

Lunch



Learn

Wednesday, May 31, 2017

Puberty Suppression in Young Gender Diverse Adolescents

Dianne Berg, Ph.D., LP

Registration:*	11:30 – 11:45 a.m.	Location:	MPA Office (<i>IntrinXec Management, Inc.</i>)
Program:	11:45 a.m. – 12:45 p.m.		Large conference room
CE certificate distribution:	12:45 – 1 p.m.		5353 Wayzata Blvd., Suite 350 Minneapolis, MN 55416

About the Program:

This program qualifies for 1.0 continuing education credit.

The use of puberty suppression medication in young gender diverse adolescents is becoming more common. Given the implications of these medications, a thorough informed consent process with the parent(s) and adolescent is crucial. In this workshop, participants will not only learn about the implications of puberty suppression but will discuss the role that mental health providers have in this informed consent process.

Participants will be able to:

1. Describe the reproductive implications of puberty suppression in young adolescents.

About the Presenter:

Dianne Berg, Ph.D., LP, is an assistant professor and licensed psychologist at the Program in Human Sexuality at the University of Minnesota. She is the co-coordinator of the Transgender Health Services Program with a special emphasis in Child and Adolescent Gender Health and a member of the Child and Adolescent Committee of the World Professional Association for Transgender Health (WPATH), an international organization that asserts clinical and evidence-based practices through its published Standards of Care. Dr. Berg is a published scholar and invited speaker at regional, national and international conferences. She has been working clinically with gender creative children and transgender adolescents for over 10 years. She received her Ph.D. in counseling psychology from the University of Illinois at Urbana-Champaign.

About Lunch & Learns:

Lunch & Learns are informal programs for psychologists and other mental health professionals and are at the intermediate level.

*REGISTRATION: There is no early bird rate for registration. The registration fees are: MPA Members = \$25, Non-members = \$30, Students = \$25. Registration fee includes box lunch, and CE certificate (1 credit). We will not be duplicating program materials. **Participants are limited to the first 17 registrants. There is no on-site registration.**

CONFIRMATION/CANCELLATION: Registrations are confirmed by receipt of forms on a first-come, first-served basis. You will not receive a written confirmation of your registration. You will be notified by mail, e-mail or telephone only if your selection is filled or cancelled.

ACCESSIBILITY ACCOMMODATIONS: If you need disability related accommodations to make this event accessible, please contact Rhea Sullivan, MPA Administrative Director, at 952-564-3048 or info@mnpso.org.

REFUND POLICY: A 100% refund will be made if the event is cancelled. Refunds, less a \$5 handling fee, will be given if a written cancellation is received at least two working days before the scheduled program begins. Transfer of fee to another program is granted if written cancellation notice is received at least one day before the program. No refund or transfer is given the day of the program.

Please note: You must attend the full 1-hour program to receive continuing education credit for this event.

Lunch & Learn

Wednesday, May 31, 2017

Name: _____ Degree: _____ Licensure: _____

Institution/Agency: _____

Address: _____ City/State/Zip: _____

Please check: Home Work

E-mail: _____ Phone: _____ Fax: _____

Please check: Home Work

Registration Fee: MPA member: **\$25** Non-member: **\$30** Student: **\$25**

Your registration fee includes a box lunch and one continuing education credit. Box lunch includes sandwich, kettle chips, baby carrots and dessert.

Please indicate your sandwich preference: Turkey Breast Honey Ham Tuna Salad Veggie Avocado Roast Beef

Total Amount Enclosed: \$ _____

Check (made payable to MPA) Visa MC American Express

All credit card fields are required

Card Number: _____ Exp. Date: _____ Security Code: _____

Cardholder Name (print): _____ Cardholder Signature: _____

Credit card billing address: Same as above

Address: _____ City/State/Zip: _____

Please do not email credit card information. Fax or mail your registration form to protect this information.

Return To:

Minnesota Psychological Association

5353 Wayzata Blvd. Suite 350

Minneapolis, MN 55416

P: 952.564.3048 • F: 952.252.8096



The Minnesota Psychological Association is approved by the American Psychological Association to sponsor continuing education for psychologists. The Minnesota Psychological Association maintains responsibility for this program and its content.

LOCATION: Minnesota Psychological Association Office | 5353 Wayzata Blvd., Suite 350, Minneapolis, MN 55416

