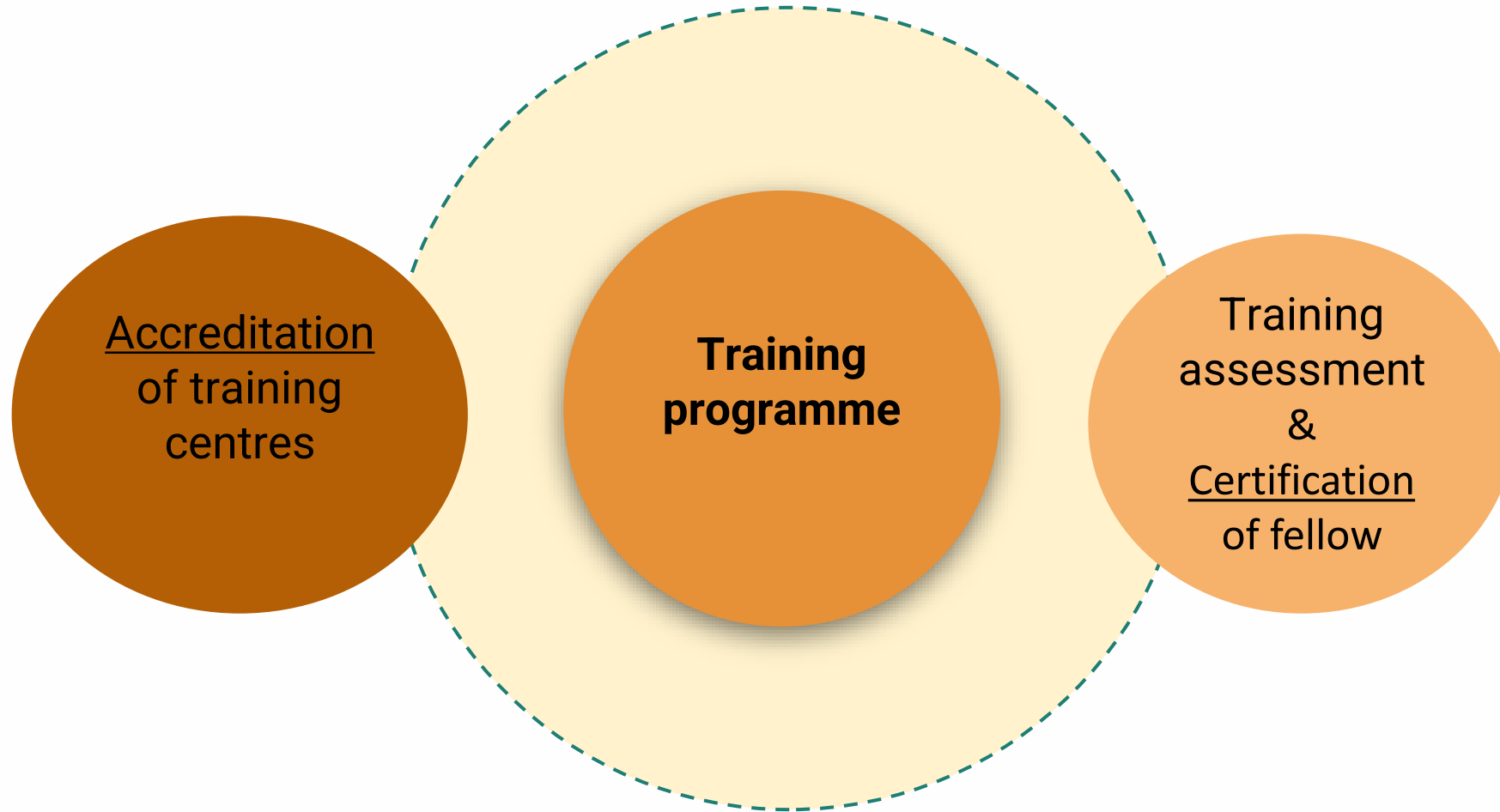


ESGO Curriculum at a glance



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Accreditation of training centres

First step: Apply

- Is your centre eligible? Check the qualitative and quantitative [criteria](#)!

Note:

It is highly recommended that ESGO centres accredited for training collaborate in the ESGO [Database](#) project.

- Is your national/institutional training programme in line with the ESGO [training](#) program? If so, what is different and how can you adapt it?

Next step: Accreditation visit

- All medical staff dedicates one working day to the visit.

Note:

- ✓ The first visit is onsite.
- ✓ Your centre covers the expenses of the visiting team + an administrative support fee

- Wait to hear back from the ESGO Training Committee.
- The Committee will tell you the length of the accreditation (usually 5 years) + the number of fellow positions your centre may hold.

What about re-accreditation?

- Can your centre be re-accredited? Check the qualitative and quantitative [criteria](#) again!

Note:

In order to apply for re-accreditation, a centre should have had **at least one ESGO fellow/trainee during the most recent period of accreditation**

- ✓ ESGO fellows should apply **before** starting their fellowships, should fulfill e-Logbook and pass the ESGO Exam.

Training programme

What should you know and do before starting training?

General requirements for fellows:

- A fellowship should last **2 to 3 years**
- **Register with the ESGO Office via the [eLogbook](#)** before starting your fellowship
- **Continuously fill in the eLogbook** during your fellowship
- You must **take and pass the ESGO [Exam](#)**

At the end of a fellowship, fellows should be capable of:

- ✓ consultation, practice, and comprehensive care of women with gynaecological cancer;
- ✓ interpretation of scientific data to improve knowledge and to apply these in clinical care, teaching, research, and audit;
- ✓ co-ordinating and promoting collaboration in organising the service; and
- ✓ providing leadership in development and in research within the subspecialty.

What modules will fellows follow?

Organ-specific modules: Gestational trophoblastic disease (GTD), Ovarian and tubal cancer, Uterine cancer, Cervical cancer, Vaginal cancer, Vulvar cancer

Generic modules: Peri-operative care, Gynaecological oncological surgery, including general and colorectal surgery, Systemic therapy (including pharmacology), Urologic surgery, Palliative care and supportive care, Clinical cancer genetics, Pathology (including immunology), Radiotherapy, Plastic and reconstructive surgery and wound care (optional), Radiology (including nuclear medicine) (optional)

General competency modules: Communication, collaboration, leadership, and management and Good medical practice, clinical governance, and management

How can you implement the ESGO Curriculum at your institution?

The ESGO Curriculum should be implemented at **an ESGO-accredited centre in training.**

The ESGO centre accredited for training needs to:

- ✓ analyse the ESGO curriculum
- ✓ compare it to the national/institutional curriculum
- ✓ prepare adaption solutions in cases there are differences between the ESGO and local curricula.

NOTE: Fellows should participate in all relevant activities of the training unit (outpatients and inpatients, on-call duties, gynaecological oncology operations, educational activities and audit) + also demonstrate knowledge, skills, and attitudes in relation to undertaking research

Training programme

Can I apply for ESGO accreditation if we have already national accreditation ?

- In case of national accreditation, the centre can ALSO request ESGO accreditation.
- In principle the application process remains the same
- The centre should however:
- **adapt** the local training programme such that one single programme complies with both national and ESGO rules
- After ESGO accreditation:
 - The **centre** can in total only employ the **number of fellows** allowed by the ESGO accreditation;
 - The **fellow** should at least complete the **ESGO eLogbook**
 - A national exam does not substitute for the **ESGO exam**

How often should assessment take place?

- The [Curriculum](#) requires **modular training** with **systematic and structured assessments**, and these should be recorded prospectively and **continuously updated**.
- The ESGO fellow and his/her mentor(s) should fill in the e-Logbook continuously and prospectively.

NOTE: ESGO recommends (available online):

- ✓ Evaluating *knowledge* using the ACGME competency assessment.
- ✓ -Evaluating *surgical skills* using OSATS (Objective Structured Assessment of Technical Skill).

What are the requirements for fellows?

Adequate surgical volume (as first surgeon):

- 10 radical hysterectomies or parametrectomies and radical trachelectomies
- 30 pelvic lymph node dissections (including sentinel lymph node).
- 10 para-aortic lymph node dissections.
- 5 local radical vulvar excisions.
- 5 inguino-femoral lymph node evaluations and dissections.
- At least 20 cytoreductive surgeries
- 30 MIS procedures .

Other skills: breaking bad news, responsible for a clinical audit, participation in a course for leadership/management, responsible for development of a protocol/guideline/patient information sheet, 2 peer-reviewed publications as any author.

What types of assessments are necessary?

Summative assessments: should be performed at least yearly (twice yearly is recommended) and evaluated by the Educational Supervisor together with the fellow.

Self-assessment: This assessment should be completed PRIOR to the evaluation with the Educational Supervisor and should be completed by the fellow him/herself.

Multi-source feedback by the training team:

Evaluation by at least two (2) wider multidisciplinary team members other than the Educational Supervisor (nurses, surgeons, anaesthetists, medical oncologist, etc.)

Evaluation by the Educational Supervisor:

Should at least entail: competency-based assessment, assessment of level of proficiency, evaluation of educational activities, evaluation of research activities and identification of specific training objectives for the next phase.