

Continuing Professional Education Certificate of Attendance

Participant Name: _____

Activity Title: 2018 Annual Conference: Advanced Concepts in Breastfeeding

Activity Number: 139209

Date Completed: March 8-9, 2018

*Suggested Learning Need Code(s): 1040, 4150, 4140, 5060

*Suggested Performance Indicator(s): 1.3.4, 1.3.5, 12.2.2, 6.2.5

**Refer to your Professional Development Portfolio Guide for LNCs or Pls.*

Thursday, March 8		Friday, March 9	
<input type="checkbox"/>	8:15-9:15 am (1)	<input type="checkbox"/>	8:15-8:45 am (.5)
<input type="checkbox"/>	9:15-10:15 am (1)	<input type="checkbox"/>	8:45-9:15 am (.5)
<input type="checkbox"/>	10:30-11:00 am (.5)	<input type="checkbox"/>	9:15-10:15 am (1)
<input type="checkbox"/>	11:00-11:30 am (.5)	<input type="checkbox"/>	10:30-11:30 pm (1)
<input type="checkbox"/>	12:30-1:30 pm (1)	<input type="checkbox"/>	12:30-1:30 pm (1)
<input type="checkbox"/>	1:40-2:40 pm (1)	<input type="checkbox"/>	1:30-2:30 pm (1)
<input type="checkbox"/>	3:00-4:00 pm (1)	<input type="checkbox"/>	3:00-4:00 pm (1)
<input type="checkbox"/>	4:00-5:00 pm (1)	<input type="checkbox"/>	4:00-5:00 pm (1)

Number of CPEUs Awarded: _____



Provider Signature



New Mexico
Breastfeeding Task Force

**Commission
on Dietetic
Registration**

the credentialing agency for the
**Academy of Nutrition
and Dietetics**

