

EBMT- ESH Outreach Survey for high income* countries



1. Your contact details

Name: Address:
 E-mail:
 EBMT CIC: Fax:

Does your centre perform: **Allo transplants?**: Yes No City: Postcode:
Auto transplants?: Yes No Country:

For EBMT members: Who pays your membership fee? I do / My hospital / My university / A corporate supporter / Other: please specify:

2. Activities

- | | | | |
|--|--------|---|--------|
| a. Has your centre participated in the EBMT Activity Survey (the Gratwohl Survey)? | Yes No | e. Has your centre submitted abstracts to the Annual Meeting? | Yes No |
| b. Has your centre participated in an EBMT study / clinical trial? | Yes No | f. Have you participated in any EBMT / ESH training courses? | Yes No |
| c. Have you collaborated with an EBMT working party? | Yes No | g. Have you participated in any other ESH activities? | Yes No |
| d. Did you attend the last EBMT Annual Meeting? | Yes No | h. Do you have the EBMT-ESH handbook? | Yes No |

3. Evaluation of outreach activities

We need your help in focusing our outreach activities.

a). Areas that your centre would be willing to offer support in:

Please specify the type of support you feel your centre may be able to provide:

Activity		Support?	
I.	Clinical training	Medical (junior)	Yes No
		Medical (senior):	Yes No
		Nursing:	Yes No
I.	Technical training for diagnosis/support:	Yes	No
II.	Technical training in new developments:	Yes	No
III.	Basic science training:	Yes	No
IV.	Statistical training and data management support:	Yes	No
V.	Help in preparation for accreditation procedures:	Yes	No
VI.	Support for participation in clinical trials:	Yes	No
VII.	Provision of drugs:	Yes	No

b). What other forms of support could your centre offer?

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*As defined by the World Bank list of economies (July 2002). Ref.: www.worldbank.org/data/datatopic/class.htm

c). **Areas the EBMT / ESH may be able to help with:**

Which areas do you think the EBMT / ESH should focus its outreach activities on:
(Rating: 1 = most important, 4 = least important)

Activity:	Rating
I. Subsidised subscriptions to medical journals	
II. Grants to attend training courses:	
III. Travel grants to attend working party meetings	
IV. Travel grants to present abstracts at annual meetings:	

d). **Other suggestions for EBMT / ESH-supported outreach activities:**

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4. Twin Centres project

This proposal, if desired, would link an established centre with a unit in a middle or low income country.* The “twins” develop joint projects e.g. educational exchanges, joint studies and provide mutual support and guidance.

a. **Previous experience**

I. **Has your centre / individuals in your centre been involved in a similar scheme?** Yes No (please go to part b directly)

II. **Partner institution:**

III. **Dates of partnership:** From: To:

IV. **Organising association (if applicable):**

V. **Please specify activities undertaken:**

VI. **How would you rate the experience:** Extremely positive Satisfactory Unsatisfactory

VII. **Additional comments:**

b. **Future interest**

I. **Are you interested in becoming a Twin Centre?** Yes No

II. **Is there a particular centre/country you would be interested in linking with?**

III. **Please specify in which languages you can work?**

IV. **What types of activities would you like to be involved in?**

**Please return by fax to the EBMT Secretariat: 00-34-93-453-1263
 or e-mail: info@ebmt.org**

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