**A logo with blue and green colors

Description automatically generated**



Advanced Training in Clinical EmbryologyLOGBOOK

Approved byThe European Society of Human Reproduction and Embryology (ESHRE)

and The European Board and College of Obstetrics & Gynaecology (EBCOG)

**TO BE COMPLETED EVERY YEAR OF TRAINING**

**AND BE AVAILABLE THROUGHOUT THE ASSESSMENT**

**AT THE END OF TRAINING THE COMPLETED LOGBOOK SHOULD BE**

**SENT TO ATCE CERTIFICATION COMMITTEE**

!!! Other logbooks are also allowed:

* If training was started between January 2022 and July 2024.
* If a national logbook is in use covering most of the ESHRE modules.

Trainee's name and surname (capital letters):

Click or tap here to enter text.

Tutor's name and surname (capital letters):

Click or tap here to enter text.

**Dates of beginning and provisional end of the training**:

From Click or tap to enter a date. until Click or tap to enter a date.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Year** | **Beginning of training** | **End of**  **training** | **Date of signature** | **Tutor's signature** |
| Fourth (4) | Click or tap to enter a date. | Click or tap to enter a date. | Click or tap to enter a date. |  |
| Fifth (5) | Click or tap to enter a date. | Click or tap to enter a date. | Click or tap to enter a date. |  |
| Sixth (6) | Click or tap to enter a date. | Click or tap to enter a date. | Click or tap to enter a date. |  |
| Optional | Click or tap to enter a date. | Click or tap to enter a date. | Click or tap to enter a date. |  |

**Name and address of training departments / laboratories:**

|  |  |  |
| --- | --- | --- |
| **Department / Laboratory** | **Beginning of training** | **End of training** |
| Click or tap here to enter text. | Click or tap to enter a date. | Click or tap to enter a date. |
| Click or tap here to enter text. | Click or tap to enter a date. | Click or tap to enter a date. |
| Click or tap here to enter text. | Click or tap to enter a date. | Click or tap to enter a date. |
| Click or tap here to enter text. | Click or tap to enter a date. | Click or tap to enter a date. |

**TARGETS FOR THE FOURTH (4) YEAR OF TRAINING**

Description by Tutor of what is expected in terms of knowledge, technical skills and fulfilment of tasks at the end of this year of training.  
Tutor can appoint several Trainers to train the Trainee in specific modules.

**To be completed at the beginning of the year of training.**

Date: Click or tap to enter a date.

**KNOWLEDGE :**Click or tap here to enter text.

**TECHNICAL SKILLS :**Click or tap here to enter text.

**TASKS :**Click or tap here to enter text.

**TARGETS FOR THE FIFTH (5) YEAR OF TRAINING**

Description by Tutor of what is expected in terms of knowledge, technical skills and fulfilment of tasks at the end of this year of training.  
Tutor can appoint several Trainers to train the Trainee in specific modules.

**To be completed at the beginning of the year of training.**

Date: Click or tap to enter a date.

**KNOWLEDGE :**Click or tap here to enter text.

**TECHNICAL SKILLS :**Click or tap here to enter text.

**TASKS :**Click or tap here to enter text.

**TARGETS FOR THE SIXTH (6) YEAR OF TRAINING**

Description by Tutor of what is expected in terms of knowledge, technical skills and fulfilment of tasks at the end of this year of training.  
Tutor can appoint several Trainers to train the Trainee in specific modules.

**To be completed at the beginning of the year of training.**

Date: Click or tap to enter a date.

**KNOWLEDGE :**Click or tap here to enter text.

**TECHNICAL SKILLS :**Click or tap here to enter text.

**TASKS :**Click or tap here to enter text.

**EVALUATION OF LABORATORY AND TECHNICAL SKILLS**

Every target defined in the ESHRE recommendation on training and assessment has an expected competence level that must be achieved. The level of competence ranges from observation (level 1) to independent practice (level 4 or 5).

***Many of the targets do not require an assessment of every competence level and shaded boxes indicate these.***

***Certain targets do not require the Trainee to be level 5 (Independent). These are identified by a grey box. The open targets require your Tutor to check your competence and sign you off.***

SCORING SYSTEM:

1: Passive attendance, assistance  
2: Needs close supervision  
3: Able to carry out procedure under some supervision  
4: Able to carry out procedure without supervision  
5: Able to supervise and teach the procedure

The general aim is to get at least mark 4.

1. **CELLS, TISSUE AND EMBRYO CRYOBANKING**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Target | Trainee marks (agreed with Tutor) achieved level of competence after each year of training. | | | | | Tutor/Trainer’s signature after each year of training (knowledge acquired and verified). | |
|  | 1 | 2 | 3 | 4 | 5 | Name / Sign | Date |
| Testicular tissue cryopreservation and thawing |  |  |  |  |  |  | Click or tap to enter a date. |
| Ovarian tissue cryopreservation and thawing \* |  |  |  |  |  |  | Click or tap to enter a date. |
| Activities in cryobank (safety, organisation of samples, documentation, quarantine, material transportation, removal of unused material) |  |  |  |  |  |  |  |
| Troubleshooting the cryobank  e.g. what to do if a cryovessel fails, samples are damaged, the wrong embryo is discarded, etc. |  |  |  |  |  |  | Click or tap to enter a date. |

|  |
| --- |
| Comments:  Click or tap here to enter text. |

|  |
| --- |
| **Clinic:** Click or tap here to enter text.  **Date:**Click or tap to enter a date.  **Trainee’s signature: Tutor's signature:** |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*this module is expected for trainees trained in MAR centres where ovarian tissue cryopreservation is practiced

1. **REPRODUCTIVE CELLS AND TISSUE MATURATION *IN VITRO* (IVM) – optional\***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Target | Trainee marks (agreed with Tutor) achieved level of competence after each year of training. | | | | | Tutor/Trainer’s signature after each year of training (knowledge acquired and verified). | |
|  | 1 | 2 | 3 | 4 | 5 | Name / Sign | Date |
| IVM cycles - oocytes before trigger\* | ☐ |  |  |  |  |  | Click or tap to enter a date. |
| IVM cycles - oocytes after trigger | ☐ | ☐ | ☐ | ☐ | ☐ |  | Click or tap to enter a date. |
| IVM of testicular sperm | ☐ |  |  |  |  |  | Click or tap to enter a date. |
| Troubleshooting IVM | ☐ |  |  |  |  |  | Click or tap to enter a date. |

|  |
| --- |
| Comments:  Click or tap here to enter text. |

|  |
| --- |
| **Clinic:** Click or tap here to enter text.  **Date:**Click or tap to enter a date.  **Trainee’s signature: Tutor's signature:** |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*this module is expected for trainees trained in MAR centres where IVM is practiced

1. **MICROMANIPULATION ON EMBRYOS (BIOPSY) AND GENETIC ANALYSIS – optional\***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Target | Trainee marks (agreed with Tutor) achieved level of competence after each year of training. | | | | | Tutor/Trainer’s signature after each year of training (knowledge acquired and verified). | |
|  | 1 | 2 | 3 | 4 | 5 | Name / Sign | Date |
| Biopsy or other micromanipulation interventions on embryos | ☐ |  |  |  |  |  | Click or tap to enter a date. |
| Troubleshooting in biopsy | ☐ |  |  |  |  |  | Click or tap to enter a date. |
| Preparation of biopsied cells for genetic analysis /tubing | ☐ |  |  |  |  |  | Click or tap to enter a date. |
| Troubleshooting in tubing | ☐ |  |  |  |  |  | Click or tap to enter a date. |
| Cytogenetic analysis of (karyotyping, FISH) | ☐ |  |  |  |  |  | Click or tap to enter a date. |
| Molecular genetic analysis of biopsied cells (RT-PCR, array CGH, NGS) | ☐ |  |  |  |  |  | Click or tap to enter a date. |

|  |
| --- |
| Comments:  Click or tap here to enter text. |

|  |
| --- |
| **Clinic:** Click or tap here to enter text.  **Date:**Click or tap to enter a date.  **Trainee’s signature: Tutor's signature:** |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*this module is expected for trainees trained in MAR centres where embryo biopsy for PGT is practiced

1. **SETTING UP A NEW LABORATORY**

**(entire duration of training; to be up-dated yearly)**

**(PARTICIPATION IN SETTING-UP OR RENOVATION OF ART LABORATORY)**

**Example:** Participation with know-how in setting-up of new ART laboratory:"InVitroLive", Lisbone, Portugal, April – June 2020.

**The number is not limited**

1. Click or tap here to enter text.

2. Click or tap here to enter text.

3. Click or tap here to enter text.

4. Click or tap here to enter text.

5. Click or tap here to enter text.

Click or tap here to enter text.

1. **PREPARATION OF LABORATORY**

**RESULTS AND COUNSELLING**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Target | Trainee marks (agreed with Tutor) achieved level of competence after each year of training. | | | | | Tutor/Trainer’s signature after each year of training (knowledge acquired and verified). | |
|  | 1 | 2 | 3 | 4 | 5 | Name / Sign | Date |
| Writing, interpreting and communicating ART laboratory reports with other specialists (e.g. oncologists, endocrinologists, urologists) | ☐ | ☐ | ☐ | ☐ | ☐ |  | Click or tap to enter a date. |
| Understanding reports from hormonal, serological, microbiological, cyto-histological laboratories | ☐ |  |  |  |  |  | Click or tap to enter a date. |
| Communicating ART lab reports with patients | ☐ | ☐ | ☐ | ☐ | ☐ |  | Click or tap to enter a date. |
| Communicating with auditors / national regulators | ☐ | ☐ | ☐ | ☐ |  |  | Click or tap to enter a date. |

|  |
| --- |
| Comments:  Click or tap here to enter text. |

|  |
| --- |
| **Clinic:** Click or tap here to enter text.  **Date:**Click or tap to enter a date.  **Trainee’s signature: Tutor's signature:** |

1. **MANAGING ART LABORATORY   
   AND CRYOBANK**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Target | Trainee marks (agreed with Tutor) achieved level of competence after each year of training. | | | | | Tutor/Trainer’s signature after each year of training (knowledge acquired and verified). | |
|  | 1 | 2 | 3 | 4 | 5 | Name / Sign | Date |
| Organisation of work in the lab |  |  |  |  |  |  | Click or tap to enter a date. |
| Leadership of an IVF lab (including managing different personalities) |  |  |  |  |  |  | Click or tap to enter a date. |
| Working according to standards and guidelines |  |  |  |  |  |  | Click or tap to enter a date. |
| Managing budgets |  |  |  |  |  |  | Click or tap to enter a date. |
| Method validation |  |  |  |  |  |  | Click or tap to enter a date. |
| Equipment validation |  |  |  |  |  |  | Click or tap to enter a date. |
| Lab environment control |  |  |  |  |  |  | Click or tap to enter a date. |
| Managing of nonconformities |  |  |  |  |  |  | Click or tap to enter a date. |
| Risk management |  |  |  |  |  |  | Click or tap to enter a date. |
| Managing database of lab and clinical data |  |  |  |  |  |  | Click or tap to enter a date. |
| Controlling lab KPIs |  |  |  |  |  |  | Click or tap to enter a date. |
| Managing registers (donors, cryobank, MAR cycles) |  |  |  |  |  |  | Click or tap to enter a date. |
| Continuous quality improvement |  |  |  |  |  |  | Click or tap to enter a date. |

|  |
| --- |
| Comments:  Click or tap here to enter text. |

|  |
| --- |
| **Clinic:** Click or tap here to enter text.  **Date:**Click or tap to enter a date.  **Trainee’s signature: Tutor's signature:** |

1. **RESEARCH, STATISTICS AND AUDIT**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Target | Trainee marks (agreed with Tutor) achieved level of competence after each year of training. | | | | | | Tutor/Trainer’s signature after each year of training (knowledge acquired and verified). | |
|  | | 1 | 2 | 3 | 4 | 5 | Name / Sign | Date |
| Conducting research | |  |  |  |  |  |  | Click or tap to enter a date. |
| Statistical analysis | |  |  |  |  |  |  | Click or tap to enter a date. |
| Conducting clinical laboratory audit | |  |  |  |  |  |  | Click or tap to enter a date. |

|  |
| --- |
| Comments:  Click or tap here to enter text. |

|  |
| --- |
| **Clinic:** Click or tap here to enter text.  **Date:**Click or tap to enter a date.  **Trainee’s signature: Tutor's signature:** |

1. **TEACHING**

**(entire duration of training; to be up-dated yearly)**

**(TEACHING AND TRAINING OF ART PROCEDURES)**

**Examples:**

P. Smith: »New technique for ovarian tissue cryopreservation« lecture for colleagues, 12. 3. 2020.

P. Smith: training in ART and mentoring L. Johnson, embryologist from »LiveInVitro, Lisbone, Portugal (1. 3. 2019 – 1. 3. 2020).

**The number is not limited**

1. Click or tap here to enter text.

2. Click or tap here to enter text.

3. Click or tap here to enter text.

4. Click or tap here to enter text.

5. Click or tap here to enter text.

Click or tap here to enter text.

1. **ETHICAL AND LEGAL ASPECT**

**(entire duration of training; to be up-dated yearly)**

**(PREPARED DOCUMENTS RELATED TO THE ETHICAL OR LEGAL ASPECT)**

**Examples:**

P. Smith: »Annual report for 2019 for the national authority about reproductive cells, tissue and embryos« 1. 3. 2020

P. Smith: »Annual report for 2019 for the national authority about adverse events and reactions« 1. 3. 2020

P. Smith: Application for appraisal of planned research »Is there any benefit of assisted hatching on vitrified/warmed embryos on live birth rate?« by the Ethical Committee including consent form for patients participating in the study. 1. 3. 2020

**The number is not limited**

1. Click or tap here to enter text.

2. Click or tap here to enter text.

3. Click or tap here to enter text.

4. Click or tap here to enter text.

5. Click or tap here to enter text.

Click or tap here to enter text.

1. **CONTINUING PROFESSIONAL**

**DEVELOPMENT (CPD)**

**(BY USING** [**ESHRE CPD PLATFORM**](https://enmcp.eshre.eu/pages/enmcp-credits.php) **WHERE ALL CPD ACTIVITIES DURING ADVANCED TRAINING SHOULD BE INCLUDES)**

[Here](https://enmcp.eshre.eu/page/eshre-cpd-credit-system) you'll find more information about the ESHRE CPD-credit system.

**NUMBER OF PROCEDURES PERFORMED DURING THE TRAINING**

The number of procedures carried out must be traceable in patient records

for the purpose of verification during the assessor visit.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| PROCEDURES | YEAR  4 | YEAR  5 | YEAR  6 | TOTAL |
| Basic semen analysis  *(min 50 per year)* | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Extended semen analysis (e.g. DNA fragmentation, HBA, etc.) | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Ejaculated sperm preparation  *(min 50 per year)* | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Preparation of frozen / thawed sperm *(min 10 per year)* | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Preparation of viral-positive semen | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Preparation of retrograde ejaculation sample | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Preparation of totally immotile sperm (including viability testing, e g. HOS) | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Preparation of epidydimal / testicular sperm for ART  *(min 5 per year)* | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Conventional IVF  *(min 20 per year)* | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| ICSI with ejaculated sperm  *(min 30 per year)* | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| ICSI with testicular / epidydimal sperm *(min 5 per year)* | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| ICSI with artificial oocyte activation | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Cycles with evaluated oocyte fertilisation *(min 50 per year)* | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Cycles with evaluated embryo morphology  *(min 50 per year)* | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Embryo transfer  *(min 30 per year)* | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Sperm cryopreservation  *(min 10 per year)* | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Sperm thawing | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Oocyte vitrification | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Embryo cryopreservation – vitrification *(min 30 per year)* | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Oocyte, embryo thawing / warming  *(min 20 per year)* | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Testicular tissue cryopreservation  (*min 5 per year)* | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Testicular tissue thawing | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Ovarian tissue cryopreservation | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Ovarian tissue thawing | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Preparation of frozen material for transportation | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Cycles with assisted hatching | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Cycles with embryo / blastocyst biopsy | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Cycles with artificial collapsing of blastocysts before vitrification | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| IVM cycles - oocytes before hCG | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| IVM cycles - oocytes after hCG | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| IVM of testicular sperm | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Active participation in the consultation between infertility specialist and patients about the quality and number of embryos for ET or cryo | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Written or rewritten SOPs | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Lab KPIs reports | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Conduction or participation in ART laboratory audit | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

**ASSESSMENT OF KNOWLEDGE, ATTITUDES AND FULFILMENT OF TASKS**

Scoring system :

A = Excellent  
B = Sufficient  
C = Weak  
D = Unacceptable  
E = Not applicable

Assessment of fulfillment of the targets defined on pages 3 – 9

|  |  |  |  |
| --- | --- | --- | --- |
| **YEAR** | **FOURTH (4)** | **FIFTH (5)** | **SIXTH (6)** |
| Integrated knowledge | Choose an item. | Choose an item. | Choose an item. |
| Reaching of appropriate decisions; collection and interpretation of data | Choose an item. | Choose an item. | Choose an item. |
| Motivation, sense of duty, discipline, punctuality | Choose an item. | Choose an item. | Choose an item. |
| Governance | Choose an item. | Choose an item. | Choose an item. |
| Technical skills | Choose an item. | Choose an item. | Choose an item. |
| Organisational skills | Choose an item. | Choose an item. | Choose an item. |
| Administrative tasks (medical files, correspondence, etc.) | Choose an item. | Choose an item. | Choose an item. |
| Ethics | Choose an item. | Choose an item. | Choose an item. |
| Communication with patients | Choose an item. | Choose an item. | Choose an item. |
| Communication with medical and other staff | Choose an item. | Choose an item. | Choose an item. |
| Attendance and active participation in staff meetings | Choose an item. | Choose an item. | Choose an item. |
| Attendance and active participation in annual senior management review | Choose an item. | Choose an item. | Choose an item. |
| Scientific interest | Choose an item. | Choose an item. | Choose an item. |
| Scientific activity | Choose an item. | Choose an item. | Choose an item. |

Date : Click or tap to enter a date.

|  |  |
| --- | --- |
| **Signature of Trainee:** | **Signature and name of Tutor :** |

**CUMULATIVE LIST OF SCIENTIFIC MEETINGS  
AND COURSES ATTENDED BY THE TRAINEE  
(entire duration of training; to be up-dated yearly)\***

**Example:** Joint ESHRE Annual Meeting, Paris, France, 27th – 30th June 2021.

**The number is not limited**

1. Click or tap here to enter text.

2. Click or tap here to enter text.

3. Click or tap here to enter text.

4. Click or tap here to enter text.

5. Click or tap here to enter text.

Click or tap here to enter text.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\* Certificate of attendance has to be provided**

**CUMULATIVE LIST OF ABSTRACTS PRESENTED**

**AT SCIENTIFIC MEETINGS  
(entire duration of training; to be up-dated yearly)**

**(A MINIMUM of 1 as 1st author is required)\***

**Example :** R. LEGAS : "Severe auto-immune dermatologic complications during pregnancy." Poster. Symposium "Pregnancy and the immune system", Besançon, France, 17-18.06.2000.

**The number is not limited**

1. Click or tap here to enter text.

2. Click or tap here to enter text.

3. Click or tap here to enter text.

4. Click or tap here to enter text.

5. Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\* Abstracts has to be provided**

**CUMULATIVE LIST OF PEER REVIEWED PUBLISHED**

**PAPERS IN INTERNATIONAL JOURNALS  
(entire duration of training; to be up-dated yearly)**

**(A MINIMUM of 1 as 1st author is required) \***

**The number is not limited**

1. Click or tap here to enter text.

2. Click or tap here to enter text.

3. Click or tap here to enter text.

4. Click or tap here to enter text.

5. Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\* Published manuscript should be provided**

**CUMULATIVE LIST OF PEER REVIEWED  
PUBLISHED PAPERS IN NATIONAL JOURNALS  
(entire duration of training; to be up-dated yearly)\***

**The number is not limited**

1. Click or tap here to enter text.

2. Click or tap here to enter text.

3. Click or tap here to enter text.

4. Click or tap here to enter text.

5. Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\* Published manuscript should be provided**