



EUROPEAN BOARD OF OPHTHALMOLOGY
ENET PROGRAMME
(European Network for Education of Trainees)

APPLICATION FORM ENET
ACCREDITED COURSES

*

PLEASE COMPLETE THE APPLICATION FORM ELECTRONICALLY

Course Director _____

1. Name: Gisbert Richard
2. Address: University Medical Centre Hamburg-Eppendorf
3. E-mail: richard@uke.uni-hamburg.de

Supportive society (in due order with UEMS accreditation) _____

4. Society: ESCRS
5. Date/hour when this course will take place: 05/09/2010, 1430-1630
6. Location: Les Palais des Congrès, Paris, France
7. UEMS application introduced:
in due order:

General information _____

8. Course Title: Fundamentals of medical and surgical retina for cataract and refractive surgeons
9. Classification according to EBO syllabus*[†]
10. Duration: 1-hour course (1-3 speakers) 2-hours course (4- 6 speakers)
 3-hours course (6-8 speakers) 4-hours course (8-10 speakers)
11. Format: Formal lecture Commented diaporama Videobased course
 Case presentations On-line course E-learning
12. Course level: Basic Advanced

[†] To be filled in by European Network for Education of Trainees (ENET) responsible

Faculty

	<u>Name</u>	<u>E-mail</u>	<u>Setting</u>
1.	Gisbert Richard	richard@uke.uni-hamburg.de	University Medical Centre Hamburg-Eppendorf
2.	Oliver Zeitz	zeitz@uke.uni-hamburg.de	Universitätsklinikum Hamburg-Eppendorf
3.	Birgit Weingessel	weingessel@ehello.at	xxxx
4.	Thomas Wolfensberger	Thomas.wolfensberger@fa2.ch	xxxx
5.	Conceição Lobo	clobofonseca@gmail.com	University Hospital of Coimbra, Centre Of Ophthalmology
6.			
7.			
8.			
9.			
10.			

Course synopsis (max. 10 lines)

Achievements (what will the participant achieve in knowledge) _____

Course outline (please specify or add a flyer) _____

	<u>Topic title</u>	<u>Time (min)</u>
1.	G. Richard Introduction	
2.	G. Richard Choroidal detachment after anterior segment surgery	
3.	C. Lobo Cystoid Macular edema	
4.	T. Wolfensberger Posterior segment complications after refractive surgery	
5.	B. Weingessel How to treat retinal degenerations	
6.	O. Zeitz Ocular Drug Vehicles and Movement/ Distribution	
7.	O. Zeitz Endophthalmitis - an up date	
8.	G. Richard Phacovitrectomy - tips and tricks	
9.		
10.		

Agreement (to be filled in by the course director)

I hereby agree

- to distribute the evaluation forms prior to the start of the course
- to collect the evaluation forms after the course
- to collect the MCQs from the faculty within a timeframe of two weeks after the course
- to wave registration fee for the peer reviewer
- to provide UEMS accreditation of the hosting society
- to send the evaluation forms to Dara Conion
- to complete the MCQ form in attachment

Name + Signature:

Date:

Prof. Dr. Gisbert Richard
Direktor der Univ.-Augenklinik
Martinistraße 52 • 20246 Hamburg
Tel. 040 / 741 06 - 29 01 • Fax - 49 06
e-mail: richard@uke.uni-hamburg.de

Application Form to be sent to _____

Marie-José Tassignon, Antwerp University Hospital, Dept. of Ophthalmology, Wilrijkstraat 10, 2650 Edegem, Belgium
Tel. +32 3 821 33 77, Fax +32 3 825 19 26, E-mail: marie-jose.tassignon@uza.be