

**2025**  
**VERSION 2.0**

*These training requirements apply to those who begin training on or after July 1, 2025.*

### **ELIGIBILITY REQUIREMENTS TO BEGIN TRAINING (ADULT STREAM)**

*The following requirements apply to those who began training in Internal Medicine **prior to July 1, 2023:***

Royal College certification in Internal Medicine

**OR**

Eligibility for the Royal College examination in Internal Medicine

**OR**

Registration in a Royal College accredited residency program in Internal Medicine<sup>1</sup>

A maximum of one year of training in Gastroenterology may be undertaken at the fourth-year residency level during concurrent training for certification in Internal Medicine.

*The following requirements apply to those who began training in Internal Medicine **on or after July 1, 2023:***

Royal College certification in Internal Medicine

**OR**

Successful completion of the Core stage of training in a Royal College accredited residency program in Internal Medicine<sup>2</sup>

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<sup>1</sup> See the standards for Internal Medicine on the "Information by Discipline" page of the Royal College website.

<sup>2</sup> Ibid.

## GASTROENTEROLOGY TRAINING EXPERIENCES (2025 - version 2.0)

Training in Adult Gastroenterology may overlap with completion of requirements for certification in Internal Medicine.<sup>3</sup>

### **ELIGIBILITY REQUIREMENTS TO BEGIN TRAINING (PEDIATRIC STREAM)**

Royal College certification in Pediatrics

#### **OR**

Successful completion of the Transition to Practice stage of training in a Royal College accredited residency program in Pediatrics<sup>4</sup>

### **ELIGIBILITY REQUIREMENTS FOR EXAMINATION<sup>5</sup>**

All candidates must be Royal College certified in Internal Medicine or Pediatrics in order to be eligible to write the Royal College examination in Gastroenterology (adult or pediatric).

The following training experiences<sup>6</sup> are required, recommended, or optional, as indicated.

### **TRANSITION TO DISCIPLINE (TTD)**

*In this stage, residents apply the skills of their primary specialty to the gastroenterology patient population. The focus of this stage is to learn and apply knowledge of the local system, local resources and protocols, and who to ask for help. Residents develop the skills to recognize and initiate specialized care for common emergencies of the digestive system.<sup>7</sup> They demonstrate their skills of clinical assessment, triage and resuscitation, and identify patients who need urgent endoscopic procedures. They obtain informed consent, and organize the timing and logistics of those procedures to ensure safe patient care.*

#### **Required training experiences (TTD stage):**

1. Clinical training experiences
  - 1.1. Any gastroenterology clinical experience
2. Other training experiences
  - 2.1. Orientation to
    - 2.1.1. The program, including structure, policies, resources, expectations, program portfolios, and assessment system

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<sup>3</sup> See information about Overlap Training and Alternative Pathway to Internal Medicine certification in the *Internal Medicine Training Experiences* document on the "Information by Discipline" page of the Royal College website.

<sup>4</sup> Some programs in Quebec may permit eligible trainees to begin subspecialty training before completion of the Pediatrics Transition to Practice stage. However, as with all jurisdictions, trainees in Quebec must achieve all generalist competencies of the Pediatrics specialty prior to certification in Pediatrics. To learn more about the entrance requirements for a specific Gastroenterology program, speak to the relevant postgraduate medical education office.

<sup>5</sup> These eligibility requirements are not applicable to Subspecialty Examination Affiliate Program (SEAP) candidates. Please contact the Royal College for information about SEAP.

<sup>6</sup> Unless otherwise indicated, training experiences apply to both adult and pediatric training streams.

<sup>7</sup> For the purposes of this document, the digestive system includes the gastrointestinal tract, liver, and pancreas.

*GASTROENTEROLOGY TRAINING EXPERIENCES  
(2025 - version 2.0)*

- 2.1.2. The hospital(s), including policies and procedures and information systems
- 2.1.3. The endoscopy suite

- 2.2. Formal instruction in recognition, assessment, and management of emergencies of the digestive system and endoscopic adverse events

**Recommended training experiences (TTD stage):**

- 3. Clinical training experiences
  - 3.1. Endoscopy
  - 3.2. Gastroenterology consultative and/or inpatient service
  - 3.3. After-hours coverage
- 4. Other training experiences
  - 4.1. Simulation-based training in endoscopy

**FOUNDATIONS OF DISCIPLINE (F)**

*The focus of this stage is the development and application of the knowledge and skills needed to assess, diagnose, and manage patients with common and uncomplicated conditions of the digestive system. Residents also begin to acquire skills in endoscopy.*

**Required training experiences (Foundations stage):**

- 1. Clinical training experiences
  - 1.1. Gastroenterology consultative and/or inpatient service
  - 1.2. Gastroenterology outpatient clinics
  - 1.3. Endoscopy

**Recommended training experiences (Foundations stage):**

- 2. Clinical training experiences
  - 2.1. After-hours coverage of the gastroenterology service
- 3. Other training experiences
  - 3.1. Formal instruction in
    - 3.1.1. The basic and clinical sciences of Gastroenterology
    - 3.1.2. Endoscopy
    - 3.1.3. Pathology
    - 3.1.4. Gastroenterology diagnostic testing
      - 3.1.4.1. Medical imaging
      - 3.1.4.2. Motility testing of the digestive system
    - 3.1.5. Nutritional assessment and prescription
    - 3.1.6. Surgery of the digestive system

- 3.2. Participation in quality improvement activities (e.g., morbidity and mortality rounds)

**Optional training experiences (Foundations stage):**

4. Other training experiences
  - 4.1. Completion of a *Good Clinical Practice* (GCP)<sup>8</sup> training course

**CORE OF DISCIPLINE (C)**

*In this stage, residents build on the skills of Foundations to assess and manage patients with acute and chronic conditions of the digestive system at all stages of the course of the patient's condition. They apply evidence-informed care, when available, and deal with clinical uncertainty and ambiguity. They will have achieved competence in diagnostic and therapeutic upper and lower gastrointestinal endoscopy. They will be able to work within the system of care, participating in administrative and quality improvement activities, and will have engaged in teaching and scholarly work. Residents will leave this stage being able to provide comprehensive management for individual patients with any presentation related to Gastroenterology.*

**Required training experiences (Core stage):**

1. Clinical training experiences
  - 1.1. Gastroenterology consultative and/or inpatient service
  - 1.2. Gastroenterology outpatient clinics
  - 1.3. Endoscopy
  - 1.4. After-hours coverage of the gastroenterology service
- Adult stream only**
  - 1.5. Gastroenterology in community setting
2. Other training experiences
  - 2.1. Formal instruction in
    - 2.1.1. The basic and clinical sciences of Gastroenterology
    - 2.1.2. Endoscopy
    - 2.1.3. Pathology
    - 2.1.4. Gastroenterology diagnostic testing
      - 2.1.4.1. Medical imaging
      - 2.1.4.2. Motility testing of the digestive system
    - 2.1.5. Nutritional assessment and prescription
    - 2.1.6. Surgery of the digestive system
    - 2.1.7. Quality improvement

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<sup>8</sup> An international standard based on guidelines from the International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use (ICH).

2.1.8. Management of the endoscopy suite

2.2. Career counselling and planning

2.3. Teaching other learners

2.4. Participation in quality improvement activities (e.g., morbidity and mortality rounds)

**Pediatric stream only**

2.5. Participation in scholarly activity

**Recommended training experiences (Core stage):**

3. Clinical training experiences

3.1. Longitudinal clinic

3.2. Specialized clinics in Gastroenterology

3.3. GI transplantation<sup>9</sup>

**Pediatric stream only**

3.4. Adult Gastroenterology for experience in endoscopy

3.5. Nutrition in any clinical setting

4. Other training experiences

**Adult stream only**

4.1. Participation in scholarly activity

**Optional training experiences (Core stage):**

5. Clinical training experiences

5.1. Gastrointestinal motility

5.2. Imaging of the digestive system

5.3. Pathology of the digestive system

**Adult stream only**

5.4. Oncology of the digestive system

5.5. Advanced endoscopy

5.6. Pediatric Gastroenterology for clinic and endoscopy experience

5.7. Nutrition in any clinical setting

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<sup>9</sup> This may include pre-transplant, transplant, or post-transplant care.

## **TRANSITION TO PRACTICE (TTP)**

*In this stage, residents develop the skills to manage a caseload of clinical work—including endoscopy—while balancing other responsibilities. In addition to providing care for individual patients, they work within the system to improve delivery of care, and have demonstrated the ability to monitor and improve their own clinical performance. The resident leaves this stage fully prepared to integrate their knowledge and skills as a practising Gastroenterologist.*

### **Required training experiences (TTP stage):**

1. Clinical training experiences
  - 1.1. Gastroenterology consultative or inpatient service, or both
  - 1.2. Gastroenterology outpatient clinics
  - 1.3. Endoscopy
2. Other training experiences
  - 2.1. Formal instruction in practice management

## **CERTIFICATION REQUIREMENTS**

Royal College certification in Gastroenterology requires all of the following:

1. Royal College certification in Internal Medicine or Pediatrics
2. Successful completion of the Royal College examination in Gastroenterology (adult or pediatric)
3. Successful completion of the Gastroenterology Portfolio (adult or pediatric)

## **NOTES:**

*The Gastroenterology Portfolio refers to the list of entrustable professional activities across all four stages of the residency Competence Continuum and to associated national standards for assessment and achievement.*

## **MODEL DURATION OF TRAINING**

*Progress in training occurs through demonstration of competence and advancement through the stages of the Competence Continuum. Gastroenterology is planned as a 2-year residency program. There is no mandated period of training in each stage. Individual duration of training may be influenced by many factors, which may include the resident's singular progression through the stages, the availability of teaching and learning resources, and/or differences in program implementation. Duration of training in each stage is therefore at the discretion of the faculty of medicine, the competence committee, and the program director.*

GASTROENTEROLOGY TRAINING EXPERIENCES  
(2025 - version 2.0)

**Guidance for programs**

*The Royal College Specialty Committee in Gastroenterology's suggested course of training, for the purposes of planning learning experiences and schedules, is as follows:*

*1-3 blocks in Transition to Discipline*

*3-6 blocks in Foundations of Discipline*

*12-18 blocks in Core of Discipline*

*1-3 blocks in Transition to Practice*

*\*One block is equal to 4 weeks*

**Guidance for postgraduate medical education offices**

*The stages of the Competence Continuum in Gastroenterology are generally no longer than*

*4 blocks for Transition to Discipline*

*8 blocks for Foundations of Discipline*

*20 blocks for Core of Discipline*

*4 blocks for Transition to Practice*

*Total duration of training – 2 years*

*\*One block is equal to 4 weeks*

This document is to be reviewed by the Specialty Committee in Gastroenterology by December 31, 2027.

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