



## **British Society for Surgery of the Hand**

### **Application Form for Registration**

**NOTE:** This form is to be completed by both the participating surgeon and their consultant supervisor.

The supervisor does not personally have to deliver every module but should liaise with colleagues and obtain their commitment to cover other sections as appropriate.

#### **PARTICIPATING SURGEON SECTION**

<b>Name:</b>	
<b>Home Address:</b>	
<b>Home Telephone:</b>	
<b>Mobile:</b>	
<b>E-Mail:</b>	
<b>NTN</b>	
<b>Region/Rotation</b>	
<b>GMC Number</b>	
<b>CCT Date (for Trainees)</b>	
<b>FRCS Orth/Plast Pass date</b>	

**Intending to study** (select one):

- Full-time (12 months from registration to completion)
- Part-time (18-24 months from registration to completion)

**BSSH with the UNIVERSITY OF MANCHESTER  
Postgraduate Diploma in Hand Surgery**

**Details of Higher Surgical and Advanced Hand Surgery Training:**

Details of the advanced hand surgery training experience that the participating surgeon will undertake for the Diploma should be entered here. **A minimum of 6 months following FRCS(Orth/Plast) is required.** This may be undertaken within the existing rotation or may take the form of one of the national advanced training posts (ATPs).

<b>Hand Surgery Post(s):</b>	
<b>Date of Commencement:</b>	
<b>Date of Completion:</b>	
<b>Signature of surgeon:</b>	

**CONSULTANT SUPERVISOR SECTION:**

*The Consultant Supervisor will be responsible for issuing all module tutors with the tutor advice document (Appendix 11) and Diploma Handbook. They shall also ensure that all module tutors, including themselves, comply with the University of Manchester approval process and complete the BSSH agreement.*

<b>Name:</b>	
<b>Departmental Address of Consultant Supervisor:</b>	
<b>Work Telephone:</b>	
<b>Mobile:</b>	
<b>E-mail:</b>	
<b>BSSH Member (Yes/No)</b>	

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The consultant supervisor is asked to here indicate the person responsible for teaching and delivering the modules. Where others are involved their express agreement is required. It is anticipated that within a region orthopaedic and plastic surgery departments will work together to deliver the syllabus.

*It is not advised that the same Consultant acts as tutor to more than TWO modules*

	<b>Name of Consultant(s) who will deliver module</b>
<b>Module 1</b> Basic Sciences and Rehabilitation	
<b>Module 2</b> Skin, Soft Tissues & Infection	
<b>Module 3</b> Fractures and Joint Injuries, including Wrist Instability	
<b>Module 4</b> Osteoarthritic and inflammatory disorders	
<b>Module 5</b> Tendon Disorders	
<b>Module 6</b> The Child's Hand	
<b>Module 7</b> Nerve Disorders	
<b>Module 8</b> Dupuytren's Disease, tumours and vascular disorders	

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**BASE ROTATION TRAINING PROGRAMME DIRECTOR SECTION**

The Programme Director needs to confirm that the rotation will accommodate and deliver the programme as outlined in the Programme Handbook. The Programme Director should further confirm that a minimum of 6 months attachment substantially within a hand surgery practice is currently allocated to or has been started by the applicant. This may be confirmation that local approval has been granted for the candidate to undertake a hand fellowship (out of programme).

In the case of applicants (including existing consultants) who have already completed their advanced hand surgery training the supervising consultant surgeon should sign here and take ownership for establishing how the tutorials and assessments can be delivered alongside the respective existing commitments.

<b>Programme Director Name:</b>	
<b>Email:</b>	
<b>Signature:</b>	
<b>Date:</b>	
<b>Rotation Name</b>	
<b>Candidate NTN number</b>	

<b>Candidate name:</b>	
<b>Signature:</b>	
<b>Date:</b>	

**EDUCATIONAL DIRECTOR SECTION**

[To be completed by the BSSH Office]

The Educational Director of the Hand Diploma programme will review the application in conjunction with the members of the Education & Training Committee and will sign off the application when it is judged that the necessary criteria for entry have been fulfilled.

<b>Name:</b>	
<b>Signature:</b>	
<b>Date:</b>	

**Privacy and Data Protection Statement**

Electronic and hard copy data will be kept in compliance with the Data Protection Act 1986 and will be entirely confidential from the point of view of non-availability of such data to employing Trusts and professional regulatory bodies. The applicant's signature on the application form is taken confirmation of understanding and acceptance of this Privacy and Data Protection statement.

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**FEE**

Current fee for the course including examination is £1050. Please note: once your registration is accepted by the BSSH the fee becomes non-refundable.

Cheque payable to 'British Society for Surgery of the Hand'

Or

**Credit Card Details:**

\* Access/Visa/Mastercard/Eurocard/Debit/Maestro \* (delete as applicable)

<b>Card Number:</b>	
<b>Valid from:</b>	
<b>Expiry Date:</b>	
<b>Issue No: (Maestro only)</b>	
<b>Card Validation Code (CVC)</b>	

<b>Card Holder's Name:</b>	
<b>Billing Address:</b> (as per credit card statement)	
<b>Amount to be Debited:</b>	
<b>Signature:</b>	
<b>Date:</b>	

Alternatively you can give credit/debit card details directly to the BSSH  
office by calling: 020 7831 5162

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## **DOCUMENTS TO BE SUBMITTED IN SUPPORT OF APPLICATION\***

- Current GMC certificate
- Evidence of having passed the Intercollegiate Specialty Examination in Plastic or Orthopaedic Surgery
- Evidence of past / current / future appointment to specific Hand Fellowship in the UK/Republic of Ireland or letter from the Programme Director of the relevant rotation to state that there will be a 6 month period of advanced hand surgery training
- Surgeons applying with recognition under Article 14 of the PMETB should include relevant documentation confirming that status

\* Photocopies will be acceptable for the purpose.