



Membership Application

No:

Personal Details					
Title (Mr. Mrs. Miss. Ms)	<input type="text"/>	Surname	<input type="text"/>	Forename	<input type="text"/>
				Initial	<input type="text"/>
Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/>	(DD/MM/YYYY)	Age	<input type="text"/>	Sex
					<input type="text"/>
Home Address	<input type="text"/>				
	<input type="text"/>				
Post Code	<input type="text"/>				
Telephone Number	<input type="text"/>	Mobile	<input type="text"/>		
E-mail	<input type="text"/>				
Work Details - Please enclose a current job description					
Type of Critical Care Area (ICU,PICU,SCBU,CCU) LIST ALL	<input type="text"/>				
Main Ward or Unit Title	<input type="text"/>				
Hospital	<input type="text"/>				
Hospital Address	<input type="text"/>				
	<input type="text"/>				
Post Code	<input type="text"/>				
Tel. Number	<input type="text"/>	Fax Number	<input type="text"/>		
Mobile	<input type="text"/>				
E-mail	<input type="text"/>				
WORK DETAILS: Please ✓ relevant functions performed:					
Near Patient Testing	✓	Respirotry Support	✓	Equipment Management	✓
R & D		Advanced Techniques		Equipment Purchase etc	
Complex Tests		Train Users		Major Repairs	
Train Multiuser		Attach to Patients		Minor PM Repairs	
QC Maintainence		Clean & Set up Vents		Calibration	
Analyse Samples		Non Invasive Ventilation		Front Line Fault Finding	

Cont:

Extra Corporeal Support	√	Cardiac Support	√	Patient Transfer	√
R & D		R & D		Retreavals	
Train Staff		Support Therapies		External	
Run Treatment		C.O. Techniques		Internal	
Fault Find		Invasive Monoriting			
Set up System		Non-Invaisive Monitoring			

CARDIAC / RENAL / HEPATIC (circle)

Clinical Skills	√	Management	√
Canulate		Budget	
Intubate		Contracts	
Alert		Manpower	
PALS		Incidents	
ALS		Capital Purchase	
PLS		Consumables	

Professional Details

Job Title

Grade

Education and training courses attended:

DATE INSTITUTE COURSE QUALIFICATIONS

Membership category applied for Approx hours worked in C/Care

Member, is for a full time person working within the Critical Care area or someone who is on a formal rotation to a Critical Care Area- £ 36.00

Associate, would be someone who spends a significant time involved in critical care. (Part – time or occasional). This level is open to all disciplines of staff - £ 24.00

Student is a full-time person training to work in Critical Care- £ 12.00

Referee

Contact address and telephone number

Referee = Consultant, Critical Care Manager or Member of Society

Signature _____

Date ____ / ____ / ____

Please return application to:
Society of Critical Care Technologist, The Registrar,
C/o Jeffersons Business Centre
6 South Bar Banbury Oxon OX16 9AA
Tel: 01295 273559
Registrar Contact No : 07709 704359 (pending)
www.criticalcaretech.org.uk