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**ILTS Perioperative Care in Liver Transplantation Virtual Meeting**

**Digital Event**

**October 8-9, 2021**

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| **EDUCATIONAL CASE SUBMISSION** |

**Presenter:**

**Name, Title:**

**Affiliation:**

**E-mail Address:**

**Case submission:**

**Title**

|  |
| --- |
| ***Enter your title here*** |

**Learning Objectives (50 words)**

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| ***Enter your learning objectives here*** |

**Brief Description (300 words)**

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| ***Enter your description here*** |