

# Newsletter from the Association for European Paediatric Cardiology

## Training of junior staff in paediatric cardiology

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Training of junior staff is becoming increasingly important in the setting of paediatric cardiology and its related disciplines. In the United States of America, those wishing to become paediatric cardiologists are required to pass the Board examinations. In the European Union, as yet, we do not have uniform exit examinations, but those wishing to practice must now obtain certificates of specialist training. Again, as yet, paediatric cardiology, as a specialty, is already recognised in five countries within the Union, albeit that the Association is seeking to increase this recognition. As a step towards achieving uniformity in training, nonetheless, the Association has been debating the necessary requirements for institutes professing to provide training in paediatric cardiology, and, more specifically, for those who wish to be recognised as trainers. Over a period of time, the Advisory Professional Committee of the Association has formulated a series of criterions. This committee, chaired by the secretary-general of our Association, and comprised of four additional elected members from the Council of National Delegates, one of whom is the Secretary from the Advisory Professional Committee, presented these proposals at the Annual General Meeting of the 35th meeting of the Association held in Strasbourg. The proposals had already been published in concept form on our web page. Ratification was obtained at the meeting held on June 17, 2000. We publish here these accepted criterions, both for the Institutes wishing to undertake training, and for those wishing to become established as trainers.

### General requirements for institutes professing to provide training in paediatric cardiology

Requirements for the Institute:

 The Institute should be staffed by specialists registered in cardiac surgery, paediatrics, cardiology, anaesthesiology, radio-diagnostics and

- obstetrics. At least 3 paediatric cardiologists should be working full-time at the institute. Of these 3, one should be recognised by the Association as the trainer in paediatric cardiology, and one other paediatric cardiologist should be recognised as the deputy.
- The training institute should be equipped with the necessary infrastructure to permit surgery to be undertaken on the heart and the major vessels of the infant and child.
- The training institute should be equipped with at least one room specially designed for both cardiac catheterization and angio(cardio)graphy as carried out in infants and children. This must include features such as temperature control, equipment, and staff.
- The department of paediatric cardiology must be properly equipped so as to provide noninvasive diagnostic facilities, such as electrocardiography, echo-Doppler cardiography, and exercise testing.
- Care of patients at the training institute should be of sufficient quality and quantity that the centre can meet the requirements for training of paediatric cardiologists within the specified time allotted for training. For training specifically in the specialty of paediatric cardiology, it may be necessary for trainees to spend a given period in another centre, which must also be recognised by the Association.
- Regular peer review will be essential to ensure the continuing quality of the training institute.

#### General requirements for training

The institute providing training needs to ensure that:

 The trainee is only occupied within paediatric cardiology. Part-time education, with an appropriate extension of the period of training, should be possible. Those wishing to undertake

- part-time training, however, must obtain the permission of the training committee prior to the commencement of training.
- The trainee should be sufficiently conversant with the specified non-invasive diagnostic methods to be able to carry out these procedures independently.
- The trainee should similarly become sufficiently proficient in the interpretation of radio-diagnostics of the heart, the major vessels, and the pulmonary vessels to permit independent and adequate diagnosis of all congenital and acquired problems likely to be encountered.
- During the period of training, the trainee should be sufficiently well prepared, and should achieve sufficient confidence, to be able independently to perform diagnostic cardiac catheterizations and angio(cardio)graphy in infants and children.
- The trainee should become fully acquainted with the indications for, and complications of, therapeutic cardiac catheter interventions for infants and children.
- Provision must be made for regular clinical evaluations, and regular discussions with the cardiac surgeons.
- The trainee must be fully involved in pre- and post-operative care and the preparation of the patient, including proper involvement of the parents.
- The trainee must become fully familiar with the normal and abnormal physiology of the heart and circulation of the young individual. In addition, the trainee needs to be familiar with embryological, anatomical, and pathophysiological aspects of all congenital and acquired malformations of the heart as seen in the young. This should include personal study of heart-lung preparations, attendance at autopsies, and participation in specific courses in anatomic pathology.
- The trainee must have access to the appropriate literature concerned with congenital and acquired malformations of the heart and vessels as seen in the infant, child, and young adult.
- The equipment within the institute should be of sufficiently high standard to ensure the optimal training.

- The trainee must have adequate knowledge of the psycho-social problems of both the patient and the parents.
- Provision must be made for adequate contacts and consultations with those specialising in adult cardiology.
- Suitable provision must be made for consultation in the fields of clinical genetics, obstetrics and radiology.

#### Requirements with regards to the trainer

- To be recognised as a trainer in paediatric cardiology, the specialist must have been active for at least 5 years in the field of paediatric cardiology.
- The trainer must be recognised by the Association as satisfying these requirements.
- The trainer must have been appointed to the institute via normal and open procedures. The trainer should be employed at the institute in a full, or nearly full-time, contract so that he or she can satisfactorily fulfil the tasks of the trainer.
- The trainer in paediatric cardiology must be appointed only in an institute itself properly recognised for training in paediatric cardiology as set out above.
- The trainer is appointed initially for a period of 5 years. At the conclusion of this period, the trainer must be re-certified by a visiting committee, which will ensure that both the trainer and the host institute continue to satisfy the requirements as established by the Association.
- Qualification for supervision of training ends upon his/her retirement.
- The trainer must have a deputy who has also fulfilled the requirements for training as established by the Association.
- The Association retains the right to withdraw recognition should the trainer at any time fail to comply with the requirements of the Association. Such withdrawal of privileges requires a negative report given subsequent to peer review.

As ratified at the Business Meeting of the Association for European Paediatric Cardiology, Strasbourg, June 17, 2000.