

PLACE  
STAMP  
HERE

Foundation for Women's Cancer  
230 W. Monroe St., Suite 710  
Chicago, IL 60606-4703



## 2016 Gynecologic Cancer Survivors Course

A FREE course for all cancer survivors,  
family members, friends and others.

Saturday, Sept. 17, 2016  
9:00 a.m. - 1:00 p.m.

Prentice Women's Hospital Conference  
Room L South, 3rd floor  
250 E. Superior St., Chicago, IL 60611

Register Today!

Visit [foundationforwomenscancer.org](http://foundationforwomenscancer.org)

Through educational sponsorship support from

 **Northwestern**  
Medicine

  
**ROBERT H. LURIE**  
COMPREHENSIVE CANCER CENTER  
OF NORTHWESTERN UNIVERSITY

# Schedule

8:00 a.m. – 9:00 a.m.	<b>Registration</b>
9:00 a.m. – 9:05 a.m.	<b>Welcome and Course Overview</b> Shohreh Shahabi, MD
9:05 a.m. – 9:30 a.m.	<b>Precision Medicine in Gynecologic Oncology</b> Mario Pineda, MD, PhD
9:30 a.m. – 10:00 a.m.	<b>Clinical Trials in Gynecologic Oncology</b> Daniela Matei, MD
10:00 a.m. – 10:30 a.m.	<b>Novel Surgical Approaches in Gynecologic Oncology</b> Wilberto Nieves-Neira, MD
10:30 a.m. – 11:00 a.m.	<b>Sexual Health and Menopause</b> Lauren Streicher, MD
11:00 a.m. – 11:45 a.m.	<b>Stress and Its Effect on the Development and Treatment of Cancer</b> Premal Thaker, MD, MS
11:45 a.m. – 12:00 p.m.	<b>Break</b>
12:00 p.m. – 1:00 p.m.	<b>Lunch and Panel Discussion</b> John Lurain, MD, Moderator
1:00 p.m.	<b>Course Adjourns</b>

# Parking Information

Click here for more information and to view the map.

Attendees may park in the Huron/Superior garage, 222 E. Huron, across the street from the hospital.

The fee is \$11 for one to seven hours. After 7 hours, the fee is \$25.

A discounted pass must be used to obtain these prices—passes will be handed out at the session.

There is an entrance and exit on Superior Street.

**Directions from the parking lot to the conference room:**  
Upon leaving the parking lot, on the third floor, there is directional signage to all pavilions (Prentice). There is also a customer service desk near the first floor entrance and the second floor near the Dunkin Donuts.

# Faculty

**Shohreh Shahabi, MD**, Course Director  
Chief, Division of Obstetrics and Gynecology (Gynecologic Oncology) John and Ruth Brewer Professor of Gynecology and Cancer Research, Northwestern University Feinberg School of Medicine, Chicago, IL

**Mario Pineda, MD, PhD**  
Assistant Professor of Obstetrics and Gynecology, Department of Gynecologic Oncology, Northwestern University Feinberg School of Medicine, Chicago, IL

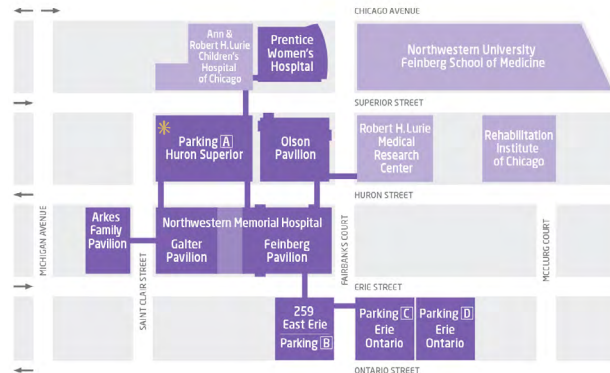
**Daniela Matei, MD**  
Diana, Princess of Wales Professor of Cancer Research Professor of Medicine: Hematology/Oncology and Obstetrics and Gynecology—Gynecologic Oncology, Northwestern University Feinberg School of Medicine, Chicago, IL

**Wilberto Nieves-Neira, MD**  
Associate Professor of Obstetrics and Gynecology—Gynecologic Oncology, Northwestern University Feinberg School of Medicine, Chicago, IL

**Lauren Streicher, MD**  
Clinical Associate Professor of Obstetrics and Gynecology Northwestern University Feinberg School of Medicine, Chicago, IL

**Premal Thaker, MD, MS**  
Associate Professor, Obstetrics and Gynecology, Division of Gynecologic Oncology, Washington University, St. Louis, MO

**John Lurain, MD**  
Marcia Stenn Professor of Gynecologic Oncology Professor of Obstetrics and Gynecology, Northwestern University Feinberg School of Medicine, Chicago, IL



For questions or more information, contact the FWC at [fwc@sgo.org](mailto:fwc@sgo.org) or 312.578.1439.

Saturday, Sept. 17, 2016 • Chicago, IL

Online registration is now available!

Visit [foundationforwomenscancer.org](http://foundationforwomenscancer.org) to register for all Foundation courses and receive an email confirmation within 24 hours, or register by completing the form below and mailing to:

Foundation for Women's Cancer  
230 W. Monroe St., Suite 710 • Chicago, IL 60606-4703  
312.578.1439

Space is limited and available on a first come, first served basis. Please complete a separate form for each survivor attending.

Name of Registrant (Survivor) \_\_\_\_\_ Age \_\_\_\_\_

Email \_\_\_\_\_

Name of Guest(s): \_\_\_\_\_

1. \_\_\_\_\_

Guest Email: \_\_\_\_\_

2. \_\_\_\_\_

Guest Email: \_\_\_\_\_

3. \_\_\_\_\_

Guest Email: \_\_\_\_\_

4. \_\_\_\_\_

Guest Email: \_\_\_\_\_

Registrant Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_

\_\_\_\_\_ Please indicate the total # of people attending, including you.

\_\_\_\_\_ Please check here if you are requesting a vegetarian lunch.

\_\_\_\_\_ I do not want my name added to future mailings about upcoming cancer survivor events and other educational programs.

Your registration will be confirmed prior to the course, either by email or U.S. mail



The meeting space is handicap accessible, but please let us know in advance if you will require any special assistance so that every effort may be made to accommodate your needs:

\_\_\_\_\_

\_\_\_\_\_