



## Submitted Fellowship/Clinical Visit

*Date Submitted: 18/06/2020*

**Fellowship or Clinical Visit:** Fellowship

**Start Date of Fellowship/Clinical Visit:** 01/02/2021

**End of Fellowship/Clinical Visit:** 31/07/2022

**Name of Submitter:** Simon Clark

**Contact Email Address:** simon.clark@thewaltoncentre.nhs.uk

**Contact Telephone Number:** 01515563340

**Institution for Fellowship:** Walton Centre Liverpool

**Institution Address:** Lower Lane, L97LJ

**Country:** United Kingdom

**City/Town:** Liverpool

**Type of Fellowship/Clinical Visit:** NHS / Public Healthcare

**Aimed at:** Neurosurgeons and Orthopaedic Surgeons

**Salary:** standard SpR grade

**Accommodation:** local available

**Languages:** English

**Clinical Duties of Fellow:** all aspects of adult spinal work

**Research Duties of Fellow:** presentation at local and international level, peer review publications

**Other details for Fellowship/Clinical Visit:** 18 month fellowship rotating through all aspects of adult spinal practice