago Department of Pediatrics

Linda Drawhorn, MS, RN, Project Manager Sickle Cell Disease Treatment Demonstration Project, Christian Community Health Center

Sandra D. Gooden, BSN, RN, Pediatric Hematology/Oncology Nurse Clinician, University of Illinois Medical Center at Chicago

Bonnye Johnson, MS, RN, Community Health Education & Outreach Coordinator, University of Illinois Sickle Cell Center

Shonda King, MSW, LSW, Social Worker, University of Illinois at Chicago Comprehensive Sickle Cell Center

Judith A. Paice, PhD, RN, Director, Cancer Pain Program, Research Professor, Feinberg School of Medicine, Northwestern University

Dennie T. Rogers, MD, Department of Obstetrics and Gynecology, Maternal Fetal Medicine University of Illinois at Chicago

Alexis A. Thompson, MD, MPH, Hematology Section Head, Children's Memorial Hospital, Assoc. Professor of Pediatrics, Feinberg School of Medicine, Northwestern University

An application for approval of nursing contact hours has been submitted to the Illinois Nurses Association Approver unit. Please call Jo Ann Allen (312-345-1100) at the Sickle Cell Disease Association of Illinois for more information about contact hours.

## CONFERENCE AGENDA

8:00 a.m. - 8:30 a.m.

Registration/Continental Breakfast

8:15 a.m. - 8:30 a.m.

Welcome and Introduction & SCDAI Mission

Jo Ann Allen, MSN, RN

Remarks-Illinois Dept. of Public Health

Newborn Screening Program

IDPH Representative

8:30 a.m.- 9:15 a.m.

Sickle Cell Disease Overview

Alexis A. Thompson, MD, MPH

9:15 a.m. - 10:15 a.m.

Opioid Therapy for Sickle Cell Pain:

Risks and Benefits

Judith A. Paice, PhD, RN

10:15 a.m. - 10:30 a.m. - Break

10:30 a.m. - 11:30 a.m.

Sickle Cell: A Historic Perspective

Allan Platt, PA-C, MMSc

11:30 a.m. - 12:00 p.m.

SCDAI Programs

Jo Ann Allen, MSN, RN

Linda Drawhorn, MS, RN

12:00 p.m. - 1:00 p.m. - Lunch

### Break Out Session

1:00 p.m. - 1:45 p.m.

Management of Pregnant Mothers with Sickle Cell Disease

Dennie T. Rogers, M.D.

Social Worker's Role in Transitioning Pediatric Patients

Shonda King, MSW, LSW

1:45 p.m. - 2:15 p.m.

Why African Americans Should Donate Blood

Bonnye Johnson, MS, RN

2:15 p.m. - 2:30 p.m. - Break

2:30 p.m. - 3:00 p.m.

Be Sickle Smart Be Iron Smart

Sandra D. Gooden, BSN, RN

3:00 p.m. - 4:00 p.m.

Opportunities and Challenges in Stem Cell Transplantation for Sickle Cell Disease

John M. Cunningham, MD

## REGISTRATION FORM

Wednesday, September 23, 2009

Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Number \_\_\_\_\_

Hospital Affiliation \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Registration Fee: \$70.00

Break Out Session: (Please Check One)

- Management of Pregnant Mothers with Sickle Cell  
 Social Worker's Role in Transitioning Pediatric Patients

Method of Payment:

- Check Made Payable to: Sickle Cell Disease Association of Illinois  
 MasterCard  
 Visa

Credit Card # \_\_\_\_\_

Exp. date \_\_\_\_\_

Signature \_\_\_\_\_

Please detach this form and submit with payment

Please mail or fax your registration with your payment to:

8100 S. Western Ave. Chicago, Illinois 60620  
Phone: (312) 345-1100 - Fax: (773) 526-5012

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