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Mentor OSCE Plus

Dr Nigel Giam

OLD HENDON EX-SERVICEMEN'S CLUB

LONDON NW4 2DG

SAT/SUN

OBJECTIVES

TO FACILITATE PREPARATION FOR THE FINAL YEAR OSCE EXAMINATION



- TOP TIPS TO OSCE TECHNIQUE – PERFECT THE VIVIA
- OSCE PRACTICE UNDER EXAM CONDITIONS
- HIGH YIELD CASES ACROSS MEDICINE AND SURGERY
- RADIOLOGY VIVAS
- CONSULTATION SKILLS PRACTICE WITH OSCE ROLE-PLAYERS
- ONE TO ONE EXAMINER FEEDBACK
- “FUN, PRACTICAL AND MOST OF ALL SUPPORTIVE!”
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Enquiries

Dr Nigel Giam
Senior OSCE Examiner
Course Director

GP Programme Director
London Deanery

www.mentorosce.com

Email:
info@mentorosce.com

M : 07967813837

Course Director

Dr. Nigel Giam MRCP, MRCGP (Distinction)

Full Timetable & Terms and Conditions: www.mentorosce.com

Session - DAY 1 : 12.30PM-8PM / DAY 2 : 9.30AM-5.30PM

MENTOR OSCE PLUS : NUMBERS ARE STRICTLY LIMITED TO 24

Payment : BACS preferred payment – see below for details

Places cannot be reserved without application and payment.

Reply slip (Please **PRINT**): If paying by cheque - **Make cheque payable to MENTOR MEDICINE LTD and send to MENTOR COURSES, 19 DOWNAGE, LONDON, NW4 1AS**

I wish to attend the Mentor OSCE preparation course to be held on - state which day(s) you wish to attend:
(see website for details)

Name _____ Medical School & Year _____

Address _____

E-mail _____ Mobile _____ Date of OSCE _____

Mentor OSCE Plus Course Fee: see website for details and availability

priority given to those attending both days of the course

Terms and Conditions Apply. Please see website for more details. Numbers STRICTLY LIMITED.

PAYMENT INSTRUCTIONS

Thank you for your interest in Mentor OSCE Courses

PREFERRED METHOD OF PAYMENT IS **BACS TRANSFER**

TO SECURE PLACE ON MENTOR OSCE COURSE UNDERTAKE FOLLOWING BANK TRANSFER TO ACCOUNT BELOW AND EMAIL DETAILS ASAP:

Account : Mentor Medicine Ltd.

Bank : Natwest

Sort code: 602477

Account: 19365144

Fee: as per website

Alternatively PayPal payments will be accepted by making payment to

passmrcgp@docgiam.com

Please email **CONFIRMATION of payment AND ALL APPLICATION DETAILS** below for each applicant **ASAP** to info@mentorosce.com (no need to send in a hard copy of the form)

FULL NAME:

MOBILE:

EMAIL:

WHICH MEDICAL SCHOOL:

STAGE OF TRAINING:

DATE OF OSCE EXAM:

DATE OF MENTOR OSCE COURSE YOU WISH TO ATTEND:

HOW DID YOU HEAR ABOUT MENTOR OSCE?

Due to high demand, places cannot be secured without payment confirmation and provision of application details. All bookings are subject to terms and conditions.

Once booked, receipt of payment and induction pack with pre-course material will be sent by email.

I look forward to hearing from you.

Any queries just get in touch!

Best wishes

Dr Nigel Giam

MBBS(Hons) MRCP MRCGP(Distinction) DRCOG DCH DFFP BSc PGCertMedEd

Mentor OSCE Course Organiser

GP Training Programme Director - St Marys VTS

GP Senior Tutor - GKT

www.mentorosce.com

Mobile: 07967813837

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