



MALAYSIAN MEDICAL COUNCIL

SPECIALTY-SPECIFIC REQUIREMENTS (SSR)

(REHABILITATION MEDICINE)

Prepared By:

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

Approved by the Malaysian Medical Council:

17th December 2024

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) – Rehabilitation Medicine															
Specialty-Specific Requirements (Reference Standard)	Criteria														
1) Minimum entry requirements for postgraduate training (Standard 3.1.)	1. Fully registered with the Malaysian Medical Council with a current annual practicing certificate 2. Successful entry evaluation into the programme														
2) Minimum duration of training programme (Standard 1.2.4 - Table 2)	Completion of a minimum of 48 months of specialized training in the specialty program.														
3) Structure of training (rotation/modules) (Standard 1.2.4 - Table 3 & Table 4) Training overview Training rotation/modules and case mix	The program should have a clear pathway encompassing phases of training which shall include general and specialized Rehabilitation Medicine training. <table border="1"> <thead> <tr> <th>Areas</th><th>Minimum Duration (weeks)</th></tr> </thead> <tbody> <tr> <td>General Rehabilitation / Medical / Surgical</td><td>26</td></tr> <tr> <td>Neurological rehabilitation</td><td>84</td></tr> <tr> <td>Musculoskeletal Rehabilitation</td><td>30</td></tr> <tr> <td>Cardiac Rehabilitation</td><td>12</td></tr> <tr> <td>Paediatric Rehabilitation</td><td>20</td></tr> <tr> <td>Others</td><td>20</td></tr> </tbody> </table> *Duration of training per year is 48 weeks	Areas	Minimum Duration (weeks)	General Rehabilitation / Medical / Surgical	26	Neurological rehabilitation	84	Musculoskeletal Rehabilitation	30	Cardiac Rehabilitation	12	Paediatric Rehabilitation	20	Others	20
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General Rehabilitation / Medical / Surgical	26														
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4) Assessments (Standard 2.2.1)	Assessment should i. Employs appropriate methods at appropriate training levels that are well-aligned with learning outcomes.														

	ii. Include variety of methods including formative and summative assessments throughout each rotation, semester, or year of study, such as CBD, MiniCEX, DOPS, theory examination, and clinical examination. iii. Include methods appropriate to assess communication skills, ethics and professionalism. iv. Include clear criteria for progression to next level of study. v. Include an exit evaluation/assessment.
5) Additional requirements for completion of training (Standard 1.2.4)	i. Completion of graduate-level research or clinical audit project. ii. Submission of at least one scientific conference abstract.
6) List of competencies to be acquired upon completion of training (Standard 1.1.4)	<u>Generic competencies</u> Able to i. Diagnose, investigate and manage common Rehabilitation 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 rehabilitation medicine ix. Demonstrate exemplary leadership qualities in the multi-disciplinary team management of rehabilitation medicine cases x. Demonstrate an entrepreneurial mindset, creative problem-solving and resilience <u>Specialty Specific competencies</u> Upon completion of training, the trainee must be able to perform independently: • Ultrasound for muscle localisation • Botulinum Toxin injection • Single Channel Water Cystometry or urodynamic study • Total Contact Cast or Serial Casting • Exercise Stress Test

	• Impairment and disability management • Return to work/school management • Orthosis and prosthesis prescription • Swallowing management • Exercise prescriptions
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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 for Training Centres and Head Programme
(Based on Areas 3-6 of Malaysian Standards for Medical Specialist Training) –**

Rehabilitation Medicine

Item No.	Specialty-Specific Requirements (Reference standard)	Criteria									
4	Trainer-to-trainee ratio. (Standard 3.1.3)	1:4									
5	Minimum qualifications and experience of trainers (Standard 4.1.2)	i.Registered with National Specialist Register ii.Completed Training-of-Trainer course/equivalent									
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 requirements: i. Service Area: <table border="1"> <thead> <tr> <th>Service area</th><th>Details</th><th>Minimum Quantity</th></tr> </thead> <tbody> <tr> <td>Inpatient rehabilitation services</td><td> • Neuromedical Rehabilitation • Acquired Brain Injury Rehabilitation • Spinal Cord Injury Rehabilitation • Paediatric Rehabilitation • Amputee Rehabilitation </td><td>8 beds</td></tr> <tr> <td>Outpatient rehabilitation clinics</td><td> • Neuromedical Rehabilitation • Acquired Brain Injury Rehabilitation • Spinal Cord Injury Rehabilitation • Paediatric Rehabilitation </td><td>4 rooms</td></tr> </tbody> </table>	Service area	Details	Minimum Quantity	Inpatient rehabilitation services	• Neuromedical Rehabilitation • Acquired Brain Injury Rehabilitation • Spinal Cord Injury Rehabilitation • Paediatric Rehabilitation • Amputee Rehabilitation	8 beds	Outpatient rehabilitation clinics	• Neuromedical Rehabilitation • Acquired Brain Injury Rehabilitation • Spinal Cord Injury Rehabilitation • Paediatric Rehabilitation	4 rooms
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		• Amputee rehabilitation • Musculoskeletal Rehabilitation • Cardiac Rehabilitation	
	Therapy areas for different allied health services	• Physiotherapy • Occupational Therapy • Speech and Language Pathology	1 of each

ii. Physical facilities:

Physical facilities
Internet access
Access to a resource centre
Discussion rooms, lecture rooms, and hall
Students’ workspace
Hospital with Rehabilitation Medicine Specialist

iii. Clinical equipment:

Clinical Equipment
Musculoskeletal ultrasound
Urodynamic Study (UDS) Machine
Single Channel Cystometry (SCC)
Exercise Stress Test
Fiberoptic Endoscopic Swallowing Evaluation (FEES)
Penile Vibration Stimulation
Nerve Conduction and Electromyography (EMG) machine

iv. Caseload:

The caseload for the programme training centres must **collectively** be able to accommodate the following minimum requirement for each trainee:

Areas	Minimum Quantity (cases/trainee/year)
Outpatients	200
Inpatients	60

		v. Casemix: <table> <tr> <th>Areas</th><th>Details</th><th>Minimum Quantity (cases/trainee/year)</th></tr> <tr> <td>Outpatient</td><td>-</td><td>25</td></tr> <tr> <td>Inpatient</td><td>Admission under Rehabilitation Medicine or other wards</td><td>30</td></tr> </table>	Areas	Details	Minimum Quantity (cases/trainee/year)	Outpatient	-	25	Inpatient	Admission under Rehabilitation Medicine or other wards	30
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Outpatient	-	25									
Inpatient	Admission under Rehabilitation Medicine or other wards	30									
7	Minimum qualifications and experience of Head of Programme (Standard 6.2.2)	i. 5 years or more of working experience after national specialist registration ii. 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

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