

TRAINING PROGRAMME APPLICATION FORM
FOR THE BIRMINGHAM HEARTLANDS HOSPITAL
DIABETIC RETINOPATHY SCREENING PROGRAMME
2 DAY COURSE

Please confirm the dates you will be attending:

Name:-.....

Address: -
.....
.....

Phone No: -.....

Mobile: -.....

Email: -.....

Dates of the 3/4 day course that you attended
.....

Place of employment & workplace experience for forth coming year :-
.....
.....

Current position: -.....

Qualifications including GOC number (for optometrists): -
.....
.....

Diabetic Retinopathy Screening Experience: -
.....
.....

What level of computer skills do you have?
.....

Do you have regular access to a digital fundus camera system?

Yes / No

Does this meet National Standard (see NSC website): - Yes / No

If yes which make & model: -

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Do you have access to software programme? Please state name of software

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If no, when will a digital fundus camera system be purchased or provided for your use?

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Lunch will be provided Normal/Vegetarian*/Other please state*

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£50.00 deposit non-refundable is required – if booking is two months before course dates

If funded by PCT name of PCT and their contact details

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Parking at Birmingham Heartlands Hospital is on visitors car park charges are on display. Current charges are 3 day pass for £7.00, 4- 8 hrs £5.00.

Buses from Birmingham City Centre to Heartlands Hospital main entrance are 97 and 97A. Although the nearest train station is Stechford, it is approximately a 20 –25 min walk.

If you have any queries please contact Sister Jane Pitt, Ward 34 Diabetes Centre, Birmingham Heartlands Hospital, Bordesley Green East, Birmingham B9 5SS

Tele no. 0121 424 0105 or

E-mail jane.pitt@heartofengland.nhs.uk