



Rules & Regulations

For Higher Surgical Trainees

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THE COLLEGE OF SURGEONS OF HONG KONG

Rules & Regulations

ORDINARY MEMBERSHIP

ELIGIBILITY FOR APPLYING FOR THE ORDINARY MEMBERSHIP

To be eligible for applying for the Ordinary Membership of The College of Surgeons of Hong Kong (MCSHK), applicants must fulfil all the following requirements:

- ✓ **Registered** with The Medical Council of Hong Kong
- ✓ **Completed two years of Basic Surgical Training of the Hong Kong Intercollegiate Board of Surgical Colleges (HKICBSC) with satisfactory performance and proper rotations as prescribed in the Basic Surgical Training Curriculum**
- ✓ **Passed the Membership Examination of HKICBSC (MHKICBSC Examination) held in Hong Kong**
- ✓ **Completed satisfactorily all mandatory courses prescribed in the basic training programme**
- ✓ **Application proposed and seconded by two paid-up College Fellows**

Please refer to the *"Eligibility for Ordinary Membership"* for further details.

APPLICATION

Upon completion of Basic Surgical Training and passing all parts of the Membership Examination of the Hong Kong Intercollegiate Board of Surgical Colleges (MHKICBSC Examination), trainees must apply for Ordinary Membership of The College of Surgeons of Hong Kong (CSHK) before they can enter into Higher Surgical Training.

IMPORTANT REMARK

Being an Ordinary Member of the College shall not by itself carry with it the rights to practise medicine or surgery in Hong Kong unless that Ordinary Member is a registered medical practitioner and/or has complied with the relevant law and regulations of Hong Kong to be lawfully qualified or entitled to do so.

ANNUAL SUBSCRIPTION FEE

Ordinary Members are required to pay subscription fee annually. A surcharge of 30% and 50% will be levied for any late payment after, 31 March and 31 May of the subscription year respectively. The subscription year refers to the year the annual subscription was due. In the event that any Ordinary Member fails to pay his/her annual subscription as well as the overdue surcharge (50% of the subscription) by the end of June, his/her name shall be removed from the College Register upon the final decision of the College Council.

Please refer to the *"Policy on Annual Subscription"* for further details.

HIGHER SURGICAL TRAINING

Higher Surgical Training in the seven surgical specialties (namely Cardiothoracic Surgery, General Surgery, Neurosurgery, Paediatric Surgery, Plastic Surgery, Urology and Vascular Surgery) is under the auspices of the respective Specialty Boards of CSHK

ELIGIBILITY FOR ADMISSION TO HIGHER SURGICAL TRAINING

To enter Higher Surgical Training Programme of CSHK, trainees must fulfil **all** the following requirements:

- ✓ Registered with The Medical Council of Hong Kong
- ✓ Being an Ordinary Member of CSHK
- ✓ Passed the Conjoint Selection Exercise of Higher Surgical Trainees held by the Hospital Authority (HA) of Hong Kong and CSHK (*Please refer to the website of HA: http://www.ha.org.hk/visitor/ha_visitor_index.asp?Content_ID=1237&Dimension=100&Lang=ENG*)
- ✓ Obtained a Higher Surgical Training post from an approved training unit/institution in Hong Kong

REGISTRATION DEADLINE

A register of Higher Surgical Trainees is maintained at CSHK. Higher Surgical Trainees must register with CSHK within the **first two weeks** of their higher surgical training. It is the responsibility of the applicant to make sure the application form reaches CSHK office on time. Late application or incomplete application will not be accepted. No allowance will be made for postal or other delays. **Failure to register on time will render the respective training period NOT recognized.**

ANNUAL REGISTRATION FEE

An annual registration fee is to be paid by all higher surgical trainees until they complete their higher surgical training.

Trainees are required to settle their annual registration fee within the first month of the year, i.e. before 31st January. A **surcharge of 100%** will be levied for any late payment after the first month of the year. Those who fail to settle the outstanding fee within the first three months of the year, i.e. before 31st March, will be removed from the College Register.

Only **paid-up** Higher Surgical Trainees are allowed to take the Fellowship Examination conducted by CSHK.

Please refer to the ***"Policy on Annual Subscription"*** for further details.

TRAINING REQUIREMENTS

Trainees in Higher Surgical Training will follow a structured programme of training and assessment laid down by CSHK. There are seven specialties which CSHK recognizes to be distinct and independent of each other in terms of training and independent training programmes. These specialties are:

- Cardiothoracic Surgery
- General Surgery
- Neurosurgery
- Paediatric Surgery
- Plastic Surgery
- Urology
- Vascular Surgery

All seven specialties have the same basic surgical training in Surgery and its related specialties for at least 2 years. At the end of the basic training, trainees have to pass the MHKICBSC Examination in Hong Kong before entry into Higher Surgical Training:

- **Cardiothoracic Surgery**

Training Duration: 5 years

Candidates can take the Joint Specialty Fellowship Examination with the Royal College of Surgeons of Edinburgh after the completion of 3.5 years of accredited higher training*, but they must complete at least 5 years of training.

- **General Surgery**

Training Duration: 4 years

Trainees can take the Joint Specialty Fellowship Examination with the Royal College of Surgeons of Edinburgh after the completion of 3.5 years of accredited higher training*, but they must complete at least 4 years of training.

- **Neurosurgery**

Training Duration: 5 years

Trainees can take the Joint Specialty Fellowship Examination with the Royal College of Surgeons of Edinburgh after the completion of 3.5 years of accredited higher training*, but they must complete at least 5 years of training.

- **Paediatric Surgery**

Training Duration: 4 years

Trainees can take the Joint Specialty Fellowship Examination with the Royal College of Surgeons of Edinburgh after the completion of 3.5 years of accredited higher training*, but they must complete at least 4 years of training.

- **Plastic Surgery**

Training Duration: 4 years

Trainees can take the Fellowship Examination conducted by the College of Surgeons of Hong Kong after the completion of 3.5 years of accredited higher training*, but they must complete at least 4 years of training.

- **Urology**

Training Duration: 4 years

Trainees can take the Joint Specialty Fellowship Examination with the Royal College of Surgeons of Edinburgh after the completion of 3.5 years of accredited higher training*, but they must complete at least 4 years of training.

- **Vascular Surgery**

Training Duration: 4 years

Trainees can take the Joint Specialty Fellowship Examination with the Royal College of Surgeons of Edinburgh after the completion of 3.5 years of accredited higher training*, but they must complete at least 4 years of training.

* The duration of accredited higher training for eligibility of taking examination is counted up to the close of the examination application.

ROTATIONAL REQUIREMENTS

Trainees are required to meet the following rotational requirements prescribed by the respective Specialty during their higher surgical training:

Cardiothoracic Surgery

- (1) Rotate out of the parent training centre for at least one year.
- (2) Unless otherwise specified, each rotation out of the parent centre should be at least 6 months.
- (3) In the parent training centre, each trainee should rotate to different trainers every 6 months.
- (4) Each trainee should be exposed to at least 4 different trainers during the higher surgical training.

General Surgery

- (1) Rotate out of the parent training centre for at least one year.
- (2) Unless otherwise specified, each rotation out of the parent centre should be at least 6 months. For cluster-based training programme, trainee should be rotated out of the parent training cluster for at least 6 months.
- (3) In the parent training centre, each trainee should rotate to different trainers every 6 months.
- (4) Each trainee should be exposed to at least 4 different trainers during the higher surgical training.

Neurosurgery

- (1) Rotate out of the parent training centre for at least one year.
- (2) Unless otherwise specified, each rotation out of the parent centre should be at least 6 months.
- (3) In the parent training centre, each trainee should rotate to different trainers every 6 months.
- (4) Each trainee should be exposed to at least 4 different trainers during the higher surgical training.

- (5) Trainee should spend the first year of training in the parent hospital, rotate for the second and third years to other hospitals and return to their parent hospital for the final two years. (***For trainees admitted from 1 July 2017 onwards***)
- (6) Each trainee should spend one year in a University Hospital (QMH/PWH) OR a high-volume unit with an annual workload of over 750 operative cases. (***For trainees admitted from 1 July 2017 onwards***)

Paediatric Surgery

- (1) Rotate out of the parent training centre for at least one year.
- (2) Unless otherwise specified, each rotation out of the parent centre should be at least 6 months.
- (3) In the parent training centre, each trainee should rotate to different trainers every 6 months.
- (4) Each trainee should be exposed to at least 4 different trainers during the higher surgical training.
- (5) Each trainee should spend 2 years in HKCH and another 2 years in the two regional centres of PWH and QMH, with a minimum of 6 months in each of the regional centres. (For trainees admitted from 1 July 2021 onwards)

Plastic Surgery

- (1) Rotate out of the parent training centre for at least one year.
- (2) Unless otherwise specified, each rotation out of the parent centre should be at least 6 months.
- (3) In the parent training centre, each trainee should rotate to different trainers every 6 months.
- (4) Each trainee should be exposed to at least 4 different trainers during the higher surgical training.
- (5) Each trainee should have two months rotation in Aesthetic and Reconstructive surgery in Hong Kong Sanatorium & Hospital and two months rotation in Hand and Microsurgery. (For trainees admitted from 1 July 2021 onwards)

Urology

- (1) Rotate out of their parent training centre for at least one year.
- (2) Unless otherwise specified, each rotation out of the parent centre should be at least 6 months.
- (3) In the parent training centre, each trainee should rotate to different trainers every 6 months.
- (4) Each trainee should be exposed to at least 4 different trainers during the higher surgical training.
- (5) Each trainee should not have more than 2 years of training in succession in any one centre.
- (6) Each trainee should spend the first and fourth year of training in the parent hospital and rotate out for the second and third year to at least **three** different training units. Either the parent hospital or the secondment unit must be a kidney transplant unit.

Vascular Surgery

- (1) Rotate out of the parent training centre for at least 1 year.
- (2) Unless otherwise specified, each rotation out of the parent centre should be at least 6 months. For cluster-based training programme, trainee should be rotated out of the parent training cluster for at least 6 months.
- (3) In the parent training centre, each trainee should rotate to different trainers every 6 months.
- (4) Each trainee should be exposed to at least 4 different trainers during the higher surgical training.

TRAINING PLAN REQUIREMENTS

Trainees are required to meet the following training plan requirements prescribed by the respective Specialty during their higher surgical training:

Cardiothoracic Surgery

- (1) HSTs are required to have a Training Plan signed off for each 6-month-period of training and submit it to the College Secretariat together with the half-yearly assessment.
- (2) Completion of the training plan requirements is one of the eligibility criteria for enrolment to Joint Specialty Fellowship Examination in Cardiothoracic Surgery.

General Surgery (For trainees admitted from 1 July 2021 onwards)

- (1) HSTs are required to complete and submit the training plan for each rotation to the College Secretariat together with the half-yearly assessment.
- (2) HSTs should discuss their learning objectives and action plan with their trainers at the start of each rotation. Progress will be reviewed through an interim review and a final review.
- (3) Both trainer and trainee will need to give overall comments and sign off.

Neurosurgery (For trainees admitted from 1 July 2021 onwards)

- (1) HSTs are required to have a training plan signed off for each 12-month period of training and submit it to the College Secretariat together with the half-yearly assessment.

Paediatric Surgery (For trainees admitted from 1 July 2021 onwards)

- (1) HSTs are required to complete and submit the training plan for each of the 6-month rotation to the College Secretariat together with the half-yearly assessment.
- (2) Training plan as agreed by the trainee and the training unit supervisor should be made at the beginning of each of the 6-month rotation. Progress will be reviewed through an interim review in 3 months and a final review at the end of the rotation.
- (3) Both trainer and trainee will need to give overall comments and sign off.

Plastic Surgery (For trainees admitted from 1 July 2021 onwards)

- (1) HSTs are required to complete and submit the training plan for each of the 6-month rotation to the College Secretariat together with the half-yearly assessment.
- (2) Trainee should discuss their learning objectives and action plan with their trainer at the beginning of the 6 months' training. Progress will be reviewed through an interim review and a final review.
- (3) Both trainer and trainee will need to give overall comments and sign off.

Urology (For trainees admitted from 1 January 2021 onwards)

- (1) HSTs are required to have a Training Plan signed off for each agreed period of training with their Assigned Education Supervisor (AES) of the training centre.
- (2) One training plan is needed for each training unit rotation (6 or 12 months) during the 4 years of HST training.
- (3) Proof of this should be submitted to the College Secretariat when the Training Plan is completed.

Vascular Surgery

- (1) HSTs are required to complete and submit the training plan for each rotation to the College Secretariat together with the half-yearly assessment.
- (2) HSTs should discuss their learning objectives and action plan with their trainers at the start of each rotation. Progress will be reviewed through an interim review and a final review.
- (3) Both trainer and trainee will need to give overall comments and sign off.

SUPERVISION OF HIGHER SURGICAL TRAINING

The Education & Examination Committee and the Specialty Boards jointly undertake the responsibility of accreditation and recommendation for approval by the College Council. All trainees embarking on Higher Surgical Training must obtain a Logbook which can be purchased from CSHK Secretariat:

The Logbook provides information on:

- a) **Operation Statistics** - **Range**
- Emergency Content
 - Supervised Experience
 - Unsupervised Experience
 - Minor Surgery
 - Endoscopy
 - Record of Complication and Death
 - Summary
- b) **Academic Activities** - Research
- Publications
 - Presentation at Meetings
 - Attendance at Courses, e.g. Workshops and Seminar

In-training Assessment

On-going in-training assessment is required throughout the Higher Surgical Training period. Training assessment is conducted half-yearly (every January and July) for recognition of the respective training period. Trainees must maintain a logbook for their operative experience until the completion of their higher training. They must keep a logbook prospectively recording all their training experience. During the training period, trainees must obtain satisfactory assessments from their supervisors and copies of these assessments must be filed in the trainees' logbooks and recorded by the respective Specialty Board & CSHK. **The logbook is required to be presented for inspection during the Joint Specialty Fellowship Examination.**

Individual trainee's Logbook should be reviewed regularly

- 3 monthly (Mid-term assessment for January-March and July-September) by mentor
- 6 monthly (Half-yearly assessment for January-June and July-December) by
 - (i) Supervisors
 - (ii) The respective Specialty Board

ASSESSMENT

Mid-term Assessment

On completion of every 3-month training period, an interim face to face assessment between the mentor and the trainee should be carried out to thrash out any problems. During this interim debriefing assessment process, if serious deficiencies are evident, the mentor has to report in writing to the Chairman of the respective Specialty Board. The trainee should be advised what measures are required to reverse these deficiencies.

Half-yearly Assessment

On completion of each 6-month training period, each trainee in all specialties (except General Surgery) must submit the assessment documentation **on or before 21st January or 21st July**. The deadline will be automatically extended to the next working day if that day falls on a Saturday or public holiday. For those in General Surgery, they are required to submit the documentation to the Training Subcommittee

of CSHK via their supervisor regularly in January and July every year for recognition of the respective period. Deadline for submission of half-yearly assessment documentation falls on the date of Training Subcommittee meeting. **Late submission of the half-yearly assessment documentation will render the respective training period NOT recognized.**

The assessment documentation should include the following:

- Logbook Summary Report
- Logbook Summary
- CME Report
- Two Mentor Assessment Forms for assessing trainee's performance in the past 6-month training period. Two mentors, who must be delegated or designated by the supervisor of the training hospital, should complete these forms.
- Research Reports (if any)
- Workplace Based Assessments (if any)
- Training Plan (if any)

It is the obligation of Higher Surgical Trainees to submit the above requisite documentation through their supervisors/trainers for vetting regularly semi-annually by

- Training Subcommittee (for Higher Trainees in General Surgery)
- The respective Specialty Board

Programme Directors of respective Specialty Boards will conduct random check of the trainee's Logbook Summary and Logbook Summary Report against the operation data from the Hospital Authority.

Workplace Based Assessment (WBA)

During the training period, trainees are required to fulfil the requirements on Workplace Based Assessment (WBA) of their respective specialty before **they are eligible for examination enrolment**.

Please refer to the "*Workplace Based Assessment for Higher Surgical Trainees*" for further details.

Unsatisfactory Training Performance

Trainees who fail to meet the above requirements will be required to undertake further training. The Training Subcommittee & the respective Specialty Boards of CSHK will endorse the respective training period on condition that satisfactory assessment must be achieved. In the event that individual trainee who has been warned of the deficiencies during the 3-month mid-term assessment still performs unsatisfactorily at the end of the 6-month period, the respective Specialty Board may interview this trainee as well as the mentors whom the trainee has worked for in the unsatisfactory period. Below average assessment of performance in any 6-month period will constitute grounds for disqualification of that 6-month training period. The respective training period could only be recognized and registered on condition that satisfactory assessment must be achieved. **Any trainees who do not satisfy the standards or have unsatisfactory assessments consecutively twice or non-consecutively three times will be disqualified from the training programme.**

Appeal Procedures

Trainees can appeal to the Appeal Board of CSHK concerning disqualification. However, the notice of such appeal must be lodged with CSHK Secretariat in writing within 21 days from the date of notice of such disqualification to the trainee.

MANDATORY COURSES

During the training period, trainees are required to successfully complete mandatory courses

stipulated in the training curriculum required by the respective specialty. Attendance at the courses must be recorded in the trainees' logbooks. Trainees are also required to submit the Official Certificates of the mandatory courses as evidence for completion when they enrol to Joint Specialty Fellowship Examination of the respective specialty.

- ◆ For HST admitted **before** 1 July 2021, please refer to the *“Mandatory Courses for Higher Surgical Trainees admitted before 1 July 2021”* for further details.
- ◆ For HST admitted **from** 1 July 2021 onwards, please refer to the *“Mandatory Courses for Higher Surgical Trainees admitted from 1 July 2021 onwards”* for further details.

OPERATIONAL REQUIREMENTS

All higher trainees are required to fulfil certain number of major operations within their 4/5 years of higher training period before they can apply for the Fellowship of the respective specialty. A Flagging Criteria for monitoring Higher Training in General Surgery is being enforced. Higher Surgical Trainees should achieve the number of caseloads stipulated in the criteria posted in CSHK website.

HSTs in General Surgery are required to fulfil the abovementioned & the **Index Operation Requirements** during their higher training period and complete the form below before they can apply for Fellowship of CSHK:

■ **Index Operation Fulfilment Form**

Please refer to the *“Guidelines on Major Operation for HSTs”* for further details.

RESEARCH REQUIREMENTS

Trainees are required to have at least two completed research projects approved by the Research Committee **before they are eligible for examination enrolment**. It is the responsibility of the trainee to submit the report early in order to allow enough time for review, revision and endorsement. Meeting of the Committee is only held twice a year. The Research Committee strongly advised trainees to complete the research requirements within their first two years of Higher Surgical Training.

Deadline for research reports submission is normally at **the end of March or September each year**. Announcement for submission deadline will be sent to higher surgical trainees via email. **CSHK will not take any responsibility if any message delivered to the email address provided by a trainee cannot reach the trainee or the trainee fails to check email regularly.**

Please refer to the *“Guidance Notes for Research Requirements”* for further details.

PRESENTATION / PUBLICATION REQUIREMENTS

(For HST admitted between January 2018 - 30 June 2020)

Trainees are required to have at least one oral or poster presentation in the Annual Scientific Congress of the College **before they are eligible for examination enrolment**.

(For HST admitted from July 2020 onwards)

Trainees are required to fulfil one of the following oral presentation/publication requirements **before they are eligible for examination enrolment**:

- a. at least 1 oral presentation (case report is not acceptable) as the first author in the Annual Scientific Congress of the College, OR
- b. at least 2 poster presentations in the Annual Scientific Congress of the College, OR

c. at least 1 full paper (not a case report) publication as the first author in Surgical Practice / other peer-reviewed indexed journals

CONTINUING MEDICAL EDUCATION (CME) PROGRAMME

CSHK undertakes CME administration for their trainees and reports their compliance to the Hong Kong Academy of Medicine.

Guidelines for Higher Surgical Trainees

- Each CME cycle is one year.
- The Cycle starts on 1 January or 1 July of every year.
- A new cycle commences at the conclusion of the previous cycle.
- Trainees do not fulfil the CME requirements will constitute grounds for disqualification of the previous 6-month training period.

CME Points Allocation

1. The CME system shall be based on the accrual of CME points.
2. A minimum of **30 points per year** is required and composes of the followings (i & ii):
 - i. A maximum accrued CME points for **Category 1** per year is 20 points
 - ii. A minimum accrued CME points for **National/International Scientific Meetings of Category 2** per year is 10 points.
3. Allocation of CME points from Category 1 and 2 are as below:
 - i. Category 1

In-hospital Meetings

One CME point is awarded for each hour of in-hospital meeting.

Publication

For the purpose of CME/CPD points, only publications in fields related to surgery shall count.

- A publication shall accrue CME/CPD points at the time the material is accepted for publication (letter of acceptance should be submitted for proof) or is published (reprints should be submitted).
- A maximum of 10 CME/CPD points (active) may be awarded to thesis, books, chapters in books, original articles in Index Medicus listed journals or journals published by the HKAM or its constituent Colleges.
- A maximum of 5 CME/CPD points (active) may be awarded to Short Communications (for example surgical technique, Letters to the Editor) in Index Medicus listed journals or journals published by the HKAM or its constituent Colleges.
- Publication of non-Index Medicus listed journals and those not published by the HKAM or its constituent Colleges might also be awarded with CME/CPD points, application and the points to be awarded would be subject to the approval of the CME/CPD committee and approval must be obtained from the CSHK prior to publication.

- The same CME/CPD points (active) will be awarded to anyone of the individual authors in the publication as CME/CPD encourages involvement and it is by no means an academic assessment.
- Abstracts that have been presented at a FCAPM will not be awarded with dual CME/CPD accreditation.

Research

- A research activity/investigation studies shall accrue CME/CPD points at the time the project is completed with an output. Mandatory research project submitted by Higher Trainees within the four years of higher training will not be awarded with CME/CPD accreditation.
 - A maximum 10 points (active) may be awarded per published paper with the submission of a copy of the paper.
 - A maximum of 5 points (active) may be awarded per poster with the submission with a copy of the output.
 - Studying in postgraduate degree could be considered creditable on submission with the documentation proof. Points awarded will be determined from case to case.
- ii. Category 2
National/International Scientific Meetings (Accrue a minimum of 10 points per year)
- Conferences held outside the parent hospital. (e.g. the College's Annual Scientific Meetings, local and overseas scientific meetings)
- a. Participation as Speaker/ Presenter
6 CME points per presentation and up to 12 points for any one meeting.
 - b. Participation as Moderator/ Chairman/ Panelist
3 CME points per hour and up to 6 points for any one meeting.
 - c. Participation as attendees
1 CME point is awarded for each hour and up to a maximum of 6 points per day up to three day per meeting.

Documentation Proof

Each trainee is responsible to record his/her CME activities during the current training period. A **CME Report Form** can be obtained from CSHK to record the required information. Trainees must submit the completed form together with the Half-yearly Assessment Form every January and July to the respective Specialty Board through their Supervisor.

Please refer to the "***CME Programme for Surgical Trainees***" for further details.

OTHERS

Neurosurgery

For HSTs in Neurosurgery admitted from 1 July 2021 onwards, they are required to complete at least **15 Case Report Logbooks** on the following themes before being eligible to enrol in the fellowship examination: Neuropathology, Neuroradiology, and Neurology (5/theme; 2 sides of A4)

Urology

1. Learning Points

For HSTs in Urology admitted from 1 January 2021 onwards, they are required to obtain 20 Learning Points per year from the online assessment (BJUI Knowledge) organised by the British Journal of Urology International. Trainees who failed to achieve this requirement would not be able to proceed to next year's training. Please refer to the link: <https://bjuiknowledge.bjuinternational.com>

2. Clinical Proctorship Records

For HSTs admitted before 1 January 2021

HSTs are required to submit a total of **6 Clinical Proctorship Records** (one on each of the following procedure) to Urology Board for vetting:

- The minimum number of cases to be performed under proctoring are shown below:

Operation/ Procedure	As First Assistant	Under supervision	As Main Surgeon (without direct supervision)*
Transurethral Resection of the Prostate (TURP)	5	5	10
Transurethral Resection of Bladder Tumour (TURBT)	5	5	10
Rigid Ureteroscopy (URS)	5	5	5
Percutaneous Nephrolithotomy (PCNL)	5	5	5
Simple laparoscopic surgery	5	3	3
Major laparoscopic surgery	5	3	3

* Including 1-2 cases performed under PBA

The deadline for submission is on 1 April and 1 October every year. A reminder for the submission deadline will be sent to HSTs via email. CSHK will not take responsibility for the consequence if any message delivering to the email address which was provided by trainees cannot reach them or they fail to check their email regularly.

For HSTs admitted from 1 January 2021 onwards

HSTs are required to submit **6 Clinical Proctorship Records** (one on each of the following procedure) with accurate records of patient identity (HN) and trainee's role (assistant/ chief with supervision/ chief without direct supervision) to the College Secretariat per 6 months together with the half-yearly assessment:

- The minimum number of cases to be performed under proctoring are shown below:

Urologic Procedures	As First Assistant in first year	As First Assistant OR Chief Surgeon <u>every subsequent 6 months</u>	As First Assistant OR Chief Surgeon <u>in entire HST training</u>	As Chief Surgeon <u>in entire HST training*</u>
Major Laparoscopic Surgery [^]	0	2	12	3

PCNL	0	2	12	5	
Flexible ureterorenoscopy (with/without lithotripsy)	0	2	12	5	
Urologic Procedures	As Chief Surgeon in first year	As Chief Surgeon in second year	As Chief Surgeon in third year	As Chief Surgeon in fourth year	As Chief Surgeon in <u>entire HST training*</u>
TURP	2	4	6	8	20
TURBT	2	4	6	8	20
URSL	2	4	6	8	20

^includes transperitoneal or retroperitoneoscopic laparoscopic radical prostatectomy, radical cystectomy, pelvic lymphadenectomy, total nephrectomy, partial nephrectomy, nephroureterectomy, adrenalectomy, ureteral surgery but excludes robotic procedures

** including 1-2 cases performed for PBA*

- ◇ Completion of the above is one of the requirements for the award of The Certificate of Competency in Endoscopic and Laparoscopic Skills in Urology, which is one of the eligibility criteria for application for Fellowship.

INTERRUPTION OF TRAINING

Higher Surgical Training may be interrupted for rotation to a non-recognized training centre or for other reasons. It is the responsibility of trainee to note the following scenarios and the need for **pre-approval** from the respective Specialty Board & the Education & Examination Committee of CSHK.

Conditions of interruption of training:

- **Less than 30 calendar days out of a 6-month training period**
Trainees are allowed to have their training interrupted without pre-approval if the period is less than 30 calendar days out of a 6-month training period. The 6-month training period will be counted provided that the performance of training during the 6-month training is up to the satisfaction of mentors. Trainees are **NOT required** to compensate **the stipulated training requirements and no remedial training is required.**
- **More than 30 calendar days out of a 6-month training period**
Trainees are required to obtain **pre-approval** from Specialty Board & the Education & Examination Committee of CSHK if their discontinuity of training is more than 30 calendar days. Such interruption can only be granted for good reasons like sick leave or maternity leave. Within that 6-month period, the months of training undertaken can only be counted if trainees provide satisfactory assessment documentations. Trainees are **required to compensate the stipulated training requirements. Remedial training is not required.**
- **More than 12 months**
Trainees are required to obtain **pre-approval** from Specialty Board & the Education & Examination Committee of CSHK. They **need to make up for the deficit and take remedial training** in addition to their normal period of training.
- **Research/Higher Degree**
Trainees are required to obtain **pre-approval** from Specialty Board & the Education & Examination Committee of CSHK before they are allowed to have their training interrupted for a **maximum of 12 months** for the purpose of doing research.

For those who fail to obtain pre-approval from the Committee, it will constitute grounds for disqualification from the training programme. They are required to start over their higher surgical training and re-apply for the Conjoint Selection Exercise jointly organized by CSHK & Hospital Authority.

Trainees are not allowed to have their training interrupted within 6 months prior to examination.

Such application is reviewed by the Education & Examination Committee of CSHK on case by case basis. The final decision is subject to the discretion of the Education & Examination Committee of CSHK.

RETROSPECTIVE RECOGNITION OF LOCAL TRAINING & OVERSEAS QUALIFICATION

CSHK will **NOT** accept application for retrospective recognition of local or overseas qualification. All applicants are required to enter the training programme in Hong Kong from Basic Surgical Training.

WITHDRAWAL FROM HIGHER SURGICAL TRAINING

Trainees are required to write to the Censor-in-Chief of CSHK if they wish to withdraw from Higher Surgical Training.

JOINT SPECIALTY FELLOWSHIP EXAMINATION

Upon satisfactory completion of Higher Surgical Training, trainees may sit for the Joint Specialty Fellowship Examination conducted jointly by the Royal College of Surgeons of Edinburgh (RCSEd) and CSHK (all Specialty Boards except Plastic Surgery). The examination should be uniform in content and standard, and be similar to those conducted by the Intercollegiate Examination Board of the Royal Colleges in the United Kingdom. Examination will be held at an interval agreed by both Colleges.

Under the tripartite arrangement, Joint Specialty Fellowship Examination held in Singapore by RCSEd for General Surgery, Cardiothoracic Surgery, Neurosurgery, and Paediatric Surgery will be reciprocally recognized and candidates will be awarded FCSHK if they pass the examination.

There will not be any automatic recognition of overseas qualifications being equivalent to the exit qualifications for CSHK. For doctors with overseas Fellowship and would like to sit the Fellowship Examination, their application will be considered on an individual basis and they must undergo local training of not less than 12 months at a training centre accredited by CSHK or supervised by a trainer, who must be approved by CSHK in that specialty before sitting the examination.

Successful trainees of the above examination will be elected for Dual Fellowship, including the Fellowship of CSHK and the Fellowship of RCSEd. They will also be eligible for being nominated for Fellowship of the Hong Kong Academy of Medicine.

The details of the Training Programme and Examination format mentioned in this guide together with all pertinent forms can be found at CSHK website: <http://www.cshk.org>

HOSPITALS WITH APPROVED PROGRAMMES FOR HIGHER SURGICAL TRAINING

The followings are the recognized training centres in various specialties for Higher Surgical Training:

SPECIALTY	HOSPITALS
<i>Cardiothoracic Surgery</i>	Queen Mary Hospital Prince of Wales Hospital Queen Elizabeth Hospital Tuen Mun Hospital
<i>Paediatric Surgery</i>	Prince of Wales Hospital Hong Kong Children's Hospital Queen Mary Hospital
<i>Neurosurgery</i>	Kwong Wah Hospital Pamela Youde Nethersole Eastern Hospital Prince of Wales Hospital Princess Margaret Hospital Queen Elizabeth Hospital Queen Mary Hospital Tuen Mun Hospital
<i>General Surgery</i>	Caritas Medical Centre Kwong Wah Hospital / Our Lady of Maryknoll Hospital New Territories East Cluster - Prince of Wales Hospital / North District Hospital / Alice Ho Miu Ling Nethersole Hospital Pamela Youde Nethersole Eastern Hospital Princess Margaret Hospital Queen Elizabeth Hospital Queen Mary Hospital / Hong Kong Sanatorium & Hospital / Tung Wah Hospital Ruttonjee Hospital Tseung Kwan O Hospital Tuen Mun Hospital / Pok Oi Hospital / Tin Shui Wai Hospital United Christian Hospital Yan Chai Hospital
<i>Plastic Surgery</i>	Kwong Wah Hospital Prince of Wales Hospital Queen Mary Hospital / Tung Wah Hospital Tuen Mun Hospital / Pok Oi Hospital / Tin Shui Wai Hospital Hong Kong Sanatorium Healthcare Centre and Plastic and Reconstructive Surgery Centre Admiralty
<i>Urology</i>	Pamela Youde Nethersole Eastern Hospital Princess Margaret Hospital / Caritas Medical Centre New Territories East Cluster - Prince of Wales Hospital / North District Hospital / Alice Ho Miu Ling Nethersole Hospital Queen Elizabeth Hospital Queen Mary Hospital / Tung Wah Hospital / Kwong Wah Hospital / Our Lady of Maryknoll Hospital Tuen Mun Hospital / Pok Oi Hospital Kowloon East Cluster - United Christian Hospital / Tseung Kwan O Hospital
<i>Vascular Surgery</i>	Queen Mary Hospital & Tung Wah Hospital/ Pamela Youde Nethersole Eastern Hospital/ Ruttonjee & Tang Shiu Kin Hospital Queen Elizabeth Hospital/ Kwong Wah Hospital/ Princess Margaret Hospital Prince of Wales Hospital/ North District Hospital & Alice Ho Miu Ling Nethersole Hospital Tuen Mun Hospital/ Pok Oi Hospital/ Tin Shui Wai Hospital

In collaboration with the RCSEd for the accreditation of mainland training centres, the following mainland centres' Higher Surgical Training Programmes were accredited by CSHK and RCSEd:

SPECIALTY	HOSPITALS
<i>General Surgery</i>	Peking Union Medical College Hospital (PUMCH) 北京协和医院 Peking University People's Hospital (PUPH) 北京大学人民医院 The First Affiliated Hospital, Sun Yat-sen University (FAHSYSU) (广州)中山大学附属第一医院 Ruijin Hospital affiliated to Shanghai Jiao Tong University, School of Medicine (RHSJUSM) 上海交通大学医学院附属瑞金医院 West China Hospital of Sichuan University (WCHSU) 四川大学华西医院 Tongji Hospital, Tongji Medical College of Huazhong University of Science & Technology (武汉)华中科技大学同济医学院附属同济医院 The First Affiliated Hospital Zhejiang University School of Medicine (FAHZUSM) 浙江大学附属第一医院 Jiangsu Province Hospital /The First Affiliated Hospital with Nanjing Medical University (FAHNJMU) 江苏省人民医院 /南京医科大学第一附属医院 The Second Xiangya Hospital of Central South University (SXHCSU) 中南大学湘雅二医院 The First Affiliated Hospital of Medical College of Xian Jiaotong University (FAHMCXJU) 西安交通大学医学院第一附属医院 The First Affiliated Hospital of Harbin Medical University (FAHHMU) 哈尔滨医科大学附属第一医院 The First Hospital of Jilin University (FHJU) 吉林大学第一医院 The First Hospital of China Medical University (FHCMU) 中国医科大学附属第一医院 The University of Hong Kong - Shenzhen Hospital in China (HKUSZH) 香港大 学深圳医院 Beijing Huaxin Hospital, the First Affiliated Hospital of Tsinghua University (TUFH) 北京华信医院(清华大学第一附属医院) Beijing Tsinghua Changgung Hospital (BTCH) affiliated to Tsinghua University 北京清华长庚医院
<i>Urology</i>	West China Hospital of Sichuan University (WCHSU) 四川大学华西医院 Tongji Hospital, Tongji Medical College of Huazhong University Of Science & Technology (武汉)华中科技大学同济医学院附属同济医院 The First Affiliated Hospital Zhejiang University School of Medicine (FAHZUSM) 浙江大学附属第一医院 Jiangsu Province Hospital /The First Affiliated Hospital with Nanjing Medical University (FAHNJMU) 江苏省人民医院 /南京医科大学第一附属医院 The First Affiliated Hospital of Medical College of Xian Jiaotong University (FAHMCXJU) 西安交通大学医学院第一附属医院

CLINICAL ATTACHMENT PROGRAMME FOR EXAMINATION ELIGIBLE CANDIDATE

Those who have fulfilled all the training requirements including the duration of training, operational requirements and mandatory course requirements but not yet passed the required examination will fall into the category of Examination Eligible Candidate (EEC). Clinical Attachment Programme (CAP) is a programme to which an EEC will be attached for the purpose of maintaining surgical skills until passing the Fellowship Examination. Every EEC must actively involve in surgical practice. CAP must be monitored by at least one trainer. Trainer to EEC ratio should be 1:1. (This is independent of the Trainer to HST or BST ratio.)

The maximum period allowed for clinical attachment:

5 years - Cardiothoracic Surgery

- Neurosurgery
- Paediatric Surgery
- Plastic Surgery
- Urology
- Vascular Surgery

3 years - General Surgery

Any registered EECs failing to complete the Fellowship Examination of their respective Specialty within the stipulated time frame are required to withdraw from CAP. They are no longer eligible to restart either from Basic Surgical Training (which will not be recognized by CSHK) or Higher Surgical Training in any specialties under the College of Surgeons of Hong Kong.

REGISTRATION

Trainees who cannot complete the Fellowship Examination within the stipulated Higher Surgical Training will be required for admission to the CAP for sitting the Fellowship Examination. These trainees are required to submit the EEC Registration Form to CSHK within the first month of the CAP. It is the responsibility of the applicant to make sure the application form reach our office on time. Late application or incomplete application will not be accepted. No allowance will be made for postal or other delays. **Failure to do so will render disqualification of sitting for the Fellowship Examination of their respective specialties.**

ASSESSMENT DOCUMENTATION

EECs must keep logbook on recording the experiences gained during the period of clinical attachment. On completion of every 6-month period of CAP, EECs in all specialties (except General Surgery) must submit the assessment documentation **on or before 21st January or 21st July**. The deadline will be automatically extended to the next working day if that day falls on Saturday or public holiday. For those in General Surgery, they are required to submit the documentation to the Training Subcommittee of CSHK via their supervisor regularly in January and July every year for recognition of the respective period. Deadline for submission of half-yearly assessment documentation falls on the date of Training Subcommittee meeting. **Late submission of the half-yearly assessment documentation will render disqualification of sitting for the Fellowship Examination of their respective specialties.**

The assessment documentation should include the followings:

- 1 Assessment Form
- CME Report Form

EECs who receive unsatisfactory assessment from their trainers will **render disqualification of sitting for the Fellowship Examination of their respective specialties**. EEC status will be reviewed half-yearly by the respective Specialty Board until they pass the Fellowship Examination. The eligibility of EEC will be expired if their performance is unsatisfactory for two consecutive 6-month periods.

INTERRUPTION OF TRAINING

EECs are required to follow the Regulations on Interruption of Training as stipulated on P.12. According to the Regulations of CAP for EEC, any registered EECs failing to complete the Fellowship Examination of their respective Specialty within the stipulated time frame are required to withdraw from CAP. Thus, the interrupted period can be exempted from this time frame limit only under the condition that the interruption of training has been pre-approved.

EECs are not allowed to have their attachment programme interrupted within 6 months prior to examination.

CME REQUIREMENTS

EECs must have adequate CME score (Minimum 10 points in each category / 30 points per year)

- In-hospital meetings (Category 1)
- National/international scientific meetings (Category 2)

ANNUAL REGISTRATION FEE

All EECs are required to pay an annual registration fee until they leave the CAP. Effective from 1 January 2012, EECs are required to make payment of their annual registration fee **within the first month of the year, i.e. on or before 31st January**. A surcharge of 100% will be levied for any late payment after the first month of the year. Those who still fail to settle the outstanding fee within the first three months of the year, **i.e. before 31st March, will be removed from the College Register**. Only **paid-up** registered EEC are eligible to sit for the Fellowship Examination of the College.

Please refer to ***“Clinical Attachment Programme for Examination Eligible Candidate”*** for further details.

FELLOWSHIP

REGISTRATION

Upon completion of Higher Surgical Training and passing the Joint Specialty Fellowship Examination, Higher Surgical Trainees are eligible to apply for Fellowship of the College of Surgeons of Hong Kong (FCSHK) and Hong Kong Academy of Medicine (HKAM). It is a pre-requisite for trainees to register with CSHK as a Fellow before they can register with the HKAM.

ELIGIBILITY FOR APPLYING FOR THE FELLOWSHIP OF CSHK

To be eligible for applying for the FCSHK, applicants must fulfil all the following requirements:

- ✓ Registered with The Medical Council of Hong Kong.
- ✓ Completed 4/5 years of Higher Surgical Training of CSHK stipulated by the respective Specialty Boards with satisfactory training performance and fulfilment of training requirements as prescribed in the Higher Surgical Training Curriculum
- ✓ Fulfilled the operation requirement stipulated by the respective Specialty Boards as prescribed in the Guideline on Major Operation for Higher Surgical Trainee.
- ✓ Passed the Joint Specialty Fellowship Examination/ Specialty Fellowship Examination (*for Plastic Surgery only*) held in Hong Kong or Singapore

Valid period for application of FCSHK

Applicants MUST apply for FCSHK within THREE years from the date they were eligible to be conferred. Applications submitted beyond this deadline will NOT be accepted.

IMPORTANT REMARK

Being a Fellow of the College shall not by itself carry with it the rights to practise medicine or surgery in Hong Kong unless that Fellow is a registered medical practitioner and/or has complied with the relevant law and regulations of Hong Kong to be lawfully qualified or entitled to do so.

ANNUAL SUBSCRIPTION FEE

Fellows are required to pay subscription fee annually. A surcharge of 30% and 50% will be levied for any late payment after, 31 March and 31 May of the subscription year respectively. The subscription year refers to the year the annual subscription was due. In the event that any Fellow fails to pay his/her annual subscription as well as the overdue surcharge (50% of the subscription) by the end of June, his/her name shall be removed from the College Register upon the final decision of the College Council. Please refer to the *"Policy on Annual Subscription"* for further details.

CONTINUING MEDICAL EDUCATION (CME) PROGRAMME

All FCSHK who are also the Fellows of HKAM (Surgery) must satisfy the full requirements of the CME/CPD programme by the end of each Cycle. A cycle of CME/CPD assessment shall be three years. Fellows will commence their first cycle on the first day of the month immediately after their admission to Academy Fellowship; and the required CME/CPD points for the first cycle will be counted on a pro-rata basis.

Over a 3 years period, each Fellow must collect a total of **90 points**. A minimum of 15 CME/CPD points per year is recommended. Each Fellow is responsible for collecting documentary proof of his CME/CPD points to be forwarded to CSHK at the appropriate time for CME/CPD point accrual. Please refer to the *"Principles and Guidelines on Continuing Medical Education (CME) and Continuing Professional Development (CPD)"* for further details.