**PRACTICAL PROCEDURES FOR BBT IN 2019. SUMMARY OF EXPECTATIONS**

When the BBT curriculum was written the practical procedures related to the DOPS were aligned to the curricula in Paediatrics/CMT/Core Psychiatry and GP at that time. It is recognised that some of the “base” curricula have changed the procedural requirements and the BBT curriculum does not necessarily reflect this. The plan is to update the BBT curriculum, but many of the “base” specialties are in a state of flux with their curriculum and therefore it only makes sense to update the BBT curriculum when the “base” specialty curricula have stabilised, which is anticipated for 2020.

Until then it suggested that a pragmatic approach is taken, and that DOPS and procedural skills are directed towards the procedures in the current core curricula. This would be in line with the numbers specified in the BBT curriculum assessment grid (p139 in the BBT curriculum)

Specifically this means that for BBT the following DOPS/CEPS would be expected:

General Practice

There would be expectation to do “some” (1-2 or more) CEPS from the following list:

Breast examination

Male gentitalia examination

Female gentitalia examination (must specify bimanual examination and must include speculum examination, or speculum exam must be included in a separate CEPS eg when taking a smear)

Rectal examination

Prostate examination

Medicine

There would be an expectation to do 4 DOPS from the following list. This includes the option of doing this in a skills lab or via satisfactory supervised practice:

Advanced cardiopulmonary resuscitation (CPR)

Direct current (DC) cardioversion

Temporary cardiac pacing using an external device

Access to circulation for resuscitation (femoral vein or intraosseous)

Pleural aspiration for fluid (diagnostic) b

Intercostal drain for pneumothorax

Intercostal drain for effusion

Nasogastric (NG) tube

Ascitic tap

Abdominal paracentesis

Lumbar puncture

Paediatrics

There would be an expectation to do 4 DOPS from the following list.

Oral communication

Written communication

Clinical examination

Basic and advanced life support

Bag/mask ventilation

Peripheral Venous cannulation

Lumbar Puncture

Psychiatry

No specific DOPS required for BBT but see table below for additional expectations if entering Psychiatry after BBT.

REQUIREMENTS FOR TRANSITIONING INTO SPECIALTY PROGRAMS AFTER BBT.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | GP | Paed | Medicine | Psychiatry |
| Essential requirements for entering year 2 of specialty |  |  | Part 1 MRCP (UK) | Evidence of ECT experience  A second CbDGA |
| Highly recommended requirements for entering year 2 of specialty |  | Foundation of Practice (MRCPCH) |  | Part A MRCPsych |
| Things to think about, but these would put you well ahead of your colleagues |  | Other Theory parts of the MRCPCH exam | Part 2 MRCP (UK) |  |