

BATH & WILTS DOCTORS GROUP for CONTRACEPTION & SEXUAL MEDICINE

Affiliated to the Faculty of Sexual and Reproductive HealthCare
of the Royal College of Obstetricians and Gynaecologists

Sexual Health Issues in Young People SPRING SYMPOSIUM

Postgraduate Medical Centre Royal United Hospital Bath BA1 3NG
Saturday 3rd March 2018
8.15 am - 1.00 pm

- 08.15-08.55** **Coffee and registration**
- 08.55-09.10** **Introduction by Chairman** Dr Theresa Laverty
- 09:10-10.10.** **Adolescent Gynaecology: Menstrual problems of young women**
Mrs Qureshi Consultant Gynaecologist RUH Bath
- 10.10-10.50** **Public Health Issues and Outcomes for adolescents locally**
Ms Sarah Heathcote Head of Children's Services Public Health Wiltshire
- 10.50-11.20** **Coffee and Danish Pastries**
- 11.20-12.05** **Contraceptive options for women with eating disorders**
Dr Rachel Westwick Consultant in SRH Great Western Hospital Swindon
- 12.05-12.50** **Managing urological problems in young men and women**
Mr Tim Bates Consultant Urologist RUH Bath
- 12.50-13.00** **Final Questions and Close of Meeting**

This course is approved for your DFRSH reaccreditation 3.5 hours CPD
BGPRT accredited Certificates of attendance will be issued
Course Fee: £10 all doctors and nurses. Booking is required.

It is essential to cancel your place if you are unable to attend.

Please send completed application and cheques payable to Bath and Wilts Doctors Group to

Maureen Jacobs Education Centre RUH Combe Park Bath BA1 3NG

: 07817756260 Email bathandwiltsdocs@gmail.com

Please circulate to all doctors and nurses in your surgery Car parking charges apply at the RUH

This meeting has been supported by Pharmaceutical companies through the purchase of exhibition stand space



Please complete and return this slip and cheque by Thursday 1st March to: **Bath and Wilts Doctors Group**
c/o Maureen Jacobs Education Centre RUH Combe Park BATH BA1 3NG

I wish to attend the Spring Symposium on Saturday 3 March 2018

I enclose a cheque for £10 made payable to "Bath & Wilts Doctors Group"

TITLENAME.....

Doctor

Nurse

EMAIL.....

ADDRESS.....

Surgery