

MALAYSIAN MEDICAL COUNCIL SPECIALTY-SPECIFIC REQUIREMENTS (SSR) (ORTHOPAEDIC SURGERY)

Prepared By:

Specialty Education Subcommittee (SEC) of the Medical Education Committee (MEC),

Malaysian Medical Council

Approved by the Malaysian Medical Council: 17th June 2025

Preface

- 1. The Specialty-Specific Requirements (SSR) pertain to requirements within each specialty and specify the minimum requirements pertaining to the training curriculum, trainers, educational resources and head of programme.
- 2. The Specialty-Specific Requirements (SSR) are intricately linked to the MMC Malaysian Standards for Medical Specialist Training 2019, and the Standards and SSR must be read and applied together.

Specialty-Specific Minimum Requirements for Training Curriculum (Based on Area 1.2.4 of Malaysian Standards for Medical Specialist Training) Orthopaedic Surgery

	T		
Specialty-Specific Requirements (Reference Standard)	Criteria		
1) Minimum entry requirements for postgraduate training (Standard 3.1.)	 Fully registered with the Malaysian Medical Council with a current annual practising certificate 2 years of experience in surgery and its related fields post housemanship (including at least 6 months in orthopaedic surgery) Successful entry evaluation to programme 		
2) Minimum duration of training programme (Standard 1.2.4 - Table 2)	Completion of a minimum of 48 mc specialty programme.	onths of specialised training in the	
3) Structure of training (rotation/modules) (Standard 1.2.4 - Table 3 & Table 4) Training	The program should have a clear pathway encompassing phases of training which shall include general orthopaedics, orthopaedic trauma and 8 of the orthopaedic subspecialty fields listed below.		
overview	Areas	Duration (Months)	
	General Orthopaedics and Orthopedic Trauma	12	
Training rotation/ modules and case	Spine	4	
mix	Arthroplasty	4	
	Sport and Arthroscopy Surgery	4	
	Paediatric Orthopaedic	4	

		I			
	Foot and Ankle Surgery	4			
	Upper Extremity Surgery and Microsurgery				
	Orthopaedic Oncology	4			
	Musculoskeletal Advanced Trauma	4			
	Other specialties rotation related to orthopaedic surgery - Radiology - Plastic Surgery - Intensive Care - Vascular Surgery - Rehabilitation Medicine - Anaesthesiology and Critical Care	4 (A maximum of 4 months in a single or combined rotations in any of the fields listed under specialties rotation)			
4) Assessments	*Duration of training per year is 48 weeks Assessments should				
(Standard 2.2.1)	 i. Employ appropriate methods and levels that are well-aligned with learning outcomes. These include a variety of methods and tools such as theory and clinical assessments, case-based discussion (CBD), DOPS, MiniCEX, OSATS, OSCE, case report, supervisor's report, logbook, practice diary, research report, and multi-source feedback. ii. Include methods appropriate to assess communication skills, ethics and professionalism. iii. Include formative and summative assessments throughout each rotation, semester, or year of study. iv. Include clear criteria for progression to next level / phase of training. v. Include an exit evaluation/assessment. 				
5) Additional requirements for completion of training (Standard 1.2.4)	ii. Additional courses:	el research or clinical audit project. ort (ALS) or equivalent			

6) List of competencies to be acquired upon completion of training

(Standard 1.1.4)

Generic competencies

Able to:

- i. Independently manage common Orthopaedic Surgery cases holistically, including complications, whilst considering social, health economics and preventive aspects.
- ii. Function competently and professionally in a team-based environment.
- iii. Maintain a high level of integrity and ethical conduct in practice
- iv. Ensure effective communication with patients, colleagues and other healthcare-adjacent providers.
- v. Advance the evidence-based practice of surgery through research, audit and scientific writing.
- vi. Exemplify life-long learning through continual professional development, including acquisition of new skills and competencies.
- vii. Demonstrate exemplary leadership qualities, including setting and maintaining standards, supporting others and having the resilience to cope with pressure.
- viii. Cultivate an entrepreneurial mindset, balancing risks and benefits, for creative problem-solving.

Specific specialty competencies

- i. Diagnose and manage Orthopaedic emergencies and injuries.
- ii. Provide inpatient and outpatient Orthopaedic care for adult and peadiatric patients.
- iii. Evaluate and manage perioperative Orthopaedic surgical patients.
- iv. Diagnose and manage Orthopaedic post-operative complications.

At the end of the programme, trainee must be able to perform or manage:

ORTHOPAEDIC PROCEDURES		
Arthrotomy		
Bone grafting – autograft from ASIS and PSIS,		
allograft		
Closed manipulative reduction and application of		
full- length cast under sedation – upper and		
lower limbs		
Complications following trauma (c)		
Fixation of peri- and intra-articular fractures		
Fluid management in the injured patient (c)		
Incision & drainage / Toilet & suturing /		
debridement		

Musculoskeletal infection
Intramedullary nailing of the tibia and femur
K-wiring techniques
Lag screw fixation
Large joint aspiration and injection
Regional and local anaesthetic blocks for upper
and lower limbs
Transtibial and transfemoral lower limb
amputations
Acute dislocations with and without fractures
Implant associated infection
Neurovascular injuries
Open fractures
Acute and definitive pelvic injuries
Physeal injuries
Septic arthritis
Polytrauma patient
Plating of long bone fractures
Sequestrectomy/bone resection in osteomyelitis
Assessment of patient with traumatic cervical
spine injury
Split skin grafting
Tension band wiring – patella, olecranon
Uniaxial external fixation of extremities
Tendon repair
SPINE
Posterior decompression of lumbar spine
Epidural, nerve root and facet joint injection
SHOULDER & ELBOW
Fixation of intra-articular fractures of the
Fixation of intra-articular fractures of the shoulder and elbow
shoulder and elbow Fracture fixation of the shoulder, humerus and
shoulder and elbow
shoulder and elbow Fracture fixation of the shoulder, humerus and elbow with or without ligamentous repair – including IM nailing
shoulder and elbow Fracture fixation of the shoulder, humerus and elbow with or without ligamentous repair — including IM nailing Manipulation of shoulder under anaesthesia
shoulder and elbow Fracture fixation of the shoulder, humerus and elbow with or without ligamentous repair – including IM nailing
shoulder and elbow Fracture fixation of the shoulder, humerus and elbow with or without ligamentous repair — including IM nailing Manipulation of shoulder under anaesthesia
shoulder and elbow Fracture fixation of the shoulder, humerus and elbow with or without ligamentous repair — including IM nailing Manipulation of shoulder under anaesthesia Release of simple contractures of the elbow WRIST & HAND Amputations of the digit(s), hand, wrist and
shoulder and elbow Fracture fixation of the shoulder, humerus and elbow with or without ligamentous repair — including IM nailing Manipulation of shoulder under anaesthesia Release of simple contractures of the elbow WRIST & HAND Amputations of the digit(s), hand, wrist and forearm
shoulder and elbow Fracture fixation of the shoulder, humerus and elbow with or without ligamentous repair — including IM nailing Manipulation of shoulder under anaesthesia Release of simple contractures of the elbow WRIST & HAND Amputations of the digit(s), hand, wrist and forearm Fixation of intra-articular fractures of the distal
shoulder and elbow Fracture fixation of the shoulder, humerus and elbow with or without ligamentous repair — including IM nailing Manipulation of shoulder under anaesthesia Release of simple contractures of the elbow WRIST & HAND Amputations of the digit(s), hand, wrist and forearm Fixation of intra-articular fractures of the distal radius
shoulder and elbow Fracture fixation of the shoulder, humerus and elbow with or without ligamentous repair — including IM nailing Manipulation of shoulder under anaesthesia Release of simple contractures of the elbow WRIST & HAND Amputations of the digit(s), hand, wrist and forearm Fixation of intra-articular fractures of the distal radius Drainage of abscess in the hand
shoulder and elbow Fracture fixation of the shoulder, humerus and elbow with or without ligamentous repair — including IM nailing Manipulation of shoulder under anaesthesia Release of simple contractures of the elbow WRIST & HAND Amputations of the digit(s), hand, wrist and forearm Fixation of intra-articular fractures of the distal radius Drainage of abscess in the hand Fasciotomies of the hand and forearm
shoulder and elbow Fracture fixation of the shoulder, humerus and elbow with or without ligamentous repair — including IM nailing Manipulation of shoulder under anaesthesia Release of simple contractures of the elbow WRIST & HAND Amputations of the digit(s), hand, wrist and forearm Fixation of intra-articular fractures of the distal radius Drainage of abscess in the hand Fasciotomies of the hand and forearm Fracture fixation of the hand, wrist and forearm
shoulder and elbow Fracture fixation of the shoulder, humerus and elbow with or without ligamentous repair — including IM nailing Manipulation of shoulder under anaesthesia Release of simple contractures of the elbow WRIST & HAND Amputations of the digit(s), hand, wrist and forearm Fixation of intra-articular fractures of the distal radius Drainage of abscess in the hand Fasciotomies of the hand and forearm Fracture fixation of the hand, wrist and forearm Primary and secondary management of fingertip
shoulder and elbow Fracture fixation of the shoulder, humerus and elbow with or without ligamentous repair — including IM nailing Manipulation of shoulder under anaesthesia Release of simple contractures of the elbow WRIST & HAND Amputations of the digit(s), hand, wrist and forearm Fixation of intra-articular fractures of the distal radius Drainage of abscess in the hand Fasciotomies of the hand and forearm Fracture fixation of the hand, wrist and forearm

Excision of small swellings of the hand, wrist and forearm (<5cm) - benign tumours, lipoma, ganglion, GCT Release of compressive neuropathies – median nerve at carpal tunnel Release of tendinopathies - trigger finger, DeQuervain tenosynovitis Therapeutic injections in the hand and wrist **PELVIS & HIP** Hip hemiarthroplasty Intramedullary nailing Fixation of hip fracture in elderly KNEE Arthroscopic lavage of septic arthritis of the knee Fixation of ACL or PCL avulsion Fixation of intra-articular knee fractures Fixation of fracture-dislocations of the knee Diagnostic arthroscopy of the knee Harvesting and preparation of autograft Patella ligament repair Quadriceps tendon repair **FOOT & ANKLE** Amputation: Chopart/Lisfranc amputation Amputation: Ray amputation Diabetic foot: wound debridement Fasciotomies of the foot ORIF for malleolar, metatarsal and phalangeal fractures Open repair of Achilles tendon Achilles tendon lengthening Hallux valgus surgery Interphalangeal and-Metatarsophalangeal (MTP) fusions Surgical treatment of ingrowing toenail Tibiotalar calcaneal fusion Triple fusion **LLRS** Fracture fixation with ring fixator Application of external fixator and wound debridement Arthrotomy for septic arthritis Closed manipulative reduction of paediatric fractures and casting Hip spica Open reduction and internal fixation in Paediatric

fractures

Supracondylar humerus fracture fixation

Congenital talipes equinovarus (CTEV): Ponsetti manipulation, casting, and tenotomy ORTHOPAEDIC ONCOLOGY
Excision of small (< 5 cm) soft tissue/bone tumours – benign
Tru-cut or core needle biopsy

^{*}Note: These criteria represent the minimum standards. Each educational programme provider may exercise their autonomy to state criteria above and beyond these minimum standards.

Specialty-Specific Minimum Requirements (Items 4-7) for Training Centres (Based on Areas 3-6 of Malaysian Standards for Medical Specialist Training) - Orthopaedic Surgery

Item	Specialty-Specific Requirements	Criteria	
no	(Reference standard)	Citteria	
4	Trainer-to-trainee ratio.	1:4	
	(Standard 3.1.3)		
5	Minimum qualifications and experience of trainers	i. Registered with National Specialist Registerii. Completed Training-of-Trainer course/equivalent	
	(Standard 4.1.2)		
6	Minimum requirements for educational resource (Standard 5.1.1)	The diagnostic facilities and equipment requirement of the programme training centres must collectively be able to accommodate the following minimum requirement: Physical Facilities	
		Facilities	
		Accident and Emergency Department	
		Dedicated orthopaedic beds/wards	
		Outpatient clinic rooms, procedure room, Plaster of Paris (POP) room	
		Operating rooms with intensive care service	
		Library with Orthopaedic books and/or access to Orthopaedic related subject e-books and journals	

Dedicated area and room for teaching, seminars, discussion, self-study and facility for online learning

Oncall room

Clinical research facility

Services

Services
Medical rehabilitation department
including physiotherapy and
occupational therapy services
Pharmacy services
Pathology department
Intensive care services
Anaesthetic clinic and service
Pain management service
Imaging department
Medical record

Equipment

Equipment	Minimum Quantity
Imaging equipment	1
(radiography,	
Computed	
Tomography (CT),	
Magnetic	
Resonance Imaging	
(MRI),	
Interventional	
Radiology)	
Curainal	1
Surgical	1
Microscope	

Orthopaedic OT	1
table with	
accessories	
360 degree C-Arm	1
Surgical Imaging	
System	
Power System	6 sets
Surgical Tool	
Arthroscopy Tower	1
Bone Cement	1
Removal Set	
Ring Fixator Set for	1
Limb	
Reconstruction	
Spine Frame	1
Neuro-monitoring	1

Case Mix and Case Load

The case mix and case load of the programme training centres must **collectively** be able to accommodate the following minimum requirements for each trainee:

Areas	Quantity (cases or surgeries/trainee/ year)
Inpatient Admissions	150
Orthopaedic specialist clinic cases	500
Operations performed	80

7	Minimum qualifications and experience of Head of Programme	i.	5 years of working experience after
	(Standard 6.2.2)	ii.	national specialist registration Experience in administration and/or academic management

^{*}Note: These criteria represent the minimum standards. Each educational programme provider may exercise their autonomy to state criteria above and beyond these minimum standards.

ACKNOWLEDGEMENT

Authors:

Specialty Education Subcommittee (SSC) Edu Orthopaedic Surgery 2022 – 2024

- 1. Dato' Dr. Mohammad Anwar Hau Abdullah (Chair)
- 2. Dato' Sri Dr. Zulkharnain Ismail
- 3. Dato' Dr. Suresh Chropa
- 4. Prof. Madya Dr. Jamari Sapuan
- 5. Dr. Ahmad Hafiz Bin Zulkifly
- 6. Dr. Faris Bin Kamaruddin
- 7. Dr. Jamal Azmi B. Mohamad
- 8. Dr. Mohamed Yazid Bin Hj Din

Specialty Education Subcommittee (SSC) Edu Orthopaedic Surgery 2024 – 2026

- 1. Prof. Dato' Dr. Ahmad Hafiz Bin Zulkifly (Chair)
- 2. Prof. Dr. Wan Hazmy Che Hon
- 3. Dr. Faris Bin Kamaruddin
- 4. Dr. Kamariah Nor binti Mohd Daud
- 5. Dr. Fahrudin Che Hamzah

Editors:

Medical Education Committee (MEC)

- 1. Prof. Datuk Dr. Rohaizat Bin Yon (Chair)
- 2. Prof. Dato' Dr. Mafauzy bin Mohamed
- 3. Prof. Dr. Zaleha Abdullah Mahdy
- 4. Prof. Datin Dr. Yong Rafidah binti Abdul Rahman
- 5. Prof. Dr. G. R. Letchuman Ramanathan
- 6. Dato' Dr. Jiffre bin Din
- 7. Dato' Dr. Jafri Malin bin Abdullah
- 8. Prof. Dr. Azad Hassan Bin Abdul Razack
- 9. Prof. Dato' Dr. Yang Faridah binti Abdul Aziz
- 10. Dr. Sri Wahyu Binti Taher
- 11. Prof. Dr. Sharifah Sulaiha Binti Syed Aznal
- 12. Prof. Dr Shatriah Binti Ismail
- 13. Prof. Dr. Lee Way Seah
- 14. Dr. Rafidah Binti Abdullah
- 15. Datuk Dr. Asits Bin Sanna
- 16. Dr. Veronica Lugah
- 17. Dr. Hirman bin Ismail

Specialty Education Subcommittee (SEC)

- 1. Prof. Dr. G. R. Letchuman Ramanathan (Chair)
- 2. Prof. Dr. Roslina Abd Manap
- 3. Dr. Hirman bin Ismail
- 4. Prof. Dr. Jamiyah binti Hassan
- 5. Prof. Dr. Nazimah Idris
- 6. Dr. Giri Shan
- 7. Dr. Hanif Hussein
- 8. Prof. Madya Dr. Bahiyah Abdullah
- 9. Datuk Seri Dr. Paras Doshi
- 10. Prof. Datin Dr. Yong Rafidah Abdul Rahman
- 11. Dr. Rafidah Abdullah
- 12. Prof. Dr. Zaleha Abdullah Mahdy
- 13. Dr. Ahmad Badruridzwanullah Bin Zun