



**UNION OF EUROPEAN MEDICAL SPECIALISTS
UNION EUROPEENNE DES MEDECINS SPECIALISTES**

SECTION OF PAEDIATRIC SURGERY

**APPLICATION FORM FOR RECOGNITION OF TRAINING PROGRAMME
AT:**

NAME OF CENTRE:

SPECIALIST TRAINING PROGRAMME IN PAEDIATRIC SURGERY

This form should be completed by any Paediatric Surgical Centre (hospital or group of hospitals) seeking recognition for a training programme.

The information requested on the form must be given as fully as possible. When completed the form is sent to the National Member Association of the U.E.M.S. for final approval and the last page of the form is completed before returning it to the Secretary of the E.B.P.S.

The Executive Committee will consider the application. When this has been completed the Centre may be visited by representatives of the E.B.P.S. The Executive will recommend to the U.E.M.S. (Paediatric Section) whether recognition will be granted and to what extent.

Name and address of Hospitals included in the Training Programme:

University affiliation:

STAFFING:

(a) Consultants directly responsible for the training programme

(i) NAME:

QUALIFICATIONS, including names of awarding body e.g. University or College:

YEAR OF APPOINTMENT AS CONSULTANT,.

NO. OF PAEDIATRIC SURGICAL SESSIONS (1 session = 3 hours) or total number of Paediatric Surgical Hours per week.

SPECIAL INTERESTS:

STAFFING (a) Continued:

..... (ii) Continue details as for (i)

STAFFING (b)

Other consultant staff contributing to training programme (e.g. Anaesthesia, Radiology, Urology (non-paediatric surgeon), Haematology/Oncology, Histopathology, Clinical Microbiology / Biochemistry, Genetics, Paediatrics)

NAME	SPECIALTY.....	No.of.Paediatric Sessions (1 session = 3 hours) / or total number of Paediatric hours
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Current non-consultant staff (Training Grades) in paediatric surgery in Hospital or Group:
(Qualifications should be given
(If your grading is different to outline below please specify)

Pre-registration House officers (Intern):

Senior House Officers:

Registrars:

Senior Registrars:

Please addend the weekly time table for each trainee to the back of this form (Appendix 1).

OTHERS :

Training Grade Staff in Anaesthesia working in the Unit:

CLINICAL FACILITIES

Total number of children's beds:

Paediatric Surgical:

Intensive Care:

Neonatal:

Infants:

Older Children:

Adolescent:

Day Care (Surgery):

Other surgical Paediatric:

Cardiac:

E.N.T:

Neurosurgical:

Orthopaedic:

Others (Specify)

Medical:

All beds non surgical:

Patient Statistics: (most recent full year)

Total General Surgical Paediatric ADMISSIONS (excluding Day Cases):

0 - 4 weeks:

1 - 12 months:

1 - 4 years:

5 years and over:

Paediatric Surgical Day Cases:

Index Cases:

a) Neonatal admissions under surgical care:

Please give diagnostic breakdown:

b) Non-neonatal:

- Acute non-specific abdominal pain
- Acute appendicitis (Appendectomy)
- Bladder augmentation
- Bronco-oesophagoscopy
- Central line insertion (Non-percutaneous)
- C.S.F. shunt insertion/revision
- Fundoplication
- Hypospadias
- Intussusception (all cases)
- Intussusception (Surgery)
- Malignant disease
- Resection Wilm's
- Resection Neuroblastoma
- Orchidopexy
- Pelvi-ureteric junction obstruction.....
- Pull through operation:
 - a) Hirschsprung's Disease
 - b) High anal anomaly
- ureteric re-implant.....

c) Other major surgery (please specify)

State what facilities exist for training in the following:

Burns:

Cardio/thoracic Surgery:

Ear, Nose & Throat Surgery:

Injuries (excluding burns and orthopaedics):

Neurological Surgery:

Orthopaedics:

Plastic Surgery:

Urology:

TEACHING PROGRAMME FOR TRAINEES IN PAEDIATRIC SURGERY:

Please indicate titles/frequency of meetings:

SURGICAL AUDIT,

Please give details of your surgical audit:

What library facilities are available?

Give details including library staff:

a) on site

b) Readily available

What commitments have the trainees in paediatric surgery for the teaching of:

a) Nurses

b) Under Graduates

c) Post Graduates

What opportunities exist for clinical or laboratory research?

Please addend paediatric surgical publications from the centre for the past 3 years:

Appendix (ii)

The hospital authority agree to pay reasonable expenses for the visiting consultants who will make the site visit to assess the unit?

Signed on behalf of the Hospital by the Surgeon/Surgeons in Administrative Charge of Training Programme

and by the appropriate district or regional administrator or hospital secretary

Date- _____

Form to be filled in by the National Body responsible for UEMS affairs:

We have reviewed the application form for _____

and believe this to be a true reflection of the current situation at

and that it is a suitable centre for consideration for Paediatric surgical Training.