



ROYAL AUSTRALASIAN COLLEGE OF SURGEONS

SUBMISSION TO THE AUSTRALIAN HEALTH PRACTITIONER REGULATION AGENCY

DECEMBER 2011

SECOND ROUND CONSULTATION ON A PROPOSED REGISTRATION STANDARD FOR GRANTING GENERAL REGISTRATION AS A MEDICAL PRACTITIONER TO AUSTRALIAN AND NEW ZEALAND MEDICAL GRADUATES ON COMPLETION OF INTERN TRAINING

The Royal Australasian College of Surgeons welcomes the invitation from the Australian Health Practitioner Regulation Agency (AHPRA) to participate in its public consultation process regarding the granting of general registration to medical graduates on the completion of intern training.

Formed in 1927, the College is a not-for-profit organisation training surgeons and maintaining surgical standards in Australia and New Zealand. A Fellowship based organisation, the College is committed to ensuring the highest standard of safe and comprehensive surgical care for the community we serve through excellence in surgical education, training, professional development and support. As part of this commitment the College strives to take informed and principled positions on issues of public health.

The College has no objections to the consultation paper and its proposals, but makes the following observations with a view to clarifying and enhancing one proposal in particular.

While the College welcomes the requirement that interns do “a term of at least 10 weeks that provides experience in surgery” (page 4), it appears that some jurisdictions and hospitals will require this to be ten continuous weeks, which seems unnecessarily onerous and bureaucratic.

The purpose of this period of training is to provide experience, under supervision, in the care of patients who have a broad range of acute and elective surgical conditions and/or exhibit the common features of surgical illness, including a metabolic response to trauma, infection, shock and neoplasia.

The reality is that such experience is increasingly hard to find. Surgical units are becoming more specialised, which narrows the range of conditions they treat. There are now some intern positions in private hospitals where the work is almost exclusively elective, with very little acute work. It can no longer be assumed therefore that interns have gained broad experience of surgical conditions just because they have completed their ten week term.

The surgical skills required of interns could be just as effectively, and quite possibly more effectively, gained in two brackets of five weeks, given that some very specialised surgical units are unable to provide the necessary breadth of experience. The opportunity to break the ten weeks into two periods at different surgical units could allow for exposure to a greater case mix and, therefore, a richer learning experience.

The College thanks AHPRA for the opportunity to participate in its consultation process.