

Managing Complications of Disease and Cancer Treatment. Monday 12th June 2017

Venue: The Education and Conference Centre, Stewart's Grove, SW3 6JJ. Event 622

Aims: A study day for nurses, doctors and other healthcare professionals dealing with complications in disease and cancer treatment.

This study day has been supported by the United Kingdom Oral Mucositis in Cancer Care Expert Group (UKOMiC).

UKOMiC as a professional multi-professional group wish to provide an educational platform for colleagues to be updated on topical issues within oncology and palliative care that is informative, educational and provides an opportunity to discuss and network with other health care professionals.

Early Bird Rate £50 (if booked by 31st March 2017), £80 thereafter.

TOPICS TO INCLUDE:

- Prevention and management of oncological emergencies: sepsis, spinal cord compression, hypercalcaemia, and tumour lysis
 - Management of side effects from targeted therapies
- Oral and dental care issues in patients receiving anti-cancer treatments
- Skin care and managing wounds

Early Bird Rate £50 (if booked by 31st March 2017), £80 thereafter.

- Managing pain in the advanced cancer setting
- Living with advanced disease

We wish to thank our colleagues in industry who sponsor and support this study day.

www.royalmarsden.nhs.uk/ukomic

For all other study days, please visit: www.royalmarsden.nhs.uk/studydays

UKOMiC Study Day

Event ID:622 Date: 12/06/2017

£50 Early Bird Rate (If booked by 31st March 2017)

£80 Normal Rate from 1st April 2017

ONLINE BOOKING NOW AVAILABLE

Please visit www.royalmarsden.nhs.uk/ukomic

ALTERNATIVELY FILL OUT YOUR DETAILS BELOW

Please complete details clearly in block capitals as this information is used to prepare event materials.

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rst Name: Male/Female	
bb Title:	
ompany:	
mail:	
ull Postal Address: (Please specify whether home [] or work	())
Postcode:	
av Tel:	

BOOKING CONDITIONS

In order to be registered for the event, full payment of the registration fee must be made with your application, unless an organisation is paying on your behalf. All bookings will be confirmed by email, unless otherwise requested. Please contact us if you have not received confirmation within 5-7 days of submitting your booking.

A 50% fee will be charged for cancellations made within 4-6 weeks of the event. For cancellations made within one month of the event, full payment will be due irrespective of whether the delegate attends the event or not.

PAYMENT BY CREDIT CARD OR CHEQUE

I enclose the sum of £50 (by 31 March 2017) or £80 (thereafter) by cheque made payable to 'The Royal Marsden NHS Foundation Trust' or by credit / debit card (Visa / MasterCard / Switch only)

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PAYMENT BY INVOICE

If your employer has **agreed** to pay your fees and an invoice needs to be sent, it is **essential** that you give full details below of the contact name, department and full postal address. If any information is missing, **your application will not be processed**.

If your application form needs to be approved by your finance/personnel department, please ensure that it is processed and forwarded to us quickly. It is your own responsibility to ensure that your application is approved by your employer and forwarded to this office. We regret that we cannot do this for you.

Purchase Order Number (if required)_

Contact name of whom the invoice should be addressed to:

Organisation:

Department: _____

Direct dial tel no: _____

Fax No: _____

Email: _____

Postal Address:

GENERAL

Special dietary/other requirements:

HOW DID YOU HEAR ABOUT THE EVENT?

Direct mailing	[]	Email	[]
Royal Marsden Website	[]	Recommendation	[]
Other website	[]	Journal/Magazine	[]
Please state		Please state	
Other			

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APPLICANT'S DECLARATION:

Data Protection Act 1998: I agree to The Royal Marsden NHS Foundation Trust processing personal data contained on this form, or other data which may be obtained from me or other people or organisations whilst I am applying for this event. I agree to the processing of such data for any purpose connected with my attendance at The Royal Marsden NHS Foundation Trust events, or my health and safety whilst on Trust premises or for any other legitimate purpose. I agree to the terms and conditions above and confirm that payment for this event is enclosed/will be made in full before I attend.

Please tick if you do not agree to your email address being used to advise you of forthcoming events which may be of interest []

Signature: ___

Date:

Please return this form to the Conference Office, Education and Conference Centre, The Royal Marsden NHS Foundation Trust, Stewarts Grove, London, SW3 6JJ

Email conferencecentre@rmh.nhs.uk or fax 020 7808 2334. Please call 020 7808 2924 for further information.