##### **ANDA-AQCA 2019**

##### **Australian National Diabetes Audit – Australian Quality Clinical Audit*A Quality Initiative of the National Association of Diabetes Centres***

##### **REGISTRATION FORM**

##### **Site name:**

##### Past participation: YES [ ]  NO [ ]  Site number:     (if known)

##### **Site contact:**

##### Position:

Phone:       Email:

**Alternative site contact:**

##### Position:

Phone:       Email:

[ ]  **YES - we wish to participate in ANDA-AQCA 2019**

[ ]  **NO - we DO NOT wish to participate in ANDA-AQCA 2019**

#### If YES, your preferred method of data collection:

#### [ ]  Paper-based data collection form

#### [ ]  Web-based data collection form (REDCap)

#### [ ]  Extract data from in-house database

#### Please send completed Registration Form to:Elspeth LilburnANDA Secretariat

Email: anda@nadc.net.au

## Tel: (03) 9903 0711

Fax: (03) 9903 0069

****If you have any enquiries please do not hesitate to contact the ANDA Secretariat