

MEN'S HEALTH DAY

Thursday 13th May 2010

Venue: Swindon Town Football Club, County Road, Swindon, SN1 2ED
PLEASE NOTE: Parking permits are available on arrival from the STFC Reception
www.swindontownfc.premiumtv.co.uk - for directions

Facilitator: Sarah Hands AM, Chris Barry PM
Open to GP's, GPSTR's, PN's

Registration 0900
Start/finish time 0930 - 1700

Relevant RCGP curriculum statement – 'Men's Health'

6 LEARNING CREDITS

Remember you also have the potential to double the number of learning credits by demonstrating at appraisal how your learning has changed your practice. The forms that we provide at the end of the course will help you to reflect on your learning

Objectives

1. To know how to manage urological problems including disorders of the prostate and testicular conditions, in primary care
2. To understand how best to manage male sexual dysfunction and mental health problems
3. To be aware of when to refer and how to make best use of secondary care

Speakers Rupert Beck Consultant Urology
Wendy Hurn, Urology Specialist Practitioner BRI

Programme

900 **REGISTRATION**

930 First session - Prostatic disease including BPH, prostatitis, prostate cancer

1100 **BREAK**

1115 Second session - Testicular conditions including cryptorchidism, varicocele hydrocele, epididymo-orchitis, testicular cancer

1245 **LUNCH**

1330 Third session - Sexual dysfunction including psychosexual conditions, premature ejaculation and erectile dysfunction

1500 **BREAK**

1515 Fourth session - Male Mental health including the andropause

1645 Evaluations

1700 **Close**

Course fee These seminars are **FREE** to Swindon & other Severn Education Trust members and all Swindon & Severn GPSTRs.

£175 Non GP Education Trust Member all day or £75 per session

£75 Practice Nurses all day or £25 per session

Please Note: Non attendees who do not cancel their place with at least 2 working days notice will be charged a **£25 cancellation fee**

APPLICATION

NEW WEBSITE: www.swindongpeducation.co.uk

To apply, please complete and return with your payment, if applicable, to the address below

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NAME	
ADDRESS	
TELEPHONE	
E:MAIL	<i>(Please note that confirmations will only be sent via e:mail)</i>

GP / GPSTR / PN / Other	<i>(Please specify)</i>
Swindon GPSTR <i>(Please specify STR1, 2 or 3)</i>	
Other Severn GPSTR <i>(Please specify STR1,2 or 3)</i>	<i>(Please specify area)</i>

Membership	I am a member of the following GP Education Trust <i>(Please tick)</i>									
	<table style="width: 100%;"> <tr> <td style="width: 30%;">Swindon</td> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 60%;"></td> </tr> <tr> <td>Bath</td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Other Severn <i>(Please specify)</i></td> <td><input type="checkbox"/></td> <td></td> </tr> </table>	Swindon	<input type="checkbox"/>		Bath	<input type="checkbox"/>		Other Severn <i>(Please specify)</i>	<input type="checkbox"/>	
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Payment	I enclose a cheque for course fee / course fee and parking <i>(Please delete)</i>
	<i>(Please make cheque payable to Swindon GP Education Trust)</i>

Michala Boyd
GP Administrator
 Office of General Practice Education
 The Academy
 Great Western Hospital
 Marlborough Road, Swindon, SN3 6BB
 Tel: 01793 605924 E:mail: Michala.boyd@gwh.nhs.uk