

You must use this form to record your reflective discussion with another NMC-registered nurse or midwife about your five written reflective accounts. During your discussion you should not discuss patients, service users or colleagues in a way that could identify them unless they expressly agree, and in the discussion summary section below make sure you do not include any information that might identify a specific patient or service user. Please refer to Guidance sheet 1 in How to revalidate with the NMC for further information.

To be completed by the nurse or midwife:

Name:	
NMC Pin:	

To be completed by the nurse or midwife with whom you had the discussion:

Name:	
NMC Pin:	
Email address:	
Professional address including postcode:	
Contact number:	
Date of discussion:	

Short summary of discussion:	
<p>I have discussed five written reflective accounts with the named nurse or midwife as part of a reflective discussion.</p> <p>I agree to be contacted by the NMC to provide further information if necessary for verification purposes.</p>	Signature:
	Date: