

Requirements for Physician Training: Paediatrics and Child Health 2008

Endocrinology

Supervising Committee

Specialist Advisory Committee (SAC) in Endocrinology.

Definition of Specialty

Endocrinology is the science of circulating and locally acting hormones, the glandular system which produces them and their roles in health and disease. The specialty of clinical endocrinology encompasses the diagnosis and management of disorders of the endocrine system. Paediatric endocrinologists provide treatment, diagnostic and laboratory analysis and conduct basic and applied research in a wide range of humoral and metabolic conditions of infants, children and adolescents.

General Principles of Training

1. Advanced training in paediatric endocrinology is a 3 year program comprising core and non core training. It follows satisfactory completion of basic paediatric training and the FRACP Examination in Paediatrics. No part of the training prior to the examination will be credited towards advanced training.
2. The goal of the training program is to produce specialist paediatric endocrinologists skilled in diagnosis and management of endocrine diseases with adequate understanding of the physiology of hormonal regulation in children, adolescents and young adults.
3. Clinical experience must involve patients in all categories of paediatric endocrine disease, both acute and chronic. This includes the management of patients with diabetes mellitus and neonatal endocrinology.
4. It is highly desirable, but not mandatory, that advanced trainees undertake training in more than one unit, preferably including a large international unit, to enable them to gain sufficient breadth of exposure and experience.
5. All subspecialty paediatric trainees must complete additional mandatory training requirements. Please note that the mandatory training guidelines differ between Australia and New Zealand. (In Australia, all paediatric trainees must complete 6 months of Developmental and Psychosocial training. This must be applied for prospectively if completed during advanced training.)

Components of Training

Advanced training in paediatric endocrinology includes at least 24 months of core clinical training and up to 12 months of non core training.

Post FRACP training in paediatric endocrinology is a two year program of core training. Training programs will be assessed using the same criteria as for advanced training programs. Post FRACP trainees must submit a prospective application for approval of advanced training

to the SAC prior to the commencement of each period of training; Supervisors' Reports must also be submitted to the SAC in line with College deadlines for each year of training.

Core Training

1. Of the 3 years of advanced training, at least 2 years full time (or the equivalent part time) shall be spent in core clinical training, where the candidate is responsible for inpatient and outpatient care of paediatric endocrine patients. In order to fulfil this requirement in the majority of units it will be necessary to continue a clinical endocrine component such as attending outpatient clinics throughout advanced training. This requirement applies to all candidates regardless of their future career intention.
2. A core year should include the equivalent of 12 months of full time training with at least 50% of the trainee's time devoted to the care of paediatric endocrine patients. This should consist of a minimum of 4 sessions of 3 hours duration per week, which need to include outpatient clinics, clinical meetings (eg X-ray meetings, case discussions), ward rounds and on call responsibilities. A core year may be accrued pro-rata over more than one year provided that at least two sessions per week are devoted to direct patient care during the period of core training.
3. The trainee must be exposed to the use of laboratory techniques in paediatric endocrinology, with particular emphasis being placed on recognition of the limitations and pitfalls of interpretation of laboratory results. Formal rotations through such laboratories should be included. Candidates should be provided with the background which will enable them to utilise current diagnostic procedures of paediatric endocrinology including radiology and nuclear medicine.
4. Experience with first on call responsibilities is mandatory, including after hours on call responsibilities where possible.
5. Some outpatient experience in an adult endocrine unit (e.g. a weekly clinic for 6 months) is desirable but not essential.

Non Core Training

Up to 12 months of non core training may be permitted in non-endocrine training posts, provided this training can be shown to be relevant, or add value, to a trainee's core endocrine program. Trainees are advised to undertake endocrine-related educational activities such as attendance at meetings and Journal Clubs during their year of non core training.

Non core training may be spent in basic or clinical research. Trainees are encouraged to enrol in a MD or PhD of which 12 months of full time research can be accredited.

Please note that, as with other training, a year of research must be approved prospectively by the SAC.

Research

Trainees are required to submit evidence of scientific endeavour to the SAC during their advanced training. By the end of training, the trainee should complete at least one of the following:

- ❖ first author of at research paper accepted for publication in a peer reviewed journal
- ❖ a thesis accepted as fulfilment of the requirements of a PhD or MD or Research Masters in a field relevant to paediatric endocrinology
- ❖ first author of at least 2 scientific abstracts presented at a local or international scientific meeting.

Note: If the trainee is not able to provide evidence of published research, the trainee needs to submit a report of a research project to the SAC for formal assessment. The report should be in a format suitable for publication in a peer reviewed journal. Case reports and power-point presentations are not acceptable.

Assessment

1. Assessment of a trainee's progress will primarily be based on formal reports provided by the trainee's supervisors.
2. Each trainee will also have a face-to-face interview with a paediatric representative of the SAC. The purpose of the interview is to discuss the trainee's program to-date, assist in the planning of future training directions, and to allow feedback from the trainee to the SAC. The interview occurs usually occurs in the second year of advanced training. If a face-to-face interview is impractical because, for instance, the trainee is overseas, the interview may be done by telephone.
3. Each trainee will need to compile a logbook of cases. The logbook will be reviewed during the second year of training, at the trainee's face-to-face interview with a paediatric representative of the SAC. The trainee will submit the final logbook to the SAC at the end of the third year of training.
4. Each trainee will need to submit evidence of scientific endeavour to the SAC before the end of the third year of training. (See Components of Training – Research above.)

Adult Medicine trainees wishing to transfer into Paediatric Endocrinology see the section on *Transfers between Adult Medicine and Paediatrics and Child Health Divisions*.

A period of basic training and assessment in general paediatrics including neonatology (one to 2 years) would be required in addition to advanced training requirements in paediatric endocrinology.

Specialty Societies

- Australian Paediatric Endocrinology Group (APEG);
- The Endocrine Society of Australia; and
- Australian Diabetes Society.

For further information, please contact:

APEG
Secretariat
PO Box 180
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