

THE COLLEGE OF SURGEONS OF HONG KONG

APPLICATION FOR ACCREDITATION OF

SUBSPECIALTY TRAINING PROGRAMME IN GENERAL SURGERY

ENDOCRINE SURGERY

From	(Hospita	al)

The completed form should be returned to:

The Secretariat
The College Of Surgeons Of Hong Kong
Room 601, 6th Floor
Hong Kong Academy Of Medicine Jockey Club Building
99 Wong Chuk Hang Road
Aberdeen, Hong Kong

1. SUPERVISOR	R			
2. STAFF LIST				
Rank				Number
. LIST OF TRA	INERS FOR THE CON	ICERNED SUBSPECIALTY	7	
Name	Rank	Special Interest	Sessions	Year Appointed
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4. LIST OF TRA	INEES WHO JOINED	THE CONCERNED SUBS	SPECIALTY	
Name		Date Of Appointment	Qualificat	ions

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5. STATISTICS

Total no. of major cases in the concerned subspecialty per 6 months:

SUBSPECIAL ITY	KEY PROCEDURES	TRAINING UNIT	
	THE FIRST CONTRACTOR OF THE PROPERTY OF THE PR	NO. OF KEY PROCEDURES PER 6 MONTHS	
	Hamthyroidectomy / Subtotal / Total Thyroidectomy		
ENDOCRINE	Neck Dissection		
SURGERY	Parathyroidectomy		
	Adrenalectomy		
	Pancreatic Resection		

In order to align with the basic requirement for general surgical trainer, endocrine surgery program will only accept candidates who have > 1 year general surgery experience after exit

Outpatient Clinic

Clinic	No. of Sessions/Week

6.	Enclose a	Enclose a list of publications of								
	(a) Trainers and									
	(b) Trainees who joined the concerned subspecialty in the past three years.									
7.	Any other information that commends your hospital as a Training Centre for Subspecialty Training in General Surgery									
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