These training requirements apply to those who begin training on or after July 1st, 2006.

The purpose of the training required under Section 1 of the training requirements is to introduce and expose the resident to independent responsibility for decisions involving clinical judgment skills; the further development of an effective and mature physician-patient relationship; and the achievement of competence in primary technical skills across a broad range of medical practice, and an understanding of the nature of the relationships between a referring physician and consultant clinical Anesthesiologist.

MINIMUM TRAINING REQUIREMENTS

1. Five years of approved residency in Anesthesiology. This period must include:
   1.1. One year of basic clinical training, which must be completed before approved training begins. Training done during this year can be credited only under Section 1
   1.2. Four years of approved training. This period must include:
      1.2.1. Two and a half years (30 months) of approved resident training in Anesthesiology. This period is designated as the primary training for the science and clinical practice of anesthesiology; required elements of the training must therefore reflect the need to diversify the experience to enable the resident to fulfill the consultant role. The following minimum required elements of training may be undertaken as separate rotations, or interspersed with one another, provided that it can be demonstrated that experience fulfilling the minimum requirements has been obtained:
         1.2.1.1. Adult Anesthesiology (12 months minimum) - including experience in out-patient surgical management, recognized general and subspecialty surgical procedures, and associated emergency conditions; an appropriate combination of general and regional anesthetic experience must be demonstrable
         1.2.1.2. Pediatric Anesthesiology (3 months minimum)
         1.2.1.3. Obstetrical Anesthesiology (2 months minimum)
         1.2.1.4. Chronic pain management (1 month minimum) incorporating experience in long-term care
   1.3. One year of approved resident training in Internal Medicine, to be undertaken preferably after a year of clinical training in Anesthesiology. This year, in conjunction with the basic clinical training, is designed to allow the resident to achieve primary skills across a broad range of medical practice; to develop a mature and effective physician-patient relationship; to acquire the general medical
knowledge necessary to function as a competent consultant in Anesthesiology. Therefore, this year must include:

1.3.1. At least six months of approved resident training in adult Internal Medicine. Rotations eligible for credit include general internal medicine and/or any combination of experience in at least two of the following subspecialties: Cardiology, coronary care, Respirology, Neurology, Hematology, Nephrology, Endocrinology, and Infectious Diseases

1.3.2. At least three months of approved resident training in adult intensive care. In addition, it is strongly recommended that the acute care experience include broader elements, such as neonatal/pediatric ICU, coronary care and emergency medicine. A maximum of six months ICU experience is allowed under this section

1.3.3. Up to six months of research done in an approved centre may also be acceptable for credit in this section, where special arrangements have been made to include intensive care training under 1.2.1. [Please see Notes on Research or Clinical Pharmacology]

1.3.4. Up to six months of training in an accredited clinical pharmacology program during the final residency year may be credited under this section, when special arrangements have been made to include intensive care training under Section 1.2.1 [Please see Notes]

1.4. Six months of training that may include:

1.4.1. Further training in an approved Anesthesiology program

1.4.2. Research experience in a clinical or basic science department approved by the Royal College

1.4.3. Six months training in clinical pharmacology undertaken in an accredited program during the final residency year

1.4.4. Any other course of study and training relevant to the objectives of Anesthesiology and acceptable to the director of the training program and the Royal College

NOTES:

Research or Clinical Pharmacology

In appropriate circumstances and upon the recommendation of the program director, to facilitate a one-year commitment to either an approved research program or an accredited Clinical Pharmacology program, three months of ICU training may be taken under 1.2.1 of the above requirements. The six months of research or clinical pharmacology training permitted under sections 1.3.3, and 1.4.2 for research, and 1.3.4 and 1.4.3 for clinical pharmacology allows the option of a full year of research or clinical pharmacology within the limitations of the training requirements. The purpose of this period is to develop subspecialty interests, diversify the resident’s experience, or address deficiencies in earlier training.

Those who have completed four years residency in Anesthesiology in a non RCPSC program within a system that has been deemed acceptable to the RCPSC and within acceptable time frames and have:
1. Been in a continuous practice of Anesthesiology for one or more years post certification

2. Maintained continuous enrolment with their certifying authority may fulfill the requirements for 1.3 with one of the following options:
   2.1. Additional critical care training, to a maximum of 12 months
   2.2. Acceptable training in Pediatrics at a senior level to a maximum of six months credit
   2.3. One year of other post graduate clinical training (as outlined in the Policies and Procedures for Certification and Fellowship under Section IV, Part 1.2.2) in Anesthesiology
   2.4. An additional year of acceptable Anesthesiology specialty practice which must be completed in an accredited, university-affiliated, academic department. The department head of that institution must be asked to complete a FITER as a reference for the candidate

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