DOCUMENT REVIEW

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Document implementation: Executive Director Education & Training
Document maintenance: Governance and Standards Manager

Revision History

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| v3      | Jun-2016       | B4.2, B4.3: research project paper presentations and coursework  
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THE REGULATIONS

Introduction

Pursuant to the College Constitution, the Australasian College for Emergency Medicine (ACEM/the College) has approved this set of Regulations pertaining to the Specialist (FACEM) Training Program. These Regulations are to be read in conjunction with all relevant College policies and guidelines as from time to time are approved. To the extent that there is any inconsistency, the Regulations shall prevail.

These Regulations are applicable to all trainees undertaking the specialist training program leading to the award of Fellowship of the Australasian College for Emergency Medicine (FACEM), as well as any other program/s referred to herein.

The College may amend these Regulations from time to time and will promulgate all amendments via the ACEM website or other mechanism/s considered appropriate from time to time. Amendments may change, alter, add or remove any provisions of the Regulations and, if made, will apply with effect from the date of the Board or Council of Education meeting at which they are approved (unless otherwise stated).

ACEM may interpret these Regulations, including to address any inconsistencies, inaccuracies or unclear provisions. ACEM may promulgate any interpretation of these Regulations via the College website or other mechanism/s considered appropriate from time to time. Such interpretation shall apply with effect from the date of promulgation (unless otherwise stated).

A reference to the College Board or Council of Education (COE) includes a reference to their approved delegate/s.

The notes that appear throughout these Regulations do not form part of the substantive provisions of the Regulation to which they are attached. Rather, the notes are provided to either expand upon or offer an explanation of the substantive provisions in question.

Terminology

The following terms and their corresponding meaning are applicable throughout these Regulations.

<table>
<thead>
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<th>Term</th>
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<td>Accreditation</td>
<td>The process by which sites in Australia and New Zealand are authorised by ACEM to offer specialist training for ACEM trainees, initially through a granting of ‘provisional’ accreditation or, following a satisfactory site visit, ‘ongoing’ accreditation.</td>
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<td>Accreditation, level of</td>
<td>Refers to the period of training time for which an emergency department is accredited - e.g. for three (3), six (6), 12, 18 or 24 months (as appropriate).</td>
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| Accredited                  | A term used in relation to training sites in Australia and New Zealand which have successfully completed and maintained:  
  • ACEM accreditation - in relation to emergency medicine placements and Category ‘A’ special skills placements, or  
  • accreditation by one of the specialist medical colleges specified in Regulation B2.4.5.1 (non-ED specialist placements) – as appropriate to the discipline. |
| Approved                    | A term used in relation to specific training placements which require the prior approval of the Council of Education/approved delegate on an individual basis. |
| Board                       | The ultimate governing body of ACEM, whose role is to provide purpose, leadership and overall strategy. It is also responsible for ensuring that College finances are sound, its operations are legal and its procedures are effective. |
| Certified                   | A term used in relation to training (at an accredited site or in an approved placement) which results in time being accrued towards completion of training time requirements. |
| Council of Education (COE)  | The educational governing body of the ACEM, which is responsible for educational strategic direction delivery and promoting improvements in education and has oversight of all facets of the College’s educational activities, including examination and election to Fellowship, accreditation and continuing professional development programs. |
Emergency medicine network

Consists of an approved group of emergency departments, of which each participating ED holds standard accreditation (irrespective of the level) which have formally agreed to a co-ordinated education and training program for emergency medicine trainees within the network.

Full-Time Equivalent (FTE)

Any reference to minimum term duration requirements is a reference to the FTE duration. Full-time work (1.0 FTE) is determined by reference to the hours and conditions applicable in the relevant jurisdiction; 0.5 FTE refers to half those full-time hours. Accordingly, at 0.5 FTE, it would take six (6) consecutive months to complete a placement with a minimum duration requirement of three (3) months at 1.0 FTE.

Host emergency department

An emergency department with standard accreditation (irrespective of the level) which provides education and training resources not otherwise available at the site to which it is formally linked, and which may form part of an emergency medicine network.

In-Training Assessment (ITA)

ITAs are completed by supervisors of training, and provide a holistic assessment of the trainee’s development towards Fellowship. ITAs are completed every three (3) calendar months.

Linked emergency department

One which does not meet the minimum requirements for six (6) months standard accreditation, but which is formally linked to a ‘host site’.

Maintenance pathway (Maintenance)

A trainee placed in maintenance has been assessed by the COE/approved delegate as being at the required standard for their stage/phase in training, but has not yet completed all training and assessment requirements of that stage/phase.

The trainee remains in maintenance until all training and assessment requirements of the applicable stage/phase have been satisfactorily completed.

Mentor

A mentor provides direct access to expert knowledge and skills in an environment that promotes rapid learning. A mentor’s role does not include performance management, which is the role of the DEMT. The mentoring relationship will be confidential and any information disclosed during mentoring meetings will not be used as part of a performance appraisal process.

Paediatric patient

Means a patient who has not yet reached their 16th birthday (i.e. aged up to 15 years and 364 days but, for the purposes of the minimum paediatric requirement, does not include neonatal patients unless:
- They were attended during a placement in an accredited dedicated paediatric intensive care medicine unit, or
- They were attended during a general paediatric medicine placement which routinely included the care of special care paediatric patients as part of its overall workload.

Paediatric patient encounter

For the purposes of the minimum paediatric requirement, ‘encounter’ includes attending a patient for all of the following purposes – taking a history; physical examination; and participation in management and disposition decisions.

Placement

A placement is a term of training undertaken at a designated site.

Placement, Category ‘A’

A placement which has been accredited by COE/approved delegate following an inspection by an ACEM accreditation team (e.g. retrieval medicine, hyperbaric medicine etc.). For this purpose, ‘accredited’ includes ‘provisionally accredited’, where an initial review of documentation supports the interim accreditation of the placement pending a formal accreditation inspection.

Placement, Category ‘T’

A placement which has been approved by the COE/approved delegate as a ‘one-off’ training placement for a specific individual trainee who has applied for and obtained prior approval to undertake the placement and to have it considered for certification in due course (e.g. research).

Relevant Site

A relevant site is the site at which a trainee is training and not another site or host site within an ED network or linked ED respectively.

Remediation

A period of training resulting from a trainee being reviewed and judged as not yet achieving the standard expected for their stage or phase of training of the FACEM Training Program. This may be as a result of failure to complete specified requirement/s of the program in the relevant timeframe or failure to meet or maintain the standard required. Through remediation, the trainee is afforded further attempts to achieve the required standards.

Site

A site is the location at which the trainee completes ED and non-ED training towards achieving Fellowship.
**Structured Reference (SR)**  
A document in which a FACEM attests to the character and competency of the Trainee at the completion of six (6) months FTE training in a single placement in the Provisional Training emergency medicine term of the training program. Trainees are required to obtain a SR from each of three (3) FACEMs for the same training placement. All SRs are submitted in confidence by FACEMs to ACEM.

**Term**  
A term is a period of time during which a trainee undertakes training in an accredited or approved site. There is a minimum term duration of two (2) months for placements in Provisional Training placements, and three (3) months in Advanced Training placements.

**Time Check**  
Time checks occur every six (6) to seven (7) weeks at specified dates published on the College website. ACEM’s online training system is updated at each time check, based on the training time completed by the trainee, according to the trainee’s recorded placement details.

**Time Complete**  
Trainees who are ‘time-complete’ have completed the minimum time requirements for training and are yet to satisfactorily complete all relevant assessment requirements.

**Training Agreement**  
A document signed by the prospective trainee and two supervisors which contains undertakings, commitments and responsibilities when commencing the training program.

**Training Year**  
The 12 consecutive months, usually commencing in early December for FACEM trainees in New Zealand and early February for FACEM trainees in Australia, the specific details of which are published on the College website each year.
B1 GENERAL REQUIREMENTS OF THE FACEM TRAINING PROGRAM

B1.1 Eligibility for the FACEM Training Program

B1.1.1 To apply for selection into the FACEM Training Program, medical practitioners must, at the time of application:

B1.1.1.1 Possess an approved Australian or New Zealand primary medical degree, have successfully completed the requirements necessary to obtain the Australian Medical Council (AMC) certificate or general registration with the Medical Board of Australia via the Competent Authority Pathway, or be a graduate in Medicine and Surgery of a Medical School recognised by the New Zealand Medical Council for the purposes of registration.

B1.1.1.2 Have citizenship or be granted permanent residency status in the country of application, or have the necessary approvals to undertake training by the date of commencement of training, including an appropriate visa.

B1.1.1.3 Hold general registration with the Medical Board of Australia (MBA) or registration in a general scope of practice with the Medical Council of New Zealand (MCNZ) as applicable for the country in which they are intending to train, with no suspension, condition, restriction or undertaking imposed that limits their having unconditional medical registration in Australia or New Zealand as applicable.

B1.1.1.4 Have completed or be currently undertaking Post Graduate Year (PGY) 2.

B1.1.1.5 Have completed the following terms, where terms are defined as a minimum of eight (8) FTE weeks of continuous clinical work:

(a) a minimum of one (1) full term in emergency medicine in Australia and/or New Zealand during or after postgraduate year 2 (PGY2), and

(b) a minimum of two (2) full postgraduate terms in two different disciplines other than emergency medicine.

B1.1.2 Incomplete applications for selection into the FACEM Training Program and those received after the date and time specified by the College will not be considered.

B1.2 Enrolment as a Trainee

B1.2.1 Medical practitioners successful in the Selection into FACEM Training process will be invited by ACEM to enrol in the FACEM Training Program, and must apply for enrolment as a trainee in accordance with the provisions of the Trainee Enrolment Policy.

B1.2.2 Former trainees of the College who wish to re-enrol as a trainee in the FACEM Training Program must first apply for Selection into the FACEM Training Program in accordance with the Policy on Former Trainees Applying for Selection into the FACEM Training Program. If successful in the Selection into FACEM Training process, these former trainees will be invited to re-enrol in the FACEM Training Program in accordance with the Trainee Enrolment Policy.

B1.2.3 An application for enrolment/re-enrolment will only be accepted if the applicant completes and satisfactorily addresses all requirements specified as part of the enrolment process, including:

(a) evidence of all necessary approvals to commence training in Australia or New Zealand as applicable, including any visa requirements;

(b) evidence of completion or current status of PGY2;

(c) all other information and documentation specified on the enrolment form and by the College; and

(d) payment of the annual training fee for the applicable training year and the enrolment fee.
B1.2.4 Following receipt by the College of a complete application to enrol, submission of the Trainee Agreement, and payment of all applicable fees by the applicable deadline(s) specified by the College, an applicant has successfully enrolled and is deemed a FACEM Training Program trainee.

B1.2.5 Conditional Enrolment

B1.2.5.1 Applicants who, at the time of applying to enrol, have not yet completed PGY2 or do not yet have evidence of completion of PGY2 may be permitted to conditionally enrol as a trainee.

B1.2.5.2 Applications for conditional enrolment will be accepted where:
(a) at the time of applying to enrol, all information required for an application, other than completion and verification of completion of PGY2, is provided; and
(b) the practitioner undertakes to supply to the College by the end of the first ITA period of the relevant medical training year a verified work history confirming completion of PGY2.

B1.2.5.3 Failure to provide the evidence of completion of PGY2 by the date specified by the College will result in consideration for removal from the FACEM Training Program.

B1.2.6 To be eligible to commence the FACEM Training Program, medical practitioners must:
(a) be enrolled or conditionally enrolled as a trainee in the FACEM Training Program;
(b) not be enrolled in either the EMC or EMD Training Program; and
(c) not be enrolled in a vocational medical training program other than one recognised by ACEM for the purposes of joint training (i.e. CICM or RACP paediatrics).

B1.3 Medical Registration

B1.3.1 Except as specified elsewhere in these Regulations, at all times while undertaking the FACEM Training Program, trainees are required to hold:
(a) General registration from the Medical Board of Australia (MBA) – for trainees in Australia, or
(b) General scope registration from the Medical Council of New Zealand (MCNZ) – for trainees in New Zealand.

Note: See Regulation B2.7.1 – Grounds for removal from the training program.

B1.3.2 Trainees who enrolled with the College prior to 1 January 2015 and who continue to hold a limited form of registration that enables them to meet all requirements of the FACEM Training Program, are not required to meet the requirements of Regulation B1.3.1 until such time as they obtain general registration.

B1.3.3 Trainees enrolled in the FACEM Training Program and who undertake a temporary absence from medical practice (e.g. maternity or parental leave) may, for the purposes of Regulation B1.3.1, hold non-practising registration with the MBA or the MCNZ as applicable for the duration of that absence from medical practice.

B1.3.4 Trainees are required to notify the College within five (5) working days if their medical registration with the MBA or MCNZ as applicable expires; or within five (5) working days of the date of notification if, for any reason, their medical registration is withdrawn, suspended or conditions are imposed, or if they receive notice of any complaint to any medical registration authority.

B1.4 Training Program Fees

B1.4.1 Except as provided for elsewhere in these regulations, all trainees, regardless of whether training full-time or part-time, must pay the full annual training fee by 1 January of each year.
B1.4.2 Annual Training Fee Concessions

B1.4.2.1 Trainees who intend to interrupt training for an entire training year may apply for a concession on the annual training fee. Applications for a concession must be made in accordance with the Annual Training Fee Policy and must reach the College prior to 1 January in the relevant year.

B1.4.2.2 Trainees who interrupt training for part(s) of the training year may apply for a concession on the annual training fee. Applications for a concession must be made in accordance with the Annual Training Fee Policy and any concession granted shall be treated in accordance with the provisions of that policy.

No concession shall be available where a trainee is placed on an interruption to training pursuant to these Regulations and associated College processes or has been required to interrupt their training as a result of any suspension, condition or similar event or requirement imposed by an employer or regulatory body.

B1.4.3 Trainees will not be eligible to attempt College assessments and will not have their training time considered for certification while the annual training fee or any other amounts owed to the College remain unpaid.

B1.4.4 Applicants invited to enrol in the FACEM Training Program must provide payment of the annual training fee for their first year and an enrolment fee as part of the enrolment process.

B1.5 Trainee Placement Surveys

B1.5.1 Save as outlined in Regulation B1.5.2, all trainees enrolled in the FACEM Training Program, regardless of stage and/or phase of training, are required to complete the ACEM Trainee Placement Survey annually.

B1.5.2 Trainees who have interrupted their training for the entirety of the training year to which the survey relates, are not required to complete the survey associated with that training year.

B1.5.2 Trainees required to complete the ACEM Trainee Placement Survey pursuant to this regulation who, having been advised, in writing, of the requirement on three occasions, and the consequence of failing to do so, will be considered for possible removal from the FACEM Training Program pursuant to regulation B2.7.

B1.6 Satisfactory Completion of the FACEM Training Program

B1.6.1 Trainees who successfully complete the FACEM Training Program will have satisfactorily completed:

(a) all training and assessment requirements of Provisional Training as specified by the College; and
(b) all training and assessment requirements of Advanced Training as specified by the College.
B2 SPECIALIST TRAINING

B2.1 General Provisions

B2.1.1 Stages and Phases of Training

B2.1.1.1 The FACEM Training Program comprises the following ‘components’:

(a) Provisional Training: the Provisional Training period as a whole is regarded as a single Stage of training (see Regulation B2.2).

(b) Advanced Training: the Advanced Training period comprises three (3) stages:

- Stage 1: commences upon progression into Advanced Training and continues until completion of all of the ‘early phase’ emergency medicine requirements of Advanced Training. Non-ED placements may be undertaken during this phase.

- Stage 2: commences upon progression into ‘late phase’ emergency medicine training and continues until commencement of Stage 3. It is not necessary to complete all ‘late phase’ EM requirements during this period.

- Stage 3: commences when the trainee completes 36 FTE months Advanced Training and continues until the trainee is elected to Fellowship. This stage has particular significance for Fellowship Examination (Clinical) eligibility. Any ‘late phase’ EM requirements not completed during Stage 2 must be completed during this stage.

B2.1.1.2 The ‘core’ emergency medicine requirement of Advanced Training comprises two (2) ‘phases’:

(a) ‘Early phase’ training: this phase requires completion of 12 FTE months of emergency medicine Advanced Training in accredited emergency department/s in Australia or New Zealand. It must:

- be undertaken subsequent to progression into Advanced Training, and
- be certifiable as ‘core’ emergency medicine.

(b) ‘Late phase’ training: this phase requires completion of the remaining 18 FTE months of emergency medicine Advanced Training in emergency departments in Australia or New Zealand. It must:

- be undertaken subsequent to progression into ‘late phase’ EM training, and
- be certifiable as ‘core’ emergency medicine.

B2.1.2 Timeframe for Completion of the FACEM Training Program

B2.1.2.1 Enrolment as a trainee commences in accordance with Regulation B1.2 and continues until the trainee is elected to fellowship of the College, formally withdraws from the FACEM Training Program or is removed from the FACEM Training Program.

B2.1.2.2 Except as provided for elsewhere in these Regulations, trainees must complete all requirements of the FACEM Training Program and be eligible for election to Fellowship within 12 years of the date of enrolment as a trainee. This 12-year period is inclusive of all leave taken, periods of interrupted training and periods of remediation.

B2.1.2.3 Of the 12-year period referred to in Regulation B2.1.2.1, up to a maximum of five (5) years may be spent completing the training and assessment requirements of Provisional Training.

B2.1.2.4 Of the 12-year period referred to in Regulation B2.1.2.1, up to a maximum of ten (10) years may be spent completing the training and assessment requirements of Advanced Training.

B2.1.2.5 Where, pursuant to the applicable College policy(ies), Recognition of Prior Learning (RPL) is granted for a specified number of FTE months of training, the maximum duration permitted under Regulations B2.1.2.2. - B2.1.2.4 as applicable, shall be reduced by the corresponding number of FTE months for which RPL was granted.
B2.1.3 Part-Time Training

B2.1.3.1 Training may be undertaken on either a full-time or a part-time basis, as the trainee may choose; College approval to work part-time is not required.

B2.1.3.2 Part-time training must meet minimum placement duration requirements and be undertaken at a minimum of 0.5 FTE of the full-time position. Part-time training of less than 0.5 FTE will not be considered for certification.

B2.1.3.3 Trainees who train part-time must also remain within the maximum limits allowed for completion of all requirements of Provisional Training, Advanced Training and the FACEM Training Program as a whole.

B2.1.4 Leave during Training Placement

B2.1.4.1 Trainees are entitled, during a training placement, to take up to the limits outlined in these regulations.

B2.1.4.2 Leave from training must be reported to the College, via the member portal, together with any additional information specified therein.

B2.1.4.3 The maximum leave entitlement for a training year is inclusive of, but not limited to, combined annual, personal, compassionate, parental, study, examination, conference, strike and carers leave.

B2.1.4.4 Provisional trainees training full-time are permitted up to 10 weeks’ leave per training year; however in any one In-Training (ITA) period, no more than 40 per cent of the duration of that ITA period may be taken as leave.

B2.1.4.5 Advanced trainees training full-time are permitted up to 10 weeks’ leave per training year; however no more than five (5) weeks of leave may be undertaken in any one 13-week ITA period.

B2.1.4.6 Where the length of any individual placement meets minimum training requirements, trainees training part-time have pro-rata leave entitlements.

B2.1.4.7 Leave taken in excess of the maximum weeks permitted in any one ITA period will result in loss of certification of the entire ITA period.

B2.1.4.8 Leave taken in excess of the maximum weeks permitted in a training year, will result in the loss of certification of any ITA period where excessive leave is taken.

B2.1.4.9 All periods granted as leave will contribute to the maximum timeframes permitted for completion of the FACEM Training Program and/or its components outlined in Regulation B2.1.2.

B2.1.5 Interruption to Training

B2.1.5.1 (a) Trainees may interrupt their training for up to 104 weeks in the course of the FACEM Training Program; however, only 52 weeks’ of absence can be approved at any one time. Where training is interrupted for more than 52 consecutive weeks, a second application for interruption to training must be submitted to the College on the relevant form.

(b) Pursuant to College policy, trainees may take additional period(s) of interruption to training over that outlined in Regulation B2.1.5.1(a) where that interruption is for the purpose of parental leave.

B2.1.5.2 The prior written approval of the COE/approved delegate to interrupt training must be obtained where a trainee will not be in an accredited or approved training placement, whether working or otherwise.

B2.1.5.3 Except as provided for elsewhere in these Regulations, all periods granted as interruption to training will contribute to the maximum timeframes permitted for completion of the training program and/or its components outlined in Regulation B2.1.2.
B2.1.5.4 Interruption to training for the purpose of parental leave that exceeds the maximum timeframes permitted for completion of the training program and/or its components as outlined in Regulation B2.1.2 or the 104 weeks prescribed in Regulation B2.1.5.1 shall be permitted in accordance with the ACEM Parental Leave Policy.

B2.1.5.5 Trainees other than those undertaking a formally recognised period of return to work pursuant to College policy who, during an approved interruption to training, undertake work of not less than that specified in Regulation B2.4.2.1 and at 0.5 FTE or greater will be considered to be in training and all training requirements must be met and the appropriate assessments completed. Trainees found to be non-compliant will be considered for removal from the training program pursuant to Regulation B2.7.1.

B2.1.6 Overseas Training

B2.1.6.1 Trainees intending to undertake any training in countries other than Australia and New Zealand must obtain written approval from the COE/approved delegate prior to commencing the placement.

B2.1.6.2 Approval of overseas training may be made subject to such conditions as the COE/approved delegate may deem appropriate.

B2.1.6.3 Any training undertaken prior to the date on which written approval is granted will not be certified or retrospectively approved.

B2.1.6.4 The maximum amount of training which may be certified in approved overseas placements is:

(a) during Provisional Training – up to six (6) FTE months approved non-ED or discretionary training

(b) during Advanced Training – up to 12 FTE months approved training, including:

- up to six (6) FTE months approved non-ED training; and
- up to six (6) FTE months approved discretionary training (ED or non-ED).

B2.2 Provisional Training

B2.2.1 General Requirements

B2.2.1.1 Unless credit transfer in respect of discretionary training time (ED or non-ED) has been granted, all training requirements specified by the College may only be completed subsequent to enrolment as a trainee.

B2.2.1.2 All Provisional Training must be undertaken in placements that meet the suitability requirements specified by the College (see Regulation B2.4.1).

B2.2.2 Training and Assessment Requirements

B2.2.2.1 To be recognised as having completed Provisional Training, trainees must satisfactorily complete:

(a) a minimum of 12 FTE months of satisfactory training comprising:

- six (6) FTE months ‘core’ emergency medicine training, which must be undertaken in a single accredited emergency medicine placement in Australia or New Zealand, and
- a further six (6) FTE months training in accredited/approved placement/s (ED or non-ED) as applicable;

(b) all prescribed Workplace-based Assessments and Structured Reference requirements specified by the College;

(c) the Primary Examination (Written);

(d) the Primary Examination (Viva); and

(e) all applicable maintenance and ‘time complete’ requirements.
B2.2.2.2 With effect from the 2018 training year, all trainees must, in their first 12 FTE months of Provisional Training, complete at least six (6) FTE months training in an accredited emergency medicine placement in Australia or New Zealand. Trainees who fail to do so will be considered for removal from the Training Program pursuant to Regulation B2.7.2.

B2.2.2.3 Trainees who are ‘time complete’ must, during each subsequent 12 calendar month period, commencing from the date on which they become ‘time-complete’, complete:

(a) three (3) FTE months continuous training in an accredited emergency medicine placement in Australia or New Zealand; and

(b) appropriately accredited/approved training placements throughout the remaining months of the 12 calendar month period.

B2.3 Advanced Training

B2.3.1 General Requirements

B2.3.1.1 Unless recognition of prior learning or credit transfer in respect of Advanced Training time has been granted, Advanced Training requirements may only be completed subsequent to progression into the Advanced Training program.

B2.3.1.2 All Advanced Training must be undertaken in placements that meet the requirements specified by the College (see Regulation B2.4.1).

B2.3.2 Training and Assessment Requirements

B2.3.2.1 To achieve eligibility for election to Fellowship, trainees must satisfactorily complete:

(a) a minimum of 48 FTE months approved training, comprising:
   - 30 FTE months core emergency medicine training
   - 6 FTE months critical care training;
   - 6 FTE months non-ED training and
   - 6 FTE months ‘discretionary’ training;

(b) all prescribed Workplace-based Assessments and Structured Reference requirements specified by the College;

(c) the paediatric requirement;

(d) the Fellowship Examination (Written);

(e) the Fellowship Examination (Clinical);

(f) the Research Requirement; and

(g) all applicable maintenance and ‘time complete’ requirements.

B2.3.2.2 Trainees who are ‘time-complete’ must, during each subsequent 12 calendar month period, commencing from the date on which they become ‘time-complete’:

(a) complete at least three (3) FTE months continuous training in an accredited emergency medicine placement;

(b) complete appropriately accredited/approved training placements during the remaining nine (9) months of each such period; and

(c) satisfactorily complete all assessment and review requirements associated with these placements.

B2.3.3 Core Emergency Medicine Training

B2.3.3.1 Of the 30 FTE months of core emergency medicine training required as part of Advanced Training:
(a) at least 12 FTE months must be undertaken in an adult emergency department; and

(b) at least six (6) FTE months must be undertaken in the emergency department of each of the following (as designated by the COE):

- a major referral hospital, and
- either an urban district hospital or a regional/rural base hospital.

B2.3.3.2 The maximum amount of training which may be certified in emergency medicine at any given training site is subject to site-specific accreditation limits.

B2.3.4 Critical Care Training

B2.3.4.1 The six (6) months of critical care training may only be undertaken in the following disciplines:

(a) Anaesthetics – in a placement located within Australia or New Zealand, which is:

- accredited for specialist training in anaesthetics by ANZCA, or
- approved by ACEM as being suitable for critical care training in anaesthetics.

(b) Intensive care medicine – in a placement located in Australia or New Zealand, which is:

- accredited for core specialist training in intensive care medicine by CICM, or
- approved by ACEM as being suitable for critical care training in intensive care medicine.

Placements undertaken in a unit(s) approved by CICM solely for Foundation training in intensive care medicine will not be credited towards completion of the required six (6) FTE months of critical care training.

B2.3.5 Non-ED Training

B2.3.5.1 The maximum amount of training which may be certified in any non-ED discipline overall is inclusive of any such training certified as:

- non-ED training,
- critical care training, and
- discretionary training.

B2.3.5.2 The required 18 FTE months of non-ED Advanced Training are subject to the following discipline limits:

12 months:
- Anaesthesia
- Intensive Care Medicine
- Medicine (Adult)
- Medicine (Paediatrics)
- Surgery (General Adult)
- Surgery (General Paediatric)

6 months:
- Medicine (specialty fields other than general and paediatric)
- Surgery (specialty fields other than general adult and general paediatric)
- Any other discipline

B2.3.6 Discretionary Training

B2.3.6.1 Discretionary training is included within the maximum allowable training time applicable to accredited emergency medicine training sites or which may be undertaken in the various accredited non-ED placements (as appropriate).

B2.3.6.2 Discretionary training placements may be undertaken in either of the following:

- Approved emergency medicine placements – subject to site-specific accreditation limits, and
• Approved non-ED placements – subject to the amount of training which may be certified in the particular non-ED discipline.

B2.3.7 Paediatric Requirement

B2.3.7.1 Completion of the paediatric requirement may be achieved by means of satisfactory completion of either:

(a) a six (6) FTE month placement in a dedicated paediatric emergency department accredited by ACEM for the purposes of training in paediatric emergency medicine; or

(b) the paediatric logbook; or

(c) such combination of (a) and (b) as approved by the COE/approved delegate, on application.

B2.3.7.2 Satisfactory completion of the paediatric logbook requires the trainee to attend and appropriately record a minimum of 400 paediatric patient encounters.

B2.3.7.3 Of the minimum 400 paediatric patient encounters specified in Regulation B2.3.7.2:

(a) At least 200 encounters must be undertaken in an emergency department in Australia or New Zealand that is accredited by ACEM for the paediatric requirement. Of this number, at least 100 encounters must fall into categories 1, 2 or 3 of the Australasian Triage Scale.

(b) The remaining 200 encounters are to be undertaken in any of the following placement/s:

• an accredited emergency department in Australia or New Zealand which is also accredited by ACEM for the paediatric requirement

• an in-patient placement in general paediatric medicine accredited by RACP for specialist training and which is undertaken in Australia or New Zealand

• a paediatric intensive care unit (ICU) (but not a neonatal ICU) in Australia or New Zealand which is:
  o accredited by CICM for specialist training in intensive care medicine, or
  o approved by ACEM as a special skills placement in ACEM-CICM (paediatric).

• subject to Regulation B2.3.7.4, an overseas placement accredited locally by the relevant specialist training authority for specialist training in:
  o emergency medicine
  o paediatric intensive care medicine
  o general paediatric medicine (inpatient placements).

B2.3.7.4 Paediatric patient encounters in overseas countries may only be recorded in the paediatric logbook if the trainee obtained prior approval from the COE/approved delegate to:

(a) undertake the placement in question, and

(b) record encounters with paediatric patients during that placement in the paediatric logbook.

B2.4 Training Sites and Placements

B2.4.1 General Provisions

B2.4.1.1 The maximum amount of time which may be certified in the various accredited emergency departments, in non-ED specialist placements and in special skills placements is set by the College. These maximums apply to Advanced Training time only, and do not include any time spent at the same site or in the same discipline during Provisional Training.

B2.4.1.2 ACEM may designate certain placements as being appropriate only for trainees at a particular stage or phase of training. Where such designation has been made, only trainees at the relevant stage or phase of training, and subject to meeting all relevant College Regulations, will receive certification for training and any assessment/s completed at the placement in question.
B2.4.2 Placement Duration Requirements

B2.4.2.1 To be considered for certification towards fulfilling Core ED training requirements, each training placement must have a minimum duration of:
- two (2) consecutive calendar months at a single site (for provisional trainees); or
- three (3) consecutive months at a single site (for advanced trainees).

B2.4.2.2 To be considered for certification towards fulfilling Non-ED training requirements, each training placement must have a minimum duration of:
- two (2) consecutive FTE months at a single site in a single discipline (for provisional trainees); or
- three (3) consecutive FTE months at a single site in a single discipline (for advanced trainees).

B2.4.2.3 To be considered for certification towards fulfilling Critical Care training requirements, each training placement must have a minimum duration of:
- two (2) consecutive FTE months at a single site in a single discipline (for provisional trainees); or
- three (3) consecutive FTE months at a single site in a single discipline (for advanced trainees).

B2.4.2.4 Placements that do not meet minimum duration requirements will not be considered for certification.

B2.4.3 Emergency Medicine Placements

B2.4.3.1 Unless otherwise stated, a reference to ‘emergency medicine training’ includes emergency medicine training in both adult and paediatric settings (whether dedicated or mixed).

B2.4.3.2 Emergency medicine placements undertaken within Australia or New Zealand in an accredited emergency department may only be certified as core or discretionary emergency medicine training (as appropriate).

B2.4.3.3 Subject to a granting of approval and in accordance with Regulation B2.1.6, emergency medicine placements undertaken outside Australia or New Zealand may only be certified as discretionary emergency medicine training.

B2.4.3.4 Emergency medicine placements undertaken in an accredited ‘linked’ emergency department, may only be certified as either core or discretionary emergency medicine training to a collective maximum of six (6) FTE months training. Any training undertaken in a ‘linked’ emergency department in excess of six (6) FTE months in total will not be certified.

B2.4.3.5 Emergency medicine placements undertaken in an accredited paediatric emergency department (dedicated or mixed) may only be certified as core or discretionary emergency medicine training.

Emergency medicine placements undertaken in an accredited paediatric emergency department (dedicated or mixed) cannot be certified as non-ED training.

B2.4.3.6 Except as provided for elsewhere in these Regulations, any placement undertaken in an unaccredited emergency department will not be considered for certification.

Note: See Regulation B2.4.4 (special skills placements)
See Regulations relating to Paediatric Emergency Medicine Joint Training Program

B2.4.4 Special Skills Placements

B2.4.4.1 Placements in a non-ED sub/speciality which is not a recognised sub/specialty for the purposes of registration with the MBA or type of vocational scope for the purposes of registration with the MCNZ as applicable may only be certifiable for ACEM training purposes as either a:
(a) **Category ‘A’ placement** – one which has been accredited (on an ongoing basis) by the COE/approved delegate following an inspection by an ACEM accreditation team (e.g. retrieval medicine, hyperbaric medicine etc.), or

(b) **Category ‘T’ placement** – one which has been approved by the COE/approved delegate as a ‘one-off’ training placement for a specific individual trainee who has applied for and obtained prior approval to undertake the placement.

**B2.4.4.2** A special skills placement may include an emergency medicine or emergency care component, but only if the placement is not accredited for specialist emergency medicine training in Australia or New Zealand.

**Note:** See also Regulation B2.4.3 (emergency medicine placements).

**B2.4.4.4** Trainees planning to undertake any placement which:
- is not an accredited emergency medicine specialist placement; or
- is not an accredited specialist non-ED placement; or
- is not an accredited Category ‘A’ special skills placement

must obtain prior written approval from the COE/approved delegate before commencing the placement as a Category ‘T’ placement.

**B2.4.4.5** Where a special skills placement is approved by the COE/approved delegate, any training undertaken in the placement prior to the date on which written approval is granted will not be certified or retrospectively approved. Pursuant to Regulation B2.4.2, where this results in the placement no longer meeting minimum duration requirements, the entire period will not be certified, regardless of any other aspect of the trainee’s performance during that period.

**B2.4.5** **Specialist Non-ED Placements**

**B2.4.5.1** Subject to meeting all other ACEM Regulations, a placement undertaken in a non-ED sub/specialty will only be certified as a specialist non-ED training if:

(a) it was undertaken in one of the sub/specialties specified in Appendix A; and

(b) the training site at which it was undertaken was accredited by the relevant specialist training authority for sub/specialist training in the relevant sub/specialty.

**B2.4.5.2** Training undertaken in a discipline for which there is no recognised specialist medical training provider in Australia or New Zealand will not be certified unless:

(a) The placement is accredited as a Category ‘A’ special skills placement; or

(b) Prior approval as a Category ‘T’ special skills placement has been obtained.

**B2.4.5.3** A placement undertaken at a site which is either not accredited for specialist training purposes or is accredited only for non-specialist training purposes will not be certified unless:

(a) The placement is accredited as a Category ‘A’ special skills placement, or

(b) Prior approval as a Category ‘T’ special skills placement has been obtained.

**B2.4.5.4** A placement at a site which is not accredited by the relevant approved training provider for the sub/specialty in question will not attract certification by virtue of it being a requirement of the training program of another authorised training provider.

**B2.4.5.5** A ‘general practice placement’ means a placement in a general practice clinic accredited by the RACGP, RNZCGP or ACRRM for specialist registrar training purposes in general practice. Approval of the COE/authorised delegate is required prior to undertaking a general practice placement.
B2.5 Supervision of Training

B2.5.1 General Provisions
B2.5.1.1 In emergency departments accredited by ACEM for specialist training, the supervisor must be the Director of Emergency Medicine Training (DEMT) appointed by the College for that site.
B2.5.1.2 Except as outlined elsewhere in these Regulations, in all other instances, the Supervisor of Training (‘supervisor’) must be an appropriately registered and qualified medical practitioner.

B2.5.2 Emergency Medicine Placements
B2.5.2.1 Trainees in emergency medicine placements must come under the direct supervision of the Director of Emergency Medicine Training (DEMT) at the relevant site.
B2.5.2.2 For the purposes of Regulation B2.5.2.1, the ‘relevant site’ of an emergency department within an ‘ED network’ is the one at which the trainee is working and not any other site within the network.
B2.5.2.3 For the purposes of Regulation B2.5.2.1, the ‘relevant site’ of an emergency department within a ‘linked ED’ is the one at which the trainee is working and not the ‘host ED’.

B2.5.3 Specialist Non-ED Placements
B2.5.3.1 Trainees in a non-ED specialist placement must come under the direct supervision of the supervisor formally appointed by the relevant College in accordance with Regulation B2.4.5.
B2.5.3.2 The COE/approved delegate may approve the designation of a FACEM as supervisor for ACEM trainees at a particular site where that FACEM also holds specialist qualifications in the relevant non-ED specialist discipline.

B2.5.4 Special Skills Placements
B2.5.4.1 Trainees in an accredited Category ‘A’ or an approved Category ‘T’ special skills placement must come under the direct supervision of the supervisor appointed by the COE/approved delegate for that special skills placement.
B2.5.4.2 If the supervisor of a trainee in an accredited Category ‘A’ or an approved Category ‘T’ special skills placement changes, the Trainee must inform the College and submit a request to the College for approval of their new supervisor. If a trainee fails to obtain the approval of the new supervisor, then the training time and all associated assessments completed in the course of the placement will not be certified.
B2.5.4.3 The COE/approved delegate may approve a supervisor who is a registered specialist in a sub/specialty other than Emergency Medicine.
B2.5.4.4 The COE/approved delegate may, as its discretion and in addition to the required on-site supervisor, require a trainee undertaking an accredited or approved special skills placement overseas to have an approved FACEM to support them in their overseas placement.

B2.5.5 Overseas Placements
B2.5.5.1 Trainees undertaking an approved overseas placement must come under the direct supervision of the supervisor who, in the application for prior approval of the nominated overseas placement, was approved by the COE/approved delegate and agreed to act as supervisor for the trainee

B2.5.6 Trainee Obligations in relation to Placements
B2.5.6.1 Trainees must notify the College and the placement DEMT/supervisor of placement details or any other changes to their placement arrangements using the mechanism/s specified by the College for this purpose (refer to Regulation B2.5.7 below).
B2.5.6.2 Trainees must notify the College and the placement DEMT/supervisor of placement details prior to or on the date of commencement of each placement or the date of effect of any changes to their placement arrangements.

B2.5.6.3 Trainees who fail to notify the College and the placement DEMT/supervisor of placement details or submit an application to interrupt training, and who have been advised in writing by the College on three (3) separate occasions of the need to enter a valid placement, shall be placed on a three (3) month Interruption to Training, with the placement not certified pursuant to Regulation B2.5.7.1.

B2.5.6.4 Trainees must ensure that placement details are accurate and current at all times, including at the time-check dates specified by the College.

Note: See the ACEM website for a list of the time-check dates for the current year. See Regulation B2.5.7 (circumstances leading to non-certification of a placement).

B2.5.7 Circumstances Leading to Non-certification of a Placement

B2.5.7.1 Where a trainee has failed to appropriately record placement details within the specified timeframe, the placement will not be certified and a three-month Interruption to Training will be applied in accordance with Regulation B2.5.6.3.

B2.5.7.2 Where a trainee has failed to fully participate in, or adhere to, the requirements of the assessment process in a timely manner, non-certification of the placement may result.

B2.5.7.3 If a trainee is assessed as not satisfactorily completing a placement, and is required to enter into a period of remediation, then certification of the placement will not occur until such time as the remediation period is successfully completed.

B2.6 Progression in Training

B2.6.1 General Provisions

B2.6.1.1 All trainees shall have their progress through the FACEM Training Program reviewed at regular intervals by the applicable regional Workplace-based Assessment (WBA) Panel and, if required, the Central WBA Panel.

B2.6.1.2 These progress reviews will be conducted having regard to all relevant forms of assessment evidence specified by the College for this purpose and in accordance with the Policy on Progression and Remediation in Training.

B2.6.1.3 WBA Panel progress reviews are conducted at the completion of the following Progression Points:

(a) 12 FTE months of Provisional Training;
(b) 12 FTE months of Advanced Training Early Phase;
(c) 18 FTE months of Advanced Training Late Phase;
(d) six (6) FTE months of Critical Care training;
(e) six (6) FTE months of Advanced Non-ED training;
(f) six (6) FTE months of Discretionary training;
(g) where applicable, each period of remediation time;
(h) where applicable, each six (6) FTE month period in Maintenance;
(i) where applicable, upon completion of all outstanding requirements of Maintenance prior to election to Fellowship.

B2.6.1.4 Possible outcomes of a progress review are that the trainee is:

(a) Progress
The placement and assessment outcomes under review are assessed to meet the expected standard.

(b) Not Progress

The placement or assessment outcomes under review are assessed not to meet the required standard. In such circumstances, the trainee will be directed to undertake a period of remediation.

B2.6.1.5 Where a trainee fails to complete all training and assessment requirements of specified phases of training, having been assessed to be at the standard required for that phase of training, they will be placed in Maintenance pursuant to Regulation B2.6.2 below.

B2.6.1.6 Where a trainee fails to satisfactorily complete a placement or the requirements of Maintenance, they will be required to undertake ‘remediation’ pursuant to Regulation B2.6.3 below.

B2.6.2 Maintenance

B2.6.2.1 Maintenance applies to:
- Provisional trainees who have satisfactorily completed the required 12 FTE months of Provisional Training
- Advanced trainees who have satisfactorily completed the required 30 FTE months of ‘core’ emergency medicine training.

B2.6.2.2 A trainee in Maintenance will be reviewed by the COE/approved delegate at six (6) monthly intervals to determine whether they have maintained the standard required by the College. These reviews constitute progression points and a trainee may be placed into remediation for failure to maintain the required standard.

B2.6.2.3 Trainees who, within six (6) months of the date of their progression into Maintenance, complete the remaining phase requirements do not require re-assessment before they may be progressed to the next phase of training.

B2.6.3 Remediation Requirements

B2.6.3.1 All periods of remediation must meet the same suitability requirements for certification that a standard training term of the same type would require.

B2.6.3.2 All periods of remediation must be undertaken in Australia or New Zealand. Remediation may not be undertaken in an overseas placement, even if the period that gave rise to the need for remediation was undertaken overseas.

B2.6.3.3 Subject to Regulation B2.6.3.8, a trainee may undertake a maximum of two (2) periods of remediation in any one or more of the following areas:
- Provisional Training
- Advanced Training – Early Phase
- Advanced Training – Late Phase
- Critical Care
- Non-ED training
- Discretionary training

B2.6.3.4 Trainees required to undertake remediation must:
- Undertake that period of remediation in an uninterrupted block of at least three (3) FTE months or six (6) FTE months duration, as directed by the COE/approved delegate
- Complete a learning needs analysis (LNA) (see Regulation B3.7)
(c) Satisfy any other requirement/s specified by the COE/approved delegate in accordance with the Policy on Progression in Training and Remediation.

The requirements referred to in paragraph (c) are in addition to, not in substitution for, the standard training and assessment requirements for placements of the relevant type. Both standard and additional requirements must be satisfied.

B2.6.3.5 For the purposes of core training requirements, the following training requirements cannot be satisfied during a period of remediation:

- EM-WBAs completed above the required minimum for the remediation period
- Core DOPS
- the paediatric requirement (whether by way of logged paediatric cases or a paediatric ED rotation)
- ED training time completed at a required type of training site.

B2.6.3.6 Following completion of a first period of remediation in any area of training, the trainee shall be reviewed by the COE/approved delegate.

B2.6.3.7 If the trainee is assessed not to have met the required standard in respect of those placement and assessment outcomes, they must undergo a second period of remediation.

B2.6.3.8 Following completion of a second period of remediation, the trainee shall be reviewed by the COE/approved delegate.

B2.6.3.9 If the trainee is assessed as not having met the required standard in respect of those placement and assessment outcomes, they shall be removed from the training program for unsatisfactory progress pursuant to Regulation B2.7.

B2.7 Removal from the Training Program

B2.7.1 Grounds for Removal from the Training Program

B2.7.1.1 Unless the Specialist Training and Assessment Committee (STAC) accepts that there are exceptional circumstances that warrant a granting of special consideration, a trainee will be referred to the Pathway to Fellowship Review Committee (PFRC) for consideration for removal from the Training Program if they:

(a) fail to achieve progression into Advanced Training within the timeframe specified in these Regulations;
(b) fail to achieve election to Fellowship within the timeframe specified in these Regulations;
(c) fail to maintain medical registration in Australia or New Zealand in accordance with Regulation B1.3;
(d) fail to comply with any Regulation(s) or Policy(ies) relating to the FACEM Training Program, having been advised in writing by the College on three (3) separate occasions of the requirement, any associated deadline(s) and that failure to comply will result in consideration for removal from the training program;
(e) fail to successfully complete a second period of remediation in the same area of training and in the same stage of training as the first period of remediation;
(f) the Primary Written Examination, Primary Viva or Fellowship Written Examination are not passed within the maximum three (3) attempts or the Fellowship Clinical Examination is not passed within the maximum four (4) attempts;
(g) are placed on a second interruption to training for non-compliance, having failed to notify the College of training placement details in accordance with Regulation B2.5.6;
(h) engage in conduct contrary or derogatory to or inconsistent with the principles, ethics, dignity, standards or purposes of the College in which case the matter shall be dealt with by the Board.
B2.7.2 Consideration of Removal from the Training Program

B2.7.2.1 Consideration of removal from the Training Program pursuant to Regulation B2.7.1.1(a)-(g) shall be undertaken in accordance with the provisions of this Regulation and any applicable College Policy/ies and Regulations.

B2.7.2.2 Consideration of removal from the Training Program pursuant to Regulation B2.7.1.1(h) shall be undertaken in accordance with the College Complaints Policy, save that the recommendation/s on the removal or otherwise of the trainee from the training program shall be made to the Council of Education, rather than the Board.

B2.7.2.3 At least 28 days prior to a meeting of STAC at which a trainee is to be considered for removal from the Training Program pursuant to Regulation B2.7.2.1, the trainee will be informed of this in writing by the Chair of the Committee and advised:

- of the grounds on which they may be removed from the Training Program;
- that unless STAC accepts that there are exceptional circumstances that warrant a granting of special consideration, and that in the entirety of the circumstances, a granting of relief is warranted, they will be referred to the PFRC for consideration for removal from the Training Program in accordance with Regulation A5;
- the date on which their removal from the Training Program is to be considered;
- that they are entitled to provide a written submission for consideration by STAC of any exceptional circumstances (as described in the College’s Exceptional Circumstances and Special Consideration Policy), but that they are not entitled to attend in person or through a representative;
- that any information they wish to have considered by STAC should be provided in writing to the College not less than 14 days prior to the meeting at which their removal from the Training Program is to be considered.

B2.7.2.4 The Specialist Training and Assessment Committee may:

(a) Resolve that, on the basis of the materials presented, the trainee be permitted to remain in the Training Program and the revised requirement/s that applies.

(b) Recommend to PFRC that, on the basis of the materials presented, the trainee be removed from the Training Program.

B2.8 Suspension from Training

B2.8.1 Unless the Board or Council of Education, in their absolute discretion, resolve otherwise, a trainee whose medical registration is suspended for any reason, or has conditions applied that restricts their ability to undertake fully the requirements of the FACEM Training Program, shall automatically be suspended from the FACEM Training Program, and shall not:

(a) be entitled to undertake any assessment associated with the FACEM Training Program;

(b) be entitled to accrue or be credited with any training undertaken during the period of suspension from the FACEM Training Program;

(c) hold themselves to be a trainee of the FACEM Training Program; or
(d) be entitled to any benefits or entitlements under the FACEM Training Program.

B2.8.2 The Board or Council of Education may by resolution and upon an application by the trainee, lift a trainee’s suspension from the FACEM Training Program with or without the payment of a further fee and subject to any conditions imposed by the Board or Council as applicable.

B2.8.3 The length of any suspension pursuant to this regulation shall not affect the timeframes for completion of the FACEM Training Program as outlined elsewhere in these regulations and that period of suspension shall not, unless the Board or Council of Education resolves otherwise, be considered as an interruption to training.

B2.8.4 Any trainee who is suspended from the FACEM Training Program pursuant to this regulation may, during the period of their suspension, also be subject to consideration by the Complaints Committee or other College body pursuant to College regulations and policies.
B3 ASSESSMENT OF SPECIALIST TRAINING

B3.1 General Provisions

B3.1.1 Except as provided for elsewhere in these Regulations, all trainees, irrespective of their status in the training program and including trainees who are time complete, are required to complete all assessment requirements of the College by the applicable due date, for every placement undertaken, whether or not that placement is certified towards completion of training requirements.

B3.1.2 Trainees are required to satisfy Regulation B3.1.1 at all relevant times while they remain a trainee of the College and until such time as:
- they resign or are removed from the training program; or
- they are elected to Fellowship.

B3.1.3 Trainees who fail to satisfy Regulation B3.1.1 may be considered for removal from the FACEM Training Program pursuant to Regulation B2.7.

B3.1.4 Trainees undertaking a formally recognised period of return to work pursuant to College policy are recognised as being on an interruption to training and are not required to complete College assessment requirements for that period.

B3.2 Types of Assessment

B3.2.1 Satisfactory completion of the FACEM Training Program requires completion of all prescribed assessments including:
- Workplace-based Assessments:
  - Structured References
  - In-Training Assessments
  - Mini-Clinical Evaluation Exercises
  - Direct Observation of Procedural Skills
  - Shift Reports
  - Case-based Discussions
  - Learning Needs Analyses
  - Logbooks
- Research Requirement
- Primary examinations
- Fellowship examinations

B3.2.2 An assessment is not considered to be ‘completed’ until all parts of the assessment process have been properly fulfilled, the assessment has been submitted to the College by the relevant due date and the COE/approved delegate has advised the trainee that the requirements of the assessment have been satisfactorily met.

B3.3 Standard Requirements

B3.3.1 The forms of assessment detailed in this Regulation apply generally to all trainees according to their stage of training. Trainees undergoing remediation may also be subject to such further assessment requirements as the COE/approved delegate may require pursuant to the Policy on Progression in Training and Remediation.
B3.3.2 The standard assessment requirements for Provisional and Advanced Training purposes are specified in the following tabulation, where:

- ‘Y’ signifies a mandatory assessment
- ‘[Y]’ signifies a form of assessment which may be mandatory for a particular placement, if so directed by the COE/approved delegate.

### Provisional trainees

<table>
<thead>
<tr>
<th>Undertaken in ...</th>
<th>Placement</th>
<th>SRs</th>
<th>ITA</th>
<th>Mini-CEX</th>
<th>DOPS</th>
<th>Shift Report</th>
<th>CBDs</th>
<th>LNAs</th>
<th>Logbook</th>
</tr>
</thead>
<tbody>
<tr>
<td>AUS/NZ</td>
<td>Emergency Medicine</td>
<td>Y</td>
<td>Y</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>[Y]</td>
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<td></td>
<td></td>
<td>[Y]</td>
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</tr>
<tr>
<td></td>
<td>Special Skills – ‘A’ or ‘T’</td>
<td>Y</td>
<td></td>
<td></td>
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<td></td>
<td>[Y]</td>
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<tr>
<td>Overseas</td>
<td>EM (discretionary)</td>
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<td></td>
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<tr>
<td></td>
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<td></td>
<td>Special Skills – ‘A’ or ‘T’</td>
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### Advanced trainees

<table>
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<tr>
<th>Undertaken in ...</th>
<th>Placement</th>
<th>SRs</th>
<th>ITA</th>
<th>Mini-CEX</th>
<th>DOPS</th>
<th>Shift Report</th>
<th>CBDs</th>
<th>LNAs</th>
<th>Logbook</th>
</tr>
</thead>
<tbody>
<tr>
<td>AUS/NZ</td>
<td>Emergency Medicine</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>[Y]</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Non-ED (specialist)</td>
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<td></td>
<td></td>
<td>[Y]</td>
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<tr>
<td></td>
<td>Special Skills – ‘A’ or ‘T’</td>
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<tr>
<td>Overseas</td>
<td>EM (discretionary)</td>
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<td></td>
</tr>
<tr>
<td></td>
<td>Non-ED (specialist)</td>
<td>Y</td>
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<tr>
<td></td>
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</table>

B3.3.3 All assessments are to be made relative to the individual trainee’s stage of training as set out in the ACEM Curriculum Framework.

B3.4 Structured References

B3.4.1 General Provisions

B3.4.1.1 Each provisional trainee is required to obtain three (3) individual structured references (a ‘set of structured references’) for defined training periods. A set of structured references is required for each of the following periods of emergency medicine training in an accredited emergency department:

(a) The six (6) FTE month period of ‘core’ emergency medicine training undertaken as part of minimum Provisional Training time at a single accredited emergency department within a 12 month calendar period.

(b) The emergency medicine training requirement undertaken within each 12 month FTE Maintenance period (where applicable).

(c) As may be required by the COE/approved delegate in respect of any required period of remediation in emergency medicine (where applicable).
B3.4.1.2 Each set of structured references must meet the following requirements:

(a) One (1) reference must be provided by each of three (3) different FACEM referees, one (1) of whom must be the trainee’s DEMT, and all of whom must have directly supervised the trainee’s training during the whole of the period to which the reference relates.

(b) Each training placement to which the references relate must have a minimum duration of two (2) consecutive months FTE and, cumulatively, a total of six (6) FTE months completed at that accredited emergency department in the 12 calendar month period.

B3.4.1.3 Referees provide the structured references on request from the trainee. As far as possible, structured references are provided by the referee to ACEM on a private and confidential basis on the understanding that they are not shared with the relevant trainee. Where structured references are considered to have contributed significantly to a decision that results in a delay in progression of a trainee, a deidentified summary of areas of concern contained in the structured references will be provided by the College to inform the trainee of the reason(s) behind the decision.

B3.4.2 Submission of Structured References

B3.4.2.1 The trainee shall request the DEMT and other nominated referees (via the online trainee portal) to provide a structured reference on his/her behalf in sufficient time to allow the referee to submit the structured reference within the timeframe specified in Regulation B3.4.2.2.

B3.4.2.2 Structured references must be submitted online to the College by the DEMT/supervisor within the same period by which ITAs may be submitted.

B3.4.2.3 Structured references may be requested by the trainee and submitted by referees at the end of the completion of the first or no later than the second period of six (6) FTE months of training in core ED.

B3.4.3 Period of Validity

B3.4.3.1 If satisfactory, structured references will remain valid for a period of 12 months from the end-date of the training period to which they relate. At the end of that 12-month period, they shall become invalid through expiration of time and a further set of structured references will be required.

B3.4.3.2 Where the period of validity of the first set of satisfactory structured references expires at the end of the 12-month period, the subsequent set of structured references must be obtained during the next three (3) month FTE period of certified ED training.

B3.5 In-Training Assessments

B3.5.1 An ‘In-Training Assessment’ (ITA) is a point-in-time assessment completed by DEMTs or supervisors of training (as appropriate to the placement) at set dates during the training year.

B3.5.2 An ITA is required for every placement undertaken by a trainee, irrespective of:
- the nature of the placement (i.e. emergency medicine, non-ED, special skills)
- the country in which the placement was undertaken
- the stage of training the trainee is at (e.g. time-complete trainees)
- the trainee’s full time equivalent (FTE) status, or
- whether or not the placement may accrue certifiable training time.

B3.5.3 ITAs must be submitted to the College by the DEMT/supervisor within the four-week period commencing two (2) weeks prior to, and concluding two (2) weeks after, the relevant ITA date.

B3.5.4 Where an ITA has not been submitted within the prescribed timeframe, the ITA period will be not be certified.
B3.6  Emergency Medicine Workplace-Based Assessments (EM-WBAs)

B3.6.1  General Provisions

B3.6.1.1 The following forms of assessment evidence are required for all Advanced trainees undertaking an emergency medicine placement in Australia or New Zealand:

- Case-based Discussions
- Mini-Clinical Evaluation Exercises
- Direct Observation of Procedural Skills
- Shift Reports

B3.6.1.2 All EM-WBAs must satisfy the following minimum completion and complexity requirements:

(a) By the completion of Early Phase Advanced Training:

(i.e. the first 12 FTE months of core emergency medicine training)

<table>
<thead>
<tr>
<th>Type of EM-WBA</th>
<th>Minimum Number Required</th>
<th>Minimum Complexity Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>CbD</td>
<td>Four (4)</td>
<td>2 x medium complexity §</td>
</tr>
<tr>
<td>DOPS</td>
<td>Four (4)</td>
<td></td>
</tr>
<tr>
<td>Mini-CEX</td>
<td>Four (4)</td>
<td>2 x medium complexity $</td>
</tr>
</tbody>
</table>

(b) By the completion of Late Phase Advanced Training:

(i.e. the completion of 18 FTE months Late Phase core emergency medicine training)

<table>
<thead>
<tr>
<th>Type of EM-WBA</th>
<th>Minimum Number Required</th>
<th>Minimum Complexity Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>CbD</td>
<td>Six (6)</td>
<td>3 x high complexity §</td>
</tr>
<tr>
<td>DOPS</td>
<td>Six (6)</td>
<td></td>
</tr>
<tr>
<td>Mini-CEX</td>
<td>Three (3)</td>
<td>2 x high complexity §</td>
</tr>
<tr>
<td>Shift Report</td>
<td>Three (3)</td>
<td>The second and third must be ‘Shift in Charge’ shift reports</td>
</tr>
</tbody>
</table>

(c) Maintenance Pathway

(i.e. per three FTE months of Late Phase Maintenance training, undertaken in an ED placement)

<table>
<thead>
<tr>
<th>Type of EM-WBA</th>
<th>Minimum Number Required</th>
<th>Minimum Complexity Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>CbD</td>
<td>One (1)</td>
<td>1 x high complexity §</td>
</tr>
<tr>
<td>DOPS</td>
<td>Zero (0)</td>
<td></td>
</tr>
<tr>
<td>Mini-CEX</td>
<td>One (1)</td>
<td>1 x high complexity §</td>
</tr>
<tr>
<td>Shift Report</td>
<td>One (1)</td>
<td>Must be a ‘Shift in Charge’ shift report</td>
</tr>
</tbody>
</table>

EM-WBAs are not required if Maintenance Pathway training is undertaken in a Non-Emergency Placement(s).
(d) Discretionary Time in an Emergency Medicine Placement
(i.e. per three FTE months of Discretionary Training undertaken in an ED placement)

<table>
<thead>
<tr>
<th>Type of EM-WBA</th>
<th>Minimum Number Required</th>
<th>Minimum Complexity Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>CbD</td>
<td>One (1)</td>
<td>1 x high complexity</td>
</tr>
<tr>
<td>DOPS</td>
<td>Zero (0)</td>
<td>-</td>
</tr>
<tr>
<td>Mini-CEX</td>
<td>One (1)</td>
<td>1 x high complexity</td>
</tr>
<tr>
<td>Shift Report</td>
<td>One (1)</td>
<td>Must be a ‘Shift in Charge’ shift report</td>
</tr>
</tbody>
</table>

(e) EM-WBAs are not required if Discretionary time is undertaken in a Non-Emergency Placement(s).

§ Refer Appendix B (extracted from the ACEM Curriculum Framework) for information on levels of complexity

‡ Refer Core DOPS Procedure List as set out in the ACEM Curriculum Framework

B3.6.1.3 The minimum number of EM-WBAs completed in either Early or Late Phase Advanced Training must be completed by at least two (2) different assessors.

B3.6.1.4 Individual EM-WBAs (whatever the type) must be submitted by the FACEM or FRACP assessor within either seven (7) days of their completion, or within seven (7) days of the end-date of the period of time in respect of which they were required, whichever is earlier.

B3.6.2 Case-based Discussions (CbDs)

B3.6.2.1 For cases to be eligible for assessment by way of case-based discussion:
  - the trainee must have played a major role in the management of the patient, and
  - the case must have been attended by the trainee within the four-week period immediately preceding the date on which the assessment is conducted carried out.

B3.6.3 Mini-Clinical Evaluation Exercise (Mini-CEX)

B3.6.3.1 The Mini-CEX assessment is undertaken by an ACEM assessor who directly observes the trainee whilst performing a focused clinical task during a de novo patient encounter.

B3.6.4 Direct Observation of Procedural Skills (DOPS)

B3.6.4.1 The DOPS assessment is undertaken by an ACEM assessor who observes the trainee performing a specific clinical procedure and then rates the trainee’s performance during that procedure.

B3.6.4.2 At the completion of 18 FTE months of Late-Phase Advanced Training, trainees must have completed at least five (5) single procedures selected from the Core DOPS Procedure List. These may be completed in either or both of Early-Phase or Late-Phase Advanced Training, however may not be completed during a remediation period. The remaining DOPS can be completed on any procedure as listed in the ACEM Curriculum Framework for the applicable phase of Advanced Training.

B3.6.5 Shift Reports

B3.6.5.1 A Shift Report assessment is undertaken by an ACEM assessor who observes the trainee at multiple times during the course of a clinical shift. The assessor may assist the trainee throughout the shift and intervene as necessary.

B3.6.5.2 For the first six (6) months of Late-Phase ED Advanced Training, the trainee is expected to be at Advanced Training Stage 2. As such, the shift to which the Shift Report relates is not expected to be one where the trainee was ‘in charge’ of the floor, in the context of the site at which it was undertaken.
B3.6.5.3 The learning outcomes assessed in Shift Reports at 12 and 18 months of Late-Phase Advanced Training are those expected upon completion of Advanced Training Stage 3 and, thus, the shifts must be ones where the trainee was ‘in charge’ of the floor, in the context of the site at which it was undertaken.

B3.7 Learning Needs Analysis (LNA)

B3.7.1 Completion of an LNA is:
- Mandatory for all trainees required to undergo any period of remediation
- Mandatory for all trainees undertaking special skills term/s
- Optional for all other trainees, albeit highly recommended for advanced trainees.

B3.7.2 The LNA process consists of all of the following elements:
(a) at the commencement of the placement – the recording of:
   - the goals which have been set for the placement, and
   - how it is planned to achieve those goals
(b) at mid-placement (aligned to time-check dates) – a review of progress towards meeting the placement goals and, if required, the realigning of those goals
(c) at the end of the placement – a review of the overall outcome of the process, including evidence of how and in what manner the specified goals or objectives of the placement were met.

B3.7.3 All reviews are to be conducted between the DEMT/supervisor and the trainee concerned and fully recorded in the online trainee portal.

B3.7.4 LNAs must be submitted to the College by the DEMT/supervisor within the three-week period commencing two (2) weeks prior to, and concluding one (1) week after, the relevant ITA date.

B3.8 Logbooks

B3.8.1 The COE/approved delegate may require trainees to complete a logbook of activities in respect of nominated placements (whether special skills placements or otherwise) or particular training requirements.

B3.8.2 The paediatric logbook must be submitted via the online trainee portal within seven (7) days of completion of the last placement during which paediatric patient encounters were recorded.

B3.8.3 In all other circumstances, logbooks must be received by the College within seven (7) days of completion of the placement for which the logbook was required.
B4 RESEARCH REQUIREMENT

B4.1 General Provisions

B4.1.1 Trainees must satisfy the research requirement (an independent learning requirement) by successful completion of one (1) of the following:
- A research project, or
- Approved coursework, or
- Thesis.

B4.1.2 The Research Requirement may be:
(a) Completed during either Provisional or Advanced Training, or
(b) The subject of credit transfer in accordance with the ACEM Policy on Recognition of Prior Learning and Credit Transfer.

B4.2 Research Project

B4.2.1 A research project may be completed by:
(a) Publishing a paper in a peer-reviewed journal approved by the COE/approved delegate for the purpose of this requirement and referenced in a science citation index.
(b) Presenting a paper by either oral or poster presentation at a scientific meeting approved by the COE/approved delegate for the purpose of this requirement.

B4.2.2 All research projects must meet the standards specified in the Policy on Trainee Research and shall be assessed in accordance with the provisions of that policy.

B4.2.3 Adjudication of Research Projects

B4.2.3.1 All applications for assessment of a research project, whether by way of publication or presentation, must be made on the prescribed form and in accordance with the requirements of the Policy on Trainee Research.

B4.2.3.2 All research projects, whether completed by way of publication or presentation of a paper, shall be assessed by the COE/approved delegate in accordance with the requirements of the Policy on Trainee Research.

B4.2.4 Paper Presentations

B4.2.4.1 The following scientific meetings have been assessed by the COE/approved delegate as having perpetual approval for presentation of a research project for assessment:
- the ACEM Annual Scientific Meeting
- the ACEM Winter Symposium.

B4.3 Approved Coursework

B4.3.1 Trainees undertaking the research requirement by coursework must complete a minimum of two (2) of each of the following postgraduate subjects from the same course at a university in Australia or New Zealand:
- Research methodology
- Clinical epidemiology
- Biostatistics
- Evidence-based medicine
B4.3.2 Each subject must be a minimum of one (1) semester in duration and selected either from those approved by the COE/approved delegate and published on the College website or, if not already approved by the College for the purposes of Regulation B4.3.1, prospective approval obtained prior to commencing the subject/course.

B4.3.3 Two (2) different units in the same subject, from those listed in Regulation B4.3.1, are not regarded as being two subjects; two different subjects are required.

B4.4 Theses

B4.4.1 A thesis completed as part of a university qualification by research will be considered on its merits, including consideration of the discipline in which the thesis was conducted. The following are specifically excluded:

- a thesis which formed part of a university qualification by coursework; and
- a thesis which formed part of the trainee’s basic medical degree.
B5 EXAMINATIONS

B5.1 General Provisions

B5.1.1 Except where otherwise stated, the provisions of this Regulation B5 apply equally to all College examinations (i.e. Primary Examinations and Fellowship Examinations).

B5.1.2 The presence of an observer (whether a FACEM or otherwise) at any ACEM examination requires prior approval of the COE/approved delegate.

B5.1.3 Attempts

B5.1.3.1 From 1 January 2018, the maximum number of attempts at the ACEM Primary and Fellowship written examinations and the Primary Examination (Viva) will be three (3).

B5.1.3.2 From 1 January 2018, the maximum number of attempts at the ACEM Fellowship Clinical Examination (OSCE) will be four (4).

B5.1.3.3 For those Candidates who have, prior to 1 January 2018, been unsuccessful in a previous attempt(s) at a particular examination, any such attempt(s) will not be considered for the purposes of Regulation B5.1.3.1 and B5.1.3.2.

B5.1.4 Eligibility

B5.1.4.1 All candidates must be able to demonstrate, on each occasion they attempt an examination, that they meet all eligibility requirements (both standard and examination-specific) by the date specified by the College for the relevant examination.

B5.1.4.2 The candidate must:

(a) Be a registered trainee of the College; and

(b) Be in good standing with the College – that is, they must have no financial debts to the College and have fulfilled all training and assessment requirements applicable to their stage of training; and

(c) Have met all specific eligibility requirements for the relevant examination as outlined below.

B5.1.4.3 A trainee who is being considered through College processes for dismissal from the FACEM Training Program, having failed to complete the requirements of Provisional Training or Advanced Training and/or the FACEM Training Program overall within the timeframe prescribed in these regulations, is not eligible to apply for or to sit any examination(s) to be held after the relevant completion date notwithstanding that a decision on their status in the training program is pending.

B5.1.4.4 A trainee who has been referred to the Pathway to Fellowship Review Committee for consideration for dismissal from the FACEM Training Program pursuant to Regulations B5.1.3 and B2.7, is not eligible to apply for or to sit any examination while a decision of the Committee or the Council of Education is pending.

B5.1.4.5 A trainee who has been referred to the Pathway to Fellowship Review Committee for consideration for dismissal from the FACEM Training Program having exhausted the maximum number of periods of remediation permitted in these regulations, is not eligible to apply for or to sit any examination while a decision of the Committee or the Council of Education is pending.

B5.1.4.6 The eligibility of a candidate to attempt an examination may be revoked by the COE/approved delegate where the candidate no longer meets any of the standard or specific eligibility requirements prior to the examination being conducted.
B5.1.5 Applications

B5.1.5.1 Applications to attempt any examination must be made on the appropriate prescribed form and must be accompanied by:

(a) payment of the prescribed examination fee, and
(b) any other documentation specified on the application form.

B5.1.5.2 Candidates are required to submit a new application for each attempt they make at an examination.

B5.1.5.3 Applications must reach the College by close of business on the date specified on the application form for the relevant examination. If the closing date falls on a public holiday, applications must reach the College by close of business on the previous work day.

B5.1.6 Withdrawal

B5.1.6.1 Candidates withdrawing from any examination must notify the College in writing on the prescribed form. Verbal notification will not be accepted.

B5.1.6.2 To the extent permitted by the Refund Policy, examination fees may be refunded to candidates who withdraw from an examination. Any application for a refund of examination fees must be made in writing in accordance with the provisions of that policy.

B5.1.7 Exclusion from Examinations

B5.1.7.1 Candidates who arrives 30 minutes or more after the scheduled starting time of a written examination may be excluded from the examination.

B5.1.7.2 Candidates who arrives after the appointed assembly time for the Primary Examination (Viva) or the Fellowship Examination (Clinical) may be excluded from the examination.

B5.2 Primary Examination (Written)

B5.2.1 Eligibility

B5.2.1.1 For the purposes of Regulation B5.1.4.2(c), candidates for the Primary Examination (Written) must:

(a) Be in Provisional Training.

B5.2.2 Applications

B5.2.2.1 Applications to attempt the Primary Examination (Written) may be accepted from trainees conditionally enrolled in the FACEM Training Program pursuant to Regulation B1.2; however, all such candidates must have completed PGY2 and met the eligibility requirements of the relevant examination by the date on which the examination is held.

B5.3 Primary Examination (Viva)

B5.3.1 Eligibility

B5.3.1.1 For the purposes of Regulation B5.1.4.2(c), candidates for the Primary Examination (Viva) must:

(a) Be in Provisional Training; and
(b) Have passed the Primary Examination (Written).

B5.3.2 Applications

B5.3.2.1 Applications to attempt the Primary Examination (Viva) may be accepted from trainees conditionally enrolled in the FACEM Training Program pursuant to Regulation B1.2; however,
all such candidates must have completed PGY2 and met the eligibility requirements of the relevant examination by the date on which the examination is held.

B5.3.3 Availability of Places

B5.3.3.1 The College may limit the number of candidates accepted for the Primary Examination (Viva) on any occasion, acceptance being based on the following priority order:

(a) the time remaining for individual applicants to complete the requirements of Provisional Training; and

(b) the date and time on which applications are received by the College.

Notwithstanding the provision of this regulation, the College reserves the right to determine candidates for acceptance at examination. In doing so, the College may consider a range of factors in order to balance competing trainee needs. Such factors may include but are not limited to elapsed time in training and number of previous unsuccessful attempts. The College has complete discretion in determining these matters and, thus, candidates for examination, and the decision of the College shall be final and binding. The decision of the College in this regard shall not be reviewable or subject to appeal. Applications for examinations are made on this basis, and with implicit agreement to these terms.

B5.4 Fellowship Examination (Written)

B5.4.1 Eligibility

B5.4.1.1 For the purposes of Regulation B5.1.4.2(c), candidates for the Fellowship Examination (Written) must:

(a) Have satisfactorily completed and been credited with at least 12 FTE months ‘core’ emergency medicine Advanced Training net of any remediation time completed or in progress (i.e. completed ‘early phase’ Advanced Training requirements and have progressed to late phase Advanced Training):

• including assessment and review requirements, but

• excluding any required periods of remediation.

B5.4.2 Applications

B5.4.2.1 For candidates who are unsuccessful at the Fellowship Examination (Written), and where publication of results occurs after the closing date for applications for the next such examination, applications to sit that Fellowship Examination (Written) will be allowed for a period of up to 14 days from the date of publication of results.

B5.5 Fellowship Examination (Clinical)

B5.5.1 Eligibility

B5.5.1.1 For the purposes of Regulation B5.1.4.2(c), candidates for the Fellowship Examination (Clinical) must:

(a) Have completed the Fellowship Examination (Written);

(b) Have satisfactorily completed and been credited with at least 36 FTE months of the total required 48 FTE months of Advanced Training time (i.e. net of any remediation time completed or in progress):

• including assessment and review requirements, but

• excluding any required periods of remediation; and

(c) Have completed the research requirement.
B5.5.2 Applications

B5.5.2.1 For candidates who are unsuccessful at the Fellowship Examination (Clinical), and where publication of results occurs after the closing date for applications for the next such examination, applications to sit that Fellowship Examination (Clinical) will be allowed for a period of up to 14 days from the date of publication of results.

B5.5.3 Availability of Places

B5.5.3.1 The College may limit the number of candidates accepted for the Fellowship Examination (Clinical) on any occasion, acceptance being based on the following priority order:

(a) the time remaining for individual applicants to complete the requirements of Advanced Training; and

(b) the date and time on which applications are received by the College.

Notwithstanding the provision of this regulation, the College reserves the right to determine candidates for acceptance at examination. In doing so, the College may consider a range of factors in order to balance competing trainee needs. Such factors may include but are not limited to elapsed time in training and number of previous unsuccessful attempts. The College has complete discretion in determining these matters and, thus, candidates for examination, and the decision of the College shall be final and binding. The decision of the College in this regard shall not be reviewable or subject to appeal. Applications for examinations are made on this basis, and with implicit agreement to these terms.
B6 ELECTION TO FELLOWSHIP

B6.1 Eligibility

B6.1.1 To be eligible for election to Fellowship of the College, trainees must have satisfactorily completed the requirements of Regulation B1.6.1.

B6.1.2 The requirements of the FACEM Training Program are not considered to be complete until they have been reviewed, and are considered satisfactory, by the COE/approved delegate.

B6.2 Election to Fellowship

B6.2.1 Eligible trainees seeking election to Fellowship should submit to the College an application for election to Fellowship on the prescribed form, together with payment of the prescribed fee and any other documentation specified on that form and in these Regulations.

B6.2.2 The date of Fellowship shall be the date the Council of Education endorses the application for election to Fellowship.

B6.3 Required Declaration

B6.3.1 Eligible trainees seeking election to Fellowship must also submit a completed Declaration relating to matters that may affect an individual’s Fellowship pursuant to the relevant clauses of section 4 of the ACEM Constitution.

B6.3.2 Eligible trainees will not be considered for election to Fellowship until a completed Declaration has been returned to the College and reviewed.

B6.3.3 Where a completed Declaration indicates matters that may potentially have an effect on an individual’s Fellowship pursuant to the relevant clauses of section 4 of the Constitution, the matter will be referred in the first instance to the Censor-in-Chief and the Chief Executive Officer.

The Censor-in-Chief in consultation with the Chief Executive Officer will determine whether the matters are such that they be:
- dealt with under relevant provisions of Clause 4.2 or 4.3 of the Constitution as applicable; or
- referred under the Complaints Policy (COR166) to the Complaints Committee; or
- noted with no further action taken.

B6.3.4 A trainee will not be considered for election to Fellowship while matters declared are being considered under Regulation B6.3.2.
B7 JOINT TRAINING PROGRAMS

B7.1 General Provisions

B7.1.1 Except as provided for in this Regulation or as the Council of Education, at its discretion, otherwise permits, all ACEM regulations continue to apply to trainees formally participating in any approved joint training program between ACEM and another specialist training authority.

B7.1.2 The final determination of requirements for election to Fellowship of ACEM will be made by the ACEM Council of Education. Any request for reconsideration, review or appeal of decisions of the Council of Education shall be initiated and conducted in accordance with the ACEM Reconsideration, Review and Appeals Policy.

B7.1.3 The final determination of requirements for election to Fellowship of another specialist training authority will be made by that specialist training authority. Any request for reconsideration, review or appeal of decisions of that authority shall be initiated and conducted in accordance with the regulations and policies of that other specialist training authority.

B7.2 Intensive Care Medicine

B7.2.1 To enrol in the joint training program in emergency medicine and intensive care medicine (‘the ACEM/CICM Joint Training Program’), the medical practitioner must be concurrently registered as a specialist training program trainee of both ACEM and the College of Intensive Care Medicine (CICM).

B7.2.2 If a trainee discontinues participation in the ACEM/CICM Joint Training Program but continues training in emergency medicine only, Regulation B7 will cease to apply to that trainee, and all requirements of the FACEM Training Program must be satisfactorily completed in order for the trainee to become eligible for election to Fellowship of ACEM.

B7.2.3 If a trainee discontinues participation in the ACEM/CICM Joint Training Program but continues training in intensive care medicine, Regulation B7 and all ACEM policies and guidelines will cease to apply to that trainee. Formal notification of withdrawal from the ACEM/CICM Joint Training Program must be submitted in writing to ACEM using the applicable College form.

B7.2.4 Joint Training Requirements

B7.2.4.1 For the purposes of the ACEM training component of the ACEM/CICM Joint Training Program, ACEM Regulation B2.3.2.1(a) is varied as follows:

(a) 48 FTE months approved training comprising:

- 24 months of Advanced Training in emergency department(s) accredited by ACEM for emergency medicine training; and
- 24 months of non-ED training in posts approved by the Council of Education, comprising:
  - 12 FTE months intensive care medicine
  - 6 FTE months anaesthetics
  - 6 FTE months medicine.

B7.2.4.2 The non-ED training referred to in Regulation B7.2.4.1 may be retrospectively recognised if:

(a) CICM advanced training was completed prior to registration as an ACEM trainee; and
(b) the term(s) for which retrospective recognition is sought was formally accredited as CICM advanced training.

In all other circumstances, the non-ED training referred to in Regulation B7.2.4.1 will only be recognised following commencement of ACEM Advanced Training.
B7.2.4.3 The requirements of ACEM Regulation B6.1, Eligibility for Election to Fellowship, are varied as follows:

To be eligible for election to Fellowship of ACEM, trainees must have satisfactorily completed:

(a) all requirements of Regulation B1.6.1, with the requirements of Regulation B2.3.2.1 varied in accordance with Regulation B7.2.4.1; or

(b) all requirements of the ACEM and the CICM components of the ACEM/CICM Joint Training Program and the trainee is eligible for or has been elected, to Fellowship of CICM.

B7.3 Paediatric Emergency Medicine

B7.3.1 To enrol in the joint training program in paediatric emergency medicine ('the Paediatric Medicine Joint Training Program'), the medical practitioner must be registered as a specialist trainee with either ACEM or the Royal Australasian College of Physicians (RACP).

B7.3.2 Paediatric Medicine Joint Training Program trainees complete the requirements of either Regulation B7.3.5 or Regulation B7.3.7.

B7.3.3 If a trainee discontinues participation in the Paediatric Medicine Joint Training Program but continues training in emergency medicine only, then Regulation B7 will cease to apply to that trainee, and all requirements of the FACEM Training Program must be satisfactorily completed in order for the trainee to become eligible for election to Fellowship of ACEM. Formal notification of withdrawal from the Paediatric Medicine Joint Training Program must be submitted in writing to ACEM using the applicable College form.

B7.3.4 If a trainee discontinues participation in the Paediatric Medicine Joint Training Program but continues training in paediatric emergency medicine, Regulation B7 and all ACEM policies and guidelines will cease to apply to that trainee. Formal notification of withdrawal from the Paediatric Medicine Joint Training Program must be submitted in writing to ACEM using the applicable College form.

B7.3.5 Joint Training Requirements - ACEM Stream

B7.3.5.1 For the purposes of ACEM trainees undertaking the Paediatric Medicine Joint Training Program, ACEM Regulation B2.2.2.1(a) is varied as follows:

(a) 12 FTE months of Provisional Training in an ACEM-accredited mixed or adult emergency department(s);

B7.3.5.2 For the purposes of ACEM trainees undertaking the Paediatric Medicine Joint Training Program, ACEM Regulation B2.3.2.1(a) is varied as follows:

(a) 48 FTE months Advanced Training comprising:

• 18 FTE months in approved and accredited paediatric emergency department(s);
• 12 FTE months in approved and accredited adult emergency department(s)
• 12 FTE months approved non-ED paediatric medicine; and
• 6 FTE months of paediatric intensive care medicine.

B7.3.5.3 The requirements of ACEM Regulation B6.1, Eligibility for Election to Fellowship, are varied as follows:

(a) To be eligible for election to Fellowship of ACEM, trainees must have satisfactorily completed the requirements of Regulation B1.6.1.

B7.3.5.4 Paediatric Medicine Joint Training Program trainees who have satisfactorily completed the requirements for eligibility for election to Fellowship of ACEM must complete all remaining ACEM joint training requirements within seven (7) years of the date of election to Fellowship.

B7.3.5.5 To achieve dual Fellowship, ACEM trainees undertaking the Paediatric Medicine Joint Training Program must register with RACP and satisfactorily complete the following additional components:
• 12 FTE months approved paediatric medicine;
• FRACP Part 1 Written and Clinical Examinations;
• 6 FTE months mandatory training as specified by RACP; and
• any additional research required by RACP.

B7.3.6 Joint Training Requirements - RACP Stream

B7.3.6.1 RACP trainees undertaking the Paediatric Medicine Joint Training Program must satisfactorily complete:
(a) all training requirements prescribed in Regulation B7.3.5.2 above;
(b) 24 FTE months adult emergency medicine training in an ACEM-accredited emergency department(s).

B7.3.6.2 Of the 24 FTE months adult ACEM-accredited emergency medicine training required pursuant to Regulation B7.3.6.1(b):
• up to 12 FTE months may have been completed and accredited towards the FRACP program;
• at least 12 FTE months must be prospectively accredited by ACEM subsequent to registration as an ACEM Advanced Training trainee.

B7.3.6.3 To be eligible for election to Fellowship of ACEM, RACP trainees undertaking the Paediatric Medicine Joint Training Program must:
(a) have satisfactorily completed the training requirements prescribed in Regulation B7.3.6.1
(b) be eligible for or have been elected to Fellowship of RACP;
(c) have a letter of support from the Committee for Joint College Training in Paediatric Emergency Medicine confirming that all paediatric and RACP requirements have been successfully completed; and
(d) have paid all applicable fees as from time to time prescribed by ACEM.
## APPENDIX ‘A’ – SPECIALIST NON-ED PLACEMENTS

<table>
<thead>
<tr>
<th>Sub/Specialty</th>
<th>Maximum allowable training</th>
<th>Certifiable as …</th>
<th>If the training site is accredited for specialist training in the nominated sub/specialty by …</th>
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<tbody>
<tr>
<td>Anaesthesia</td>
<td>12 months</td>
<td>Anaesthesia</td>
<td>ANZCA</td>
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<tr>
<td>Intensive Care Medicine</td>
<td>12 months</td>
<td>Intensive Care Medicine</td>
<td>CICM</td>
</tr>
<tr>
<td>General Practice</td>
<td>6 months</td>
<td>General Practice</td>
<td>ACRRM, RACGP or RNZCGP</td>
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<tr>
<td>Medicine</td>
<td>12 months</td>
<td>General Medicine</td>
<td>RACP (Adult) or RACP (P&amp;CH)</td>
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<td>6 months</td>
<td>any other specialty field recognised by RACP</td>
<td>RACP</td>
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<td>• Cardiology</td>
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<td>• Clinical Pharmacology</td>
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<td>• Gastroenterology</td>
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<td>• Infectious Diseases</td>
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<td>• Neonatal/Perinatal Medicine</td>
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<td>• Nephrology</td>
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<td>• Neurology</td>
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<tr>
<td></td>
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<td>• Public Health Medicine</td>
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<tr>
<td>Pain Medicine</td>
<td>6 months</td>
<td>Pain Medicine</td>
<td>ANZCA</td>
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<tr>
<td>Surgery</td>
<td>12 months</td>
<td>General Surgery (adult or paediatric)</td>
<td>RACS</td>
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<td></td>
<td>6 months</td>
<td>any other specialty field recognised by RACS</td>
<td>RACS</td>
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<td>• Orthopaedic Surgery</td>
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<td>• Neurosurgery</td>
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<td>• Otolaryngology</td>
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<td>• Vascular Surgery</td>
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<td>Obstetrics &amp; Gynaecology</td>
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<td>RANZCP</td>
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<td>Radiology</td>
<td>6 months</td>
<td>General Radiology</td>
<td>RANZCR</td>
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</tbody>
</table>

**Legend:**
- ACRRM: Australian College of Rural and Remote Medicine
- ANZCA: Australian & New Zealand College of Anaesthetists
- CICM: College of Intensive Care Medicine of Australia & New Zealand
- RACGP: Royal Australian College of General Practitioners
- RACP: Royal Australasian College of Physicians
- RACP (P&CH): Royal Australasian College of Physicians (Division of Paediatrics & Child Health)
- RACS: Royal Australasian College of Surgeons
- RANZCO: Royal Australian & New Zealand College of Ophthalmologists
- RANZCOG: Royal Australian & New Zealand College of Obstetricians and Gynaecologists
- RANZCP: Royal Australian & New Zealand College of Psychiatrists
- RANZCR: Royal Australian & New Zealand College of Radiologists
- RNZCGP: Royal New Zealand College of General Practitioners
APPENDIX ‘B’ – LEVELS OF COMPLEXITY

The levels of complexity applicable to specified EM-WBAs are:

(a) **Low complexity** – includes those best described as:
- a patient with a single-system presentation, with minimal complications (medical and/or social) and responsive to first line treatment
- a patient with a self-evident diagnosis where management is straightforward
- a stable patient with a common presentation or a clear diagnosis

(b) **Medium complexity** – includes those best described as:
- a patient with a multi-system problem and minimal complications (medical and/or social)
- a patient with a single-system problem and multiple/significant complications (medical and/or social) or who does not respond to first line treatment
- a stable patient with an uncommon presentation or without a clear diagnosis
- a critically ill or injured patient who responds to first line treatment

(c) **High complexity** – includes those best described as:
- a patient with multi-system problems and multiple/significant complications (medical and/or social)
- an unstable or deteriorating patient with an uncommon presentation or without a clear diagnosis
- a critically ill or injured patient who is unresponsive to first line treatment
- a patient presenting with a life/limb/sight-threatening condition