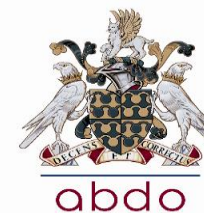


PERSONAL CLINICAL EXPERIENCE HOURS CHART for Trainee Contact Lens Opticians

TCLO ABDO Number



Whilst preparing for the assessments of the Certificate in Contact Lens Practice, Trainee Contact Lens Opticians [TCLO] are required to gain the practical experience as follows -

- a minimum of 1 day per week (or equivalent) throughout their training period and until qualification.
- a minimum of 224 hours in total, before they may enter the Contact Lens Practical Examination.

This chart is to be used to record the detail of the TCLO's personal clinical experience hours and will be required to be presented if applying for the Supplementary Supervisor registration after the Initial Personal Clinical Experience Period - and Contact Lens Practical Examination application.

PERSONAL CLINICAL EXPERIENCE HOURS CHART							
COLUMN 1				COLUMN 2			
Date	Patient contact hours	Signature of Supervisor involved	Supervisor name[printed]	Date	Patient contact hours	Signature of Supervisor involved	Supervisor name[printed]
				Patient Contact Hours Total		CARRIED FORWARD from COLUMN 1	
Patient Contact Hours Total		CARRY FORWARD TO COLUMN 2		Patient Contact Hours Total		CARRY FORWARD TO COLUMN 3	

PERSONAL CLINICAL EXPERIENCE HOURS CHART

COLUMN 3				COLUMN 4			
Date	Patient contact hours	Signature of Supervisor involved	Supervisor name[printed]	Date	Patient contact hours	Signature of Supervisor involved	Supervisor name[printed]
Patient Contact Hours Total		CARRIED FORWARD from COLUMN 2		Patient Contact Hours Total		CARRIED FORWARD from COLUMN 3	
Patient Contact Hours Total		CARRY FORWARD TO COLUMN 4		Patient Contact Hours Total		CARRY FORWARD TO COLUMN 5	

PERSONAL CLINICAL EXPERIENCE HOURS CHART

COLUMN 5				COLUMN 6			
Date	Patient contact hours	Signature of Supervisor involved	Supervisor name[printed]	Date	Patient contact hours	Signature of Supervisor involved	Supervisor name[printed]
Patient Contact Hours Total		CARRIED FORWARD from COLUMN 4		Patient Contact Hours Total		CARRIED FORWARD from COLUMN 5	
Patient Contact Hours Total		CARRY FORWARD TO COLUMN 6		Patient Contact Hours Total		CARRY FORWARD TO COLUMN 7	

PERSONAL CLINICAL EXPERIENCE HOURS CHART

COLUMN 7				COLUMN 8			
Date	Patient contact hours	Signature of Supervisor involved	Supervisor name[printed]	Date	Patient contact hours	Signature of Supervisor involved	Supervisor name[printed]
Patient Contact Hours Total		CARRIED FORWARD from COLUMN 6		Patient Contact Hours Total		CARRIED FORWARD from COLUMN 7	
Patient Contact Hours Total		CARRY FORWARD TO COLUMN 8		Patient Contact Hours Total		CARRY FORWARD TO NEW CHART	