**THE ROYAL COLLEGE OF CHIROPRACTORS**

**PAIN FACULTY APPLICATION FORM 2019/20**

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|  | 1. **PERSONAL DETAILS** | | | | | | | | | | | | | | | | | |
|  | First name: | |  | | | | | | | | Middle initial/s: | | | | | |  | |
|  | Surname: | |  | | |  | | | | |  | | | | | |  | |
|  | Email address: | | | | |  | | | | | | | | | | |  | |
|  | Level of Faculty membership sought:  (Circle as applicable) | | | | | |  |  |  | | --- | --- | --- | | □ ASSOCIATE | □ LICENTIATE (LRCC) | □ FELLOW (FRCC) | |  | □ MEMBER (MRCC) | □ UNSURE | | | | | | | | | | | |  | |
|  | **2. ADDITIONAL FORMAL MODULES/QUALIFICATIONS THAT MAY BE RELEVANT TO THE PAIN FACULTY**  **\*PLEASE APPEND FULL COURSE DETAILS INCLUDING MODULE TITLES/SUMMARIES AVAILABLE, AND PROOF OF COMPLETION\*** | | | | | | | | | | | | | | | |  | |
|  | **Qualification**  (e.g. PhD, MSc, PGDip, PGCert) | | | **Subject** | | | | | | **University** | | | | **Date**  **graduated/expected** | | |  | |
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|  | **3. PROFESSIONAL QUALIFICATIONS THAT MAY BE RELEVANT TO THE PAIN FACULTY**  **\*PLEASE APPEND FULL COURSE DETAILS IF AVAILABLE, AND CERTIFICATE OR OTHER PROOF OF COMPLETION\*** | | | | | | | | | | | | | | | | | |
|  | **Qualification**  (e.g. Dry Needling, BMAS Diploma) | | | | | | | | | **Awarding Body** | | | | **Date awarded/expected** | | |  | |
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|  | **THE FOLLOWING SECTIONS (4-6) ARE OPTIONAL AND PROVIDE THE OPPORTUNITY TO GAIN ADDITIONAL M-LEVEL CREDIT-EQUIVALENTS FOR OTHER ACTIVITIES AND ACHIEVEMENTS. THESE SECTIONS ARE LESS RELEVANT IF YOU HAVE ADDITIONAL FORMAL OR PROFESSIONAL QUALIFICATIONS.**  **4. REFLECTIVE CPD, IF APPLICABLE** | | | | | | | | | | | | | | | | | |
|  | Please list those CPD events/activities for which you wish to claim M-level credits. If claiming credits in this section, you must attach a completed supplementary [Reflective CPD Form](https://rcc-uk.org/wp-content/uploads/2016/10/Reflective-CPD-form_2016_7.docx)  for each CPD event/activity. | | | | | |  | | | | | | | | | |  | |
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|  | **5. OTHER PROFESSIONAL ACTIVITY, IF APPLICABLE** | | | | | | | | | | | | | | | |  | |
|  | Provide details of other significant professional experience or activity, e.g. society membership, committee work, clinical audit, production of patient information, journal subscriptions etc, in the field of pain, including dates where appropriate.  (attach additional information as necessary) | | | | | | | |  | | | | | | | |  | |
|  | **6. PUBLICATIONS** | | | | | | | | | | | | | | | |  | |
|  | List below the references of any peer-reviewed or other articles you have published in the field of pain. | | | | | | | | | | | | | | | |  | |
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|  | **7. DECLARATION** | | | | | | | | | | | | | | |  | |
|  | * I wish to join the Royal College of Chiropractors’ Pain Faculty (RCCPF) * I declare that the information provided above is a true record * I understand that if admitted at Licentiate, Member or Fellowship level, my details (name, contact details, membership level and a link to my GCC Register entry) will be made publically available via the Pain Faculty Register on the RCC website. My preferred email address and phone number for this | | | | | | | | | | | | | | |  | |
|  | | purpose are: | | | Email | | | |  | | | Tel. |  | | |  | |
|  | * Please collect payment via my existing Direct Debit mandate □ **OR** please email me an electronic invoice for online card payment □ (tick box as appropriate)   **N.B. If you are not a current Licentiate, Member or Fellow of The Royal College of Chiropractors, a general membership application form must accompany this faculty application form.** | | | | | | | | | | | | | | |  | |
|  | Signature:  (can be typed if submitting form electronically) | | | | | | |  | | | | | | Date: |  |  | |
|  |  | | | | | | | | | | | | | | |  | |
|  | **Please return your completed form to:**  Membership Officer  The Royal College of Chiropractors  Chiltern Chambers  St Peters Avenue  Reading RG4 7DH  United Kingdom  Email: admin@rcc-uk.org  Tel: +44 (0)118 946 9727 | | | | | | | | | | | | | | |  | |

**NOTES:**

(1) Use this form to apply for any level of RCC Pain Faculty membership, including Fellowship. Eligibility for Associate Member, Licentiate Member [LRCC (Pain)], Member [MRCC (Pain)] or Fellow [FRCC (Pain)] will be determined by the Court of Electors (Membership Committee), the decision of which is final.

(2) The initial, non-returnable application fee of £50 covers the cost of processing your application plus up to one year's faculty membership (i.e. until the end of the current membership year, which runs to 30th September). An annual membership fee (currently £50) will apply thereafter in addition to normal RCC subscription fee.

(3) Applicants who are existing RCC members will normally be awarded Associate Membership of the Faculty without delay, and will then be considered for Licentiate Membership, Full Membership or Fellowship of the Faculty, as appropriate, at the next biannual meeting of the college's Court of Electors.

(4) Information about how the level of membership offered to an applicant is determined is available at <http://rcc-uk.org/?p=831>

(5) The benefits of membership of the RCC are outlined in our membership brochure at <http://bit.ly/membership-brochure-2019>

**APPENDIX – RCCPF RELEVANCE STATEMENT**

When pursuing membership of a specialist faculty, the activity for which you are claiming credit must be relevant to that faculty. Relevance, in the context of the RCC’s Pain Faculty, refers to study, research and/or other activity that is concerned with one or more of the following topics:

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| **General**   * Anatomy and physiology of pain pathways * Acute vs chronic pain * Psychological and social mechanisms in pain * Designing, reporting and interpreting clinical research studies about treatments for pain * Ethical standards in pain management and research | **Assessment of Pain**   * Pain measurement * Placebo and pain * Investigations for pain (nerve function studies and imaging) * Epidemiology * Psychosocial and cultural aspects of pain * Sex and gender issues in pain |
| **Clinical states**   * Taxonomy of pain syndromes * Chronic pain * Spinal pain (neck, mid back & lower back) * Radicular pain (cervical or lumbar) * Musculoskeletal pain * Headache & Facial pain * Nerve damage (Neuropathic pain & complex regional pain syndromes) * Other cases   + - Paediatric pain     - Geriatric pain     - Post operative pain     - Cancer pain     - Visceral pain | **Treatment of pain**   * Physical therapy * Pharmacology * Rehabilitation * Psychological treatments * Stimulation produced analgesia (including dry needling) * In the workplace * Complimentary therapies |