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| Witness testimony for Element 5.1.3“Choose, fits and orders rigid lenses” INSERTION AND REMOVAL |

Name of trainee: Date:

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| Initial box to indicate what has been completed* I observed the trainee insert and remove a rigid lens to a patient’s eye using a safe technique.
* Their handling technique demonstrated the following:
* Appropriate hygiene (including but not limited to; hand hygiene, correct solutions used, expiry dates of solution and lens checked, solution tops replaced immediately)
* Appropriate patient instructions (including, but not limited to; explanation of likely contact lens sensation, looking down after insertion to reduce sensation, gaining consent to hold lids, fixation instruction for insertion)
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| Additional comments |
| Brief summary of insertion and removal techniques used (completed by trainee) |

Name of witness (block capitals) \_ Position of witness Witness GOC No.

Witness signature

Witness email and postal addresses