



# **College of Surgeons of East, Central and Southern Africa (COSECSA)**

## **Training and Examinations Manual 2024**

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# FOREWORD.

The College of Surgeons of East, Central, and Southern Africa (COSECSA) strives to enhance the standards of surgical education, training, and practice in the region. Our goal is to equip surgeons with the necessary skills, knowledge, and ethical grounding to provide high-quality surgical care. Through our rigorous training programs and commitment to excellence, we aim to improve health outcomes and elevate the standards of surgical practice across East, Central, and Southern Africa.

This manual aims to provide a comprehensive and clear guide to the registration and examination processes for trainees. It serves as an essential resource to ensure that all participants are well-informed of the requirements and procedures that underpin our training programs. By adhering to these guidelines, we maintain consistency, fairness, and the highest levels of professionalism throughout our educational initiatives.

It is essential that all trainees and trainers adhere to these guidelines to ensure consistency and excellence in our programs. The adherence to these standards is crucial not only for the individual success of our trainees but also for the collective advancement of the surgical profession within our region. We are committed to fostering an environment of continuous improvement, ethical practice, and unwavering dedication to patient care.

Thank you for your dedication to surgical excellence and for upholding the values that define our profession. Together, we can continue to make significant strides in improving surgical care across East, Central, and Southern Africa.

# INTRODUCTION

The College of Surgeons of East, Central and Southern Africa (COSECSA) is a non-profit, professional body whose mission is to promote excellence in surgical training, care and research.

COSECSA was established in 1999 and has 14 member countries – Botswana, Burundi, Ethiopia, Kenya, Malawi, Mozambique, Namibia, Rwanda, South Sudan, Sudan, Tanzania; Uganda, Zambia, Zimbabwe.

The COSECSA Secretariat is headquartered in Arusha, Tanzania. COSECSA is a constituent college of the East, Central and Southern Africa Health Community (ECSA-HC). COSECSA provides post-graduate surgical training through a faculty of Programme Directors, Assistant Programme Directors and Trainers in 127 accredited hospitals across sub-Saharan Africa.

## **Vision**

To be a leading surgical body in terms of training, standards and research, in our region and beyond. This Vision is focused on positioning COSECSA as a world-class surgical training and research institution in the East, Central and Southern Africa region and beyond.

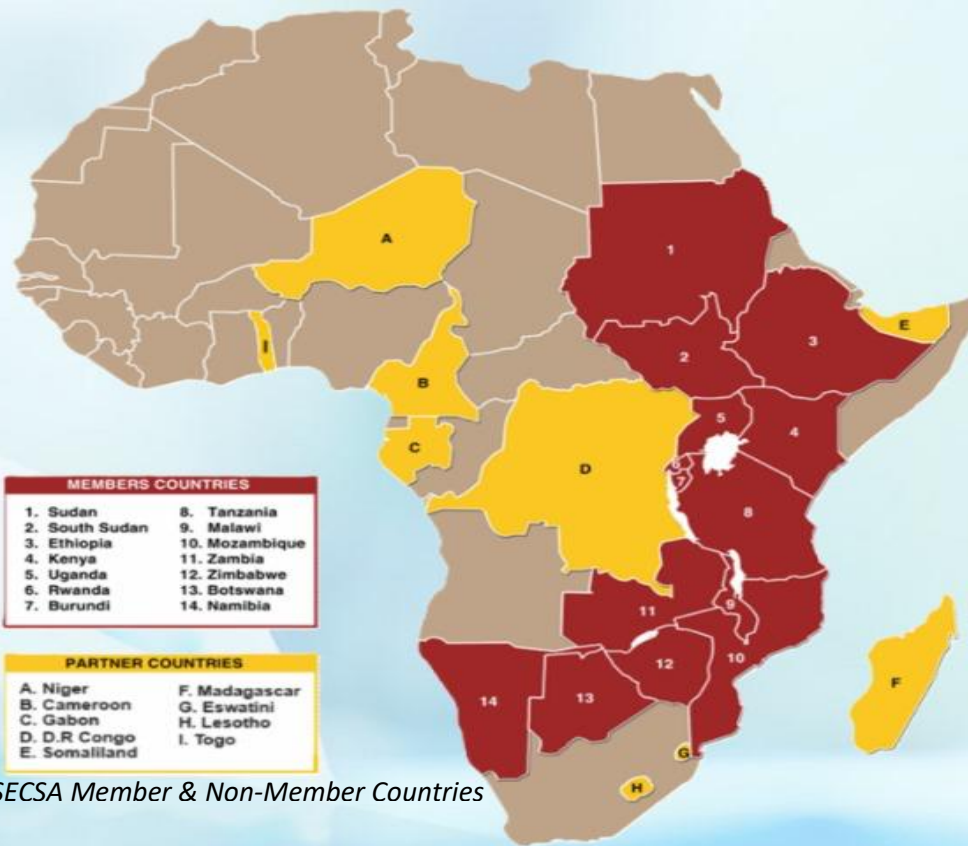
## **Mission**

To promote excellence in surgical care, training and research in order to increase the accessibility of surgical services, especially to African rural populations by standardizing and widening access to surgical training, skills and knowledge



# COSECSA

College of Surgeons of  
East, Central and Southern Africa



*COSECSA Member & Non-Member Countries*

# COSECSA PROGRAMMES

## Membership (MCS)

COSECSA provides training to Membership of the College of Surgeons (MCS) level, which is competence in surgery at General Medical Officer grade.

Following the two years of Membership training, trainees should be able to take responsibility for emergency surgical admissions, deal with life-threatening situations resulting from trauma or critical illness, and be able to diagnose and plan treatment for a variety of common surgical conditions.

See: <https://www.cosecsa.org/membership-of-the-college-of-surgeons-mcs-ecsa/>

## Fellowship Programmes Timeline and Details

The fellowship programmes at COSECSA are designed to provide specialized surgical training in various fields. The duration of the training varies depending on the specialty. Below is an overview of the fellowship programmes and their timelines, along with additional details about each programme.

### 5 Years Training (2 MCS and 3 FCS)

#### *General Surgery*

General Surgery is a foundational specialty that involves comprehensive training in the diagnosis, preoperative, operative, and postoperative management of a broad spectrum of diseases and conditions. This programme equips surgeons with the skills to perform various surgical procedures and manage surgical emergencies.

#### *Cardiothoracic Surgery (3 Years) - subspecialty:*

This subspecialty focuses on surgical treatment of diseases affecting the heart, lungs, esophagus, and other organs in the thoracic cavity. Training includes complex procedures such as coronary artery bypass grafting and heart valve surgery.

#### *Orthopaedics*

Orthopaedics involves the prevention, diagnosis, and treatment of disorders of the bones, joints, ligaments, tendons, and muscles. This programme prepares surgeons to address a wide range of musculoskeletal issues.

### *Paediatric Orthopaedics (2 Years):*

This subspecialty deals with musculoskeletal problems in children, including congenital, developmental, and traumatic conditions. Training includes managing pediatric fractures, deformities, and growth-related issues.

### *Urology*

Urology is a surgical specialty focusing on the urinary tracts of males and females, and on the reproductive system of males. Training encompasses procedures such as cystoscopy, transurethral resection of the prostate (TURP), and kidney stone removal.

### *Paediatric Surgery*

Paediatric Surgery is dedicated to the surgical care of infants, children, and adolescents. This specialty involves the treatment of congenital anomalies, tumors, and trauma in the pediatric population. Training includes both open and minimally invasive surgical techniques.

### *Otorhinolaryngology*

Otorhinolaryngology, also known as ENT (Ear, Nose, and Throat), involves the diagnosis and treatment of disorders of the head and neck. This programme covers surgeries related to the ear, nose, throat, sinuses, and larynx.

### *Plastic Surgery*

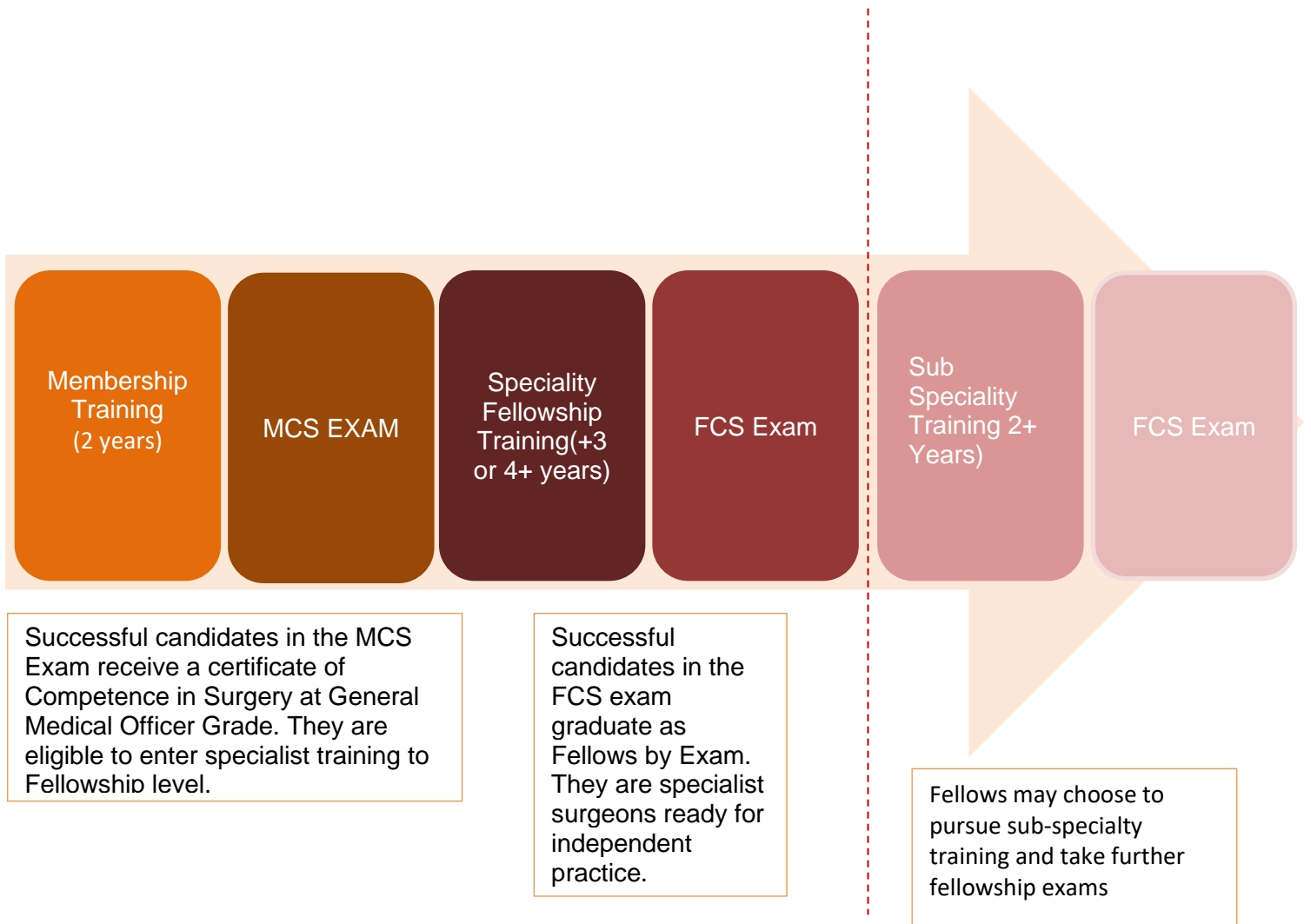
Plastic Surgery focuses on reconstructive and cosmetic procedures. This specialty involves repairing and reconstructing facial and body defects due to birth disorders, trauma, burns, and disease. Training includes techniques such as skin grafts, microsurgery, and cosmetic enhancements.

## **6 Years Training (2 MCS and 4 FCS)**

### *Neurosurgery*

Neurosurgery is a highly specialized field involving the surgical treatment of disorders of the nervous system, including the brain, spinal cord, and peripheral nerves. This programme prepares surgeons to perform complex procedures such as tumor removal, spinal fusion, and treatment of traumatic brain injuries.

# COSECSA SURGICAL TRAINING PATHWAY





# REGISTRATION PROCESS

## Application and Payment

Application is the first step in joining the COSECSEA training programmes. It involves gathering and submitting all the necessary requirements for an application, meeting specific deadlines, and making necessary payments. The registration process ensures that all candidates are formally recognized as trainees and are provided with the resources required for their training.

### Application procedures:

#### MCS (Membership of the College of Surgeons)

1. Visit an Accredited Hospital
  - Visit an accredited hospital where you intend to practice.
  - Meet with the Programme Director (PD) at the hospital.
2. Eligibility Approval
  - Obtain an approval letter from the PD if deemed eligible.
3. Online Application
  - Apply through the COSECSEA website and submit the required documents:
    - Medical Doctor Degree certificate
    - Approval letter from the PD
    - Practicing license
4. Application Review
  - The application will be reviewed by COSECSEA country representatives.
5. Programme Entry Fee and Invitation
  - Upon approval, pay the programme entry fee.
  - Receive an invitation letter with programme details and access to the e-learning portal.

#### FCS (Fellowship of the College of Surgeons)

1. Visit an Accredited Hospital
  - Visit an accredited hospital where you intend to practice.
  - Meet with the Programme Director (PD) at the hospital.

## 2. Eligibility Approval

- Obtain an approval letter from the PD if deemed eligible.

## 3. Online Application

- Apply through the COSECSA website and submit the required documents:
  - Medical Doctor Degree certificate
  - Approval letter from the PD
  - Practicing license
  - MMed certificate or MCS certificate (for FCS applicants)

## 4. Application Review

- The application will be reviewed by COSECSA country representatives.

## 5. Programme Entry Fee and Invitation

- Upon approval, pay the programme entry fee and an applicant receives an invitation letter with programme details and access to the e-learning portal and now becomes an active trainee

These steps ensure that applicants meet the necessary qualifications and requirements for entry into the respective COSECSA training programmes.

Trainees only need to enrol and pay once before starting the respective programmes (two-year MCS, three or four-year FCS). This streamlined process simplifies the initial registration.

## Registration Deadlines

- **MCS Programme:** Candidates must apply and pay by 31st October to commence training on 1st January the following year. This allows sufficient time for administrative processing and preparation for the training year.
- **FCS Programme:** Candidates must apply by 31st January to commence training on 1st February the same year. This ensures that all FCS candidates are registered and ready to start their training simultaneously.

## Notifications and Fee Payment:

- COSECSA Secretariat will notify the trainee once their application is fully accepted and provide instructions for paying the training fee including payment invoices and the receipt of payments once payment is completed. This ensures that trainees are kept informed of their registration status.

- All fees can be paid online through the COSECSA website or in person to the Country Coordinator or Country Representative. Multiple payment options facilitates the fee submission process.

### **Registration Delays:**

Delays in registration will result in delays in receiving the registration number and credentials to access the eLogbook and eLearning platform and missing of the registration window. Timely registration is crucial to avoid disruptions in training.

### **Communication and Updates:**

Programme Directors (PDs) should inform the Country Representative and Country Coordinator of any changes in trainees' status or trainers' locations throughout the year. This ensures accurate and up-to-date records.

## **Training Site Transfer**

To transfer a trainee from one site to another, the following steps must be followed:

- 1. Securing the New Site:**  
The trainee must first secure the new site where they wish to transfer. They need a confirmation letter from the program director at the new hospital.
- 2. Notification:**  
The program director at the new hospital must inform the country representative about the incoming trainee.
- 3. Release Letter:**  
The trainee must also obtain a release letter from their current hospital, which confirms they are allowed to transfer.
- 4. International Transfers:**  
If the trainee is moving to another country, they must check and meet the local requirements, such as practice licenses, student permits, or work permits.
- 5. Final Communication:**  
Once all documents are secured, the trainee must send a communication to the secretariat, copying the country representative and program directors from both the current and new hospitals or countries involved

# Rotation of Trainees

## Scope

This applies to all trainees enrolled in the COSECSA surgical training program, as well as the program coordinators, trainers, and administrative staff involved in managing and overseeing trainee rotations.

## Objectives

- To provide trainees with diverse surgical experiences and exposure to different subspecialties.
- To ensure that rotation schedules align with the training curriculum and competency requirements.
- To facilitate smooth transitions between rotations and maintain continuity of learning.
- To assess and document trainee performance and competencies during each rotation.

## Rotation Structure

- **Duration:** Each rotation will typically last for [e.g., 3-6 months], depending on the specialty and training requirements.
  - **MCS:** The two years (24 Months) should comprise at least six months of general surgery including emergencies and at least six months of Orthopaedics including trauma. The remainder of the time may be spent in any surgical specialty (including general surgery and Orthopaedics).
  - **FCS:** Of the three years programme, up to six months may be spent outside the region in a post that has been prospectively agreed with the Country Representatives, Programme Directors and Endorsed by the COSECSA Examinations and Credentials Committee and Education and Scientific Research Committee. This post may be in an elective unit.
- **Frequency:** Rotations will occur at predetermined intervals throughout the training program as specified deemed fit by the Programme Director in order to achieve the maximum knowledge of Surgical cases to fit the specialty syllabus.  
Rotation Types
- **Core Rotations:** Include essential surgical disciplines such as general surgery, orthopedics, obstetrics and gynecology, and pediatrics.  
For MCS these should be first considered within their current training institute before opting to rotate to another accredited training site.
- **Elective Rotations:** Allow trainees to choose subspecialties or areas of interest, such as vascular surgery, neurosurgery, or trauma surgery.
- **Research Rotations:** Offer opportunities for trainees to engage in surgical research and academic activities.

## Rotation Schedule

- **Annual Planning:** The rotation schedule will be planned by trainees, and the Programme Directors of the training institutes and communicated efficiently to the Directors and Country Representatives. Any changes to the schedule must be approved.  
Personal Preferences: Trainees may submit preferences for elective rotations; however, final placement is subject to availability and program needs assignment
- **Allocation:** Trainees will be assigned to rotation sites based on a balanced distribution to ensure exposure to diverse surgical practices and patient populations.
- **Notification:** Trainees will receive written notification of their rotation assignments at least [e.g., 2 months] prior to the start of each rotation.

## Responsibilities

Program Director of current and host institutes

- **Oversee Scheduling:** Ensure that rotation schedules are developed and maintained.
- **Monitor Compliance:** Ensure rotations align with curriculum requirements and trainee competencies.
- **Address Issues:** Resolve any conflicts or issues related to rotation assignments.
- Fill out the post rotation assessment form
- Sign off on the logbook

Trainers and Supervisors

- **Provide Guidance:** Offer supervision and mentorship during rotations.
- **Assess Performance:** Evaluate trainee performance and provide feedback based on predefined competencies.
- Provide feedback to the Programme Director

Trainees

- **Engage Actively:** Participate actively in all assigned rotations and complete required tasks efficiently and in a timely manner and adhering to all training policies.
- **Provide Feedback:** Submit feedback assessment on rotation experiences to help improve the program.

## Evaluation and Feedback

Performance Evaluation

- **Assessment Tools:** Utilize the COSECSA standardized evaluation tools to assess trainee competencies during each rotation.
- **Documentation:** Maintain detailed records of trainee performance and progress.
- **Feedback Mechanism**
- **Regular Reviews:** Programme Director should conduct regular review meetings with trainees to discuss performance and address any concerns, provide open feedback.

## **Rotation Sites**

### Accredited Facilities

- Rotation sites must meet COSECSA accreditation standards, including facilities, resources, and qualified personnel.
- Priority must be first given to sites within the Country, followed by Sites within the COSECSA region and lastly outside the region
- Accredited sites will be reviewed periodically by COSECSA and the Country specific medical council to ensure ongoing compliance with program standards.

### Site Responsibilities

- Training Quality: Provide a high-quality training environment and resources for effective learning.
- Compliance: Adhere to COSECSA guidelines and standards for training.

## **Conflict Resolution**

Please refer to the COSECSA Disciplinary and Code of conduct policy.

## **Documentation**

- Records: Maintain comprehensive records of rotation assignments, evaluations, and trainee feedback.
- Confidentiality: Ensure that all trainee records are kept confidential and secure.

## Programme Deferment.

To defer from the training program, the following steps must be followed:

### 1. Request for Deferment

- **Written Request:** The trainee must write a letter to the Programme Director requesting deferment from the training program. This letter should detail the reasons for the deferment and the intended duration.
- **Sharing the Request:** The Programme Director will share the deferment request with the country representatives and the Secretariat.
- **Endorsement:** The deferment request must be endorsed by the Country Representative.

### 2. Approval Process

- **Review:** The Secretariat, Country Representatives and Programme Director will review the deferment request.
- **Decision:** The final decision on the deferment request will be communicated to the trainee in writing with copy to ESRC, Panel Heads, Country Reps and Secretariat

### 3. Maximum Deferment Period

- **MCS Programme:** The maximum period for deferment is three (3) years.
- **FCS Programme:** The maximum period for deferment is five (5) years.

### 4. Ending the Deferment Period

- **Written Notification:** The trainee must write a letter to the Programme Director indicating their intention to resume training. This letter should be sent prior to the end of the deferment period.
- **Sharing the Notification:** The Programme Director will share the resumption notification with the Secretariat.
- **Endorsement:** The resumption notification must be endorsed by the Country Representative.

### 5. Final Communication

- **Documentation:** Once all necessary documents are secured, the Programme Director will send a communication to the Secretariat, ESRC, Panel Head, copying the Country Representative. This communication will confirm the trainee's resumption of the training program.

# TRAINING PROCESS.

## COSECSA Training and Examination framework

COSECSA training programmes are supported by an institutional framework composed of several bodies responsible for overseeing the training and examination processes.

1. **Registrar:** The role of the Registrar is to oversee College matters in respect to Accreditation, Certification, Examiners, Examinations, Graduation and Scholarships.
2. **Examination and Credentials Committee (ECC);** This Committee organizes examinations and examines credentials of all candidates and deals with other academic matters such as reciprocal arrangements, recognition/accreditation of hospitals, setting up of panels, examiners, the election of Fellows and Members.
3. **Education, Scientific and Research Committee (ESRC);** this Committee meets regularly to deal with education, training and research issues. This body is also responsible for improving the course content based on the research done on the completed courses, the quality assurance for training at the national level, and training oversight.
4. **Panel Head:** Panel Heads are Fellows of COSECSA who are responsible for setting the final exam for each training programme every year, in accordance with the format and regulations stipulated by the ECC
5. **Country Representatives (CRs):** These form part of the Council and they handle and coordinate all College activities at Member State level, each Member State has two CRs who are also COSECSA fellows.
6. **Programme Directors (PDs):** COSECSA has established Programme Directors at every COSECSA accredited facility/hospital. These ensure a smooth training programme in each training site.
7. **Trainers:** Trainers are responsible for delivering day to day teaching and training to registered trainees in conjunction with the Programme Directors
8. **Country Coordinators:** The College established Country Coordinators in all Member States to coordinate and to ensure smooth running of the activities of the College as well as coordination and administration of examinations at the national level.
9. **Secretariat:** The Secretariat, under the leadership of Chief Executive Officer (CEO) manages the day-to-day affairs of the College. It provides regional Coordination and Administrative support of the entire COSECSA program aiming towards achieving the College objectives.



## Programme Directors: role and responsibilities

The Programme Director (PD) is a COSECSA Fellow appointed by the hospital and serves on an honorary basis. The PD is responsible for delivering the COSECSA training programme(s) at the accredited hospital and acts as the primary liaison between the hospital and COSECSA regarding training matters. As the lead Trainer, the PD uses their expertise, knowledge, and clinical experience to provide high-quality teaching and training to trainees. They stay informed about COSECSA's policies, regulations, and syllabi relevant to the accredited training programmes. The PD ensures patient safety through appropriate trainee supervision and plays a crucial role in guiding the next generation of surgeons within the COSECSA training and examination framework, linking experience with future practice.

The role of the PD is to:

- Have overall educational and supervisory responsibility for the trainees in an accredited hospital
- Ensure that induction to the department or hospital (where appropriate) has been carried out
- By liaising with the Country Rep and Country Coordinator\*, ensure that trainees are fully enrolled and correctly registered with COSECSA, and are fully registered to take exams by the appropriate date, typically in their final year of training – see Key Training and Examination Dates
- By liaising with the Country Rep and Country Coordinator\*, provide a complete and accurate list of all the Trainers at the accredited hospital to COSECSA
- Ensures that trainees in the hospital are fulfilling all requirements of their training – see Mandatory Courses
- Ensures that trainees in the hospital have access to Library and IT facilities with reliable internet
- Ensure that trainees have appropriate day-to-day supervision appropriate to their stage of training
- Act as a mentor to trainees and help with both professional and personal development and welfare
- Discuss the trainees' progress with each Trainer who is involved in direct supervision of the trainee
- Regularly inspect the trainees' eLogbook and eLearning portfolio each month, and ensure that trainees are making the necessary clinical and academic progress – see eLogbook, see eLearning
- Ensure patient safety in relation to trainees' performance by the early recognition and management of trainees in distress or difficulty
- Ensure that evaluations of the trainee have been done regularly, and these evaluations are shared with COSECSA
- Inform trainees of their progress and encourage trainees to discuss any deficiencies in the training programme, ensuring that records of such discussions are kept

- Support Trainers in the accredited hospital in their supervision of trainees' clinical and academic performance
- Ensure that all Trainers undertake an accredited Training-of-Trainers (ToT) course and that they avail of resources that COSECSA makes available for Trainers -see Training of Trainers
- Ensure that Trainers are kept informed of the current regulations that apply to COSECSA training programmes
- Ensure that Trainers are kept informed of exchange, scholarship and bursary opportunities which are occasionally made available to COSECSA trainees – see Exchanges, Scholarships, Bursaries
- Inform the Country Rep and Country Coordinator\* of any significant issues that may affect the trainees' training at the hospital, including drop out of trainees or the departure of Trainers from the hospital
- Inform the Country Rep and Country Coordinator\* of scope for improvements to any aspect of the training programme
- Endorse the final list of candidates being seconded to sit for examinations in the particular specialty FCS exams or MCS exams as appropriate to the Country Reps by end of June of each academic year or three months before the written exam date.
- By July 31st, send the country representatives a list from each program of candidates who have met all requirements and are approved to sit the written exam in September.
- By November 30<sup>th</sup>, send the country representatives a list of trainees who will be promoted from their current year in training to the next year in the training program.
- Submit a minimum of two PD level evaluations for each trainee to the secretariat and country representatives per year.

\* PDs based in a country that is not a member-country of COSECSA should take a proactive approach in contacting the COSECSA Secretariat on all matters to do with training.

## Trainers: role and responsibilities

Trainers are COSECSA Member-Specialists and Fellows who oversee and teach trainees at accredited hospitals on an honorary basis. They provide daily training and can seek support and advice from senior colleagues, especially the Programme Director, to address teaching-related issues and stay updated on their professional development as Trainers.

The role of the Trainer is to:

- Supervise and mentor trainees in their studies and work.
- Ensure patient safety in relation to trainee performance.
- Ensure trainees regularly attend educational activities like Clinical/Journal/X-ray and Mortality/Morbidity meetings.
- Conduct mock examinations twice a year, including hands-on bedside clinical exams.
- Monitor and sign off on trainees' eLogbooks monthly, ensuring compliance with training programme regulations.

- Address insufficient operative exposure and discuss solutions with the PD.
- Facilitate trainees' attendance at mandatory courses.
- Assist trainees in managing the self-directed educational component of their training.
- Conduct regular evaluations of trainees and share them with COSECSA.
- Ensure trainees complete feedback forms for each training post.
- Support trainees in applying for COSECSA-provided exchanges, scholarships, and bursaries.

## Common elements of all COSECSA Training Programmes

### a) eLogbook

All trainees are required to maintain an accurate and current eLogbook. Trainees should record all cases that they perform or assist in during their training no later than two weeks after the case has taken place. Trainers and PDs should instil the importance of an accurate and current logbook in trainees.

Once a trainee is fully registered in their training programme, the COSECSA Secretariat sends him/her their individual username and password to access the COSECSA eLogbook. These credentials (username and password) should not be shared with anyone else. Passwords can be reset if forgotten by sending an email request to the COSECSA Secretariat.

The Cosecsa Logbook is accessed here <https://logbook.cosecsa.org/Account/Login>

A Trainee video and Frequently Asked Questions (FAQ) about the eLogbook can be found here <https://www.cosecsa.org/training-platforms/>

#### Note – Exemptions to use of COSECSA eLogbook:

While COSECSA encourages all trainees to use the COSECSA eLogbook, Fellowship candidates with an Mmed who join the training program for only one year and have an existing logbook can use an alternative logbook (either paper or electronic). They must make this logbook available to their Trainer, Program Director (PD), and relevant Panel Head upon request. Similarly, trainees supported by the Pan African Academy of Surgeons (PAACS) can use the PAACS eLogbook instead of the COSECSA eLogbook, provided it is accessible to their Trainer, PD, and COSECSA Panel Head as needed.

The COSECSA eLogbook provides Guideline Minimum Numbers for case bundles and 'index procedures' for each training program, serving as a guide for trainees, Trainers, and PDs on the volume and type of cases to record before Part II of their exams. Trainers receive credentials to access their own and their trainees' eLogbooks and should ensure they are filled out regularly and accurately. Trainers supervising those not using the COSECSA eLogbook must ensure these trainees meet the guideline numbers.

PDs also have access to the eLogbooks of trainees they supervise and should monitor them to ensure sufficient operative exposure. Passwords can be reset by contacting the COSECSA Secretariat.

A video guide to using the eLogbook for PDs and Trainers is available here <https://forms.gle/3C74nnpnXBPYQhp2d9> using the Password: **20cos21log3hk**

## **b) eLearning**

COSECSA's eLearning platform can be accessed at [www.schoolforsurgeons.net](http://www.schoolforsurgeons.net) (SFS). Trainees, Trainers, and Program Directors (PDs) use the same username and password provided for the eLogbook to log in. These credentials must remain confidential and should not be shared with anyone else. If a password is forgotten, it can be reset by emailing the COSECSA Secretariat.

Trainees receive specific instructions from the COSECSA Secretariat via email regarding the mandatory and recommended (non-mandatory) learning resources for their training program. The Secretariat monitors and tracks their progress on mandatory learning.

Content for Trainers and PDs, including "Facilitator" or tutor versions of mandatory content, is available in the 'Surgical Trainers' and 'Other Training Resources' sections. All users, including trainees, Trainers, and PDs, have access to the full suite of electronic journals from the Royal College of Surgeons in Ireland (RCSI) and many other resources through SFS.

## **c) Exchanges, Scholarships, Bursaries**

Each year, COSECSA offers a variety of exchanges, scholarships, and bursaries to its trainees. These initiatives aim to encourage more individuals to pursue surgical training, support their progress at all stages, enhance the quality of training, and improve research skills.

The Secretariat informs Country Coordinators and Country Representatives about these opportunities as they become available. Information is also posted on the COSECSA website <https://www.cosecsa.org/news/> and shared via social media.

Program Directors (PDs) and Trainers are encouraged to actively support trainees in applying for these opportunities if they are appropriate.

## **d) Forms to fill out: Trainee Evaluations**

Trainers should complete an evaluation of their trainees after each rotation. The online form

is available on SFS <https://www.schoolforsurgeons.net/> under 'E-Logbook and Forms' > 'Forms to be filled by Trainers'.

These evaluations may assist in determining if a trainee is ready to take exams for their training programme. PDs should ensure that Trainers regularly complete evaluations of their trainees.

### e) Forms to fill out: Training Post Assessment

Trainers should ensure that trainees give feedback on each training post they hold. The online form is available on SFS <https://www.schoolforsurgeons.net/> under 'E-Logbook and Forms' > 'Forms to be filled by Trainees'.

These evaluations may assist COSECSA to form an understanding of how the training programmes are running at each accredited hospital and may indicate how COSECSA can better support the hospital in delivering training.

### f) Mandatory courses

MCS trainees	Format, location
Basic Science	COSECSA blended course on <a href="http://www.schoolforsurgeons.net">www.schoolforsurgeons.net</a>
Basic Surgical Skills	To be organized in each accredited hospital; 2-day course outline available from COSECSA with accompanying resources on <a href="http://www.schoolforsurgeons.net">www.schoolforsurgeons.net</a>
Trauma course	Trainees may avail of an accredited course that is available locally

FCS trainees	Format, location
Research Methodology Course	COSECSA self-directed course on <a href="http://www.schoolforsurgeons.net">www.schoolforsurgeons.net</a>

Proof of completion of these courses, that is a certificate, should be uploaded to SFS <https://www.schoolforsurgeons.net/> under 'E-Logbook and Forms'>'Forms to be filled by Trainees'> 'Short Course Certificate Upload'.

The title of the uploaded file should clearly indicate what type, of course, the trainee has completed.

Note:

Depending on their training programme, FCS trainees may have additional mandatory courses to complete.

### **a) Out of Programme Elective (OOPE)**

Trainees can pursue a temporary out-of-programme elective (OOPE) at another hospital for up to six months without delaying their training, provided the Program Director (PD) approves a clear learning objective and identifies a suitable supervisor at the OOPE hospital. Trainees must keep their eLogbook updated and continue their academic program on the SFS platform during the OOPE.

The PD should inform the Country Representative or the COSECSA Secretariat, depending on the country. The trainee remains registered at their original hospital, with the PD maintaining overall responsibility for their training.

### **b) Training of Trainers (ToT)**

All registered trainees should be trained by an accredited Trainer, meaning a Trainer who has completed a Training of Trainers (ToT) course. Completing a ToT course is an essential part of professional development for COSECSA Fellows and helps uphold the integrity of the COSECSA Training and Examination Framework. Program Directors (PDs) should also complete a ToT course if they haven't done so before their appointment.

PDs should inform the Country Representative if any Trainers at their hospital have not yet completed a ToT course. Each COSECSA Member Country has one or more Master Trainers—senior surgeons who have undergone an intensive ToT course. Country Representatives, Country Coordinators, PDs, and Master Trainers collaborate to organize ToT courses at the national level to address the country's training needs.

In cases where accredited hospitals are located outside a Member Country and there is no Master Trainer available in that country, the PD should directly contact the COSECSA Secretariat.

# EXAMINATION STRUCTURE

The structure of the examinations is designed to comprehensively assess the knowledge and practical skills of the candidates.

## Panel Heads

In the COSECSA training framework, Panel Heads are Fellows of COSECSA who are responsible for setting the final exam for each training programme every year, in accordance with the format and regulations stipulated by the Exams and Credentials committee.

Panel heads 2025-2026			
	Program Panel	Panel head	Co-panel head
1	MCS	Dr Timothy Love	Dr Vanessa Msosa
2	General Surgery	Ivan Seno	
3	Orthopaedic surgery	Billy Haonga	
4	Pediatric Orthopedic Surgery	Tewodros Tilahun	
5	Pediatric Surgery	Woubdel Kiflu	
6	Plastic Surgery	Rose aleyno	Abrham G/egzabher
7	Urology	Charles Mabedi	Mumba Chalwe
8	Neurosurgery	Emmy Nkusi	Joel kiryabwire
9	Cardiothoracic Surgery	Russ White	
10	ORL	Isaie Ncogoza	
11	Upper GI Surgery	Olivia Kituuak	Mathenge Nduhiu
12	Lower GI Surgery	Emmanuel Elobu	
13	Breast Surgery	Celeste Mbangtang	Ainhoa Costas
14	Surgical Endoscopy	Micheal Mwachiro	
15	Thoracic Surgery	Abebe Bekele	

## Examination Parts

- **Part I:** Online written exam for both MCS and FCS in the first week of September. This tests candidates' theoretical knowledge.
- **Part II:** OSCE for MCS and Clinical/viva voce exam for FCS, usually in early December. These practical exams assess clinical skills and decision-making abilities.



## Exam Day Instructions

Clear instructions for exam day ensure that candidates are well-prepared and that the examinations are conducted smoothly.

### Candidate Identification:

- Candidates will receive a student ID and access code to enter the examination portal. Proper identification is crucial for maintaining examination security.
- Ensure all unused electronic devices/documents are handed over to the invigilators. This prevents cheating and ensures the integrity of the examination.
- Only one browser (Mozilla/Chrome) should be used to access the exam, and no other programs should be running. This minimizes technical issues during the examination.

Exam Registration and payment	Deadline	Part I Exam	Part II Exam
MCS	31 <sup>st</sup> March	September same year	December same year
FCS	31 <sup>st</sup> March	September same year	December same year
Candidates for FCS who hold an Mmed	1 <sup>st</sup> May		

## Examiners and Conduct

Examiners play a vital role in ensuring that examinations are conducted fairly and without disruptions.

## **Examiners Responsibilities**

- Examiners should monitor candidates to prevent cheating and maintain the integrity of the examination process. Vigilant invigilation upholds the standards of the examination.
- Invigilators should ensure exams start and stop precisely on time and manage any technical issues. This ensures a smooth examination process.

## **Appeals Process**

The appeals process provides candidates with a fair mechanism to contest examination results if they believe there has been an error or unfair treatment.

### **Appeal Submission:**

- Appeals against examinations and grades must be made in writing to the COSECSA Council within 30 days after the examination. This provides a formal channel for grievances.
- An impartial committee will be appointed to investigate the appeal and recommend a final, binding decision. This ensures a fair and transparent appeals process.

## Appendix I COSECSA Secretariat Contact Details

<b>Role</b>	<b>Post-holder</b>	<b>Email</b>	<b>Areas of responsibility for Training and Examinations</b>
Chief Executive Officer (CEO)	Ms Stella Itungu	ceo@cosecsa.org	Oversight of all Operations of the College including Training and Examinations procedures/activities
Examination Officer	Mr Amani Pascal	exams_asst@cosecsa.org	Registration of exam candidates; Exam support Exam logistics and delivery
Finance Officer	Mr. Jonathan Omongole	finance@cosecsa.org	Oversees Payments of training, and exam fees, and other related costs.
Education Officer	Mr Niraj Bachheta	education_asst@cosecsa.org	eLearning; Mandatory courses; ToT courses; Curricula review; exam support
Administrative Officer	Ms Diana Kaiza	info@cosecsa.org	Liaison with Country Coordinators; Exam support
Admission Assistant	Mr. Davis Kondamwali	admission@cosecsa.org	Registration of trainees in training programmes; eLogbook;
Academic and Records Assistant	Ms. Edna Herman	academic.records@cosecsa.org	Assisting in education related matters and Issuing transcript and Certificates
IT Assistant	Mr. Joel Sangethi	ict@cosecsa.org	Assisting the college in every technical aspect
Research and Patient Outcome Coordinator	Godfrey Sama Philipo	rpo.coordinator@cosecsa.org	Supervising the research and trainings within the college
Managing Editor	Vincent Kipkorir	managing_editor@cosecsa.org	Oversees publication and review of Journals

## Appendix II Patient Safeguarding in the training programme

COSECSA is committed to safeguarding the well-being of patients. COSECSA expects all individuals in the COSECSA Training and Examination framework to behave with integrity and professionalism at all time, and to ensure that patients are treated with dignity and respect in the training programme.

Trainees, Trainers, and PDs are bound to comply with the professional code of conduct from their employing hospitals and their national medical licensing body in regard to patient safeguarding.

Additionally, Trainers and PDs, as Fellows of COSECSA, are bound by the Fellowship Declaration in the practice of surgery. The commitments and spirit of this declaration should be vividly reflected in the culture of the training programme established at each accredited hospital.

Trainees registered in COSECSA training programmes are obliged to:

- pursue surgical training with honesty and to place the welfare and the rights of the patient above all else
- deal with each patient as they would wish to be dealt with if they were in the patient's position - respect the patient's autonomy and individuality
- affirm and support the social contract of the surgical profession with their community and society
- not take part in any arrangement or improper financial dealings that induce referral, treatment, or withholding of treatment for reasons other than the patient's welfare.
- advance their knowledge and skills, respect their colleagues, and will seek counsel from colleagues when in doubt about their abilities
- willingly help their colleagues when requested.
- recognize the interdependency of all health care professionals and will treat each with respect and consideration

## Appendix III Fee Structure.

<b>Categories for MCS</b>	<b>Fee (\$)</b>
Programme Entry Fee	500
Course Fees 150 x 3 (Payable at the course)	450
Examination Fee	600
Repeat Examination Fee	200

<b>Categories for FCS</b>	<b>Fee (\$)</b>
Programme Entry Fee	600
Course Fees 200 x 3 (Payable at the course)	600
Examination Fee	800
Repeat Examination Fee	300

<b>Other Registration</b>	<b>Fee (\$)</b>
Fellowship Registration Fee ( Payable by Latest on the day of Graduation)	500
Member Specialists (Payable – Immediately)	300
Fellows by Election (Payable – Immediately)	500

<b>Annual Subscriptions</b>	<b>Fee (\$)</b>
Fellows (Payable by 30th April)	120
Overseas Fellows ( Payable by 30th April)	100
Member Specialist ( Payable by 30th April)	70
Members (Payable by 30th April)	50
Associate Members (Payable by 30th April)	30