

## Q36 Should a minimum number of cases be done during training? If so, how many for EMR; ESD?

Answered: 12 Skipped: 0

#	RESPONSES	DATE
1	This is poorly studied. Numbers are important for ensuring adequate case exposure, but quality should trump quantity.	11/13/2018 7:19 AM
2	no data, I guess 20 would be good ?	12/7/2017 5:54 PM
3	No data to inform this - Personal view - depends on individual aptitude and setting - may need to be competency based rather than numbers based	12/3/2017 10:10 PM
4	EMR: >50 ESD: ???	11/29/2017 12:37 AM
5	Yes, no idea of numbers.. we need data for this, but others can choose for now and decide later if we did well	11/18/2017 9:45 PM
6	50 EMR	11/13/2017 2:11 PM
7	We should not be using absolute number of cases to assess competence Validated performance metrics should be used to determine competence	11/5/2017 4:37 PM
8	EMR: 100 ESD: 50 The above preferably only after 1500 colonoscopies have been performed. Perhaps a 3 rd year similar to ERCP/EUS.	11/5/2017 4:01 AM
9	No idea	11/3/2017 3:16 PM
10	yes minimum of P-EMR 20 ESD - 20 but they should observe and assist in more	11/3/2017 2:08 PM
11	No data available for EMR I think, ESD should have minimum number but still difficult to assess competency on basis of just number	11/1/2017 12:08 PM
12	ESD - mentorship, ex-vivo n=20, assistance 20-40, supervised n=20. Competency based progression. EMR - gradual progression depending on competence.	10/31/2017 11:19 PM