Vascular Anomalies and Overgrowth Workshop

Friday 7th June 2019

**Poster Abstract submission form**

**Final date for submissions: 17th February 2019**

***Submitted by:***Prof/ Dr/ Mr/ Ms/ Mrs**/** Miss/Other      Gender: Male  Female

First Name:  Surname:

Job Title:

Company/Hospital: Town:

Full Postal Address: *(Please specify whether home* *or work*  *)*

Postcode: Email:

Day Tel:  Fax:  Date submitted:

Email AND contact address to be published in course booklet:

**Abstracts must be submitted electronically to** **info@ichevents.com**

 **The abstract should adopt a structured format:**

**Title,** clearly indicating the nature of the study, in **Bold** type

**Authors’ initials and last names** only (with presenting author first)

**Author's institutional affiliations** listed as institution, city and country, separated by semicolon (;).

If there is more than one affiliation it should be denoted by the symbols \* + ~.

***Example***: C Travis\*, A Cooper\*, J Jackson+

 \*UCL Great Ormond Street Institute of Child Health, London; UK; +Imperial College, London, UK

**Abstract text: not to exceed 250 words (excluding title, names and affiliations). Submissions over 250 words will not be sent for review. Please check guidelines before submitting your abstract (s).**

**Abstract title**

**Authors & Affiliations**

**Objectives and Aim**

**Methods and materials**

**Results**

**Conclusions**