

## JAG Trainee Certification

### Guidance for Colonoscopy

JAG Certification is a two-part process, with **Provisional JAG Certification** followed by a shorter period of advanced, targeted training prior to **Full JAG Certification**.

#### Provisional JAG Certification

Satisfactory completion of the steps outlined below will lead to Provisional JAG Certification for the nominated procedure:

1. Register a Form G with the JAG
2. Develop and maintain an endoscopy portfolio containing those items listed in the **JAG Trainee Certification – General Guidance** document, available in the Download Centre of the JAG Website ([www.thejag.org.uk](http://www.thejag.org.uk)).
3. Meet the specific eligibility criteria below and informally agree between trainer and trainee that a Summative DOPS Assessment would be appropriate.

The use of DOPS for JAG Certification for endoscopists in training must be in partnership with audited performance data that are guaranteed by a relevant trainer at the time of the assessment. Performance data must be in line with the current national standards for colonoscopy. At present these are confined to those items noted below indicated with a \*.

Criteria	Thresholds
Lifetime colonoscopy number	> 200 (recommended)
Lifetime perforations	< 0.5%
Colonoscopies in previous 12 months	> 100 (recommended)
* Sedation levels in the under and over-70's ( $\leq 5$ mg midazolam and $\leq 50$ mg pethidine in <70 yrs; ( $\leq 2.5$ mg midazolam and $\leq 25$ mg pethidine in $\geq 70$ yrs)	Midazolam < 5 / <2.5 mg Pethidine < 50 / <25 mg
* Caecal intubation rates on an intention-to-intubate basis	> 90%
* Polyp detection and removal	> 10%
Data certified	Endoscopic supervisor

4. Undertake the Summative DOPS Assessment
5. Submit to the JAG Office a Trainee Portfolio, including all documents outlined in the **JAG Trainee Certification – General Guidance** document, available in the Download Centre of the JAG Website ([www.thejag.org.uk](http://www.thejag.org.uk)).

## Continued Practise

Continued monitoring of data should meet the performance standards criteria below:

Criteria	Thresholds
Lifetime perforations	< 0.5%
Colonoscopies in previous 12 months	> 100 (recommended)
Mean sedation rates under 70 yrs / 70+	Midazolam < 5 / <2.5 mg   Pethidine < 50 / <25 mg
Caecal intubation	> 90%
Polyp detection and removal	> 10%
Data certified	Endoscopic supervisor

And adhere to the following Continued Professional Development requirements:

1. Trainer available within *endoscopy unit* to supervise next 50 “independent procedures”
6. Trainer available within *hospital* to supervise subsequent 50 procedures
7. Targeted training on more difficult / complex cases
8. Peer review annually, using DOPS over four cases, by consultant trainers

## Full JAG Certification

To achieve Full JAG Certification, the trainee should meet the criteria above, continue to collect data and follow the guidance laid down within the Continued Practise area of this document.

Upon successful submission of a declaration and data summary to the JAG Office, Full JAG Certification will be awarded.

## Special Notes

1. The JAG Trainee Certification process is likely to change in the coming twelve months. It is therefore highly recommended that all trainees refer to the JAG website ([www.thejag.org.uk](http://www.thejag.org.uk)) for the most up to date guidance.
2. If a Trainee is applying for JAG Colonoscopy Certification, they will automatically be awarded with JAG Flexible Sigmoidography Certificatio
3. Screening colonoscopy is a special case, with slightly more stringent criteria required. The eligibility criteria, the use of the DOPS in assessment, and the requirements for continued JAG Certification for screening is covered in detail elsewhere ([www.bcsp.nhs.uk](http://www.bcsp.nhs.uk) – NHS users only, registration and password required). It is the same DOPS form, fully endorsed by the JAG, and certified through the JAG.