NAME: **IMC No** Activity Description Date **Credits** Category Location 1st May 2021 Internal **Grand Rounds** topics Discussed Name of hospital 1 Name of hospital 8th May 2021 Internal **Grand Rounds** topics discussed 1 1st June 2021 **Grand Rounds** 1 Internal 8th June 2021 1

Internal

Grand Rounds

Professional Competence Scheme - Internal Credits Verification

Total 4

I confirm that I have attended all the above Internal Meetings:	
Signed:	ame:
I confirm that Doctor X attended all the above internal Meetings	
Signed:	inical Director / Head of Department
Name:	
Please Print:	