

Joint Committee on Surgical Training

Guidelines for the award of a CCT in Urology

All trainees seeking a CCT in Urology must:

- a) be fully registered with the GMC and have a licence to practise.
- b) have undertaken 5 years of higher surgical training in a UK or Ireland training programme¹.
- c) have successfully passed the Intercollegiate Specialty Board examination.
- d) have been awarded an outcome 6 at a final ARCP (gained all required competencies).

In addition, trainees should be able to satisfy the following specialty specific guidelines:

	Guidelines for Urology																																																
Clinical experience - evidence of the breadth of clinical experience defined in the specialty syllabus	Trainees must provide evidence of having been exposed to subspecialties of urology during training. Trainees must be able to demonstrate exposure to a wide range of emergency surgery during training.																																																
Operative experience - consolidated logbook evidence of the breadth of operative experience defined in the specialty syllabus	<p>Evidence of competency in the operative procedures listed below, with exposure to an appropriate number of operative procedures documented in the e-logbook:</p> <table border="0"> <thead> <tr> <th></th> <th style="text-align: right;">Indicative No.</th> <th style="text-align: right;">Competency</th> </tr> </thead> <tbody> <tr> <td>• Flexible cystoscopy</td> <td style="text-align: right;">200</td> <td style="text-align: right;">4</td> </tr> <tr> <td>• Urodynamics</td> <td style="text-align: right;">50</td> <td style="text-align: right;">4</td> </tr> <tr> <td>• TRUS and biopsy</td> <td style="text-align: right;">50</td> <td style="text-align: right;">4</td> </tr> <tr> <td>• TURP (or other procedure for treating voiding LUTS)</td> <td style="text-align: right;">150</td> <td style="text-align: right;">4</td> </tr> <tr> <td>• TURBT</td> <td style="text-align: right;">150</td> <td style="text-align: right;">4</td> </tr> <tr> <td>• Inguinoscrotal procedures</td> <td style="text-align: right;">50</td> <td style="text-align: right;">4</td> </tr> <tr> <td>• Ureteroscopy (diagnostic and therapeutic)</td> <td style="text-align: right;">50</td> <td style="text-align: right;">3</td> </tr> <tr> <td>• PCNL</td> <td style="text-align: right;">10</td> <td style="text-align: right;">2</td> </tr> <tr> <td>• ESWL</td> <td style="text-align: right;">20</td> <td style="text-align: right;">2</td> </tr> <tr> <td>• Nephrectomy and other retroperitoneal operations</td> <td style="text-align: right;">30</td> <td style="text-align: right;">3*</td> </tr> <tr> <td>• Radical Prostatectomy</td> <td style="text-align: right;">20</td> <td style="text-align: right;">1</td> </tr> <tr> <td>• Cystectomy</td> <td style="text-align: right;">15</td> <td style="text-align: right;">1</td> </tr> <tr> <td>• TVT, TOT, Sling or colposuspension</td> <td style="text-align: right;">25</td> <td style="text-align: right;">2</td> </tr> <tr> <td>• Andrology (Nesbits, Priapism, amputation etc)</td> <td style="text-align: right;">20</td> <td style="text-align: right;">2</td> </tr> <tr> <td>• Paediatric procedures</td> <td style="text-align: right;">25</td> <td style="text-align: right;">2</td> </tr> </tbody> </table> <p>*The committee's view is that it would wish to see all trainees gain level 3 competency in nephrectomy, recognising that this is aspirational.</p>		Indicative No.	Competency	• Flexible cystoscopy	200	4	• Urodynamics	50	4	• TRUS and biopsy	50	4	• TURP (or other procedure for treating voiding LUTS)	150	4	• TURBT	150	4	• Inguinoscrotal procedures	50	4	• Ureteroscopy (diagnostic and therapeutic)	50	3	• PCNL	10	2	• ESWL	20	2	• Nephrectomy and other retroperitoneal operations	30	3*	• Radical Prostatectomy	20	1	• Cystectomy	15	1	• TVT, TOT, Sling or colposuspension	25	2	• Andrology (Nesbits, Priapism, amputation etc)	20	2	• Paediatric procedures	25	2
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¹ This will include out of programme training

<p>Operative competence - evidence of competence in indicative operative procedures to level 3 or 4 (evidenced by PBAs defined by the specialty)</p>	<p>Trainees must be able to demonstrate operative competency to the levels specified in 'Operative experience' above.</p>
<p>Research - evidence of an understanding of, and participation in, research as defined by the specialty</p>	<p>Trainees must provide evidence of two research papers evaluated by the TPD or published in a peer review journal.</p>
<p>Quality Improvement - evidence of an understanding of, and participation in, audit or service improvement as defined by the specialty</p>	<p>Trainees must provide evidence of three audits or equivalent, plus one completed cycle, all evaluated by the TPD.</p>
<p>Medical Education and training - evidence of an understanding of, and participation in, medical education and training as defined by the specialty</p>	<p>Trainees should have attended a 'Training the Trainers' course during training.</p>
<p>Management and leadership - evidence of an understanding of management structures and challenges of the NHS in the training jurisdiction</p>	<p>Trainees should have attended courses on health service management during training.</p>
<p>Additional courses / qualifications - evidence of having attended specific courses/gained specific qualifications as defined by the specialty</p>	<p>There are no specific additional courses / qualifications required for CCT application in urology.</p>
<p>Educational conferences - evidence of having attended appropriate educational conferences and meetings as defined by the specialty</p>	<p>Trainees should provide evidence of attendance at least one national / international congress every two years.</p>