

Guidance – Colposcopy requirements for obstetricians and gynaecologists in the Expedited Specialist pathway

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Background

If you hold a recognised obstetrics and gynaecology qualification listed on the Medical Board of Australia's [Expedited Specialist pathway: accepted qualification list](#), you are eligible for specialist registration through the Expedited Specialist pathway.

In Australia, colposcopy training is a part of the curriculum for obstetricians and gynaecologists. The Medical Board of Australia (the Board) has determined that as part of your registration, you may be required to undertake, or show you have completed, specific training in colposcopy that meets the training requirements outlined by the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG).

Where you do not have the requisite training, the Board will apply a condition to your registration that will limit you to performing colposcopies under supervision. This will continue until you have provided the Board with evidence that you have completed the requisite training. Once you have completed the required training, you may apply to the Board to have this condition removed from your registration.

Colposcopy training is not mandatory. It is up to you (and your employer in Australia) to decide if you need to be able to practise colposcopy in Australia and if you want to have this condition removed from your specialist registration.

If you do want to undertake colposcopy training, you will have two options:

1. you may complete colposcopy training that meets RANZCOG requirements prior to coming to Australia, or
2. you can complete colposcopy training in Australia.

This guidance sets out the evidence that the Board will accept for satisfactory completion of colposcopy training, or if you have not yet completed colposcopy training, the training and assessment you propose to complete as part of your supervision arrangements for medical registration.

1. Colposcopy training completed before your Expedited Specialist pathway application

If you have completed colposcopy training before you apply for specialist registration through the Expedited Specialist pathway, your training needs to have met the minimum training requirements set by RANZCOG¹.

You may have completed the training as part of your training program, or as a specialist interest area in addition to your specialist training.

Your training should have included both theoretical and practical components. You must have performed at least 100 colposcopies under supervision **and** been formally assessed to confirm that you can competently and safely perform the procedure as the primary operator.

1.1 Evidence required

You need to submit evidence of certification or successful completion of training by the colposcopy training provider. This can include certificates or letters issued by the training provider, logbooks detailing the number of procedures you have completed, and evidence of assessments demonstrating you can competently and safely perform the procedure as the primary operator upon completion of your training.

2. Colposcopy training completed after your Expedited Specialist pathway application

If you have not completed appropriate colposcopy training before applying for the Expedited Specialist pathway, and are required to perform the procedure as part of your employment, you must submit a training plan as part of your supervised practice plan for the Expedited Specialist pathway. This training plan should outline the training and supervision you will undertake to make you safe and competent to perform colposcopy as the primary operator.

All colposcopy training should be conducted under supervision and include theoretical and practical components, with practitioners meeting procedural standards set by RANZCOG². It is expected that supervisors will provide ongoing support and hold regular feedback sessions with you during the training period.

1 The Royal Australian and New Zealand College of Obstetricians and Gynaecologists' curriculum outlines the procedural requirements for colposcopy training: <https://ranzcof.org.au/wp-content/uploads/RANZCOG-Curriculum.pdf>

2 Royal Australian and New Zealand College of Obstetricians and Gynaecologists Assessment of Procedural and Surgical Skills (APSS) – Colposcopy: [Assessment of Procedural and Surgical Skills \(APSS\) Colposcopy Information and Instructions](#)

It is expected that you will be formally assessed by your supervisor a minimum of three times during the period of supervised practice. The assessment should confirm whether you can safely and competently perform colposcopy as a primary operator. When you have completed your colposcopy training and the three assessments, the Board will review the evidence you provide and decide whether the colposcopy condition can be removed from your specialist registration.

Colposcopy training, and the required three assessments, are completed in addition to the workplace-based assessment required for the Expedited Specialist pathway.

2.1 What do I need to submit for colposcopy training?

You should submit your colposcopy training plan as part of your *Supervised practice plan*³ for the Expedited Specialist pathway. When completing the *Supervised practice plan*, you should list colposcopy training under *Section F: Issues to be addressed during supervised practice* and detail the training you will complete under *Section H: Extra requirements / documents*.

The Board will assess the colposcopy training in the context of any other supervised practice requirements for the Expedited Specialist pathway.

It is expected that the colposcopy training and the final colposcopy assessment will be completed within the required period of supervised practice for the Expedited Specialist pathway.

2.2 Who can supervise colposcopy training?

The supervisor and assessor for your colposcopy training will be a Board-approved supervisor in accordance with the *Supervised practice framework*⁴. If the nominated supervisor for your supervised practice period is not an appropriate supervisor for colposcopy training, you can propose alternate supervisor/s for your colposcopy training.

2.3 What information should I include in my supervised practice plan?

You should provide details of your proposed colposcopy training as part of your supervised practice plan. You can attach additional training documents to support your proposed plan if needed. Information you may want to include are:

- how the theoretical and procedural skills will be taught and monitored during the supervised practice
- expected case numbers during the training period
- the expected date for completing training and
- proposed dates for your assessments.

2.4 Structure of the assessments

You must be assessed at a minimum three times to confirm that you can safely and competently perform a colposcopy procedure as a primary operator. The final assessment should be conducted at the end of your supervised practice period. All three assessments should be undertaken as a Direct Observation of Procedural Skills (DOPS)⁵. Table A includes a summary of the DOPS assessment format for colposcopy.

The assessor will evaluate your performance based on your technical skills and theoretical knowledge related to the colposcopy procedure. More information on the DOPS assessment criteria can be found in Appendix A.

How do I submit evidence of completed colposcopy training?

When you have completed your supervised practice for the Expedited Specialist pathway, you must submit a final supervision report to the Board. This report must be accompanied by all the necessary evidence the Board requires to confirm you are a safe, ethical, and competent practitioner for the Expedited Specialist pathway. As part of this submission, you must include evidence of completing colposcopy training and the three DOPS assessment.

3 The Supervised practice plan is available on the [Board's website](#)

4 The Supervised practice framework is available on the [Board's website](#)

5 The Board's Direct Observation of Procedural Skills assessment form (DOPS-30) is available on the [Board's website](#)

Table A: Direct Observation of Procedural Skills

Structure of the assessment	The supervisor observes you with a new patient, followed by a feedback session. The feedback session should last 10–15 minutes. The appropriate documentation must be completed after each assessment by the supervisor.
Number of procedures observed	You will need to be formally observed and assessed, at a minimum, three times during your period of supervised practice, with the final assessment conducted at the end of your supervised practice period.
Evidence of assessment	The supervisor needs to complete the Board's Direct Observation of Procedural Skills assessment form (DOPS-30). In the comments section, the supervisor should detail any specific feedback about your performance and how you should address any domains (detailed in Appendix A) where you did not perform <i>at expected level</i> .
Submit evidence of completion	Please submit the three completed Board DOPS-30 forms with your final supervised practice supervisor report.

Appendix A: Domains of assessment for a Direct Observation of Procedural assessment

When performing a DOPS colposcopy assessment, the supervisor will consider the domains of assessment outlined on the Board's DOPS-30 form. The following areas will be assessed as part of the colposcopy assessment:

Domain	Description
Demonstrates understanding of indications, relevant anatomy, technique of procedure	Identifies that there is a clear indication for the procedure; approach and explanation of procedure are accurate and clinically appropriate.
Obtains informed consent	Prior to procedure explains the procedure in plain language; explores patient's understanding; uses interpreter if required; asks for patient's permission to proceed (verbal or written as required).
Demonstrates appropriate preparation pre-procedure	Is familiar and practiced with any equipment to be used; arranges equipment and materials needed for procedure; briefs nurse/assistant; shows and explains equipment to patient in plain language.
Appropriate analgesia or safe sedation	Uses correct analgesia or safe sedation as indicated in the correct form and dosage.
Technical ability	Demonstrates familiarity with equipment and materials; has a capability with the technique that is appropriate for the skill level expected of an Australian trained specialist in the specialty.
Aseptic technique	Washes hands before and after the procedure; uses gown and gloves as appropriate for procedure; prepares site with antiseptic swab; avoids contamination of equipment and site for insertion; deals appropriately with any inadvertent contamination.
Seeks help where appropriate	If unsure of any aspect (e.g. patient anatomy; equipment; failure to proceed as expected) promptly seeks supervisor assistance.
Post procedure management plan	Explains to the patient the expected progress and any symptoms or signs that may commonly occur. Writes up procedure in clinical records, any post-procedure observations, and management plan.
Communication skills	Prior to procedure seeks information about the patient's language skills, intellectual and physical capacity from patient's clinical record notes and attending professional staff. Employs assistance of professional interpreter if required. Uses clear and unambiguous language and checks patient understanding at regular intervals.
Consideration for patient / professionalism	Demonstrates courtesy and consideration to the patient and any assisting staff; shows awareness of patient privacy needs; exposes the patient in an appropriate manner for the procedure.