Training prior to entry to a CCT post, up to and including Intermediate training, may be counted towards the programme provided it is confirmed to have been to IBTICM specification. Completion of the full programme outside such a post, or completion of the programme up to Intermediate training only, will be acknowledged formally by the Intercollegiate Board for those trainees registered for training under its supervision.

There is more detailed information on the training in the curriculum documents, and associated material, on the website. Trainees who plan a career in ICM should discuss their intentions with their specialty advisors, and with the Regional Advisor in ICM, and can register their interest with the Intercollegiate Board. A General Registration Form for this purpose is available on the website or from the IBTICM office.

Subsequent entry to a CCT post will require further completion of an ICM CCT Registration Form.

**Overseas Training**

The Board will accept a maximum of 6 months overseas training to count toward the ICM component of the Step 2/Advanced training programme only – overseas training cannot be counted toward Step 1/Intermediate ICM.

The Board will also, for the purposes of Intermediate/Advanced sign-off, accept previous complementary specialty training undertaken overseas (subject to approval by the ICM Regional Advisor and confirmation of competences). However, should the trainee later obtain an ICM joint CCT post, such periods of overseas training will not count toward that programme – overseas training must be retrospectively approved by the Board and PMETB in order to count toward the ICM joint CCT programme.

**Diploma in ICM examination**

There is also an optional examination – the Diploma in Intensive Care Medicine, held twice a year and open currently to trainees who have completed Step 1/Intermediate training, or other equivalent training acceptable to the Intercollegiate Board. The main elements of the examination are:

- A dissertation (4,000 to 6,000 words)
- Vivas on:
  - The dissertation
  - Expanded case summaries from the trainee’s educational training record (ETR)
  - Data interpretation

Candidates who have a higher degree, in a subject relevant to intensive care medicine, may present their thesis, and, at the discretion of the Examiners, be exempted from the dissertation section of the examination. A comprehensive guidance document is available on the IBTICM website.

**Note:**

This information sheet is mainly for the guidance of trainees entering programmes after 1st August 2007. Trainees appointed before that date may continue training under the provisions of the guidance available at the time of appointment (also available at www.ibticm.org).
Training in Intensive Care Medicine (ICM)

Training in ICM in the UK is supervised by the Intercollegiate Board on behalf of the Royal Colleges of Anaesthetists, Physicians and Surgeons, and the College of Emergency Medicine. Programmes in ICM are undertaken with a training programme in a specialty of primary appointment:

- Anaesthesia
- An acute medical or surgical specialty
- Emergency Medicine

The overall training programme might have to be extended, depending on how much of the ICM training might be double-counted towards training in the specialty of primary appointment.

Training requirements

The training programme requirements for ICM (with indicative timeframes) are:

- **Basic training**
  Minimum of 3 months of training in basic level ICM at SHO or CT level.

- **Complementary specialty training**
  4 to 8 months (normally 6 months) of training in acute general medicine for an anaesthetist, 4 to 8 months (normally 6 months) of training in anaesthesia for a physician, both for trainee surgeons or trainees in emergency medicine, although training in emergency medicine may be counted to meet up to 50% of the requirement for training in acute general medicine.

- **Step 1/Intermediate training**
  4 to 8 months (normally 6 months) of training in general adult ICM. Ideally, this training should be in a single block, but will be acceptable if undertaken in two blocks of approximately equal duration. Trainees must also complete 10 expanded case summaries as part of Intermediate training.

  This completes Intermediate training, for those who intend a sessional commitment in ICM.

- **Step 2/Advanced training**
  8 to 18 months (normally 12 months) of training in ICM, undertaken during the final two years of overall training. Up to 50% may be in specialised ICM, and up to 50% of Advanced training may be undertaken in an overseas post, with the support of the Intercollegiate Board, though this must have prospective approval of the Postgraduate Medical Education and Training Board.

  This completes Advanced training, for those who intend a major or full-time commitment to ICM.

All specialist training in ICM must be undertaken in units that have been approved by PMETB.

The full curriculum for the competency based training programme is available for viewing and download on the Intercollegiate Board’s website: [www.ibticm.org](http://www.ibticm.org).

There are six parts to the curriculum:

- **Part I** sets out the general principles of the programme
- **Part II** is the Educational Training Record (ETR, or 'log book'), to be read in conjunction with, in turn:
- **Part III** Basic training in ICM and complementary specialty training
- **Part IV** Step 1/Intermediate training in ICM
- **Part V** Step 2/Advanced training in ICM
- **Part VI** sets out the competences for Cardiopulmonary Resuscitation at all levels of training

The Educational Training Record must be used for all training components, and includes a section for listing of 10 expanded case summaries, which must be completed during Intermediate training in ICM (an example summary is included in the ETR).

Training pathways in ICM

A trainee may, depending on their individual career path, gain a joint CCT in ICM along with their parent specialty, or alternatively gain sign-off from the IBTICM at Intermediate or Advanced level (the CCT programme is essentially the Advanced programme in terms of content and duration, but must be followed in a post prospectively designated for the purpose of delivering training to the CCT in ICM).

Designated posts, advertised on a national basis, have been established for the purpose of training leading to a Certificate of Completion of Training (CCT) in ICM, awarded with a CCT in a specialty of primary appointment. For entry to the programme trainees must hold a National Training Number (NTN) in a specialty of primary appointment. **A trainee cannot obtain a joint CCT in ICM unless they are in one of these posts.** Trainees not in a designated joint CCT post can still receive sign-off from the IBTICM at Intermediate or Advanced level, but not a joint CCT.

For the ICM joint CCT programme, competences at the levels of Basic training in ICM, complementary specialty and Step 1/Intermediate training may be gained in a variety of posts:

- For the purpose of the training programme of the specialty of primary appointment
- Acute Care Common Stem (ACCS) training
- A Fixed Term Specialty Training Appointment (FTSTA)
- In a Locum Appointment (Training) (LAT) post
- After entry to a designated CCT post in ICM