



## BAUS SECTION OF ENDOUROLOGY RESIDENTIAL SURGICAL COURSE

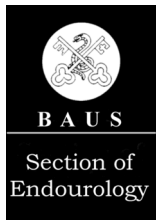
The BAUS Section of Endourology will be running the 15th Residential Operative Endourology Course at University Hospital, Southampton, from Monday 6 – Tuesday 7 November 2023.

The Course will feature mentored training with the delegates as primary surgeon and Consultant assistance. All delegates will be expected to carry out procedures such as Flexible Ureteroscopy, PCNL and lower urinary tract surgery such as HoLEP, TURP, Rezum or Urolift. The distribution of cases will be done by the course coordinator. Places on this course are strictly limited to 4.

The course fee is £700, and this covers two days of operative experience training and accommodation. All successful applicants will receive full details, including the location of the venue and information on the hotel accommodation. To apply for a place on this course, please complete and return the form on page 2, CV summary of logbook, a letter of support from your trainer. The closing date for applications is 12 noon, **Monday, 7 August 2023** although you are encouraged to submit your application at the earliest opportunity. All applications will be reviewed by the Organising Committee and applicants will be notified if they have a place on the course by 18 August. If offered a place on the course you will be asked to make payment to secure your place.

The Section of Endourology will be able to award 4 travelling scholarships to the 4 successful applicants on the operative residential course. The travelling scholarship must be taken up by the end of 2024.

**Please complete and return the completed application form, together with enclosures,  
by e-mail to [endourology@baus.org.uk](mailto:endourology@baus.org.uk)**



**BAUS SECTION OF ENDOUROLOGY  
RESIDENTIAL SURGICAL COURSE**

**REGISTRATION FORM**

**I would like to attend the Course at the University Hospital, Southampton from 6-7 November 2023**

TITLE                      **Professor**                      **Dr**                      **Mr**                      **Mrs**                      **Miss**                      **Ms**

SURNAME

FORENAME

ROTATION

BAUS MEMBER? Yes

No

NTN

HOSPITAL

ADDRESS FOR CORRESPONDENCE

POST CODE

TELEPHONE

E-MAIL

FRCS Urol - date awarded

**PLEASE ENCLOSE:**

- CURRICULUM VITAE
- SUMMARY LOG BOOK
- LETTER OF SUPPORT FROM PROGRAMME DIRECTOR AND PRESENT TRAINER

**Signature:**

**Date**

**No refunds will be made on cancellations less than 6 weeks before the course date**

***Please return completed form to [endourology@baus.org.uk](mailto:endourology@baus.org.uk)***