

These training requirements apply to those who begin training on or after July 1, 2021.

ELIGIBILITY REQUIREMENTS TO BEGIN TRAINING

Royal College certification in General Surgery.

OR

Eligibility for the Royal College certification examination in General Surgery (See requirements for these qualifications).

ELIGIBILITY REQUIREMENTS FOR EXAMINATION¹

All candidates must be Royal College certified in General Surgery in order to be eligible for the Royal College examination in Pediatric Surgery.

The following training experiences are required or recommended, as indicated:

TRANSITION TO DISCIPLINE (TTD)

This stage is an introduction to the subspecialty of Pediatric Surgery, providing an orientation to the educational program and to the setting in which residents will train and work. This stage also serves to assess and verify the competencies acquired in General Surgery and their application to the unique patient population served by pediatric surgeons.

Required training experiences (TTD stage):

1. Clinical training experiences:
 - 1.1. Pediatric Surgery
 - 1.1.1. Inpatient service
 - 1.1.2. Consultation to inpatient medical and surgical services, including the neonatal and pediatric intensive care units and to the emergency department

¹ These eligibility requirements do not apply to Subspecialty Examination Affiliate Program (SEAP) candidates. Please contact the Royal College for information about SEAP.

- 1.1.3. Clinic
- 1.1.4. Trauma team
- 1.1.5. Operative experience
- 1.1.6. After-hours coverage

1.2. Attendance at multidisciplinary meetings

2. Other training experiences:

2.1. Orientation to

- 2.1.1. The training program, its functioning, and relevant policies and procedures
- 2.1.2. The Pediatric Surgery Portfolio and electronic platform
- 2.1.3. The local institution(s) and clinical environment(s), including policies, procedures, and resources

Recommended training experiences (TTD stage):

3. Other training experiences:

- 3.1. Focused experience providing early clinical and technical skills training (e.g., boot camp)

FOUNDATIONS OF DISCIPLINE (F)

The focus of this stage is the development and application of the knowledge and skills needed to perform basic procedures and to manage increasingly complex patients. Residents take on leadership responsibilities within the team, including supervision and teaching of junior trainees.

Required training experiences (Foundations stage):

1. Clinical training experiences:

1.1. Pediatric Surgery

- 1.1.1. Inpatient service
- 1.1.2. Consultation to inpatient medical and surgical services, including the neonatal and pediatric intensive care units and to the emergency department
- 1.1.3. Clinic
- 1.1.4. Trauma team
- 1.1.5. Operative experience
- 1.1.6. After-hours coverage

PEDIATRIC SURGERY TRAINING EXPERIENCES (2021)

- 1.2. Neonatal intensive care unit (NICU) unless previous NICU experience
 - 1.3. Pediatric intensive care unit (PICU) unless previous PICU experience
 - 1.4. Attendance at multidisciplinary meetings
2. Other training experiences:
 - 2.1. Pediatric Advanced Life Support (PALS) course or equivalent
 - 2.2. Formal instruction in physician wellness
 - 2.3. Participation in patient safety/quality improvement (QI) activities
 - 2.4. Initiation of a scholarly project

Recommended training experiences (Foundations stage):

3. Other training experiences:
 - 3.1. Advanced Trauma Life Support (ATLS) or Trauma Resuscitation in Kids (TRIK) course or equivalent
 - 3.2. Neonatal Resuscitation Program (NRP) course or equivalent
 - 3.3. Formal instruction in
 - 3.3.1. Research ethics
 - 3.3.2. Teaching and supervision of junior learners, such as the Residents as Teachers (RATS) course

CORE OF DISCIPLINE (C)

The focus of this stage is surgical experience in a broad range of procedures across the pediatric demographic; this includes pre-operative consultation and follow-up care. As part of the interprofessional team, residents take on leadership roles caring for critically ill patients and facilitating the handover of pediatric patients transitioning to adult care.

Required training experiences (Core stage):

1. Clinical training experiences:
 - 1.1. Pediatric Surgery
 - 1.1.1. Inpatient service
 - 1.1.2. Consultation to inpatient medical and surgical services, including the neonatal and pediatric intensive care units and to the emergency department
 - 1.1.3. Clinic
 - 1.1.4. Trauma team
 - 1.1.5. Operative experience

- 1.1.6. After-hours coverage
- 1.2. Participation in multidisciplinary meetings
- 2. Other training experiences:
 - 2.1. Career planning
 - 2.2. Completion of scholarly project

Recommended training experiences (Core stage):

- 3. Clinical training experiences:
 - 3.1. Specific and/or enhanced skills acquisition based on individual interest, career plan, and/or community needs
- 4. Other training experiences:
 - 4.1. Completion of anorectal malformation (ARM) course
 - 4.2. Completion of minimally invasive surgery (MIS) course
 - 4.3. Completion of pediatric surgical oncology review course
 - 4.4. Attendance at a national or international conference related to Pediatric Surgery
 - 4.5. Participation in quality improvement activities and/or committees
 - 4.6. Participation in professional societies relevant to Pediatric Surgery

TRANSITION TO PRACTICE (TTP)

The focus of this stage is the consolidation and integration of skills required to manage clinical demands in a variety of settings, and the care of routine and complex patients. At this stage, the resident demonstrates autonomy and takes a clinical and administrative leadership role in the provision of pediatric surgery services.

Required training experiences (TTP stage):

- 1. Clinical training experiences:
 - 1.1. Pediatric Surgery, in the role of senior resident²
 - 1.1.1. Inpatient service
 - 1.1.2. Consultation to inpatient medical and surgical services, including the neonatal and pediatric intensive care units and to the emergency department
 - 1.1.3. Clinic

² "Senior resident" means that the resident assumes leadership in patient care and the education and clinical supervision of junior colleagues, with as much independence as permitted by ability, law, and hospital policy.

- 1.1.4. Trauma team
 - 1.1.5. Operative experience
 - 1.1.6. After-hours coverage
- 1.2. Contributing surgical expertise at multidisciplinary meetings
2. Other training experiences:
- 2.1. Formal instruction in
 - 2.1.1. Practice management
 - 2.1.2. Medico-legal issues, such as the educational modules provided by the Canadian Medical Protective Association (CMPA)
 - 2.2. Development of a life-long learning and ongoing professional development plan with mentor

Recommended training experiences (TTP stage):

3. Clinical training experiences:
 - 3.1. Specific and/or enhanced skills acquisition based on individual interest, career plan, and/or community needs

CERTIFICATION REQUIREMENTS

Royal College certification in Pediatric Surgery requires all of the following:

1. Royal College certification in General Surgery;
2. Successful completion of the Royal College examination in Pediatric Surgery; and
3. Successful completion of the Royal College Pediatric Surgery Portfolio.

NOTES

The Pediatric Surgery Portfolio refers to the list of entrustable professional activities across all four stages of the residency Competence Continuum, and 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. Pediatric Surgery is planned as a two-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.

Guidance for programs:

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

- 2 months in Transition to Discipline
- 4-6 months in Foundations of Discipline
- 12-14 months in Core of Discipline
- 2-3 months in Transition to Practice

Guidance for postgraduate medical education offices:

The stages of the Competence Continuum in Pediatric Surgery are generally no longer than:

- 2 months in Transition to Discipline
- 6 months in Foundations of Discipline
- 14 months in Core of Discipline
- 3 months in Transition to Practice
- Total duration of training – two years

This document is to be reviewed by the Specialty Committee in Pediatric Surgery by December 2021.

APPROVED – Specialty Standards Review Committee – July 2019

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