ANZCA
FPM

President and CEO
Australian and New Zealand
College of Anaesthetists

3 September 2026

Mr Blair Comley PSM
Secretary, Dept of Health, Disability and Aging

Via email: blair.comley@health.gov.au

Dear Mr Comley PSM

**Data to support anaesthesia training program volumes of practice**

The Australian and New Zealand College of Anaesthetists (ANZCA or the college) is one of the largest medical colleges across Australia and New Zealand, responsible for the postgraduate training programs of anaesthetists and specialist pain medicine physicians. There are over 2000 ANZCA anaesthesia trainees in 156 accredited training sites (including satellite sites) across Australia and New Zealand.

ANZCA wishes to work collaboratively with your department to help ensure the anaesthesia training pipeline supports surgical and procedural demand in your jurisdiction. The requested data will help us identify available training opportunities, emerging bottlenecks, and practical ways to align trainee placements with your health service needs.

**About the ANZCA anaesthesia training program**

The ANZCA anaesthesia training program consists of five years supervised training – two years of introductory and basic training; two years of advanced training; and one year of provisional fellowship training. Trainees must complete minimum training time, volumes of practice (VOP) for cases and procedures, courses and assessments.

These VOP and assessment requirements relate to the following specialised study units (SSUs):

- Cardiac surgery and interventional cardiology
- General surgical, urological, gynaecological and endoscopic procedures
- Head and neck, ear nose and throat, dental surgery and electro-convulsive therapy
- Intensive care
- Neurosurgery and neuroradiology
- Obstetric anaesthesia and analgesia
- Ophthalmic procedures
- Orthopaedic surgery
- Paediatric anaesthesia
- Plastic, reconstructive and burns surgery
- Thoracic surgery
- Vascular surgery and interventional radiology.

Training in these SSUs is an important part of training specialist anaesthetists to gain the specialised knowledge, skills and professional attributes required for the varied areas of anaesthetic practice. Knowledge of these areas is essential for high-quality generalist anaesthesia practice, especially in regional and rural areas.

Each assigned VOP is the minimum required to achieve learning outcome requirements as specified in the ANZCA Anaesthesia Training Program Curriculum. For some cases and procedures, it is expected that trainees will complete more than the minimum to achieve proficiency. In addition, any case may have aspects which count towards various VOP requirements. For example, anaesthesia for a craniotomy in a child may count towards:

- The neurosurgery and neuroradiology SSU requirements.
- Paediatric case requirements in the paediatric anaesthesia SSU, and
- Arterial line insertion for the general anaesthesia and sedation clinical fundamental.

Every effort is made by the college and health setting to ensure a clear pathway for trainees to complete their VOP and provide the stability and assurances they need to engage with the anaesthesia training

ANZCA House
630 St Kilda Road, Melbourne VIC 3004
+61 3 9510 6299
www.anzca.edu.au

program. It should be noted that VOPs are the absolute minimum in most cases for competence rather than mastery.

However, in some instances a trainee may be unable to meet the minimum required VOP in the allocated rotation/placement timeframe. For example, due to limitations in access to specific VOP on their rotation and/or as a result of shifting models of care for surgical interventions and medical care in recent years. This is sometimes referred to “bottlenecks” in the training program.

These bottlenecks may be different for each jurisdiction, hospital setting and regional area, however, are generally known to relate to paediatric anaesthesia, neuroanaesthesia, and cardiothoracic anaesthesia. The flow-on impact is some trainees may take longer to work in, and service, Australian and New Zealand health systems as qualified specialists.

**What we require**

ANZCA is in the process of reviewing the anaesthesia training curriculum to ensure it reflects contemporary practices, while ensuring training outcomes/learnings are successfully translated into clinically safe and independent practices.

To inform this review, relevant inputs would be beneficial. From every Australian state and territory and New Zealand health department we are requesting information on how many of the following procedures are performed at each relevant hospital (including public and private settings). Ideally this information would be identified by quarter or month to understand any seasonal variation, over the last three to five years for trend analysis.

- Craniotomy
- Interventional neuroradiology with GA
- GA in children <2
- GA in children 2-6 years
- GA in children <16 years
- Aortic surgery (endovascular or otherwise)
- Thoracotomy/thoracoscopy
- Cardiopulmonary bypass cases
- Interventional cardiology (separating by GA and sedation)
- Spinal surgery (10 cases are needed for the neurosurgery SSU)
- Burr hole procedures
- Shunt procedures
- Interventional neuroradiological procedures (separating by GA and sedation)
- Cardioversion
- Pacemaker check
- Trans oesophageal echocardiography (TOE).

This information will help inform the hospital activity demand for particular procedures and if this can suitably cater for the SSU requirements of the number of trainees in each jurisdiction.

It is also important to understand that although the training of anaesthesia registrars is the primary priority for anaesthesia departments, many hospitals have numerous other obligations to provide access to anaesthetic skills, including enabling the training and competency development of intensive care, emergency department, paediatric registrars, paramedic and rural generalist anaesthesia registrars. These trainees would utilise some of these cases/procedures.

We thank you for your continued collaboration in ensuring the anaesthesia workforce in Australia and New Zealand is reflective of health service needs. If you have any queries in relation to this letter please contact Richard Newsham-West, ANZCA Head of Curriculum and Assessment on rnewshamwest@anzca.edu.au or Prof Leonie Watterson, FANZCA and ANZCA councillor on Leonie.Watterson@anzca.edu.au.

Yours sincerely

**Dr Tanya Selak**
President

**Dr Lance Emerson**
Chief Executive Officer