MALAYSIAN MEDICAL COUNCIL
GUIDELINES FOR INCLUSION OF NEW MEDICAL SUBSPECIALTIES IN THE FIFTH SCHEDULE

Background

With the advances in medical knowledge and technology, diversity and consolidation of medical practice**,** specialization and sub-specialization are inevitable. Subspecialty is a narrow field within a Specialty; an area of medicine with a more focused or advanced scope that builds upon the broad-based body of knowledge defined in a parent Specialty.

Subspecialists provide highly specialized, focused care, which can lead to better quality of care and outcomes. However, its growth and practice should not disadvantage other groups of patients. It is crucial that we take into consideration the needs and resources of the country, and avoidance fragmentation of the main specialty services. Excessive specialization should not be at the expense of Generalists. This can have a deleterious effect on the Health Care System of the country.

The development of new subspecialties must be aligned with the health care needs and expectations of the country. The Malaysian Medical Council (MMC) has the responsibility to ensure the quality of medical care provided, is not only of the highest standard but also takes into consideration the accessibility and equity of care.

The Medical Act 1971 requires the MMC to establish and maintain a Specialist Register. Medical practitioners intending to practice as specialists and subspecialists in Malaysia are required to have their names admitted in the Specialist Register. Subspecialty registration must comply with the Medical Act (Amendment) 2024 and the Medical Regulations (Amendment) 2025. The list of Subspecialties recognised by the MMC is displayed in the Fifth Schedule of the Medical Act (Amendment) 2024.

This document describes the criteria for recognition and the appraisal process of applications for recognition of a new Subspecialty in the Fifth Schedule.

Glossaries

Areas of Interest (AOI)
A focused area within a specialty with a shorter training period than advanced specialty training or subspecialty.

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.

Field of Practice
A broad medical domain encompassing related specialties, subspecialties, and areas of interest.

Medical Education Committee for Specialist Medical Qualifications
Medical Education Committee for Specialist Medical Qualifications (MEC 2) is a committee established under the MMC. 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.

Medical Education Committee for Primary Medical Qualifications
Medical Education Committee for Primary Medical Qualifications (MEC 1) is a committee established under the MMC. 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.

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

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.

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

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

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

programmes, including matters related to the inclusion and removal of subspecialties from the Fifth Schedule.

Subspecialty Subcommittee for Education

The Subspecialty Subcommittee for Education (SbSC-Edu) is a working group under the SbEC and MEC 2, established to assist the MMC in ensuring quality governance of subspecialty training through the development and review of Subspecialty Specific Requirements (SbSR).

Subspecialty Specific Requirements

Subspecialty Specific Requirements specify the minimum training requirement for each subspecialty. This includes the training curriculum, qualifying criteria for the assessors, trainers and head of programme, and the required educational resources.

Subspecialty Training Framework

Subspecialty Training Framework (STF) is a training framework developed by MMC to guide the Educational Training Provider which intend to develop a Subspecialty Training Programme. This document provides guidance on the essential components on curriculum design, trainer and trainee requirements, assessments, resources, and aspects of governance.

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.

Subspecialty Subcommittee Evaluation

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

Appendix A

Appendix A comprises of documents required for submission.

Appendix B

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

Criteria for inclusion of a new Subspecialty in the Fifth Schedule

i. Minimum number of 30 specialists who have completed the advanced training.
ii. The competency and skill set require at least 3 years of training programme.
iii. Adequate numbers of trained specialists for governance / regulation in MMC (SbSC Edu & SbSC Eval).
iv. Sufficient trainers to expand the subspecialty.
v. The recognition will not deprive access and equity for the service to the general population by the generalist.
vi. No significant overlapping areas of practice.
vii. There is no mismatch between the healthcare provider and the disease burden.
viii. Evidence of engagement with relevant stakeholders (example but not limited to: Relevant specialty, MOH (Service planning), professional bodies).

The process for inclusion of a new Subspecialty in the Fifth Schedule

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

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

There are four phases for the inclusion of a new subspecialty:
Phase 1: Process of initial assessment,
Phase 2: Process of detailed evaluation,
Phase 3: Process of gazettement and
Phase 4: Establishment of new subspecialty.

Phase One: 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 (MEC2) for Specialist Medical Qualification for review and subsequently forwarded to SbEC for an initial assessment.
iv. SbEC 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. SbEC will forward their recommendations to MEC2.
vi. MEC2 may;
    - Request for further information or additional document from the applicant
      or
    - Recommend the application to be rejected
      or
    - Recommend to proceed for detailed evaluation.

Phase Two: Detailed Evaluation

i. Upon recommendations made by MEC2, SbEC 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. SbEC shall:
    - Evaluate findings and recommendations made by SEC and SSC-Edu
    - Request for additional documents if deemed necessary
    - Engage with relevant stakeholders if deemed necessary
    - Submit report and recommendations to MEC2
iv. MEC2 shall review and verify recommendations from SbEC, SEC, SSC-Edu (parent and relevant) and various stakeholders feedback, then make their recommendation to the MMC.
v. MMC shall review the reports and make the final recommendations.
vi. The unsuccessful application will be informed by the MMC to the applicant.
vii. The successful application will then be forwarded for the gazettement process.

Phase Three: Gazettement Process

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

Phase Four: Establishment of New Subspecialty Subcommittee

MEC2 and JKP2 will coordinate the establishment of;

1) Subspecialty Subcommittee for Education (SbSC-Edu)
2) Subspecialty Subcommittee Evaluation (SbSC-Eval)

The new established SbSC-Edu shall develop the Subspecialty Specific Requirements (SbSR).

Additional policy statements

1) **Duration of application process**
   The decision to accept or reject the application of a new subspecialty will be made within 1 year (upon submission of completed documents).
2) **Clarification response time**
   The applicant shall respond to queries from SbEC within 6 months. Failure to do so will result in rejection of the application.

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

Appendix A

LIST OF DOCUMENTS FOR SUBMISSION

1.0 Training Plan

It must be written according to MMC STF guidelines. Documents listed in the MMC STF appendix must be attached.

2.0 Human Resource

To provide projection on number of subspecialists required;

2.1 Based on the needs of the country.

2.2 Existing training capacity.

3.0 Evidence of advancement in subspecialty

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

3.1 List the cases/clinical conditions that the new subspecialty will manage.

3.2 List the procedures that the new subspecialty will perform.

3.3 List the specialty or subspecialty which currently manages the cases/conditions/ perform procedures listed in 3.1 and 3.2.

4.0 Period of training

To provide evidence that the new Subspecialty requires a minimum of 3 years of structured training and has been recognised.

4.1 Has this proposed Subspecialty been recognised in other countries?

4.2 Provide information on the syllabus and duration of training in other countries.

5.0 Overlapping areas

The training required of the new subspecialty 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.

5.1 Any other Specialties or Subspecialties that provide a similar scope (partially or complete)? If yes, please elaborate:

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

6.0 Equity of access

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

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

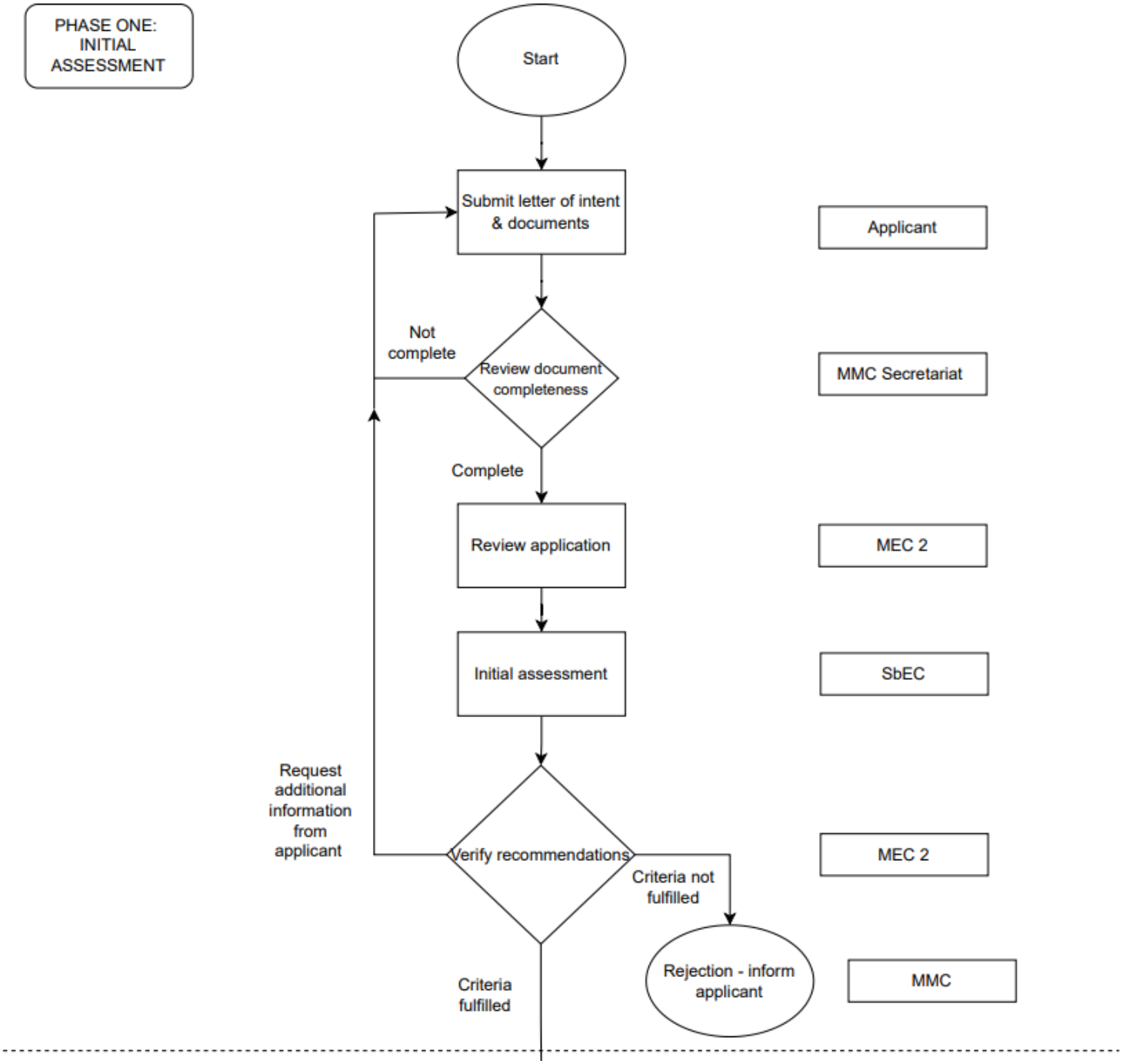
7.0 Infrastructure

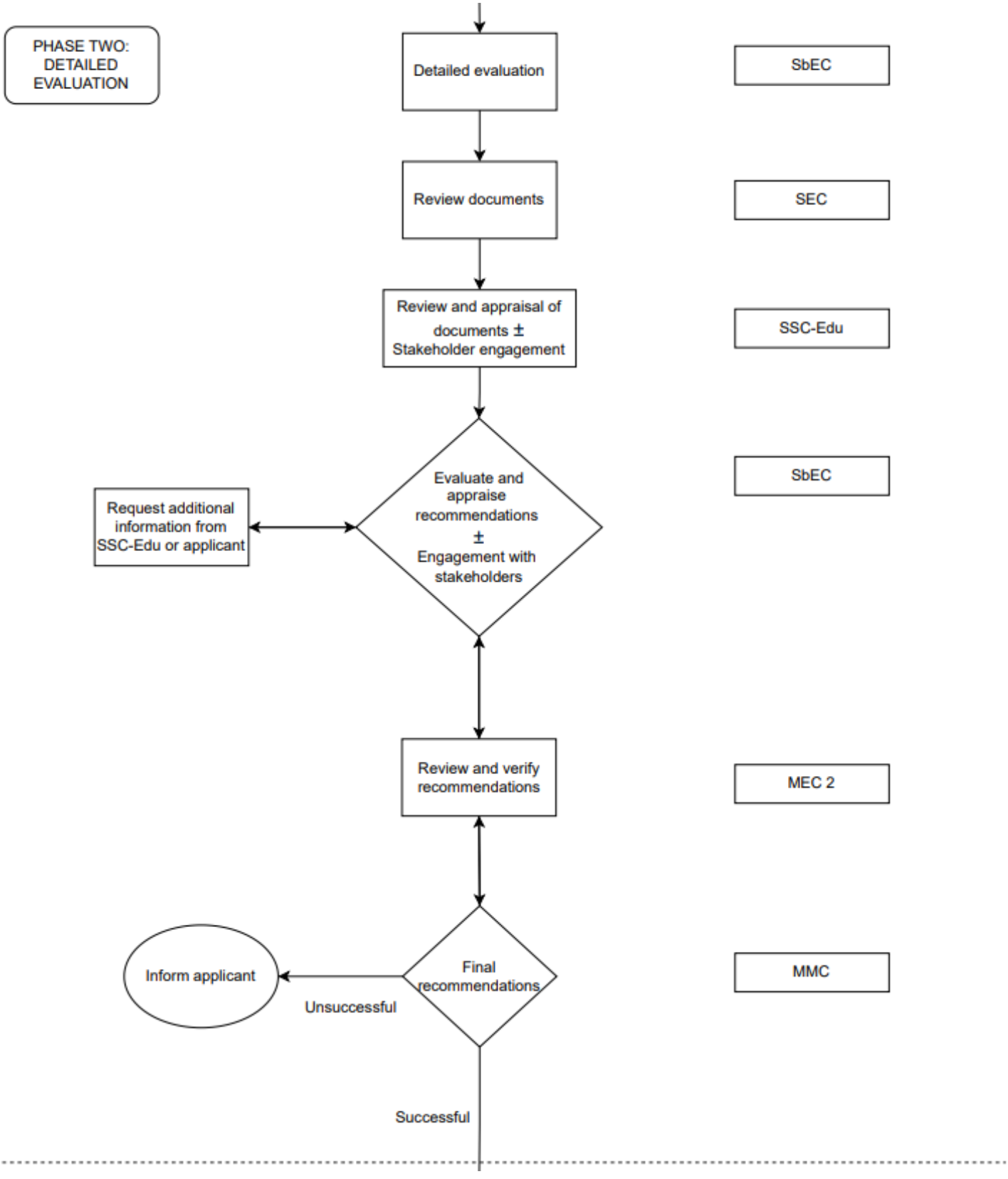
Provide information on available infrastructure to sustain and support the Subspecialty including the availability of strategic framework for nationwide service provision (if available).

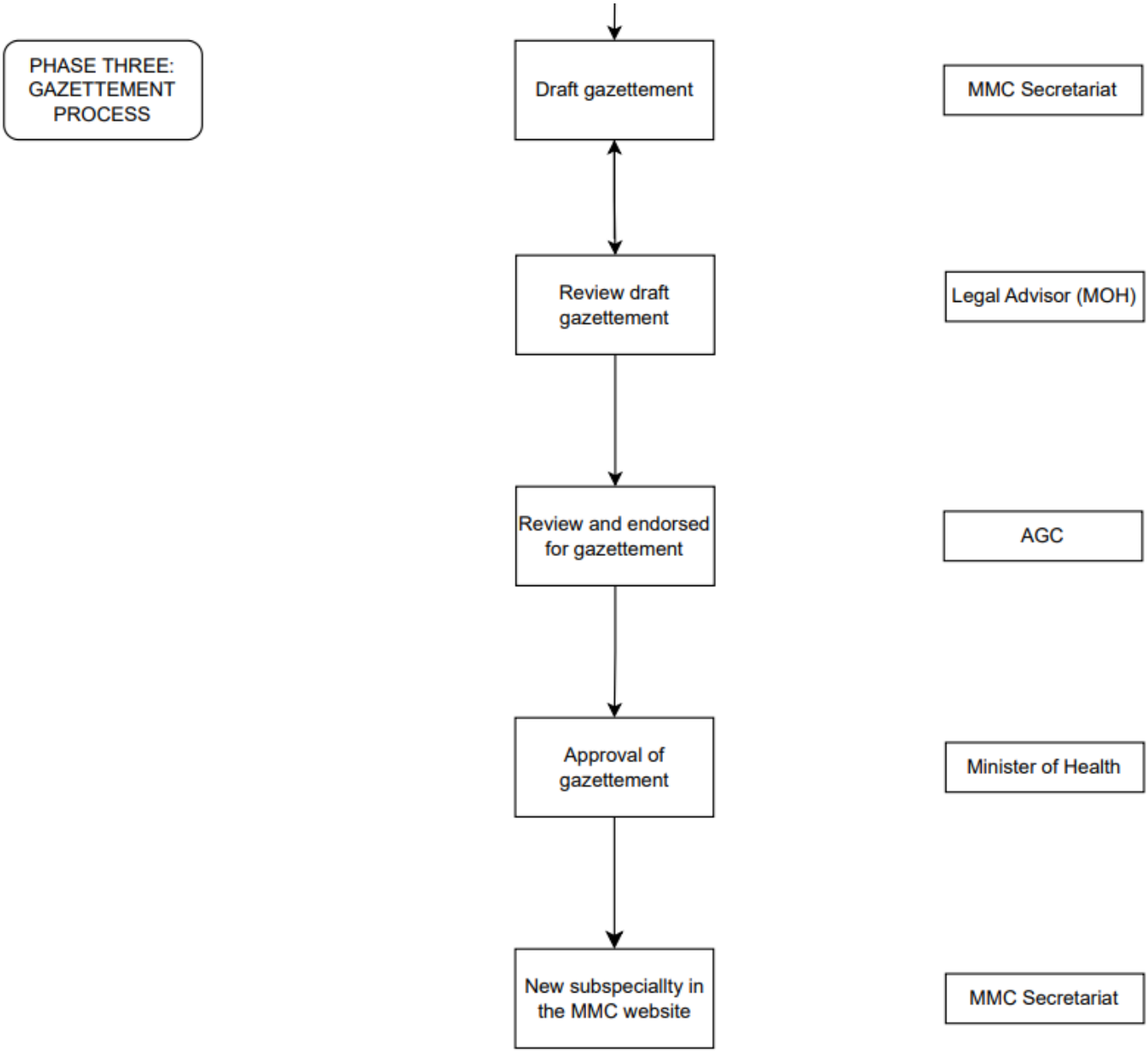
8.0 Stakeholder engagement

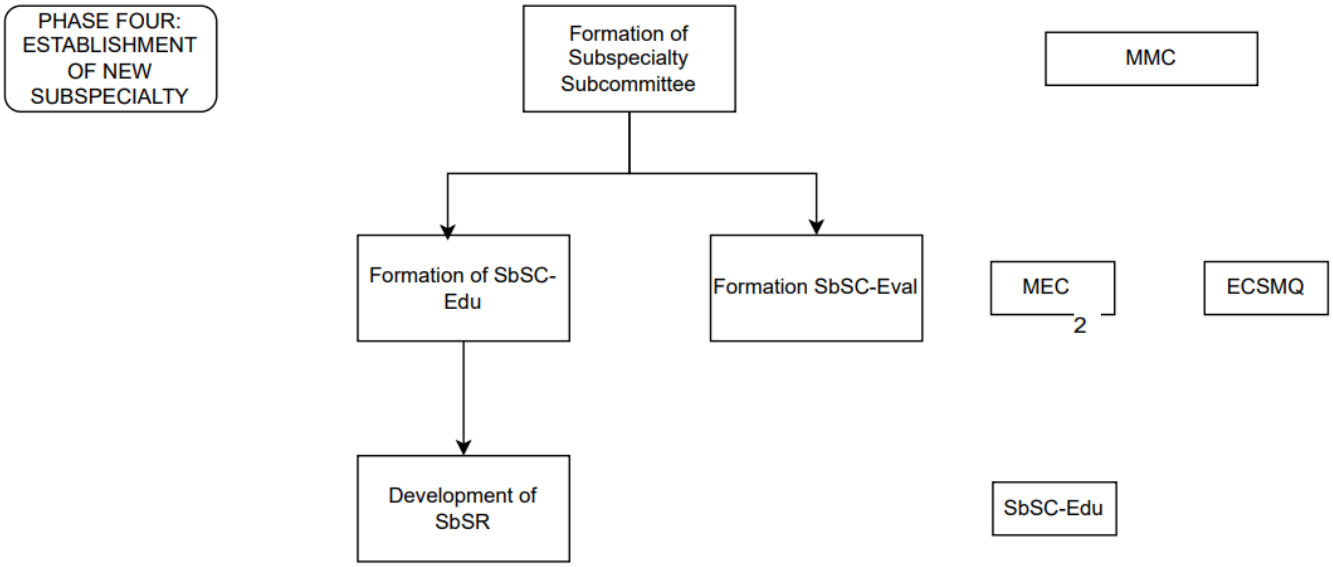
Provide evidence of engagement with relevant stakeholders (parent specialty/ subspecialty/ any other medical organisation/private healthcare organisation/NGO).

FLOWCHART FOR INCLUSION OF NEW SUBSPECIALTY IN THE FIFTH SCHEDULE




PHASE TWO: DETAILED EVALUATION
Detailed evaluation
SbEC
Review documents
SEC
Review and appraisal of documents ± Stakeholder engagement
SSC-Edu
Evaluate and appraise recommendations ± Engagement with stakeholders
SbEC
Request additional information from SSC-Edu or applicant
Review and verify recommendations
MEC 2
Final recommendations
MMC
Inform applicant
Unsuccessful
Successful


PHASE THREE: GAZETTEMENT PROCESS
Draft gazettement
MMC Secretariat
Review draft gazettement
Legal Advisor (MOH)
Review and endorsed for gazettement
AGC
Approval of gazettement
Minister of Health
New subspeciallty in the MMC website
MMC Secretariat


PHASE FOUR: ESTABLISHMENT OF NEW SUBSPECIALTY
Formation of Subspecialty Subcommittee
MMC
Formation of SbSC-Edu
Formation SbSC-Eval
MEC
2
ECSMQ
Development of SbSR
SbSC-Edu

Legal Reference.

Section 14B (1) of the Medical Act (Amendment) 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.

Section 14B (3) of the Medical Act (Amendment) 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.

Section 14B (4) of the Medical Act (Amendment) 2024:
The Minister may from time to time, after consulting the Council, add to, delete from or amend the Fourth Schedule and Fifth Schedule by order published in the Gazette.

Regulation 22A (2) (b) of the Medical (Amendment) Regulations 2025 states that:
The Medical Education Committee for Specialist Medical Qualifications shall have the functions to make recommendations to the Council as follows:

(b) a new subspecialty for listing in the Fifth Schedule to the Act;

APPENDIX B

Domain/Title	Document Number	Subsections	To be filled by applicant (Document/information submitted)	Comments by secretariat
1.0 Training plan	**1**	Training programmes are written according to MMC STF guidelines complete with the list of documents in the appendix.	**Yes/No**	
2.0 Human resource	**2a**	2a(i) - To provide projection on the number of subspecialists required based on the needs of the country.	**Available/Not Available**	
		2a(ii) - Projection on the number of subspecialists that can be trained by 5 years.	**Available/Not Available**	
	2b	2b(i) - Process on projection described.	**Yes/No**	
		2b(ii) - Information on training capacity • Number of trainers • Number of training centers	**Yes/No**	
3.0 Evidence of advancement in subspecialty	**3a**	3a - List of cases/clinical conditions that the new subspecialty will manage.	**Available/Not Available**	

	3b	3b - List of procedures that the new subspecialty will perform.	**Available/Not Available**	
	3c	3c - Information on who currently manages the cases/ conditions/ perform procedures listed in 3a and 3b.	**Available/Not Available**	
4.0 Period of training	**4a**	4a - List of countries which have recognised this subspecialty.	**Available/Not Available**	
	4b	4b - Information on: (i) the syllabus (ii) duration.	**Yes/No**	
5.0 Overlapping areas	**5**	Information with regard to overlapping service with other specialty or subspecialty.	**Available/Not Available**	
6.0 Equity of access	**6**	Information on the privileges of the current service providers.	**Yes/No**	
7.0 Infrastructure	**7**	Information provided.	**Yes/No**	
8.0 Stakeholder engagement	**8**	Information provided.	**Yes/No**	

[Approved by Council on 17th November 2026]