

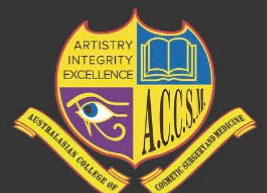


# ACCSM Training Program Handbook

Cosmetic Surgery  
Training Program

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AUSTRALASIAN COLLEGE  
OF COSMETIC SURGERY AND MEDICINE



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# 1. Introduction

The Training Program Handbook has been developed to ensure trainees, preceptors, and accredited practice staff have a comprehensive resource of information for the Cosmetic Surgery Training Program, including links to all training documents, forms, and policies. Links have been provided to all relevant resources and are also available on the ACCSM [website](#).

## 1.1 Role of the Australasian College of Cosmetic Surgery and Medicine

The Australasian College of Cosmetic Surgery and Medicine (ACCSM) was established in 1999 to deliver support and training to doctors wishing to practice in cosmetic medicine or surgery. The College has a training program for Cosmetic Surgery FACCSM (Surg) and has a medical faculty which trains doctors in Cosmetic Medicine FACCSM (Med).

To address the need for standardised quality education, training, and support, the ACCSM has evolved as a multi-disciplinary body consisting of general surgeons, plastic surgeons, dermatologists, ear nose and throat surgeons, ophthalmologists and other doctors who practice in cosmetic medicine and surgery. The ACCSM was formed as the successor to the Australian Association of Cosmetic Surgery, which was previously formed in 1992.

The ACCSM is dedicated to excellence in training, with the overarching aim of the College being summarised by the statement:

## “Raising Standards...Protecting Patients”

The Cosmetic Surgery Training Program has been developed with a wealth of experience to ensure that the program produces Cosmetic Proceduralists who are skilled, competent, and safe in all manner of practice.

## Acknowledgements

The College is grateful for all those who have contributed their time and their invaluable input to developing the Cosmetic Surgery Training Program Handbook and Curriculum.

Thank you to the members of the Expert Working Group, Cosmetic Surgery Examiners, and all contributors.

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We acknowledge the Traditional Owners of country throughout Australia and recognise their continuing connection to land, waters and culture. We pay our respects to their Elders past, present and emerging. ACCSM acknowledges Māori as Tangata Whenua and Treaty of Waitangi partners in Aotearoa New Zealand. Together we re-state our shared commitment to advancing Aboriginal, Torres Strait Islander, and Māori health and education.

## 2. Cosmetic Surgery Training Program

### 2.1 Accreditation of practices for training

The ACCSM Accreditation Policy and Procedure applies to practices seeking and holding accreditation for cosmetic surgery training.

The accreditation procedure oversees the management of the ACCSM Accreditation Policy and identifies the roles, responsibilities, and processes for the accreditation of training practices for the cosmetic surgery training program.

The framework outlines the process for new accreditation, and re-accreditation and is available for download from the ACCSM website.

List of accredited practices

The college has a published list of accredited practices on the website. The list is regularly maintained by college education staff.

### 2.2 Cosmetic Surgery Training Program Duration

The training program is two years in duration. Each year is 46-weeks duration and involves a minimum of 35 hours per week, of which 25 hours shall be in the practice (patient contact) and 10 hours academic pursuit (undertaking the training program requirements).

### 2.3 Governance of the Training Program

The ACCSM is the peak body for cosmetic surgery and medicine in Australia and New Zealand. The college is governed by a Council who sets, promotes, and continuously improves the standards of training and practice in cosmetic surgery and medicine. The Council includes the ACCSM office-bearers, who are referred to as 'the Executive'. The Council and its Executive have responsibility for, and oversight of, the core objectives of the ACCSM.

For further information on the Council, visit the [Council Terms of Reference](#).

Reporting to the Council, and with full responsibility for the training program is the Board of Censors (BOC). A full outline of the objectives of the BOC can be found in the [Board's Terms of Reference](#). The BOC meets quarterly and provides an update at annual general meetings. Training matters are referred to the BOC.

### 2.4 Training Program roles

#### Trainee

Trainees are responsible for:

- Abiding by training program policies and guidelines provided in the Training Program Handbook.
- Completing training program requirements and recording completion in a timely manner.
- Seeking education opportunities to meet learning needs.
- Requesting feedback from preceptors and incorporating feedback into practice.
- Always behaving professionally and responsibly, including being respectful of all colleagues and co-workers.
- Providing feedback to the College about aspects of the training program by participating in evaluation processes, e.g. Annual trainee surveys.

#### Preceptors

Preceptors are the formally approved supervisors responsible for training and trainee support in accredited training practices. A preceptor is involved with trainee teaching, assessment, and feedback.

It is expected that all trainees have all assessments reviewed by their preceptor.

Preceptors are formally approved by the college. They are experienced Cosmetic Surgery Proceduralists who are faculty members. They receive support training, and regular communication from the college to undertake their role.

For more information refer to: [Preceptor Position Description](#)

## Censor in Chief

The Censor in Chief chairs the BOC and has overall responsibility for the objectives outlined in the BOC terms of reference. The Chief Censor works collaboratively with the Cosmetic Surgery Dean. For more information on the role of the Censor in Chief, refer to [CIC Position Description](#).

## Dean, Cosmetic Surgery

The Dean is responsible for the following duties:

- On completion of training, review trainee training portfolios and recommend trainees for graduation to the Censor in Chief.
- Examinations for the cosmetic surgery training program:
  - Setting the examination papers
  - Training and calibration of examiners
  - Exam delivery
  - Chairing the board of examiners meeting
  - Dealing with borderline candidates
  - Providing feedback for failed candidates
  - Examination policies and processes
- Preceptor training and support
  - Annual Preceptor workshop facilitation
  - Preceptor application review and endorsement
- Training practice accreditation
  - Review and make recommendations on applications for accreditation
  - Review accreditation reports on accreditation cycles

# 3. Commencing the Training Program

The ACCSM has a rigorous policy and process for candidate selection into the training program. The college can accept applications to the training program at any point throughout the year.

## 3.1 Trainee Selection

All applications to enter the Cosmetic Surgery Training Program must be made on the ACCSM Cosmetic Surgery Training Program Application Form.

Applicants MUST meet the eligibility criteria outlined in the ACCSM Cosmetic Surgery Training Program [Trainee Selection Policy](#).

## 3.2 Commencement in the Training Program

Following the selection process, successful applicants will be notified in writing by the College.

Applicants will be sent the code of conduct, training program curriculum and Handbook and training program fee invoice.

On receipt of the signed code of conduct by the applicant and training fee deposit, an enrolment letter will be sent, informing the date and location that training commences. Trainees are provided with a unique login to their individual google classroom portal to access training program assessment forms.

### 3.3 Training Fees

Trainees must be financial members of the College during their time in the training program. At the commencement of training, trainees pay the two-year training fee to cover the costs of operationalising the training program.

The fee amounts are determined by the Council as part of the budgeting process for the college.

Part-time trainees, i.e. those training between 0.5 and 0.65 full-time equivalent (FTE), are eligible for part-time training fees.

There are also fees associated with courses and workshops which are to be paid upon registration for the specific activity.

From time to time, Members may experience personal circumstances that affect their ability to pay their fees in full by the specified due date. In these circumstances, Members may submit a written request to [admin@accsm.org.au](mailto:admin@accsm.org.au) outlining their circumstances for consideration.

For a list of current fees, refer to the website - Training Fees.

### 3.4 Trainee Induction Day

The Trainee Induction Day is held annually and is scheduled at the beginning of the formal training program. This day is held in Sydney in February of each year, is face-to-face and all attendees are required to cover their own travel expenses to attend.

The purpose of the training day is to provide Trainees with education covering Anatomy, Body Dysmorphic Disorder, Ethical Medical Practice, Informed Consent and Marketing your practice, all essential areas of knowledge required to build and establish a cosmetic practice.

## 4. Training Program Requirements

### 4.1 Education and Assessment Framework

Assessment for competency-based training

The 5 key principles of high-quality assessment in higher education have been applied to the development of the training programs assessment framework<sup>1</sup>. These are:

- 1. Assessment drives learning**
  - 1.1. It influences what trainees focus on during their training and builds on their understanding.
  - 1.2. It exists on a continuum from low to high stakes and informs both low and high-stakes decisions.
  - 1.3. Assessment can be utilised to improve learning and detailed feedback that trainees can actively engage with as necessary.
- 2. Assessment must be aligned to the program content, valid, and fit-for-purpose**
  - 2.1. Valid assessment tasks are relevant, authentic and focus on the demonstrable achievement of learning outcomes within the program.
- 3. The standard required for each assessment should be clear for both assessors and trainees.**
  - 3.1. Assessors and trainees need to have a detailed understanding of what each assessment involves and what is required
  - 3.2. Having clearly defined performance standards that have been agreed upon by all stakeholders helps improve both the transparency of assessment and student learning.
- 4. Assessments that are made based on the judgement of experts need to be clearly defensible**
  - 4.1. Assessment processes should be regularly reviewed to ensure that judgements are reliable, consistent, transparent, fair, and ultimately defensible.
- 5. Assessment should be integrated with learning**
  - 5.1. The assessment framework includes opportunities for self-reflection using logbooks and reflective practice exercises.

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<sup>1</sup> Jackel, Brad, et al. "Assessment and Feedback in Higher Education: A Review of Literature for the Higher Education Academy." Higher Education Research, 1 Jan. 2017, [research.acer.edu.au/highereducation/53/](https://research.acer.edu.au/highereducation/53/). Accessed 7 Dec. 2023.



## 4.2 An approach to programmatic assessment

The ACCSM implements a model of programmatic assessment for their Cosmetic Surgery Training Program to ensure the approach to assessment is standardised across preceptors and trainees, to streamline progress monitoring, and reduce unnecessary assessment that does not provide useful evidence of a trainees' evolving competence. This model allows for comprehensive evaluation of trainees' performance across varied assessment methods. Progressive assessment acknowledges that proficiency evolves over time so assessment data should be collected regularly and integrate multiple methods and sources of evidence.

This requires a purposefully selected range of assessments that contributes to the evidence base for determining the competence of each trainee. Decision-making regarding progress is not solely reliant on a single assessment tool, such as an exam. Rather, accumulated evidence is evaluated to support robust, defensible decisions.

Within the training program, structured learning activities are designed to also be a source of evidence of evolving competence. This aligns with a programmatic approach which highlights the crucial role of feedback in guiding trainee learning. Trainees are given regular feedback on their knowledge and skills by their preceptors in low stakes settings. This information supports a continuous process of learning and development.

High-stakes decisions, such as progression between stages and completion of the program are made by a committee of experts supported by a thorough picture of a trainee's performance over time.

### Aims of Assessment in clinical training

The objectives of clinical training are to prepare trainees who are already equipped with medical knowledge and surgical skills with the advanced skills required for cosmetic surgery practice and to be a safe, competent, and ethical practitioner. The aim of the assessments is to provide objective evidence confirming that trainees have met these learning outcomes.



## 5. Training Program Overview

### 5.1 Program Outcome Statements

The ACCSM Cosmetic Surgery curriculum has been created around a set of program outcome statements that define the expected competencies, skills, knowledge, and attributes required of skilled, safe, and ethical Cosmetic Surgery

Proceduralists. These program outcome statements are based on both the CANMEDS framework and the AMC Outcome (Capability) Statements for Cosmetic Surgery Programs of Study.

Each learning outcome in the curriculum links to at least one of these program outcome statements and all program outcome statements are covered across multiple learning outcomes. Trainees and their preceptors should have an awareness of the program outcome statements as they underpin the curriculum and assessment framework.

## 5.2 Stages of Training

The Cosmetic Surgery training program is designed as a two-year (advanced) training program and is structured into four (4) training stages. This sequencing enables the college to have stages for which they can effectively assess trainee progress and each act as a barrier to progression to the next.

Each stage of training should take approximately 6-months (FTE) to complete and includes 2 clinical rotations.

The college will facilitate these rotations in liaison with trainees. The college will endeavor to place trainees at practices requested, noting that this isn't always possible. If a trainee is required to travel inter-state for a rotation term (period of 3-months), then the costs must be borne by the trainee.

Within each stage of training there are evidence requirements, hurdle requirements, expected learning activities, and structured learning activities. These include:

- Evidence requirements which must be collected as part of the trainee's portfolio and signed off by the supervisor for each rotation.
- Hurdle requirements which must be completed before the trainee is eligible to progress to the next stage of training.
- Expected learning activities that are designed to support a trainee's learning and professional development and must be completed to progress to the next stage of training.
- Structured learning activities which demonstrate evidence of competence against learning outcomes (LO).

Refer to **Appendix 1**. Curriculum map to assessment: Each learning outcome is mapped to an assessment.

## 5.3 Training Program summary

| Training Stage 1: 0-6 months                                  |                                                                                                                                                                        |                                                          |                                                                                                             |  |
|---------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--|
| <b>Evidence requirements</b>                                  | Completion of all Structured Learning Activities (SLA's) in Key Area 1-3 (except 1.4.2 and safe sedation course).<br><br>Commenced 2 other KA's (related to rotations) | Achieved level 2 on EPAs relevant to rotations completed | Cultural Awareness Training                                                                                 |  |
| <b>Hurdle requirements</b>                                    | Evidence of surgical competence (Direct observational Procedure (DOPS)                                                                                                 | Successful performance reports from 2 rotations          |                                                                                                             |  |
| <b>Expected learning activities</b>                           | Participation in scheduled journal club meetings                                                                                                                       | Attendance at clinical outcomes meeting                  | Ethics and the Cosmetic Surgery Proceduralist certificate course (as part of the trainee induction program) |  |
| <b>Confirmation of candidature (trainee able to progress)</b> |                                                                                                                                                                        |                                                          |                                                                                                             |  |



| Training Stage 2: 7-12 months       |                                                                               |                                                                  |                                                                  |                            |
|-------------------------------------|-------------------------------------------------------------------------------|------------------------------------------------------------------|------------------------------------------------------------------|----------------------------|
| <b>Evidence requirements</b>        | Commenced SLAs in KA4 and completed 1 other KA (related to rotation)          | Level 3 on EPAs in KAs addressed in rotations                    | Injectables Training<br>Safe sedation Training                   | Basic Liposuction Training |
| <b>Hurdle requirements</b>          | Presentation of research proposal (Abstract)                                  | Pass medical exam (by the end of Stage 4)                        | Satisfactory portfolio progress review                           |                            |
| <b>Expected learning activities</b> | Participation in scheduled journal club meetings                              | Preparation for American Board of Cosmetic Surgery Surgical Exam |                                                                  |                            |
| Training Stage 3: 13-18 months      |                                                                               |                                                                  |                                                                  |                            |
| <b>Evidence requirements</b>        | Commenced SLAs in all KAs                                                     | Structured Case Based Discussion (clinical ethics case)          | Advanced liposuction training                                    |                            |
| <b>Hurdle requirements</b>          | Pass American Board of Cosmetic Surgery Surgical exam (by the end of Stage 4) |                                                                  |                                                                  |                            |
| <b>Expected learning activities</b> | Participation in all scheduled journal club meetings                          |                                                                  |                                                                  |                            |
| Training Stage 4: 19-24 months      |                                                                               |                                                                  |                                                                  |                            |
| <b>Evidence requirements</b>        | All SLAs across all KAs completed and signed off                              | All EPAs signed off to Level 4                                   | Satisfactory feedback from multi-sources (selected by preceptor) |                            |
| <b>Hurdle requirements</b>          | Pass Viva exam                                                                | Acceptance of research article for publication                   |                                                                  |                            |
| <b>Expected learning activities</b> | Participation in scheduled journal club meetings                              |                                                                  |                                                                  |                            |

Trainees have flexibility in how they address learning outcomes, especially in the order in which they are undertaken. This recognises the variation in the order that rotations are undertaken and differences across contexts. Trainee progress is carefully monitored to ensure that they can complete their training within the allotted 24 months.

It is expected that trainees will complete the assessment activities linked with each learning outcome throughout their rotation and that preceptors will offer prompt and regular feedback.

Journal club is offered 9 times throughout the training year and a 70% attendance rate for each trainee is expected. The Education Officer will schedule journal clubs, notifying trainees and providing instructions.

At the end of each rotation, trainees should collate all assessment activity documents and add these to their portfolio of work. Preceptors will review a trainee's achievements within each rotation and complete the Preceptor Evaluation Form which includes a summary of the learning outcomes signed off during the rotation, evidence requirements met, hurdles achieved, entrustable professional activities undertaken and the trainee's level of competence, as well as overall feedback about the trainee's progression and areas for future focus and development.

To successfully complete a rotation, trainees are also required to complete the trainee End of Rotation survey available to access via the google classroom.

## Stages of Training

### Stage 1 (0- 6 months of training)

To complete Stage 1 of training, a trainee must complete all Learning Outcomes in Key Areas (KA) 1-3 (except for 1.4.2) which are introductory and aim to ensure that a trainee has all the foundational knowledge necessary for high quality clinical care and effective patient communication. These key areas also provide clear evidence of trainees' ability to demonstrate good clinical judgement, safe decision making and critically reflect on their own practice. Trainees are also required to have commenced two other KAs that are related to their rotations.

In Stage 1, trainees are required to demonstrate that they are surgically competent through a Direct Observation of Procedural Skills assessment and through being rated at level 2 for the Entrustable Professional Activities (EPAs) relevant to the rotations they have completed. To successfully complete Stage 1, trainees are required to have successful performance reports from each of the two rotations completed during this period. Successful completion of Stage 1 results in the confirmation of progression to the next stages of the training program.

### Stage 2 (7-12 months of training)

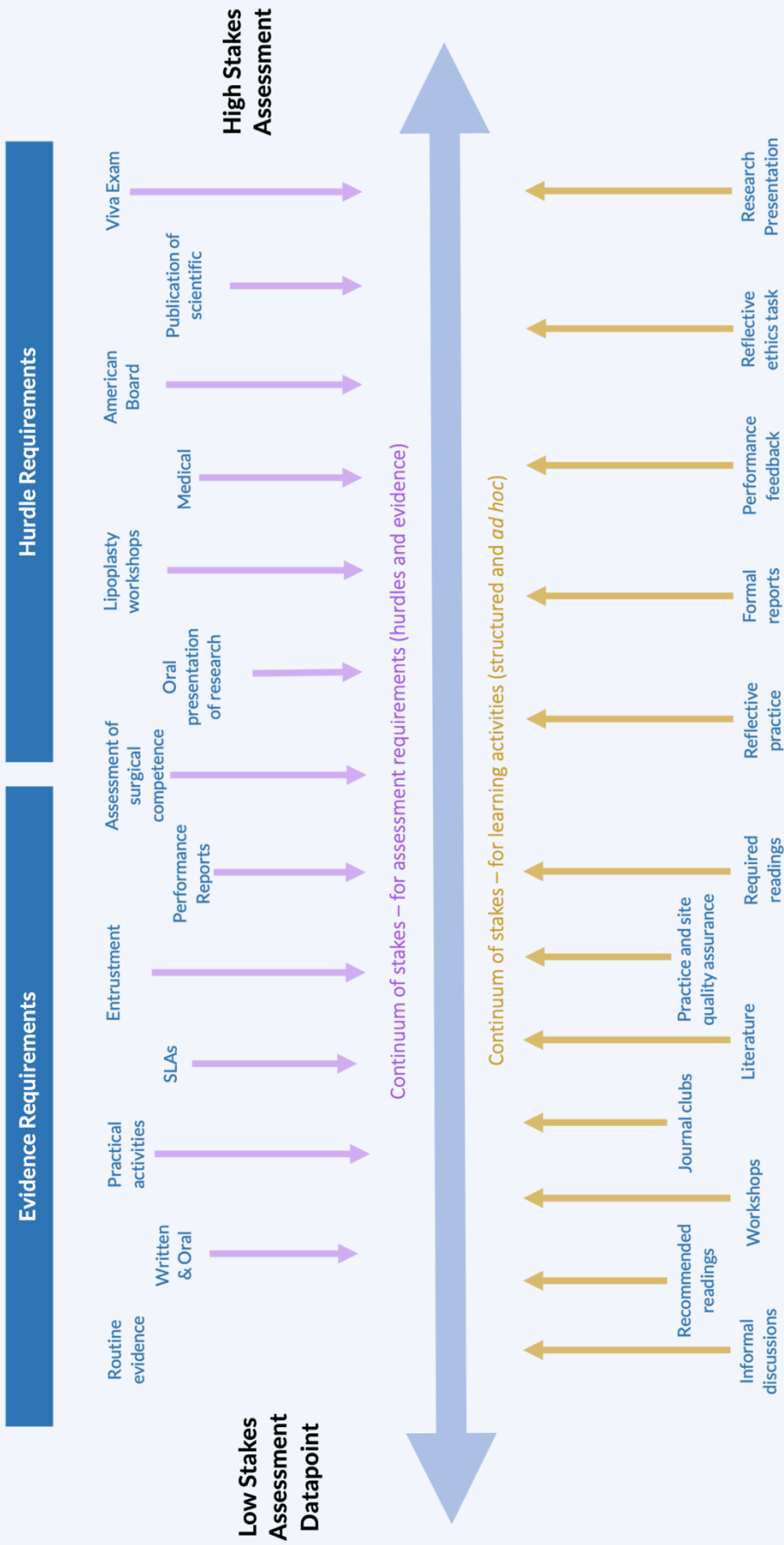
In this stage, trainees are expected to be focussed on building their clinical knowledge and surgical skills relevant to the rotations they are assigned to. By the end of stage 2, trainees are expected to have commenced KA4, and at least one other KA related to their assigned rotations and to have completed a course on injectables and an external course on safe sedation. Trainees need to be rated at Level 3 on EPAs related to their rotations. Trainees need to have completed their Basic Liposuction Training. Trainees should be focused on the research project they will be completing as part of their training, have a clear understanding of their research proposal and have presented this for feedback. Trainees are also required to have passed the medical exam before Stage 4 commences.

### Stage 3 (13-18 months of training)

By the end of stage 3 of training trainees should have commenced work on learning outcomes from all KAs and have passed the American Board of Cosmetic Surgery Surgical Exam. They also need to have completed the Advanced Liposuction Training. Ensuring that trainees are reflecting on their practice, performance, and clinical and management skills is a key focus for this stage of training with multi-source feedback being used to help trainees to obtain key information and performance feedback from a range of sources.

### Stage 4 (19-24 months)

This stage of training is about consolidation and ensuring that trainees have completed the SLAs against all learning outcomes in the curriculum. It is during stage 4 that trainees are transitioning to being a safe and competent independent Cosmetic Surgery Proceduralist. Assignment of rotations during this stage of training will be focussed on ensuring that trainees are able to have adequate coverage of all KAs and topics. In addition to completing all the SLAs, trainees are also required to have all EPAs signed off to level 4 and have their research paper accepted for publication. This stage of training also includes a focus on ethical practice within cosmetic surgery with a Case Based Discussion focused on ethics in cosmetic surgery practice. The final hurdle for completion of training is successfully passing the Viva exam.



## 6. Structured Learning Activities, Assessment Methods, and Evidence Requirements

The ACCSM Cosmetic Surgery training program incorporates 6 categories of assessment evidence. Details of the assessment task associated with each learning outcome can be found on the assessment template sheet.

|                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Routine Evidence</b>                  | This may be records generated from standard workplace tasks, for example a certificate from a completed internal or external training course or records of an audit or accreditation. Routine evidence also includes attendance at the Ethics and Cosmetic Surgery Proceduralist Certificate Course held at the Annual Trainee Induction Day.                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>Reflective practice exercise</b>      | These are structured exercises aimed at supporting trainees to reflect on and critically analyse their skills/experience/decision making. This task could include: reflections on a specific case, critical incident analysis, feedback reflection, or exploration of a case with ethical complications.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Oral assessments</b>                  | <p>Oral assessments may take place with a supervisor or preceptor and take the form of a series of structured oral questions with specific prompts and follow-up questions. For some LOs the series of questions will take a set format and be supplied to the supervisor. In other LOs, the supervisor has flexibility to determine a set of questions which should be recorded on the assessment form.</p> <p>The trainee and supervisor are required to complete a template which includes a record of the topics that were covered, elements that were covered satisfactorily, and any areas for development/improvement.</p> <p><b>See Appendix A</b> for example oral assessment template- standard assessment</p> <p><b>See Appendix B</b> for example oral assessment template- set assessment</p> |
| <b>Practical activity</b>                | This may be a specific practical task that either is or closely resembles an authentic task and which is directly observed by a preceptor or other supervisor. Practical assessments are typically 'one-off' observations that are signed off after successful completion.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Entrustable professional activity</b> | These are typically skills based procedural work that maps to a LO, and the preceptor (or other assessor) uses the Entrustment Scale to rate the trainee's level of entrustment. It is expected that a trainee would be assessed on each EPA on multiple occasions to show their improvement and developing competence over time.                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Written task</b>                      | Written tasks are usually a set report that covers particular knowledge based LOs. Each SLA provide guidance on the format and content for specific written activities.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |

## 7. Entrustment Rating Scale

The Entrustment Rating Scale has been developed to provide a safe approach to monitoring increased competence. It also introduces the concept of trust to assessment. The approach involves a trainee progressing through several levels of increasingly independent practice, until they are deemed sufficiently competent to perform a task independently. Instead of asking broad questions about competence, it is more straightforward for a preceptor or supervisor to rate what their trainee is trusted to do in routine, day-to-day work. By recording their level of entrustment over time, through repeated and ongoing ratings, changes in proficiency are monitored.

| Level 1                                                                                                                  | Level 2                                                                                            | Level 3                                                                                                                              | Level 4                                                             |
|--------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| <b>Safe Participation in the Operating Environment</b>                                                                   | Active Participation in Elements of a Procedure                                                    | Competent to Perform Some Procedural Elements                                                                                        | Competent to Perform All Procedural Elements                        |
| <b>The trainee actively observes procedures and participates safely as part of the team in the operating environment</b> | Under direct supervision, the trainee can participate in performing some elements of the procedure | Under supervision, the trainee can perform some elements of the procedure and can instruct the entire procedure from start to finish | The trainee can perform all elements of the procedure independently |

Learning outcomes that involve EPAs are clearly identified in the table in section: 11 Mapping of Curriculum Content to Assessment Evidence. Where a learning outcome requires an EPA, preceptors should consider the level of trust that they feel able to place in their trainee, observe them on the task/procedure set out in the associated learning outcome(s) and complete the EPA feedback form.

Trainees and preceptors should expect that it will take multiple observations over time for a trainee to achieve level 4 (Competent to Perform All Procedural Elements) for an EPA.

## 8. Hurdle Requirements

### 8.1 Research Requirements

Participating in research as a Cosmetic Surgery Proceduralist is crucial for several reasons that contribute to professional growth, advancements in the field, and the overall improvement of patient care:

- **Enhancing Clinical Skills and Knowledge:** Involvement in research allows cosmetic surgery proceduralists to stay updated with current trends, new technologies, and evidence-based practices, which enhances clinical skills and knowledge and may contribute to improved patient outcomes.
- **Advancing the field of cosmetic surgery:** Active participation in research drives innovation and pushes the boundaries of cosmetic surgery. Practitioners' involvement in clinical trials, studies, or collaborative research projects contributes to expanding the understanding of various procedures, refining existing techniques, and introduction of novel approaches, ultimately advancing the field.
- **Supporting Evidence-Based Practice:** By engaging in research activities, Cosmetic Surgery Proceduralists have access and regular exposure to evidence-based information that helps them make informed choices regarding treatment options, patient care strategies, and procedural improvements.
- **Professional Development and Continued Learning:** Involvement in research can enhance a proceduralist's professional profile and credibility within the medical community. Contributing to scientific publications, presenting at conferences, or being involved in model research projects each contribute to developing expertise, fostering career growth, and promoting opportunities for collaboration.

The ACCSM requires that trainees engage in a research project that leads to acceptance for publication in a peer-reviewed journal. To support this work, trainees are also required to give a presentation of their research proposal (abstract) by the end of their first year of training (hurdle requirement for stage 2) at the ACCSM Annual Cosmetex Conference or an academic meeting acceptable to the college.

Trainees must provide evidence of their abstract's acceptance for publication. This can include either a copy of the published article or (where publication may be delayed) a copy of the correspondence from the journal editor indicating that the article has been accepted for publication.

### 8.2 Examinations

Trainees are required to sit and pass three examinations during the 2-year cosmetic surgery training program. All the examinations are aligned to the training program learning outcomes.

Candidates wishing to sit exams must cover the cost of their own travel and accommodation to attend.

#### Examination 1- Medical MCQ Paper

Cosmetic Surgery trainees are required to pass the Faculty of Cosmetic Medicine Examination.

##### Description

The objective of the MCQ Cosmetic Medicine Examination is to assess a trainee's competency and required level of knowledge and understanding of Anatomy as it applies to cosmetic medical practice and to assess core knowledge such as non-invasive treatments, aspects of basic training, and acquisition of core concepts.

##### Eligibility

Trainees may apply to sit the exam in Stage 2 of their training (once 7 – 12 months of training is completed).

##### Format and Structure



The examination is 2 hours in duration and is made up of 100 Single-Best Answer MCQs, aligning with best practice.

### **Examination Schedule and Location**

The ACCSM usually holds two exam sittings per year, depending on candidate numbers and eligibility.

The exams are generally held in March/April and Sept/Oct.

The exam is held in the Sydney CBD.

### **Application Process**

When an exam is planned, eligible trainees are invited to attend, usually giving at least one month's notice.

### **Attempts**

Trainees have a maximum of two attempts to successfully complete the MCQ Examination within the 12-month timeframe. This rule applies regardless of the trainee's full-time equivalent (FTE) status. If the trainee is unsuccessful after two attempts, the ACCSM will liaise with the preceptor and consider remedial training actions under the ACCSM *Remediation in Training Policy*.

### **Pass mark/Marking System**

The exam pass mark is set using the modified Angoff standard setting methodology.

### **Notification and Results**

Exams are marked manually, and results issued usually within one week of sitting the examination. Trainees are notified of their result via email. If the result is a fail, they will be invited to sit the next examination event once scheduled. Trainees' files are updated with the result.

Candidates are allowed two consecutive attempts. Trainees can sit at the next sitting. Trainees can continue to train (completing their rotations and getting learning outcomes signed off) as they wait for the next attempt.

Once an examination has been successfully passed, the trainee can move onto Stage 3 of the training program.

## **Blueprint for Medical MCQ Examination**

### **1 Fundamentals of Skin and Wound Management (Key Area 2)**

- Identification and management of common skin pathologies
- Identify common skin manifestations of internal diseases
- Biological process in scar formation

- Management of scars
- Treatment options for pigmentation changes

## 2. Diagnosis, assessment, and safe management of cosmetic surgery procedures related to the face and neck (Key Area 4)

- Blood supply and innervation of the face
- Facial musculature and the course and distribution of nerves of the face
- The Fascial Planes of the Face and the Brow and the Pattern of Facial Components the Brow, Face, and Neck
- Age related skin changes and fat loss
- Age related changes in ligamental support, muscle, and bone atrophy
- The impact of sun exposure on the aging process
- Adjunctive Facial Procedures

of

### Content

| Topics                                                                                                | % of questions |
|-------------------------------------------------------------------------------------------------------|----------------|
| Fundamentals of Skin and Wound Management                                                             | 40             |
| Diagnosis, assessment and safe management of cosmetic surgery procedures related to the face and neck | 60             |

### Difficulty

| Level  | % of questions |
|--------|----------------|
| Easy   | 30             |
| Medium | 50             |
| Hard   | 20             |

### Cognitive level

| Categories                                                     | % of questions |
|----------------------------------------------------------------|----------------|
| Knowledge (recall)                                             | 75             |
| Application (apply a concept/principle to a clinical scenario) | 25             |

## Examination 2 - American Board of Cosmetic Surgery Exam (ABCS)

To ensure graduates are benchmarked against an international standard, noting that the American and Australian Training programs are similar, ACCSM Cosmetic Surgery trainees sit the American Board Examination (ABCS).

### Description

This exam is designed to evaluate competency in cosmetic surgery by critiquing a combination of a candidate's knowledge, surgical judgement, technical expertise, and ethics to achieve the goal of providing aesthetic improvement.

### Format and Structure

200 MCQ questions, blueprinted by content and cognitive level as outlined by the American Board.

This exam is sat over a period of 5-6 hours.

## Eligibility

Cosmetic Surgery trainees are eligible to apply for the ABCS exam during Stage 3 of the training program.

## Examination Schedule & Location

The examination is held twice yearly, generally in May and November each year. Eligible candidates will be notified of exam dates.

Candidates can sit this examination by attending an exam premises in Sydney or Melbourne.

## Application process

The ACCSM Education Officer invites eligible trainees to sit the exam. There are times where the Dean advises the next sitting may be more appropriate or the trainee may not wish to sit at that point and want to wait for the next session.

The ACCSM Education Officer registers and pays for the trainees' examination enrolment and provides details to the trainee on the examination.

## Attempts

Trainees are afforded three attempts at the exam. As part of the training program fee, the ACCSM will pay for two attempts. Subsequent attempts will be self-funded.

Trainees can continue to train (completing their rotations and getting learning outcomes signed off) as they wait for the next attempt.

## Pass mark/Marking System

The exam is prepared and psychometrically evaluated by the National Board of Osteopathic Medical Examiners (NBOME). The pass mark for this examination is 65%.

## Notification of results

Trainees are notified of their result via email. If the result is a fail, they will be invited to sit the next examination event once scheduled. Trainees' files are updated with the result. The American Board can take up to 3 months for the release of results. Once the result is received it is notified to the trainee within 48 hours.

## Withdrawal

Candidates must contact the ACCSM to cancel their exam at least 2 business days prior to their appointment. Exams cannot be cancelled less than 2 business days prior. Failure to cancel in time or failure to appear may result in a full or partial forfeiture of the exam fee.

## Blueprint for ABCS Surgical Examination

### 1. Breast (13 – 17%)

- Augmentation
- Reduction
- Mastopexy
- Gynecomastia

- Reconstruction

- Breast Cancer

### 2. Body/Extremity (8– 12%)

- Soft-tissue Augmentation

- Abdominoplasty
- Post-Massive Weight Loss Surgery
- Soft-tissue Excision
- Genitalia

### 3. Liposuction (8-12%)

- Instrumentation/Modalities
- Anesthesia
- Anatomic Considerations

### 4. Facial (28-32%)

- Soft Tissue
- Implants
- Liposuction
- Rhinoplasty
- Otoplasty
- Face and Neck Lift
- Forehead/Brow Lift
- Blepharoplasty
- Lips
- Midface
- Orthognathic
- Genioplasty

### 5. Dermatology (13-17%)

- Resurfacing
- Laser/Light/Radiofrequency Treatments
- Scar Management
- Soft Tissue
- Implants
- Hair Restoration
- Liposuction

### 6. Patient Safety (8-12%)

- Airway/Oxygenation/Ventilation
- ACLS
- Medical Emergencies
- Surgical Emergencies
- OR/Environment Safety
- Ethics/Communication
- Patient Evaluation/Perioperative Care

### 7. Surgical Principles (8-12%)

Anatomy

Physiology

Aesthetic Analysis

Pharmacology

Complications

Approximately 30% of the ABCS written items will be at the recall of facts/recognition level; 40% of the questions will be at the application level; and about 30% of the items will be at the problem solving/synthesis/evaluation level.

#### Content

| Topics         | % of questions |
|----------------|----------------|
| Breast         | 15             |
| Body/Extremity | 10             |
| Liposuction    | 10             |
| Facial         | 30             |

|                     |    |
|---------------------|----|
| Dermatology         | 15 |
| Patient Safety      | 10 |
| Surgical Principles | 10 |

### Cognitive level

| Categories                                                     | % of questions |
|----------------------------------------------------------------|----------------|
| Knowledge (recall)                                             | 30             |
| Application (apply a concept/principle to a clinical scenario) | 40             |
| Comprehension (evaluation, judgement, reasoning)               | 30             |

## Examination 3 - Viva exam

### Description

The purpose of the VIVA examination is to ensure trainees are safe to practice independently. The exam assesses the curriculum applied to cosmetic surgery practice, such as managing complications and informed consent.

### Eligibility

Trainees are eligible to sit the VIVA examination during Stage 4 (19 – 24 months) of the training program.

### Format and Structure

From 2024, the VIVA is a 10- station examination. Each station is 10 minutes long, with semi-structured questions and prompts.

The 10 stations will cover the following content of the curriculum:

Facial, body, breast, liposuction, rhinoplasty, non-invasive and informed consent.

Each station will have rubric descriptions and a categorical rating scale with inbuilt standards.

### Examination Schedule & Location

Due to the small trainee numbers, the ACCSM sets the VIVA examination date and location based on demand and candidate eligibility.

The examination is held at a practice location, examples include Waratah Private Hospital, Sydney.

## Application process

Eligible trainees are invited to sit the VIVA examination by the ACCSM Education Officer.

## Attempts

Trainees are afforded three consecutive attempts at the VIVA. They can sit at the next sitting.

Sometimes the Dean may recommend further training time is required to be undertaken before another attempt can be made.

## Pass mark

The standard for the minimally competent candidate (MCC) will be built into the station, through descriptions of what the MCC should be able to demonstrate for that station. All candidates will be assessed on the 5 domains of: applied knowledge, decision making, clinical judgement, professional conduct and communication which have been aligned to CanMEDS. For each domain, candidates will be assessed as Outstanding, Clear Pass, Borderline Pass, Borderline Fail, Clear Fail and Significant Concerns.

The passing standards for the Viva will be determined using formal standard setting methodologies. This will allow for minor differences in examination difficulty to be accounted for, and to ensure that the performance standards are maintained.

## Notification of results

Candidates are notified of their result usually within one week of the exam completion via email. Trainees will be invited to sit the next available sitting, if the result is a fail.

## Withdrawal

Candidates wishing to withdraw from an examination must do so in writing at least 14 days prior to the examination date.

### 8.2.1 Candidate Feedback

All candidates will receive feedback on their specific performance in the ACCSM examination components as part of their examination results letter if they are not successful.

Candidates are not provided with: • correct responses to questions; • personal responses to questions; • a copy of the examination papers; • data pertaining to standard setting procedures; or • copies of marking criteria/rubric/template; and requests for remarking will not be entertained. No other feedback can be requested by candidates.

### 8.2.2 Examination Conduct

For all the examinations, candidates are expected to conduct themselves in accordance with the guidelines outlined in the [Examination Conduct Policy](#).

Candidates who are deemed to be non-compliant with any examination conduct guidelines may have their examination sitting voided and recorded as a failed examination.

### 8.3 Hurdle Requirements- Direct Observation of Procedural Skills (DOPS)

Trainees are required to undertake a Direct Observation of Procedural Skills (DOPS) assessment during stage 1 of training.

A DOPS is a structured assessment method commonly used to evaluate and provide feedback on a trainee's surgical skills. During a DOPS task, an experienced assessor directly observes the trainee as they perform specific surgical procedures and skills in a controlled clinical setting.



The assessor assesses various aspects of the trainee's performance, including technical proficiency, communication with the surgical team, adherence to safety protocols, and overall competence in executing the procedure.

The DOPS is assessed based on the following criteria:

- Prepares for procedure according to standard protocols
- Demonstrates good asepsis and safe use of instruments/sharps
- Demonstrates manual dexterity required to carry out procedure
- Demonstrates appropriate technical skills including tissue handling, dissection and suturing
- Is aware of own limitations and seeks help if/when appropriate

Trainees receive a rating for each criterion of either unsatisfactory/competent/excellent. A rating of unsatisfactory on any criteria means that the task has not been successfully completed.

## 8.4 Hurdle Requirements- Portfolio progress reviews

At the end of each rotation, preceptors review a trainee's achievements within that rotation and complete the Preceptor Evaluation Form which includes a summary of the learning outcomes signed off during the rotation, evidence requirements met, hurdles achieved, entrustable professional activities undertaken and the trainee's level of competence, as well as overall feedback about the trainee's progression and areas for future focus and development.

In addition to the technical aspects, the Portfolio Progress Review includes feedback on the trainee's communication skills, empathy, ethical conduct, and ability to establish rapport with patients, team members and ancillary staff. This holistic assessment ensures that trainees not only master surgical techniques but also address the other competencies required to be a safe, ethical, and professional Cosmetic Surgery Proceduralist.

Preceptors are required to give an overall rating of trainee progress and attainment during a rotation. This rating is either progress or unsatisfactory progress. A trainee is required to achieve a satisfactory rating for two rotations before progressing from stage one to stage two of training.

## 8.5 Hurdle Requirements- Multi-source feedback

Multi-source feedback is a method designed to provide a well-rounded assessment of a trainee's performance by collecting feedback from various sources. This process aims to offer insights into the trainee's technical skills, communication abilities, professionalism (including ethical conduct), and overall effectiveness in cosmetic surgery. The feedback sources typically include peers, supervisors, and other healthcare professionals. The multisource feedback task involves eliciting feedback from at least two of the following sources (selected by the preceptor) using the Multi-Source Feedback Template:

### 1. Peer Evaluation:

Colleagues who work closely with the trainee have the opportunity to provide feedback on collaborative efforts, teamwork, and communication skills. This perspective can offer valuable insights into how the trainee interacts within the surgical team and contributes to a positive working environment.

### 2. Supervisor Assessment:

Direct supervisors play a crucial role in evaluating the trainee's technical proficiency, decision-making skills, adherence to protocols, and overall performance during cosmetic surgeries. Their assessment provides a comprehensive overview of the trainee's capabilities and progress.

### 3. Other Healthcare Professionals:

Feedback from nurses, clinic staff, and other healthcare professionals who collaborate with the trainee in the surgical setting can offer additional perspectives on teamwork, communication, and the trainee's ability to manage and coordinate care effectively.

The multi-source feedback task must also include self-reflection on their own strengths and areas for improvement, fostering a sense of personal responsibility for continuous development.

Trainees will receive a rating of exceptional/satisfactory/requires further development from each person that feedback was requested from and are required to get two ratings of satisfactory or exceptional to progress into stage 4 of training.

## 9. Routine Evidence- Description of External and Internal Training Courses

### Stage 1 (0 – 6 Months)

#### Ethics and the Cosmetic Surgery Proceduralist Certificate Course

This is a certificate course run by the ACCSM as part of the Trainee Induction Day which is scheduled during the first few months of training.

The course consists of didactic lectures, discussion sessions and a MCQ formative assessment.

The course explores topic such as:

- Ethical theories and definitions.
- The principles of patient autonomy, beneficence, non-maleficence, and justice.
- The potential conflict between the best interest of the patient, and the financial interests of the practitioner and strategies for awareness and mitigation.
- Ethics and informed consent.
- Ethical advertising.
- Ethical practice in a corporate setting.

The course is specifically designed to address the learning outcomes of the curriculum.

#### Cultural Competency Training

Trainees are required to complete cultural competency training during Stage 1 (0 – 6 months) of the training program.

The ACCSM expects trainees to complete the National Centre for Cultural Competence – Cultural Competence Online Modules during their first 6 months of training.

The Modules aim to encourage individuals' confidence, motivation, and knowledge in developing cultural competence capabilities as well as increase culturally competent practices in organisations across the country.

These modules offer a range of research-based educational resources, insights from academics and community members as well as reflective activities.

Outcomes

- Develop an understanding of what cultural competence is and why it is important.
- Develop cultural competence capabilities, ensuring more effective and respectful interactions in cross-cultural relationships in the workplace and beyond.
- Explore strategies to inspire cultural change and strong cultural competence throughout an organisation.
- Examine identity as an individual, gaining invaluable insight into self within a wider social context.
- Learn strategies to recognise and challenge racism within the workplace and beyond.
- Learn from the historical and contemporary context of Redfern and its importance as a birthplace of contemporary Aboriginal self-determination.

This online module is self- paced and requires 4 hours of time to complete, over a 90 - day period.

The cost of enrolment is as prescribed on the website. Trainees can enroll, pay and complete the course at any time during Stage 1 of their training. A certificate of completion must be sent to the ACCSM Education Officer on successful completion of the training.

For details and to enroll, visit:

[Cultural Competency Training](#)

## Stage 2 (7 - 12 months)

### Injectables Training

Cosmetic Injectables training is provided by the ACCSM and aims to enhance skills in cosmetic medicine and injectables.

The one day in-person training is run yearly in Sydney for trainees to attend. Details around locations and enrolment will be provided by ACCSM Education staff. The training is provided as part of the training program fee.

#### Description

Overview of botulinum toxin

Overview of hyaluronic acid

Hands on injection sessions

### Safe Procedural Sedation Training

Trainees are required to complete the Safe Procedural Sedation Course, through the Sydney Clinical Skills Simulation Centre.

The one-day training is offered 5 times per year and currently costs \$880 (to be paid directly by the trainee) to attend.

#### Description

The Safe Procedural Sedation Course incorporates e-learning, interactive workshops and immersive simulation activities for a one-day hands-on program exploring conscious sedation outside of the operating theatre.

The course content reflects the NSW Agency for Clinical Innovation (ACI) Minimum Standards for Safe Procedural Sedation and the Australian and New Zealand College of Anaesthetists (ANZCA) PS09 Guidelines on Sedation and/or Analgesia for Diagnostic and Interventional Medical, Dental or Surgical Procedures.

It includes:

- Pre-procedure patient assessment & risk stratification
- Monitoring and practical airway management
- Safe use of drugs and assessing levels of sedation
- Post procedure monitoring and discharge

To enroll, visit [Safe Procedural Sedation](#)

Trainees are required to submit their certificate of completion to the ACCSM Education officer.

## Cosmetic Surgery Training Program: Liposuction Training

### Description

The Liposuction training is a multi-modal course featuring didactic presentations, hands on patient assessments, and pre-operative marking out of patients. The Liposuction training is a two day training course, plus attendance in theatre, offered as follows:

One day Basic training for trainees to be completed during Stage 2 (7 - 12 Months) and one day Advanced training to be completed during Stage 3 (13-18 months) of the training program and sits in addition to and complements key area 7 of the curriculum.

Both basic and advanced liposuction training are interactive, including didactic lectures, hands on training in theatre and review of cases. After attending both Basic and Advanced training days and the in theatre requirement, trainees will have seen and learned the most common presentation of Liposuction cases seen in cosmetic practice.

The fees to attend this off-site training is included in the training program fee.

### Liposuction training - Basic

Learning Outcomes: To teach the basics of Tumescant Liposuction and Liposculpture under Local Anaesthetic.

### Liposuction training – Basic – Example of Day Program

#### Lectures

- Overview of ACCSM Liposuction Training
- Regulatory Environment for liposuction and Professional Indemnity
- Patient Selection
- Review of patient's previous procedure
- Tumescant L.A. & Xylocaine Metabolism
- Tumescant v "Wet Technique" with Sedation or General Anaesthetic
- Improving Liposuction Outcomes – Informed Consent
- Managing Patient Expectations
- Managing Complications
- Review of Marking of patient – the key to successful Liposuction
- Preparing the patient for Liposuction
- Discuss cannulas, shape, tip design, calibre
- Energy Assisted Liposuction Devices
- How to achieve optimal results avoid pitfalls in Liposuction of the Abdomen
- How to achieve optimal results avoid pitfalls in Liposuction of the Thighs
- Review of ACCSM Liposuction Training Basic

#### Practical (in theatre)

Attendance in Theatre. Candidates will be assigned to Preceptors theatre lists for in theatre experience. A Liposuction logbook will be provided to trainees to evidence cases.

- Marking of First Patients – Abdomen, flanks, hips and waist, male and female outer thigh.
- Liposuction of the Abdomen

- Liposuction of the hips, flanks and muffin top

### **Liposuction Training – Advanced**

Training, dealing with more complex cases.

After the completion of the Advanced training there is a 2 - hour MCQ exam formative assessment with the pass mark set at 70%.

## **Liposuction Training – Advanced – Example of Day Program**

### **Lectures**

- Liposuction of chin/neck - how to achieve optimal results and avoid complications.
- Female breast reduction by Tumescent Liposuction
- Male breast reduction Gynaecomastia v Fatty Breast
- Liposuction of Arms - how to achieve optimal results and avoid pitfalls
- Liposuction of inner thigh and knee
- Fat reduction devices efficacy
- Lipoedema
- Follow up of the previous cases – Panel discussion
- Improving Liposuction Outcomes – Post operative management
- Early identification and management of complications
- What is BBL? - and what are the risks
- Discussion – Review of Training
- MCQ Examination

### **Practical (in theatre)**

Attendance in Theatre. Candidates will be assigned to Preceptors theatre lists for in theatre experience. A Liposuction logbook will be provided to trainees to evidence cases.

- Review preoperative marking; Abdomen, flanks, waist and hips
- Marking and Liposuction of female and male abdomen
- Marking and liposuction of Outer and Inner Thigh
- Marking and liposuction of Flanks/Hips
- Marking and Liposuction of Neck/Chin
- Marking and Liposuction of Arms
- Marking and liposuction of the male chest

## 10. Reading List

To support trainees with their training and education, the following reading list which includes mandated (are for assessment) and suggested resources has been approved by the BOC:

| Topic       | Name of resource                                                                                                                                            | Access link                                                             | Evidence of learning       |
|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------|
| ATSI Health | Communication effectively with ATSI Peoples                                                                                                                 | <a href="#">Communicating with ATSI peoples</a>                         | Reflective oral assessment |
| ATSI Health | ATSI Patient Care Guideline                                                                                                                                 | <a href="#">Patient Care Guideline</a>                                  | Reflective oral assessment |
| ATSI Health | Cultural Safety in the Workplace                                                                                                                            | <a href="#">Cultural Safety in the Workplace</a>                        | Reflective oral assessment |
| General     | Foad Nahai's 3 volume textbook on Aesthetic Surgery                                                                                                         |                                                                         | Nil                        |
| General     | Sherrell Ashton's textbook on Aesthetic Surgery                                                                                                             |                                                                         | Nil                        |
| General     | Grabb and Smith's Plastic Surgery 6 <sup>th</sup> Edition<br><br>Sherrell Aston, Robert Beasley, Charles Thorne<br><br>Lippincott Williams and Wilkins 2006 |                                                                         | Nil                        |
| General     | Aesthetic Plastic Surgery 2 <sup>nd</sup> Edition (2 volumes)<br><br>Rees and LaTrenta<br><br>Saunders 1994                                                 |                                                                         | Nil                        |
| Liposuction | Refinements in Facial and Body Contouring<br><br>Luiz S. Toledo                                                                                             |                                                                         | Nil                        |
| Liposuction | Tumescent Technique – Tumescent Anaesthesia & Microcanula Liposuction<br><br>Jeffrey A. Klein<br><br>Mosby 2000                                             | Via ACCSM Training Portal<br><br><a href="#">If enrolled click here</a> | Nil                        |
| Breast      | Breast Augmentation: Principles and Practice<br><br>Melvin A. Shiffman<br><br>Springer 2009                                                                 |                                                                         | Nil                        |



|                                       |                                                                                                                                                |                                                                                                                                                      |     |
|---------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| <b>Breast</b>                         | Surgery of the Breast – Principles and Art (2 volumes)<br>Spear, Willey, Robb, Hammond and Nahabedian<br>Lippincott, Williams and Wilkins 2005 |                                                                                                                                                      | Nil |
| <b>Abdominoplasty</b>                 | Atlas of Abdominoplasty (Techniques in Aesthetic Plastic Surgery)<br>Joseph Hunstad<br>Suanders 2008                                           |                                                                                                                                                      | Nil |
| <b>Rhinoplasty</b>                    | Aesthetic Rhinoplasty (2 Volumes)<br>Sheen & Sheen<br>QMP 1998                                                                                 |                                                                                                                                                      | Nil |
| <b>Face</b>                           | Facial Plastic and reconstructive Surgery. 2 <sup>nd</sup> Edition<br>Papael, Frodel, Holt, Larrabee and Nachlas<br>Thieme 2009                |                                                                                                                                                      | Nil |
| <b>Peer reviewed medical journals</b> | Journal of Cometic Dermatology                                                                                                                 | <a href="#">Journal of Cosmetic Dermatology</a>                                                                                                      | Nil |
| <b>Peer reviewed medical journals</b> | Aesthetic Surgery Journal                                                                                                                      | The college has online institutional access. Trainees wishing to view an article, should contact the college for complimentary access to be granted. | Nil |
| <b>Peer reviewed medical journals</b> | Dermatologic Surgery                                                                                                                           | <a href="https://journals.lww.com/dermatologicsurgery/pages/default.aspx">https://journals.lww.com/dermatologicsurgery/pages/default.aspx</a>        | Nil |
| <b>Peer reviewed medical journals</b> | American Journal of Cosmetic Surgery                                                                                                           | <a href="https://journals.sagepub.com/home/acsa">https://journals.sagepub.com/home/acsa</a>                                                          | Nil |
| <b>Peer reviewed medical journals</b> | Journal of Plastic Reconstructive and Aesthetic Surgery                                                                                        | <a href="https://www.jprasurg.com/">https://www.jprasurg.com/</a>                                                                                    | Nil |
| <b>Online learning Resource</b>       | IMCAS Academy                                                                                                                                  | The College offer a one off AU\$250 subsidy if trainees choose to join                                                                               | Nil |

|  |  |                                                                                           |  |
|--|--|-------------------------------------------------------------------------------------------|--|
|  |  | <a href="https://www.imcas.com/en/academy/home">https://www.imcas.com/en/academy/home</a> |  |
|--|--|-------------------------------------------------------------------------------------------|--|

# 11. Mapping of Curriculum Content to Evidence of Learning

Assessment templates will be available in your Google Classroom Training Portfolio.

| Sub-topic |                                                                                       | Evidence of Learning                             |
|-----------|---------------------------------------------------------------------------------------|--------------------------------------------------|
| 1.1.1     | Evolution of current procedures                                                       | Written Task                                     |
| 1.1.2     | Divergence of Cosmetic and Plastic/Reconstructive Surgery                             | Oral Assessment                                  |
| 1.2.1     | Scope of practice                                                                     | Oral Assessment                                  |
| 1.3.1     | Key distinctions, and considerations in Cosmetic Surgery                              | Oral Assessment                                  |
| 1.3.2     | Ethics and the Cosmetic Surgery Proceduralist                                         | Routine Evidence<br>(attend ACCSM induction day) |
| 1.3.3     | The role of continuing professional development and ethical Cosmetic Surgery practice | Oral Assessment                                  |
| 1.4.1     | Assessing patients                                                                    | Reflective Exercise                              |
| 1.4.2     | Medical Contraindications                                                             | Reflective Exercise                              |
| 1.4.3     | Psychosocial Considerations and Contraindications                                     | Reflective Exercise                              |
| 1.4.4     | Patient History of Previous Cosmetic Procedures                                       | Reflective Exercise                              |
| 1.4.5     | Economic Circumstances and Impacts on Treatment and Care                              | Oral Assessment                                  |
| 1.4.6     | Impact of Age on Patient Selection                                                    | Oral Assessment                                  |
| 1.4.7     | Ethnic and cultural considerations                                                    | Oral Assessment                                  |
| 1.5.1     | Pre-operative patient management and optimisation                                     | Oral Assessment                                  |
| 1.5.2     | Safe use of anaesthesia and sedation                                                  | Routine Evidence<br>(Safe Sedation Course)       |
| 1.5.3     | Prevention and Management of common surgical complications                            | Reflective Exercise                              |
| 1.5.4     | DVT and PE Management and Prevention                                                  | Reflective Exercise                              |
| 1.5.5     | Infection Control and Appropriate Use of Antibiotics                                  | Written Task                                     |
| 1.5.6     | Pain Management                                                                       | Reflective Exercise                              |
| 1.5.7     | Selection of Appropriate Surgical Locations                                           | Oral Assessment                                  |
| 1.5.8     | The Role of the Cosmetic Surgery Proceduralist in Managing Surgical Emergencies       | Practical Activity                               |

|       |                                                                          |                                                     |
|-------|--------------------------------------------------------------------------|-----------------------------------------------------|
| 1.5.9 | Management of Anaphylaxis and Cardiac Emergencies                        | Routine Evidence<br>(advanced life support course)  |
| 1.6.1 | Working in a multi-disciplinary environment                              | Oral Assessment                                     |
| 1.6.2 | Identification of Suitable Sources for collaboration                     | Oral Assessment                                     |
| 1.6.3 | Establishing a Referral Network                                          | Oral Assessment                                     |
| 1.6.4 | Establishing an evidence base for your practice                          | Routine Evidence –<br>Participation at Journal Club |
| 2.1.1 | Tailoring communications                                                 | Oral Assessment                                     |
| 2.1.2 | Taking an appropriate patient history                                    | Reflective Exercise                                 |
| 2.1.3 | Maintaining appropriate patient records                                  | Reflective Exercise                                 |
| 2.1.4 | Considering the patient's desired outcomes                               | Reflective Exercise                                 |
| 2.1.5 | Effectively communicating risks                                          | Practical Activity                                  |
| 2.1.6 | Effectively communicating post-operative instructions                    | Practical Activity                                  |
| 2.1.7 | Presenting alternatives to surgery                                       | Practical Activity                                  |
| 2.1.8 | Communicating effectively with other healthcare and administrative staff | Practical Activity                                  |
| 2.2.1 | Key elements of informed consent                                         | Practical Activity                                  |
| 2.2.2 | Operative consent                                                        | Practical Activity                                  |
| 2.2.3 | Considerations for financial consent                                     | Oral Assessment                                     |
| 2.2.4 | Consent for the involvement of other surgeons, trainees, and assistants  | Oral Assessment                                     |
| 2.3.1 | Pre-operative management of expectations                                 | Oral Assessment                                     |
| 2.3.2 | Calibrating patient expectations                                         | Oral Assessment                                     |
| 2.3.3 | Management of post-operative dissatisfaction                             | Oral Assessment                                     |
| 2.3.4 | Revision surgery                                                         | Oral Assessment                                     |
| 2.4.1 | Management of a practice that supports high quality patient care         | Reflective Exercise                                 |
| 2.4.2 | Seeking professional support                                             | Oral Assessment                                     |
| 3.1.1 | Normal skin anatomy and physiology                                       | Oral Assessment                                     |

|       |                                                                                                              |                                                                                              |
|-------|--------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 3.2.1 | Wound healing and management                                                                                 | Standard Oral Assessment                                                                     |
| 3.3.1 | Identification of common skin pathologies                                                                    | Medical Exam Content                                                                         |
| 3.3.2 | Management of common skin pathologies                                                                        | Oral Assessment                                                                              |
| 3.4.1 | Identification of common skin manifestations of internal diseases                                            | Oral Assessment                                                                              |
| 3.4.2 | Contributing to the management of skin pathologies                                                           | Oral Assessment                                                                              |
| 3.5.1 | Biological process in scar formation                                                                         | Written Task                                                                                 |
| 3.5.2 | Management of scars                                                                                          |                                                                                              |
| 3.6.1 | Normal v. abnormal pigmentation changes                                                                      | Oral Assessment                                                                              |
| 3.6.2 | Treatment options for pigmentation changes                                                                   | Oral Assessment                                                                              |
| 3.7.1 | Selection and use of appropriate antibiotics                                                                 | Standard Oral Assessment                                                                     |
| 4.1.1 | Blood supply and innervation of the face                                                                     | Set Oral Assessment                                                                          |
| 4.1.2 | Facial musculature and the course and distribution of nerves of the face                                     |                                                                                              |
| 4.1.3 | The Fascial Planes of the Face and the Brow and the Pattern of Facial Components of the Brow, Face, and Neck |                                                                                              |
| 4.1.4 | Aesthetic facial assessment                                                                                  | Routine Evidence<br>(attending injectable workshop both toxin and filler)                    |
| 4.2.1 | Skin Changes associated with aging                                                                           | Oral Assessment                                                                              |
| 4.2.2 | Age related fat loss                                                                                         |                                                                                              |
| 4.2.3 | Age related changes in ligamental support                                                                    |                                                                                              |
| 4.2.4 | Age related muscle and bone atrophy                                                                          |                                                                                              |
| 4.2.5 | The impact of sun exposure on the aging process                                                              |                                                                                              |
| 4.3.1 | Procedure specific anatomy of the face and neck                                                              | Set Oral Assessment                                                                          |
| 4.3.2 | Face and neck lifting procedures                                                                             | EPA (4.3.2 iv)                                                                               |
| 4.3.3 | Adjunctive Facial Procedures                                                                                 | Oral Assessment<br>Routine Evidence<br>(attending injectable workshop both toxin and filler) |

|       |                                                         |                                                                            |
|-------|---------------------------------------------------------|----------------------------------------------------------------------------|
| 4.3.4 | Facial Implants                                         | Oral Assessment                                                            |
| 4.3.5 | Management of complications of face and neck procedures | Set Oral Assessment<br>Practical Activity                                  |
| 4.3.6 | Specific considerations for brow lift procedures        | Oral Assessment                                                            |
| 4.4.1 | Surgical and functional anatomy of the eye              | Set Oral Assessment                                                        |
| 4.4.2 | Patient specific considerations                         |                                                                            |
| 4.4.3 | Eye assessments                                         | Practical Activity                                                         |
| 4.4.4 | Surgical procedures of the eyelid                       | Set Oral Assessment<br>Entrustable Professional Activity                   |
| 4.4.5 | Management of complications of blepharoplasty procedure | Oral Assessment                                                            |
| 4.5.1 | Surgical anatomy of the ear                             | Oral Assessment                                                            |
| 4.5.2 | Patient specific considerations                         | Oral Assessment                                                            |
| 4.5.3 | Surgical procedures related to the ear                  | Oral Assessment<br>Entrustable Professional Activity                       |
| 4.6.1 | Surgical and functional anatomy of the nose             | Standard Oral Assessment                                                   |
| 4.6.2 | Patient specific considerations                         |                                                                            |
| 4.6.3 | Surgical procedures for rhinoplasty                     | Oral Assessment<br>Entrustable Professional Activity                       |
| 4.7.1 | Specific anatomy relevant to the chin                   | Oral Assessment                                                            |
| 4.7.2 | Surgical Procedures for the chin                        | Oral Assessment<br>Practical Activity<br>Entrustable Professional Activity |
| 5.1.1 | Surgical anatomy and physiology of the breast           | Oral Assessment                                                            |
| 5.1.2 | Aesthetic considerations of the breast                  |                                                                            |

|       |                                                          |                                                                                |
|-------|----------------------------------------------------------|--------------------------------------------------------------------------------|
| 5.2.1 | Physical breast assessment                               | Practical Activity                                                             |
| 5.2.2 | Psychosocial assessment                                  | Oral Assessment                                                                |
| 5.3.1 | Pre-surgical considerations                              | Set Oral Assessment                                                            |
| 5.3.2 | Augmentation mammoplasty                                 | Standard Oral Assessment<br>Entrustable Professional Activity                  |
| 5.3.3 | Mastopexy/Reduction mammoplasty                          | Oral Assessment                                                                |
| 5.3.4 | Augmentation mastopexy                                   | Oral Assessment                                                                |
| 5.3.5 | Assessment and correction of congenital breast deformity | Oral Assessment<br>Entrustable Professional Activity                           |
| 5.4.1 | Pre-surgical considerations for breast surgery           | Oral Assessment                                                                |
| 5.4.2 | Gynaecomastia procedures                                 | Entrustable Professional Activity                                              |
| 5.5.1 | Procedures in Nipple and Areolar Surgery                 | Oral Assessment                                                                |
| 6.1.1 | Anatomy and Physiology of the Abdominal Wall             | Set Oral Assessment                                                            |
| 6.1.2 | Common abnormalities of the abdominal wall               |                                                                                |
| 6.2.1 | Assessing patient suitability                            | Practical Activity                                                             |
| 6.3.1 | Abdominoplasty procedures                                | Set Oral Assessment<br>Entrustable Professional Activity<br>Practical Activity |
| 6.3.2 | Complications of abdominal surgery                       | Standard Oral Assessment                                                       |
| 7.1.1 | Historical development of liposuction                    | Oral Assessment                                                                |
| 7.2.1 | Soft tissue anatomy and physiology                       | Oral Assessment                                                                |
| 7.2.2 | Pharmacology                                             | Set Oral Assessment                                                            |

|       |                                                            |                                                      |
|-------|------------------------------------------------------------|------------------------------------------------------|
| 7.3.1 | Assessing patient suitability                              | Practical Activity                                   |
| 7.4.1 | Indications and contraindications                          | Oral Assessment                                      |
| 7.4.2 | Techniques and technologies in lipoplasty                  | Oral Assessment<br>Entrustable Professional Activity |
| 7.4.3 | Postoperative care and complication management             | Oral Assessment                                      |
| 8.1.1 | Pre-operative assessment and management                    | Oral Assessment                                      |
| 8.1.2 | Specific safety considerations for body contouring surgery |                                                      |
| 8.2.1 | Procedure specific anatomy and physiology                  | Oral Assessment                                      |
| 8.2.2 | Brachioplasty procedures                                   |                                                      |
| 8.3.1 | Anatomy and physiology of thighplasty                      | Oral Assessment                                      |
| 8.3.2 | Thighplasty procedures                                     | Oral Assessment                                      |
| 9.1.1 | Soft tissue anatomy and physiology                         | Oral Assessment                                      |
| 9.2.1 | Physical assessment for labiaplasty                        | Oral Assessment                                      |
| 9.2.2 | Psychosocial assessment for labiaplasty                    |                                                      |
| 9.2.3 | Labiaplasty procedures                                     | Set Oral Assessment                                  |

## 12. Completion of training

Completion of the Training Program leads to certification as a Fellow of the College FACCSM (Surg). Fellowship is awarded after all training program requirements are met.

For further information on progression to fellowship of the college, refer to the [Admission to Fellowship Policy](#)

This policy outlines the training, assessment, and admission requirements for Fellowship of the ACCSM Faculty of Surgery.



## 13. Training Program Policies and Procedures

### Recognition of Prior Learning

Applications for recognition of prior learning will be accepted from trainees who have met the standard eligibility criteria for entry into the Cosmetic Surgery Training Program.

Applications must be made at the time of enrolling into the ACCSM Cosmetic Surgery Training Program. It must be made prior to the commencement of the specific scheduled training rotation to which the RPL application applies.

Applications for RPL will not be considered for Examinations.

Applications must be made in writing including a cover letter which specifies the learning, experience, or training requirement that the trainee is applying for recognition. The onus is on the applicant to demonstrate how the previous achievement is proportionate with the Cosmetic Surgery Training Program requirement and attach evidence (certified documentation, extracts from training program handbooks etc) which supports the application.

Assessment of applications for RPL and notification of outcomes are the responsibility of the ACCSM Board of Censors.

The Board of Censors will assess each application on a case-by-case basis, and the outcome will be dependent on whether the evidence provided by the applicant can substantiate the achievement of competence comparable to those required for the ACCSM Cosmetic Surgery Training Program.

Trainees will be advised of the outcome in writing.

For more information refer to Recognition of prior learning policy on the College website.

### Flexible Training

The Flexible Training Policy sets out the conditions for applications for periods of flexible or interrupted training. This policy applies to all trainees requiring flexible training options. This includes provisions for part-time training, and interruptions to training.

Flexible training includes:

- Part time training.
- Parental and carers' leave.
- Deferring commencement.
- Leave for other training.
- Medical and wellbeing leave; and
- Other personal leave.

Trainees wishing to apply for Flexible training, should refer to the Flexible Training Policy and the Flexible Training Procedure available on the College website.

### Remediation in Training Policy

This policy outlines the principles for all stakeholders of the ACCSM to support trainees who are not performing or progressing at a rate expected of a trainee undertaking the cosmetic surgery training program.

The policy supports the ACCSM Remediation in Training Procedure which provides details on the process for trainees subject to monitoring and remediation of performance and progression in the training program.

For more information, refer to the Remediation Procedure and Remediation in Training Policy.

## Withdrawal from Training Policy

This policy outlines the mechanisms by which a trainee may be withdrawn from the training program where failure to progress or perform is identified by the College. The policy includes procedural steps that must be followed by the trainee and the ACCSM.

For more information, refer to the Withdrawal of Training Policy on the College website.

## Special Considerations in Training and Assessment

This policy provides the circumstances and mechanisms by which trainees may apply for special consideration for variations to the ACCSM Cosmetic Surgery Training Program. Under this policy, trainees are required to apply and disclose circumstances that may impact their training and assessments to allow ACCSM to provide the appropriate support and planning for assistance.

All applications for special consideration should follow the Special Considerations Procedure

and the [Special Consideration Application](#) form should be completed and submitted to [admin@accsm.org.au](mailto:admin@accsm.org.au)

For more information and to access the policy, visit the College website: [Special Considerations Policy](#)

# 14. General Policies, Guideline and Procedures

## Reconsideration, Review and Appeals Policy

This Policy documents the mechanisms for Reconsideration, Review and Appeal for any members or stakeholder affected by a decision of the ACCSM.

It provides a clear pathway to resolve concerns for those who have been subject to a college decision which they consider unsatisfactory.

In doing so, members or stakeholders can be assured that due processes were followed in reaching and reviewing those decisions, and that proper consideration was given to evidence presented and available to the ACCSM in relation to those decisions.

The Reconsideration, Review and Appeal of a decision also assists the College with continuous quality assurance by assessing the adequacy of decision-making processes.

For more information, refer to the policy [Reconsideration, Review and Appeals Policy](#) on the College website.

# 15. Trainee Supports and well-being

The College is committed to the well-being of its trainees enrolled in the Cosmetic Surgery Training Program.

The following supports are available:

1. ACCSM Education Officer: to assist with administrative advice and support, trainee progression, policies and procedures, assessments, rotations, flexible training arrangements, and examinations.
2. Dean, Faculty: to assist with trainee advice, progression, and twice annual trainee updates.
3. Censor in Chief: to assist with examinations.
4. Employee Assistance Program (EAP): [Access EAP](#) is available for all trainees to access.
5. Grievance Policy: This policy defines the process for ACCSM members and employees to raise issues relating to bullying, discrimination and harassment and any offences of victimisation and defamation. It identifies the roles and responsibilities of the College and its members in relation to bullying, discrimination and harassment; and sets out the process for raising a grievance and the possible consequences for any stakeholder who engages in bullying, discrimination, or harassment of another stakeholder. For more information, refer to [Grievance Policy](#)

6. Complaints Policy: This policy sets out the circumstances where a general complaint may be made regarding the training program and the process ACCSM will use to seek resolution of that complaint. For further information, refer to Complaints Policy on the College website.

Trainees can apply to the Board of Censors as a junior member. For more information about the BOC, refer to [Board of Censors Terms of Reference](#)

| Document history     |                            |
|----------------------|----------------------------|
| This version drafted | March 2024                 |
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| Approved             | By Council – 22 March 2024 |
| Effective            | 1 July 2024                |



## Raising Standards – Protecting Patients

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### Appendix 1. ACCSM Cosmetic Surgery Curriculum Map to Assessment

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| Key Area 1: Introduction to Cosmetic Surgery                    |                                                                                                                                                                          | Assessment               |
|-----------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| Topic 1: History                                                |                                                                                                                                                                          |                          |
| 1.1.1 Evolution of current procedures                           | i. Understand the historical context and milestones in the development of cosmetic surgery procedures.                                                                   | Short report             |
|                                                                 | ii. Identify the key technological advancements that have contributed to the evolution of current cosmetic surgery procedures                                            |                          |
|                                                                 | iii. Analyse the impact of societal, cultural, and technological factors on the evolution of cosmetic surgery and the expectations of patients seeking these procedures. |                          |
|                                                                 | iv. Evaluate the ethical considerations associated with the evolution of cosmetic surgery procedures                                                                     |                          |
|                                                                 | v. Explain the roles and responsibilities of different healthcare professionals in the execution of multi-disciplinary cosmetic surgery procedures                       |                          |
|                                                                 | vi. Identify the advantages and challenges associated with multi-disciplinary approaches in cosmetic surgery.                                                            |                          |
|                                                                 | vii. Explain how the integration of multiple disciplines in cosmetic surgery can enhance outcomes for patients                                                           |                          |
| 1.1.2 Divergence of Cosmetic and Plastic/Reconstructive Surgery | i. Differentiate between cosmetic surgery and plastic/reconstructive surgery based on their historical development and distinct goals.                                   | Standard oral assessment |
|                                                                 | ii. Describe the factors that have contributed to the divergence of cosmetic and plastic/reconstructive surgery.                                                         |                          |
|                                                                 | iii. Identify the general limitations of cosmetic and plastic/reconstructive surgery procedures                                                                          |                          |
|                                                                 | iv. Understand the different needs and motivations of patients seeking cosmetic surgery versus plastic/reconstructive surgery procedures.                                |                          |

|                                                                |                                                                                                                                                                                                                                               |                          |
|----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
|                                                                | v. Critically assess the ethical and legal implications arising from the divergence of cosmetic and plastic/reconstructive surgery procedures.                                                                                                |                          |
| Topic 2: Scope of Practice                                     |                                                                                                                                                                                                                                               |                          |
| 1.2.1 Scope of Practice                                        | i. Discuss Scope of practice and its component parts – education and training,<br>certification, clinical experience, recency of practice and Continuing Professional Development.                                                            | Standard oral assessment |
|                                                                | ii. Appreciate the importance of Scope of practice in the Australian context where fields of practice are limited by medical practitioner self-regulation rather than regulatory prescription.                                                |                          |
|                                                                | iii. Understand that scope of practice expands with additional education and training, additional certification, continuing professional development and broadening clinical experience and diminishes in the absence of recency of practice. |                          |
|                                                                | iv. Understand the scope of practice appropriate for doctors who have completed the ACCSM Cosmetic Surgery Training Program and pathways for broadening of a graduate's scope of practice.                                                    |                          |
|                                                                | v. Recognise that limits of one's individual competencies and self-regulating one's scope of practice is essential in keeping the Australian public safe.                                                                                     |                          |
| Topic 3: Ethics, Safety and the Cosmetic Surgery patient       |                                                                                                                                                                                                                                               |                          |
| 1.3.1 Key distinctions, and considerations in Cosmetic Surgery | i. Differentiate cosmetic surgery from other surgical branches by recognising its primary focus on aesthetic improvement rather than the resolution of organic diseases.                                                                      | Standard oral assessment |
|                                                                | ii. Recognise that the measure of success in cosmetic surgery in cosmetic surgery is reliant on patient satisfaction which is subjective and multifactorial.                                                                                  |                          |

|                                                     |                                                                                                                                                                                                            |                          |
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|                                                     | iii. Appreciate differences in the risk-benefit ratio in cosmetic surgery, acknowledging its highly elective nature.                                                                                       |                          |
| 1.3.2 Ethics and the Cosmetic Surgery Proceduralist | i. Understand why specific ethics training is important in cosmetic surgery                                                                                                                                | Standard oral assessment |
|                                                     | ii. Recognise that doctors must be held to a higher ethical standard due to the unquestioning trust by patients that the advice and treatments provided are given in the patient's best interest.          |                          |
|                                                     | iii. Define ethical practice and describe how this relates to the concepts of patient autonomy, beneficence, non-maleficence, and justice.                                                                 |                          |
|                                                     | iv. Recognise the potential conflict between the best interests of the patient and the financial interests of the doctor and develop strategies to mitigate this whenever treatment or advice is provided. |                          |
|                                                     | v. Understand the doctors' ethical obligations in the corporate context and the need to advocate for the patient when a conflict of interest arises.                                                       |                          |
|                                                     | vi. Recognise the doctors' ethical obligations in advertising and the requirement to advertise within the guidelines set by statutory authorities, including AHPRA.                                        |                          |
| Topic 4: Considerations for patient selection       |                                                                                                                                                                                                            |                          |
| 1.4.1 Assessing patients                            | i. Assess whether a patient is a suitable candidate for cosmetic surgery based on their medical history, physiological factors, and aesthetic goals.                                                       | Reflective Exercise      |
| 1.4.2 Medical Contraindications                     | i. Identify common medical contraindications that may affect a patient's suitability for cosmetic surgery.                                                                                                 | Reflective Exercise      |
|                                                     | ii. Apply strategies of assessing and managing medical contraindications in the context of patient selection for cosmetic surgery.                                                                         |                          |

|                                                                |                                                                                                                                                                                                                                         |                          |
|----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
|                                                                | iii. Evaluate the potential impact of pre-existing medical conditions on the safety and outcomes of cosmetic surgery procedures.                                                                                                        |                          |
| 1.4.3 Psychosocial Considerations and Contraindications        | iv. Recognise the influence of psychosocial factors on patient suitability for outcomes in cosmetic surgery.                                                                                                                            | Reflective Exercise      |
|                                                                | v. Assess the impact of social supports, including family, friends, and psychological support, on the decision-making process, post-surgical recovery, and satisfaction of patients.                                                    |                          |
|                                                                | vi. Identify psychosocial indications, including realistic expectations, emotional stability, and adequate support systems, that contribute to positive surgical outcomes.                                                              |                          |
|                                                                | vii. Assess psychological contraindications using assessment tools, including unrealistic expectations and body dysmorphia that may indicate the need for additional assessment or intervention before proceeding with cosmetic surgery |                          |
| 1.4.4 Patient History of Previous Cosmetic Procedures          | i. Evaluate the significance of a patient's prior cosmetic medical and surgical history (including the outcomes of previous consultations with other cosmetic surgeons) in the context of patient selection for future procedures.      | Reflective Exercise      |
|                                                                | ii. Analyse the potential impact of previous cosmetic surgeries, including outcomes, complications, and patient satisfaction, on the decision-making process for subsequent procedures.                                                 |                          |
|                                                                | iii. Assess the need for additional pre-operative evaluation or adjustments in surgical planning based on the patient's prior cosmetic history.                                                                                         |                          |
|                                                                | iv. Develop strategies for effectively communicating with patients about their prior cosmetic history and managing expectations for future procedures.                                                                                  |                          |
| 1.4.5 Economic Circumstances and Impacts on Treatment and Care | i. Evaluate the potential influence of economic factors on treatment choices, including the selection of procedures, choice of surgeon, or decision to postpone or forego surgery.                                                      | Standard oral assessment |



|                                                         |                                                                                                                                                                                                   |                                                          |
|---------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
|                                                         | ii. Evaluate the ethical implications of economic disparities in cosmetic surgery patients and their potential impact on patient outcomes.                                                        |                                                          |
| 1.4.6 Impact of Age on Patient Selection                | iii. Describe the age-related considerations that may affect patient selection for cosmetic surgery, including physiological changes, healing capacity, and cognitive competency.                 | Standard oral assessment                                 |
|                                                         | iv. Assess the potential risks and benefits of cosmetic surgery in different age groups and evaluate the appropriateness of surgical interventions based on age-related factors.                  |                                                          |
|                                                         | v. Understand the legal and ethical implications related to age-related patient selection and informed consent in cosmetic surgery.                                                               |                                                          |
| 1.4.7 Ethnic and cultural considerations                | i. Appreciate variations in ethnic and cultural considerations of aesthetics                                                                                                                      | Standard oral assessment                                 |
|                                                         | ii. Demonstrate appropriate cultural awareness and sensitivity in patient interactions                                                                                                            | Routine evidence: Cultural awareness training completion |
|                                                         | iii. Appreciate that the risks of surgical procedures (scarring and pigmentation) may vary between patients from different ethnic backgrounds                                                     | Standard oral assessment                                 |
| Topic 5: Patient Safety                                 |                                                                                                                                                                                                   |                                                          |
| 1.5.1 Pre-operative patient management and optimisation | i. Recognise the importance of pre-operative optimization in ensuring patient safety in cosmetic surgery.                                                                                         | Standard oral assessment                                 |
|                                                         | ii. Evaluate the impact of modifiable risk factors, on surgical outcomes and complications.                                                                                                       |                                                          |
|                                                         | iii. Use appropriate referral pathways to direct patients to pre-operative interventions, including smoking cessation programs, nutritional support, and management of chronic health conditions. |                                                          |
| 1.5.2 Safe use of anaesthesia and sedation              | iv. Understand the principles and techniques of anaesthesia and sedation commonly used in cosmetic surgery procedures                                                                             | Routine evidence: Safe Sedation course                   |

|                                                                  |                                                                                                                                                                                                 |                            |
|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|
|                                                                  | v. Identify potential complications and adverse events associated with anaesthesia and sedation in the context of cosmetic surgery.                                                             | completion                 |
|                                                                  | vi. Identify strategies to mitigate the risks and ensure patient safety during anaesthesia and sedation procedures.                                                                             |                            |
| 1.5.3 Prevention and Management of common surgical complications | i. Describe appropriate use of emergency protocols and interventions in the event of anaesthesia-related complications.                                                                         | Reflective Exercise        |
|                                                                  | ii. Discuss the principles of infection control, aseptic technique, and wound care and describe how these reduce the risk of complications.                                                     |                            |
|                                                                  | iii. Identify strategies for prevention, early detection, and prompt management of infections, bleeding, and wound breakdown in cosmetic surgery.                                               |                            |
|                                                                  | iv. Apply appropriate wound care protocols, use of dressings, and follow-up care to promote optimal healing and minimize complications.                                                         |                            |
| 1.5.4 DVT and PE Management and Prevention                       | i. Recognise the risk factors for deep vein thrombosis (DVT) and pulmonary embolism in cosmetic surgery patients                                                                                | Reflective Exercise        |
|                                                                  | ii. Accurately describe the signs and symptoms of DVT/PE                                                                                                                                        |                            |
|                                                                  | iii. Apply appropriate strategies for DVT/PE risk assessment, prevention, diagnosis, and management in the perioperative period.                                                                |                            |
|                                                                  | iv. Understand the appropriate use of prophylactic measures, including patient preparation, pharmacological agents and mechanical interventions, to prevent DVT/PE in cosmetic surgery patients |                            |
|                                                                  | v. Implement appropriate interventions in case of suspected DVT.                                                                                                                                |                            |
| 1.5.5 Infection Control and Appropriate Use of Antibiotics       | i. Understand the principles of infection control and the importance of appropriate antibiotic use in cosmetic surgery.                                                                         | Written task: short report |
|                                                                  | ii. Evaluate the indications, selection, and administration of antibiotics for prophylaxis in cosmetic surgery.                                                                                 |                            |

|                                                   |                                                                                                                                                                                                                                                            |                          |
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|                                                   | <ul style="list-style-type: none"> <li>iii. Identify strategies to prevent the development and spread of healthcare-associated infections in the cosmetic surgical setting.</li> </ul>                                                                     |                          |
|                                                   | <ul style="list-style-type: none"> <li>iv. Describe the principles of antimicrobial stewardship and guidelines to optimise antibiotic use and minimise the risk of resistance and adverse events.</li> </ul>                                               |                          |
| 1.5.6 Pain Management                             | <ul style="list-style-type: none"> <li>i. Recognise the importance of effective pain management in cosmetic surgery for patient comfort and well-being.</li> </ul>                                                                                         | Reflective Exercise      |
|                                                   | <ul style="list-style-type: none"> <li>ii. Describe different pharmacological and non-pharmacological approaches to pain management in the perioperative and postoperative periods</li> </ul>                                                              |                          |
|                                                   | <ul style="list-style-type: none"> <li>iii. Apply appropriate strategies for tailored pain assessment and management plans based on patient needs and preferences.</li> </ul>                                                                              |                          |
|                                                   | <ul style="list-style-type: none"> <li>iv. Monitor and address potential complications and adverse effects associated with pain medications.</li> </ul>                                                                                                    |                          |
| 1.5.7 Selection of Appropriate Surgical Locations | <ul style="list-style-type: none"> <li>i. Understand the importance of selecting appropriate surgical locations for cosmetic procedures, considering patient safety and quality standards.</li> </ul>                                                      | Standard oral assessment |
|                                                   | <ul style="list-style-type: none"> <li>ii. Differentiate between accredited and licensed surgical facilities and their respective regulatory requirements</li> </ul>                                                                                       |                          |
|                                                   | <ul style="list-style-type: none"> <li>iii. Understand the role of national quality and safety commissions in ensuring patient safety and quality of care in cosmetic surgery.</li> </ul>                                                                  |                          |
|                                                   | <ul style="list-style-type: none"> <li>iv. Apply knowledge of regulatory standards and guidelines to make informed decisions regarding the selection of surgical facilities for cosmetic procedures.</li> </ul>                                            |                          |
|                                                   | <ul style="list-style-type: none"> <li>v. Evaluate the governance and supporting environment of clinical/surgical locations and use this information to support decisions about sites that are suitable for your practice and safe for patients</li> </ul> |                          |

|                                                                                       |                                                                                                                                                                                                         |                                                              |
|---------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
|                                                                                       | vi. Evaluate the models of practice in place at different surgical locations and use this information to support decisions about sites that are suitable for your practice and safe for patients        |                                                              |
| 1.5.8 The Role of the Cosmetic Surgical Practitioner in Managing Surgical Emergencies | i. Identify the potential surgical emergencies that may arise during or after cosmetic surgery procedures.                                                                                              | Practical Activity                                           |
|                                                                                       | ii. Demonstrate effective communication, teamwork, and decision-making skills in high-pressure situations                                                                                               |                                                              |
|                                                                                       | iii. Effectively manage common operative emergencies including: haemorrhage, airway compromise, respiratory depression, and local anesthetic toxicity.                                                  |                                                              |
|                                                                                       | iv. Effectively manage reactions to administered medications                                                                                                                                            |                                                              |
|                                                                                       | v. Understand the role and responsibilities of the healthcare team in responding to and managing surgical emergencies.                                                                                  |                                                              |
| 1.5.9 Management of Anaphylaxis and Cardiac Emergencies                               | i. Recognise the signs and symptoms of anaphylaxis and cardiac emergencies in the context of cosmetic surgery.                                                                                          | Routine evidence: completion of advanced life support course |
|                                                                                       | ii. Describe the principles and protocols for the management of anaphylaxis and cardiac emergencies, including early recognition, prompt intervention, and coordination with emergency medical services |                                                              |
|                                                                                       | iii. Effectively administer appropriate emergency treatments                                                                                                                                            |                                                              |
| <b>Topic 6: Collaborative patient care</b>                                            |                                                                                                                                                                                                         |                                                              |
| 1.6.1 Working in a multi-disciplinary environment                                     | i. Recognise the collaborative nature of multi-disciplinary procedures in cosmetic surgery, involving various medical specialties.                                                                      | Standard oral assessment                                     |
|                                                                                       | ii. Explain the roles and responsibilities of different healthcare professionals in the execution of multi-disciplinary cosmetic surgery procedures                                                     |                                                              |
|                                                                                       | iii. Identify the advantages and challenges associated with multi-disciplinary approaches in cosmetic surgery.                                                                                          |                                                              |

|                                                            |                                                                                                                                                                                                                                |                                                    |
|------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|
|                                                            | iv. Explain how the integration of multiple disciplines in cosmetic surgery can enhance outcomes for patients                                                                                                                  |                                                    |
| 1.6.2 Identification of Suitable Sources for collaboration | i. Recognise the importance of establishing a clinical support network in the context of providing comprehensive patient care in cosmetic surgery.                                                                             | Standard oral assessment                           |
|                                                            | ii. Develop strategies for effective communication and collaboration with the clinical support network to enhance patient outcomes and professional growth.                                                                    |                                                    |
|                                                            | iii. Identify suitable sources of support and advice, including experienced colleagues, mentors, professional organisations.                                                                                                   |                                                    |
|                                                            | iv. Critically evaluate how different healthcare professionals, can provide specialised support and advice in cosmetic surgery.                                                                                                |                                                    |
| 1.6.3 Establishing a Referral Network                      | i. Understand the significance of establishing a referral network to ensure appropriate and timely access to specialised care for patients in need.                                                                            | Standard oral assessment                           |
|                                                            | ii. Develop a network of healthcare professionals and specialists in various disciplines relevant to cosmetic surgery, including dermatology, ophthalmology, and psychiatry, for potential referral.                           |                                                    |
|                                                            | iii. Demonstrate effective referral management skills, including appropriate documentation, clear communication of patient information, and coordination of care, to optimise patient outcomes and continuity of care.         |                                                    |
| 1.6.4 Establishing an evidence base for your practice      | i. Review evolving surgical techniques and emerging technologies and assess the relevance and applicability to your practice                                                                                                   | Routine evidence:<br>Participation at journal club |
|                                                            | ii. Critically assess and evaluate scientific literature, including research studies, clinical trials, and scholarly publications, in order to make informed decisions and apply evidence-based practices in cosmetic surgery. |                                                    |

| Key Area 2: Fundamentals of Working with the Cosmetic Surgery Patient |                                                                                                                                                                                                                                                                                                                                                                       | Assessment               |
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| Topic 1: Communicating effectively for patient care                   |                                                                                                                                                                                                                                                                                                                                                                       |                          |
| 2.1.1 Tailoring communications                                        | i. Consider cultural, religious and linguistic requirements in identifying individual patient needs, preferences, and communication styles to tailor information effectively                                                                                                                                                                                          | Standard oral assessment |
|                                                                       | ii. Apply active listening skills to understand patients' concerns, questions, and expectations.                                                                                                                                                                                                                                                                      |                          |
|                                                                       | iii. Develop strategies for clear and empathetic communication to build trust and rapport with patients.                                                                                                                                                                                                                                                              |                          |
| 2.1.2 Taking an appropriate patient history                           | i. Effectively gather comprehensive medical and cosmetic histories from patients.                                                                                                                                                                                                                                                                                     | Reflective exercise      |
|                                                                       | ii. Identify relevant factors that may impact treatment options or outcomes based on the patient's history.                                                                                                                                                                                                                                                           |                          |
|                                                                       | iii. Apply appropriate questioning techniques to gather specific information related to cosmetic concerns and goals.                                                                                                                                                                                                                                                  |                          |
| 2.1.3 Maintaining appropriate patient records                         | iv. Appreciate the importance of maintaining clear and thorough medical records that include: <ul style="list-style-type: none"> <li>○ Patient history</li> <li>○ Records of examinations</li> <li>○ Procedural plans</li> <li>○ Discussion points engaged in during consultation</li> <li>○ Assessment of patient expectations and plans to address these</li> </ul> |                          |
| 2.1.4 Considering the patient's desired outcomes                      | i. Elicit and prioritize patients' desired cosmetic outcomes and expectations.                                                                                                                                                                                                                                                                                        | Reflective exercise      |

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|                                                                                | <ul style="list-style-type: none"> <li>ii. Manage patients' expectations by discussing achievable and realistic outcomes.</li> <li>iii. Apply empathetic communication to address patients' emotional and psychological aspects related to their desired outcomes</li> </ul> |                    |
| 2.1.5 Effectively communicating risks                                          | <ul style="list-style-type: none"> <li>i. Clearly communicate the potential risks and complications associated with cosmetic procedures including the likelihood of these occurrences</li> </ul>                                                                             | Practical Activity |
| 2.1.6 Effectively communicating post-operative instructions                    | <ul style="list-style-type: none"> <li>i. Communicate postoperative instructions and care guidelines clearly and comprehensively.</li> </ul>                                                                                                                                 | Practical Activity |
|                                                                                | <ul style="list-style-type: none"> <li>ii. Use strategies including providing written and visual materials to reinforce postoperative instructions.</li> </ul>                                                                                                               |                    |
|                                                                                | <ul style="list-style-type: none"> <li>iii. Address patient questions and concerns related to postoperative care and recovery.</li> </ul>                                                                                                                                    |                    |
| 2.1.7 Presenting alternatives to surgery                                       | <ul style="list-style-type: none"> <li>i. Describe treatment alternatives, including surgical and non-surgical options, to address patients' cosmetic concerns.</li> </ul>                                                                                                   | Practical Activity |
|                                                                                | <ul style="list-style-type: none"> <li>ii. Discuss the potential benefits and limitations of different treatment approaches</li> </ul>                                                                                                                                       |                    |
|                                                                                | <ul style="list-style-type: none"> <li>iii. Present “no surgery or treatment” as an alternative to surgery.</li> </ul>                                                                                                                                                       |                    |
|                                                                                | <ul style="list-style-type: none"> <li>iv. Provide patients with the opportunity to discuss and consider seeking a second opinion from another qualified medical practitioner</li> </ul>                                                                                     |                    |
|                                                                                | <ul style="list-style-type: none"> <li>v. Participate in shared decision-making with patients in the selection of the most suitable option.</li> </ul>                                                                                                                       |                    |
| 2.1.8 Communicating effectively with other healthcare and administrative staff | <ul style="list-style-type: none"> <li>i. Communicate and collaborate with other healthcare and administrative staff to ensure seamless coordination and patient-centred care within a cosmetic surgery practice.</li> </ul>                                                 | Practical Activity |
| Topic 2: Informed Consent                                                      |                                                                                                                                                                                                                                                                              |                    |

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| 2.2.1 Key elements of informed consent                                        | i. Describe the elements of informed consent, including the disclosure of risks, benefits, and alternatives to the proposed procedure.                                                                        | Practical Activity       |
|                                                                               | ii. Appreciate the importance of discussing pain management, expected recovery time, and the potential impact on daily activities as part of informed consent.                                                |                          |
|                                                                               | iii. Demonstrate the ability to obtain informed consent in a culturally sensitive and patient-centred manner, including the need to have a translator for patients whose English is not their first language. |                          |
| 2.2.2 Operative consent                                                       | i. Explain the potential risks and complications associated with the proposed cosmetic surgery procedures                                                                                                     | Practical Activity       |
|                                                                               | ii. Present the expected benefits and anticipated outcomes of the surgery based on the individual patient's characteristics and goals.                                                                        |                          |
|                                                                               | iii. Discuss alternative treatment options, including non-surgical options, and the option of no treatment.                                                                                                   |                          |
|                                                                               | iv. Assess patients' understanding of the information provided during the consent process and address any questions or concerns they may have.                                                                |                          |
| 2.2.3 Considerations for financial consent                                    | i. Appreciate the importance of discussing the financial aspects of cosmetic surgery, including the total cost, payment options, and potential need for revision surgery.                                     | Standard oral assessment |
|                                                                               | ii. Provide transparent information on additional costs, including anaesthesia fees, facility fees, and postoperative care expenses.                                                                          |                          |
|                                                                               | iii. Demonstrate sensitivity when discussing financial matters.                                                                                                                                               |                          |
| 2.2.4 Consent for the involvement of other surgeons, trainees, and assistants | i. Explain the roles and responsibilities of other surgeons, trainees, and assistants who may be involved in the surgical procedure.                                                                          | Standard oral assessment |
|                                                                               | ii. Appreciate the importance of obtaining patient consent for the involvement of any additional healthcare professionals or trainees in the surgery.                                                         |                          |



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|                                                    | iii. Address any concerns or preferences the patient may have regarding the involvement of other individuals in the surgical team.                                                                |                          |
| Topic 3: Management of patient expectations        |                                                                                                                                                                                                   |                          |
| 2.3.1 Pre-operative management of expectations     | i. Understand the importance of managing patient expectations before the cosmetic surgery procedure.                                                                                              | Standard oral assessment |
|                                                    | ii. Apply effective screening techniques to assess patient motivations, goals, and expectations.                                                                                                  |                          |
|                                                    | iii. Identify factors that may influence patient expectations, including psychological factors, social influences, and media portrayal of cosmetic surgery.                                       |                          |
|                                                    | iv. Engage in open and honest discussions with patients to align their expectations with realistic outcomes.                                                                                      |                          |
| 2.3.2 Calibrating patient expectations             | i. Employ effective communication techniques to calibrate patient expectations, ensuring they have a realistic understanding of the potential outcomes and limitations of the cosmetic procedure. | Standard oral assessment |
|                                                    | ii. Identify tools that are helpful in illustrating realistic expectations (e.g. before and after photos, photography apps and systems) and acknowledge their limitations.                        |                          |
|                                                    | iii. Provide evidence-based information on the success rates and potential complications of the cosmetic procedure to help patients make informed decisions                                       |                          |
| 2.3.3 Management of post-operative dissatisfaction | i. Recognise the potential for post-operative dissatisfaction in cosmetic surgery patients.                                                                                                       | Standard oral assessment |
|                                                    | ii. Apply strategies for addressing and managing patient dissatisfaction, including active listening, empathy, and problem-solving skills.                                                        |                          |
|                                                    | iii. Collaborate with patients to identify appropriate solutions to address areas of dissatisfaction, where feasible.                                                                             |                          |

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|                                                                        | iv. Demonstrate the ability to handle patient complaints and concerns in a professional and compassionate manner.                                                                                    |                          |
| 2.3.4 Revision surgery                                                 | i. Appreciate the need for and use of revision surgery in the context of cosmetic procedures.                                                                                                        | Standard oral assessment |
|                                                                        | ii. Identify the factors contributing to the need for revision surgery, including complications, surgical outcomes, and patient satisfaction.                                                        |                          |
|                                                                        | iii. Appreciate the frequency of revision surgeries for different cosmetic procedures and their impact on patient outcomes and satisfaction and use this information in planning for surgeries       |                          |
|                                                                        | iv. Participate in the planning process for revision surgery and consider timing, patient readiness, financial readiness, and specific surgical considerations.                                      |                          |
|                                                                        | v. Comprehensively assess patient needs and expectations during the planning process for revision surgery.                                                                                           |                          |
|                                                                        | vi. Collaborate with patients to establish realistic goals and expected outcomes for revision procedures.                                                                                            |                          |
|                                                                        | vii. Utilise interdisciplinary communication and consultation, as needed, to plan and coordinate revision surgeries effectively.                                                                     |                          |
| Topic 4: Supporting patients in a team environment                     |                                                                                                                                                                                                      |                          |
| 2.4.1 Management of a practice that supports high quality patient care | i. Collaborate with practice managers, practice nurses, and allied health professionals using a team approach to enhances patient care and safety                                                    | Reflective exercise      |
|                                                                        | ii. Develop clear and comprehensive patient documentation for patient information, consent, and pre and post operative care instructions                                                             |                          |
|                                                                        | iii. Support practice staff in their professional learning and development to ensure there is an adequate level of knowledge across the team so patients receive consistent and accurate information |                          |

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|                                    | iv. Support practice staff in their professional learning and development to ensure consistent knowledge about ethical requirements and confidentiality |                          |
| 2.4.2 Seeking professional support | i. Identify complicated cases and seek support from colleagues to manage these                                                                          | Standard oral assessment |

| Key Area 3: Fundamentals of Skin and Wound Management |                                                                                                                                                                                                            | Assessment               |
|-------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| Topic 1: Normal skin anatomy and physiology           |                                                                                                                                                                                                            |                          |
| 3.1.1 Normal skin anatomy and physiology              | i. Describe the layers of the skin, including the epidermis, dermis, and subcutaneous tissue                                                                                                               | Standard oral assessment |
|                                                       | ii. Describe the physiological functions of the skin, including protection, sensation, thermoregulation, and vitamin D synthesis, and articulate how these functions influence cosmetic surgery practices. |                          |
| Topic 2: Wounds                                       |                                                                                                                                                                                                            |                          |
| 3.2.1 Wound healing and management                    | i. Describe the physiological processes and stages involved in wound healing.                                                                                                                              | Standard oral assessment |
|                                                       | ii. Identify different types of wounds based on their size, shape, location, depth, base of wound, and surrounding tissue                                                                                  |                          |
|                                                       | iii. Identify the factors that influence wound healing, including age, nutrition, comorbidities, and medications                                                                                           |                          |
|                                                       | iv. Evaluate different wound management techniques, including types of wound dressings, debridement, and suturing, based on the characteristics and stages of wound healing.                               |                          |
|                                                       | v. Apply knowledge of wound pathophysiology to make informed decisions on assessment and treatment planning to optimise outcomes.                                                                          |                          |
|                                                       | i. Evaluate the principles of antibiotic stewardship to minimize the risk of antibiotic resistance and adverse effects.                                                                                    |                          |

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|                                                                         | ii. Identify the most suitable antibiotic based on the type of infection, the sensitivity of the pathogen, and patient-specific factors.                                                    |                          |
| Topic 3: Pathologies of the skin                                        |                                                                                                                                                                                             |                          |
| 3.3.1 Identification of common skin pathologies                         | i. Identify and classify common skin pathologies, including skin cancers, dermatitis, psoriasis, eczema, and acne, based on their clinical presentations and etiology.                      | Medical exam content     |
|                                                                         | ii. Understand the underlying pathophysiological mechanisms that contribute to the development of various skin pathologies.                                                                 |                          |
| 3.3.2 Management of common skin pathologies                             | i. Evaluate the appropriate diagnostic approaches and management strategies for different skin conditions.                                                                                  |                          |
|                                                                         | ii. Provide preventive measures and patient education related to the management of skin pathologies.                                                                                        |                          |
|                                                                         | iii. Apply strategies for comprehensive patient assessment and referral to appropriate healthcare specialists when encountering more serious skin pathologies (e.g. extensive skin cancers) | Standard oral assessment |
| Topic 4: Impacts of internal diseases on the skin                       |                                                                                                                                                                                             |                          |
| 3.4.1 Identification of common skin manifestations of internal diseases | i. Recognise the cutaneous manifestations associated with various internal diseases and systemic conditions, including: autoimmune disorders, endocrine disorders, and infectious diseases. | Standard oral assessment |
|                                                                         | ii. Recognise skin signs as potential indicators of underlying systemic illnesses.                                                                                                          |                          |
| 3.4.2 Contributing to the management of skin pathologies                | i. Demonstrate strategies for comprehensive patient assessment and appropriate referral when encountering skin manifestations that suggest internal pathology.                              | Standard oral assessment |
|                                                                         | ii. Appreciate the value of interdisciplinary collaboration with other healthcare specialists in the diagnosis and management of skin manifestations related to internal diseases.          |                          |

| Topic 5: Scarring                                                                                                      |                                                                                                                                                                           |                            |
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| 3.5.1 Biological process in scar formation                                                                             | i. Describe the biophysiological processes involved in scar formation and the differences between normal scarring, hypertrophic scars, keloid scars, and pigmented scars. | Written task: Short report |
|                                                                                                                        | ii. Identify factors that influence scar formation, including wound tension, genetics, and inflammation.                                                                  |                            |
| 3.5.2 Management of scars                                                                                              | i. Identify potential risks, benefits, and expected outcomes of different scar management approaches.                                                                     |                            |
|                                                                                                                        | ii. Evaluate treatment options for hypertrophic and keloid scars, including local steroid therapy, pressure therapy, and scar revision techniques.                        |                            |
|                                                                                                                        | iii. Understand the mechanisms of action and indications for using local steroid therapy in scar management.                                                              |                            |
|                                                                                                                        | iv. Evaluate the principles of pressure therapy and its role in preventing and treating hypertrophic and keloid scars.                                                    |                            |
|                                                                                                                        | v. Identify different scar revision techniques, including surgical excision, laser therapy, and dermabrasion, and their applications in scar improvement.                 |                            |
| vi. Select the most appropriate scar management techniques based on scar characteristics and patient-specific factors. |                                                                                                                                                                           |                            |
| Topic 6: Pigmentation changes                                                                                          |                                                                                                                                                                           |                            |
| 3.6.1 Normal v. abnormal pigmentation changes                                                                          | i. Recognise the normal variations in skin pigmentation based on ethnic background, age, and skin type.                                                                   | Standard oral assessment   |
|                                                                                                                        | ii. Outline the role of melanin in determining skin colour and its distribution in different skin layers.                                                                 |                            |
|                                                                                                                        | iii. Identify common skin pigmentation disorders, including hyperpigmentation and hypopigmentation and understand their underlying causes.                                |                            |

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|                                                               | iv. Differentiate between benign pigmented lesions and potentially malignant conditions, including melanoma or dysplastic nevi, for early detection and appropriate management.             |                          |
|                                                               | v. Describe the pathophysiological mechanisms leading to abnormal pigmentation changes, including melanocyte dysfunction, inflammation, and hormonal influences.                            |                          |
|                                                               | vi. Identify common triggers and exacerbating factors for hyperpigmentation                                                                                                                 |                          |
| 3.6.2 Treatment options for pigmentation changes              | i. Understand the available treatment modalities for skin pigmentation changes, including topical agents (e.g., hydroquinone, retinoids), chemical peels, laser therapies, and cryotherapy. | Standard oral assessment |
|                                                               | ii. Evaluate the risks, benefits, and expected outcomes of different treatment options, taking into account patient preferences and skin type.                                              |                          |
|                                                               | iii. Develop appropriate treatment plans for patients based on their specific pigmentation concerns and medical history.                                                                    |                          |
| Topic 7: Antibiotic use for the management of skin infections |                                                                                                                                                                                             |                          |
| 3.7.1 Selection and use of appropriate antibiotics            | i. Recognise the importance of appropriate antibiotic use in the management of various infections and wound-related conditions.                                                             | Standard oral assessment |
|                                                               | ii. Identify different classes of antibiotics and their mechanisms of action against specific pathogens.                                                                                    |                          |
|                                                               | iii. Accurately diagnose infections and identify pathogens through sending swabs and tissue samples for pathology                                                                           |                          |
|                                                               | iv. Evaluate the principles of antibiotic stewardship to minimize the risk of antibiotic resistance and adverse effects.                                                                    |                          |
|                                                               | v. Identify the most suitable antibiotic based on the type of infection, the sensitivity of the pathogen, and patient-specific factors.                                                     |                          |

| Key Area 4: Diagnosis, assessment and safe management of cosmetic surgery procedures related to the face and neck  |                                                                                                                                                       | Assessment                                           |
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| Topic 1: Normal facial anatomy and its common variants                                                             |                                                                                                                                                       |                                                      |
| 4.1.1 Blood supply and innervation of the face                                                                     | i. Describe the major arterial supply of the face including common variations.                                                                        | Set oral assessment                                  |
|                                                                                                                    | ii. Describe the sensory innervation of the face                                                                                                      |                                                      |
|                                                                                                                    | iii. Describe the motor innervation of facial muscles by the facial nerve (cranial nerve VII) and its branches.                                       |                                                      |
| 4.1.2 Facial musculature and the course and distribution of nerves of the face                                     | i. Describe the main facial muscles, their origins, insertions, and actions.                                                                          |                                                      |
|                                                                                                                    | ii. Describe the course and distribution of facial nerves, including the branches of the facial nerve and the innervation of specific facial muscles. |                                                      |
| 4.1.3 The Fascial Planes of the Face and the Brow and the Pattern of Facial Components of the Brow, Face, and Neck | i. Describe the facial fascial planes, including the superficial and deep fascia, and their role in facial expression and support.                    |                                                      |
|                                                                                                                    | ii. Describe the anatomical components of the brow, and neck regions, including bones, muscles, nerves, and blood vessels.                            |                                                      |
|                                                                                                                    | iii. Appreciate the impact of facial anatomy on aesthetic considerations and surgical planning in cosmetic procedures.                                |                                                      |
| 4.1.4 Aesthetic facial assessment                                                                                  | i. Perform aesthetic facial assessments including an understanding of the influence of asymmetries                                                    | Routine evidence: completion of injectables workshop |
|                                                                                                                    | ii. Use aesthetic evaluations to inform treatment planning in cosmetic surgery and non-surgical interventions.                                        |                                                      |
| Topic 2: Pathophysiology of ageing                                                                                 |                                                                                                                                                       |                                                      |
| 4.2.1 Skin Changes                                                                                                 | i. Identify common skin changes associated with aging.                                                                                                |                                                      |

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|                                                       | <ul style="list-style-type: none"> <li>ii. Describe the underlying pathophysiological processes responsible for age-related changes in the skin.</li> <li>iii. Appreciate the impact of intrinsic and extrinsic factors on skin aging including genetics, hormonal changes, and environmental exposure.</li> </ul>                                                                                                               | Standard oral assessment |  |
| 4.2.2 Age related fat loss                            | <ul style="list-style-type: none"> <li>i. Describe the pathophysiological mechanisms leading to age-related fat loss and redistribution in the face and body.</li> <li>ii. Identify the characteristic patterns of fat loss including facial volume depletion and changes in facial and neck contours.</li> <li>iii. Evaluate the implications of fat loss on facial aesthetics in aging.</li> </ul>                             |                          |  |
| 4.2.3 Age related changes in ligamental support       | <ul style="list-style-type: none"> <li>iv. Describe how age-related changes in ligaments contribute to facial sagging and ptosis.</li> <li>v. Analyse the impact of ligamentous changes on facial aesthetics and the development of facial aging features.</li> </ul>                                                                                                                                                            |                          |  |
| 4.2.4 Age related muscle and bone atrophy             | <ul style="list-style-type: none"> <li>i. Describe the pathophysiology of muscle and bone atrophy in the aging process.</li> <li>ii. Describe the effects of muscle and bone loss on facial appearance, including changes in facial shape and skeletal proportions.</li> <li>iii. Evaluate the significance of muscle and bone atrophy in the context of age-related functional changes and aesthetic considerations.</li> </ul> |                          |  |
| 4.2.5 The impact of sun exposure on the aging process | <ul style="list-style-type: none"> <li>i. Describe the impact of chronic sun exposure on the skin, including photoaging and DNA damage.</li> <li>ii. Identify characteristic patterns of aging associated with sun exposure, including solar elastosis, pigmentation changes, and increased risk of skin cancer.</li> </ul>                                                                                                      |                          |  |
| Topic 3: Face and neck lifting procedures             |                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |  |



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| 4.3.1 Procedure specific anatomy of the face and neck         | i. Identity and locate key surgical anatomical structures at risk in face and neck procedures                                                                                                                                                                                                             | Set oral assessment template                       |
| 4.3.2 Face and neck lifting procedures                        | ii. Describe the steps involved in face lift procedures including planes of surgery (including subcutaneous, SMAS flaps, deep plane), surgical incisions and their indications, and platysma manipulation.                                                                                                |                                                    |
|                                                               | iii. Appreciate the additional complexities associated with secondary facelift surgery                                                                                                                                                                                                                    |                                                    |
|                                                               | iv. Competently perform each element of a facelift surgery                                                                                                                                                                                                                                                | EPA                                                |
| 4.3.3 Adjunctive Facial Procedures                            | i. Describe the applicability, usefulness and techniques involved in adjunct procedures including: <ul style="list-style-type: none"> <li>○ Threads</li> <li>○ energy-based devices</li> <li>○ light-based therapies</li> <li>○ injectable fillers</li> <li>○ neuromodulation toxin injections</li> </ul> | Standard oral assessment<br><br>Injectables course |
| 4.3.4 Facial Implants                                         | i. Describe procedures for facial augmentation including: <ul style="list-style-type: none"> <li>○ autogenous vs allograft</li> <li>○ types of materials</li> <li>○ implant selection</li> </ul>                                                                                                          | Standard oral assessment                           |
| 4.3.5 Management of complications of face and neck procedures | i. Identify potential complications associated with face and neck procedures, including infection, hematoma, wound breakdown, paratoid duct injury, nerve injury, hair loss, and asymmetry.                                                                                                               | Set oral assessment template                       |
|                                                               | ii. Evaluate patient-specific risk factors and medical history to develop personalised strategies for complication prevention                                                                                                                                                                             |                                                    |
|                                                               | iii. Apply evidence-based techniques and best practices to minimise the risk of complications during pre-operative planning and surgical execution.                                                                                                                                                       | Practical Activity                                 |

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|                                                        | iv. Perform thorough post-operative assessments to monitor for potential complications and aid in early detection                                                                                                                                                                                                                                         |                              |
|                                                        | v. Apply appropriate management strategies for complications, including haematoma, failure of wound healing, infection, salivary gland/duct injury and nerve injury                                                                                                                                                                                       |                              |
| 4.3.6 Specific considerations for brow lift procedures | i. Describe the indications and contraindications for a brow lift                                                                                                                                                                                                                                                                                         | Set oral assessment template |
|                                                        | ii. Describe common techniques used for brow lifts including endoscopic, direct brow lift, and open browlift and foreheadplasty, methods of fixation, and selection of appropriate incisions.                                                                                                                                                             |                              |
|                                                        | iii. Apply appropriate prevention and management strategies for common complications in brow lifts                                                                                                                                                                                                                                                        |                              |
| Topic 4: Eyelids                                       |                                                                                                                                                                                                                                                                                                                                                           |                              |
| 4.4.1 Surgical and functional anatomy                  | i. Describe the applied anatomy of the eyelids and orbit                                                                                                                                                                                                                                                                                                  | Set oral assessment template |
|                                                        | ii. Describe the blood supply and innervation of the eye, orbit, and lids                                                                                                                                                                                                                                                                                 |                              |
|                                                        | iii. Describe the ligamentous attachments, fat pads, and musculature of the eye and lids                                                                                                                                                                                                                                                                  |                              |
| 4.4.2 Patient specific considerations                  | i. Describe key racial variations in eyelid structure and their implications for blepharoplasty surgery                                                                                                                                                                                                                                                   |                              |
|                                                        | ii. Describe common ocular abnormalities and their causes                                                                                                                                                                                                                                                                                                 |                              |
| 4.4.3 Eye assessments                                  | i. Perform assessment of the eyes for symmetry, tarsal laxity, ectropion, entropion, ptosis, and eyelid shape.                                                                                                                                                                                                                                            | Practical Activity           |
|                                                        | i. Perform an assessment of the eye to screen for: <ul style="list-style-type: none"> <li>○ signs and symptoms of raised intraocular pressure,</li> <li>○ dry eye</li> <li>○ diseases of the eye</li> <li>○ eye manifestations of thyroid disease</li> <li>○ issues with visual acuity</li> </ul> and refer patients for appropriate management of these. |                              |

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| 4.4.4 Surgical procedures of the eyelid                       | ii. Describe the applications, indications, limitations and complications of blepharoplasty alone and in combination with other techniques.                                                                                                                                                                                                                                                                                  | Standard oral assessment |
|                                                               | iii. Describe the steps involved in procedures of the upper and lower eyelid, including conjunctival incisions, their indications, and complications. Detail the following: <ul style="list-style-type: none"> <li>○ Skin, muscle, fat and orbital septal manipulation and excision – indications and complications.</li> <li>○ indications, technical options, and complications for canthoplasty and canthopexy</li> </ul> | Set oral assessment      |
|                                                               | iv. Competently perform each element of an upper and lower blepharoplasty procedure                                                                                                                                                                                                                                                                                                                                          | EPA                      |
| 4.4.5 Management of complications of blepharoplasty procedure | i. Identify and manage acute complications of blepharoplasty including retrobulbar haematoma                                                                                                                                                                                                                                                                                                                                 | Standard oral assessment |
|                                                               | ii. Apply appropriate prevention and management strategies for common complications in blepharoplasty including entropion, ectropion, lid lag, and inferior oblique muscle injury                                                                                                                                                                                                                                            |                          |
| Topic 5: Ears                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |
| 4.5.1 Surgical anatomy of the ear                             | i. Describe the anatomy of the ear including embryology and growth (including nomenclature of different elements of the ear)                                                                                                                                                                                                                                                                                                 | Standard oral assessment |
|                                                               | ii. Describe blood supply of the ear including branches from external carotid artery, posterior auricular artery and superficial temporal artery                                                                                                                                                                                                                                                                             |                          |
|                                                               | iii. Describe nerve supply of the ear including auriculotemporal nerve, great auricular nerve, branches of the vagus nerve and lesser occipital nerve                                                                                                                                                                                                                                                                        |                          |
| 4.5.2 Patient specific considerations                         | i. Describe appropriate age-related considerations (including cartilage maturation) in respect of timing of otoplasty                                                                                                                                                                                                                                                                                                        | Standard oral assessment |
|                                                               | ii. Describe syndromes and conditions associated with variations of ear anatomy                                                                                                                                                                                                                                                                                                                                              |                          |

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|                                                   | iii. Describe how traumatic deformities impact the ear                                                                                                                                                                    |                          |
| 4.5.3 Surgical procedures related to the ear      | i. Describe the applications, indications, limitations and complications of surgical techniques for prominent ear correction including cartilage scoring e.g. Chongchet and suture-only techniques e.g. modified Mustardé | Standard oral assessment |
|                                                   | ii. Describe reconstructive procedures of the earlobe– including complications, their avoidance and treatment.                                                                                                            |                          |
|                                                   | iii. Identify the potential complications of prominent ear correction including infection, necrosis of cartilage and skin and recurrence                                                                                  |                          |
|                                                   | iv. Describe various dressing techniques and their relative merits                                                                                                                                                        |                          |
|                                                   | v. Competently perform each element of otoplasty                                                                                                                                                                          | EPA                      |
|                                                   | vi. Describe appropriate prevention and management strategies for common complications of otoplasty                                                                                                                       | Standard oral assessment |
|                                                   | vii. Appreciate the additional complexities associated with secondary ear surgery                                                                                                                                         |                          |
| Topic 6: Nose                                     |                                                                                                                                                                                                                           |                          |
| 4.6.1 Surgical and functional anatomy of the nose | i. Describe the key anatomical features of the nose including blood and nerve supply, nasal bones, nasal cartilages and the soft tissues of the nose                                                                      | Standard oral assessment |
|                                                   | ii. Describe normal physiological functions of the nose and how these may be affected by nasal surgery                                                                                                                    |                          |
|                                                   | iii. Describe the common causes of nasal deformities including: aesthetic, traumatic, disease-related, congenital, tumours and prior surgery.                                                                             |                          |
|                                                   | iv. Identify clinical conditions relevant for rhinoplasty including: allergic or vasomotor rhinitis, epistaxis, polyps, airway obstruction with septal deviation                                                          |                          |

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| 4.6.2 Patient specific considerations       | i. Appreciate the complexities of facial aesthetics and how this impacts planning for rhinoplasty surgery                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |
|                                             | ii. Recognise the clinical significance of dysmorphophobia in the cohort of patients seeking rhinoplasty surgery.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                          |
|                                             | iii. Appreciate variations in ethnic and cultural considerations of aesthetics and the specific implications for rhinoplasty                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          |
| 4.6.3 Surgical procedures for rhinoplasty   | i. Perform assessment of patient suitability for rhinoplasty surgery including intranasal examinations and functional assessments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Set oral assessment      |
|                                             | ii. Understand appropriate use of autologous and alloplastic implant materials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |
|                                             | iii. Describe the following techniques including suitability and indications for each: <ul style="list-style-type: none"> <li>○ techniques to manage the nasal dorsum including dorsal hump reduction and dorsal augmentation</li> <li>○ Osteotomy techniques including options for osteotomy placement</li> <li>○ endonasal and open rhinoplasty techniques</li> <li>○ techniques for the modification of the alar base</li> <li>○ techniques for the management of septal abnormalities including cartilage grafting and resection techniques</li> <li>○ techniques for nasal tip adjustment including resection, dome suturing and controller projection</li> </ul> |                          |
|                                             | iv. Competently perform each element of a rhinoplasty procedure                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | EPA                      |
|                                             | v. Implement strategies for the prevention, early detection and management of common complications in rhinoplasty surgery                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Standard oral assessment |
|                                             | vi. Appreciate the complexities when performing secondary rhinoplasty                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |
|                                             | Topic 7: Chin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                          |
| 4.7.1 Specific anatomy relevant to the chin | i. Describe the bone and soft tissue structures of the chin and mandible                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Standard oral assessment |

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|                                        | ii. Describe blood and nerve supply of the chin                                                                                                           |                          |
|                                        | iii. Appreciate aesthetic considerations of the chin and propose appropriate treatment options                                                            |                          |
| 4.7.2 Surgical Procedures for the chin | i. Perform assessment of patient suitability for chin augmentation                                                                                        | Practical Activity       |
|                                        | ii. Describe the applications, indications, limitations and complications of surgical techniques for genioplasty including minimally invasive techniques. | Standard oral assessment |
|                                        | iii. Understand appropriate use of autologous and alloplastic implant materials                                                                           |                          |
|                                        | iv. Competently perform each element of a genioplasty procedure                                                                                           | EPA                      |
|                                        | v. Implement strategies for the prevention, early detection and management of common complications in genioplasty                                         | Standard oral assessment |
|                                        | vi. Demonstrate appropriate follow-up assessment and management of late stage complications of genioplasty patients                                       |                          |

| Key Area 5: Diagnosis, assessment and safe management of cosmetic surgery procedures related to the breast |                                                                                                                                                                                                                                                                                                                                               | Assessment               |
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| Topic 1: Breast anatomy and physiology                                                                     |                                                                                                                                                                                                                                                                                                                                               |                          |
| 5.1.1 Surgical anatomy and physiology of the breast                                                        | i. Describe the applied anatomy of the breast, its blood supply, nerve supply, muscles of the chest wall, glandular tissue, fascial layers and support structures.                                                                                                                                                                            | Standard oral assessment |
|                                                                                                            | ii. Describe typical development of the breast including hormonal influences                                                                                                                                                                                                                                                                  |                          |
|                                                                                                            | iii. Describe variations and deformities of the breast and associated structures                                                                                                                                                                                                                                                              |                          |
|                                                                                                            | iv. Describe the changes to breast anatomy and physiology in pregnancy and lactation                                                                                                                                                                                                                                                          |                          |
|                                                                                                            | v. Identify commonly occurring benign breast pathologies                                                                                                                                                                                                                                                                                      |                          |
|                                                                                                            | vi. Describe how the ageing process is related to changes in breast tissue                                                                                                                                                                                                                                                                    |                          |
|                                                                                                            | vii. Understand the influences of pregnancy, lactation, weight loss, trauma, congenital deformities, benign and malignant tumours, skin conditions, and lobular and ductal disease on breast morphology.                                                                                                                                      |                          |
|                                                                                                            | viii. Describe the iatrogenic influences on breast morphology including previous surgery, breast implants, radiotherapy, chemotherapy and medications                                                                                                                                                                                         |                          |
| 5.1.2 Aesthetic considerations of the breast                                                               | i. Appreciate factors that contribute to breast aesthetics including nipple position and size, areolar shape and size, volume distribution, symmetry, degree of ptosis, body proportions and the patient's perspective of ideal breast aesthetics.                                                                                            |                          |
| Topic 2: Assessing Patients for Breast Surgery                                                             |                                                                                                                                                                                                                                                                                                                                               |                          |
| 5.2.1 Physical breast assessment                                                                           | i. Perform a clinical breast assessment including assessment of: <ul style="list-style-type: none"> <li>o Breast volume</li> <li>o Symmetry</li> <li>o Degree of ptosis</li> <li>o Nipple position and areola size</li> <li>o Skin integrity/quality</li> <li>o Breast parenchyma and fat distribution</li> <li>o Breast pathology</li> </ul> | Practical Activity       |

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|                                        | <ul style="list-style-type: none"> <li>○ Previous breast surgery</li> </ul>                                                                                                                                                  |                          |
|                                        | ii. Identify patients who require additional investigations and refer appropriately                                                                                                                                          |                          |
| 5.2.2 Psychosocial assessment          | i. Appreciate the psychosocial complexities that may be associated with breast surgery and how these may influence decision making                                                                                           | Standard oral assessment |
|                                        | ii. Discuss the assessment of patient psychological suitability for aesthetic breast surgery and appropriately refer for expert psychological advice as necessary                                                            |                          |
| Topic 3: Procedures for breast surgery |                                                                                                                                                                                                                              |                          |
| 5.3.1 Pre-surgical considerations      | i. Discuss various designs and approaches to breast augmentation and their applications                                                                                                                                      | Set oral assessment      |
|                                        | ii. Discuss the history of breast implants                                                                                                                                                                                   |                          |
|                                        | iii. Describe the suitability of different types of implant materials including their content, structure, physical and biological properties.                                                                                |                          |
|                                        | iv. Describe the nature, physiology, and behaviour of implant capsules                                                                                                                                                       |                          |
|                                        | v. Describe appropriate management of capsular contracture                                                                                                                                                                   |                          |
|                                        | vi. Describe implant infection in the context of pathogenesis, risk factors, mitigating strategies to minimise this risk and the management approach for this complication.                                                  |                          |
|                                        | vii. Describe the various hypothesized pathophysiologies of Breast implant illness and BIA-ALCL                                                                                                                              |                          |
|                                        | viii. Describe the appropriate diagnosis and treatment of BIA-ALCL                                                                                                                                                           |                          |
|                                        | ix. Appreciate the importance of long term follow up and surveillance of patients with breast implants                                                                                                                       |                          |
| 5.3.2. Augmentation mammoplasty        | i. Describe surgical techniques for augmentation mammoplasty including: <ul style="list-style-type: none"> <li>○ Incision placement</li> <li>○ Surgical planes (submuscular, subglandular/subfascial, dual plane)</li> </ul> | Standard oral assessment |



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|                                       | <ul style="list-style-type: none"> <li>○ Adjunctive techniques</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          |
|                                       | ii. Competently perform each element of augmentation mammoplasty using the above techniques                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | EPA                      |
|                                       | iii. Implement strategies for the prevention, early detection and management of common complications in augmentation mammoplasty                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Standard oral assessment |
|                                       | iv. Demonstrate appropriate follow-up assessment and management of patients post augmentation mammoplasty                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          |
|                                       | v. Appropriately manage complications of breast augmentation surgery including peri-prosthetic infection, displacement, capsular contracture, rupture, and seroma                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |
|                                       | vi. Appreciate the additional risks and complications of revision breast augmentation.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |
| 5.3.3 Mastopexy/Reduction mammoplasty | <ul style="list-style-type: none"> <li>i. Discuss the various available techniques in mastopexy and reduction surgery and their associated benefits, risks and their relevance to: <ul style="list-style-type: none"> <li>○ breast size and shape</li> <li>○ scar position and size</li> <li>○ breast feeding</li> <li>○ nipple areolar positioning and preservation</li> </ul> </li> <li>ii. Describe the components of mastopexy and reduction surgery including: <ul style="list-style-type: none"> <li>○ Skin; wise pattern, vertical or lollypop and periareolar or Benelli</li> <li>○ Pedicle; superomedial, central, inferior and free nipple graft.</li> <li>○ Parenchymal excision and manipulation</li> <li>○ The use of mesh and/or suture fixation.</li> </ul> </li> <li>iii. Appreciate the additional risks of secondary breast reduction surgery</li> <li>iv. Describe the role and limitations of liposuction in breast reduction surgery</li> <li>v. Demonstrate appropriate follow-up assessment and management of patients post reduction mammoplasty</li> </ul> |                          |

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|                                                                | vi. Appropriately manage complications including haematoma, nipple loss, nipple sensory loss, wound breakdown, infection and collection |                          |
|                                                                | vii. Appropriately manage later stage complications including asymmetry, poor scaring, bottoming out and nipple malposition             |                          |
| 5.3.4 Augmentation mastopexy                                   | i. Appreciate the risks and benefits associated with simultaneous augmentation mastopexy vs. staged augmentation mastopexy              | Standard oral assessment |
| 5.3.5 Assessment and correction of congenital breast deformity | i. Identify common chest wall and breast deformities                                                                                    | Standard oral assessment |
|                                                                | ii. Identify patients requiring referral for management of particular congenital breast and chest wall deformities                      |                          |
|                                                                | iii. Assess the degree of deformity and consider how this would impact selection of technique                                           |                          |
|                                                                | iv. Discuss the various techniques used to correct congenital breast deformities, their applications and associated benefits and risks  |                          |
|                                                                | v. Competently perform each element of a tuberous breast correction procedure                                                           | EPA                      |
| Topic 4: Gynaecomastia                                         |                                                                                                                                         |                          |
| 5.4.1 Pre-surgical considerations                              | vi. Describe how gynaecomastia is graded and the appropriate treatment for each grade                                                   | Standard Oral Assessment |
|                                                                | vii. Identify systemic pathologies, drugs, medication and hormonal imbalances that can result in gynaecomastia                          |                          |
|                                                                | viii. Identify the appropriate range of tests and investigations that should be prepared for a patient presenting with gynaecomastia    |                          |
| 5.4.2 Gynaecomastia procedures                                 | i. Recognise the risk of blood loss in the chest that may occur with gynaecomastia procedures                                           |                          |
|                                                                | ii. Describe the potential complications of the procedure including poor scar, 'dinner plate deformity', recurrence and irregularities  |                          |
|                                                                | iii. Competently perform each element of gynaecomastia surgery                                                                          | EPA                      |

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|                                                | iv. Competently perform lipoplasty in conjunction with gynaecomastia surgery                                                                     | EPA                      |
| Topic 4: Nipple and Areolar Surgery            |                                                                                                                                                  |                          |
| 5.5.1 Procedures in Nipple and Areolar Surgery | i. Describe techniques to reduce the areola                                                                                                      | Standard Oral Assessment |
|                                                | ii. Describe techniques of nipple reduction and how choice of technique may impact wound healing of the nipple and may lead to nipple compromise |                          |
|                                                | iii. Describe techniques used to correct an inverted nipple including risks and complications associated with these techniques.                  |                          |
|                                                | iv. Discuss implications for surgery on the nipple and areola with a patient who may wish to breastfeed in the future.                           |                          |

| Key Area 6: Diagnosis, assessment and safe management of cosmetic surgery procedures related to the abdomen |      | Assessment                                                                                                                                                                                                               |                     |
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| Topic 1: Specific anatomy and physiology of the abdomen                                                     |      |                                                                                                                                                                                                                          |                     |
| 6.1.1 Anatomy and Physiology of the Abdominal Wall                                                          | i.   | Identify the layers of the abdominal wall, including skin, adipose layer, fascia, muscle, peritoneum, and their importance in cosmetic abdominal surgeries.                                                              | Set oral assessment |
|                                                                                                             | ii.  | Understand the role of the subcutaneous fat layer in the abdominal contour and its variations in different regions of the abdomen.                                                                                       |                     |
|                                                                                                             | iii. | Describe the vascular supply of the abdominal regions, including the epigastric, umbilical, and suprapubic regions, and their anatomical variations.                                                                     |                     |
|                                                                                                             | iv.  | Describe the distribution of nerves, including the cutaneous branches of the lower thoracoabdominal nerves and the iliohypogastric and ilioinguinal nerves, and their importance in abdominal sensation and innervation. |                     |
|                                                                                                             | v.   | Analyse the clinical significance of the vascular and nerve supply in abdominal surgery and the management of abdominal pain during the recovery period.                                                                 |                     |
| 6.1.2 Common abnormalities of the abdominal wall                                                            | i.   | Identify common postpartum abdominal changes, including diastasis recti and skin changes, and describe their underlying pathophysiology                                                                                  |                     |
|                                                                                                             | ii.  | Appreciate the impact of abdominal surgery on normal anatomy, including scars and adhesions, and their potential effects on abdominal function and aesthetics.                                                           |                     |
|                                                                                                             | iii. | Evaluate abdominal abnormalities associated with lipodystrophy, obesity, and weight loss, including excess skin and laxity, and propose appropriate management options.                                                  |                     |
|                                                                                                             | iv.  | Understand the anatomical changes and underlying causes of divarication of recti and its influence on abdominal contour.                                                                                                 |                     |
| Topic 2: Assessing patients for abdominoplasty                                                              |      |                                                                                                                                                                                                                          |                     |

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| 6.2.1 Assessing patient suitability                 | <p>i. Assess patient suitability for abdominoplasty by taking a focused history and assessing relevant factors including:</p> <ul style="list-style-type: none"> <li>○ Age</li> <li>○ BMI</li> <li>○ Nutritional and metabolic states</li> <li>○ Exercise</li> <li>○ Occupation</li> <li>○ History of weight loss and stability</li> <li>○ Previous pregnancies and/or plans for future pregnancies</li> <li>○ Presence of hernia</li> <li>○ Prior abdominal surgery and bariatric surgery</li> <li>○ Presence of rectus diastasis</li> <li>○ Skin quality</li> </ul> | Practical Activity                |
| Topic 3: Cosmetic surgery procedures of the abdomen |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                   |
| 6.3.1 Abdominoplasty procedures                     | <p>i. Describe the principles and specific technique involved in a simple/limited abdominoplasty with laxity confined to the infra-umbilical region with no muscle diastasis and no umbilical repositioning</p>                                                                                                                                                                                                                                                                                                                                                       | Set oral assessment               |
|                                                     | <p>ii. Competently perform each element of a simple abdominoplasty</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | EPA                               |
|                                                     | <p>iii. Describe the principles and specific techniques involved in a radical/full abdominoplasty including:</p> <ul style="list-style-type: none"> <li>○ Avelar technique</li> <li>○ Pitanguy's technique</li> <li>○ Lockwood's high lateral tension</li> <li>○ fleur-de-lis abdominoplasty</li> <li>○ functional apronectomy</li> <li>○ reverse abdominoplasty</li> </ul>                                                                                                                                                                                           | Set oral assessment               |
|                                                     | <p>iv. Describe the indications, advantages, limitations, and potential complications associated with each technique</p>                                                                                                                                                                                                                                                                                                                                                                                                                                              | Standard Oral Assessment Template |
|                                                     | <p>v. Competently perform each element of a radical/full abdominoplasty (including umbilical repositioning and rectus diastasis repair) using the Avaral technique, Pitanguy technique, and Lockwood's high lateral tension</p>                                                                                                                                                                                                                                                                                                                                       | EPA                               |

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|                                          | vi. Demonstrate appropriate follow-up assessment and management of patients post abdominoplasty surgery                                                                                                                                                                                                    | Direct observation of skills |
| 6.3.2 Complications of abdominal surgery | i. Identify and appropriately manage the early complications that may arise after abdominal cosmetic surgery, including bleeding, infection, and seroma formation                                                                                                                                          | Standard Oral Assessment     |
|                                          | ii. Describe the risk factors associated with skin flap loss, umbilicus loss, and deep organ perforation and strategies to mitigate these risks.                                                                                                                                                           |                              |
|                                          | iii. Recognise the signs and symptoms and implement appropriate interventions for early detection and management of serious complications including: <ul style="list-style-type: none"> <li>○ DVT</li> <li>○ PE</li> <li>○ Atelectasis</li> <li>○ Fluid imbalance</li> <li>○ Organ perforation.</li> </ul> |                              |
|                                          | iv. Identify and appropriately manage the late complications that may occur following abdominal cosmetic surgery including scar migration and poor scarring, residual laxity, recurrence of rectus diastasis, malposition of the umbilicus and contour defects.                                            |                              |

| Key Area 7: Diagnosis, assessment and safe management of cosmetic surgery procedures related to lipoplasty |                                                                                                                                                                                                                                                                   | Assessment                   |
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| Topic 1: History of liposuction and evolution of the current procedure                                     |                                                                                                                                                                                                                                                                   |                              |
| 7.1.1 Historical development of liposuction                                                                | i. Describe the evolution of liposuction techniques from their inception to the modern era.                                                                                                                                                                       | Standard oral assessment     |
|                                                                                                            | ii. Describe the early techniques for liposuction                                                                                                                                                                                                                 |                              |
|                                                                                                            | iii. Explain the rationale behind the introduction of modern techniques and their benefits in comparison to traditional approaches.                                                                                                                               |                              |
| Topic 2 Anatomy, physiology and pharmacology                                                               |                                                                                                                                                                                                                                                                   |                              |
| 7.2.1 Soft tissue anatomy and physiology                                                                   | i. Describe key anatomical structures of the skin, superficial and deep structures of fat, fascia, zones of adhesions, lymphatics                                                                                                                                 | Standard oral assessment     |
|                                                                                                            | ii. Describe the physiology of adipose tissue                                                                                                                                                                                                                     |                              |
|                                                                                                            | iii. Discuss the importance of fluid balance in liposuction                                                                                                                                                                                                       |                              |
| 7.2.2 Pharmacology                                                                                         | iv. Discuss the principles of tumescent anesthesia including rationale for use, composition, concentration, safety, toxicity, excretion, and interactions                                                                                                         | Set oral assessment template |
|                                                                                                            | v. Discuss complications related to tumescent anaesthesia                                                                                                                                                                                                         |                              |
|                                                                                                            | vi. Describe stages of toxicity and associated signs and symptoms                                                                                                                                                                                                 |                              |
|                                                                                                            | vii. Implement strategies for prevention, early detection and management of toxicity                                                                                                                                                                              |                              |
| Topic 3: Assessing patient suitability for lipoplasty procedures                                           |                                                                                                                                                                                                                                                                   |                              |
| 7.3.1 Assessing patient suitability                                                                        | i. Assess patient suitability for liposuction by taking a focused history and assessing relevant factors and contraindications including: <ul style="list-style-type: none"> <li>○ Age</li> <li>○ BMI</li> <li>○ Nutritional state</li> <li>○ Exercise</li> </ul> | Practical Activity           |

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|                                                 | <ul style="list-style-type: none"> <li>○ Occupation</li> <li>○ History of weight loss and stability</li> <li>○ Previous pregnancies and/or plans for future pregnancies</li> <li>○ Metabolic state</li> <li>○ Presence of hernia</li> <li>○ Presence of rectus diastasis</li> <li>○ Skin quality including striae, laxity, elasticity, and cellulite</li> <li>○ Prior surgery</li> <li>○ Previous liposuction</li> <li>○ Associated co-morbidities</li> </ul> |                          |
| Topic 4: Lipoplasty procedures                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          |
| 7.4.1 Indications and contraindications         | i. Recognise the appropriate indications for lipoplasty procedures in different anatomical areas.                                                                                                                                                                                                                                                                                                                                                             | Standard oral assessment |
| 7.4.2 Techniques and technologies in lipoplasty | ii. Describe different lipoplasty techniques, including traditional liposuction, power-assisted liposuction (PAL), ultrasound-assisted liposuction (UAL), and laser-assisted liposuction (LAL).                                                                                                                                                                                                                                                               | Standard oral assessment |
|                                                 | iii. Evaluate the advantages, disadvantages, and potential risks associated with each lipoplasty technique.                                                                                                                                                                                                                                                                                                                                                   |                          |
|                                                 | iv. Discuss the benefits and risks associated with sedation vs. general anaesthesia                                                                                                                                                                                                                                                                                                                                                                           |                          |
|                                                 | v. Select the most appropriate lipoplasty technique based on patient characteristics, treatment goals, and desired outcomes.                                                                                                                                                                                                                                                                                                                                  |                          |
|                                                 | vi. Demonstrate technical proficiency in performing lipoplasty procedures, including proper incision placement, cannula insertion, and fat extraction                                                                                                                                                                                                                                                                                                         |                          |
|                                                 | vii. Demonstrate understanding of College guidelines for liposuction                                                                                                                                                                                                                                                                                                                                                                                          |                          |
|                                                 | viii. Work within the regulatory requirements of the current jurisdiction in relation to liposuction practice.                                                                                                                                                                                                                                                                                                                                                |                          |
|                                                 | ix. Competently perform each element of a lipoplasty procedure                                                                                                                                                                                                                                                                                                                                                                                                |                          |



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| 7.4.3 Postoperative care and complication management | i. Identify and manage common postoperative complications including bruising, swelling, and seroma                                                           | Standard oral assessment |
|                                                      | ii. Recognise signs of potential serious complications, including deep vein thrombosis (DVT) or fat embolism, and implement appropriate management protocols |                          |

| Key Area 8 Diagnosis, assessment and safe management of body contouring surgery |                                                                                                                | Assessment               |
|---------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|--------------------------|
| Topic 1: Key considerations in body contouring surgery                          |                                                                                                                |                          |
| 8.1.1 Pre-operative assessment and management                                   | i. Demonstrate an understanding of lipoplasty in the context of body contouring surgery                        | Standard Oral Assessment |
|                                                                                 | ii. Appreciate the metabolic consequences of massive weight loss surgery and how this can impact wound healing |                          |
| 8.1.2 Specific safety considerations for body contouring surgery                | iii. Identify and manage tissue compromise including necrosis and ischaemia in the context of body contouring  |                          |
| Topic 2: Brachioplasty                                                          |                                                                                                                |                          |
| 8.2.1 Procedure specific anatomy and physiology                                 | i. Identify key anatomical structures of the arm including the course of sensory and motor nerves              | Standard Oral Assessment |
|                                                                                 | ii. Describe the potential risks of nerve damage in brachioplasty surgery and strategies to mitigate these     |                          |
|                                                                                 | iii. Describe compartment syndrome including the cause, treatment, and appropriate management                  |                          |
| 8.2.2 Brachioplasty procedures                                                  | iv. Describe the common skin incisions used in brachioplasty and risks associated with these                   |                          |
|                                                                                 | v. Evaluate the risk and benefits of brachioplasty for patients seeking body contouring                        |                          |
|                                                                                 | vi. Discuss scar management in brachioplasty in the context of body contouring                                 |                          |
| Topic 3: Thighplasty                                                            |                                                                                                                |                          |
| 8.3.1 Anatomy and physiology                                                    | i. Identify key anatomical structures of the leg including the course of sensory and motor nerves              | Standard Oral Assessment |
|                                                                                 | ii. Describe the potential risks of nerve damage in thighplasty surgery and strategies to mitigate these       |                          |

|                              |                                                                                                                  |                     |
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| 8.3.2 Thighplasty procedures | i. Describe common thighlift incisions and discuss the potential risks and benefits of each                      | Set Oral Assessment |
|                              | ii. Appreciate the impact of skin tension and various surgical techniques on preventing excessive skin resection |                     |
|                              | iii. Appreciate the importance of deep suturing to fixed structures to prevent scar migration                    |                     |
|                              | iv. Describe wound closure techniques in thighplasty including sutures and dressings                             |                     |
|                              | v. Explain why specific antibiotics are required to prevent infection in this anatomical area                    |                     |
|                              | vi. Identify and manage common postoperative complications including wound breakdown, and poor scarring          |                     |

| Key Area 9 Diagnosis, assessment and safe management of Female Genital Cosmetic/Aesthetic surgery |                                                                                                                                                                                                                  | Assessment               |
|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| Topic 1: Anatomy and Physiology                                                                   |                                                                                                                                                                                                                  |                          |
| 9.1.1 Soft tissue anatomy and physiology                                                          | i. Describe the anatomy of the external female genitalia with particular reference to nerves and blood supply                                                                                                    | Standard oral assessment |
|                                                                                                   | ii. Appreciate that labiaplasty is generally the term used to describe procedures that reduce excess labia minora skin                                                                                           |                          |
| Topic 2: Assessing patient suitability for labiaplasty procedures                                 |                                                                                                                                                                                                                  |                          |
| 9.2.1 Physical assessment                                                                         | i. Appreciate normal variations in the length, size and pigmentation of the labia minora                                                                                                                         | Standard oral assessment |
|                                                                                                   | ii. Assess patients for evidence of infection or pre-existing pathology                                                                                                                                          |                          |
| 9.2.2 Psychosocial assessment                                                                     | i. Appreciate that patient expectations may be influenced by multiple complex factors, such as culture, self-esteem, social media, and expectations of others                                                    |                          |
|                                                                                                   | ii. Appropriately respond to cultural safety considerations                                                                                                                                                      |                          |
|                                                                                                   | iii. Confidently discuss labiaplasty with patients and appreciate that there be many factors (e.g. exercise, look, and sexual health) that motivate patients to seek this procedure                              |                          |
|                                                                                                   | iv. Appreciate the complex psychological, mental, and emotional impacts that this procedure can have on women, particularly those who are young, vulnerable or those with a history of mental health issues, and |                          |
|                                                                                                   | v. Accurately identify patients requiring support from other specialist practitioners and refer appropriately                                                                                                    |                          |
| 9.2.3 Labiaplasty procedures                                                                      | i. Describe various skin incisions appropriate for labiaplasty and their advantages and disadvantages                                                                                                            | Set oral assessment      |
|                                                                                                   | ii. Distinguish between the trim and wedge techniques and variations including the disadvantages and advantages of each                                                                                          |                          |
|                                                                                                   | iii. Describe the ancillary procedures that can be done in conjunction with reducing excess labia minora skin including: labia majora reduction, fat grafting to the mons and cosmetic medical treatments        |                          |
|                                                                                                   | iv. Describe all the steps in a labiaplasty procedure                                                                                                                                                            |                          |

|  |                                                                                                                                                                                                                        |  |
|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|  | v. Discuss how to identify, manage and prevent main complications of labiaplasty including haematoma, dehiscence, over-resection, nerve damage and damage to the introitus and competently manage these complications. |  |
|  | vi. Appropriately identify and manage difficult cases through appropriate referrals to specialist colleagues                                                                                                           |  |
|  | vii. Appreciate the additional complications for patients requiring revision surgery                                                                                                                                   |  |

**STANDARD ORAL ASSESSMENT**



| Trainee Details:           |  |
|----------------------------|--|
| Name:                      |  |
| Preceptor/Supervisor Name: |  |
| Date of Assessment:        |  |

| Subtopic:                                                                                                                                                                                                                                                                                            |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Learning Outcomes assessed:                                                                                                                                                                                                                                                                          |  |
| <p><b>Standard Oral Assessment task:</b> Participate in a question and answer session with your preceptor/supervisor. The trainee should summarise the line of questioning and provide their own reflections on learning and progress. Preceptor/supervisor comments/feedback are also required.</p> |  |

| Summary of Discussion (topics covered, questions asked, etc) |
|--------------------------------------------------------------|
|                                                              |

| Trainee Reflections |
|---------------------|
|                     |



| Preceptor/Supervisor Notes and Comments                                                                           |  |
|-------------------------------------------------------------------------------------------------------------------|--|
| <b>Learning outcomes/areas that you consider the trainee to have met the required standard/level of knowledge</b> |  |
|                                                                                                                   |  |
| <b>Learning outcomes/areas that require further development</b>                                                   |  |
|                                                                                                                   |  |
| <b>What is the plan for further development against this subtopic/learning outcome? (include time frame)</b>      |  |
|                                                                                                                   |  |
| <b>Overall preceptor/supervisor comments</b>                                                                      |  |
|                                                                                                                   |  |
| Learning Outcomes achieved/signed off                                                                             |  |
| Signature of preceptor/supervisor                                                                                 |  |

## Raising Standards – Protecting Patients

### SET ORAL ASSESSMENT



| Trainee Details:           |  |
|----------------------------|--|
| Name:                      |  |
| Preceptor/Supervisor Name: |  |
| Date of Assessment:        |  |

| Subtopic:                                                                                                                                                                                                                                                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Learning Outcomes assessed: 4.3.6 (i)</b>                                                                                                                                                                                                                                                            |
| <b>Set Oral Assessment task:</b> Participate in a question and answer session with your trainee using the topics/line of questioning detailed below. Your trainee should develop the summary of discussion and provide their reflections. Preceptor/supervisor feedback and comments are also required. |
| <b>Topics/line of questioning to be included</b>                                                                                                                                                                                                                                                        |
| <b>Describe the indications and contra indications for a browlift.</b>                                                                                                                                                                                                                                  |

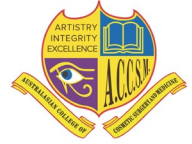
| Summary of Discussion (topics covered, questions asked, etc)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>(ii) Describe the common techniques used for browlifts including endoscopic, direct brow lift, open brow lift and foreheadplasty, methods of fixation and selection of appropriate incisions.</b></p> <p>a) Described the indications for a surgical brow lift.<br/>           b) Compare and contrast this with the indications for an upper blepharoplasty. c) Describe when a combination of brow lift and upper blepharoplasty is indicated.</p> <p><b>Q. Describe the indications, contra indications, benefits and limitations of each of the following browlift techniques. Describe also for each the incision placement and method/s of fixation:</b></p> <p>Surgical browlifts<br/>           a) Trans-blepharoplasty browlift<br/>           b) Direct browlift<br/>           c) Mid forehead lift.<br/>           d) Temporal lift<br/>           e) Anterior hairline lift,<br/>           f) Coronal brow lift<br/>           g) Endoscopic brow lift</p> <p>Non Surgical brow lifts<br/>           h) botulinum toxin</p> |





|                                           |
|-------------------------------------------|
| i) dermal filler<br>j) thread lift (brow) |
| <b>Trainee Reflections</b>                |
| <br><br><br><br><br><br><br><br><br><br>  |

|                                                                                                                   |
|-------------------------------------------------------------------------------------------------------------------|
| <b>Preceptor/Supervisor Notes and Comments</b>                                                                    |
| <b>Learning outcomes/areas that you consider the trainee to have met the required standard/level of knowledge</b> |
| <br><br><br><br><br><br><br><br><br><br>                                                                          |
| <b>Learning outcomes/areas that require further development</b>                                                   |
| <br><br><br><br><br><br><br><br><br><br>                                                                          |
| <b>What is the plan for further development against this subtopic/learning outcome? (include time frame)</b>      |
| <br><br><br><br><br><br><br><br><br><br>                                                                          |
| <b>Overall preceptor/supervisor comments</b>                                                                      |



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|---------------------------------------|--|
|                                       |  |
| Learning Outcomes achieved/signed off |  |
| Signature of preceptor/supervisor     |  |