



5A^s OF OBESITY MANAGEMENT TRAINING FOR PHYSICIANS

A WORKSHOP ORGANIZED BY THE CANADIAN OBESITY NETWORK • WWW.OBESITYNETWORK.CA

SATURDAY, APRIL 5, 2014, 7:00 AM - 9:00 AM
(BREAKFAST & REGISTRATION - 7:00AM; 8:00AM WORKSHOP) BREAKFAST AND 5A^s PROFESSIONAL TOOLKIT PROVIDED

PARTNERS FOR HEALTHIER WEIGHT, 6960 MUMFORD ROAD, SUITE 2055, HALIFAX, NS B3L 4P1



Join **Dr. Arya Sharma** for a healthy breakfast and one-hour workshop on the 5A^s of Obesity Management, a set of practical tools to guide Primary Care Physicians in Obesity Counseling and Management.

5A^s of Obesity Management

ARYA SHARMA,
MD/PhD, DSc. (h.c.),
FRCPC Professor of
Medicine and Chair for
Obesity Research and
Management, University
of Alberta & Scientific
Director of the Canadian
Obesity Network.



LEARNING OBJECTIVES

- To increase awareness of the fundamental principles of obesity management
- Recognize obesity as a chronic disease
- Understand the key elements of obesity assessment and counseling
- Apply the 5A^s intervention framework to their patients

THIS PROGRAM HAS BEEN SUBMITTED FOR REVIEW BY THE COLLEGE OF FAMILY PHYSICIANS OF CANADA AND IS AWAITING FINAL ACCREDITATION FOR MAINPRO M1 CREDIT.

CO-HOSTED BY



Space is limited and registration is required. Completed registration forms may be emailed to Krista Leck Merner at: Krista.leckmerner@cdha.nshealth.ca or faxed to (902) 454-2686.



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TO REGISTER:

SPACE IS LIMITED AND REGISTRATION IS REQUIRED. COMPLETED REGISTRATION FORMS MAY BE EMAILED TO KRISTA LECK MERNER AT: KRISTA.LECKMERNER@CDHA.NSHEALTH.CA OR FAXED TO (902) 454-2686.

CONTACT INFORMATION: *(as it will appear on your name badge)*

Dr. Mr. Ms.

CURRENT ENROLLMENT:

Family Physician
 General Practitioner

Other:

Last Name*: _____

First Name*: _____

Address Line 1: _____

Institution: _____

Address Line 2: _____

City: _____

Province/State: _____

Postal Code/Zip Code: _____

Email*: _____

Country: _____

Phone *(please include area code)**: _____

Fax *(please include area code)*: _____

** Required contact information - this will be used for the pilot study but will not be made publicly available.*

5A'S REGISTRATION: Saturday, April 5, 2014 *Space is Limited and registration is required*

CON-RCO member*

\$FREE

Registration Required

Non-member*

\$FREE

Registration Required

BREAKFAST IS INCLUDED IN REGISTRATION

DIETARY RESTRICTIONS: Vegetarian

Allergy:

Other: _____

PLEASE NOTE: On-site registration desk open 7:00 AM, breakfast served at 8:00 AM. By registering for this workshop you agree to participate in a pilot study on the 5A^s of Obesity Management. All registrants will be required to complete a short Pre/Post evaluation survey and agree to be contacted by email (preferred) or phone by the Canadian Obesity Network.

Signature: _____

Date: _____

*CON Membership is free. Please go to www.obesitynetwork.ca and click "Join Us"