

Certified Eye Bank Technician Exam Practical Performance Competency Verification

Candidates applying to take the Certified Eye Bank Technician Exam must demonstrate proficiency in the recovery of corneoscleral discs by performing an in situ or laboratory excision witnessed by a Technician Trainer and Medical Director. This form must be completed and signed by the Technician Trainer, Medical Director, and Executive Director. Once the excision has been performed and the form has been completed, the form should be uploaded with the CEBT Exam Application.

Ар	plicant Information:	t <u></u>							
-	•	Name (First and Last)	Organization						
Me	dical Director:			<u> </u>					
		Name	Role						
Technician Trainer:									
		Name	Role						
Sele	ect the procedure obs	erved: Laboratory Excision	In Situ Excision						
Note: Any fields that do not apply to the process performed can be skipped but please mark with "N/A" for not applicable. For example if observing the Laboratory Excision, Step #2 will not require initials but should include "N/A". The references in parentheses refer to related sections of the EBAA Procedures Manual. MD Trainer									
	Aseptic Technique		ure impermeable clothing with sterile sleeves/	Initials	Initials				
1.	sterile impermeable g								
2.	Penlight Exam Perform								
3.	The sterile instrument								
4.	The unwrapping of the instruments or sterile								
5.	Non-sterile items wer E1.221)								
6.	The technician succes E1.221)								
7.	The technician succes								
8.	The technician applied or reaching over the s								
9.	The technician succes the sterile field or rea								
10.	The technician irrigate conjunctiva with povice								
11.	All sterile and non-ste sterile field was never								
12.	The technician used so sclera. (E1.130 & E1.2		al of the conjunctiva and the incision through the						
13.		c was carefully and gently transferre without compromising sterility. (E	ed to the vial or viewing chamber containing the I.130 & E1.221)						

Practical Performance Competency Verification Continued

B. Surgical Technique				MD Initials	Trainer Initials
The technician successfully remov E1.221)					
2. The incision through the sclera wi (E1.130 & E1.221)					
3. The scissors were appropriately ir (E1.130 & E1.221)					
4. The technician maintained a corne					
5. During the excision, no significant					
The anterior chamber was mainta E1.221)					
The ciliary body separation was petthe corneoscleral disc. (E1.130 &					
8. The corneoscleral disc was gently cornea. (E1.130 & E1.221)					
9. After the procedure, the technicia					
10. The technician followed the estab manual. (E1.130 & E1.221)					
Comments by Medical Director		Comments by Te	chnician Train	er	_
Medical Director's Recommenda: I meet the requirements outlined in i currently serve as Medical Director fon(date), I observed the aperforming a corneoscleral disc exciseye and have verified, with my initials competently in each area. Based on recommend that this technician be all EBAA CEBT exam. MD Initials:	Technician Trainer's Recommendation On (date), I observed the above technician performing a corneoscleral disc excision on a human donor eye and have verified, with my initials, that he/she performe competently in each area. Based on my direct observation, recommend that this technician be allowed to sit for the EBAA CEBT exam. Trainer Initials:				
All three of the individuals list	ed below confirm the info	ormation above and	l are in suppo	ort of this	s applicatio
Medical Director Signature	Executive Director Sig	nature 7	Technician Traine	er Signatur	re
 Date	 Date	- -	Date	_	