An Introduction to Nutrition and Cancer in Practice (December)

Thursday 07 December 2017

**Venue:** The Education and Conference Centre, Stewart’s Grove, SW3 6JJ.

**Aim:** The study day is aimed at dietitians, nurses and other health care professionals who are relatively new to the field of oncology or work in oncology as part of a mixed caseload. The day aims to consider the theory and practical nutritional management of patients with cancer. Teaching will place an emphasis on case study presentations to illustrate the principals involved and provide interactive learning opportunities throughout the day.

**Cost:** £100 ‘Early Bird Rate’ until 01 September  £120 per delegate thereafter.

### Programme

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<tr>
<th>Time</th>
<th>Session</th>
<th>Speakers</th>
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<tr>
<td>08.45</td>
<td>Registration</td>
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<tr>
<td>09.30</td>
<td><strong>Introduction and housekeeping</strong></td>
<td>Lucy Eldridge, Dietetic Team Leader, The Royal Marsden NHS Foundation Trust</td>
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<td>09.40</td>
<td><strong>ESPEN guidelines</strong></td>
<td>Lucy Eldridge, Dietetic Team Leader, The Royal Marsden NHS Foundation Trust</td>
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<td>10.00</td>
<td><strong>Cancer cachexia – What is it?</strong></td>
<td>Dr. Clare Shaw, Consultant Dietitian, The Royal Marsden NHS Foundation Trust</td>
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<td>10.20</td>
<td><strong>Nutrition screening and assessment</strong></td>
<td>Penny McTaggart, Specialist Dietitian and Vanessa Franklin, Senior Specialist Dietitian</td>
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<td>The Royal Marsden NHS Foundation Trust</td>
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<td>10.40</td>
<td><strong>Overview of nutritional requirements</strong></td>
<td>Carol Lane, Senior Specialist Dietitian</td>
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<td>The Royal Marsden NHS Foundation Trust</td>
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<td>11.10</td>
<td><strong>Tea and coffee</strong></td>
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<td>11.40</td>
<td><strong>Managing symptoms and side effects</strong></td>
<td>Sue Vyoral, Specialist Dietitian, Jowita Nesterowicz, Dietetic Support Worker and Jen Newman, Senior Specialist Dietitian</td>
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<td>12.40</td>
<td><strong>Industry demonstration</strong></td>
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<td>13.00</td>
<td><strong>Lunch and exhibition</strong></td>
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<td>14.00</td>
<td><strong>Diet and cancer myths</strong></td>
<td>Louise Henry, Senior Specialist Paediatric Dietitian,</td>
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<td>The Royal Marsden NHS Foundation Trust</td>
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<td>14.30</td>
<td><strong>Artificial nutritional support</strong></td>
<td>Natalie Harris, Senior Specialist Dietitian, Victoria Aubrey Specialist Dietitian</td>
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<td>15.15</td>
<td><strong>Tea and coffee</strong></td>
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<td>15.30</td>
<td><strong>Nutritional support in palliative care</strong></td>
<td>Jennifer McCracken, Specialist Dietitian</td>
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<td>16.00</td>
<td><strong>The patient’s experience</strong></td>
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<td>16.30</td>
<td><strong>Questions and close of day</strong></td>
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[www.royalmarsden.nhs.uk/nutritiondec](http://www.royalmarsden.nhs.uk/nutritiondec)
Advances in Nutritional Care

Event ID: 634 Date: 07/12/2017

ONLINE BOOKING NOW AVAILABLE

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ALTERNATIVELY FILL OUT YOUR DETAILS BELOW

Please complete details CLEARLY in BLOCK CAPITALS as this information is used to prepare event materials.

PERSONAL

Prof/Dr/Mr/Ms/Mrs/Miss: Surname: _____________________
First Name: _______________________________ Male/Female
Job Title: _________________________________________
Company: _______________________________________
Email: _________________________________________
Full Postal Address: (Please specify whether home [__] or work[__])
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
Postcode: ____________________________

Day Tel: _________________________________________

BOOKING CONDITIONS

In order to be registered for the event, full payment of the registration fee must be made with your application, unless an organisation is paying on your behalf. All bookings will be confirmed by email, unless otherwise requested. Please contact us if you have not received confirmation within 5-7 days of submitting your booking.

A 50% fee will be charged for cancellations made within 4-6 weeks of the event. For cancellations made within one month of the event, full payment will be due irrespective of whether the delegate attends the event or not.

PAYMENT BY CREDIT CARD OR CHEQUE

I enclose the sum of £100.00 by cheque made payable to: ‘The Royal Marsden NHS Foundation Trust” or by credit / debit card (Visa / Mastercard / Switch only)

Credit Card / Switch Card No:
[____] [____] [____] [____] [____] [____] [____] [____] [____] [____] [____] [____] [____] [____] [____] [____]

Expires: [____] [____] [____] Valid: [____] [____] [____]

Issue no.: [____] [____]

Security No. (Last 3 digits on back of card) [____] [____] [____]

Name of Cardholder: ________________________________________________________________

Cardholder’s Signature: ____________________________________________________________

PAYMENT BY INVOICE

If your employer has agreed to pay your fees and an invoice needs to be sent, it is essential that you give full details below of the contact name, department and full postal address. If any information is missing, your application will not be processed.

If your application form needs to be approved by your finance/personnel department, please ensure that it is processed and forwarded to us quickly. It is your own responsibility to ensure that your application is approved by your employer and forwarded to this office. We regret that we cannot do this for you.

Purchase Order Number (MANDATORY)

Contact name of whom the invoice should be addressed to:

Department: _______________________________________

Organisation: _______________________________________

Direct dial tel no: ___________________________________

Fax No: _________________________________________

Email: __________________________________________

Postal Address:
____________________________________________________________________________________

GENERAL

Special dietary/other requirements:
____________________________________________________________________________________

HOW DID YOU HEAR ABOUT THE EVENT?

Direct mailing [ ] Email [ ]

Royal Marsden Website [ ] Recommendation [ ]

Other website [ ] Journal/Magazine [ ]

Please state________ Please state________

Other________________________________________

APPLICANT’S DECLARATION:

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I agree to the terms and conditions above and confirm that payment for this event is enclosed/will be made in full before I attend.

Please tick if you do not agree to your email address being used to advise you of forthcoming events which may be of interest [ ]

Signature: _______________________________________

Date: ____________________________

Please return this form to the Conference Office, Education and Conference Centre, The Royal Marsden NHS Foundation Trust, Stewarts Grove, London, SW3 6JJ

Email conferencecentre@rmh.nhs.uk or fax 020 7808 2334.

Please call 020 7808 2924 for further information.