



## The Royal College of Anaesthetists Board in Scotland

### Primary FRCA VIVA Day

The Steele Lecture Room, Perth Royal Infirmary  
Thursday 12<sup>th</sup> January 2017

This one day course will provide extensive SOE practice with experienced Consultants. All SOE components, pharmacology, physiology, clinical and physics will be practised with an opportunity for feedback and discussion. This is an intensive day which aims to help prepare Primary FRCA candidates for the RCOA SOE examination.

#### Programme

VIVA practice on Physics, Physiology and Pharmacology

**Registration Fees    £75.00**

#### Cancellation:

If you cancel your place on this course you will be refunded the whole amount (less an administration fee of £35.00). The College will not give any refund if notice of cancellation is ten working days or less.

*All refunds are at the discretion of The Royal College of Anaesthetists*

#### Please return your application form to:

Mrs Lezley Cassidy  
Department of Anaesthesia,  
Ninewells Hospital and Medical School  
Dundee DD1 9SY

Telephone: 01382 632175  
Fax: 01382 644914  
Email: lezleycassidy@nhs.net

Please make cheque payable to: **The Royal College of Anaesthetists**

**THE ROYAL COLLEGE OF ANAESTHETISTS  
BOARD IN SCOTLAND**

To Mrs Lezley Cassidy  
Department of Anaesthesia,  
Ninewells Hospital & Medical School  
Dundee DD1 9SY

**FOR OFFICE USE ONLY**

APP RECEIVED:	APP ACK:
PROG SENT:	PGME INV:
FEE RECD:	FEE TO ACC:
RCPT SENT:	1 2 3

I wish to apply for entrance to the Primary FRCA VIVA Day Thursday 12<sup>th</sup> January 2017

SURNAME (Block letters) ..... FORENAMES .....

ADDRESS .....

POST CODE ..... EMAIL .....

COLLEGE REFERENCE NO: .....

TEL No. (where you can be contacted during the day) .....

DATE OF BIRTH ..... SEX .....

COUNTRY OF ORIGIN ..... NATIONALITY .....

QUALIFICATIONS (name of Medical School & dates) .....

DATE OF EXAMINATION, FOR WHICH YOU ARE STUDYING: .....

PRESENT APPOINTMENT (with name of hospital, post and dates, including months):  
.....

PREVIOUS ANAESTHETIC APPOINTMENTS (with names of hospitals, posts and dates, including months):  
.....  
.....

Please tick appropriate boxes: I have applied for study leave YES/ NO

I enclose a cheque for: £75.00

I have paid by Bank Transfer £75.00  Date Paid .....

Account Name: Royal College of Anaesthetist

Account Number: 11039467

Sort Code: 16-00-15

SIGNATURE ..... DATE .....