



MALAYSIAN MEDICAL COUNCIL

GUIDELINES FOR INCLUSION OF NEW MEDICAL SPECIALTY IN THE FOURTH SCHEDULE

Prepared By:

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Malaysian Medical Council

Approved by the Malaysian Medical Council:

21st July 2026

1.0 Background

The Medical (Amendment) Act 2012 requires the Malaysian Medical Council (MMC) to establish and maintain a Specialist Register through the Medical Education Committee (MEC). Medical practitioners intending to practice as specialists are required to have their names entered in the Specialist Register, which serves as the database of specialist medical practitioners in the country. Specialist registration must comply with the Medical Act 1971 (Act 50) / Medical (Amendment) Act 2024 and the Medical Regulations 2017 / Medical Regulation 2025. The list of specialties recognised by the Council is displayed on the website of the Specialist Register and stated in the Fourth Schedule of the Medical (Amendment) Act 2024.

With the advances in medical knowledge and technology, as well as diversity and consolidation of medical practice, **specialization** and sub-specialization are inevitable. Medical practitioners will stratify and focus into specific areas of expertise and narrower fields of practice. The development of new specialties must be aligned to the health care needs and expectations of the country. The Medical Council has the responsibility to ensure that the quality of medical care provided to the people is of the highest standard. The purpose of this document is to provide guidance to those seeking recognition of a new specialty. This new speciality could be de novo or a subspeciality progressing to become a specialty.

2.0 CRITERIA FOR INCLUSION OF NEW MEDICAL SPECIALTY

- 2.1 The following criteria are intended to guide the evaluation and consideration of applications for the inclusion of a new medical specialty in the Fourth Schedule.
- 2.2 The inclusion of a new medical specialty in the Fourth Schedule will be based on the structured and transparent process to ensure that the proposed specialty:
 - 2.2.1 fulfils the healthcare needs of the country;
 - 2.2.2 reflects advancements in medical knowledge and practice;
 - 2.2.3 does not cause siphoning of resources from other existing specialties or subspecialties;
 - 2.2.4 represents a distinct and well-defined area of medical practice that cannot be adequately accommodated within existing specialties or subspecialties;
 - 2.2.5 enhances patient safety;
 - 2.2.6 sustainable within the national healthcare system;
 - 2.2.7 at least 4 years of specialist training;
 - 2.2.8 is supported by major stakeholders;
 - 2.2.9 is preferably organ/system-based;
 - 2.2.10 where a recognised subspecialty subsequently becomes a basic specialty, any consequential matters, including the exclusion of the relevant field from the Fifth Schedule, shall be considered and addressed separately by the Council at the appropriate time.

3.0 Glossaries

3.1 Areas of Interest (AOI)

A focused area within a specialty with a shorter training period than advanced specialty training or subspecialty.

3.2 Advanced Specialty

A focused area within a specialty (training programme is similar as subspecialty) but is not formally recognised as a subspecialty and not listed under the Fifth Schedule of the Medical (Amendment) Act 2024.

3.3 Field of Practice

A broad medical domain encompassing related specialties, Subspecialties, advanced Specialty and areas of interest.

3.4 Medical Education Committee for Specialist Medical Qualifications

Medical Education Committee for Specialist Medical Qualifications (MEC 2) is a committee established under Regulation 22A of the Medical Regulation 2025. The MEC 2 provides recommendations to MMC on matters related to postgraduate medical education of both specialty and subspecialty training programme for the purpose of recognition and inclusion into the Fourth and Fifth Schedules.

3.5 Medical Education Committee for Primary Medical Qualifications

Medical Education Committee for Primary Medical Qualifications (MEC 1) is a committee established under the Regulation 22 of the Medical Regulation 2017. The MEC 1 provides recommendations to MMC on matters related to the required standard and qualifications of the training institutions for listing in the Second Schedule to the Act and the maintenance of such standard.

3.6 Specialty

A formally recognised field of practice that is listed under the Fourth Schedule of the Medical (Amendment) Act 2024.

3.7 Specialty Education Committee

Specialty Education Subcommittee (SEC) is a working group committee under MEC 2, established to provide assistance on matters related to specialist medical education, including the development of Malaysian Standards for Medical Specialist Training.

3.8 Specialty Subcommittee for Education

Specialty Subcommittee for Education (SSC-Edu) is a committee under SEC and MEC 2, established to develop and review the Specialty Specific Requirements based on Malaysian Standards for Medical Specialist Training, and review applications for inclusion of new subspecialties.

3.9 Subspecialty

A focused area within a Specialty that is a formally recognised field of practice listed under the Fifth Schedule of the Medical (Amendment) Act 2024.

3.10 Subspecialty Education Committee

The Subspecialty Education Subcommittee (SbEC) is a working group committee established under MEC 2, with the purpose to assist in the governance of subspecialty training 2/14 programmes, including matters related to the inclusion and removal of subspecialties from the Fifth Schedule.

3.11 Specialty Specific Requirements

Specialty Specific Requirements specify the minimum training requirement for each Specialty that includes the training curriculum, qualifying criteria for the trainers and head of programme, and the required educational resources.

3.12 Evaluation Committee for Specialist Medical Qualifications

Evaluation Committee for Specialist Medical Qualifications (ECSMQ and is also well known as JKP2) has been established to make recommendations to the Council on an application for registration of fully registered medical practitioners.

3.13 Specialty Subcommittee Evaluation

Specialty Subcommittee Evaluation (SSC-Eval) has been established to make recommendations to the ECSMQ on applications for registration of fully registered medical practitioners.

3.14 Appendix A

Appendix A comprises of documents required for submission.

3.15 Appendix B

Appendix B is a check list of documents to be submitted.

4.0 The process for inclusion of new medical specialty in the Fourth Schedule

4.1 The application for inclusion of a new specialty may be made by a medical body/organisation/institution.

4.2 The letter of intent and the application for the proposal for the recognition of a new specialty shall be submitted to the President of the Malaysian Medical Council.

4.3 There are two phases for the inclusion of a new specialty:

4.3.1 PHASE 1: ASSESSMENT OF NEW MEDICAL SPECIALTY

- i. Process of initial assessment
- ii. Process of detailed evaluation

4.3.2 PHASE 2: INCLUSION IN THE FOURTH SCHEDULE

- i. Process of gazettelement
- ii. Establishment of new specialty

4.4 PHASE 1: ASSESSMENT OF NEW MEDICAL SPECIALTY

4.4.1 Process of Initial Assessment

- i. The letter of intent must be accompanied with all documents required as listed in the Appendix A and Appendix B.
- ii. Incomplete documents shall be returned to the applicants.
- iii. The application is forwarded to the Medical Education Committee for Specialist Medical Qualification (MEC 2) for review and subsequently forwarded to SEC for an initial assessment.
- iv. SEC will carry out the initial assessment based on these criteria:
 - a. Number of specialists who have completed training in this field.
 - b. Completeness of information and fulfilment the requirements in Appendix A and Appendix B.
- v. SEC will forward their recommendations to MEC 2.
- vi. MEC 2 may:
 - a. Request for further information or additional document from the applicant; or
 - b. Recommend the application to be rejected; or
 - c. Recommend to proceed for detailed evaluation.

4.4.2 Process of Detailed Evaluation

- i. Upon recommendations made by MEC 2, SEC shall perform the detailed evaluation.
- ii. The application shall be forwarded first to the Specialty Education Subcommittee (SEC) and then to Specialty Subcommittee for Education (SSC-Edu) (parent and relevant) for review and appraisal. Additional documents or engagement with relevant stakeholders may be required.
- iii. SEC shall:
 - a. Evaluate findings and recommendations made by SSC-Edu
 - b. Request for additional documents if deemed necessary
 - c. Engage with relevant stakeholders if deemed necessary
 - d. Submit report and recommendations to MEC 2
- iv. MEC 2 shall review and verify recommendations from SEC, SSC-Edu (parent and relevant) and various stakeholders (BPP KKM, Academy of Medicine, professional

societies, and relevant specialties) feedback, then make their recommendation to the MMC.

- v. The Council shall review the reports and make the final recommendations.
- vi. The unsuccessful application will be informed by the Council to the applicant.
- vii. The successful application will then be forwarded for the gazettelement process.

4.5 PHASE 2: INCLUSION IN THE FOURTH SCHEDULE

4.5.1 Process of gazettelement

- i. The Council shall inform the Legal Advisor in Ministry of Health (MOH).
- ii. The MOH Legal Advisor shall review the proposed amendment and liaise with the Attorney General's Chambers (AGC).
- iii. The gazettelement will be published once approved by the Minister of Health.
- iv. The new specialty will be added on the MMC website and the applicant shall be informed.

4.5.2 Establishment of New Medical Specialty

4.5.2.1 MEC2 and JKP2 will coordinate the establishment of;

- i. Specialty Subcommittee for Education (SSC-Edu)
- ii. Specialty Subcommittee Evaluation (SSC-Eval)

4.5.2.2 The new established SSC-Edu shall develop the Specialty Specific Requirements (SSR).

4.6 Additional policy statements

4.6.1 Duration of application process

The decision to accept or reject the application of a new specialty will be made within 1 year (upon submission of completed documents).

4.6.2 Clarification response time

The applicant shall respond to queries from SEC within 6 months. Failure to do so will result in rejection of the application.

4.6.3 Appeal

- i. The decision of the Council is final, and no appeal will be entertained.
- ii. Reapplication can be made 1 year after the date of rejection.

5.0 LIST OF DOCUMENTS FOR SUBMISSION

5.1 Human Resource

5.1.1 To provide projection number of specialists required;

5.1.1.1: Based on the needs of the country.

5.1.1.2: Existing training capacity.

5.2 Evidence of advancement in specialty

5.2.1 To provide evidence that the new specialty is based on a substantial advancement in medical science and represents a distinct and well-defined field of medical practice.

5.2.1.1 List the cases/ clinical conditions that the new specialty will manage.

5.2.1.2 List the procedures that the new specialty will perform.

5.2.1.3 List the specialty or subspecialty which currently manages the cases / conditions / perform procedures listed in 2.1 and 2.2.

5.2.1.4 In the case of conversion of a subspecialty area to a basic specialty, please describe how inclusion of the proposed Specialty will not adversely affect the primary basic specialty.

5.2.1.5 Include evidence of enhancement to patient safety.

5.3 Period of training

5.3.1 To provide evidence that the new specialty requires a minimum of 4 years of structured training and has been recognised else where.

5.3.1.1 Has this proposed specialty been recognised as part of a professional organisation?

5.3.1.2 Provide information of practice of the proposed specialty in other countries including the professional organization and recognition in other jurisdictions. (provide details)

5.4 Overlapping areas

5.4.1 The training required of the new specialty must be distinctly different from the training required for existing medical specialties or subspecialties, and it is not feasible for it to be included in other established training.

5.4.1.1 Please state other specialties or subspecialties that provide a similar scope (partially or complete). Please provide details on overlapping areas.

- For the overlap areas which specialties/ subspecialties are providing similar training?
- State the reason why the proposed new specialty cannot be included in the existing specialty or subspecialty.

5.4.1.2 Describe the duration of the training and the curriculum or structure of the training programme.

5.4.1.3 List down potential qualifications and their awarding bodies that will be used as specialist qualification of the proposed specialty.

5.5 Enquiry of access

5.5.1 How are the current providers of the service affected by the recognition of the new specialty?

5.5.2 Will privileges of current service providers be affected by the establishment of this new specialty?

5.6 Infrastructure

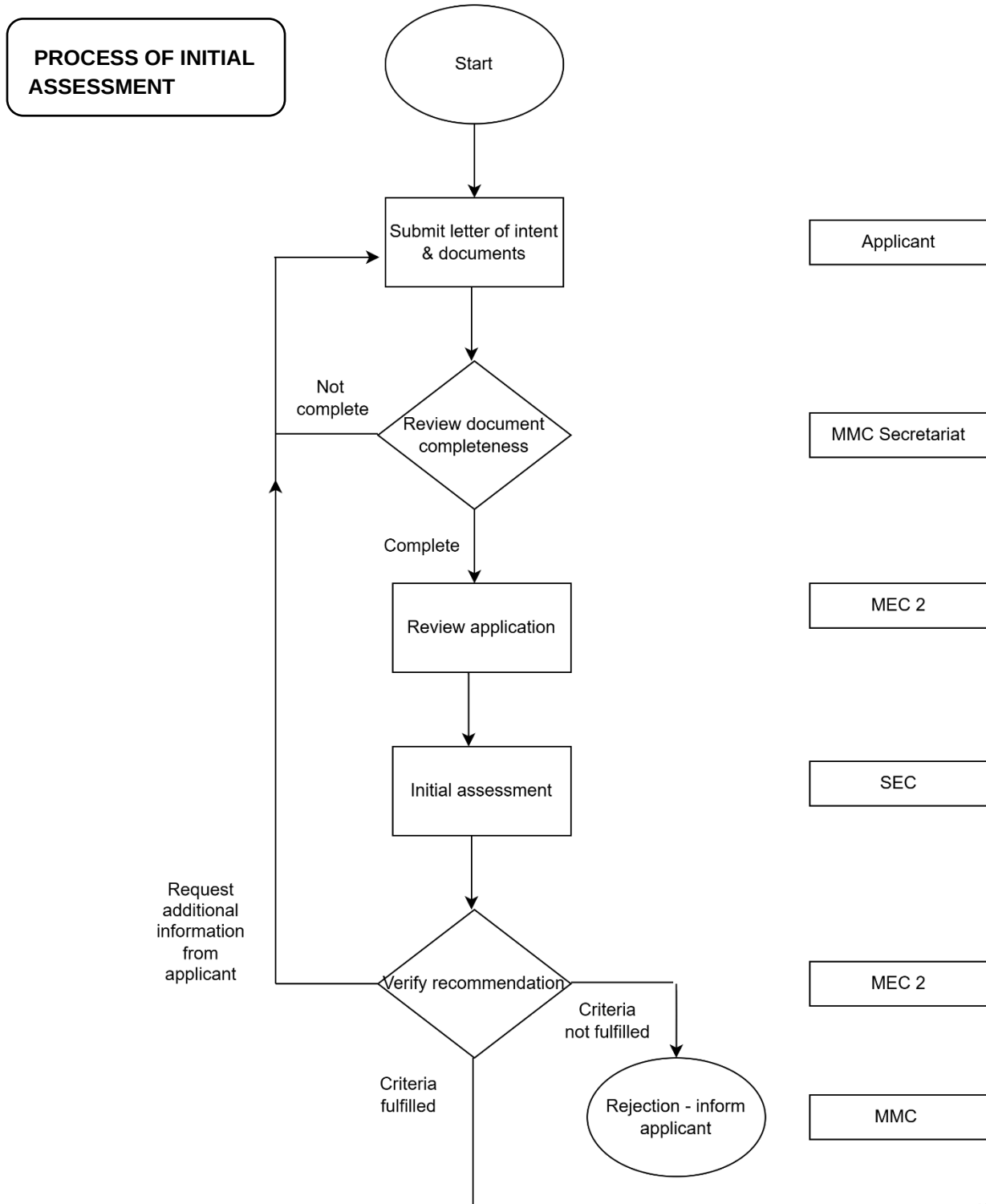
5.6.1 Please provide information on available infrastructure to sustain and support the specialty including the availability of strategic framework for nationwide service provision (if available).

5.7 Stakeholder engagement

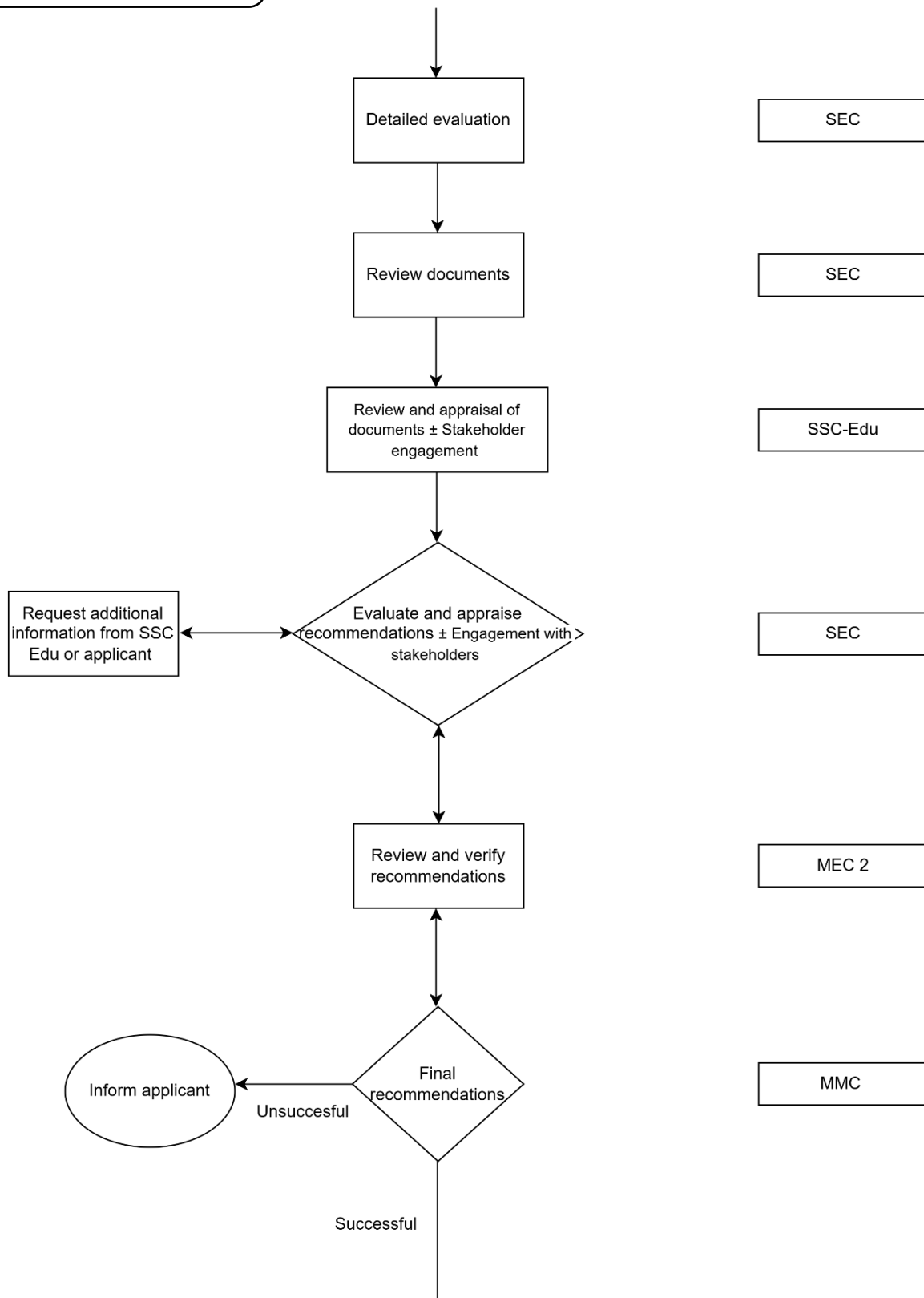
5.7.1 Please provide evidence of engagement with relevant stakeholders (parent specialty /subspecialty/any other medical organisation / private healthcare organisation/NGO).

FLOWCHART FOR INCLUSION OF NEW MEDICAL SPECIALTY IN THE FOURTH SCHEDULE

PHASE 1: ASSESSMENT OF NEW MEDICAL SPECIALTY

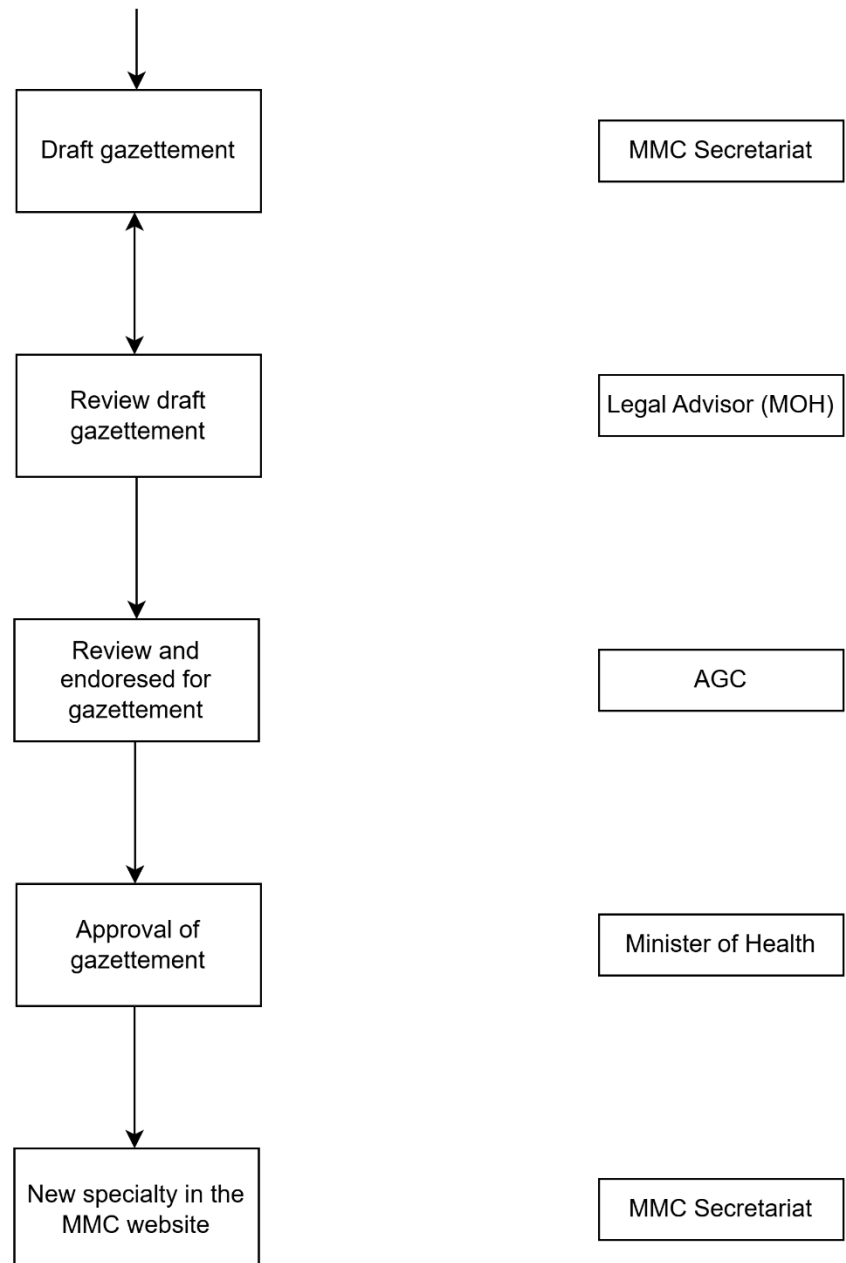


PROCESS OF DETAILED EVALUATION

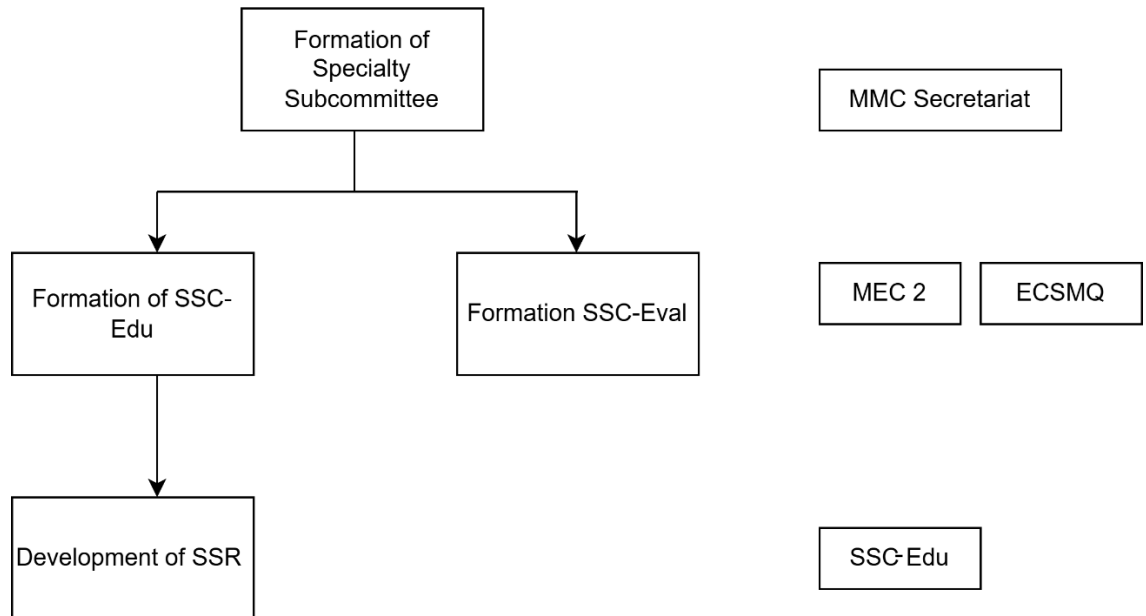


PHASE 2: THE PROCESS OF INCLUSION IN THE FOURTH SCHEDULE

PROCESS OF GAZETTEMENT



**ESTABLISHMENT OF NEW
MEDICAL SPECIALTY**



6.0 Legal Reference.

6.1 **Section 14B (1)** of the Medical (Amendment) Act 2024 specifies that:

A person is entitled to be registered as a specialist under this Act if-

- a) *he has been fully registered under section 14;*
- b) *he holds any of the specialist qualifications as specified in the fourth column of the Fourth Schedule for a duration of recognition that may be determined by the Council;*
- c) *he has completed a specialized training;*
- d) *he has –*
 - i. *Successfully undergone supervised work experience that shall be determined by the Council; or*
 - ii. *Proven his work experience to the satisfaction of the Council;**and*
- e) *he has proven to the satisfaction of the Council that he is competent and is of good character.*

6.2 **Section 14B (3)** of the Medical (Amendment) Act 2024:

The specialized training referred to in this Act shall be construed as a reference to—

- (a) *a training approved by the Council in relation to a specialty as specified in the first column of the Fourth Schedule as provided by—*
 - i. *the Ministry of Health;*
 - ii. *a local higher educational institution; or*
 - iii. *any other institutions within Malaysia as approved by the Council; or*
- (b) *any other training acceptable to the Council which is provided outside Malaysia in relation to a specialty as specified in the first column of the Fourth Schedule or subspecialty as specified in the Fifth Schedule.*

6.3 New Regulation 22A of the Medical (Amendment) Regulations 2025 states that,

22A (2) The Medical Education Committee for Specialist Medical Qualifications for specialist shall have the functions to make recommendations to the Council as follows:

- a. *a new specialty or description of qualification for listing in the Fourth Schedule to the Act;*
- b. *a new subspecialty for listing in the Fifth Schedule to the Act;*

- c. *the specialized training which is approved by or is acceptable to the Council as referred to in subsection 14B(3) of the Act; and*
- d. *an application for approval of a new specialized training under regulation 27A.*

7.0 The purpose of the document:

7.1 This document describes the process for inclusion of a new medical specialty in the Fourth Schedule. It serves as a guideline for the establishment of a new specialty or the progression of an existing subspecialty to specialty.

8.0 List of documents required and must be submitted for applicant submission

Domain/Title	Document Number	Subsections	To be filled by secretariat on status of submission (Documents / information submitted)
8.1 Human Resource	1	Projection on the number of specialists that can be trained by 5 years.	
	2	1.1 Process on projection described.	
		1.2 Information on training capacity • Number of trainers • Number of training centers	
8.2 Evidence of advancement in specialty	3	2.1 List of cases/ clinical conditions that the new Specialty will manage.	
	4	2.2 List of procedures that the new Specialty will perform.	
	5	2.3 Information on who currently manages the cases/ conditions/ perform procedures listed in 2.1 and 2.2.	
8.3 Period of training	6	3.1 List of countries which have recognised this Specialty.	
	7	Information on duration of training programme	
8.4 Overlapping areas	8	4.1 Information with regard to overlapping service with other specialty or subspecialty. 4.2 Information on the curriculum or structure of the training programme	
8.5 Equity of access	9	Information on whether the privileges of the current service providers will be affected.	
8.6 Infrastructure	10	Information provided.	
8.7 Stakeholder engagement	11	Information provided.	
8.8 Financial Implication	12	Information provided	
8.9 Enhancement of Patient Safety	13	Information provided	