



INTERVENTIONAL ENDOSCOPY EUS/ERCP FELLOWSHIP ATTACHMENT PROGRAMME IN SGH

	Components	Information
1. Div	vision/ Department	Medicine/ Gastroenterology and Hepatology
2. Titl	le of Programme	Fellowship Training Programme in Interventional Endoscopy EUS/ERCP
3. Rel	levant Registrations	 Temporary Registration with Singapore Medical Council (SMC) Training employment pass application with Ministry of Manpower, Singapore (MOM) (upon successful Temporary Registration with Singapore Medical Council)
	erview ckground information	Singapore General Hospital is an 1800 bed tertiary hospital. EUS is performed by the department of Gastroenterology and Hepatology whilst ERCP is performed by both the department of Gastroenterology and Hepatology and the department of Upper GI Surgery. The average number of cases done for EUS is approximately 400 cases per year whilst the ERCP is around 900 cases per year.
		Other interventional endoscopy cases such as, stenting, dilation, EMR, ESD, advanced endoscopic imaging and small bowel enteroscopy number around 200 cases per year.
		During the one-year training programme, fellows participate in ten months of hands-on training in EUS, ERCP and interventional endoscopy. This would include performance of diagnostic and therapeutic ERCP, including common duct stone removal, stenting of benign and malignant strictures, lithotripsy, SpyGlass cholangioscopy, pancreatic stone removal, stricture and pseudocyst management. Diagnostic and therapeutic EUS which include evaluation of the pancreatobiliary system, staging of malignancies, FNA of solid and cystic lesions and EUS guided cyst drainage. Fellows will have hands on training for endoscopy stenting, dilation, EMR, ESD advanced endoscopic imaging and small bowel enteroscopy.
		Direct care of both in-patients and outpatients is included. The fellow will be expected to be involved in the pre procedure evaluation as well as post procedure management of the patients. During the hands-on training period, the fellow will be expected to produce at least 2 abstracts and 1 manuscript. The trainee will also be expected to present at journal clubs and meetings on topics relevant to EUS and ERCP.
		Two months may be allocated for general gastroenterology whereby the fellow will function as a registrar of a GI team supporting a supervising consultant. During this period the priority will focus more on general GI work and supporting the general GI team.
4.2 Go	al/ aim(s)	Our primary goal is to teach trainees who will further the field in advanced endoscopy and to provide trainees with the foundation for research in the field of advanced endoscopy. At the end of one year of training, we anticipate that the fellow would have some experience in the cognitive aspects and performance of EUS, ERCP and interventional endoscopy.

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4.3 Duration	12 months		
4.4 Hyperlinks/URL Sites	https://www.sgh.com.sg/Clinical-Departments-Centers/Gastroenterology- Hepatology/Pages/overview.aspx		
5. Target Audience	Fellows who have completed their basic Gastroenterology fellowship and who are proficient in basic endoscopy		
5.1 Pre-requisite /eligibility requirement(s)	General requirements for Temporary Registration for training (required by SMC): • A basic medical degree from an accredited medical university or medical school • Passed the relevant national licensing examination in the country of conferment of conferment of basic degree, where applicable • Evidence of at least 12 months houseman-ship / internship with a certificate of satisfactory completion of houseman-ship or equivalent • Been registered as a medical practitioner in the country where he is currently practising • Been certified to be of good standing by the Medical Council or the relevant national authority Note: The doctor should be in active clinical practice (and been registered as a medical practitioner in the countries of practice) for the 3 years preceding the application for medical registration in Singapore. In addition to the above criteria, Clinical Fellows must: a) Have a minimum of 3 years working experience as a medical officer (or equivalent) b) Fulfil English Language requirements of SMC if the medium of instruction for the basic medical qualification is not in English c) Preferably have obtained a postgraduate diploma or medical degree in his country or overseas d) Be sponsored by (i) the government, or (ii) regional health authority or (iii) an appropriate institution in the home country. For (d)(iii), the doctor must be on current full-time employment (40 hours or more per week) with the sponsoring institution. As a Clinical Fellow, the doctor will be allowed to be involved in patient care and make entries in patients' case note, communicate care plans to patients and fellow healthcare professionals, and perform procedures under direct supervision or Level 1 supervision under SMC's Supervisory Framework.		
6. Learning Objectives	This fellowship would allow the Fellow to acquire:		
	 cognitive aspects and performance of EUS, ERCP and interventional endoscopy. 		
7 Course/Training	basic skills in research in the area of advanced endoscopy 1. To perform or assist in diagnostic EUS		
7. Course/Training Syllabus	To perform or assist in diagnostic EUS Basic imaging		
	Advanced imaging with contrast and elastography Advanced people imaging with people confered and emigraceapy		
	 Advanced needle imaging with needle confocal endomicroscopy Tissue acquisition with FNA 		

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Components	Information			
	Tissue acquisition with through the needle forceps			
	 2. To perform or assist in therapeutic EUS Celiac neurolysis Pseudocyst drainage EUS biliary drainage EUS Gallbladder drainage EUS Gastro jejunostomy 			
	3. To perform or assist in ERCP with therapeutics • Stone removal • Dilation and stenting • Pancreatic endotherapy • Intraductal imaging with cholangioscopy			
	4.Therapeutic endoscopy Stenting Dilation EMR ESD/POEM			
	5. Advanced imaging6 Small bowel enteroscopy			
8. Training Method	od Method of Supervision: Direct observation and feedback. Clinical Fellow will be supervised by an a supervisor at all times.			
	Hands-On Experience: Clinical Fellow will assist in the following procedures under supervision:			
 Daily endoscopies supervised by advanced endoscopy Consultant Daily review of pre procedure and post procedure patients Weekly X-ray meetings and tumor board meetings Research work mentored by advanced endoscopy Consultant 				
	Job rotation within SGH and to other institutions not required.			
	TRAINING ACTIVITIES & METHODOLOGY			
	Name of activity	Frequency / No. of sessions / Length of session	Teaching methodology	
	Daily pre procedure assessment	Daily 1 hour	Discussion on indications for procedure	

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Components		Information		
	Daily post procedure assessment	Daily 1 hour	Discussion on complications of procedure	
	Daily performance of advanced endoscopic procedures	Daily 6 hours	Direct supervision	
	Journal club, didactic teaching sessions	Weekly 1-2 hours	Didactic, discussion	
	Multidisciplinary hepatopancreatobiliary tumour board meeting	Weekly 1 hour	Multidisciplinary discussion	
8.1 Night Duties Requirement	No night duties required		<u> </u>	
8.2 Running of Clinics Requirement	No running of Clinics requir	red		
9. Assessment and Evaluation	Clinical Fellow will need to demonstrate their proficiency level based on the following competencies: 1) Patient Care Manage patients' pre and post endoscopy with emphasis on pre procedure preparation and post procedure monitoring for complications. Perform endoscopy competently for the patients 2) Medical Knowledge Able to understand the indications and contraindications for the procedure Able to understand the disease and pathophysiology and how endoscopy will be able to help manage the disease process			
	Practice-Based Learning and Improvement Able to understand the role of endoscopy in management of patients Interpersonal and Communication Skills			
		ommunication Skills nursing, medical staff in t	he endoscopy centre	
	5) Professionalism Be responsible for pa To be collegial and be	tients undergoing endosco e a good team player	рру	
	6) Systems-Based Practice Understand the role of surgery, oncology, radiology and patholog multidisciplinary management of patients To be able to coordinate care between these subspecialties			

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9.1 Assessment approaches	Formative assessment: Regular evaluation between Clinical Fellow and Supervisor / Head of Department Reflective journal- logbook recordings of training activities Summative assessment: Periodical assessment reports as required by Singapore Medical Council Feedback: End-of-training feedback form as required by Singapore Medical Council End-of-training feedback session with SGH-PGMI			
9.2 Evaluation Process 9.2.1 General overall grading system	completion of to overall grading criteria requirer	ne general overall grading system evaluates the Clinical Fellow's performance upon mpletion of the fellowship programme. All Clinical Fellow will be given a general erall grading status at the end of the fellowship programme based on the grading teria requirements incorporating the six competencies based knowledge, skills and informance that Clinical Fellow must demonstrate throughout the programme.		
	Grading Status	Description	Grading Criteria Requirements	
	CMP	Completes the programme	Fulfils all training requirements in all 6 domains of evaluation with at least a satisfactory grading	
	USP	Unsatisfactory performance	Fulfils only some training requirements in all 6 domains of evaluation with at least a satisfactory grading	
	DCP	Did not complete the programme	Did not fulfil any training requirements in all 6 domains of evaluation with at least a satisfactory grading	
	WDN	Withdrawn from the programme	Fellow withdraws from the programme or did not complete the required 12 months of fellowship training	
9.3 Criteria for Early Termination	Fellow's poor p	performance, misdemeanour, m d or referred to in the Fellowsh	ed early on the ground of the Clinical isconduct, negligence or breach of any ip Letter of Offer and Institution Terms	
	The Clinical Fellow may also request to terminate the attachment programme for reasons such as serious illness or other personal obligations. The institution will review all requests for early termination with the Clinical Fellow and the Supervisor / Head of Department.			

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Components	Information
10. Course Administration	Type of Certification: Certificate of Training
	Training Fee: S\$3,000 (before prevailing GST) per month Programme Funding source: Self-funded
11. Number of Clinical Fellow to be accepted at any one time	2 Fellows

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