

斯坦福癌症与神经科学支持护理计划

Stanford Cancer and Neuroscience Supportive Care Programs (Simplified Chinese)

网上课程报名方法

Registration for Online Classes

第一步 (Step One):

- 进入您感兴趣的支持护理计划网站
 - o 癌症支持护理计划:

https://stanfordhealthcare.org/for-patientsvisitors/cancer-supportive-care-program.html

 神经科学支持护理计划: <u>https://stanfordhealthcare.org/for-patients-</u> <u>visitors/neuroscience-supportive-care-program.html</u>

第二步 (Step Two):

• 点击 "Class Calendar" (课程表)。

Concor Cupportive Core Drogram

BOUT VIDEOS		
Virtual offerings are now available. See categories below, call or email us for more information. In-person Supportive Care Programs have been temporarily canceled until further notice. RESOURCES DURING COVID-19	CATALOG OF SERVICES	CLASS CALENDAR
Support for Cancer Patients and Family The Cancer Supportive Care Program is an integral part of the	LOCATIONS	

更新日期 2020 年 9 月 1 日 斯坦福医疗中心患者体验部健康教育、推广及宣传处 (Stanford Health Care Patient Experience/Health Education, Engagement and Promotion)



Neuroscience Supportive Care Program



第三步 (Step Three):

 要参加网上支持护理课程必须先同意弹出窗口中所列 条款。

-		member.	
	COVID-19 Re	Health Education Program Participation Agreement	<
	Cano	I am voluntarily enrolling and participating in a class or activity hosted by Stanford Health Care, including but not limited to, aerobic exercises, balance and functional movement practice, yoga, dance, resistance strength conditioning, and/or tai chi. I am aware of the risks and hazards involved in participating in a class or activity where there is chance for injury. I understand that it is my responsibility to consult with my physician regarding, and prior to my participation in, any type of class or activity at Stanford Health Care. I hereby affirm that I am in good physical condition and do not suffer from any disability or condition that would prevent or limit my participation in classes or activities.	
	ABOUT	In the event of any unusual pain, discomfort, injury, light headedness or dizziness during the class or activity, I will cease participation. I understand I am responsible for modifying exercises as necessary based on my physical condition and/or state of being.	
	Virti cate info	I understand that Stanford's Health Education Programs, in an effort to provide me with the latest program updates on exercise classes and activities, care, and research, will communicate with me by email or text. At any time, I may change my communication preferences and opt out of email or text communications by contacting Stanford's Health Education Program.	AR
	cance RESO	Please confirm that you've read both the confidentiality & health education program participation agreements.	
		• Yes, I agree.	100
		O No, I disagree.	2
	Sup	Thank you for your response.	
	Fan	View the Cancer Supportive Care Program Calendar »	
	The C Stanfi		

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第四步 (Step Four):

进入课程表并选择感兴趣的网上课程。以下是以选择太极课 (Tai Chi) 为例的操作示范:



第五步 (Step Five):

在课程简介中点击报名链接 "<u>here</u>" ("To register, click <u>here</u>")



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第六步 (Step Six):

• 填写报名表中必填项并点击 "Register" (报名)。

Time shows in Pacific Time (US and Canada)		
First Name*	Last Name*	
Email Address*	Confirm Email Address"	
Address*	City*	
Zip/Postal Code*	State/Province*	
Phone*		
Please re-type participant first and last name*	Emergency Contact First and Last Name*	
Emergency Contact Phone Number*		
* Required information		
Register		

第七步 (Step Seven):

• 保存下方链接 (URL),或加进自己的日历表;这个链接就是网路课程的教室。

	Meeting Registration Approved
Topic	Tai Chi
Time	Sep 1, 2020 02:30 PM Sep 8, 2020 02:30 PM Sep 15, 2020 02:30 PM Sep 22, 2020 02:30 PM Sep 22, 2020 02:30 PM Oct 6, 2020 02:30 PM
	Time shows in Pacific Time
Meeting ID:	938 7990 0274
To Join the N	Aeeting
Join from a PC	, Mac, iPad, iPhone or Android device:
Please click th YSXc.DQIAAA SeGpSZUw4d	is URL to join. https://stanfordhealthcare.zoom.us/w/93879900274?tis=SIFssg688GqV70z4NwpaJK/bjioxFUoePb5WK4G- AV262Ych2l22bleHIISVN2LXioxTW1OUEJ0bmxBAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA
To Cancel Th	iis Registration
You can cance	l your registration at any time.

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