

NEW ZEALAND CONJOINT COMMITTEE FOR RECOGNITION OF TRAINING IN GASTROINTESTINAL ENDOSCOPY

INFORMATION FOR SUPERVISORS

Satisfactory training in endoscopy is recognised and recorded by the Conjoint Committee for Recognition of Training in Gastrointestinal Endoscopy. The Committee relies on supervisors to confirm that the trainee has independently performed at least the specified minimum number of procedures and has achieved a satisfactory level of competence.

The Committee recognises adequacy of training in gastroscopy, colonoscopy and ERCP through documentation of procedures and satisfactory supervisors' reports. This recognition is increasingly being taken into account by hospitals when granting endoscopic privileges.

In the past, many endoscopists were self-taught with most of their training occurring in practice (on-the-job training). However, with an increasing emphasis on cost reduction and cost effectiveness in clinical practice, on-the-job training is no longer acceptable. Endoscopists now need to be trained for fewer positions requiring a higher level of skill in an increasingly competitive job market. In this scenario, the training supervisor may be held accountable for the quality of training of endoscopists.

Previously, many trainees have thought that they only need to perform a certain number of procedures to be recognised by the Conjoint Committee. However, it should be clear that the Committee's principles for training emphasize cognitive and interpretive skills combined with a clear understanding of the role of endoscopy in patient management, including training in radiology and pathology findings as well as technical aspects of endoscopy, cleaning and disinfection and fluoroscopy.

Recent literature on training in endoscopy has documented two important features: Trainees require more procedures than previously recommended to achieve competence, and: more emphasis should be placed on assessing competence by documenting procedural success rates rather than just numbers of procedures performed.

These numbers represent a minimum and it is understood that some trainees will require more (never less) than the stated number to reach an acceptable level of expertise.

In line with the requirements in surgical training, trainees in endoscopy will be required to record prospectively in a log book, each procedure attempted, together with details of the indications, time taken, complications occurring and success. Each procedure will need to be initialled by the training supervisor.

The assessment of competence is subjective; however, the logbook includes a column for calculation of success rate in blocks of 25 procedures to assist the supervisor.

Technical expertise is only a portion of endoscopic training. At the completion of training, the trainee should have achieved the following guidelines:

1. The ability to recommend endoscopic procedures based on the findings of a personal consultation and in consideration of specific indications, contraindications and diagnostic/therapeutic alternatives.
2. The ability to perform a specific procedure safely, completely, and expeditiously.
3. The ability to interpret most endoscopic findings correctly.
4. The ability to integrate endoscopic findings or therapy into the patient management plan.
5. The ability to understand the risk factors attendant to endoscopic procedures and to be able to recognise and manage complications.
6. The ability to recognise personal and procedural limits and to know when to request help.

New Zealand Conjoint Committee For Recognition Of Training In Gastrointestinal Endoscopy

SUPERVISOR'S DETAILS

Please complete and return this report to the applicant who is responsible for forwarding it to the Committee with the completed application form

Name of Supervisor: _____

Supervisor's current recognition with the Conjoint Committee: (Please)

Upper GI Endoscopy

Colonoscopy

ERCP

Name of Applicant: _____

**Institution / Department where
training was undertaken** _____

PERIOD APPLICANT ENGAGED IN ENDOSCOPY

During Advanced Training _____

**After completion of Advanced
Training** _____

NO OF PROCEDURES DONE BY THIS TRAINEE THAT YOU HAVE PERSONALLY SUPERVISED

Diagnostic Endoscopy _____

Therapeutic Gastroscopy _____

