A TWO-DAY COURSE IN LONDON: THURSDAY 29TH & FRIDAY 30TH NOVEMBER 2018

About the course
This course is intended for all those involved in ultrasound scanning of the fetal heart and is suitable for sonographers, obstetricians, radiologists and cardiologists. The content will be delivered by the experienced fetal cardiology Faculty from the Evelina London Children's Hospital and Kings College Hospital London.

Faculty:
Professor John Simpson
Professor Gurleen Sharland
Dr Vita Zidere
Dr Owen Miller
Dr Trisha Vigneswaran
Dr Marietta Charakida

Thursday 29th & Friday 30th November 2018
ETC Venues, County Hall

Areas to be covered over two days include:
1. Normal appearances of the fetal heart including Doppler techniques
2. Major groups of cardiac abnormalities including:
   HLHS
   Tetralogy of Fallot
   Transposition of the great arteries
   Abnormalities of the aortic arch
   Vascular rings
3. Assessment of fetal cardiac function
4. Fetal arrhythmias
5. First trimester fetal echocardiography
6. Counselling following prenatal diagnosis of congenital heart disease
7. Obstetric management of the fetus with CHD

All delegates will receive electronic course content
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To be held at
ETC Venues County Hall, Riverside Building, Belvedere Road, Westminster, LONDON, SE1 7PB

Commencing with Registration at 8.45am

ETC Venues Convention Centre is conveniently located on the south side of the River Thames in London’s County Hall, and within easy access of Waterloo rail and underground station. Nearest accommodation is Premier Inn Belvedere Road

Cost: £300.00 inc VAT, lunch and tea/coffee

CPD credits applied for

REGISTRATION, ENQUIRIES AND BOOKING
Cheques to be made payable to Canon Medical Systems.
Evelina London Children’s Hospital
Advanced Course in Fetal Cardiology
Thursday 29th & Friday 30th November 2018

Advanced 2 Day Course In Fetal Cardiology
Thursday 29th & Friday 30th November 2018
Please complete in BLOCK CAPITALS
Prof/Dr/Mr/Mrs/Miss: ............................................................................................................................................................................................................
First name ....................................................................................................................................................................................................................................
Surname ......................................................................................................................................................................................................................................
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Dietary Requirement ...........................................................................................................................................................................................................

REGISTRATION, ENQUIRIES AND BOOKING
If you would like to reserve a place on this course, please contact:
Wendy Wetherfield
Canon Medical Systems
Boundary Court
Gatwick Road
Crawley
West Sussex
RH10 9AX
Tel: +44 (0)1293 653707
Email: wendy.wetherfield@eu.medical.canon
Cheques to be made payable to Canon Medical Systems.