Process for Accreditation of Centres for Training in Transplantation Surgery

The application to the Division of Transplantation should include:

- a formal letter by the Chairman stating the wish of the Centre to apply and the areas of transplantation for which accreditation is requested: i.e retrieval, kidney, pancreas, liver, small bowel.
- a report regarding the Centre and the Training Programme.

The information must cover the following domains:

1) Faculty (junior and senior)
2) Brief history of the center and general description of surgical activity
3) Number of procedures performed at the center per year per organ (last 10 yrs)
4) Facilities available (Academic, Clinical, Research)
5) Facilities for experimental surgery on large animals and/or microsurgery (available/not available)
6) Access to anatomic dissection facility (available/not available)
7) Brief description of the training setting
8) Number of trained surgeons for a minimum time period of one year in the last 10 yrs
   - Residents
   - Ph D
   - Fellows
   - Visiting (at least one yr)
   - Other (specify)
9 a) Number of surgical procedures per surgeon per organ
9 b) Number of surgical procedures per trainee per organ
10a) Patient and graft survival at 1 year and 5 years
10b) Outcome at 1 year of patients transplanted by trainees.
11) Library
12) Choice of best 20 papers in the last 10 yrs including at least one of the trained surgeons (with I.F. JCR last edition)
13) Grants for scientific projects in the last 5 yrs
14) Courses, lectures and other teaching initiatives in the last 5 yrs
15) Pediatric programs
16) Language in students education
17) Professional destiny of trained surgeon after fellowship/training time

Graphs, tables, reports or any other material that describes the work of Centre and especially its training programme can be included.

c) a fee of 1000 Euros has to be paid to the following account along with the initial application:

Name of the account: UEMS/Section of Surgery
Account number: 001-7195551-70
Name of the Bank: BNP Paribas Fortis
Address of the Bank: Montagne du Parc 3
1000 Brussels
Belgium
IBAN Code: BE60 0017 1955 5170
BIC/SWIFT Code: GEBABEBB
Transfer Text: Accreditation of ............(the name of your center) Transplant Center
amount: 1000,00 Euro

Please note: the Centre to be accredited will also undertake to pay (and preferably organize) for the travel and accommodation expenses of the 2 – 3 assessors visiting the Centre for the Accreditation process