

British paediatrics

Training for paediatrics with a special interest in respiratory disease

The Joint Committee on Higher Medical Training (JCHMT) has recently issued its first training programme for paediatricians wishing to practise with a special interest in respiratory disease. This training programme is set out in the standard JCHMT format and begins with the general observation that trainees who intend to take a special interest in respiratory disease will have to obtain sufficient training in general paediatrics to become accredited and must also have a total of not less than two years' experience in respiratory disease.

General professional training should occupy the usual three years after full registration, within which the trainee should hold a resident post of at least six months' duration with duties largely in the care of the newborn. A six month appointment in a unit providing respiratory intensive care is also desirable during general professional training.

In the course of higher specialist training, which should cover a period of not less than four years, the trainee must obtain the obligatory experience detailed in the training programme for general paediatrics and should also acquire experience in those areas which are of importance in the management of respiratory disease. These include intensive care, respiratory function testing, respiratory allergies, and the community care of children with respiratory problems.

Within higher specialist training a continuous period of one year, or interrupted periods totalling one and a half years, should be devoted to the care of children with respiratory disease, under the supervision of a consultant with a major interest in the field. This special experience should include participation in related research, with the analysis and presentation of data, and some practice in the administration of respiratory services is desirable. In view of the many respiratory problems that arise in the management of neonates, up to 50% of the obligatory experience in paediatric respiratory disease may be obtained in a regional neonatal intensive care unit.

Experience that is recommended rather than obligatory includes immunology and infectious disease, adult chest disease, adult intensive care, and paediatric cardiology. Additional training and experience in basic science disciplines would also be acceptable to the JCHMT provided it was relevant to paediatric respiratory disease and was appropriately supervised.

In line with the current view that training programmes should be flexible the JCHMT recognises that some trainees may become accredited by a different route from the one outlined.

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