

MATTERS OF THE MIND:



Addressing Cognitive Aspects of **Bipolar Disorder**

You may register for one of these teleconferences via fax, e-mail, or phone. When you register, it is **imperative** that you provide the following information: first name, last name, address, phone number, fax number or e-mail address, and the title **Matters of the Mind**.

3 Methods to Register

Confirmation of registration will be provided.

FAX: 866-350-9325	PHONE: 866-482-4263, ext. 123	E-MAIL: bipolarcme@cmknowledge.com
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NAME																									TITLE				
SPECIALTY									AFFILIATION OR PRACTICE NAME																				
ADDRESS																													
CITY													STATE			ZIP CODE													
PHONE									EXT.					FAX															
E-MAIL																													

<p>I am registering for the following Live Teleconference*:</p> <p>Date: _____ Time: _____</p> <p><small>I understand that by providing my fax number I consent to receive faxes sent by or on behalf of The Center for Medical Knowledge, LLC (CMK), (and its subsidiaries and affiliates). I understand that CMK will not share my fax number with other organizations.</small></p> <p>Signature: _____ Date: _____</p>	<p>Please check one.</p> <p><input type="checkbox"/> I will download the course materials (activity workbook and evaluation form) from your Web site: www.cmknowledge.com/MattersoftheMind.html</p> <p><input type="checkbox"/> I am unable to download the course materials from your Web site; please mail a copy to me at the address listed above.</p>
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Please answer these brief preactivity questions by checking the appropriate box. ***Calendar on page 2**

How would you rate your confidence in your ability to:

Identify cognitive deficits associated with bipolar disorder? 1 Low 2 3 4 5 High

Discuss the impact of cognitive deficits on functional outcomes in bipolar disorder? 1 Low 2 3 4 5 High

Summarize evolving data and hypotheses regarding the cognitive effects of available and emerging therapies for bipolar disorder? 1 Low 2 3 4 5 High

Live Teleconference Calendar

All times listed are Eastern Standard Time.

OCTOBER 2008						
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
			1	2 2:00 PM	3	4
5	6	7 6:00 PM	8 3:00 PM	9 8:00 PM	10	11
12	13	14	15	16	17	18
19	20	21	22 3:00 PM	23 12:00 PM 7:00 PM	24	25
26	27	28 1:00 PM 6:00 PM	29 2:00 PM 7:00 PM	30 1:00 PM	31 HALLOWEEN	

NOVEMBER 2008						
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
						1
2	3	4 3:00 PM 8:00 PM	5	6 12:00 PM 6:00 PM	7	8
9	10	11 8:00 PM	12 1:00 PM	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
					THANKSGIVING	

DECEMBER 2008						
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	1	2	3 7:00 PM	4 8:00 PM	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			