MALAYSIAN MEDICAL COUNCIL

SPECIALTY-SPECIFIC REQUIREMENTS (SSR)

(EMERGENCY MEDICINE)

Prepared By:

Specialty Education Subcommittee (SEC)

of the Medical Education Committee (MEC),

Malaysian Medical Council

Approved by the 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.

Attachment 2

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

Emergency Medicine

<table>
<tr><th>Specialty-Specific Requirements
(Reference Standard)</th><th>Criteria</th></tr>
<tr><td>1) Minimum entry requirements for postgraduate training

(Standard 3.1.)</td><td>1. Fully registered with the Malaysian Medical Council with a current annual practicing certificate

2. Successful entry evaluation to programme</td></tr>
<tr><td>2) Minimum duration of training programme

(Standard 1.2.4 - Table 2)</td><td>Completion of a minimum of 48 months of specialised training in the specialty program.</td></tr>
<tr><td>3) Structure of training (rotation/modules)

(Standard 1.2.4 - Table 3 & Table 4)

Training overview

Training rotation and case mix</td><td>The program should have a clear structure encompassing phases of training which shall include the basic and advanced components in emergency medicine.

<table>
<tr><th>Areas</th><th>Details</th><th>Minimum Duration (months)</th></tr>
<tr><td>Emergency medicine</td><td>-</td><td>24</td></tr>
<tr><td>Related disciplines</td><td>Critical Care Medicine
(3 months)

Paediatrics Emergency
(3 months)

Acute trauma
(3 months)

Acute general medicine
(including</td><td>12</td></tr>
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</td></tr>
</table>

<table>
<tr><td></td><td>
<table>
<tr><td></td><td>infectious disease and control)
(3 months)</td><td></td></tr>
<tr><td>Other related emergency areas</td><td>E.g. Hyperbaric medicine, Toxicology, Toxinology, Disaster medicine, acute general surgery, anaesthesia, (not limited to examples given)</td><td>12</td></tr>
</table>
*Duration of training per year is 48 weeks
</td></tr>
<tr><td>4) Assessments

(Standard 2.2.1)</td><td>Assessments should

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 and research report. 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 evaluation/assessment.</td></tr>
<tr><td>5) Additional requirements for completion of training

(Standard 1.2.4)</td><td>i. Completion of graduate-level research or clinical audit project.
ii. Satisfactory completion of provider essential life-support training in Advanced Cardiovascular Life Support (ACLS)/Advanced Life Support (ALS) or equivalent, Advanced Trauma Life Support (ATLS)/Trauma Life Support Malaysia (TLSM) or equivalent, Advanced Paediatric Life Support (APLS)/Paediatric Advanced Life Support (PALS), Disaster Medicine training/course or equivalent.</td></tr>
<tr><td>6) List of competencies to be acquired upon completion of training</td><td>Generic competencies

Able to:</td></tr>
</table>

(Standard 1.1.4)	i. Diagnose, investigate and manage common emergency medicine cases whilst considering social, safety and health economics aspects. ii. Anticipate and manage complications. iii. Work independently and in teams competently and professionally. iv. Practice good ethical conduct. v. Practice good communication skills. vi. Perform critical review, plan and conduct scientific research. vii. Exemplify self-advancement through continuous academic and/or professional development including digital health. viii. Apply evidence-based medicine in the field of emergency medicine. ix. Demonstrate exemplary leadership qualities in the multi-disciplinary team management of emergency medicine cases. x. Demonstrate an entrepreneurial mindset, creative problem-solving and resilience. **Specific Competencies** Able to competently: i. Manage critically ill patients. ii. Manage airway and ventilation in emergencies. iii. Manage patients with acute shock. iv. Provide a reasonable approach to the management of patient with diagnostic or treatment challenge. v. Manage acute pain in the emergency department. vi. Manage acute trauma. vii. Manage acute paediatric patients. viii. Manage medicolegal cases. ix. Manage crisis or disaster.

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

Attachment 4

<table>
<tr><td colspan="3">Specialty-Specific Minimum Requirements for Training Centres and Head Programme (Based on Areas 3-6 of Malaysian Standards for Medical Specialist Training) –

Emergency Medicine</td></tr>
<tr><td>Item no</td><td>Specialty-Specific Requirements (Reference standard)</td><td>Criteria</td></tr>
<tr><td>4</td><td>Trainer-to-trainee ratio.

(Standard 3.1.3)</td><td>1:4</td></tr>
<tr><td>5</td><td>Minimum qualifications and experience of trainers

(Standard 4.1.2)</td><td>i. Registered with National Specialist Register
ii. Completed Training-of-Trainer course/equivalent</td></tr>
<tr><td>6</td><td>Minimum requirements for educational resource

(Standard 5.1.1)</td><td>The programme training centres must collectively be able to accommodate the following minimum requirement:

i. Physical facilities
a. Seminar Rooms
b. Tutorial rooms
c. Access to library/journal/textbook (physical/online)
d. Access to simulation facilities

ii. Equipment

<table><tr><td>Equipment</td></tr><tr><td>Airway management equipment</td></tr><tr><td>Breathing and ventilatory support equipment</td></tr><tr><td>Circulation and hemorrhage control equipment</td></tr><tr><td>Skeletal immobilization equipment</td></tr><tr><td>Monitoring equipment</td></tr><tr><td>Personal proctective equipment (disposable)</td></tr><tr><td>Ambulance</td></tr><tr><td>Point-of- care testing</td></tr></table></td></tr>
</table>

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<td>iii. Services

<table>
<tr><th>Services</th></tr>
<tr><td>Pre-hospital care</td></tr>
<tr><td>Emergency services</td></tr>
<tr><td>Emergency critical care</td></tr>
<tr><td>Urgent imaging</td></tr>
<tr><td>Urgent laboratory</td></tr>
</table>

iv. Case Load

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

<table>
<tr><th>Type of cases</th><th>Minimum Quantity (cases/trainee/year)</th></tr>
<tr><td>Resuscitation / critical cases</td><td>100</td></tr>
<tr><td>Semi-critical cases</td><td>200</td></tr>
<tr><td>Pre-hospital cases</td><td>30</td></tr>
<tr><td>Acute trauma cases</td><td>200</td></tr>
</table>
</td>
</tr>
<tr>
<td>7</td>
<td>Minimum qualifications and experience of Head of Programme

(Standard 6.2.2)</td>
<td>i. 5 years or more of working experience after national specialist registration.

ii. Experience in administration and/or academic management.</td>
</tr>
</table>

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 Emergency Medicine 2022 – 2024

1. Prof. Dr. Ismail Saiboon (Chair)
2. Prof. Dato' Dr. Nik Hisamuddin Nik Ab Rahman
3. Prof. Dato' Sri Dr. Abu Hassan Asaari Bin Abdullah
4. Dr. Siti Suhaila binti Hamzah
5. Dr. Mohd Lotfi bin Hamzah
6. Dr. Shamsuriani Md Jamal

Specialty Education Subcommittee (SSC) Edu Emergency Medicine 2024 – 2026

1. Dr. Mohd Lotfi bin Hamzah (Chair)
2. Prof. Dr. Ismail Saiboon
3. Prof. Madya Dr. Azizul Fadzli bin Wan Jusoh @ Ab. Rahim
4. Dr. Siti Suhaila binti Hamzah
5. Dr. Shamsuriani Md Jamal
6. Dr. Teo Aik Howe

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
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8. Prof. Dr. Azad Hassan Bin Abdul Razack
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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

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