

Application for Endoscopy Attachment Programme

Name: DO	DOB:					
Gender: Male Female Country:						
Institution:						
Current position:						
□ Gastroenterologist □Surgeon □Endoscopis	t ⊡He	patologist DOther				
Year of graduation (basic degree):						
Year of GI training: to Year of completed GI training:						
Application for Areas of Training						
Advanced Endoscopic Procedures						
Others						
Preferred timing for the training (month/year):						
	either 6 m	onths or 12 months)				
Experience in GI Endoscopy						
Number of OGD (diagnostic and therapeutic) performed: Can you perform Therapeutic OGD independently? \Box No \Box Yes						
Can you perform Therapeutic OGD independently?	□Yes					
Number of Colonoscopy (diagnostic) performed:						
Number of Colonoscopy (Therapeutic) performed:						
Can you perform Colonoscopy independently?	□No	□Yes				
Number of ERCP performed:						
Can you perform ERCP independently?	□No	□Yes				
Number of EUS performed:						
Can you perform EUS independently?	□No	□Yes				
List of 5 best publications (first or co-author)						

Authors	Title	Journal and publication details

Would you consider conducting research project during the period of training? □Yes Please list the topic of research you would consider exploring during the period of training: