Headings		USA	United Kingdom	Australia	consensus	Remarks/opinions	
Entry requirement		after Fellow in Gen Paediatrics	completed ST5	after FRACPaed	After Fellow in Paed		
Total duration	n of Sub-specialty training	3 year	3 years (comptency based training shortened)	3 years	3 yr (fyr can be overlapping with high training if neonatolgy training requirement satisfied)		
	- Core training	1+ year	2 -Зуг	2 years	2 -2.5yr (1yr can be overlapping with high training if neonatolgy training requirement satisfied)		
	- Non-core training	scholar activity around 2 year	0-1 yr	1 year	0.5-1 yr (research in neonatology/overseas/other subspecialty; cap max 6 months each activity)		
Core Training		Clinical around 1 to 1.5 year	either 3yr necnatology total, OR 2 yr necnatal + 1 yr allied subspecialty**/research## /overseas&&		> 1 centre		
	Accredited tertiary perinatal cetre(s)	3 years	2 yr minimum	≥ 18 months	s/= 2 years	CENTER ACCREDITATION: SIMILAR TO BTHIT REQUIREMENT Le based on annual delivery AND NICU BEDS/TRAINERS Total 24-30 m 7.2 level of accreditation: Level A: accredit x.24 m level B: accredit x.24 m	
	Any one perinatal centre	usu same		≤ 18 months	>/=3 months	CENTER ACCREDITATION: SIMILAR TO BT/HT REQUIREMENT Le. based on annual delivery AND NICU BEDS/TRAINERS	≤ 18 months or control by > 1 center?
	Neonatal surgical service	usu same		< 6 months	at least 3 months	CAN BE CORE OR NONCORE; PREFERABLY TO HAVE 3-6 MONTHS IN SURGICAL CENTERS	3-6 months with surgical cases exposure (not restricted to children hospital)
Non-core training (3 to 6 months)		around 1.5 to 2 year				WE CANNOT ALLOW NON-CORE TO BE MORE THAN 6 MONTHS OUTSIDE CLINICAL SERVICE (FOR SERVICE NEEDS)?	
	Children Hospital: neonatal surgical service		"" subspecialty counted: neonatal neurodevelopmental, Paed cardiology, ECMO, paed neurology, PICU, Paed respirology, neonatal transport; EACH less than six months unless prior approval (up to 12 months)	< 12 months		≤ 6 months	3-6 months with surgical cases exposure (not restricted to children hospital)
	Pure Research	scholar activity	## max 1 yr research + 2yr core neonatal; ensure competence up to date during research year; prior approval required	< 12 months		AGREE	≤ 6 months
	Obstetrics/perinatal medicine			≤6 months		AGREE (INCLUDING PRENATAL DIAGNOSIS AND COUNSELING UNITS/FETO-MATERNAL CENTERS)	≤ 6 months in pernatal center
	Paed Cardiology NETS			≤ 6 months		AGREE AGREE	≤ 6 months
	Developmental Paed			< 6 months < 6 months		AGREE	≤ 6 months < 6 months
	Other relevant discipline			≤ 6 months with prior approval		AGREE (GENETICS)	≤ 6 months with prior approval
	Overseas attachment		&& overseas max 1 yr – prospective approval (Canada, Australia, New Zealand) + 2 yr core in UK	approvai	6 months with prior approval and in center with accreditated training	CAN BE UP TO ONE YEAR AS CORE/NON-CORE	can up to 1 year with prior approval
Training Proje	ects						
	Neonatal / Perinatal medicine related	1 scholar project		≥ 2 out of 3 projects	at least 1 project during training	TWO, LIKE EXIT EXAM	2 projects
Neonatal Tran	related sport (compulsory log activity)	as part of clinical		> 25 neonatal retrievals	TBC (inter and intra)	SEPARATE INTRA-HOSPITAL AND INTERHOSPITAL TRANSPORT	10 interhospital transport
				retrievals		INTERHOSPITAL TRANSPORT	
Follow-up NICU graduate		as part of clinical		equivalent of 1 session / week for 2 years	equivalent of 1 session / week for at least 12 months		equivalent of 1 session / week for 18m
Regular Learning Sessions				Case presentations - M&M Meetings - Literature review - Research meetings (lead presentation 4 times / yr)	Case presentations - M&M Moetings - Literature review - Research meeting: (lead presentation at least 2 times / yr)		Case presentations - M&M Meetings - Literature review - Research meetings (lead presentation 4 times / yr)
Surgical Exposure		exposure needed		≥ 6 months in a unit with surgical care			3-6 months with surgical cases exposure (not restricted to children hospital)
Training Sites				no. of birth within draining region ≥ 8000 / year Level 3 facility support	no. of birth within draining region ≥ 1800/ year Level 3 facility support		No. of birth > 2500/year Level 3 facility support
				Level 3 facility support ≥ 2500 birth / year Infants needing airway support ≥ 100 / year	Infants needing airway support ≥ 100 ?pat / year		Infants needing airway support > 100 / year
Trainee / Train	ner ratio	1 mentor and regualr reviewed by 2 committess on scholar activity and		support ≥ 100 / year <1:1	≥ 100 ?pat / year max 2:1		support ≥ 100 / year <1:1
Final Assessment		clinical competence MCQ Exam		No Examination	review of log record and project (exam format TBC)		Review Log record & Project
Curriculum			resuscitation and stabilisation	The foetus before A			
				The foetus before & during birth transition			
		ļ	procedures and technical skills enidemiology and outcome statistics	Care of well newborn Care of sick newborn			
			epidemiology and outcome statistics fetal and maternal medicine	Practical procedures			
			diagnostic skills	End-of-life care			
			neonatal follow up	Long-term health care / follow up			
			transport	Regional organisation of perinatal care			
			fsafeguard and family care	Benchmark & manage			
			end of life care	clinical information Evidence-based practice			
			neonatal surgery				
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