III. Higher Physician Training
SPECIALTY BOARDS

1 Internal Medicine
   Clinical Pharmacology and Therapeutics
   Infectious Disease
   Palliative Medicine

2 Cardiology

3 Critical Care Medicine

4 Dermatology and Venerology

5 Endocrinology, Diabetes and Metabolism

6 Gastroenterology and Hepatology

7 Geriatric Medicine
   Rehabilitation

8 Haematology and Haematological Oncology
   Medical Oncology

9 Nephrology

10 Neurology

11 Respiratory Medicine

12 Rheumatology
   Immunology and Allergy
General Guidelines

1 Entry Requirements

Three years of accredited structured basic training in Internal Medicine, plus a pass in the Intermediate Examination of the Hong Kong College of Physicians or equivalent qualification and Membership of the Hong Kong College of Physicians.

2 Assessment of Trainees

2.1 Continuous assessment will be undertaken by the respective trainers. Standard assessment forms should be completed at regular six-monthly intervals, or at the end of a training period under a specific trainer if the period falls short of six months. A log book to record clinical and procedural experience should be for assessment of competence.

2.2 Log book

A record of clinical and procedural training should be kept by each trainee for signature by his/her trainer(s) and regular review by Programme Directors, as well as by the Annual & Exit Assessment panels.

2.3 A Programme Director in each Region should be appointed, to be responsible for collation of assessments from various trainers throughout the training period.

2.4 The Programme Director and a panel appointed by the relevant Specialty Board will be responsible for yearly review of the trainee's progress. The trainee must attain Grade 5 or above in the evaluation of clinical and professional competence before he/she can proceed with further training.

2.5 Exit Assessment

At the end of the training, a final appraisal of each trainee will be conducted by the respective Specialty Boards, in the form of an assessment of a dissertation, oral examination and review of log book and previous Annual Assessments, to determine his/her competence before certification of specialist status.

3 Accreditation of Trainers

3.1 A trainer must be an accredited Fellow and Specialist recognised by the Hong Kong College of Physicians, who has been in active practice in the respective specialties for not less than two years after specialist accreditation.

3.2 A trainer must be actively engaged in the practice of Internal Medicine and/or its specialties, be able to conduct training in accredited training programmes, and is recognised to be actively contributing to the discipline.
4 Evaluation of the Training Programme

4.1 Training programmes must be organised by Trainers who have not less than two years' experience after the award of certification in a specialty, and are in active practice in accredited training units. The minimum trainer to trainee ratio should be 1:2.

4.2 Training programmes rather than specific units or institutions shall constitute the foundation of accreditation. Supervision by more than one trainer and in more than one unit is encouraged. Units which fail to satisfy all training requirements for an individual specialty may formulate programmes which are networked with other hospitals.

4.3 The Education and Accreditation Committee of the HKCP, through its Specialty Boards, is empowered by the Council to evaluate each training programme, and to monitor its results through review of reports on individual trainees and visits to the respective institutions.

4.4 Accredited programmes will be publicised regularly by the College, and the status of each programme, eg full, provisional, suspension and withdrawal of accreditation, will be used to ensure institutional conformity to College requirements.

4.5 Overseas training

This is encouraged but prior approval should be obtained from the respective Specialty Boards. In exceptional cases, retrospective accreditation can be approved based on detailed reports from overseas supervisors.

4.6 Clinical & Laboratory Research

Relevant research programmes are encouraged and can be accredited up to a maximum of six months in a 3-year Higher Physician Training programme.

5 Complaints and Appeals

5.1 Complaints on training facilities, supervision or other related matters should be made available to trainees both at the regional level through Programme Directors and Specialty Boards, and directly to the Council of HKCP.

5.2 Appeals against unsatisfactory progress reports, discontinuation of training and failure of final accreditation should be made directly to the HKCP Council.

6 Advanced Training in Internal Medicine (AIM) and one other specialty

6.1 Concurrent Training
6.1.1 This would require a minimum of four years of supervised training.

To be considered for dual certification, each four-year Higher Physician Training programme should comprise 24 months (cumulative) of core training in Internal Medicine and 24 months (cumulative) of core training in one other specialty.

The training programme must be approved by the AIM Board as well as the Board in the other specialty. Such a programme will normally consist of periods in which 50% of time is spent in IM and the other 50% in the other specialty, as well as periods of full time training in either one or both of the specialties.

In the context of concurrent training, a trainee may apply to undergo Exit Assessment in one of the two specialties after not less than three years of Higher Physician Training, provided the full period of 24 months (or 36 months as required by the specialties of Cardiology and Dermatology & Venereology) of core training has been completed in that specialty. Exit Assessment for the second specialty may be undertaken at the end of the fourth or (fifth) year of training, again with the provision that the required period of core training has been completed.

6.1.2 Exceptionally, a trainee may receive certification in two or more related specialties in addition to Internal Medicine after completion of all training requirements. Such programmes and subsequent certification shall require vetting and approval by the respective Specialty Boards and the Education & Accreditation Committee.

6.2 Sequential Training

A Fellow may apply to individual Specialty Boards to undertake sequential training in IM or another specialty after award of certification in either of these specialties.

7 Training in two related specialties

7.1 Concurrent training may be undertaken in the same manner as specified under Section 6.1, provided approval is obtained from the relevant Specialty Boards.

7.2 Sequential Training

A Fellow accredited in any one specialty after three years of training may undertake sequential training in a second or third specialty, and obtain accreditation by completing the core training requirements of the subsequent specialty/specialties.