**Pro forma Curriculum Vitae for BSSH Hand Diploma Tutors**

***Please focus on teaching experience and training***

|  |  |  |
| --- | --- | --- |
| **Name** |  | |
| **Email address** |  | |
| **Telephone number** |  | |
| **The following information is for diversity monitoring:** | Gender: Male Female Other Prefer not to say | |
| Ethnicity: Prefer not to say | |
| **Current main professional role and approximate percentage Hand and Wrist Surgery involved** | **Job Title:**  **Percentage of Hand and Wrist workload:**  **Date appointed:** | |
| **Name of Base Hospital/Hand Unit** |  | |
| **Town + Region** |  | |
| **Parent Specialty** | Plastic Surgery/Orthopaedics/Other (please detail) | |
| **Main clinical Interests** |  | |
| **Surgeons:**  **I feel able to Tutor modules:** | 1. Basic Science and Rehab  2. Skin, soft tissues and Infection  3. Fractures, Injury and Instability  4. Osteoarthritis and Inflammation  5. Tendons  6. Child’s Hand  7. Nerve  8. Dupuytren’s, Tumour, vascular | |
| **If part of the MDT: (non-surgeon)** | | |
| **I am able to help with these specific tutorials within certain modules**  **e.g. splinting in hand therapy etc.** | Tutorial Topic:  Relevant Module No(s): | |
| **Diploma Supervisor supporting my application** | Name:  Email: | |
| **I have an interest in becoming a Diploma Consultant Supervisor** | Yes/No | |
| **Are you able/willing to provide Virtual Tutorials?** | Yes/No Comment: | |
| **Other professional roles Including dates of appointment** |  | |
| **BSSH Member?** | Yes/No | |
| **Diplomate?** | BSSH Diploma - Date of qualification…………………………  FESSH Diploma - Date of qualification………………………. | |
|  | | |
| **Relevant teaching qualifications**  **(E.g. Training the Trainers or other courses to meet GMC domain 7.)** | **Date** | Title |
| **Pertinent teaching courses** | **Date** | Title |
| **Training/Examining experience**  **(E.g. college or medical school examiner, deanery appointment etc.)** |  |  |
|  | | |
| **Teaching Experience**  **Including brief description of roles and level,**  **(E.g. medical student, surgical training, specialist training AES/CS etc.)** |  | |
| **Are you a named CS/AES?** |  | |
| **Have you had an educational appraisal as part of your yearly appraisal and been successfully signed off?** |  | |
|  | Can we | |
| By including my name below I confirm that the information provided above is an accurate reflection of my suitability for teaching the BSSH Hand Diploma and that I agree to this information being shared with the University of Manchester. | | |
|  | | |
| **Name** |  | |
| **Date** |  | |

Hand Diploma Tutor Declaration

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as a tutor/supervisor of the British Society for Surgery of the Hand

& University of Manchester

Postgraduate Diploma in Hand Surgery declare that:

* I have a copy of and have familiarised myself with the course manual
* I have read and understood the guidance notes for tutors (Section 8.3), the book list (Section 11) and the relevant module syllabus (Section 4) and reading list(s) (See BSSH Website).
* I will uphold the philosophy and standards of the course in tuition, assessment and guidance of my student(s) to the best of my ability.
* I will apply the standard of knowledge and skills expected of the qualification, namely that of a consultant in the first day of consultant practice, to my involvement with the course and its students.
* I understand the course is delivered as a distributed learning programme, administered by the BSSH and validated by the University of Manchester.
* I know where to seek guidance and support for my involvement should this be required, for example where a trainee is in difficulty (Section 20).

Signed: Date: