## Minimal requirement for accreditation of training centre in GGP

		24 months accredited
Clinical (Both trainees and trainers	Trainer	1-2 trainers, both trainees and trainers must dedicate at least 75% of work in GGP
	Caseload	500 new cases/consultations per year
	Setting	(I) Must have both in-patient consultations & out-patient clinics; (ii) Must arrange at least 12 months of paediatric genetic & genomic experience as well as up to 6 months of training with involvement in adult genetics, prenatal, preimplantation genetics, cancer genetics or metabolic genetics
	Case mix	10% highly complex, 30% complex, 30% intermediate and 30% simple
Combined clinical & laboratory	Trainer	1-2 trainers, both trainees and trainers must dedicate at least 75% of work in GGP
	Duration	6 months
	Clinical criteria	As above

Laboratory	
- Cytogenetics	- At least 200 tests per year
- Molecular	- At least 200 tests per year,
	- including aCGH and next generation
	sequencing

Trainees are encouraged to rotate in > one centre in their 24 months mandatory clinical training to broaden their clinical experience. After the 24 months of mandatory clinical training in accredited centres/hospitals, trainees must complete the rest of their training (12 months) in accredited hospitals and/or overseas respiratory centers, as judged by the College/subspecialty board.

## Case profile definition for accreditation of training in GGP

- \*Highly complex—requires advanced knowledge and considerable experience for optimal management, often rare or uncommon conditions demanding sophisticated diagnostic techniques, complicated treatment regimen and multidisciplinary team approach e.g. multiple congenital anomalies in P/NICU, undiagnosed diseases, inherited cancer syndrome, genetic counselling in presymptomatic testing/ incidental findings in next-generation sequencing testing
- \*Complex—requires special diagnostic tests and careful therapeutic monitoring, or newly identified conditions with diagnosis and treatment under development e.g. emerging genomic disorders, mosaic disorders, genetically heterogeneous conditions including intellectual disability, autism spectrum disorders or complex neurological conditions
- \*Intermediate—serious/ life-threatening / organ-specific disorders, or conditions requiring extensive diagnostic evaluation e.g. connective tissue disorders, skeletal dysplasia, cardiomyopathies, inherited arrhythmias, rare but well known genetic syndromes and inborn errors of metabolism
- \*Simple –common conditions that are generally managed at secondary level if hospitalization is required and diagnosis and treatment are straight forward e.g. common genetic syndromes –Down syndrome, Williams syndrome, 22q11.2 deletion syndrome, Prader Willi syndrome, etc.

<u>Note</u>: The criteria are provisional. The External Assessor will make the final decision after her visit to the centres and after considering the overall training program in Hong Kong, irrespective of whether or not these criteria have been met.