ADVANCED GENERAL THORACIC SURGERY
FELLOWSHIP AVAILABLE

The West China Hospital (WCH) of Sichuan University offers an advanced one-year fellowship for general thoracic surgery for international participates. Previous training in a general thoracic residency or similar setting is encouraged, but not required.

The Department of Thoracic Surgery at WCH has been one of the most renowned centers in China for nearly 30 years. Currently, the department is the National Key Discipline and National Key Clinical Specialty of China. It’s a national base for the training of thoracic surgeons and is also an essential part of the West China Training Center for Clinical Skills, which was the first training center accredited by the American College of Surgeons (ACS) in Asia. Additionally, the training program for mini-invasive thoracic surgery was also the first program accredited by the Royal College of Surgeons (RCS) in China. Four young surgeons trained here have won championships in the national competition of thoracoscopic surgery.

Prof. Lunxu Liu is the academic leader of our department. He is the pioneer in minimally invasive thoracic surgery and lung surgery in China and has dedicated himself in the promotion of minimally invasive thoracic surgery in China. Nearly all centers adopt the concept of “single-direction thoracoscopic lobectomy” created by him in China. Prof. Longqi Chen is now the director of our department. He is a well-known expert in esophageal diseases and is the director of the executive committee in the International Society for Diseases of the Esophagus (ISDE). There are 12 full-time surgical teams, each of which is led by one outstanding senior surgeon.

Trainees would receive the most advanced operative experience which encompasses all types of minimally invasive thoracic surgery, including three-portal or uniportal single-direction thoracoscopic lobectomy/segmentectomy, non-grasping en bloc mediastinal lymphadenectomy, the suction-compression angiography technique, bronchial or bronchovascular sleeve lobectomy, minimally invasive esophagectomy with layered anastomosis, inflated mediastinoscopic esophagectomy, and transthoracic or subxiphoid thoracoscopic mediastinal surgery, and so on. Trainees also receive a robust perioperative clinical experience with the management of a wide array of complex general thoracic surgical conditions. Trainees would obtain experience with robotic thoracic surgery and lung transplantation. Opportunity and support for clinical research, presentation, and publication are available.

Applications are being accepted now. Interested candidates should send curriculum vitae to:

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