



SELECTION SCORE SHEET

2025 CARDIOTHORACIC SURGERY FOR THE 2026 INTAKE					
APPLICANT NAME:			SCORER'S INITIALS:		
An application should be dismissed and not considered further if the applicant has not completed the following:					
Cardiothoracic Surgical Experience					
Thoracic Surgery. a) Must be undertaken in an Australian / Aotea b) Must be purely Cardiac / Thoracic / Cardioth c) If the hospital's Cardiac and Thoracic units a and a minimum of 3 months of Thoracic Sur d) The minimum duration of a rotation excludes or conference leave).	ns duration at roa New Zea oracic and no are separated gery experier s any leave ta	PGY 3 or a land public of shared w l, the Applic nce. aken during	bove level. The experience should include both Cardiac and hospital where Cardiothoracic surgery is performed.		
Cardiothoracic experience approved?	Yes	No	If no, why?		
Non-Cardiothoracic Surgical Experience					
 In the last seven (7) years, (1/1/2018 – 31/01/2025) completion of 12 months of non-Cardiothoracic Surgery rotations. Each term should be a minimum duration of 10 weeks at PGY 2 level or above. This will change to PGY 3 level or above for the 2027 applications with minimum duration of 3 months. Two terms of 10 weeks or more should be in surgical specialities other than Cardiac, Cardiothoracic, Thoracic, or Cardiac/Lung transplantation. a) Eligible rotations shall be at PGY 2 level and above. b) Rotations which are not undertaken on a full-time basis will be adjusted pro rata. c) Rotations must be undertaken within a hospital unit specialising in one of the RACS nine surgical specialties. d) The minimum duration of a rotation excludes any leave taken during the Surgical rotation (other than rostered annual leave and / or conference leave) e) A rotation in ICU, cardiology, respiratory, anaesthesia and /or emergency may also be considered as a non-cardiothoracic surgical term. f) Documentary evidence must include a Statement of Service from the hospital administration identifying level of employment, length 					
of employment and specialty working in. Prospe	ective evidend	e is not val			
Non Cardiothoracic experience approved?	Yes	No	If no, why?		
Procedural Skills in Cardiothoracic Surgery (Logbook)					
Applicants must have the following minimum polyal Sternotomy – 10 cases b) Conduits – 50 (Minimum of 10 Radial Hacc) Chest drain insertion in Ward, ED or ICL d) First assistant in cardiac surgery – 50 cae) First assistant in thoracic surgery cases NOTE: Must be submitted as logbook representations of the case should have Date, UR Number All cases should have been performed during the case should have been pe	arvests) J setting – 1 ses – 20 port signed re preferred r and Proce	0 cases. by the Su) dure desci			
Logbook approved?	Yes	No	If no, why?		

Curriculum Vitae Qualifications		verall Maximum of 10 Points)			
Additional Qualifications (Maximum 2 points)					
Graduate Diploma in Cardiac Ultrasound and/or echocardiography Graduate Certificate in Cardiac Ultrasound and/or echocardiography including learning packages which deliver a Certificate or Credit Points Graduate Diploma in Anatomy.		Two (2 points)			
		One (1) point One (1 point)			
Documentary evidence should clearly indicate the Applicant's name, the date/s of the course, the offering institution and the mode of delivery. The qualification must be successfully completed prior to the Application Closing Date.					
Score /2	Comments: (What was scored/not	1?)			
Dublications (Maximum 5 paints)					
Publications (Maximum 5 points) 1 x Highest First Author Publication					
Tier 3 Journal (H-index > 501) Tier 2 Journal (H-index 101 – 500) Tier 3 Journal (H-index <100).		Five (5) points Three (3) points One (1) point			
NOTE: The publications must have been published in the last seven (7) years, (1/1/2018 – 31/01/2025) Applicants should select only one (1) publication for scoring. Only publications in English language and in Indexed journals are considered for scoring. H-index for a journal is determined to be the value as at the Application Closing Date. Images, case reports, "How to do it" letters to the editor – will not be considered.					
H index reference used for scoring this sec	tion will be via https://www.scim	agojr.com/journalrank.php			
Documentary evidence <u>must include</u> documentary evidence of publication acceptance (<u>not the publication itself)</u> . It should be submitted and acceptance should have been received prior to application closing date.					
Score <u>/5</u>	Comments: (What was scored/not	1?)			
Presentations (Maximum 3 points)					
Documentary evidence of oral presentation acceptance and meeting dates should be submitted					
1 x Highest Level Oral Presentation (not including mir CATEGORY 1 - International Meeting (e.g.: AATS / STS / EACTS, ISHLT, Cong., AHA, ESC	, ,	Three (3) points			
CATEGORY 2 - National or Bi-National Meetings	·/	Two (2) points			
(e.g.: ANZSCTS, RACS ASC, CSANZ, Tongariro) CATEGORY 3 - State Level Meetings (e.g.: TPC, Aortic Symposium, RACS ASMs		One (1) point			
NOTE: The presentation must have been conducted in the last seven (7) years, (1/1/2018 – 31/01/2025) Applicants should select only one (1) oral presentation for scoring. Peer review standard is the basis for scoring. The oral presentation should have been delivered prior to the Application Closing Date. The presentation cannot be of the same (or sufficiently similar) topic to the publication listed in 8.2.					
Score /3	Comments: (What was scored/not	t)			
Overall Score/10	Overall Comments:				