UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES
EUROPEAN UNION OF MEDICAL SPECIALISTS

TRAINING IN GENERAL SURGERY IN PORTUGAL

Meeting of the UEMS Section of Surgery
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“TRAINING PROGRAMME” OF THE PROFESSIONAL SPECIALIZATION IN GENERAL SURGERY

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1. TOTAL DURATION OF GENERAL SURGERY TRAINING

6 years (72 months) divided by different periods (12 months or 3 months)

Each training period (12 months in General Surgery or 3 months in other Specialty) is called STAGE

General Surgery Training:
- **60 months** – General Surgery stages (5 x 12 months)
- **12 months** – (Optional stages) in other specialties, surgical or not (4 x 3 months)
2. GENERAL TRAINING OBJECTIVES

2.1 – Knowledge objectives
2.1.1 – Clinical activity
2.1.2 – Scientific and research activity

2.2 – Performance objectives
2.2.1 – Clinical activity
2.2.2 – Scientific and research activity
The stages shall include the whole span of all Service activities, including the Infirmary, Outpatient Units, Operating Room and Emergency Department.

Residents shall participate in all aspects related to the patients:
- preoperative care
- multidisciplinary activities
- surgical training including technique for minimally invasive surgery
- postoperative care and follow-up of patients
- emergency situations including polytrauma
Services should provide adequate theoretical training of the **Residents**, conducting **studies and clinical research**, stimulate **attending courses including simulation**, and their active collaboration in Clinical Sessions, **presenting and discussing papers of different topics**

All Residents shall attend stages or part of stages, or training activities, in different institutions different than those in which they were placed, to contact with different experiences and hospital realities
3. TRAINING COMPETENCE

Definition: the ability of a Service to welcome Residents for Specific Training, ensuring full or partial compliance with the Training Programme

To take up and continue the training of specialists activity, Services must meet a set of general and specific requirements related to:

• The structure of the Service and other Services of the Hospital
• The healthcare/educational process
• The healthcare and educational outcomes
3.1 – Requirements to have TRAINING COMPETENCE

3.1.1 – **General requirements** (related to):

- **Inpatient Unit** (Secretariat, no. beds, nurse and surgeon ratios)
- **Desktop conditions** (in Service and Hospital)
- **Outpatient Department conditions**
- **Emergency** (surgical team, emergency room, OR available 24 h)
- **Specialities available during 24 hours, including in Emergency**: Anaesthesiology; Internal Medicine; Laboratory; Imaging (with ultrasound and CT scan); Immunohaemotherapy.
3.1.2 – **Specific requirements** (related to):

- Service Director graduation
- Annual surgical activity
- Other Specialities available during 24 hours, including in Emergency: *Intensive Care, Cardiology, Gastroenterology*

- Without one of the **general requirements** a Service can not be qualified for Surgical Training
- The assignment of Suitability to a Service for Surgical Training (in years) depends on the **specific requirements**
3.2 – Attribution of competence for training (in months)

1 – 60 months: Services that meet all general and specific requirements

2 – 48 months: Services that do not meet some specific requirements (related to Service Director graduation and annual surgical activity)

3 – 36 months: Services that do not meet the specific requirements
4. CHARACTERIZATION AND DURATION OF STAGES

4.1 – General Surgery (5 x 12 months)

a) The 1st and last year shall be in the Resident placement Service
b) One of the stages of General Surgery (12 months) of the Differentiated Services will be held in Services with training capacity for only 36 or 24 months, preferably in the 2nd or 3rd years
c) Possibility to complement training outside the country (maximum duration of six months)
4.2 – Other Stages (4 x 3 months)

a) Shall be held between the 2nd and 5th years

b) One mandatory and three optional (proposal)
   - Mandatory: **Intensive Care**
   - Optional recommended: **Thoracic Surgery; Gastroenterology; Diagnostic Imaging; Pathology; Scientific research**

c) The frequency of the recommended specialities shall be privileged in the final evaluation
5. MINIMUM NUMBERS OF SURGICAL AND SCIENTIFIC ACTIVITY

5.1 – Overall surgical performance in General Surgery

Proposal:

a) 750 as main surgeon of which at least 25 % as Ambulatory Surgery and 100 minimally invasive procedures

b) Operative steps in the course of major surgical interventions performed by another surgeon, must be accounted and reported in the CV
c) Minimum numbers required (proposal):
- Thyroid surgery: 20
- Breast Cancer Surgery: 10
- Surgery of hernias/eviscerations: 120
- Surgery of the digestive tract: Gastric surgery: 6; Appendectomies: 80; Colon: 20; Rectum: 4; Anal and Peri-anal: 30; Cholecystectomy: 75
- Extremities: Variceal surgery: 15
  Amputations: 10
- Skin and superficial soft tissues: 60
5.2 – Overall scientific activity

Proposal:

a) The Resident should be the 1st author of 30 communications, of which ten in national or international conferences

b) The Resident should publish at least one article as 1st author, in a national or international Journal
6. EVALUATIONS

6.1 – Continuous assessment (at the end of each 12 month training)

- **Knowledge evaluation**
  a) Annual report discussion
  b) Practical test with a patient
  c) Theoretical evaluation

- **Performance evaluation**
  a) Technical capacity (3)
  b) Interest in professional valorisation (2)
  c) Professional responsibility (3)
  d) Human relations at work (2)
6.2 – Final Evaluation (end of 6th year)

• Actually:
  1st - CV discussion and evaluation
  2nd - Practical test with a patient
  3rd - Theoretical test

• Proposal:
  1st - Theoretical test (100 multiple choice Quiz)
  2nd - CV discussion and evaluation
  3rd - Practical test with a patient