





HANDS-ON TRAINING COURSE

5Edition

- 🛗 February, 21 22, 2025
- Golden Tulip Ana Dome, Observatorului St.129, 400352, Cluj-Napoca





# **Table of contents**

WELCOME WORD	4
INVITED EXPERTS	5
VENUE	6
SCIENTIFIC PROGRAM	7
GENERAL INFORMATION	15
RECOMMENDATIONS FOR SPEAKERS	17
NOTES	19













#### HANDS-ON TRAINING COURSE

# February, 21 - 22, 2025

Golden Tulip Ana Dome, Observatorului St.129, 400352, Cluj-Napoca

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### Take a step forward!

Are you just starting in your GI endoscopy career or wanting to learn a new skill and navigate a new opportunity?

The 5th edition of our training course **Core Competency in GI Endoscopy** is designed to introduce you to **basic and advanced endoscopy skills** and to continue from last year's edition the development of network skills.

Our trainers are part of a global network of lifelong learners, care about trainees' learning, are motivated to take risks, and actively reflect on how to best facilitate that learning.

#### Core Endoscopy Skills sessions within this course include:

- Basic and Advanced Colonoscopy;
- Basic and Complicated Polypectomy/EMR Deconstruct the approach to en-bloc and piecemeal cold and hot snare polypectomy;
- ESD:
- Full-thickness resection (FTDR):
- Repair of Mucosal Defects: Endoscopic Closure of Gastrointestinal Perforations;
- Hemostasis
- Percutaneous endoscopic gastrostomy (PEG);
- EUS FNA/FNB: basic tehnique of EUS FNA/FNB;
- EUS Collections Drainage using LAMS.

#### What you will learn:

- You will improve your basic and advanced navigation skills during hands-on colonoscopy;
- You will learn through hands-on sessions with multiple levels of feedback advanced techniques such as polypectomy, lifting, injection, clipping, biopsy, hemostasis, diagnostic and therapeutic EUS, etc.;
- You will receive theoretical information about the different endoscopic materials and coagulation principles;
- You will build practical skills that are in demand to become an endoscopy savvy and a clinical problem solver;
- You will refine your practice by becoming an emotionally intelligent communicator and a resilient endoscopist able to adapt to any situation.

Learning in communities strengthens the learning (Innovative Learning and Teaching: Experiments Across the Disciplines, Ilene D. Alexander and Robert K. Poch, 2017). Also, learning how to be in a relationship with one another is critically important for developing an appropriate response to health-related challenges. And how important relationships and communities are to effective higher education. Our course will continue the development of **Network Skills** with a module regarding communication toward more inclusive, just, and joyful learning and health-providing spaces.

Also, very important is to develop the skills for choosing and optimizing further medical therapy according to the endoscopic diagnosis in both organic and functional digestive diseases.

Join us on this learning journey to develop new ways of thinking, expand your skill set, and boost your confidence!



Dr. Ofelia Moșteanu Co-Director



Dr. Teodora Atena Pop Co-Director















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### **Invited Experts**



Bogdan Busuioc



Cătălina Bordianu Calangiu



Mostafa Ibrahim



Laura Lucaciu



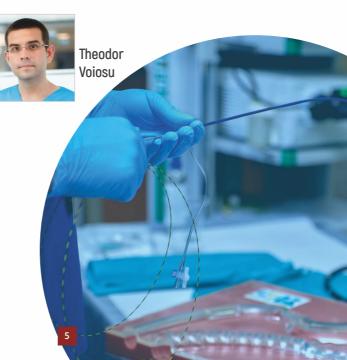
Camelia Lung



Ioan-Cristian Nedelcu



Claudia-Irina Pușcașu

















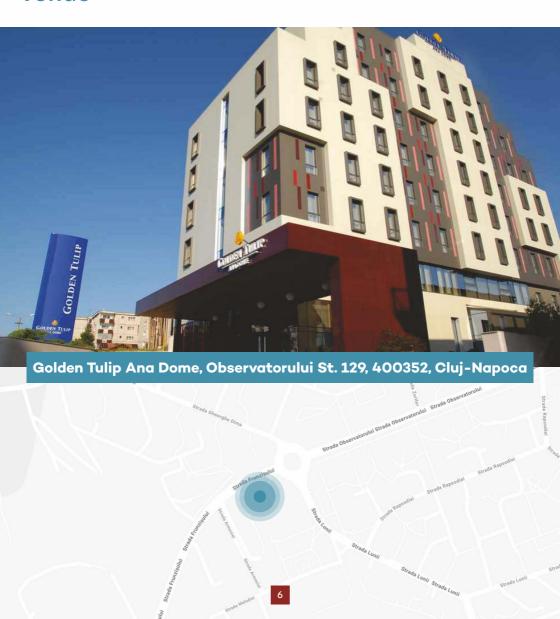
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### Venue















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### Scientific Program

February 21, 2025

12:00 - 13:00 Welcome Coffee and Registration

#### Hands-on Station 1 Colonoscopy Learning objectives for Beginners

- Technical knowledge of a Colonoscope incl. different sizes
- Correct handling of an endoscope
- · Correct placement of the patient
- · Correct placement of the Endoscopist
- · Correct placement of the tower and video monitor
- Check the Instruments before starting Endoscopy
- Perform a Colonoscopy on a model
- Use of set language in endoscopy# advance, withdraw, clockface, etc...
- · Correctively describe findings in the final endoscopy report

#### **Learning objectives for Advanced Trainees**

- Recognition of loops and review of types of loops encountered
- Use of scope guide to identify and resolve loops
- Techniques to avoid looping
- · Techniques for delooping
- 13:00 15:00
- Terminal ileum intubation techniques
- Perform a Colonoscopy on a model
- Use of set language in endoscopy advance, withdraw, clockface,

#### Station 2 EUS – FNA /FNB Learning objectives

- Scope navigation and basic endoscopic skills
- Equipment setup
- · Devices and techniques

#### Station 3: Polypectomy/EMR Learning objectives:

- Techniques with respect to polyp size
- Positioning of the polyp
- · Use of cold and hot biopsy forceps and cold snare
- Electro cautery and snare designs
- Use of pre-snare injections and endoloops
- Lifting techniques and non-lifting sign
- Use of polypectomy snares













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### Scientific Program

#### February 21, 2025

- Know the different techniques of polypectomy (Snare hot &cold, Piecemeal polypectomy, Endoscopic mucosal resection, Underwater endoscopic mucosal resection)
- Marking the snare for polypectomy
- Knowing different techniques and instruments for collecting removed polyps
- Knowing the electrosurgical unit and the correct power settings and current application for polypectomy
- Knowing how to face complications (i.e. perforation, bleeding)
- Practice polypectomies on pig models

### Station 4: Hemostasis: OESOPHAGEAL VARICES BANDING

#### Learning objectives:

- Know the indications and limitations of endoscopic oesophageal varices banding
- Preparation for banding patient and equipment
- · Practice variceal banding on pig models

#### 13:00 – 15:00 CONTROL GASTRIC/ DUODENAL BLEEDING

#### Learning objectives:

- Know methods and techniques for controlling bleeding gastric varices (Sclerotherapy, Hemospray, Glue injection)
- Know the indications and limitations of endoscopic therapy for gastric varices
- Know how to prepare and inject the N butyl -2 cyanoacrylate in the gastric varices
- Practice glue therapy, variceal banding on pig model
- Non variceal bleeding: Injection therapy, Mechanical hemostasis (clipping, ligation, endo-loops), Thermocoagulation
- Through the scope-clips
- Over the scope clips

#### Station 5: Gastrostomy tube placement

- Learning objectives:
- Know indications and contraindications for gastrostomy and endoscopic jejunal tube placement
- Know the possible complications and how to treat them













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## Scientific Program

#### February 21, 2025

- Discuss advantage/ disadvantage of the different techniques
- Practice on a model: direct Gastrojejunostomy tube placement

#### Station 6: Closure of perforation

#### 13:00 - 15:00

#### Learning objectives:

- Approach and early recognition of perforations
- Devices and techniques
- Through the scope-clips
- Over the scope clips

#### 15:00 - 15:30

#### Coffee break

#### Network level: Workshop Communicating for Impact - Cătălina Bordianu Calanaiu si Camelia Luna

Effective communication is key to keeping care teams properly informed and ensuring patients receive the highest standard of care.

The management of employment relation in healthcare is of tremendous importance from both the patient point of view primarily, and the medical staff.

#### 15:30 - 17:30

#### We are trying to answer and analyze:

- ·Understanding why employees (professionals healthcare) are leaving.
- ·Workplace Safety Concerns: safety protocols are good, but employees (professionals healthcare) need to feel confident that they can report issues and that the organization will act.
- Healthcare professionals are overburdened mainly because of not an equitable distribution of tasks.
- Conflict management.

17:30 - 18:00	Coffee break	
18:00 - 18:15	Intestinal microbiota modulation for colorectal patient in interver operative context  Theodor Voiosu  Organised with the support of Innergy	** INNERGY Inner balance for a quality life
18:15 - 18:30	Approach to MAFLD - Metabolic Associated Fatty Liver Disease <b>Bogdan Busuioc</b> Organised with the support of Sanofi	sanofi













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# February, 21 - 22, 2025

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## Scientific Program

February 21, 2025

#### Lecture session

Chairs: Laura Lucaciu, Ioan - Cristian Nedelcu, Claudia - Irina Pușcașu, Ofelia Moșteanu

Lectures:

18:30 - 19:30

- How to perform the perfect colonoscopy Equipment, managing loops
   Teodora Atena Pop
- Full-thickness resection: troubleshooting, tips, and tricks for success Bogdan Busuioc
- Electrosurgery in Gastrointestinal Endoscopy: Bench to Bedside Theodor Voiosu

Discussion and wrap-up of the theoretical session

19:30-19:40

Gas for healthcare

Organised with the support of Atmosferica

ATMOS==RKA°

20.00-22.00

**Welcome Cocktail** 

#### February 22, 2025

Hands-on

Station 1: Colonoscopy

Station 2: EUS - Basic and Advanced Cyst Drainage

#### Learning objectives

- To identify the safest and most expeditious route for drainage of collections in various anatomic locations throughout the chest, abdomen and pelvis.
- To describe the indications and contra-indications of image-guided drainage of fluid collections.

09:00 - 11:00

- To assess appropriate laboratory investigations and clinical findings that indicate infection of a collection.
- · Techniques, equipment and materials that are used
- To recognize and appropriately manage procedural complications.
- To understand when drainage devices can be removed

Station 3: Polypectomy/EMR

Station 4: Hemostasis

Station 5: PEG

Station 6: Closure of perforation

11:00 -11:30 Coffee break













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## Scientific Program

February 22, 2025

	, ,	
11:30 -13:00	Core skills level: Workshop Nutrition and Inflammatory bowel d Chairs: Bogdan Busuioc, Laura Lucaciu, Ioan - Cristian Nedelcu Pușcașu Bowel disorders: nutrition perspective Ofelia Moșteanu	
11:50 - 12:05	Magnesium - A Potential Key Player in Inflammatory Bowel Disc Organised with the support of Zentiva Percutaneous endoscopic gastrostomy (PEG): a practical guide te endoscopist Teodora Atena Pop An Update on Inflammatory Bowel Disease Laura Lucaciu	
12:45 – 13:00	Therapeutic Strategies in Crohn's Disease: A Paradigm Shift?  Ofelia Moșteanu  Organised with the support of Sandoz	SANDOZ
13:00-14:00	Lunch	
14:00 - 15:30	Lecture session Chairs: Bogdan Busuioc, Mostafa Ibrahim, Ioan - Cristian Nedel Atena Pop  The new technology -NBI, BLI, LCI, high definition Claudia - Irina Puşcaşu EMR and ESD: Basics Laura Lucaciu EUS-FNA/FNB: Following the guidelines or not Mostafa Ibrahim CE-EUS in the solid and cystic tumor of pancreas Ofelia Moșteanu  Discussion and wrap-up of the theoretical session	lcu, Teodora
	The neurobiology of irritable bowel syndrome	
15:30 - 15:45	Teodora Atena Pop (Sanofi) Organised with the support of Sanofi	sanofi
15:45 - 16:15	Coffee break	













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## **Scientific Program**

February 22, 2025

Hands-on

Station 1: Colonoscopy Station 2: EUS - FNA/FNB

Station 3: ESD

#### Learning objectives:

- Specific knowledge of the instrumentation, technique, and electrosurgical equipment
- Correctly estimate the probability of performing a curative resection based on the characteristics of the lesion
- Benefit/risk relationship of ESD when compared with other therapeutic alternatives
- Management of early and delayed complications

Station 4: Hemostasis

Station 5: PEG

Station 6: Endoscopic Full Thickness Resection - eFTR

#### Learning objectives:

- Clinical considerations in patient selection
- · Indications and contraindications
- Post procedure care
- FTRD Device and techniques
- · Practice with porcine models

18:15 - 19:00

16:15 - 18:15

**Meet the expert:** Interactive discussion with the trainers. The session will serve to coach the training, featuring hands-on practice and interactive discussion.



Inhibitorul JAK cu administrare orală 0 DATĂ PE ZI, indicat pentru tratamentul CU și BC moderate până la severe

Scanați codul QR



45 mg

45 mg

RINVOQ® (upadacitinib) este indicat pentru tratamentul colitei ulcerative active, moderată până la severă, la pacienți adulți care au avut un răspuns inadecvat, nu au mai răspuns sau au prezentat intoleranță la terapia convențională sau la un medicament biologic. RINVOQ® (upadacitinib) este indicat pentru tratamentul bolii Crohn active, moderată până la severă, la pacienți adulți care au avut un răspuns inadecvat, nu au mai răspuns sau au prezentat intoleranță la terapia convențională sau <u>la un medicament biologic.</u>

#### **MOD DE ADMINISTRARE**

#### COLITĂ ULCERATIVĂ1

#### INDUCTIE 8 SĂPTĂMÂNI

Doza de inducție recomandată pentru RINVOQ® este de 45 mg, administrată o dată pe zi, timp de 8 săptămâni. La pacienții care nu obțin un beneficiu terapeutic adecvat pănă în săptămâna 8, se poate continua administrarea dozei de 45 mg upadacitinilo, o dată pe zi, timp de încă 8 săptămâni. Administrarea RINVOQ® trebuie întreruptă în ozul oricărui

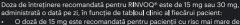
pacient care nu prezintă dovezi

ale unui beneficiu terapeutic





15 ma



ÎNTRETINERE

- O doză de 15 mg este recomandată pentru pacienții cu risc mai mare de TEV, MACE și neoplazie.
- La unii pacienți, cum sunt cei cu activitate crescută a bolii sau cei care necesită tratament de inducție de 16 săptămâni și care nu prezintă un risc mai mare de TEV, MACE și neoplazie sau care nu prezintă un beneficiu terapeutic adecvat la doza de 15 mg o dată pe zi, poate fi adecvată administrarea unei doze de 30 mg o dată pe zi
- Pentru menţinerea răspunsului, trebuie utilizată doza minimă eficace.
   La pacienții cu vărsta de 65 de ani şi peste, se recomandă administrarea dozei de 15 mg o dată pe zi.

În cazul pacienților care au răspuns la tratamentul cu upadacitinib, administrarea de corticosteroizi poate fi redusă și/sau întreruptă conform standardului de îngrijire medicală.

#### **MOD DE ADMINISTRARE**

#### BOALĂ CROHNI

#### INDUCȚIE 12 SĂPTĂMÂNI

până în săptămâna 16.

Doza de inducție recomandată pentru RINVOQ® este de 45 mg, administrată o dată pe zi, timp de 12 săptămâni. La pacienții care nu au obținut un beneficiu terapeutic adecvat după inducția initială cu durata de 12 săptămâni, poate fi luată în considerare o inducție prelungită timp de încă 12 săptămâni, cu o doză de 30 mg, o dată pe zi. La acești pacienți, administrarea de RINVOQ® trebuie întreruptă în cazul în care nu prezintă dovezi ale unui

beneficiu terapeutic după 24 de săptămâni de tratament.







15 mg

#### ÎNTRETINERE

Doza de întreținere recomandată pentru RINVOQ® este de 15 mg sau 30 mg, administrată o dată pe zi, în funcție de tabloul clinic al fiecărui pacient:

- O doză de 15 mg este recomandată pentru pacienții cu risc mai mare de TEV, MACE și neoplazie.
- La unii pacienți, cum sunt cei cu activitate crescută a bolii și care nu prezintă un
  risc mai mare de TEV, MACE și neoplazie sau care nu prezintă un beneficiu
  terapeutic adecvat la doza de 15 mg o dată pe zi, poate fi adecvată administrarea
  unei doze de 30 mg o dată pe zi.
- Pentru menținerea răspunsului, trebuie utilizată doza minimă eficace.
   La pacienții cu vărsta de 65 de ani și peste, se recomandă administrarea dozei de întreținere de 15 mg o dată pe zi.

În cazul pacienților care au răspuns la tratamentul cu upadacitinib, administrarea de corticosteroizi poate fi redusă și/sau întreruptă conform standardului de îngrijire medicală.

 $\textbf{RINVOQ} \ \ \textbf{trebuie administrat numai dacă nu sunt disponibile alternative de tratament adecvate pentru pacienții:}$ 

- cu vârsta de 65 de ani și peste;
- cu antecedente de boli cardiovasculare aterosclerotice sau alti factori de risc cardiovascular (precum fumătorii actuali sau foștii fumători care au fumat o perioadă îndelungată);
- cu factori de risc pentru malignități (de exemplu, neoplazie curentă sau antecedente de neoplazie).

#### CU: colită ulcerativă; BC: boală Crohn

Referințe: 1. Rezumatul Caracteristicilor Produsului RINVOQ®.

Medicament eliberat pe bază de prescripție medicală restrictivă: PR. Pentru informații complete vă rugăm consultați Rezumatul.

Caracteristicilor Produsului RINVOQ\* disponibil prin scanarea codului QR de mai sus. Acest material promoțional este destinat
profesionistilor din domaniul a faitătii:

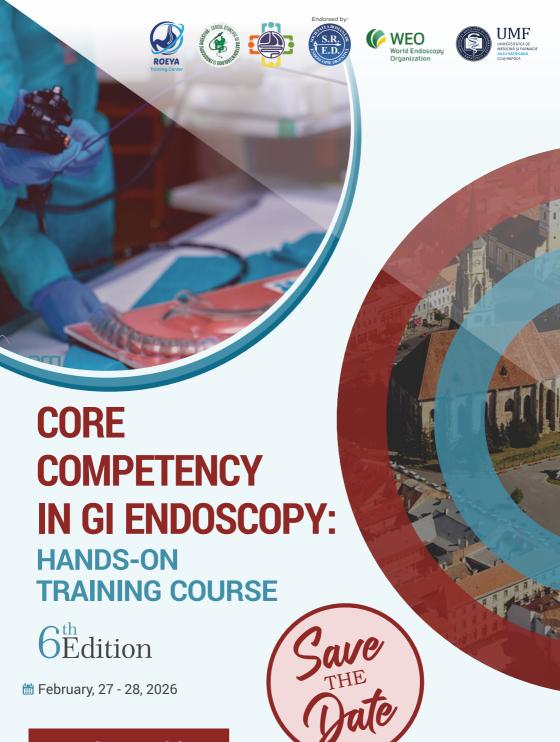
profesioniștilor din domeriul sănătății.
Pentru informații medicale suplimentare vă putoți adresa la e-mail: informatiemedicala@abbvie com
Definătorul autorizației de punere pe piață (DAPP): Abbvie Deutschland GmbH & Co. KG, Knollstrasse, 67061 Ludwigshafen,
Germania. Nr. APP. EU/1/9/1404/001-1 5 mg. EU/1/19/1404/006-3 on gai EU/1/19/1404/001-4 5 mg. Data primel autorizări sau a
refinnorii autorazăriei. Data primel autorizări: 16 Decembire 2019. Data revizuiri textului: scanează codul GR.

Raportarea reacțiilor adverse suspectate pentru produsele AbbVie se poate face câtre Agenția Națională a Medicamentului și a Dispozitivelor Medicale din Romania (ANIMOMI), secțiunea Medicamente de uz uman sau câtre AbbVie SRL România, Departamentul Farmacoviglentă, Telt. +4201529429 / E-maii: ROPV@abbvie.com.



#### ABBVIE S.R.L.

Lake View, Strada Barbu Văcărescu nr. 301-311, etaj 2 sector 2, C.P. 020276, București, România Teļ: +4021 529 3035 / Fax: +4021 529 3031







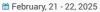








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### **General Information**



#### **LOCATION AND DATE**

21 - 22 February 2025

Hotel Golden Tulip Ana Dome, Observatorului St. no 129, Cluj-Napoca



#### **OFFICIAL LANGUAGE**

Scientific papers will be held in English.



#### PROGRAM HANDBOOK

Each participant will receive from the InfoDesk the Program Handbook.

Program Handbook includes congress and partner materials.



#### **INFODESK**

The workshop Infodesk will be located in the lobby of Hotel Golden Tulip Ana Dome, Cluj-Napoca.

The working schedule will be:

Friday, February 21st 2024, 12:00 - 20:00 Saturday, February 22nd 2025, 08:30 - 19:00.



#### **INTERNET ACCESS**

Internet access will be available by the wireless connection available at the location. Internet password will be available at the InfoDesk.



#### LIABILITY AND INSURANCE

The event operator will not assume responsibility for injury and/or damage involving persons or property during the event. All participants are advised to prevent/avoid any injury/loss.

#### **ORGANIZERS**

**ROEYA Training Center** 

The Scientific Circle of Gastroenterology and Digestive Endoscopy

Evrica Youth Association for Research in Hepato-Gastroenterology



Romanian Society of Digestive Endoscopy (SRED)

World Endoscopy Organization (WEO)

Universitatea de Medicină și Farmacie "Iuliu Hațieganu", Cluj-Napoca



#### **BADGES**

Participants are requested to wear their badge at all times while inside the premises.



#### COURSE ACCESS

For access in the presentation room you will be using the badge which you will receive after registering at the InfoDesk. Participants will choose their seats on "first come, first serve" basis. Therefore, we recommend to plan for an early arrival at the premises.



#### MEDIA POLITICS

Photography and filming during the event are prohibited without written permission from the event Media Coordinator, whom you can contact at the InfoDesk

























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### **General Information**



#### **INFORMATION FOR SPEAKERS**

There will be accepted for presentation only the digital materials which respect the technical specifications agreed upon registration.



#### **DRUGS AND FIRST AID**

A wide range of non-prescription drugs are readily available at local pharmacies. For other medication you will need a prescription signed by a registered Romanian doctor. In case of emergency please call the 112 emergency number.



#### LOST AND FOUND

Lost property can be taken at the InfoStand. To report a lost item please contact the InfoStand.



#### **SMOKING**

Smoking is allowed only in designated areas.



#### **ELECTRICITY**

The electricity in Romania runs on 230 volts and the frequency is 50 Hz. Plugs have two round pins. A plug adaptor will be required if incompatible electronic devices are used.



#### **MOBILE PHONES**

Mobile phones must be switched off during all sessions.



Participants will serve the coffee breaks/lunch in the designated spaces, as detailed in the program handbook.

#### PROFESSIONAL CONGRESS **ORGANISER**

#### **Tania Cuibus**

tel: +40 722 405 079

email: endoscopytraining@medevents.ro

















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### **Recommendations for Speakers:**

- All speakers are required to check in with the technical department in the presentation hall at least 3 hours prior to the commencement of the session, and earlier if feasible. Additionally, you are encouraged to upload your presentation slides the day before your scheduled presentation.
- Presentations remain the intellectual property of the author and may not be used without explicit permission.
- Please arrive arrive promptly in the conference room before the scheduled start time.
- Inform the moderator of any specific details regarding your work and take a moment to acquaint yourself with the remote control projector, timer, and microphone.
- Strictly follow the instructions provided by the moderator.

#### **Data Presentation:**

If you plan to use a PowerPoint presentation or any other PC-based application, kindly bring it on a USB memory stick or external hard drive and load it onto one of the conference computers in the presentation hall at least 3 hours before the session begins.

Please be aware that the conference computers in the session halls are equipped with at least Office 2016.

For presentations that include video films within PowerPoint, it is advisable to check the compatibility in the presentation hall where your lecture is scheduled during a coffee or lunch break before your session, ensuring this is done at least 3 hours before the session begins.

Alternatively, you may supply your own laptop computer. In such cases, confirm that your laptop has a VGA socket for external signal and verify it first with the technical department in the presentation hall where your lecture is scheduled, during the coffee or lunch break prior to your session, at least 60 minutes before the start of the session.

### **Important note for Macintosh users:**

In order to use MAC presentations on a PC compatible computer please note that you need to prepare it according to the instructions below, before bringing it to technical department:













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- Save the presentation, which was prepared on a Mac, as a PC-based PowerPoint presentation.
- Use a common font, such as Arial, Times New Roman, Verdana etc. (special fonts might be changed to a default font on a PowerPoint based PC).
- Insert pictures as JPG files (and not TIF, PNG or PICT these images will not be visible on a PowerPoint based PC).

Alternatively, you may use your own Macintosh laptop computer. In such cases, please inform the operators in the session hall where your lecture is taking place as soon as you arrive, and later on test during the coffee or lunch break prior to your session, at least 60 minutes before the start of the session.

We strongly recommend not using personal computers for presentation. Please note that the time used for connecting personal computer will be deducted from the total presentation time.

### **Technical Specifications:**

- Please bring your presentation on the following media: portable USB stick, external hard drive.
- Supported PowerPoint versions range from 2016 onwards.
- Save your files with the extensions \*. ppt or \*.pps, avoiding the use of the pack&go function. Make sure that all files with movies are saved on separate portable racks.
- Flash animations can not be designed.
- All files must be organized in the same directory.
- Do not use passwords for files.
- We recommend the use common fonts: Times New Roman, Calibri, Verdana, Arial.
- If you are using Power Point or Keynote Mac, please export your presentation as \*.ppt for Windows.













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Notes:			













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Notes:			













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Notes:			













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#### **Platinum Partners**







#### **Gold Partners**







#### Silver Partners







#### **Partners**



























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