

Membership

To contact the Society, please use the following information:



The American Society of Hypothermic
Medicine
602 Audubon Avenue Suite B
Tampa, FL 33609
Fax: (813) 323 -5448

hypothermicmedicine@hotmail.com
www.hypothermicmedicine.org

Membership Benefits

Professional Resources, including lecture sessions and educational material focused on hypothermic medicine

Access to training sessions teaching evidence based knowledge of therapeutic hypothermia

Invitation to regular ASHM national and regional meeting

Subscription to the Journal of Therapeutic Hypothermia and Temperature Management 2011. Mary Ann Liebert Pub. Inc., edited by Dr. W. Dalton Dietrich

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Hypothermic Medicine
602 Audubon Avenue
Tampa, FL 33609

The American Society of Hypothermic Medicine

The only American professional society solely focused on the clinical application of therapeutic hypothermia



Over the past decade, clinical evidence has shown great benefits to some patients through the use of mild hypothermia. It was evident that a coalition of experts and providers needed to be formed for education, research and development of standards of excellence.

The American Society of Hypothermic Medicine (ASHM) was created to provide the resources needed to practice and advance therapeutic hypothermia.

www.hypothermicmedicine.org

Vision Statement

The American Society of Hypothermic Medicine was created to bring together physicians, scientists, technologists, paramedics health-care providers and interested individuals in the education, research and application of evidence based therapeutic hypothermia.

Mission Statement

To teach evidence based therapeutic hypothermia.

To develop scientifically based guidelines of treatment and expert recommendations for the use of therapeutic hypothermia

To facilitate research and further the development of evidence based hypothermic medicine

To bring together the experts and providers of therapeutic hypothermia from the many diverse fields of medicine researching and applying this technology to meet in the United States.

Membership

To join the American Society of Hypothermic Medicine, please complete this form and mail/fax it to our address

Prefix First Name/Middle Initial

Last Name Suffix

Preferred Street Address

City

State/ Province Zip Code

Preferred Phone #

Fax #

Primary Email Address

As a member of The American Society of Hypothermic Medicine, Inc., I pledge to uphold the highest standards of therapeutic care. I fully understand that any misconduct on my part, including behavior that is unethical or detrimental to the purposes of this Foundation will result in cancellation of my membership, as described in the Foundation Bylaws.

Signature Date

Category: (with annual dues)

- Physician/Scientist Member: \$250 Dues
- Fellow/Resident/Student - \$150 Dues, Verification letter from program director is required
- CEO/Non-Physician Administrator Member - \$200 Dues
- Physician Assistant Member - \$100 Dues
- Nurse Member - \$100 Dues
- Emergency Medical Technician - \$100 Dues
- Technologist Member - \$100 Dues
- Associate Member - \$100 Dues

Payment Options

- Enclosed is a check (USD) made payable to ASHM for first-annual dues (listed above)
- Credit Card Information is as follows:

- Visa MasterCard
- American Express Discovery

Card Number

Exp Date CVV Code

Signature Date

Credit Card Address:

- use Home use Employer use below:

Credit Card will be charged with first annual dues, only, as related to membership category.