

Application for recognition of prior learning (RPL)

Name

RACGP no.

ACRRM no.

Address

Postcode

Date of birth

Email

Mobile

Phone

Fax

Qualification/s

Primary medical degree

Date

Country

Anaesthesia qualifications

Date

Country

General practice qualifications

Date

Country

Other qualifications

Date

Country

Anaesthetics training

Hospital/practice

Time (weeks) Dates (from) Dates (to)

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Training reports

Please attach –

How does this training meet the learning objectives and training requirements of the Curriculum for general practitioner anaesthesia, sixth edition, 2020?

Copies of all assessment forms from training supervisor/s

Details of any examinations undertaken whilst training.

Current anaesthetic practice

Full	Part-time	No. of years	Dates	—
Cases/year (avg)*				
		GA	Regional	Combined GA/Reg
		LA/Sed	Other	Total
Regional*		Spinal	Epidural	Other (specify)
Type of surgery*				
		General	Orthopaedics	Obstetrics
		Gynaecology	Urology	ENT
		Ophthalmology	Vascular	Other
		Paediatric anaesthesia (<10)	Minimum age (years)	
		Elective	Emergency	

*Please indicate numbers,
even if approximate

Previous anaesthetic practice 1 (if different from current)

Location

Full	Part-time	No. of years	Dates	—
Cases/year (avg)*				
		GA	Regional	Combined GA/Reg
		LA/Sed	Other	Total
Regional*		Spinal	Epidural	Other (specify)
Type of surgery*				
		General	Orthopaedics	Obstetrics
		Gynaecology	Urology	ENT
		Ophthalmology	Vascular	Other
		Paediatric anaesthesia (<10)	Minimum age (years)	
		Elective	Emergency	

*Please indicate numbers,
even if approximate

Previous anaesthetic practice 2 *(if different from current)*

Location

Full	Part-time	No. of years	Dates	—
Cases/year (avg)*			Regional	Combined GA/Reg
		GA		
		LA/Sed	Other	Total
Regional*		Spinal	Epidural	Other (specify)
Type of surgery*				
		General	Orthopaedics	Obstetrics
		Gynaecology	Urology	ENT
		Ophthalmology	Vascular	Other
		Paediatric anaesthesia (<10)	Minimum age (years)	
		Elective	Emergency	

*Please indicate numbers,
even if approximate

Sample logbook

A sample of a log of anaesthesia cases is to be provided along the lines of the proforma from the current anaesthesia practice and the original anaesthesia training.

Details of paediatric anaesthesia experience/training

Please detail ongoing case volume with the details of experience/training using the logbook template at this [link](#). Additional comments can be added in the box below.

Details of epidural skills experience/training

Please detail ongoing case volume with the details of experience/training either in a logbook or below.

Current hospital accreditation(s)

Anaesthesia educational activities undertaken within the last two years

Rural general practice

The applicant must attach evidence of intentions for work in the area of rural general practice in the future, eg FRACGP, FACRRM or enrolment in a general practice training program.

Referees

Dr

Dr

Dr

Ph

Ph

Ph

Email

Email

Email

Signature of applicant

Date

Checklist

Recognition of prior learning (RPL) application form which includes details of all anaesthesia training all positions involving anaesthesia and the work involved and current anaesthesia work

Detailed curriculum vitae

Current AHPRA medical registration and qualification

A sample log of cases which includes information on epidural skills attained and the sample log of paediatric anaesthesia cases

Copies of all assessment forms from training supervisor/s

Copies of details of any examinations undertaken whilst training

Details of the emergency medicine courses completed in the last five years

Evidence of intentions for work in the area of rural general practice in the future

Continuing professional development activities in anaesthesia undertaken during the last two years

The names and email contacts for three referees who have knowledge of your anaesthesia experience

How to lodge this application

This application is to be completed and emailed to the JCCA Secretariat.

Email: jcc@racgp.org.au

For more information email jcc@racgp.org.au

Note: It is advisable to save the completed version of this application form to your documents library.