

## **CRITERIA FOR REGISTRATION IN THE BREAST AND ENDOCRINE SURGERY SUBSPECIALTY**

### **A. Three categories:**

1. Mainly breast – 70% of workload in breast surgery
2. Mainly Endocrine – 70% of workload in endocrine surgery
3. Breast and Endocrine – 70% of workload in breast and endocrine

Registrants can choose one of the three categories

### **B. Training requirements:**

After 2000, gazettement in MOH as part of the fellowship in BES training, with evidence of gazettement

Gazettement in universities as a Breast surgeon, an Endocrine Surgeon, or a Breast and Endocrine Surgeon

**3 years of training in a breast or endocrine surgery unit that is approved as a training centre by the Breast and Endocrine Surgery Subspecialty Credentialing Committee.**

**Exemption clause:** (for those in the private sector who have not been gazetted in the universities or MOH)

- a. Practicing in the subspecialty for at least 5 years,
- b. Spends at least 70% of his work on breast, endocrine or breast and endocrine  
(Please refer to Section D)

### **C. Training centres**

**All applicants must provide a list of centres where they have worked / trained in Breast Surgery, Endocrine Surgery, or both. The list of training centres and the criteria for a training centre are listed below.**

**List of training centres**

#### **1. Ministry of Health**

**Breast and Endocrine Units – HKL, Putrajaya, Johor, Penang, Kuala Terengganu, Kota Bharu**

#### **2. Universities – UMMC Breast Unit, UKMMC Breast and Endocrine Unit**

**3. Overseas – case to case basis**

**Criteria for accreditation of training centres**

- 1. Breast services – mammogram, pathology**  
Optional – nuclear medicine, oncology, breast care nurse
- 2. Endocrine services – endocrinologist, laboratory services, pathology services**  
Optional – nuclear medicine
- 3. Workload**
  - a. Breast surgery – 360 breast operations per year**
  - b. Endocrine surgery – 240 endocrine operations per year**

**D. Evidence of 70% subspecialty workload**

70% of all operations carried out by the applicant must be in breast surgery, endocrine surgery or breast and endocrine surgery. Applicants from private hospitals will require a letter from the hospital to confirm this 70% regulation. From the list of breast and endocrine operations, 20% must be from the extra procedures requiring credentialing. (See list below) Hence the candidates have to submit a log book over a 6 month period before the date of application.

**E. All applicants must also fulfil the criteria for registration as a general surgeon.**

**Breast Surgery:**

<b>General surgical procedure</b>	<b>Need privileging/Breast surgeon</b>
Excision of a fibroadenoma	
Wide local excision / lumpectomy for a suspicious breast lump / breast cancer	Breast reconstruction / oncoplastic breast surgery, skin-sparing mastectomy
Mastectomy	Sentinel node biopsy
Axillary Dissection	Breast augmentation / breast reduction
Microdochectomy	Toilet mastectomy requiring chest wall reconstruction
Hookwire localization biopsy	Endoscopic breast surgery
	Nipple reconstruction

	Nipple sparing mastectomy
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**Endocrine Surgery:**

<b>General surgical procedure</b>	<b>Need privileging/ Endocrine trained</b>
Open adrenalectomy	Parathyroidectomy
Submandibular gland excision	Laparoscopic adrenalectomy
Hemithyroidectomy	Endocrine pancreatic surgery
Sub total thyroidectomy	Re-do thyroidectomy
Total Thyroidectomy	Retrosternal goitre
Thyroglossal cyst	Neck dissection
	Endoscopic thyroid or parathyroid surgery
	Surgery for complicated thyroid malignancies (recurrence, locally advanced)

*Revised on 27<sup>th</sup> June 2012*