ST VINCENT'S PRIVATE COMMUNITY HOSPITAL
GRIFFITH

Request for Theatre Observation Only Privileges

Requesting VMO:

VMO Signature: Date:

Visitor Details

Visitor Type: ❒ VISITING SURGEON ❒ STUDENT

❒ OTHER *please specify*……..……..

Visitor Name:

Procedure/s to be observed:

Observation Date/s:

Do you have any other visitor/s booked on this date? ❒ YES ❒ NO

If yes, please provide visitor name/s:

Please ensure your patient is aware there will be visiting medical practitioners observing in theatre.

St Vincent's Private Community Hospital Griffith GM/DCS Approval

I wish to confirm that this request is approved for *observational privileges only*, under your strict supervision.

Signature: *Date:*

Please note:

- *Request is to be in accordance with the St Vincent's Private Community Hospital Griffith Visitors to the Operating Theatre Policy.*
- *A maximum of two visitors per theatre will be allowed at any one time.*
- *Visitors to theatre are reminded that photography in the operating theatre environment is prohibited.*
- *Access requirements for the visitors are arranged through the St Vincent's Private Community Hospital Griffith Manager of Perioperative Services, telephone 02 6966 8381 or 0484 328 914*

Distribute approval to: ❒ *Requesting VMO*
❒ *Manager Perioperative Services*
❒ *Perioperative Clinical Educator*

Please email this form to Perioperative Manager: emily.christie@svha.org.au