

**ABSTRACT FORM**  
**3<sup>rd</sup> European CF Young Investigator Meeting**  
**Lille, France**  
**25 – 28 August 2009**

Abstracts must be received by  
**March 13<sup>th</sup> 2009.**  
 Submit to **Vaincre la Mucoviscidose:**  
[vjaunet@vaincrelamuco.org](mailto:vjaunet@vaincrelamuco.org)  
**and** send a copy to [karleen@muco.be](mailto:karleen@muco.be)

For Review Committee use only:  
 Abstract Number

Please note that only investigators **under 35 years old** can apply and attend the meeting. You will be asked to give a 10 min talk **and** present your results on a poster.

**Please type**

Name of young investigator:	
Name of supervisor:	
Institution:	
Department:	
Full Address:	
Email:	
Telephone: (incl. country code)	

This column may contain a maximum of 2,000 characters, including spaces

**Abstract title (Bold letters)**

Authors:

Authors affiliations:

(use numbers for different institutions as in example below)

J. Smith<sup>1</sup>, A. Brown<sup>2</sup>

<sup>1</sup> Department of Microbiology...<sup>2</sup> CF

Unit...

Abstract should describe:

**Background**

**Aims**

**Methods**

**Results** (please be specific)

**Conclusions**

**Acknowledgments**

Do you wish to participate to the  
**workshop “Presenting your  
 scientific paper in English”?**

YES     NO

Did you participate at the EYIM in  
 2007 or / and 2008?

YES     NO

Please indicate **One** Category for review:

<input type="checkbox"/>	Pulmonology
<input type="checkbox"/>	New therapies
<input type="checkbox"/>	Gastroenterology / Liver
<input type="checkbox"/>	Nutrition
<input type="checkbox"/>	Genetics
<input type="checkbox"/>	Animal Models
<input type="checkbox"/>	Screening & Diagnosis
<input type="checkbox"/>	Microbiology / Antibiotics
<input type="checkbox"/>	Immunology / Inflammation
<input type="checkbox"/>	Metabolic complications of CF
<input type="checkbox"/>	Cell Biology / Physiology
<input type="checkbox"/>	CFTR
<input type="checkbox"/>	Nursing
<input type="checkbox"/>	Physiotherapy
<input type="checkbox"/>	Psychosocial Issues
<input type="checkbox"/>	Epidemiology / Registry
<input type="checkbox"/>	Other Issues

Corresponding author agrees to have contact details available to conference delegates (delete as appropriate) and to have their abstract published by the organizers.

Agree            Do not agree