# **10th GENEVA CONFERENCE ON PERSON-CENTERED MEDICINE**

***Celebrating Ten Years of Promoting Healthy Lives and Well-being for All***

**May 7-10, 2017**

**Abstract Form**

**Names (**first/given and last/family) **and academic degrees**:

………………………...…………………………………………………………………………………….…….

**Professional position:**

🞏 Physician: Specialty: ………………………………………………………………..…………………………...

🞏 Nurse 🞏 Pharmacist 🞏 Psychologist 🞏 Social Worker 🞏 Student 🞏 Other: ...…………………………

**Regular Address** (number and street name, Apt #, city, state/province, mail/zip code, country)**:**

……………………………………………………………….…………………………………………………….

**E-mail Address**:……………...………………..…………………………………………………………................

**Presentation Format:**

 🞏 Lecture 🞏 Symposium 🞏 Workshop 🞏 Brief Oral Presentation 🞏 Poster Presentation

**Title of Abstract:** …………………………………………………………………………………….…………….

**Title of Broader Activity if any (Symposium, Workshop):** ……………………………………………………...

**Abstract Body:** Text of up to 250 words plus 2 references. Preferably, it should be structured with objectives, methods, findings, discussion, and conclusions, and reflect either a systematic literature review, data analysis, or consultation process. No tables or figures are accepted.

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