



## Qualification Committee Activity Report September 2018

September 2018

### Members:

*Chairman:* Markus Scheibel (Switzerland/Germany); *Members:* Raul Barco (Spain); Harris Georgousis (Greece); Patric Raiss (Germany); Olivier Verborgt (Belgium); Marta Ślęzak (Poland); Marco Sarmento (Portugal); Ruth Delaney (Ireland); *associated:* Ulrich Brunner (Germany)



SECEC-ESSSE as the leading scientific society for Shoulder and Elbow Surgery in Europe is challenged to set the standards in education and training as well.

### AIMS

- Improving knowledge and skills of shoulder and elbow surgeons in Europe
- Improve quality of care and patient safety
- Attract surgeons to the SECEC-ESSSE
- Create a “brand”
- Motivate to participate

In order to achieve the goals, a certificate depicting the level of training on the basis of a unified training structure should be implemented.

### Curriculum of SECEC-ESSSE

Shoulder Basics	10 hours
Shoulder Trauma	40 hours
Shoulder Elective	50 hours
Elbow Basics	10 hours
Elbow Trauma	20 hours
Elbow Elective	20 hours
<b><u>Overall</u></b>	<b><u>150 hours</u></b>

## Shoulder Basics

<b>B2, Shoulder</b>
<b>B2.1 Knowledge</b>
anatomy
surgical approaches
biomechanics
epidemiology
<b>B2.1.2 Clinical Evaluation</b>
history
physical examination
assessing outcomes and disability
<b>B2.1.3 Investigations</b>
blood parameters
sonography
nuclear medicine
radiological
MRI/MR arthrography
neurophysiological

## Shoulder Trauma

<b>B2.2 Shoulder Trauma</b>
<b>B2.2.1 Fractures</b>
proximal humerus fractures
clavicle fractures
scapula and glenoid fractures
dislocations and fracture dislocations of the shoulder girdle

## Shoulder Elective

<b>B2.3 Elective Shoulder</b>
<b>B2.3.1 Specific Disorders</b>
osteoarthritis
sequelae of fractures
inflammatory arthropathy
joint sepsis
avascular necrosis
sequelae of childhood disease
soft tissue disorders
shoulder instability
rotator cuff
neoplastic
<b>B2.3.2 Non-operative management</b>
splints and orthoses
injection/aspiration
physical therapies (taken also to include post-op PT)
medication
<b>B2.3.3 Surgical management</b>
arthroscopy
arthroplasty
resection arthroplasty
hemiarthroplasty
Total arthroplasty including reverse SA
revision arthroplasty
arthrodesis
tendon surgery - biceps and rotator cuff
osteotomies
surgical management of stiffness
surgical management of instability

## Elbow Basics

<b>B3 Elbow</b>
<b>B3.1 Foundation knowledge</b>
<b>B3.1.1. Science</b>
anatomy
surgical approaches
biomechanics
epidemiology
<b>B3.1.2. Clinical evaluation</b>
history
physical examination
assessin outcomes and disability
<b>B3.1.3. Investigation</b>
blood parameters
sonographic
nuclear medicine
radiological
MRI/MR arthrography
neurophysiological

## Elbow Trauma

<b>B3.2. Elbow trauma</b>
<b>B3.2.1. Fractures</b>
- distal humerus fractures
- radial head/neck fractures
- proximal ulna fractures
- dislocations and fracture dislocations on the elbow

## Elbow Elective

<b>B3.3. Elective elbow</b>
<b>B3.3.1 specific disorders</b>
osteoarthritis
inflammatory arthropathy
joint sepsis
avascular necrosis
sequelae of childhood disease
soft tissue disorders
neoplastic
<b>B3.3.2 non-operative managment</b>
splints and others
injection/aspiration
physical therapies
<b>B3.3.3 Surgical managment</b>
arthroscopy
arthroplasty
resection arthroplasty
interposition arthroplasty
hemiarthroplasty
primary arthroplasty
revision arthroplasty
arthrodesis
tendon surgery - distal biceps, triceps
open joint preserving surgery
osteotomies
surgical managment of stiffness
surgical managment of instability

## A qualification program

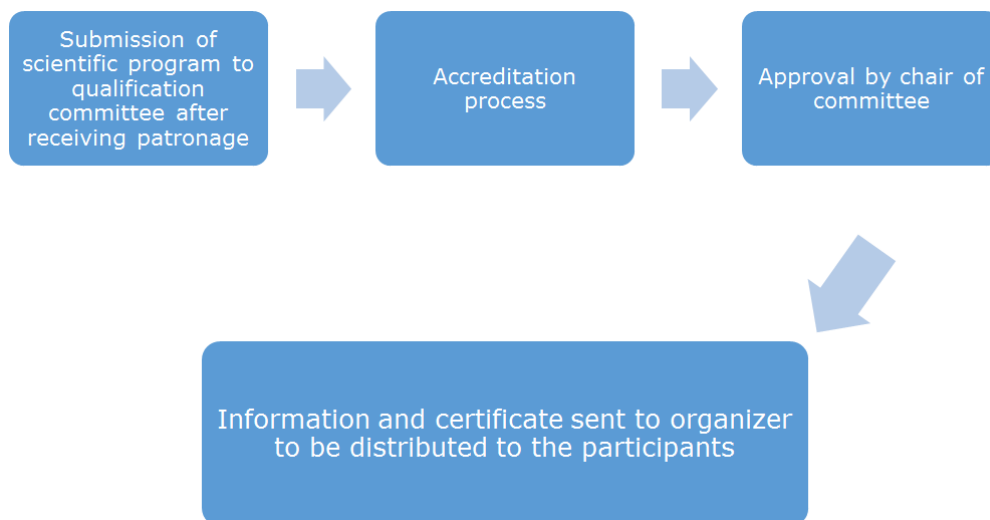
SECEC-ESSSE Curriculum

### 3 Columns:

1. International courses
2. Clinical rotations in specialized centers in Europe
3. Evaluation of knowledge (web-based tests)

### **First Column International courses**

Knowledge and skills are gained individually according to the local system in the European countries by fellowships or in specialized institutions. In addition national and European shoulder and elbow courses are approved by the SECEC-ESSSE, as done already for many years, appointed with the patronage and then assigned by SECEC-ESSSE educational credits. The national delegates should encourage their national Shoulder and Elbow Societies to stimulate local organizers to apply for the SECEC-ESSSE patronage. It has to be discussed if other local courses can be included into the system to increase the educational possibilities in closer distance to their native countries and cities.



Example SECEC Congresses

SECEC Shoulder & Elbow Core Curriculum	SECEC Milan 2015	SECEC Berlin 2017	SECEC Curriculum (Proposal)
<b>B2. Shoulder (Total hours)</b>	<b>34.44</b>	<b>25.85</b>	<b>100</b>
<b>B2.1 Basic knowledge (hours)</b>	<b>5.81</b>	<b>4.5</b>	<b>10</b>
anatomy	0.25	1	
surgical approaches	1.8	1.4	
biomechanics	1	0.3	
epidemiology			
<b>B2.1.2 Clinical Evaluation</b>			
history	0.71		
physical examination	0.25	1.15	
assessing outcomes and disability	0.84		
<b>B2.1.3 Investigations</b>			
blood parameters			
sonography			
nuclear medicine			
radiological	0.21	0.15	
MRI/MR arthrography	0.25	0.5	
neurophysiological	0.5		
<b>B2.2 Shoulder Trauma (hours)</b>	<b>4</b>	<b>3</b>	<b>40</b>
<b>B2.2.1 Fractures</b>			
proximal humerus fractures	2.5	3	
clavicle fractures	0.25		
scapula and glenoid fractures	0.25		
dislocations and fracture dislocations of the shoulder girdle	1		
<b>B2.3 Elective Shoulder (hours)</b>	<b>24.63</b>	<b>18.35</b>	<b>50</b>
<b>B2.3.1 Specific Disorders (hours)</b>	<b>8.81</b>	<b>4.25</b>	<b>20</b>
osteoarthritis			
sequelae of fractures			
inflammatory arthropathy		0.25	
joint sepsis	1.25		
avascular necrosis			
sequelae of childhood disease			
soft tissue disorders	1.25		
shoulder instability	2.39	1.5	
rotator cuff	1.92	2.5	
neoplastic			
Sport injuries of the shoulder (Not detailed in SECEC Curriculum)	1.25		
AC joint pathology (Not detailed in SECEC Curriculum)	0.75		
<b>B2.3.2 Non-operative management (hours)</b>	<b>4</b>	<b>2.8</b>	<b>10</b>
splints and orthoses			
injection/aspiration		2	
physical therapies (taken also to include post-op PT)	4	0.8	
medication			
<b>B2.3.3 Surgical management (hours)</b>	<b>11.82</b>	<b>11.3</b>	<b>20</b>
arthroscopy	1.5	2.1	
arthroplasty	1.5	2.75	
resection arthroplasty			
hemiarthroplasty			
Total arthroplasty including reverse SA	4.87	3.3	
revision arthroplasty		0.5	
arthrodesis			
tendon surgery - biceps and rotator cuff	3.15	1.75	
osteotomies			
surgical management of stiffness			
surgical management of instability	0.8	0.9	

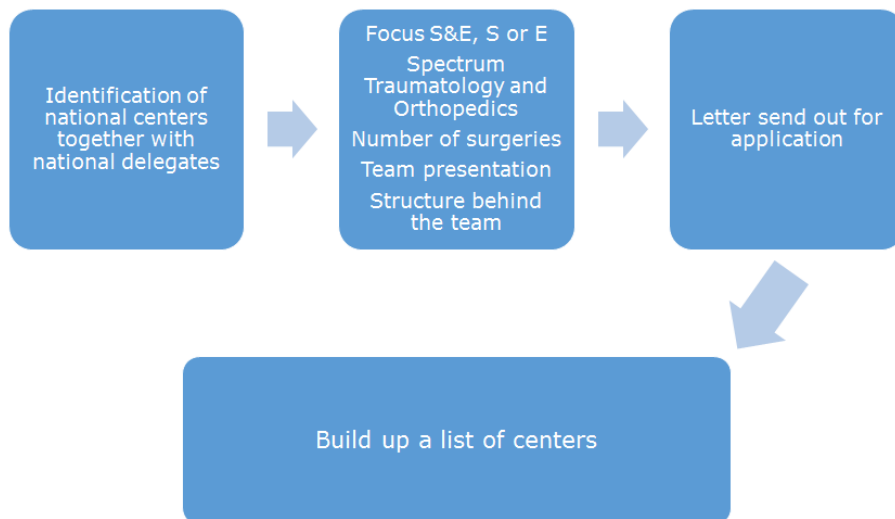
SECEC Shoulder & Elbow Core Curriculum	SECEC Milan 2015	SECEC Berlin 2017	SECEC Curriculum (Proposal)
<b>B3. Elbow (total hours)</b>	<b>8.51</b>	<b>10.45</b>	<b>50</b>
B3.1. Foundation knowledge (summary hours)	0	0	10
<b>B3.1.1. Science</b>			
anatomy			
surgical approaches	0.25	0.31	
biomechanics		0.3	
epidemiology	0.21		
<b>B3.1.2. Clinical evaluation</b>			
History			
physical examination		1.25	
assessing outcomes and disability			
<b>B3.1.3. Investigation</b>			
blood parameters			
sonographic			
nuclear medicine			
radiological			
MRI/MR arthrography			
neurophysiological			
<b>B3.2. Elbow trauma (summary hours)</b>	<b>2.75</b>	<b>2</b>	<b>20</b>
distal humerus fractures	0.75	0.25	
radial head/neck fractures	0.75	0.5	
proximal ulna fractures			
dislocations and fracture dislocations on the elbow	1.25	1.25	
<b>B3.3. Elective elbow (summary hours)</b>	<b>5.76</b>	<b>8.45</b>	<b>20</b>
<b>B3.3.1. specific disorders (summary hours)</b>	<b>0</b>	<b>0.3</b>	<b>8</b>
osteoarthritis			
inflammatory arthropathy			
joint sepsis			
avascular necrosis			
sequelae of childhood disease			
soft tissue disorders		0.3	
neoplastic			
<b>B3.3.2. non-operative management (summary hours)</b>	<b>0.38</b>	<b>0.61</b>	<b>4</b>
splints and others			
injection/aspiration			
physical therapies	0.38	0.61	
<b>B3.3.3. Surgical management (summary hours)</b>	<b>5.38</b>	<b>7.54</b>	<b>8</b>
arthroscopy		1.19	
arthroplasty	1	2.5	
resection arthroplasty			
interposition arthroplasty		0.25	
hemiarthroplasty			
primary arthroplasty			
revision arthroplasty	0.25		
arthrodesis			
tendon surgery - distal biceps, triceps		0.6	
open joint preserving surgery		0.25	
osteotomies		0.25	
surgical management of stiffness	2.63	0.75	
surgical management of instability	1.5	1.75	

## Second Column Clinical rotation in specialized centers in Europe

The specialist training should be completed by a clinical rotation in SECEC-ESSE host centers.

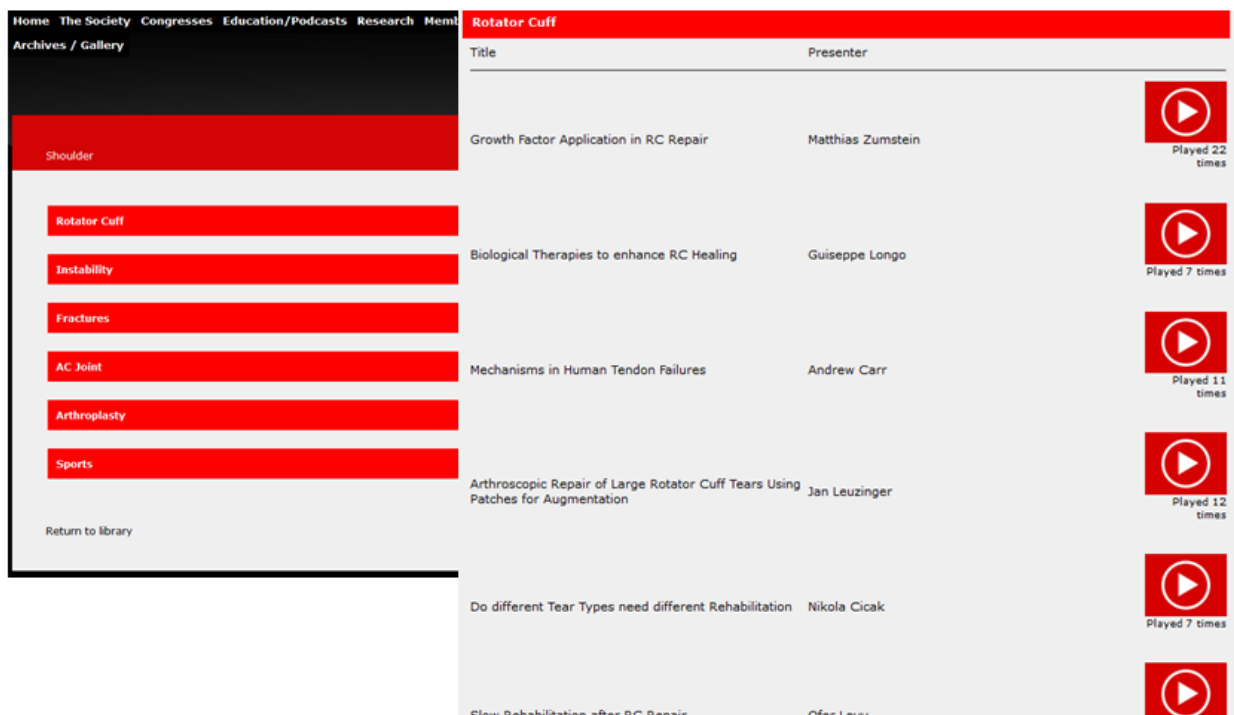
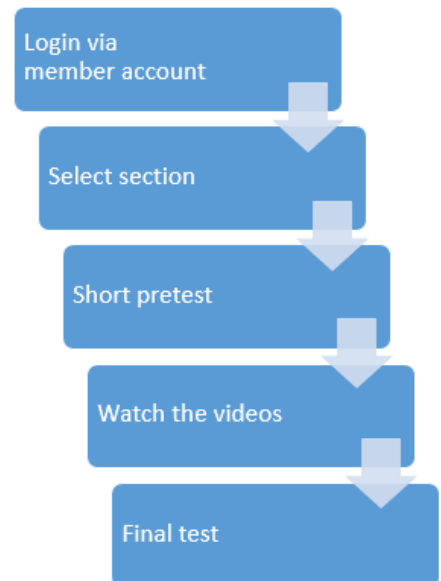
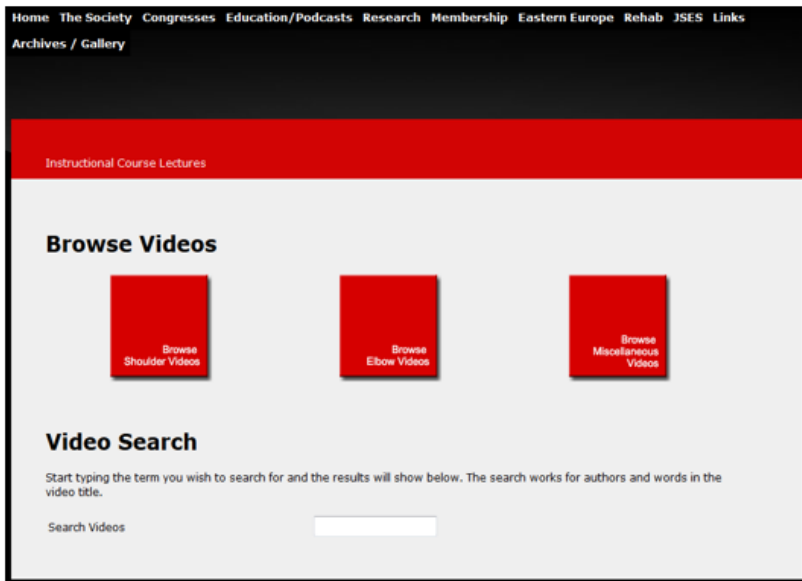
### 4 Categories of Fellowship:

- SECEC-ESSE Traveling Fellowship
- Visiting Observership
- (True Clinical Fellowship)
- (Basic Science/Lab/Research Fellowship)
  
- SECEC-ESSE Traveling Fellowship
  - Intra-European, Europe/USA, Europe/Japan-Korea traveling fellowships
  - 4-8 centers
  - Selected by SECEC Education Committee, by their societies
  
- Visiting Observership
  - 3 weeks period
  - 2-3 centers
  - Centers needs to be appointed
  
- True Clinical Fellowship
  - Agreed that this carries the most weight
  - Additional requirement: 1 week in specified center



### Third Column Evaluation of knowledge (web-based test)

Build up a database that reflects the content of the SECEC-ESSE S&E curriculum.



### Open Points

- Approval of SECEC-ESSE Syllabus by Excom
- Finalize rating of different fellowships
- Finalize „library“ for web-based testing
- Integration of web-based testing into the curriculum