

HANDS-ON TRAINING SESSION REGISTRATION FORM

only T&T congress participants admitted

Name _____

Surname _____

Country _____

Specialist

Resident

Please confirm your preference:

September 20th

12:00 - 13:00

- TURP - HoLEP - ThuLEP - UroLift - GreenLight *basic training*
- Endoscopic stone treatment *basic training*

September 21st

11:00 - 12:00

- TURP - HoLEP - ThuLEP - UroLift - GreenLight *basic training*
- Endoscopic stone treatment *basic training*

12:00 - 13:00

- TURP - HoLEP - ThuLEP - UroLift - GreenLight *basic training*
- Endoscopic stone treatment *basic training*

September 22nd

11:00 - 12:00

- X **TURP - HoLEP - ThuLEP - UroLift - GreenLight *basic training* FULL**
- Endoscopic stone treatment *basic training*

12:00 - 13:00

- TURP - HoLEP - ThuLEP - UroLift - GreenLight *basic training*
- Endoscopic stone treatment *basic training*