

Certification Guidelines for Vascular Surgery

All trainees seeking certification in Vascular Surgery must:

- a) be fully registered with the GMC and have a licence to practise.
- b) have undertaken 6 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 Vascular Surgery																						
Clinical experience - evidence of the breadth of clinical experience defined in the syllabus of their specialty	Trainees must be able to demonstrate wide exposure to elective and emergency vascular and endovascular surgery as defined in the curriculum. This must include outpatient and ward-based work.																					
Operative experience - consolidated logbook evidence of the breadth of operative experience defined in the specialty syllabus	<p>Trainees will be expected to demonstrate a wide range of procedures, from their log books and PBAs, to the level of competency outlined in the curriculum. In addition, trainees will be expected to demonstrate sustained performance at the expected level of competency based on a series of PBAs signed by their trainer².</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Procedure</th> <th style="text-align: center;">level</th> <th style="text-align: center;">number</th> </tr> </thead> <tbody> <tr> <td>Open Aortic procedures (elective)</td> <td style="text-align: center;">4</td> <td style="text-align: center;">10</td> </tr> <tr> <td>Open aortic aneurysm (emergency)</td> <td style="text-align: center;">4</td> <td style="text-align: center;">5</td> </tr> <tr> <td>Endovascular Aortic aneurysm (elective)</td> <td style="text-align: center;">4</td> <td style="text-align: center;">10</td> </tr> <tr> <td>Femoro-distal bypass</td> <td style="text-align: center;">4</td> <td style="text-align: center;">10</td> </tr> <tr> <td>Carotid Endarterectomy</td> <td style="text-align: center;">4</td> <td style="text-align: center;">10</td> </tr> <tr> <td>Venous and endovenous surgery</td> <td style="text-align: center;">4</td> <td style="text-align: center;">20</td> </tr> </tbody> </table>	Procedure	level	number	Open Aortic procedures (elective)	4	10	Open aortic aneurysm (emergency)	4	5	Endovascular Aortic aneurysm (elective)	4	10	Femoro-distal bypass	4	10	Carotid Endarterectomy	4	10	Venous and endovenous surgery	4	20
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Operative competence - evidence of competence in indicative operative procedures to level 3 or 4 (evidenced by PBAs defined by the specialty)	Trainees must be able to demonstrate progression of operative skills, based on PBAs, across all areas of the curriculum.																					
Research - evidence of an understanding of, and participation in, research as defined by the specialty	Trainees must demonstrate knowledge of research methodology and research governance. This could be by completing a research degree or publishing a peer reviewed paper as first author. All trainees should have																					

¹ This will include out of programme training

² After attaining the expected level of competency, as defined in the curriculum for these procedures, trainees must complete a series of cases as main operator satisfying the supervisor trainer that they are performing at the expected level. They do not have to be consecutive procedures.

	published three peer reviewed papers as first author during specialty training. All trainees will be expected to have presented 2 papers at national or international meetings. All trainees must have a valid Good Clinical Practice Training (GCP) certificate.
Quality Improvement - evidence of an understanding of, and participation in, audit or service improvement as defined by the specialty	Trainees should have undertaken or supervised three service improvement projects or complete audit cycles during their specialty training.
Medical Education and training - evidence of an understanding of, and participation in, medical education and training as defined by the specialty	Trainees should have undertaken a "Training the Trainers" course or equivalent by the end of specialty training. Trainees must provide evidence of active participation in education, on at least two occasions during training, based on timetabled sessions and feedback from participants.
Management and leadership - evidence of an understanding of management structures and challenges of the NHS in the training jurisdiction	Trainees should have completed at least one course or programme on health service management or personal development during training. They should be able to demonstrate participation in clinical management, such as rota administration, membership of a working party or representation of a group.
Additional courses / qualifications - evidence of having attended specific courses/gained specific qualifications as defined by the specialty	Trainees should demonstrate constructive use of study leave by undertaking, and having gained, professionally relevant training and experience above and beyond the basic programme. Trainees should have an up-to-date ATLS® certificate.
Educational conferences - evidence of having attended appropriate educational conferences and meetings as defined by the specialty	Trainees should attend at least one national or international vascular meeting in each year of training.