

# Practical Musculoskeletal GP Masterclass

**Tuesday 3<sup>rd</sup> March 2020**

**Location: The Hilton Hotel, Elton Way, Watford, WD25 8HA**

**Chairman - Dr Ian Gold**

## Agenda

<b>Time</b>	<b>Topic</b>	<b>Speaker</b>
8.45	Coffee and Registration	
9.00	Welcome and Introduction	Dr Ian Gold
9.10	Muscle disease Including 10 mins Q & A	Dr Sundeept Bhalara
9.50	Chronic resistant pain Including 10 mins Q & A	Dr Attam Singh
<b>10.30</b>	<b>Coffee</b>	
10.50	Common hand & wrist problems Including 10 mins Q & A	Mr Simon Wimsey
11.30	Assessing the painful shoulder Including 10 mins Q & A	Mr Addie Majed & Nichola Danslow Spire Bushey Physio Manager
<b>12.30</b>	<b>Lunch followed by tea/coffee</b>	
13.30	The painful knee Including 10 mins Q & A	Mr Simon Jennings
14.10	Case studies of Back Pain Including 10 mins Q & A	Mr Michael Mokawem
14.50	Assessment & management of hip pain Including 10 mins Q & A	Mr Subhajit Ghosh
15.30	Foot & Ankle problems – Top tips for GPs Including 10 mins Q & A	Mr Pinak Ray
<b>16.10</b>	<b>Closing</b>	



This meeting will be sponsored by Pharmaceutical Reps sponsoring stand space only.  
Please take the time to speak to the reps at the event.



Spire

Bushey Hospital

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**PLEASE NOTE:** We can only take reservations with a booking form and deposit cheque. If you do not book in advance and turn up on the day we may not be able to accommodate you due to the high volume of attendees and limited space.

**A certificate of attendance will be issued by e mail after the event.**

Name ..... GMC No.....

Surgery Address .....

(In full please)

.....

Postcode ..... Telephone No .....

Email address .....

**(please write clearly as confirmation & certificate of attendance will be sent by e mail only)**

This meeting is free of charge but subject to a **£50.00 'refundable on the day'** deposit.

Please make the cheque payable to **Spire Bushey Hospital**.

**No bookings will be accepted without a deposit cheque.**

A) Please reserve a place for me for the **whole day** [ ]

B) Please reserve a place for me for the **morning only** [ ]

C) Please reserve a place for me for the **afternoon only** [ ]

\*Please circle as appropriate: I am a **VEGAN\*** I am a **VEGETARIAN\***

Please confirm if you have any allergies .....

Please print off this form and return to me with your cheque to the following address:

**Tina Moss, Events Executive, Marketing Department  
Spire Bushey Hospital, Heathbourne Road, Bushey, Herts. WD23 1RD**

A confirmation e mail will be e mailed to you once I receive your form and cheque  
– Thank you.