

**CARDIOTHORACIC SURGERY - 2026 SELECTION SCORE SHEET FOR THE 2027 INTAKE**

**APPLICANT NAME:** \_\_\_\_\_

**SCORER'S INITIALS:** \_\_\_\_\_

**Cardiothoracic Surgical Experience**

An application **should be dismissed** and not considered further if the applicant has not completed the following:

In the last seven (7) years (between 1/1/2019 and 31/01/2026), completion of a minimum of 12 months of Cardiothoracic Surgery experience. Terms must be for a minimum of 6 months duration at PGY 3 or above level. The experience should include both Cardiac and Thoracic Surgery.

- a) Must be undertaken in an Australian / Aotearoa New Zealand public hospital where **Cardiothoracic** surgery is performed.
- b) Must be purely Cardiac / Thoracic / Cardiothoracic and not shared with another Surgical Specialty.
- c) If the hospital's Cardiac and Thoracic units are separated, the Applicant must have a minimum of 9 months of Cardiac Surgery and a minimum of 3 months of Thoracic Surgery experience.
- d) The minimum duration of a rotation excludes any leave taken during the Surgical Rotation (other than rostered annual leave and / or conference leave).

Documentary evidence **must include** a Statement of Service from the hospital administration identifying the level of employment, the length of employment and the specialty working in.

**Cardiothoracic experience approved?**

Yes \_\_\_

No

If no, why?

**Non-Cardiothoracic Surgical Experience**

An application **should be dismissed** and not considered further if the applicant has not completed the following:

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 (2028 intake) with minimum duration of 3 months. Two terms of 10 weeks or more should be in surgical specialties 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 medicine will be accepted as the only non-surgical terms.

Documentary evidence **must include** a Statement of Service from the hospital administration identifying the level of employment and the specialty working in. **Prospective evidence is not valid.**

**Non Cardiothoracic experience approved?**

Yes \_\_\_

No \_\_\_

If no, why?

**Procedural Skills in Cardiothoracic Surgery (Logbook)**

An application **should be dismissed** and not considered further if the applicant has not completed the following:

- a.) Sternotomy – 10 cases
- b.) Conduits – 50 (Minimum of 10 Radial Harvests)
- c.) Chest drain insertion in Ward, ED or ICU setting – 10 cases.
- d.) First assistant in cardiac surgery – 50 cases
- e.) First assistant in thoracic surgery cases – 20

Documentary evidence **must be submitted** as a logbook report **signed by the Supervisor of Training and/or Head of Unit.** Each case should have Date, UR Number and Procedure description listed.

All cases should have been performed during a seven (7) year period between 1/1/2019 and 31/01/2026 **and must be undertaken** in an Australian / Aotearoa New Zealand hospital where Cardiothoracic surgery is performed.

**Logbook approved?**

Yes \_\_\_

No

If no, why?

**Curriculum Vitae Qualifications**

**(Overall Maximum of 14 Points)**

**Additional Qualifications (Maximum 2 points)**

|  |                       |
|--|-----------------------|
| Graduate Diploma in Cardiac Ultrasound and/or echocardiography   | <b>Two (2 points)</b> |
| Graduate Certificate in Cardiac Ultrasound and/or echocardiography including online learning packages which deliver a Certificate or Credit Points.. | <b>One (1) point</b>  |
| Graduate Diploma in Anatomy.   | <b>One (1) point</b>  |

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 not be listed if it has not been successfully completed prior to the application closing date and if documentary evidence is not provided.**

**Score**      /2

**Comments: (What was scored/not?)**

**Publications (Maximum 5 points)**

|                                      |                         |
|--------------------------------------|-------------------------|
| 1 x Highest First Author Publication | <b>Five (5) points</b>  |
| • Tier 1 Journal (H-index > 501)     | <b>Three (3) points</b> |
| • Tier 2 Journal (H-index 101 – 500) | <b>One (1) point</b>    |
| • Tier 3 Journal (H-index <100).     |                         |

**NOTE:**

The publications must have been published in the last seven (7) years, (1/1/2019 – 31/01/2026)

Applicants should select **only one (1)** publication for scoring.

Only publications in English language and in indexed journals will be 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 section will be via <https://www.scimagojr.com/journalrank.php>

Documentary evidence of publication acceptance is preferred, but the Committee will accept the tile page if it clearly shows the applicant as the first author. These should be submitted and acceptance / publication should have been received prior to application closing date.. Applicants must have one (1) publication assessable for CV marking in order to be considered eligible to progress to Interview.

**Score**      /5

**Comments: (What was scored/not?)**

**Presentations (Maximum 3 points)**

|   |                         |
|---|-------------------------|
| 1 x Highest Level Oral Presentation (not including mini-oral/abstract/poster presentations) | <b>Three (3) points</b> |
| <b>International Meeting</b>  | <b>Two (2) points</b>   |
| <b>National or Bi-National Meetings</b>   | <b>One (1) point</b>    |
| <b>State Level Meetings</b>   |                         |
| (e.g.: TPC, Aortic Symposium, RACS State  |                         |

**NOTE:**

The presentation must have been conducted in the last seven (7) years, (1/1/2019 – 31/01/2026)

Applicants should select only one (1) oral presentation for scoring.

The determination of the category of the meeting will be made by the Committee, taking into account the quality of other presentations at the meeting and the standing of the meeting within the speciality of Cardiothoracic Surgery.

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

**Local Presentations**

Additional points to a maximum of two (2).

Mini oral / poster presentation at ANZSCTS ASM, RACS ASC or the NZ Tongariro Meeting. Half (0.5) point each.

These posters and mini oral presentations will be restricted to the two preceding years (2025 and 2026).

The presentation cannot be of the same (or sufficiently similar) topic to the publication listed above in 8.2 or 8.3.

Documentary evidence of oral presentation acceptance and meeting dates **should be submitted**

Applicants must have one (1) presentation assessable for CV marking in order to be considered eligible to progress to Interview.

**Score**      /3

**Comments: (What was scored/not?)**

**Involvement in Te Ao Māori (Maximum 3 points)**

## a. Te Reo Māori

- Commitment to te reo Māori language (hold a 5 minute conversation) **One (1) point.**
  - Equivalent to NCEA level 2
  - Equivalent of stage 2 University level
  - Equivalent of level 2 Wānanga (TWOA)
  - (Minimum of 12 months full time study)
  - Iwi/hapū whare wānanga (examples below)
    - Ngāti Whātua – Matakahi
    - Hauraki – Te Whare Tāhuhu Kōrero o Hauraki
- Basic te reo Māori (hold a 10 minute plus conversation) **Two (2) points**
  - Te Ara Reo Māori 4 (TWOA)
  - Poupouhia o te Reo (Raukawa)
  - Or other similar courses as above
- Fluent in te reo Māori **Three (3) points**
  - Completion of Level 7 Te Pīnakitanga or other full immersion reo course (Takiura)
  - As assessed by local rūnanga/iwi or hapū leader

## b. Cultural experience

- Involvement in kohanga reo or Kura Kaupapa (either Applicant or Applicant's children) **One (1) point**
- Involvement in cultural activities (minimum of 1 year's involvement) **Two (2) points**  
 Examples include waka ama, kapa haka, local marae involvement (minimum 1 year).  
 Evidence must be provided that clearly states the start and end date (or continuing) and time commitment involved. A letter of endorsement to confirm involvement in each activity from the Kaumātua, Kaiako, coach or from the CEO or Chair of the iwi authority must be included.

Documentary evidence must clearly indicate the Applicant's name and involvement in Te Ao Māori.

Experience must not be listed and should not be accepted if supporting documentary evidence is not provided.

**Rurality (Maximum 1 point)**

Rural education – twelve (12) months or more of attendance at a rural or remote high school certificate **One (1) point**

Documentary evidence should clearly indicate the Applicant's name, the date/s of the education completed and the offering institution.

Rural and remote surgical experience – twelve (12) months or more of work in a surgical position in a rural or remote hospital as defined by the Monash Medical Model **One (1) point**

Documentary evidence should clearly indicate the Applicant's name, the date/s of the work placement and hospital name.

**NOTE:** Experience must not be accepted if it has not been successfully completed prior to the Application Closing Date and supporting documentary evidence is not provided.

**AUS candidates:** Modified Monash Model to be used.

MM2 – 5 will be considered rural

MM6 - 7 will be considered remote

**AoNZ candidates:** The Rural Health Research Network website to be used to determine rural or remote classification.

Refer to link [here](#).

**Overall Score** \_\_\_\_\_/14

**Overall Comments:**

**Scorer Signature:** \_\_\_\_\_