



## Exhibitor & Sponsorship Prospectus

High Performance Resuscitation Teams - 2024  
Sheraton San Diego Hotel & Marina, San Diego, California  
September 19-20 2024

## Welcome -

On behalf of course directors Colin Bucks, MD, FAAEM, Al'ai Alvarez, M.D., FACEP, FAAEM, Preston B. Cline, Ed.D. and the Mayo Clinic School of Continuous Professional Development, we are pleased to announce this year's High Performance Resuscitation Teams, September 19-20, 2024, at Sheraton San Diego Hotel & Marina, San Diego, California.

### Course Description

This course will review critical concepts and operationalize implementation practices for High Performance Resuscitation Teams. Attendees will explore how team members acquire, process, and make information actionable, including strategies for effective communication, collaboration, and cooperation. Experts in the field will focus on situations of high risk and high consequences, as well as constructive communication in intense and highly emotional scenarios.

### Target Audience

This course is designed for physicians, nurses, sports psychologists, military, law enforcement, flight crew, PA, NP, RN, surgical techs, pro sports performance teams, charge nurse, scrub nurse, fire fighters, police, EMT/EMR, public safety workers.

Mayo Clinic recognizes these types of educational programs would not be possible without your support. We invite you to participate at this educational activity with an exhibit table or sponsorship listed below. Complete the online form by September 1, 2024. In support of ACCME guidelines, commercial support will be in a separate area from the educational activity. This event is open to multiple pharmaceutical companies.

For your convenience, our Federal tax identification number is 41-6011702. We look forward to the success of our course this year and hope you will be able to join us! If you have any questions, please feel free to contact us.

Sincerely,

Lisa Winter  
CME Specialist  
Mayo Clinic School of Continuous Professional Development

Kris Jones  
Education Coordinator  
[jones.kristen@mayo.edu](mailto:jones.kristen@mayo.edu)  
Mayo Clinic School of Continuous Professional Development  
200 First St SW, Plummer 2-60  
Rochester, MN 55905

## Sponsorship Opportunities

Technical and educational exhibits provide a professional and educational environment in which physicians can receive demonstrations, view products and services and discuss the clinical and surgical uses of these products and services, including how they may improve the quality of care and the management of the medical/surgical practice. Additionally, the exhibits enhance the educational content of the meeting helping to provide quality continuing medical education.

Please reach out to [Lisa Winter](#) or [Kris Jones](#) if you are interested in sponsoring our event.

*Don't see what you are looking for? Contact us and we would be happy to discuss additional advertisement opportunities with you.*

Opportunity	Fee	Fee Includes
Course Dinner	\$20,000	<ul style="list-style-type: none"><li>• Signage with company name and/or logo</li><li>• Acknowledgement on webpage, announcements, and at break times during the course</li><li>• An exhibit table for two representatives</li><li>• Four complimentary registrations to the course</li><li>• List of conference attendees</li></ul>
Break	\$5,000	<ul style="list-style-type: none"><li>• Signage with company name and/or logo</li><li>• Acknowledgement on webpage, announcements, and at break times during the course</li><li>• An exhibit table for two representatives</li><li>• List of conference attendees</li></ul>
Internet	\$5,000	<ul style="list-style-type: none"><li>• Signage with company name and/or logo</li><li>• Acknowledgement on webpage, announcements, and at break times during the course</li><li>• An exhibit table for two representatives</li><li>• List of conference attendees</li></ul>

## In-Person Exhibit Tables

- Interact face-to-face with numerous medical professionals
- Build visibility for your company in a competitive marketplace
- Expand your customer base and strengthen existing customer relationships
- Advertisement opportunities to expand reach and further socialize with attendees
- Introduce new products and services

[Click here to secure your exhibit table](#)

*A signed letter of agreement is required to secure your exhibit table*

## Exhibit Details and Hours

Opportunity	Fee	Fee Includes
In-Person Exhibit Table	\$1,500	<ul style="list-style-type: none"><li>• An exhibit table for two representatives</li><li>• Acknowledgement on webpage, announcements, and at break times during the course</li><li>• List of conference attendees</li></ul> <p>Set-up: Wednesday, September 18<sup>th</sup> – Time TBD Tear Down: Friday, September 20<sup>th</sup> – at conclusion of course</p> <p>Exhibit Hours: Thursday, September 19<sup>th</sup> 7:00am to Friday, September 20<sup>th</sup> 4:00pm</p>

## Payment

### **PREFERRED Payment: Credit card**

To pay by credit card, please click [here](#)

### **By Check: Make checks payable to Mayo Clinic - MCSCPD**

Mailing address: 200 First St SW, Plummer 2-60, Attn: Kris Jones, Rochester, MN 55905

**Reference: HPRT - 5324R00664 on check**

Mayo Clinic Tax ID: 41-6011702

## Lodging

Lodging information can be found on the [course page](#).

# High Performance Resuscitation Teams (HPRT) 2024

September 19 and 20, 2024

Sheraton San Diego on the Marina

*Pacific Standard Time*

<b>Thursday, September 19, 2024</b>	
7:00 a.m.	<i>Registration and Breakfast Fairbanks Ballroom, Foyer</i>
8:00 a.m.	Welcome and Course Overview <i>Al'ai Alvarez MD, Preston Clin, EdD, Colin Bucks MD</i>
8:30 a.m.	Opening Keynote <i>Colin Bucks, MD</i> Orange County Fire
9:30 a.m.	We Chose the Hard Path/RDR5 and Connect with Tabletop <i>Al'ai Alvarez MD, Preston Cline EdD</i>
10:30 a.m.	Facilitated Discussion Mayo facilitators
11:00 a.m.	<i>Lunch</i>
12:30 p.m.	Reset – Short Haul vs Long Haul <i>Paddy Steinfort, Sara Marrello RN</i>
1:00 p.m.	<i>Collaborative Inquiry</i> <i>Paddy Steinfort, Sara Marrello RN</i>
2:00 p.m.	<i>Facilitated Discussion</i> Mayo facilitators
2:30 p.m.	<i>Refreshment Break</i>
3:00 p.m.	Motivation & Sustaining Your Team <i>Meaghan Keville, MD</i>
3:30 p.m.	Collaborative Inquiry <i>Meaghan Keville, MD</i>
4:30 p.m.	Facilitated Discussion Mayo facilitators
5:00 p.m.	<i>Adjourn</i>
6:00 p.m.	Storytelling/dinner [Attendees will RSVP – Dinner Provided] <i>Kevin Kling</i>
8:00 p.m.	<i>Adjourn</i>

# High Performance Resuscitation Teams (HPRT) 2024

September 19 and 20, 2024

Sheraton San Diego on the Marina

*Pacific Standard Time*

<b>Friday, September 20, 2024</b>	
7:30 a.m.	<i>Breakfast</i> <i>Fairbanks Ballroom, Foyer</i>
8:45 a.m.	Welcome & Recap <i>Al'ai Alvarez MD</i>
9:00 a.m.	The Future of After-Action Reviews <i>Shannon McNamara MD</i>
9:30 a.m.	Collaborative Inquiry <i>Shannon McNamara MD</i>
10:30 a.m.	Facilitated Discussion Mayo Facilitators
11:00 a.m.	<i>Lunch</i>
12:30 p.m.	Focus on Stress as Enhancing <i>Gloria H Park PhD</i>
1:00 p.m.	Collaborative Inquiry <i>Gloria H Park PhD</i>
2:00 p.m.	Facilitated Discussion Mayo Facilitators
2:30 p.m.	<i>Refreshment Break</i>
3:00 p.m.	Landing the Plane <i>Colin Bucks MD, Preston Cline EdD, Al'ai Alvarez MD</i>
4:00 p.m.	<i>Adjourn</i>

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Mayo Clinic</b>	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.	
<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input checked="" type="checkbox"/> Other (see instructions) ▶ <b>501 (c)(3) tax-exempt non-profit organization</b>	
4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):	
Exempt payee code (if any) <u>1</u>	
Exemption from FATCA reporting code (if any) <u>A</u>	
<small>(Applies to accounts maintained outside the U.S.)</small>	
5 Address (number, street, and apt. or suite no.) See instructions. <b>200 First Street Sw</b>	Requester's name and address (optional)
6 City, state, and ZIP code <b>Rochester, MN 55905</b>	
7 List account number(s) here (optional)	

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>										
or										
<b>Employer identification number</b>										
4	1		6	0	1	1	7	0	2	

## Part II Certification

- Under penalties of perjury, I certify that:
- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
  - I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
  - I am a U.S. citizen or other U.S. person (defined below); and
  - The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶ <i>Kelly M. Huneke</i>	Date ▶ <i>1/2/2024</i>
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
  - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
  - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
  - Form 1099-S (proceeds from real estate transactions)
  - Form 1099-K (merchant card and third party network transactions)
  - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
  - Form 1099-C (canceled debt)
  - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*