



UNION EUROPEENNE DES MEDECINS SPECIALISTES
EUROPEAN UNION OF MEDICAL SPECIALISTS

SECTION & BOARD OF SURGERY
ABDOMINAL WALL SURGERY WORKING GROUP

EBSQ ELIGIBILITY REQUIREMENTS

Catalogue of Procedures and Operations

The minimal Eligibility requirement for a UEMS AWS qualification is a proved total number of 800 credit points in the categories A + B + C + D.

For each procedure/operation performed by the candidate as principle surgeon (the principle surgeon is the person who performs the majority of the essential steps of the procedure) 2 credit points are given. For each procedure/operation performed by the candidate as first assistant of a recognised expert 1 credit point is given. This means, that a total of 300 procedures/operations (categories A + B + C) are the minimum requirement, when they are all performed as principle surgeon.

When operations as first assistant are calculated, this means, that a maximum of 100 c.p. for 100 first assistances (with recognised expert as principle surgeon) can be obtained in category A and another maximum of 12 c.p. in category B – in such situation, 112 additional procedures/operations as assistant surgeon is minimum requirement (A+B+C). All operations in category C have to be performed as principle surgeon (100 c.p.).

A. Inguinal hernia repairs	n=200	400 c.p
B. Primary ventral hernia repairs (umbilical, epigastric)	n=50	100 c.p.
C. Incisional and complex hernia repairs	n=50	100 c.p.
D. C.M.E. Credits & Training Courses		200 c.p.

Provisional arrangements & compensations

For pragmatic reasons provisional arrangements are provided to enhance the qualification until complete European harmonisation of surgical training is achieved.

These provisional arrangements allow a range of different compensations to consider various national and/or individual peculiarities.



Category A

The 50% rule: at least 50% of a total number of 500 credit points (c.p.) have to be achieved as principle surgeon (min 100 procedures).

The total number of 400 credit points for Category A is mandatory.

Category A: Inguinal hernia repairs* n=200

1. Primary inguinal hernia repair in TAPP, TEP, Lichtenstein, open preperitoneal repair or Shouldice technique	n=125
2. Bilateral inguinal hernia repairs	n=20
3. Female groin hernia repair	n=20
4. Recurrent inguinal hernia repair	n=20
5. Scrotal hernia repair	n=5
6. Emergency inguinal hernia repair	n=5
7. Inguinal hernia repair following previous lower abdominal and pelvic surgery	n=5

* 50 % rule

Category B

The 75% rule: At least 75% of a total number of 100 c.p. have to be achieved as principle surgeon (minimum 38 procedures as principle surgeon = 76 c.p.)

Category B: Primary ventral hernia ± rectus diastasis repairs* n=50

1. Open suture, open mesh or laparoendoscopic umbilical hernia repair	n=30
2. Open suture, open mesh or laparoendoscopic epigastric hernia repair	n=10
3. Open mesh or laparoendoscopic umbilical and epigastric hernia plus rectus diastasis repair	n=5
4. Emergency umbilical and epigastric hernia repair	n=5

* 75 % rule

Category C

The 100% rule: All procedures in this category have to be performed as principle surgeon (50 procedures = 100 c.p.)

Category C: Incisional and complex hernia repairs* n=50

1. Incisional hernia repair in laparoscopic IPOM, open sublay, open onlay or component separation technique	n=40
---	------



UNION EUROPEENNE DES MEDECINS SPECIALISTES
EUROPEAN UNION OF MEDICAL SPECIALISTS

SECTION & BOARD OF SURGERY
ABDOMINAL WALL SURGERY WORKING GROUP

2. Open mesh or laparoendoscopic recurrent incisional hernia repair	n=5
3. Emergency incisional hernia repair	n=3
4. Parastomal hernia repair	n=2

* 100 % rule

Category D

200 points for training, education and research in abdominal wall surgery

Activity	Credit points
Participation at national AWS congresses	4
Poster presentation (first author) at national AWS congresses	6
Poster presentation (co-author) at national AWS congresses	3
Oral presentation (presenting author) at national AWS congresses	8
Oral presentation (co-authors) at national AWS congresses	5
Participation at recognised international AWS congresses	8
Poster presentation (first author) at recognised international AWS congresses	16
Poster presentation (co-author) at recognised international AWS congresses	8
Oral presentation (first author) at recognised international AWS congresses	20
Oral presentation (co-author) at recognised international AWS congresses	10
AWS Publication (first/corresponding author) in peer reviewed national surgical journals	20
AWS Publication (co-author) in peer reviewed national surgical journals	10
AWS Publication (first/corresponding author) in peer reviewed international surgical journals	40
AWS Publication (co-author) in peer reviewed international surgical journals	20
Participation at a recognized AWS Postgraduate Course	12
Participation at a Hands-On AWS Course under the Leadership of a recognised expert in abdominal wall surgery	12
Participation at a preparation course for the UEMS examination "Abdominal Wall Surgery" (intended in future)	12
Clinical visits or participation in fellowship-programs at recognised abdominal wall surgery centres	5 per day