Information to be requested from all CA17104 participants:



Indicate your Working Group(s) in COST	WG1, WG3
Action17104:	
First Name:	ELISABETH
Surname:	PÉREZ RUIZ
Department	MEDICAL ONCOLOGY
Primary Institution	HOSPITAL COSTA DEL SOL
Address of Primary Institution	AUTOVIA A-7 KM 187, MARBELLA, SPAIN
Other institutions	optional
Telephone:	+34 610 70 46 26
e-mail:	eliperu@gmail.com

Link to webpage with biography:	https://www.researchgate.net/profile/Elisabeth_Perez- Ruiz
Link to webpage with group description:	optional

Orcid ID or Scopus ID	http://orcid.org/0000-0001-7204-0800
Linkedin	linkedin.com/in/elisabeth-perez-ruiz-985a5342
Expertise relevant for this COST Action:	NGS, cell culture, flow cytometry, liquid biopsy.
Available facilities to conduct work, relevant for this COST Action:	NGS, cell culture, flow cytometry, liquid biopsy.
Matherials/Methods that could be shared with other members of this COST Action:	cancer cell line obtained from patients; biopsy of patients.

NOTE: By submitting this form to the Grant Manager of CA17104, I agree that this information can be used within the scope of this COST Action (e.g. may be included on the webpage of CA17104).