

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

Prepared By:

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

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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) -

Cardiothoracic Surgery

Specialty-Specific	Criteria
Requirements	
(Reference Standard)	
Minimum entry requirements for postgraduate	i. Fully registered with the Malaysian Medical Council with a current annual practising certificate
training	 ii. 2 years of experience in surgery and its related fields post housemanship (including at least 6 months in cardiothoracic surgery)
(Standard 3.1.)	
	iii. Successful entry evaluation to programme, e.g: MEDEX or MRCS or equivalent
2) Minimum duration of training programme	Completion of a minimum of 72 months (6 years) of specialised cardiothoracic surgery training in the specialty programme
(Standard 1.2.4 - Table 2)	For example: 6 years, 2 years + 4 years or 4 years + 2 years programme
3) Structure of training (rotation/modules)	
(Standard 1.2.4 - Table 3 & Table 4)	

Training overview

The program should have a clear pathway encompassing phases of training which shall include the basic and advanced components in cardiothoracic surgery.

Training rotation/ modules and case mix

Typical rotations will require candidates to undergo training in areas of cardiothoracic surgery for a minimum duration of 72 months

Areas	Details	Months	
Adult cardiac	On-pump and off-	36 - 54	
surgery	pump coronary		
	artery bypass graft,		
	open and		
	minimally-invasive		
	valve surgery,		
	aortic surgery –		
	aneurysms and		
	dissection		
Adult thoracic	Open and video	12 - 18	
surgery	assisted		
	thoracoscopic		
	surgery, thoracic		
	surgery for lung		
	and mediastinal		
	structures		
Paediatric cardiac	Closed and open	6 - 12	
surgery	heart procedures		
	including simple		
	and complex		
	paediatric cardiac		
	surgeries		

^{*}Duration of training per year is 48 weeks

The core modules will include the following:

- 1. Critical care, pre and postoperative management
- 2. Cardiopulmonary bypass
- 3. Myocardial protection
- 4. Circulatory support
- 5. Ischaemic heart disease
- 6. Heart valve disease

	 Aorto-vascular disease Cardiothoracic trauma General management of a patient undergoing thoracic surgery Neoplasms of the lung Disorders of the pleura Disorders of the chest wall Disorders of the diaphragm Emphysema and bullae Disorders of the mediastinum Disorders of the airway Congenital heart disease Intrathoracic transplantation and surgery for Heart Failure
4)	Assessments should
4) Assessments (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 written assessments, clinical assessments, supervisor's report, logbook, attendance, training attended, practice diary, research report, formative assessment, communication skills including methods appropriate to assess ethics and professionalism. ii. Include formative and summative assessments throughout each rotation, semester, or year of study. iii. Include clear criteria for progression to next year of study. iv. Include an exit examination.
5) Additional	 i. Completion of graduate-level research or clinical audit project
requirements	ii. Basic life support and advanced cardiothoracic life
for completion	support courses / cardiothoracic advanced life support
of training	courses
	iii. Advanced trauma life support courseiv. Good clinical practice course
(Standard	v. Research methodology course
(Standard 1.2.4)	
1.2.41	
6) List of	Generic competencies
competencies	Able to:
to be acquired	ASIC to:
upon	i. Independently manage common cardiothoracic surgery
completion of	cases holistically, including complications, whilst
training	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

(Standard practice. iv. Ensure effective communication with patients, colleagues 1.1.4) and other healthcare-adjacent providers. Advance the evidence-based practice of surgery through research, audit and scientific writing. Exemplify life-long learning through continual professional vi. development, including acquisition of new skills and competencies. Demonstrate exemplary leadership qualities, including vii. setting and maintaining standards, supporting others and having the resilience to cope with pressure. Cultivate an entrepreneurial mindset, balancing risks and viii. benefits, for creative problem-solving. Specific specialty competencies Perform the following procedures competently including preoperative and post-operative care: Type of cases Type of surgery (no. of cases) Coronary artery bypass surgery Open heart Aortic valve replacement Mitral valve replacement (100 cases) Patent ductus arteriosus ligation Atrial septal defect closure Thoracotomy and open lobectomy, Thoracic pneumonectomy and lung wedge procedures resections Open thymectomy (30 cases) video assisted thoracoscopic

surgery bullectomy and lung

biopsies

^{*}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) -

Cardiothoracic Surgery

Item	Specialty Specific Regulingments Cuitoria					
no	Specialty-Specific Requirements	Criteria				
110	(Reference standard)					
4	Trainer-to-trainee ratio	1:3				
	(Standard 3.1.3)					
5	Minimum qualifications and experience of trainers	i. Registered with National Specialist Registerii. Completed Training-of-Trainer				
	(Standard 4.1.2)	course				
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: i. Services				
		Services				
		Diagnostic and interventional cardiology				
		Cardiac anaesthesia and intensive care monitoring				
		Cardiac perfusion (cardiopulmonary bypass) team				

Cardiac high-dependency unit Cardiac intensive care unit 24 hour cardiothoracic operation theatre and nursing team Equipment ii. **Equipment** Quantity Intra aortic 1 balloon pump Extracorporeal 1 membrane oxygenation Case Mix and Case Load iii. The case mix and case load of the programme training centres must collectively be able to accommodate the following minimum requirements for each trainee: Quantity Areas (surgeries/trainee/year) Open heart 25 surgeries Thoracic surgeries 8 5 Paediatrics cardiac surgeries 5 years of working experience i.

after national specialist

registration

7

Minimum qualifications and

experience of Head of Programme

		Experience and/or acade		administration nanagement
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ACKNOWLEDGEMENT

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