19th Annual Paul C. Peters Urology Symposium

Friday-Sunday
February 1-3, 2013

Westin Galleria
13340 Dallas Parkway
Dallas, TX 75240

Sponsored by UT Southwestern Department of Urology and the Office of Continuing Medical Education

Register on-line at www.utsouthwestern.edu/paulcpetersurologysymposium
Enrollment is confirmed upon receipt of registration fee. We are unable to process instances make this necessary.

Educational Objectives

- Discuss management of non-muscle invasive bladder cancer
- Discuss management of locally advanced bladder cancer
- Review applications of NBR to management of urologic cancers
- Discuss management of post-prostatectomy sexual dysfunction
- Identify medical issues pertinent to urologic care of a geriatric patient
- Discuss medical and surgical approaches to management of vaginal mesh and sling complications
- Explain minimally invasive approaches in management of kidney cancer
- Recognize organ sparing options for pelvic cancer

Accreditation

The University of Texas Southwestern Medical Center is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

Credit Designation

The University of Texas Southwestern Medical Center designates this live activity for a maximum of 16 AAMA PRA Category 1 Credits™ and 1 hour of medical ethics. Physicians should only claim credit commensurate with the extent of their participation in the activity.

The Southwestern University is an approved provider of continuing medical education by the Texas Nurses Association, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation.

This activity provides 19 hours of credit.

Conflict of Interest

If it is UTSouthwestern’s policy that participants in CME activities should be made aware of any affiliation of any financial interest that may affect the speaker’s presentation(s). Each speaker has completed and signed a conflict of interest statement. The faculty members’ relationships will be disclosed in the course syllabus.

Discussion of Off-Label Use

Because this course is intended to educate physicians with what is currently in use and what may be available in the future, there may be “off-label” use discussed in the presentations. Speakers have been requested to inform the audience when off-label use is being discussed.

Registration

The registration fee entitles the participant to admission to the course, all course materials, continental breakfast, lunch and refreshments during the meeting.

Enrollment is confirmed upon receipt of registration fee. We are unable to process any registration without payment. Please register early.

Refund Policy

A $30 handling fee will be deducted from cancellation refunds. Refund requests must be received by mail or fax prior to January 15, 2013. No refunds will be made thereafter.

Cancellation Policy

The Office of Continuing Medical Education reserves the right to limit registration and cancel courses, no less than one week prior to the course, should circumstances make this necessary.

#CMEAlert

We accommodate people with disabilities. Please call 214-648-3138 for more information, or mark the space indicated on the registration form. To ensure accommodation, please register as soon as possible.

The University of Texas Southwestern Medical Center is an equal opportunity institution.

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2013 Paul C. Peters Urology Symposium

Planned Educational Objectives

Upon completion of this symposium, the participants should be able to describe and discuss:
- Discuss management of non-muscle invasive bladder cancer
- Discuss management of locally advanced bladder cancer
- Review applications of MRI to management of urologic cancers
- Discuss management of post-prostatectomy sexual dysfunction
- Identify medical issues pertinent to urologic care of a geriatric patient
- Recognize organ sparing options in management of kidney cancer
- Recognize organ sparing options for penile cancer

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Registration

The University of Texas Southwestern Medical Center acknowledges that all symposium activities are supported by an unrestricted educational grant from B.Braun and Ethicon. The symposium is not open to the public.

Program Accessibility

For additional information, please call The Office of Continuing Medical Education at 1-888-627-8536 on an individual basis, identifying themselves as members of "UTSW Concierge Service." Additionally, if a participant has a disability, please call us as soon as possible.

Contact Information

For additional information, please call The Office of Continuing Medical Education at 1-888-627-8536 on an individual basis, identifying themselves as members of "UTSW Concierge Service."
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REGISTRATION FORM February 1-3, 2013

Register on-line at utsouthwestern.edu/paulcpersetersurology symposium

Name ____________________________
Address ____________________________
City ____________________________ State ____________ Zip Code _______

Last Four Digits of SS# ____________ UT Southwestern Alumni
Business Phone ____________________________ Fax __________________
Degree ____________________________ Specialty __________________

Email Address: ____________________________

Please indicate preferred method to receive registration confirmation:

Email ❑ Fax ❑ Mail

❑ Check here to receive our free monthly email calendar of upcoming CME activities.

Registration Fees:

❑ $445 (Physicians)
❑ $375 (UT Southwestern Alumni)
❑ $225 (Nurse)
❑ $300 (Baylor Physicians)
❑ Complimentary (UTSW Urology Faculty & UTSW Nurse)

Friday Night Dinner at the Perot Museum of Nature and Science

❑ I will be attending – $35
❑ I will be attending with a guest – $35 per attendee
❑ I will not be attending

Method of Payment:

❑ MASTERCARD ❑ VISA Security Code

Card # ____________________________ Exp. Date ____________ Signature of Cardholder ____________

Print Cardholder’s Name ____________________________

Billing Address of Cardholder: ____________________________ City ____________________________ State ____________ Zip Code _______

❑ AMERICAN EXPRESS Security Code

Card # ____________________________ Exp. Date ____________ Signature of Cardholder ____________

Print Cardholder’s Name ____________________________

Billing Address of Cardholder: ____________________________ City ____________________________ State ____________ Zip Code _______

❑ CHECK

If paying by check make checks payable to: UT Southwestern/CME

Fax completed registration form to 214/648-4804.
Mail completed registration form to: UT Southwestern Office of Continuing Medical Education 5323 Harry Hines Blvd.,/Dallas, Texas 75390-9059

Dietary Restrictions: ____________________________

Refund Policy

A $25 handling fee will be deducted from cancellation refunds. Refund requests must be received by mail or FAX prior to January 30, 2013. No refunds will be made thereafter.

ADA Statement

❑ Please check this box if you require assistance because of a disability to make this program accessible to you. Someone from our office will be in touch with you.