

CONFERENCE LINE® SEMINAR SERIES  
**Managing Chronic Pain  
With Opioid Therapy**  
Strategies for the Primary Care Setting

**To Register:**

**Toll-Free Phone: 1 (877) 251-8808**

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**Web: [www.PainKnowledge.org](http://www.PainKnowledge.org)**

A confirmation will be sent to you within 1-2 business days of receipt.

**Circle the conference code below that you are interested in.**

Conference Code

B445-01

B445-02

B445-03

B445-04

B445-05

B445-06

B445-07

B445-08

B445-09

B445-10

**Registration Form** *(Please print)*

Dr  Mr  Mrs  Ms  Prof  Other (Please specify)

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Degree  MD  PharmD  DO  NP  PA  RPh  
 Other *(Please specify)* \_\_\_\_\_

Specialty \_\_\_\_\_

Profession \_\_\_\_\_

Preferred Mailing Address  Home  Office  Practice  Academic

Dept/Div/Suite/Unit/Affil \_\_\_\_\_

Street \_\_\_\_\_

City/State/ZIP Code \_\_\_\_\_ Country \_\_\_\_\_

Email *(Please print clearly)* \_\_\_\_\_

Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

I prefer to receive my registration confirmation via  Fax  Mail

Please print any questions or issues you would like the speaker to address.

\_\_\_\_\_  
\_\_\_\_\_

This meeting is only open to healthcare professionals.

For more information on NIPC activities, please visit [www.PainKnowledge.org](http://www.PainKnowledge.org)

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