

## **Selection Regulations**

Surgical Education and Training Programme in Otolaryngology, Head and Neck  
Surgery in Aotearoa New Zealand

2025 intake

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# 1 Introduction

## 1.1 Definition of terms and acronyms

### 1.1.1 Acronyms, definitions and terms used in this document.

| Acronym/term             | shall mean/is defined as:   |
|--------------------------|---|
| AHPRA                    | Australian Health Practitioner Regulation Agency  |
| AMC                      | Australian Medical Council  |
| Applicant                | A doctor who has submitted an application   |
| ASC                      | Annual Scientific Congress  |
| ASOHNS                   | Australian Society of Otolaryngology-Head and Neck Surgery  |
| BOHNS                    | Board of Otolaryngology-Head and Neck Surgery   |
| Business days            | Monday to Friday excluding Public Holidays  |
| CSET                     | Committee of Surgical Education and Training  |
| Consultant               | A Fellow of the RACS employed as a Specialist Surgeon; or a vocationally trained surgeon employed as a Specialist Surgeon   |
| Curriculum Vitae or CV   | The scored components of the application for selection  |
| Full-time research       | Two (2) or more years of research and study towards a higher degree (Masters by research or PhD)  |
| FRACS                    | Fellows of the Royal Australasian College of Surgeons   |
| Ineligible               | Applicants who fail to satisfy one or more of the eligibility requirements or have reached the maximum number of application attempts.  |
| Interview                | A panel interview was conducted as part of the selection process  |
| MCNZ                     | Medical Council of New Zealand  |
| NZ Training Subcommittee | New Zealand Training Subcommittee, a subcommittee of the Board of Otolaryngology, Head and Neck Surgery with the delegated authority to select and appoint Trainees to the SET Program          |
| NZSOHNS                  | New Zealand Society of Otolaryngology, Head and Neck Surgery  |
| OHNS                     | Refers to the surgical specialty of Otolaryngology, Head and Neck Surgery   |
| RACS                     | Royal Australasian College of Surgeons  |
| Referee                  | A person who knows the applicant, is willing to describe or report on observed work performance, character and abilities; and meets the eligibility requirements outlined in these regulations. |
| Referee Report           | an in-depth report conducted as part of the selection process.  |
| Regulations              | These Regulations   |
| SET                      | Surgical Education and Training   |
| SET Program              | The surgical education and training Program as approved by the NZ Training Subcommittee   |
| SET Trainee              | A current SET Trainee is defined as being registered with the RACS as a trainee in any of the RACS nine surgical specialties.   |

|              |  |
|--------------|--|
| Successful   | Applicants who have ranked high enough to be made an offer of a position on the SET Program  |
| Unsuccessful | Applicants who have achieved the minimum standard for selection but who have not ranked high enough to be offered a training position on the SET Program   |
| Unsuitable   | Applicants who have not achieved the minimum standard for selection at any point in the selection process, or who did not receive an invitation to interview, or who have not met the requirements as set out in these regulations |

## 1.2 Purpose of these Regulations

1.2.1 The purpose of these regulations is to establish the principles, terms and conditions of the selection process for the RACS Surgical Education and Training Programme in OHNS conducted in 2024 for the 2025 intake.

## 1.3 Administration and Ownership

1.3.1 The RACS is the body accredited and authorised to conduct surgical education and training (SET) in Australia and Aotearoa New Zealand.

1.3.2 The ASOHNS undertakes the development, delivery and administration of the SET Programme as an agent of the RACS. The BOHNS is responsible for communicating with RACS, ASOHNS and NZSOHNS regarding training and education.

1.3.3 The NZ Training Subcommittee is responsible for the delivery of the SET Programme in OHNS, the accreditation of hospital training posts, and the assessment and supervision of OHNS Trainees in Aotearoa New Zealand. The NZ Training Subcommittee reports directly to the BOHNS.

1.3.4 Selection is conducted annually. These regulations may be changed from year to year and cannot be relied on for the intakes conducted in future years for the SET Programme. Any regulations for the SET Programme from any previous years are not applicable and cannot be relied upon for meeting the SET Programme requirements for the 2025 intake unless specifically stated in these regulations.

1.3.5 These regulations apply to Aotearoa New Zealand only. Applicants who are applying to the Australian SET Program are not eligible to apply to the Aotearoa New Zealand SET Programme the same year.

1.3.6 For further information, refer to the Board of Otolaryngology, Head and Neck Surgery Terms of Reference located on the [RACS Website](#).

## 1.4 Objective of the SET Programme

1.4.1 To produce competent independent specialist surgeons with the experience, knowledge, skills and attributes necessary to provide the communities, health systems and professions they serve with the highest standard of safe ethical and comprehensive care and leadership.

1.4.2 The SET Programme is structured to ensure Trainees achieve competencies in

- a) Medical expertise
- b) Judgement and clinical decision-making
- c) Technical expertise
- d) Professionalism
- e) Health Advocacy
- f) Communication
- g) Collaboration and teamwork
- h) Leadership and management
- i) Scholarship and Teaching
- j) Cultural Competence and cultural safety

## 2 Principles and selection criteria

### 2.1 Principles of Selection

- 2.1.1 The aim of the selection process is to select trainees of the highest calibre for the Aotearoa New Zealand SET Programme in OHNS on the basis of merit through a fair, open and accountable process.
- 2.1.2 The selection process will be documented, transparent, and objective with applicants having access to eligibility criteria, information on the selection process, general selection criteria and a reconsideration, review and appeal process.
- 2.1.3 The selection process will be subject to continuous review to ensure continued validity and objectiveness.
- 2.1.4 The selection process will abide by the principles of the RACS Regulation: [Selection to Surgical Education and Training](#).
- 2.1.5 The number of trainees selected in any year will depend on the number of eligible Applicants together with the number of accredited training posts available in the following year.

### 2.2 General Selection Criteria

- 2.2.1 Applicants are expected to have adequate insight into OHNS to make an informed decision about the specialty as a potential career path.
- 2.2.2 Applicants are expected to have a sound knowledge of basic sciences, and a commitment and motivation to continuous self-directed learning including a demonstrated willingness to seek out experiences through active participation in activities such as scientific meetings, conferences, courses and workshops.
- 2.2.3 Applicants are expected to have exposure to varied working environments, and work hours and an aptitude to appropriately manage high-stress environments in a responsible, efficient and dependable manner, seeking appropriate assistance when needed.
- 2.2.4 Applicants are expected to have suitable experience, dexterity and clinical knowledge to consistently make dependable judgements, master operative techniques and provide comprehensive care from initial examination to post-operative management with a willingness to seek advice and modify behaviour based on previous experiences.
- 2.2.5 Applicants are expected to have a history of fostering harmonious highly effective working relationships, having gained the respect of others and exhibiting positive influences in the working environment.
- 2.2.6 Applicants are expected to have a history of being considerate to the views of others at all times, reacting appropriately and diplomatically in all work situations and behaving in a manner, which is professional and supportive for all work, ethnic, social, and gender groups.
- 2.2.7 Applicants are expected to have interpersonal skills and a commitment to contribute effectively as dependable and accountable members of the health care team, displaying cooperation, tact, courtesy, respect and reliability at all times and actively contributing to assessing progress and providing workable solutions.
- 2.2.8 Applicants are expected to have a history of reliability and punctuality, assuming responsibility for completing tasks without prompting in a timely and efficient manner and demonstrating a high level of self-motivation and organisation.
- 2.2.9 Applicants are expected to have insight into their own strengths and weaknesses, a willingness to accept positive and negative feedback from others, learn from experiences and from others, and a commitment to actively seek feedback and respond constructively.

- 2.2.10 Applicants are expected to have a willingness at all times to take the initiative and come forward with mistakes and adverse outcomes, displaying absolute honesty and a willingness to seek advice and respond appropriately.
- 2.2.11 Applicants are expected to have highly effective listening and vocabulary skills and timely and highly effective written and verbal communication, keeping all team members up to date without prompting and always providing clear directions and descriptions of situations in an appropriate tone, which encourages confidence and understanding.
- 2.2.12 Applicants are expected to have ethical and responsible behaviour at all times with concern and sensitivity to the needs of others, demonstrating aesthetic sensibility, sound judgment and a focus on providing safe, comprehensive surgical care of the highest standard relating to patients, families and members of the health care team in a manner which exhibits honesty, integrity and compassion.
- 2.2.13 Applicants are expected to have a good knowledge of ethical principles and practices and the ability to identify ethical expectations that impact patient care and the work environment including informed consent, risk minimisation, confidentiality and clinical governance.
- 2.2.14 Applicants are expected to have interests outside their career and a balance in their work and personal life with community involvement considered to be a positive reflection of the character of the applicant.
- 2.2.15 Applicants are expected to have an understanding of the importance of research and its application to clinical practice. Publications, presentations or research experiences, resulting in some meaningful and tangible outcome are highly regarded.
- 2.2.16 Applicants are expected to have good integrity, honesty and character upholding high service and professionalism standards, in keeping with the need for the public to have absolute trust and confidence in medical professionals.

### **3 Selection initiatives, special measures and scholarships**

#### **3.1 Diversity and Gender Equity**

- 3.1.1 The NZ Training Subcommittee has introduced special measures for substantive gender equity for the purpose of gender equity between men and women to give effect to the [RACS Diversity and Inclusion Plan](#), which sets targets for increased representation of women in SET across all specialties. Special measures will only be applied after the final ranking of suitable applicants.

#### **3.2 Rural Equity**

- 3.2.1 The RACS Council has approved the [Rural Health Equity Strategic Action Plan](#). The NZ Training Subcommittee has introduced special measures that will increase the rural surgical workforce and reduce workforce maldistribution through the Select for Rural and Retain for Rural Strategies

#### **3.3 Garnett Passe and Rodney Williams Memorial Foundation (GPRWMF) Scholarship/Surgeon Scientist Programme**

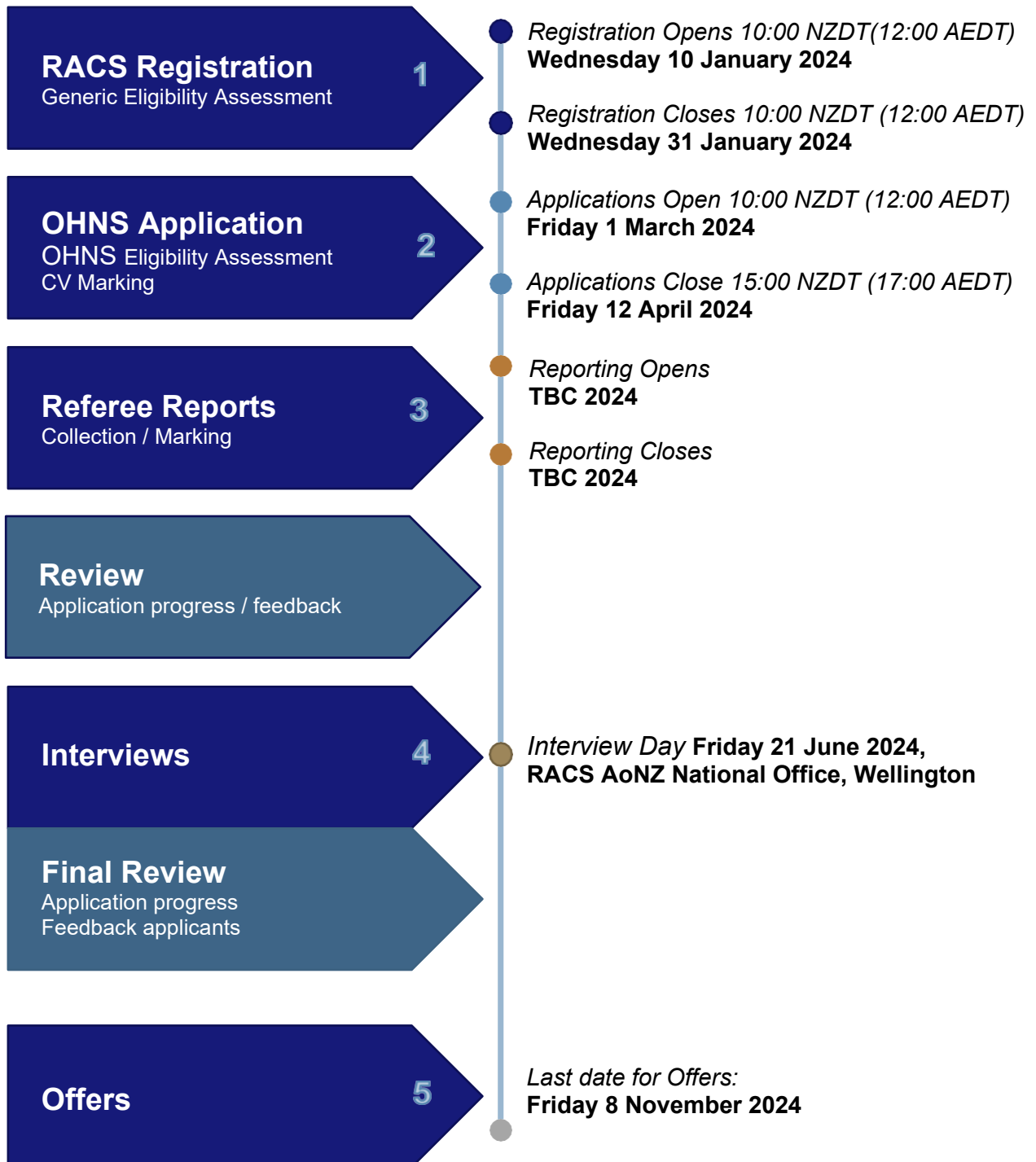
- 3.3.1 Each year the GPRWMF offer Academic Surgeon-Scientist Research scholarships for selected research projects to successful Applicants to the SET Programme on OHNS.
- 3.3.2 At the time of application, applicants wishing to apply for a scholarship will be requested to indicate their interest, nominate their supervising Professor and give permission for contact details to be provided to the GP&RWMF
- 3.3.3 GPRWMF is responsible for publicising available research projects and the process of contacting relevant Professors.

- 3.3.4 Applicants wishing to apply for a scholarship must contact the supervising Professor directly indicating interest.
- 3.3.5 Selection into the SET OHNS Programme as a Surgeon-Scientist will occur if all the following conditions are met:
- a) The applicant is successful / the supervising Professor has selected the Applicant as suitable for the research project (independently of the SET selection process and these Regulations).
  - b) The Applicant meets the criteria in the GPRWMF Conditions of Award.
- 3.3.6 Applying for the GPRWMF / Surgeon-Scientist Programme does not increase an Applicant's chance of being successful in selection to the SET OHNS Programme.



## 4 Overview of the selection process

### 4.1 Stages of selection and key dates



#### 4.1.1 Selection Tools

4.1.2 The selection process uses three selection tools, each contributing the following weightings to the overall selection score out of 100.

| Selection Tool                 | Weighting | The minimum score to be deemed suitable for selection | Scored in accordance with section |
|--------------------------------|-----------|---|-----------------------------------|
| a) Structured Curriculum Vitae | 20        | 30% (6/20)  | 8                                 |
| b) Structured Referee Reports  | 40        | 60% (24/40)   | 9                                 |
| c) Semi-Structured Interview   | 40        | 50% (20/40)   | 10                                |
| Total Overall Score            | 100       |   |                                   |

4.1.3 Applicants who do not meet the minimum score to be deemed suitable for selection for each of the selection tools will not progress further in the selection process.

4.1.4 Only Applicants who satisfy the eligibility and application requirements in accordance with RACS policy and these regulations will be considered in open competition for selection to the SET Programme in OHNS.

## 5 Registration

5.1 Applicants who wish to apply for the SET Programme in OHNS must first register in accordance with the RACS regulation: [Registration for selection into SET](#) is available on the [RACS website](#).

5.2 Applicants must confirm for themselves they meet the minimum RACS generic and OHNS eligibility criteria required before submitting their completed registration form.

5.3 Applicants must confirm for themselves that they have correctly registered for the Aotearoa New Zealand SET Programme in OHNS.

5.4 Applicants must submit a completed registration form including the required supporting documentation and pay the registration fee by the registration closing date.

5.5 Registrations will not be accepted after the closing date under any circumstances.

5.6 Applicants who are not registered cannot lodge an application for the SET Programme in OHNS.

5.7 Applicants will be emailed confirmation of completed registration and eligibility.

## 6 Application

### 6.1 Maximum Attempts

6.1.1 Applicants will be allowed a maximum of four (4) attempts at selection into the Aotearoa New Zealand SET Programme in OHNS. Applications submitted in 2021 (for the 2022 intake) and subsequent years count towards this total.

- 6.1.2 An attempt is defined as a submitted eligible application accompanied by the relevant application fee. Eligible applications are those that fulfil the generic and OHNS eligibility requirements.
- 6.1.3 Applicants who have reached the maximum number of attempts will be notified by email they are deemed ineligible and will not be considered further in the application process. The application fee will be refunded.

## **6.2 Online Application**

- 6.2.1 All communication during the selection process will be conducted in writing via email. Applicants are responsible for ensuring their contact information is current.
- 6.2.2 Applications must be submitted via the OHNS online application system during the published dates. No other form of application will be accepted.
- 6.2.3 Access to the online form will be made available to all registered and eligible applicants on the opening date for applications.
- 6.2.4 Documentary evidence and achievements must be entered in the correct section. If entered in the incorrect section of the online application, achievements will not attract points.
- 6.2.5 Applications may be commenced, saved, printed and re-accessed during the application period.
- 6.2.6 Applications must be submitted by the closing date. Saved un-submitted applications will not be considered. No extensions will be granted.
- 6.2.7 Once an application is submitted, it cannot be changed. Applicants are responsible for ensuring their application is complete and correct at the time of submission.
- 6.2.8 Incomplete applications or those that do not comply with the instructions within the online application form, or these Regulations will not be considered.
- 6.2.9 Applicants will receive an email confirmation when they have successfully submitted their application.
- 6.2.10 Applicants must pay a selection application fee at the time of application to be considered for selection. If the fee is not received by the closing date, the application will not be considered. The fee is non-refundable as of the closing date for applications.

## **6.3 Documentary Evidence**

- 6.3.1 Applicants are responsible for ensuring that all necessary evidence is included in their application at the time of submission. No additional evidence will be accepted once an application has been submitted.
- 6.3.2 In most cases, the evidence must be retrospective. Prospective evidence will not be accepted.
- 6.3.3 Forms of evidence other than what is outlined will not be accepted.
- 6.3.4 Where a signature is required, the signature must be either a physical, handwritten signature or an electronically scanned version of such a signature. Address blocks typed signatures and email signatures are not acceptable.
- 6.3.5 Letters of evidence must be dated.
- 6.3.6 All documentary evidence must be in English. If any documentary evidence is in a language other than English, a certified translation must be provided.
- 6.3.7 Achievements that are not accompanied by the appropriate documentary evidence as specified in these Regulations, or where the evidence does not meet the verification requirements will not be awarded points.

6.3.8 The Selection process and requirements change on an annual basis; no data is carried over from one year's Selection process to the next. Evidence that was accepted in the past will not be accepted on the basis that it has been accepted previously. All evidence must comply with the Regulations for the current Selection year.

#### **6.4 Disclosure requirement**

6.4.1 To enable the NZ Training Subcommittee to give effect to the general selection criteria under 2.2 and generic eligibility requirements in 7.1, applicants are required to disclose, at the time of this application, all or any of the following information:

- a) In the last 10 years has the applicant been made aware of any notification or complaint to the Medical Board of Australia, the New Zealand Medical Council, AHPRA or any other regulatory health complaints entity in any State or Territory of Australia or in Aotearoa New Zealand relating to their medical practice?
- b) If the applicant has practised in other countries, is the applicant aware of any similar notifications or complaints made in those countries?
- c) Is the applicant aware of any formal complaint made to any hospital or health service in which they have been engaged or employed during the last five years?
- d) Is the applicant aware of any other formal complaint being made otherwise in relation to their practice as a medical practitioner in the last five years?

6.4.2 Applicants are required to provide full details if answering 'yes' to any of the above questions.

6.4.3 Applicants are invited to submit reason(s) and if applicable, any supporting evidence, demonstrating that they are suitable for the SET Programme despite the disclosure matters.

6.4.4 Disclosure of any matters set out above will not automatically disqualify an applicant but are relevant to the NZ Training Subcommittee's assessment of the applicant's suitability for the SET Programme in OHNS.

#### **6.5 Completing the application**

6.5.1 The information collected as part of the application and during the selection process will be used to assess the applicant's suitability for the SET Programme in OHNS. Information may be disclosed to other parties for the purpose of selection or where required to do so by law. The NZ Training Subcommittee may verify the information provided within the application with external institutions or individuals and gather additional information to process the application. Failure to provide the information requested by the NZ Training Subcommittee will deem the applicant ineligible for selection and their application will be withdrawn.

6.5.2 By submitting the application, the applicant is consenting to the collection, use, disclosure and storage of the information by the NZ Training Subcommittee, the RACS or its agents.

6.5.3 By submitting an application, the applicant is consenting to references being collected, and to the named referees within the application providing the information requested as part of the Reference Report process.

6.5.4 By submitting an application, the Applicant verifies the information provided is correct and in accordance with these Regulations. The applicant also verifies no false or tampered documentation will be submitted.

6.5.5 It is a condition of application for selection that, should at any time during the selection process or in the future, the NZ Training Subcommittee become aware that any evidence submitted as part of the application was false or tampered with, or the responses in the application are incorrect, misrepresented, or are untruthful, the applicant may be deemed unsuitable for selection, not considered further in the selection process, and the NZ Training Subcommittee may, at its absolute discretion, report this to the relevant authorities and/or disqualify the applicant from making further application to the SET programme. If the applicant has already been selected, the applicant may

be dismissed from the SET programme. It would be sufficient grounds for dismissal that the NZ Training Subcommittee has sufficient reasonable information for it to conclude that the answers to these questions were incorrect, misrepresented or untruthful.

- 6.5.6 Each application is assessed and marked as it was submitted. No active follow-up will take place in instances where the application (or verification) is incorrect or absent.
- 6.5.7 By submitting an application, the applicant is consenting to members of the NZ Training Subcommittee and other persons appointed by it, in accordance with these Regulations, conducting the selection process and making decisions relating to their application and selection despite having made decisions previously that may be averse to the Applicant. This includes decisions made during the current and previous selection processes and other training and assessment matters.

## 7 Eligibility Requirements

### 7.1 RACS Generic Eligibility

- 7.1.1 Applicants must have permanent residency or citizenship of Aotearoa New Zealand at the time of registration.
- 7.1.2 Applicants must be deemed suitable by the NZ Training Subcommittee in accordance with the general selection criteria in 2.2, taking into account, where applicable, any disclosure matters in 6.4. Applicants with relevant notifications, or complaints history as disclosed (as required) in their application, or which otherwise is obtained by or provided to the NZ Training Committee, may be deemed ineligible, as the NZ Training Committee may determine in its entire discretion.
- 7.1.3 Applicants must have general scope or restricted general scope in the relevant specialty in Aotearoa New Zealand with the Medical Council of New Zealand (MCNZ) in accordance with RACS regulation: [Medical Registration for the Surgical Education and Training Program](#).
- 7.1.4 Applicants must have completed online learning modules:
- a) The **Operating with Respect eLearning module** on the RACS website.

### 7.2 Otolaryngology, Head and Neck Surgery Eligibility Requirements

- 7.2.1 In addition to the RACS generic eligibility criteria, applicants must fulfil the OHNS eligibility criteria.
- 7.2.2 Eligibility periods may be extended to account for parental leave upon receipt of verifying documentation from the employer.
- 7.2.3 **Examinations**

| Requirement   | Documentary evidence  |
|---|---|
| a) Applicants must have passed the GSSE Examination by the close of application | An official certificate of completion or retrospective letter on RACS letterhead with the appropriate signature. Prospective evidence will not be accepted. |

#### 7.2.4 Otolaryngology experience

| Minimum requirement  | Documentary evidence   |
|--|--|
| 26 consecutive weeks of full-time training at registrar level in an Aotearoa New Zealand OHNS Unit completed since 1 January 2021 and before 29 March 2024   | Statement of Service from hospital administration identifying the level of employment, length of employment and specialty working in. Prospective evidence is not valid. |
| <p>a) 26-week rotation may include no more than 6 weeks of leave</p> <p>b) Consultants with a Vocational Registration in OHNS must staff the unit.</p> <p>c) One of the nominated referees on the application form must include an OHNS consultant in that unit. This cannot include a surgical supervisor or any other member of the NZ Training Subcommittee.</p> <p>d) Relief rotations cannot be accepted as mandatory eligibility rotations unless they are full time OHNS relief. Relief rotations may count toward the CV score”.</p> <p>e) If a SET Trainee was on parental leave for at least one year during the two years prior to the first application to SET in any of the RACS nine surgical specialties, eligibility and scoring will consider the last two (2) clinical years.</p> <p>f) Applicants in full-time research for a Higher Degree (Masters by research or PhD) must complete this requirement in the three (3) years immediately prior to commencing full-time research and before 29 March 2024. Part-time rotations undertaken during the research period may be considered and will be calculated pro-rata. Evidence of hours worked per month must be provided.</p> |  |

#### 7.2.5 Surgical experience (Pre-vocational registrar training)

| Minimum requirement   | Documentary evidence   |
|---|--|
| A minimum of 26 weeks of full-time training at the pre-vocational registrar level of non-OHNS surgical experience. This must have been completed since 1 January 2020 and before 29 March 2024.   | Statement of Service from hospital administration identifying the level of employment, length of employment and specialty working in. Prospective evidence is not valid. |
| <p>a) 26-week rotation may include no more than 6 weeks leave.</p> <p>b) Surgical rotations are defined as one of the nine specialties of RACS.</p> <p>c) Surgical night rotations cannot be accepted as mandatory eligibility rotations but may be counted toward the CV score.</p> <p>d) Relief rotations cannot be accepted as mandatory eligibility rotations unless they are full-time OHNS relief. Relief rotations may count toward the CV score.</p> <p>e) Applicants in full-time research for a Higher Degree (Masters by research or PhD) must complete this requirement in the three (3) years immediately prior to commencing full-time research and before 29 March 2024. Applicants in full-time research may gain experience using multiple rotations. Ongoing and/or part-time rotations undertaken during the research period will be calculated pro-rata. Evidence of hours worked per month must be provided.</p> |  |

### 7.2.6 Emergency Department experience

| Minimum experience  | Documentary evidence   |
|---|--|
| Minimum 10 consecutive weeks in a dedicated Emergency Department completed since the beginning of the intern year and before. 29 March 2024 | Statement of Service from hospital administration identifying the level of employment, length of employment and specialty working in. Prospective evidence is not valid. |
| a) Current SET Trainees are exempt from this requirement.   |  |

## 8 Structured Curriculum Vitae

### 8.1 Overview

8.1.1 The online application form includes the Structured CV which collects information on experience, other qualifications, publications, presentations, and skills courses.

### 8.2 Scoring of Curriculum Vitae

8.2.1 Each Structured CV will be independently scored by two representatives nominated by the NZ Training Subcommittee using a structured scoring system. Where a discrepancy occurs in the CV scores, the NZ Training Subcommittee Chair (or delegate) will score the CV to identify the anomaly and determine the correct score.

8.2.2 The CV will be scored out of a maximum of 66 points. The components scored are:

- a) Surgical and Medical Experience (maximum 36 points)
- b) Skills Courses (maximum 1 point)
- c) Qualifications (maximum 9 points)
- d) Research and Academic Achievements (maximum 20 points)

8.2.3 The selection tool weighting will then be applied which is 20%. As such, the applicant will receive a selection score for the CV out of a maximum of 20 points.

8.2.4 Applicants must achieve a minimum score of 30% on the CV to progress to the next stage of selection.

8.2.5 Experience counted towards the minimum eligibility criteria will not be included in the CV score.

### 8.2.6 Surgical and Medical Experience (maximum 36 points)

| Surgical experience  | Documentary evidence   |
|--|--|
| A rotation in OHNS in an Aotearoa New Zealand Hospital at the Registrar level is scored.<br>4 points per 10-week rotation (max 16 points)  | Statement of Service from hospital administration identifying the level of employment, length of employment and specialty working in.<br><br>An employment contract, letter of offer or roster is not adequate documentation and will not be scored. |
| A rotation in a hospital in Aotearoa New Zealand in any other ICU, clinical medical or surgical discipline at the Registrar level will be scored.<br>4 points per 10 weeks (max of 16 points). |  |
| Any ICU, clinical medical or surgical rotation (10 weeks) at Registrar level based in a rural Aotearoa New Zealand   |  |

|  |  |
|--|--|
| <p>hospital will be scored an extra 1 point (max of 4 points). Rural hospitals exclude hospitals in Auckland, Waitemata, Manukau, Wellington, Hutt, Waikato, Christchurch, and Dunedin.</p>  |  |
| <p>a) Rotations of less than 10 continuous weeks duration by 29 March 2024 will not be scored.</p> <p>b) Rotations longer than 26 weeks will be scored up to the maximum allowable points per rotation.</p> <p>c) All surgical, ICU and clinical medical rotations completed in Aotearoa New Zealand hospitals at the Registrar level will be considered.</p> <p>d) Private assisting will not be scored.</p> <p>e) Rotations that were not full-time will be scored pro-rata.</p> <p>f) Rotations commenced after 29 March 2024 will not be scored.</p> |  |

#### 8.2.7 Skills Courses (maximum 1 point)

| Courses  | Documentary evidence                                      |
|--|---|
| <p>Only EMST, CLEAR, ASSET and CCrISP® courses, or (international equivalents) will be scored. Each will be scored 0.5 points (max 1 point)</p>            | <p>Certificate of attendance or letter of completion.</p> |
| <p>a) Courses must be completed, and all assessments passed before 29 March 2024.</p> <p>b) Entries without adequate documentation will not be scored.</p> |   |

#### 8.2.8 Qualifications (maximum 9 points)

| Qualifications   | Documentary evidence  |
|--|---|
| <p>PhD relevant to medicine scored 6 points.</p>   | <p>Transcript or test amur from the University confirming awarding of the degree.</p> |
| <p>Master's Degree by thesis, relevant to medicine scored 3 points.</p>  |   |
| <p>a) Higher Degree, by thesis, relating to medicine awarded by 29 March 2024.</p> <p>b) A higher degree should be equivalent in syllabus and assessment to one conferred by an Australian or Aotearoa New Zealand University</p> <p>c) Overseas qualifications must have been assessed by the New Zealand Qualifications Authority or relevant Australian authorities as being equivalent to a degree in Aotearoa New Zealand or Australia</p> <p>d) Entries without adequate documentation will not be scored.</p> |   |



8.2.9 **Research and Academic Achievements (maximum 20 points)**

| Presentations   | Documentary evidence  |
|---|---|
| Each oral presentation at a national, bi-national (Australia/Aotearoa New Zealand) or international meeting is scored 2 points.   | Correspondence from the conference coordinator certifying acceptance of poster or presentation, or a copy of the programme listing full details of the presenter and name of the conference.<br><br>Evidence must include the topic of the poster or presentation.  |
| Each poster presentation is scored 0.5 points (max 3 points)  |   |
| <p>a) Scoring only includes medically relevant presentations presented prior to 29 March 2024.</p> <p>b) In the case of oral presentations, scoring only includes those made personally by the applicant. Documentary evidence must be explicit on this point, or the presentation will not be scored.</p> <p>c) Scoring only includes presentations made at a scientific meeting or conference subject to abstract selection.</p> <p>d) Scientific meetings and conferences are classified by their intended audience, not title.</p> <p>e) Entries without adequate documentation will not be scored.</p> <p>f) Multiple presentations of the same subject matter shall only be scored once.</p> <p>g) Double points will be awarded for Kaupapa Māori research, research primarily focused on rural medicine and rural Kaupapa Māori research. Supporting evidence of this must be included with applications.</p> |   |
| Publications  | Documentary evidence  |
| An article in a journal where the applicant is the first author scored 4 points   | The first page of the article that lists the journal title, article, publication date and authors; or<br><br>Letter from editor accepting article for publication with the Applicant listed as the corresponding author. Articles with correspondence indicating revisions or edits are required will not be scored.<br><br>A PubMed citation and link to the article, or full citation and ISBN, or retrospective letter of acceptance for publication on publisher letterhead, with the appropriate signature |
| A case report where the applicant is the first author or a publication as a sub-author is scored 1 point.   |   |
| Publications relevant to medicine in a peer-reviewed journal indexed on Medline, or the Australian Journal of Otolaryngology  |   |
| <p>a) Publications must be accepted for publication by 29 March 2024.</p> <p>b) Publications of a similar nature will be scored once. The higher-scoring entry will take precedence.</p> <p>c) Scoring includes case reports, journal articles and book chapters.</p> <p>d) Scoring does not include letters to the Editor, abstracts, book reviews, and media releases.</p> <p>e) Entries without proof of publication will not be scored.</p>   |   |

- f) Double points will be awarded for Kaupapa Māori research, research primarily focused on rural medicine, and rural Kaupapa Māori research. Supporting evidence of this must be included with applications. Supporting evidence of this must be included with applications.

## 9 Structured Referee Reports

### 9.1 Overview

- 9.1.1 Structured Referee Reports are collected to obtain information, in confidence, about the history of the applicant. References are collected by structured telephonic referee interviews. Referee reports are not released to Applicants.
- 9.1.2 Applicants must contact referees prior to the application only to obtain permission to provide contact details including a valid e-mail address. No attempt should be made to canvas the referee's intended response.
- 9.1.3 Referee Reports are collected in confidence. Applicants will not be provided with updates on the reports collected, nor will they be involved in the collection process in any way.
- 9.1.4 Applicants must not attempt to ascertain who gave input to their Referee Report or the outcomes of their Referee Report. Applicants attempting to discuss their Referee Reports in this manner may be considered in breach of 11.1.
- 9.1.5 All referees contacted as part of the selection process will be advised of the confidential nature of the reports.
- 9.1.6 Applicants must achieve a minimum score of 60% to progress to the next stage of selection.

### 9.2 Surgical Referees

- 9.2.1 The Applicant must provide contact details including a valid email address for a minimum of four (4) surgical consultants, including one (1) OHNS consultant who has worked with the Applicant since 1 January 2020 and before 29 March 2024.
- 9.2.2 Referees must be Surgical Consultants (FRACS or a SIMG with minimum requirement are vocationally registration) at the time of supervision and able to comment on all aspects of the applicant's workplace performance, specifically all competencies of RACS, including operative skills.
- a) Referees cannot be a RACS SET trainee of the RACS at the time of the rotation,
  - b) Referees cannot be a SIMG under supervision or assessment of the MCNZ/RACS at the time of the rotation.
  - c) Referees cannot be active NZ Training Subcommittee members.
- 9.2.3 Referees must have worked with the applicant for a minimum of eight (8) weeks (or full-time equivalent).
- 9.2.4 For current SET Trainees, contact details for the one (1) consultant from an OHNS rotation must be included even if the rotation was prior to 1 January 2020.
- 9.2.5 For Applicants in Full-time Research:
- a) Surgical referees may be provided from part-time clinical work if all other criteria are met.
  - b) One (1) consultant from an OHNS rotation must be included even if the rotation was prior to 1 January 2020.

- c) Applicants may provide referees from the two clinical years prior to commencing full-time research.
- d) The current research supervisor must also be a nominated reference.

9.2.6 If an applicant elects not to provide the details for supervising consultants in accordance with these Regulations, or it is subsequently discovered that the applicant has provided incorrect or misleading information either intentionally or unintentionally, including listing supervising consultants who do not completely comply with these Regulations, the applicant will be withdrawn, and their application will not be considered further in the selection process.

9.2.7 The units in which the applicant has worked may be contacted as part of the selection process to verify that the supervising consultants listed on the application form comply with these Regulations. The supervising consultants may also be asked to verify compliance with these Regulations.

### **9.3 Referee Interview Process**

9.3.1 The preparation of the Structured Referee Report for each applicant will be the responsibility of two (2) OHNS surgeons (Assessors) approved by the NZ Training Subcommittee Chair, with at least one being a member of the NZ Training Subcommittee.

9.3.2 The Assessors together will contact any two (2) of the four (4) surgical referees that follow the criteria set in 9.2 (via teleconference or in person).

9.3.3 Advanced notification may be sent to all referees to be contacted.

9.3.4 Referees must be able to answer 80% of the questions asked for the applicant to be eligible to proceed in the selection process.

- a) The NZ Training Subcommittee will not contact more than the initial referees for the completion of reports. While RACS administrative staff makes an effort to ensure referees participate, if referees are unable to answer 80% of the questions asked, or selected referees do not wish to participate, unselected referees will not be contacted once the collection period has commenced.

9.3.5 If a referee is unable to answer 80% of the questions asked, the applicant will be deemed ineligible and notified that they will not be considered further in the selection process.

9.3.6 Having considered the responses from all interviews, the Assessors must arrive at a consensus score using the scoring guidelines and scales shown in the Structured Referee Report. Notes justifying the score given must be recorded in the Structured Referee Report.

9.3.7 Applicants must score a minimum of 60% for the Structured Referee Report to be deemed suitable for selection.

9.3.8 The Structured Referee Report score will be recorded as a percentage. The selection tool weighting will then be applied which is 40%. As such, the applicant will receive a selection score for the Structured Referee Report out of a maximum of 40 points.

## **10 Semi-Structured Interviews**

### **10.1 Overview**

10.1.1 The interview is designed to evaluate non-technical professional skills and to provide the applicant with an opportunity to demonstrate his or her professional behaviours.

10.1.2 Applicants must score a minimum combined CV and Referee report score of 30 out of 60 to be eligible for an interview.

10.1.3 The number of Applicants interviewed will be based on the estimated number of positions available in 2024. Only top-ranked suitable Applicants will proceed to the Semi-Structured interview, based on their combined score for the CV and Referee Reports.

10.1.4 Interviews will be offered based on a ratio of three (3) Applicants to one (1) post (3:1). Applicants with identical scores at the cut-off mark will be invited to interview.

## **10.2 Notice of Interview**

10.2.1 Interview date(s) are published on the NZSOHNS and RACS website.

10.2.2 Applicants invited for an interview will be given at least ten (10) business days' notice by email.

10.2.3 Interviews will either be held at the RACS offices in Wellington or, if travel restrictions are in place, online on Friday 21 June 2024.

10.2.4 Applicants must make themselves available at the scheduled interview time. Applicants who contact the RACS Executive Officer before the interview invitations are sent to request a specific time will be considered. Times will not be changed after invitations have gone out.

10.2.5 It is the applicant's responsibility to make the appropriate arrangements and to meet costs incurred in presenting for the interview.

**10.3** Applicants who do not present for the interview will not be considered further in the selection process and the application withdrawn.

**10.4** Applicants will be briefed on the interview process and will be given the opportunity to ask any process-related questions.

10.4.1 Applicants are required to provide proof of identification at the interview.

## **10.5 Interview Structure**

10.5.1 The interview will be conducted by three (3) interview panels, each consisting of two (2) or more FRACS OHNS surgeons as interviewers, at least one of whom will be an NZ Training Subcommittee member.

10.5.2 Observer(s) may be present for all or part of the interview to ensure the validity of the interview process but will not participate in scoring.

10.5.3 Each interview panel will present two (2) scenarios with associated questions. There will be 4 minutes of reading time before each panel.

10.5.4 Each interview panel will take 10 minutes per question and the total interview time will be approximately 60 minutes.

10.5.5 Each interview panel will present two (2) scenarios and will ask the same questions. Follow-up questions may vary based on applicant responses. These questions will be used to explore the breadth and depth of the applicant's experience and insight.

10.5.6 The interview will seek information on the following attributes:

- a) Ability to perform realistic self-assessments.
- b) Ability to contribute effectively as a member of a healthcare team.
- c) Ability to act ethically, responsibly and with honesty.
- d) Capacity for caring concern and sensitivity to the needs of others
- e) The ability to interact effectively with peers, mentors, members of the health care team, patients and their families.

f) Effective spoken communication/Preparation for OHNS training/Overall impression.

10.5.7 Applicant responses will be evaluated based on a standardised interview scoring guide, which includes positive and negative indicators of performance.

## 10.6 Scoring

10.6.1 The interview will be scored out of a total of 150 marks and is weighted at 40% of the applicant's overall combined score.

10.6.2 The applicant will answer questions relating to six scenarios. Each scenario will be worth 25 points.

10.6.3 Each panel member will score the applicant independently following which a consensus among the panel members will be reached.

10.6.4 The scores for the three interview panels will be combined to reach a total interview score.

10.6.5 Applicants must score a minimum of 50% (20 out of 40) points for the interview to be deemed suitable for selection.

10.6.6 If more than one applicant has the same total score, the higher-ranking interview score will be considered first. If the total and interview scores are both the same, then the higher referee report score will receive the higher ranking.

## 11 Application Progress

11.1 Harassment of any kind is a serious matter and may result in an Applicant being deemed unsuitable for section. Harassment includes but is not limited to repeated requests by an Applicant to any referee, NZ Training Subcommittee member or NZSOHNS staff member involved in the selection process. Inappropriate, aggressive or bullying behaviour will not be tolerated.

11.2 Applicants who satisfy the eligibility and application requirements will be considered in open competition for selection and will have their Structured CV scored in accordance with section 8.

11.3 Applicants who do not meet the minimum CV score will not be considered further in the process. Applicants will be advised in writing:

a) They have been deemed **unsuitable** for selection and will not be considered further.

b) The minimum standard or CV component the applicant failed to satisfy.

c) The Applicant may request further feedback by emailing [gloria.aumaivao-tasi@surgeons.org](mailto:gloria.aumaivao-tasi@surgeons.org). Response to requests for feedback specific to the application will be provided in writing, Verbal feedback will not be given.

11.4 Structured Referee Reports will be collected in accordance with Section 9.

11.5 Applicants who meet the minimum CV score will be shortlisted for an interview based on the Applicants' combined CV and Referee Report scores.

11.6 Applicants will be invited to interview in accordance with Section 10.

11.7 All applicants invited for an interview will be given at least ten (10) business days' notice of the interview.

11.8 Applicants who are not invited to interview are deemed **unsuitable** and will not be considered further in the selection process. Applicants will be notified no later than ten (10) business days before the interview date in writing:

a) They have not ranked high enough to be invited to interview and will not be considered further

in the selection process.

- b) Information on overall scores (adjusted for weighting) received for each of the selection tools completed. Note: Individual structured referee reporting scores will not be released to the applicant.
- c) The Applicant may request further feedback by emailing [gloria.aumaivao-tasi@surgeons.org](mailto:gloria.aumaivao-tasi@surgeons.org). A response to requests for feedback specific to the application will be provided in writing; verbal feedback will not be given.

**11.9** Applicants who have progressed through to interview will be ranked based on their overall score.

**11.10** Applicants who progressed to the interview but who did not rank highly enough to be made an offer of a position will be classified as **unsuccessful**. Applicants will be advised in writing:

- a) They have been deemed suitable for selection but have not ranked highly enough to be made an offer.
- b) Information on the waiting list process and the applicant's position on the list should a position become available.
- c) Information on overall percentage scores (adjusted for weighting) received for each of the selection tools completed. Note: individual structured referee reporting scores will not be released to the applicant.
- d) The Applicant may request further feedback by emailing [gloria.aumaivao-tasi@surgeons.org](mailto:gloria.aumaivao-tasi@surgeons.org). A response to requests for feedback specific to the application will be provided in writing, verbal feedback will not be given.

**11.11** Applicants who progressed to the interview and who ranked high enough in comparison to the number of available training positions will be classified as **successful** and will be allocated to a training post. Applicants will be advised in writing:

- a) They have been successful in the selection process and are being offered a position in the SET Programme in OHNS.
- b) Notification of their overall ranking.
- c) Conditions associated with the offer.
- d) The set level and process for allocation to a training post.
- e) A copy of the Training Regulations for the SET Programme OHNS
- f) A SET Trainee Agreement
- g) The Applicant may request further feedback by emailing [gloria.aumaivao-tasi@surgeons.org](mailto:gloria.aumaivao-tasi@surgeons.org). A response to requests for feedback specific to the application will be provided in writing; verbal feedback will not be given.

**11.12** If more than one applicant has the same score, the higher-ranking interview score will be considered first. If the total and interview scores are both the same, then the higher referee report score will receive the higher ranking.

**11.13** Applicants will be notified of the outcome of their application no later than the **last date of offers**.

## **12 Application Outcome**

### **12.1 Offers**

- 12.1.1 Successful Applicants are required to accept or decline the training post allocated.
- 12.1.2 It is expected that due to deferral and interruption requests, there may be several rounds of offers.
- 12.1.3 Applicants who do not rank highly enough to receive a first-round offer, will be considered eligible for subsequent offers.
- 12.1.4 Acceptance of the offer will be conditional on the following:
  - a) Acceptance of the training post identified in the offer.
  - b) Applicants satisfying the medical registration requirements in Aotearoa New Zealand, which must not be subject to any conditions or undertakings.
  - c) Applicants satisfying the employment requirements of the relevant health areas and/or the allocated hospital.
  - d) The information submitted in the application form being true, verifiable and correct.
  - e) Satisfactory completion of all minimum eligibility criteria
  - f) Agreement to abide by the Training Regulations for the SET Program in OHNS, RACS policies and regulations at all times which form part of the contract and acceptance of the conditions which are likely to affect, or be affected by, dismissal.
  - g) Return of a signed SET Trainee Agreement, in accordance with instructions given, by the stipulated deadline.
- 12.1.5 Applicants who fail to satisfy any of the above conditions will automatically forfeit the offer.
- 12.1.6 Applicants who decline the offered training post will automatically forfeit the offer.
- 12.1.7 Forfeited offers will be made available to the next highest-scoring eligible applicant.

### **12.2 Deferral**

- 12.2.1 Successful applicants may apply to the NZ Training Subcommittee to defer the commencement of the SET Programme in OHNS
- 12.2.2 All applications for deferral are governed by the RACS regulation: Trainee Registration and Variation and the Training Regulations for the SET Program in OHNS.
- 12.2.3 Applicants who wish to defer the commencement of the SET Programme in OHNS must formally apply to the NZ Training Subcommittee at the time of acceptance outlining the reasons for their request and providing any related documentary evidence.
- 12.2.4 All requests for deferral will be considered but not necessarily granted. The NZ Training Subcommittee will make a determination on the approval or otherwise taking into consideration the reasons for the request and logistical considerations.
- 12.2.5 Requests for a deferral may be denied. Should a request for deferral be denied, applicants must either accept or decline the original offer and consider reapplying in any subsequent year.

- 12.2.6 The NZ Training Subcommittee can approve the deferral of commencement for a fixed period of one year. Trainees who have already commenced the SET Programme cannot apply for deferral and may only apply for interruption of training.
- 12.2.7 Applicants who receive approval to defer the commencement of training will be guaranteed a clinical training post and assigned a SET level, at the start of the year they commence clinical training.
- 12.2.8 Applicants are not permitted to apply for retrospective accreditation of clinical work undertaken during any period of deferral.
- 12.2.9 An approved period of deferral does not preclude the applicant from being employed in a non-training clinical rotation.

### **12.3 Flexible training**

- 12.3.1 Successful Applicants who wish to be considered for Flexible Training must lodge a request to the NZ Training Subcommittee at the time of acceptance.
- 12.3.2 While every effort will be made to accommodate flexible training requests, no guarantees can be provided. Where a flexible training request cannot be accommodated the Applicant may either accept the full-time training offer, defer for one year, or decline the offer.
- 12.3.3 Applications for flexible training governed by the RACS regulation: Trainee Registration and Variation and the Training Regulations for the SET Program in OHNS.

### **12.4 Reconsideration**

- 12.4.1 An Applicant dissatisfied with a decision made in relation to these Regulations may apply to have the decision reconsidered (Reconsideration).
- 12.4.2 The Reconsideration will be processed in accordance with the RACS regulation: Reconsideration, Review and Appeal. The original decision maker under these regulations is the NZ Training Subcommittee.
- 12.4.3 Applications for Reconsideration must be addressed to the Chair, NZ Training Subcommittee and received within seven (7) business days of the applicant being notified of the decision. Applications received outside this period will not be considered.
- 12.4.4 In the interests of clarity, the release of each score which forms part of the selection process is the notification of a decision. Once the period to apply for Reconsideration of that score expires the score is final and the applicant cannot request a Reconsideration of that score at a later stage in the selection process.
- 12.4.5 Applications for Reconsideration must be accompanied by all relevant information or grounds upon which the Applicant seeks to rely in respect of the Reconsideration. The Applicant will bear the onus of proof to establish the grounds of the reconsideration application.
- 12.4.6 In the absence of manifest error in the scoring of Structured Curriculum Vitae (CV) for selection to the SET programme, applications concerning CV scoring will not be accepted.
- 12.4.7 Only materials initially submitted by the applicant, i.e., the information on which the original decision was based, will be considered in the Reconsideration decision.

### **12.5 Selection Process Review**

- 12.5.1 The NZ Training Subcommittee will review the selection process on an annual basis and consider feedback from applicants, interviewers, referees and other stakeholders.
- 12.5.2 Applicants may be asked to complete an evaluation form/survey as part of the selection process.



- 12.5.3 Long-term term data will be kept and monitored as part of the review process including completion rates, withdrawal rates, performance levels and dismissal rates.
- 12.5.4 New selection tools may be developed and piloted during the selection process. Any data collected will not be used in the current selection process but may be used to analyse and validate the tool piloted.

## **13 Contact**

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