

ΣΥΝΟΨΗ AASLD 2024

In full compliance with the Code's provisions

Organizer: ΕΛΛΗΝΙΚΟ ΙΔΡΥΜΑ ΓΑΣΤΡΕΝΤΕΡΟΛΟΓΙΑΣ ΚΑΙ ΔΙΑΤΡΟΦΗΣ (ΕΛΙΓΑΣΤ)

Co-organizers:

Σε περίπτωση που ο διοργανωτής είναι δημόσιο νοσοκομείο συμπληρώστε απαραίτητα το πεδίο Statutes:

No

Statutes: [11178_Statutes_20241218_ELIGAST_AASLD-2024_SFEE_01_Statutes.pdf](#) (Click to download)

Starting Date: 2024-12-18

Ending Date: 2024-12-18

Specialty: ΓΑΣΤΡΕΝΤΕΡΟΛΟΓΙΑ
ΗΠΑΤΟΛΟΓΙΑ

Website <https://www.eligast.gr/>

Estimated Number of Participants: 120

Total Amount of Registrations in the Respective Event of Previous Year(s): 115

EOF Approval: Yes

File Upload (attach EOF approval document): [11178_EOF_20241218_ELIGAST_AASLD-2024_SFEE_04_EOF.zip](#) (Click to download)

Type of Attendance: Physical

Scientific Event Type: Local

Scientific Programme Schedule: 17/10/2024 ΑΞΙΟΛΟΓΗΘΗΚΕ

Scientific Programme Schedule [11178_ScientificProgramme_20241218_ELIGAST_AASLD-2024_SFEE_ScientificProgramSpeakersList.zip](#) (Click to download)

Sponsorship Package [11178_SponsorshipPackage_20241218_ELIGAST_AASLD-2024_SFEE_SponsorsBookAssignmentToPCO.zip](#) (Click to download)

Website: <https://www.eligast.gr/>

Location:

Prefecture: ΑΤΤΙΚΗ

Venue Name: ΑΜΦΙΘΕΑΤΡΟ «Φ. ΦΕΣΣΑΣ», Γ.Ν.Α. «ΛΑΪΚΟ»

Professional / Organized Conference Facility: No

Recreational facilities / Resort: No

Venue Category:

City: ΑΘΗΝΑ

Seasonality:

Period of event 1/7 - 31/8 No

If yes, is it a summer resort? No

Period of event 15/12 - 15/1 Yes

If yes, is it a winter resort? No

Ski resort 15/12 - 15/03 No

Hospitality Provided:

Limits: Accommodations:

No

Meals:

Up to 70 Euros (including VAT) for meals per day

Registration:

No

Limits: [11178_Limits_20241218_ELIGAST_AASLD-2024_SFEE_09_Limits.pdf](#) (Click to download)
(attach cost of accommodation per night, daily cost of meals & drinks and registration fees)

Other Activities:

Other Recreational Activities: No

Accompanying Persons:

Reference in the programme regarding non-HCP participation in the conference No

Recomendation:

Δηλώνω ότι τα στοιχεία που προσκομίζω προς αξιολόγηση είναι ακριβή και αληθή και συνάδουν με τον ισχύοντα ΚΔ ΣΦΕΕ. Το σύνολο δε των ως άνω ανηρτημένων στοιχείων απευθύνονται στις χορηγούς εταιρείες- μέλη του ΣΦΕΕ Yes