Continued medical education (CME) focused on trauma: An opportunity for everyone not to be missed

Hussain Anthony Kazi,
Francois Tudor,
Wasim Sardar Khan,

Injury was founded in 1969 and is an international journal dealing with all aspects of trauma care and accident surgery. In 2017, the Editor-in-Chief Professor Giannoudis plans to introduce a section devoted to Continued Medical Education (CME) specifically aimed at trainees in trauma and orthopaedics preparing for the FRCS (Tr & Orth) examinations but also relevant to the established trauma surgeon and other healthcare professionals. The content of the FRCS (Tr & Orth) examination is changing regularly and trainees are increasingly reliant on up-to-date reviews for best current practice rather than outdated textbooks, and this Section will provide material for this niche.

This Section will cover a wide range of interesting and evidence based topics, and will form a regular feature in all issues of the Journal. In the first instance this will be in the form of topical review papers supplemented by five multiple-choice questions and two extended matching questions on that subject. The questions will be aimed at the level required to pass the FRCS part 1. The answers to the questions will be provided in the following CME Section. At the end of every two year, the CME Section will be provided as a special issue and include a compilation of all CME papers and questions published within the last two years. This compilation will be available to British Orthopaedic Trainee Association (BOTA) members at a discounted rate. This compilation will become a useful learning tool over the years, and we aim to cover the whole trauma syllabus in a four year cycle.

The tentative list of titles will aim to cover topics that include important orthopaedic trauma topics, including their basic sciences and biomechanics, epidemiology and research methods, pathology, clinical assessment, investigations and treatments. We are starting the Section off with an Editorial on Limb Reconstruction after Traumatic Bone Loss.

CME articles are sought from post-FRCS trainees and established trauma surgeons from the UK and abroad, and go through the same rigorous reviewing process as other submissions. In the future we plan to expand the CME Section to include web-based resources including self-assessments, webinars, presentations, case-based studies and information on meetings, fellowships and research grants. We would like to hear the views of readers and authors and believe that this feedback will help shape the section over the coming years.