These training requirements apply to those who begin training on or after July 1, 2018.

ELIGIBILITY REQUIREMENTS

Royal College certification in Internal Medicine, or enrolment in a Royal College-accredited residency program in Internal Medicine, is required (see requirements for these qualifications). All candidates must be Royal College certified in Internal Medicine in order to be eligible to write the Royal College examination in Medical Oncology.

A maximum of one year of training may be undertaken concurrently with training for certification in Internal Medicine, with approval from the program directors in both Internal Medicine and Medical Oncology.

The following training experiences are required, recommended, or optional, as indicated.

TRANSITION TO DISCIPLINE (TTD)

The focus of this stage is the orientation and introduction of new trainees to the medical oncology program; to institutional protocols, resources, and facilities; and to the interprofessional team. During this stage, trainees will verify their clinical skills through assessment and management of outpatients, and through their interactions with the outpatient team.

Required training experiences (TTD stage):

1. Clinical training experiences
   1.1. Medical oncology outpatient clinics

2. Other training experiences
   2.1. Formal instruction in
      2.1.1. Communication techniques for discussing serious news, such as diagnosis, prognosis, recurrence, or progression of cancer
      2.1.2. Orientation to learning, teaching, and assessment in a competency-based medical education (CBME) curriculum, including
         2.1.2.1. Required training experiences
         2.1.2.2. Entrustable professional activities (EPAs)
         2.1.2.3. Assessment tools
         2.1.2.4. Documentation of activities in Resident ePortfolio or equivalent system
2.1.2.5. Orientation of trainee to the rationale for feedback and feedback culture

2.1.3. Institutional requirements for systemic therapy order writing, including computerized order entry training, as applicable

2.1.4. Safe handling of systemic therapeutic agents

2.1.5. Principles of after-hours coverage; topics should include oncologic emergencies and chemotherapy toxicity management, and fundamentals of telephone triage, with emphasis on local and regional processes

2.2. Orientation to the chemotherapy unit and chemotherapy pharmacy (e.g., physical location and staff)

2.3. Orientation to the health care team and administrative personnel

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

3. Clinical training experiences
   
   3.1. Multidisciplinary case conferences
   
   3.2. After-hours coverage of the medical oncology service

4. Other training experiences
   
   4.1. Orientation to the institution
   
   4.2. Orientation to research in Medical Oncology
   
   4.3. Team building exercises with the interprofessional team

**FOUNDATIONS OF DISCIPLINE (F)**

The focus of this stage is the development of the competencies necessary to provide basic assessment and management for patients seen in consultation and ongoing care, as well as urgent or emergent scenarios. Trainees are expected to develop their knowledge and skills in the prescription of systemic therapy, in coordination of access to health services for patient care, and in communication of sensitive topics.

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

1. Clinical training experiences
   
   1.1. Medical oncology outpatient clinics
   
   1.2. Multidisciplinary case conferences
   
   1.3. After-hours coverage of the medical oncology service
   
   1.4. Experience in the management of chemotherapy-related emergencies

2. Other training experiences
   
   2.1. Formal instruction in
2.1.1. Key principles of the basic sciences related to oncology
2.1.2. Introduction to pharmacology of systemic therapies, covering the broad classes of systemic therapies
2.1.3. Basic principles of oncology, including the principles of adjuvant, neoadjuvant, perioperative, and palliative therapy
2.1.4. Principles of palliative care, including pain management
2.1.5. Principles of medical assistance in dying (MAID)
2.1.6. Principles of critical appraisal of oncology literature
2.1.7. Introduction to diagnosis and management of patients with cancer
2.1.8. Introduction to quality improvement in cancer care
2.1.9. Physician wellness, including recognition of and strategies to deal with burnout and stress

2.2. Opportunities to demonstrate teaching skills

Optional training experiences (Foundations stage):
3. Clinical training experiences
   3.1. Longitudinal clinic in Medical Oncology
   3.2. Clinical exposure to medical imaging, including interventional radiology, for the medical oncologist
   3.3. Radiation oncology outpatient clinics with a focus on patients requiring multimodality care
   3.4. Palliative care service
   3.5. Inpatient care of patients with cancer
   3.6. Clinical exposure to surgical oncology for the medical oncologist

4. Other training experiences
   4.1. Formal instruction in research methodology
      4.1.1. Training in Good Clinical Practice (GCP) or equivalent
   4.2. Establishment of a relationship with a mentor
   4.3. Journal club

CORE OF DISCIPLINE (C)

The focus of this stage is the comprehensive assessment and management of all medical oncology patients, including longitudinal care of outpatients and hospitalized patients, while working on multidisciplinary teams with other physicians and health care professionals. In addition to prescribing systemic therapy in all contexts, residents will have increased responsibility in decisions regarding cessation of systemic therapies. In addition, trainees
will be expected to engage in the teaching and supervision of junior learners, and explicit career planning.

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

1. Clinical training experiences
   1.1. Medical oncology outpatient clinics
   1.2. Longitudinal clinic in Medical Oncology
   1.3. Hemato-oncology outpatient clinics
   1.4. Medical oncology inpatient or consultative service
   1.5. Multidisciplinary case conferences
   1.6. Experience in the management of chemotherapy-related emergencies
   1.7. After-hours coverage of the medical oncology service
   1.8. Radiation oncology outpatient clinics with a focus on patients requiring multimodality care
   1.9. Palliative medicine service, for experience in pain and symptom management, and a palliative approach to care

2. Other training experiences
   2.1. Formal instruction in
      2.1.1. Cancer site specific topics
      2.1.2. Basic sciences relevant to oncology (advanced)
      2.1.3. Pharmacology of systemic therapy (advanced)
      2.1.4. Response to requests for MAID
      2.1.5. Principles of clinical epidemiology
      2.1.6. Research methodology, including GCP training or equivalent
      2.1.7. Response to a patient safety issue
      2.1.8. Principles of and methodology underlying quality improvement systems
      2.1.9. Practice management, including billing, time management, and incorporation
      2.1.10. Career planning, including creating and maintaining a curriculum vitae (CV) and teaching dossier; job application; and contract review and negotiation
      2.1.11. Maintenance of competence
   2.2. Advocacy for cancer patients and populations
   2.3. Journal club
   2.4. Teaching and supervising junior learners
   2.5. Involvement in a committee or other group activity; examples may include
      2.5.1. Guidelines committee
2.5.2. Drug funding body
2.5.3. Provincial cancer site group activities

2.6. Quality improvement experience

Optional training experiences (Core stage):
3. Clinical training experiences
   3.1. Medical oncology in a community setting
   3.2. Medical oncology referral and triage
   3.3. Hemato-oncology inpatient service

TRANSITION TO PRACTICE (TTP)

The focus of this stage is the consolidation of skills in preparation for practice in Medical Oncology. Trainees manage all aspects of an outpatient clinic, attend multidisciplinary case conferences, and identify and participate in the care of patients eligible for clinical trials. During this stage trainees will also be required to contribute effectively to scholarly and/or quality improvement (QI) projects.

Required training experiences (TTP stage):
1. Clinical training experiences
   1.1. Medical oncology outpatient clinics
   1.2. Multidisciplinary case conferences
   1.3. Medical oncology referral triage
   1.4. Practice management experience
   1.5. Experience in the consideration of eligibility and ongoing care of patients in clinical trials

2. Other training experiences
   2.1. Plan for transition into practice
   2.2. Participation in and contribution to a scholarly or quality improvement project
   2.3. Delivery of formal learning activities
   2.4. Formal instruction in practice management

Recommended training experiences (TTP stage):
3. Clinical training experiences
   3.1. Medical oncology inpatient service
4. Other training experiences
   4.1. Reflective written account of personal learning trajectory over period of training
   4.2. Mock job interview

Optional training experiences (TTP stage):
5. Other training experiences
   5.1. Chairing multidisciplinary case conferences or academic, teaching, and/or administrative rounds
   5.2. Participatory experience in the administration and/or management of the system of cancer care delivery

CERTIFICATION REQUIREMENTS
Royal College certification in Medical Oncology requires all of the following:
   1. Royal College certification in Internal Medicine;
   2. Successful completion of the Royal College examination in Medical Oncology; and
   3. Successful completion of all elements of the Medical Oncology Portfolio.

NOTES:

The Medical Oncology 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.

Alternative Route to Certification

Individuals who are eligible for Royal College certification in Hematology may be eligible for an accelerated course of training leading to certification in Medical Oncology, based on the achievement of competencies relevant to both disciplines. Assessments of the achievement of relevant competencies will be made on an individual basis by the accepting Medical Oncology program director and the associated postgraduate medical education office, following the principles of the Royal College Credentials policy for Competence by Design.

Guidance for residents and programs regarding accelerated training for Hematology residents in training or graduates

1. It is strongly recommended that early in their Hematology training individuals who intend to pursue training in Medical Oncology contact the program directors of both the Hematology and Medical Oncology programs to declare their intention and discuss how to tailor their training.
2. Relevant professional activities and training experiences during Hematology will be reviewed on an individual basis by the accepting Medical Oncology program and its postgraduate medical education office and can be credited towards achievement of competence in Medical Oncology.
3. Transition to Discipline in the Medical Oncology program can be used to verify and document achievement of Foundations and selected Core medical oncology EPAs and to create an individualized curriculum. If acceptable to the hematology program director, the final stages of hematology training could be used for this purpose as well.

4. Achievement of competence can be demonstrated with an individually tailored assessment plan, since it may not be feasible for these trainees to undergo the number of observations mandated in the current iteration of the EPAs.

**MODEL DURATION OF TRAINING**

Progress in training occurs through demonstration of competence and advancement through the stages of the Competence Continuum. Medical Oncology 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 and/or overlap training, 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 postgraduate medical education offices**

The stages of the Competence Continuum in Medical Oncology are generally no longer than

- Transition to Discipline – 1 block
- Foundations of Discipline – 5 blocks
- Core of Discipline – 18 blocks
- Transition to Practice – 3 blocks

*One block is equal to 4 weeks

**Guidance for programs**

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

- 1 block in Transition to Discipline
- 3-5 blocks in Foundations of Discipline
- 15-18 blocks in Core of Discipline
- 3 blocks in Transition to Practice

*One block is equal to 4 weeks

This document is to be reviewed by the Specialty Committee in Medical Oncology by December 31, 2019.

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