The recognition of the complementarity between ATLS® and ETC® and of the latter as ESTES® official course was a clarifying step and a clear sign of affirmation of European autonomy in this matter.

Regarding non-trauma emergency surgery, we are witnessing the emergence of new projects, one of ESTES, ESC®, others of the initiative of different entities, such as the EASC®, from DCRA®, Ireland, all pointing to a common model.

Regarding trauma emergency surgery, the question of the need for an European course was raised on previous occasions, particularly in Budapest, 2008, during the ESTES congress meeting of the Visceral Trauma Section and the General Assembly. Prevailed then the understanding that the DSTC™, an IATSIC® course, was responding to the needs of the ESTES members, looking unnecessary the development of a new training model.

There are, however, regulatory issues in the DSTC proving to be harmful and even discriminatory for surgeons from small countries (not only from Europe), interested to become International Faculty, that should be changed. Also, must be taken into account 1) the recurrent final comments of those attending the course about its little adaptation to European reality and 2) the great dependence on persons acting outside Europe. Here too, Europe should probably acquire more autonomy.

Without denying that this is a matter that essentially concerns IATSIC, we believe that ESTES, as an entity that recognizes and supports the DSTC, has at least the duty to have an opinion.

So, pretending to draw the attention of the ESTES members, especially the Board members, to this issue and using the texts of the DSTC Course Directors Manual 2014, we propose the following changes (written in red):

About the Course Director:

**The Course Director must be a full, current, member of IATSIC member of the International Faculty**

- this requirement seems necessary in terms of defense of the international nature of the course

**For an inaugural National Course, and for all IATSIC run International Courses (i.e. courses where a National Memorandum of Understanding does not exist), the Course Director must be a member designated by the IATSIC Executive Committee**

- to be a member of IATSIC Executive Committee is a requirement that has proved difficult to meet for several times

**The Course Director must fulfill the requirements for Course Faculty (given below)**

- this requirement becomes redundant

About the Faculty:

International Faculty enhance the international nature of the course, and, when foreign faculty, act as External Moderators

- international and foreign are not coincident terms, what needs to be highlighted

An International Faculty member must be a current member of IATSIC and must also fulfill the requirements for Local Faculty National (Local) Course Faculty (below)

International Faculty must be members of a National Programme Faculty

- in countries with small population size, it is practically impossible to develop a national program, what prevents in practice the possibility of their surgeons to get this kind of recognition by IATSIC; it is proposed, therefore, the cancellation of this requirement

An International Faculty member must have completed five (5) full IATSIC DSTC™ Courses inclusive of animal laboratories

- this determination, in itself understandable, has been accompanied by an accessory unwritten understanding in the sense that these five (5) courses must be done in the same country, here understood as an independent state. This understanding is unacceptable, either because it is impractical in countries with small population size, either because it goes against European Union (EU) Directive 2004/38, on the right of citizens and their family members to move and reside freely within the territory of the member states, and Regulation 492/2011, on freedom of movement for workers (a fortiori in the case of pro bono activities, such as the DSTC). Moreover, it is discriminatory, taking into account that the surgeons from federated states of large countries, such as the United States or Brazil, for example, are not faced with this limitation.

An application is then made through the Swiss Office (see form on page 21), must be proposed by the local DSTC™ Chairman, represented on the DSTC™ International Subcommittee

- alternatively, for the reasons given above, this proposal should be allowed to result from individual application signed by a minimum number of members of the International Faculty, regardless of nationality, for example five (5)

National (Local) Course Faculty members must have themselves attended a DSTC™ Course and be current members of IATSIC

- this requirement seems to us also necessary in terms of defense of the international nature of the course

National (Local) Course Faculty members must have completed an ATLS® Instructor Course, Royal College of Surgeons “Train the Trainers” Course, or an equivalent Instructor training course

- it would be appropriate 1) to define better what is meant by equivalent Instructor training course and 2) face the possibility of creating a DSTC own course, in order to reduce the current dependence on the ACS courses, which has proved limiting and even unfair in some countries.

In conclusion, one of the most limiting aspects is the lack of recognition of the right of free movement of citizens and workers in EU. In EU the concept of National (Local) Faculty urgently needs to be considered equivalent to European Faculty, encompassing all EU countries as well as those with whom there are close relationships that may justify it, as Switzerland and Norway, for example.

In parallel with the existing proposal to establish a EU qualification of competence in trauma and non-trauma emergency surgery, could ESTES, through negotiation with the parties responsible for DSTC, start working towards the establishment of an autonomous training model, an European Definitive Surgical Trauma Care Course.

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[Advanced Trauma Life Support, American College of Surgeons (ACS)]
[European Trauma Course, European Trauma Course Organization (ETCO)]
[European Society for Trauma and Emergency Surgery]
[Emergency Surgery Course]
[Emergency Abdominal Surgery Course]
[Donegal Clinical and Research Academy]
[Definitive Surgical Trauma Care]
[International Association for Trauma Surgery and Intensive Care]