

<b>Subject:</b>	<b>Recognition of Training in Peripheral Endovascular Therapy Guidelines</b>	<b>Ref. No.</b>	<b>FES-PST-037</b>
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## 1. PURPOSE AND SCOPE

The Conjoint Committee for the Recognition of Training in Peripheral Endovascular Therapy is an Australian and New Zealand body comprising equal representation from the Royal Australian and New Zealand College of Radiologists, the Royal Australasian College of Physicians (Cardiology and Vascular Medicine) and the Royal Australasian College of Surgeons.

## 2. KEYWORDS

Guidelines, Recognition, Training, Peripheral, Endovascular, Therapy.

## 3. OBJECTIVES

The Committee has responsibility for the provision of Guidelines relevant to training in peripheral endovascular therapy, the assessment of applicants seeking recognition of relevant training and experience and the maintenance of a register of specialists who have been recognised under these Guidelines. The Committee is not an accrediting or credentialing body, but rather recognises training and experience.

## 4. PRINCIPLES

- 4.1. Appropriate facilities for training in peripheral endovascular therapy should be available in major hospitals.
- 4.2. Exposure to peripheral endovascular therapeutic procedures should be available to trainees from radiology, medicine or surgery.
- 4.3. Training implies an expression of vocational ambition in peripheral endovascular therapy in an advanced training program.
- 4.4. The Committee recommends that peripheral endovascular radiological procedures in children 14 years of age and under should only be performed by those who have satisfied the training requirements for paediatric peripheral endovascular therapy.
- 4.5. Cognitive and interpretive skills combined with a clear understanding of the role of peripheral endovascular therapy in patient management are as important as technical skills. This includes attendance at appropriate teaching sessions and relevant procedures.
- 4.6. Appropriate training and accreditation in fluoroscopic theory, practice and radiation safety must be obtained and a current license from the local licencing body held. Trainee applicants are required to have appropriate current radiation accreditation in the jurisdiction in which they are applying.
- 4.7. Recognition of satisfactory peripheral endovascular therapy training will normally be given at the completion of the specialist training program of the relevant College.
- 4.8. The Committee encourages successful applicants to maintain continuing medical education in the field of peripheral endovascular therapeutic practice and to regularly audit their own practice of peripheral endovascular therapy.

## 5. RECOGNITION PROCESS

- 5.1. The Conjoint Committee recognises training of peripheral endovascular therapists who have completed specialist training in Australasia or who have moved to Australia or New Zealand after completion of specialist training.
- 5.2. While an applicant may fulfil the requirements for training recognition by the Conjoint Committee, it should be accepted that this recognition may be used for the purpose of hospital credentialing only once the applicant has been admitted to Fellowship of one of the three participating Colleges.

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- 5.3. Training should be recorded according to these Guidelines on the log book supplied. Trainees must complete a minimum experience before they can be assessed by a supervisor recognised by the Conjoint Committee.
- 5.4. The Conjoint Committee will meet twice yearly and will forward results of the outcome of application to the applicant and the relevant Specialist Society and College.

## 6. DEFINITION OF PERIPHERAL VASCULAR INTERVENTION

A peripheral Vascular intervention is defined as an endo-arterial/venous intervention performed in vasculature external to the heart, in the following regions: extra/intra cranial, thoracic, abdominal or any of the four limbs. Excludes:

- 6.1. Central venous or percutaneous catheters such as PICC Lines / CVC
- 6.2. Tunnelled and port lines using venous access devices such as Hickmans or Portacaths
- 6.3. Jugular/subclavian venous lines
- 6.4. Endovenous ablative therapies, including varicose veins

## 7. SPECIFIC REQUIREMENTS

The following requirements are based on current literature relating to “learning curve experience”.

It is a requirement of recognition that the applicant hold a current radiation licence or its equivalent (except for Tasmanian applicants). A certified copy must be submitted.

Log Book

- 7.1. Applicants must demonstrate completion of minimum requirements by recording details of all relevant cases in the specified log book which is available to download from the Conjoint Committee website. This includes assisted and unassisted procedures, and those not successfully completed.
- 7.2. All details must be completed, including region treated, procedure name, procedure outcome, level of assistance and name of proceduralist.
- 7.3. All documents which contain patient information must be de-identified prior to submission.
- 7.4. The log book must be signed by the supervisor to verify the procedures.

## 8. PERIPHERAL ENDOVASCULAR THERAPY PROCEDURAL REQUIREMENTS

Applicants must complete the following requirements:

- 8.1. Completion of a minimum of 100 diagnostic angiograms where at least 50% has been performed by the applicant as primary proceduralist (unassisted but under supervision).
- 8.2. Completion of a minimum of 50 peripheral vascular interventions where at least 50% has been performed by the applicant as primary proceduralist (unassisted but under supervision). Refer to Definition of Peripheral vascular Intervention.
- 8.3. Provision of a Supervisor’s Report for peripheral vascular intervention (basic endovascular skills).

## 9. CAROTID STENTING PROCEDURAL REQUIREMENTS

Applicants must complete the following requirements:

- 9.1. Completion and recognition of Peripheral Endovascular Therapy Requirements as described in 3.6.

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- 9.2. Completion of a minimum of 25 Carotid Stent procedures as primary proceduralist (unassisted but under supervision).
- 9.3. The Committee will normally only consider carotid stenting procedures undertaken during the last seven (7) years.
- 9.4. Provision of a Supervisor's Report – refer to item 3.9.

## 10. FENESTRATED OR BRANCHED ENDOGRAFT PROCEDURAL REQUIREMENTS

Applicants must complete the following requirements:

- 10.1. Completion and recognition of Peripheral Endovascular Therapy Requirements as described in 3.6.
- 10.2. Completion of a minimum of 50 standard aortic endografts to be performed as primary proceduralist (unassisted but under supervision)
- 10.3. Participation in five fenestrated or branched procedures as an observer.
- 10.4. Completion of five mentored fenestrated or branched procedures.
- 10.5. Experienced proceduralists may submit logbook evidence of 10 fenestrated or branched procedures as primary proceduralist.

## 11. SUPERVISOR'S REPORT REQUIREMENTS

- 11.1. The applicant must independently complete the specified minimum number of procedures under supervision before the supervisor may consider assessing competence.
- 11.2. A satisfactory report from the supervisor will be required at the completion of the training program. The supervisor should attest that:
  - 11.2.1. The applicant competently performs the endovascular procedure safely and expeditiously;
  - 11.2.2. The applicant competently integrates indications for other procedures and therapy into patient management;
  - 11.2.3. The applicant recognises and manages complications appropriately;
  - 11.2.4. The applicant understands risk factors and is able to recognise personal and procedural limits.
- 11.3. **The supervisor should:**
  - 11.3.1. be a senior medical practitioner in a clinical unit;
  - 11.3.2. be experienced in the form of peripheral endovascular therapy for which application is being made;
  - 11.3.3. be recognised by the Conjoint Committee in the particular type of peripheral endovascular therapy;
  - 11.3.4. have personally supervised part of the applicant's training.

## 12. RECOGNITION PATHWAY FOR EXPERIENCED PROCEDURALISTS

Training completed more than two years ago. In this case, an applicant must:

- 12.1. be a Fellow of one of the three Australasian Colleges.
- 12.2. provide two written references.
- 12.3. hold a current radiation licence or certificate (except Tasmanian applicants) – a certified copy must be submitted.

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- 12.4. provide a log book showing that the minimum procedural requirements have been met. Please note that the written references must be from within the last twelve months, and be from referees who are acceptable to the Conjoint Committee. The referees must be accredited specialists in the relevant discipline, as recognised by the Health Insurance Commission (HIC) or Medical Council of New Zealand (MCNZ).

### 13. INTERNATIONAL APPLICANTS

- 13.1. Applicants who have been trained internationally (and completed training within the last two years equivalent to that provided by the Australasian Colleges), but who now reside in either Australia or New Zealand may also apply for recognition. These applicants must provide one written reference (supervisor's report) from the training site plus one written reference from a local consultant in Australia or New Zealand. References must be from within the last twelve months. They must also provide a logbook, and a certified current radiation licence or certificate.
- 13.2. Overseas-trained applicants, who are applying as experienced proceduralists (obtained Fellowship qualification more than two years ago), must satisfy the same criteria as experienced Australasian-trained applicants. In this case, at least one of the two referees must be from Australia or New Zealand. Written reports from one overseas referee and one local referee will be acceptable in the case of a senior medical practitioner who has recently relocated to Australia or New Zealand.
- 13.3. Recognition of training is not applicable to overseas trained applicants who are not a Fellow of one of the three participating Colleges.

### 14. MEETINGS

- 14.1. The Conjoint Committee will meet twice yearly to assess applications for recognition and will forward results of the outcome of each application to the applicant and the relevant Specialist Society and College.
- 14.2. Application forms and additional information are available from the Conjoint Committee website.
- 14.3. Applications must be lodged on the official Application Form and must be legible.
- 14.4. The closing date for receipt of applications is two weeks prior to the meeting date. Incomplete applications, or applications received after this date will be held until the following meeting.

### 15. FEES

- 15.1. An initial application fee is payable at the time of application.
- 15.2. An administration fee is payable for those applicants who request re-assessment by the Conjoint Committee, or are required to re-submit their application.
- 15.3. Fees are published on the Conjoint Committee website.

### 16. ASSOCIATED DOCUMENTS

No documents associated with this policy.

**Approver** Professional Development and Standards Board  
**Authoriser** Council

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