



UNION EUROPEENNE DES MEDECINS SPECIALISTES
EUROPEAN UNION OF MEDICAL SPECIALISTS

SECTION & BOARD OF SURGERY
MINIMAL INVASIVE SURGERY WORKING GROUP

EBSQ MINIMAL INVASIVE SURGERY

ELIGIBILITY REQUIREMENTS -

CATALOGUE OF PROCEDURES & OPERATIONS

To achieve the qualification as FEBS in Minimal Invasive Surgery (MIS), "**Knowledge**" must be documented and provided for **Eligibility**, and is assessed by **Examination**.

"Knowledge and Skills" have to be documented and proved in the logbook for Eligibility and maybe additionally assessed by examination.

The "transferable competency" of MIS requires assessed and documented numbers for "**Knowledge and Skills**". Candidates must demonstrate Skills in each of the described areas of responsibility and be able to present a complete and signed logbook.

For pragmatical reasons the individual logbooks are scrutinized in the Eligibility process taking into consideration the various national requirements and local situations.

By that provisional arrangements are provided: if e.g. "flexible endoscopy" is not part of MIS in a distinct country, the candidate may omit this section in "Knowledge and Skills" without consequences for the Eligibility process, but approval of "Knowledge" in e.g. "flexible endoscopy" will be mandatory for the Examination. This procedure is also valid for e.g. "bariatric surgery" or "pancreatic surgery" and others.

The candidates' individual logbooks have to fulfill the UEMS criteria.

Catalogue of Procedures & Operations

The minimal Eligibility requirement for a UEMS MIS qualification is a proved total number of 1000 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



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total of 400 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 150 c.p. in category C – in such situation, 275 procedures/operations as principal surgeon is minimum requirement (A+B+C).

All operations in category B have to be performed as principle surgeon.

A. Endoscopies	n=100	200 c.p.
B. Basic Laparoscopic Operations	n=150	300 c.p.
C. Advanced Laparoscopic Operations	n=150	300 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 200/200 credit points (c.p.) have to be achieved as principle surgeon (min 50 procedures).

The total number of 200/200 credit points for Category A is mandatory.

Within the Category A at least 50% for each item (e.g. 20 esophagogastroduodenoscopies) have to be reached. Numeric deficits in one or more items have to be compensated by higher numbers in other items in order to reach the total minimum n=200/200 credit points.



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Category A: Special Arrangement

If flexible endoscopy is NOT performed by the MIS Surgeon in a specific country, category A subgroups 1-3 may be omitted for the individual candidate by the UEMS MIS Eligibility Committee. In this case the minimum number (n=200 credit points) for category A has to be **added** to category B or C in order to reach a total of n=800 credit points (A+B+C) **and Logbook "MIS Logbook without Endoscopy" should be selected.**

Category A: Endoscopies *	n=100
1. Flexible esophagogastroduodenoscopy	n=40
2. Flexible colonoscopy	n=50
3. Endoscopic interventions (snare polypectomy, bleeding control, clip application, intraluminal stent, dilatation, ERCP, endoscopic sphincterotomy, endoscopic CBD stone extraction)	n=10

* 50 % rule & special arrangements apply

Category B: The 75% Rule

All procedures in this category have to be performed as principal surgeon (minimum 150). By that the total number of 300 credit points is mandatory and achieved by 150 operations. Within the 3 subcategories 75% of the total number (e.g. 75 cholecystectomies) have to be reached. The missing 25 operations then have to be added to one or more of the other 2 subcategories of Category B (e.g. 25+25=50 appendectomies or 25+15=40 appendectomies and 25+10=35 diagnostic laparoscopies).

By that numeric deficits in one or more subcategories are compensated by higher numbers in other groups in order to reach the total minimum n=300 credit points.

Category B: Basic Laparoscopic Operations *	n=150
1. Appendectomy	n=25
2. Cholecystectomy	n=100
3. Diagnostic a/o therapeutic laparoscopy (e.g. intraoperative cholangiography or sonography, biopsy taking, adhaesiolysis, ostomy formation)	n=25

* 75 % rule applies



Category C: The 50% Rule

At least 50% of a total number of 300/300 credit points (c.p.) have to be achieved as principle surgeon (minimum: 75 procedures).

The minimum total number of 300/300 credit points is mandatory.

Out of the 10 subcategories surgeries have to be performed (as a principal surgeon) in at least 2 different subcategories and at least 10 procedures in each subcategory (e.g. 10 splenectomies and adrenalectomies + 65 colorectal procedures).

Category C: Advanced Laparoscopic Operations

n=150

1. Abdominal wall hernia repair (e.g. inguinal, incisional, umbilical)
2. Hiatal hernia repair, antireflux procedures, Heller cardiomyotomy
3. Bariatric procedures
4. Gastric/duodenal/small bowel resection, anastomosis, Meckel diverticulectomy, gastric/duodenal perforation repair
5. HBP (e.g. Hepatic, pancreatic resection, CBD revision)
6. Splenectomy, adrenalectomy
7. Colon & rectum (e.g. rectal resection, rectopexy)
8. Transanal (TAMIS, TEM)
9. Transoral (POEM, Zenker Diverticulectomy)
10. Thoracic (VATS) procedures



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Category D

Category D: CME Credits and Training Courses	200 c.p.
1.C.M.E. credits	50 c.p.
2.Credits for Hands-on Training Courses	150 c.p.

Category D: CME Credits

The candidate must have a total of at least **50 credit points** based on the following criteria:

- Participation at national congress (4 points)
- Poster presentation at national congress (first author) (6 points)
- Oral presentation at national congress (presenting author) (8 points)
- Participation at a recognized *international congress (8 points)
- Poster presentation at a recognized* international congress (first author) (12points)
- Oral presentation at a recognized* international congress (presenting author) (16points)
- Participation at a recognized* theoretical Postgraduate Course (12 points)
- Publication (first/corresponding author) in peer reviewed national surgical journal (12 points)
- Publication (first/corresponding author) in peer reviewed international surgical journal (24pts)

*recognized by UEMS MIS Board (e.g. EAES congress, SAGES meeting, WCES, etc – see:
www.uemssurg.org/divisions/working-groups/minimal-invasive-surgery)

NB! Credit points can only be awarded for congresses, presentations, courses and publications within the field of minimally invasive surgery

Category D: Credits for Hands-on Training Courses

The candidate must have a total of at least **150 credit points** showing participation at:

- 1x Basic laparoscopy course (e.g. LSS course Grade I Level I, EAES or UEMS MIS Board endorsed courses, courses endorsed by national societies) (30 points)
And/or
- Advanced (procedure/organ/pathology specific) courses (e.g. EAES or UEMS MIS Board endorsed courses, LSS higher grade and/or level course) (60 pointseach)
And/or
- Fellowship program/clinical stay (10 points/week) at recognized MIS center (e.g.EAES Fellowships & Clinical Visits)
- Basic or advanced laparoscopy course as trainer/supervisor (60 points)

The catalogue may be revised anytime according to UEMS decisions.