

CALIFORNIA TUMOR TISSUE REGISTRY 145th Semi-Annual Cancer Seminar



"Genitourinary Pathology: Practical Approaches to Differential Diagnosis"



Cristina Magi-Galluzzi, M.D. Cleveland Clinic, Cleveland, OH **Sunday, December 2, 2018** 8:30 a.m. – 4:45 p.m.

> Hyatt Regency Hotel at Embarcadero Center

5 Embarcadero Center San Francisco, California, 94111 *Phone: (415) 788-1234*



Christopher Przybycin, M.D. Cleveland Clinic, Cleveland, OH

Online: https://book.passkey.com/go/2018CSP Cut-Off Date: Once room block has been filled or by November 5, 2018

Seminar Objectives: At the conclusion of this seminar, attendees will be able to:

- 1. How to reliably differentiate testicular germ cell tumors from mimics
- 2. Gain familiarity with common and uncommon diagnostic pitfalls in bladder pathology
- 3. Recognize renal tumors with a hereditary basis and their unique clinical and familial implications
- 4. Discuss histologic features and differential diagnosis of common challenging prostate lesions

CME/SAMs applies only on the day of the seminar. Full Package can earn up to 10 hrs of CME and/or SAMs credit, Attendance only can earn up to 6 hrs CME and/or SAMs credit. This activity is approved for a maximum of 10 SAM credits.

Accreditation Statement: This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Loma Linda University School of Medicine and California Tumor Tissue Registry. The Loma Linda University School of Medicine designates this Live Activity and Enduring Materials for a maximum of 10 *AMA PRA Category 1 Credit(s)*TM. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

California Tumor Tissue Registry Sunday, December 2, 2018

REGISTRATION FORM

Materials: ("Attendance Only" includes items 1 and 2)

- 1. 6 hour lecture (Seminar objectives, clinical histories, discuss the role of special studies in diagnosis, therapy,
 - and counseling, project photographs of study cases and other illustrative materials)

Some case images maybe on a CD, I prefer a USB instead, add \$5.00 for USB -

ATTENDANCE ONLY- Up to 6 CME/SAMs credit.....

- 2. Comprehensive syllabus that includes diagnoses, discussion, and appropriate references from pertinent medical literature
- 3. Glass slides of representative tumors

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DISCLOSURE STATEMENT: This program has been planned and implemented in accordance with ACCME essentials and standards. The Loma Linda University School of Medicine Office of Continuing Medical Education relies on its CME faculty to provide program content that is free of commercial bias. Therefore, in accordance with ACCME standards, any faculty and/or provider industry relationships will be disclosed and resolved.

ATTENDEE INFORMATION Phone: Name: Email: Facility: Mailing Address: EARLY BIRD REGISTER **REGISTRATION FEE** REGISTRATION **AFTER 11/1/18** (Register by 11/1/18) *Includes continental breakfast and drinks during breaks. FULL PACKAGE- Up to 10 CME/ SAMs credit \$350 \$400 Includes: Glass slides and/or digital slides, Attendance and Syllabus **Must attend the seminar and send in the answers before 12/2/18 for full CME/SAMs credit Some case images maybe on a CD, I prefer a USB instead, add \$5.00 for USB -□ Yes add \$5.00 □ Yes add \$5.00 \$300 FULL PACKAGE- No CME/ SAMs credit \$350 Includes: Glass slides and/or digital slides, Attendance and Syllabus Some case images maybe on a CD, I prefer a USB instead, add \$5.00 for USB -□ Yes add \$5.00 □ Yes add \$5.00 \$225 \$300 **RESIDENT PACKAGE- No CME/ SAMs credit** Includes: Glass slides and/or digital slides, Attendance and Syllabus

ATTENDANCE ONLY- No CME/SAMs credit Includes – Attendance, Syllabus			\$225	\$250
RESIDENT ATTENDANCE ONLY- No CME/SAMs credit <u>Includes</u> – Attendance, Syllabus			\$175	\$175
Payment Information – Make Checks Payable to California Tumor Tissue Registry				
Check enclosed	Credit Card	Master Card	🗌 Visa	
Credit Card #		Exp. Date:		
Zip code of billing address:	_ Total Amount:	For orders outs	ide the United States of America,	please add \$40.00
Name on Card:				
Signature:				
Cancellations subject to a 15% overhead charge.	MAIL TO: Loma Linda Uni California Tumor ' 11021 Campus Av	Tissue Registry	ical Group Or FAX TO: (909) 5	558-0188

Loma Linda, CA 92350

□ Yes add \$5.00

\$275

□ Yes add \$5.00

\$300

Includes - Attendance, Syllabus