

POSTGRADUATE MEDICAL COUNCIL OF VICTORIA

PMCV 2026-2027 Match Rules

Nephrology New and
Continuing Advanced Trainees
Match Rules

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General Rules

There is a Central Appointment Process for Nephrology Advanced Trainees in Victoria and Tasmania.

In 2026, for 2027 positions, the Postgraduate Medical Council of Victoria (PMCV) will conduct the Nephrology Advanced Training Match for Victorian and Tasmanian positions on behalf of the Co-ordinator of Nephrology Advanced Training, VIC & TAS. All potential candidates must register via the PMCV website for participation in the match.

Match resources can be found on the PMCV website and the Allocation and Placement Service website: <https://allocations.pmcv.com.au/matches>

Please note: If you wish to be considered for a position outside Victoria or Tasmania, you will need to lodge a separate application with the relevant State or Territory.

Contacts:

Professor Lawrence McMahon, Specialty Group Coordinator, Nephrology Advanced Training (Lawrence.mcmahon@monash.edu); and Michelle McNally, PA to Professor McMahon: Michelle.mcnally@easternhealth.org.au;

Allocation and Placement Service - PMCV (allocations@pmcv.com.au)

How to Apply

- Applications for all Nephrology advanced training positions must be completed using the PMCV computer matching website.
- Positions are advertised on the RACP website and on the PMCV Allocation and Placement Service.
- New Trainee Applications open on the PMCV Allocation and Placement Service website on **6 July 2026** and close at **5:00 PM on 30 July 2026**.
- Applicants will be able to re-order their hospital preferences until **9:00 AM on 17 August 2026**.

Please note referee reports must be received by **5:00PM on 30 July 2026**, *so early application and nomination of referees is strongly advised.*

1. Nephrology Advanced Training Institutions

All listed Health Services recruiting Advanced Nephrology Trainees must utilise the PMCV Nephrology Advanced Trainee Match and may not go outside the service for the appointment of Nephrology Trainees. Each Health Service must have already nominated an upper limit on the number of Nephrology trainees it will take as an outcome of the match. No more than this upper limit will be matched to the Health Service. Again this year, there will be a split matching system: ongoing trainees run in June/July and prospective first-year trainees in August/September. Individual Health Services are responsible for determining and organising their Nephrology training programs to meet current RACP curriculum training and supervisory requirements. For 2027 the following limits apply (combined first and subsequent year positions):

Health Service	Trainees	HOD Name	HOD Email	EFT
Albury Wodonga Health	1**	Heron, Jack	jack.heron@awh.org.au	1**
Alfred Health	3	Robson, Kate	ka.robson@alfred.org.au	3
Austin Health	4	Mount, Peter	peter.mount@austin.org.au	4
Barwon Health	1	Blair, Susan	susan.blair@barwonhealth.org.au	1
Bendigo Health	2	Holmes, Christian	chris.holmes@monash.edu	2
Eastern Health	3	McMahon, Lawrence	lawrence.mcmahon@monash.edu	3
Grampians Health	1	Sharma, Susheel	susheel.sharma@gh.org.au	1
Launceston General Hospital (TAS)	1	Raj, Rajesh	rajesh.raj@ths.gov.au	1
Melbourne Health	5.6**	Dwyer, Karen	karen.dwyer@mh.org.au	5.6**
Monash Health	7 [#]	Kanellis, John	john.kanellis@monash.edu	7 [#]
Northern Health	2	Barit, David	davidbarit@nh.org.au	2

Peninsula Health	1	Wong, Kim Meng	kwong@phcn.vic.gov.au	1
Royal Hobart Hospital (TAS)	1	Jose, Matthew	matthew.jose@ths.tas.gov.au	1
St Vincent's Hospital	3.6 [§]	Toussaint, Nigel	nigel.toussaint@svha.org.au	3.6 [§]
Western Health	4 [#]	Nelson, Craig	craig.nelson@wh.org.au	4 [#]

**: number of jobs and split (6 or 12 months) yet to be finalised; **: includes two trainees on 6-month sequential rotation from MH to AWHs; #: Nephrology trainees as stated and (organised post-match) Gen Med position; [§]: Half-time (6 months) accredited transplant or general nephrology position at STV and RMH.*

Summary:

- 40.2* trainees, incorporating 39 EFT/ effective 12-month training posts; plus 2 gen med/nephrology unaccredited positions (filled after match) – for prospective first years only.

Details of the positions are found in the Health Service Directory (see Reading Materials under the match).

The Continuing Advanced training selection process is competitive, and therefore merit-based. Both candidates and Health Services rank their preferences as part of the Match process. In accordance with the allocation and placement procedures, the preferences of candidates are considered with reference to where a candidate is ranked by a Health Service.

It is not permissible for candidates or Health Services to divulge their preferences / rankings to another party at any time.

All Health Services participating in this Match abide by the allocations and placement service code of conduct as detailed on our web site [PMCV Allocation and Placement Service](#) and must utilise the PMCV Nephrology Allocation and Placement Service and may not go outside the service for the appointment of Nephrology registrars.

2. Candidates' Eligibility

To be eligible to apply for selection as a Nephrology Advanced Trainee undertaking clinical training with the Royal Australasian College of Physicians (RACP) through the Specialty SAC of Nephrology, an applicant must meet the requirements described below.

- **Royal Australasian College of Physicians (RACP)**
The applicant must be registered with the RACP and, unless stipulated by the College to the contrary, have successfully completed all Basic Physician Training examination requirements. The continuing trainee match is for continuing trainees in Nephrology only.
- **Residential qualification:**
Although the RACP does not have any specific residential requirements for trainee registration, selection committees are aware that the employing Health Service(s) or institutions may have citizenship/residency requirements which need consideration in appointment decisions. **Overseas-trained specialists in Nephrology must be residing in Australia and hold a valid working visa for their application to be considered by the employing institutions.**
- Australian and New Zealand citizens and applicants with permanent residency who are eligible for appointment will be offered positions before those with temporary visas.
- If you meet the Eligibility Criteria for Nephrology Advanced Training, you can apply for a training position within the match.
- However,
 - For ongoing trainees, familiarisation interviews pre-match with relevant health services are recommended, although (pending satisfactory training) selection is expected.
 - A 'transplant' year is also a commitment the program makes to trainees, although this cannot be guaranteed for any particular year.
 - All attempts will be made to ensure a broad training spectrum at regional and metropolitan hospitals.
 - For prospective trainees, see below.

3. Applications

Applications for all Nephrology training positions must be completed using the computer matching website. In addition to registering for the match you may also need to complete an application directly with a Health Service. Please check the Health Services Directory on the computer matching website to see the individual Health Service's requirements for direct application.

Nephrology Advanced Trainees currently require 3 core clinical years to complete their training requirements. There are no 'optional' years available in other specialties or purely in research (e.g., as part of a PhD). This is a position that might be amenable to change in subsequent years, pending RACP and ATC directives.

It is a condition of the match that if successful, an applicant MUST accept the position offered. However, in addition to extenuating circumstances (which might not be able to be planned), there

are stated and long-standing exceptions to this, which can be discussed with the State Coordinator. Applicants and ATs should recognise it might not be possible to change sites once the match has been run, so early notification and discussion are essential (also see below).

Please think carefully before applying, as you may be matched outside metropolitan Melbourne (for 6 or 12 months) or to Tasmania (12 months).

Selection Criteria

- Only applicants who meet the eligibility criteria will be considered.
- Schedule of Dates/Timeline is available on the PMCV website and the APS Match. Trainees will preference positions first, then Heads of Departments (please note, HODs will be able to see whether trainees have preferenced the position, but not the ranking)
- Continuing Advanced Trainees must contact and complete applications with individual hospitals directly
- **Continuing Advanced Trainees in Nephrology are not required to preference all jobs, however, it is strongly encouraged; otherwise a position cannot be guaranteed.**
- As above, if extenuating circumstances exist and a trainee is unable to relocate, please notify the State Coordinator before applying. Please also refer to detailed information on Page 9.
- The results of the match will be considered final, all hospitals are required to offer their position to the matched trainee and all matched trainees are required to accept the position offered.

NEW APPLICANTS

All new applicants who are appointed to **recognised clinical positions in Victoria for 2026** through the Central Appointments Process will be accepted as Nephrology Advanced Trainees. As stated above, prospective trainees who have completed their BPT requirements and successfully passed the written FRACP exam are permitted to apply for selection into the Nephrology Program. It should be remembered that this is a competitive process and first year applications are assessed and ranked.

The ranking system is based on a scoring system with a maximum score of 70. The applicant's CV can score a maximum of 40 points (see below) and the referee scores account for 30 (best 2 of 3 referrals worth 15 points each). See below.

APPRAISAL 1: Curriculum Vitae (for 2025/6)

CRITERION	ASSESSMENT		
	Outstanding 10	Superior 7	Standard 4
Degrees and prizes/awards obtained during and after courses (Pt 1 RACP essential)	e.g. - MD with honours +/- - Clinical school prizes +/- - Other meritorious achievements: additional degrees +/- scholarships, etc.	e.g. - MD with honours +/- - BMedSci (research) +/- - Other meritorious achievements	e.g. - MD +/- (or equivalent) - BMedSci (non-research) - Few or no other relevant achievements
Peer-reviewed publications and conference / health service presentations (posters/ talks &c.)	e.g. - Highly active +/- - First author +/- - International or national level talks +/- - Higher impact journals	e.g. - Active +/- - Second or other author +/- - International or national level posters +/- - Lesser impact journals	e.g. - Few or nil publications - Local conferences only - Local health service presentations only
Renal clinical work in teaching hospitals, other specialty or discipline training	Extensive (>6 months)	Moderate (4-6 months)	Little (<3 months)
Volunteer, extra-curricular activities, significant non-renal or non-medical awards/ recognition	Extensive	Moderate	Little or none

Once ranked, the top applicants are chosen for interview. Usually, around 10 - 20 interviews are held each year by all the available heads of unit (HOU). Please note that, unlike the CV and referee reports, the interview process is not competitive other than to determine suitability for advanced training in Nephrology. Those applicants considered suitable (usually the large majority) are then free to enter the matching process and, if unsuccessful, again in the subsequent year (pending re-application).

This process is normally undertaken between July and August each year (see timeline for 2027 positions on page 13).

APPRAISAL 2: Referee reports (2026/7)

Referee reports:

- Best two of three reports
- Score/30, which is divided by 2 for each referee report:

Categories:

Overall Rating and Comment	single score (out of 10)
Clinical Competence	4 sections: 20 max
Communication and Conduct	8 sections: 40 max

Clinical Competence:

17 - 20 =	10
13 - 16 =	8
9 - 12 =	6
< 9 =	4

Communication & Conduct

36 - 40 =	10
28-35 =	8
24-27 =	6
< 24 =	4

The final score comprises the CV (score out of 40 across 4 categories) plus the best 2 (of 3) referee reports @ 15 points per report (score out of 30), with a final possible score maximum of 70.

*N.B. Referee reports are formatted by the RACP
as they apply across a range of specialties.*

ONGOING TRAINEES

- Subject to a satisfactory performance as assessed by supervisor reports, ongoing trainees will be appointed at one of the centres mentioned above within Victoria or Tasmania. This is the essence of the computer matching process, where the trainee and institution each have a key but limited capacity to select their preferences. It is for this reason that trainees **MUST** list all training institutions, or they risk not being selected.
- There is no longer a requirement for 12 months' training at a formal transplanting health service. However, trainees must spend time at a health service (at least one year) that has 'significant' numbers of transplanted patients.
- Similarly, spending multiple years at a single training centre is not encouraged.

OTHER ASPECTS

- Shared appointments & maternity leave:
 - The training committee welcomes shared appointments, but it is the responsibility of applicants to find their own training partner.
 - There should be no more than two part-time positions for each full-time position, with equal sharing of time and responsibilities according to the preferences of the Unit and availability of the applicants.
 - Maternity leave will be accommodated as per applicant's choice in alignment with national and state guidelines.
 - Candidates unable to travel and/ or sharing appointments and/ or applying for maternity leave:
 - **MUST** make their intentions and/or difficulties known to the coordinator as early as possible but well in advance of the formal selection process
 - The HODs will discuss and agree on an appropriate match and selection navigation for these candidates
- Interstate applicants
 - CVs and referee reports will be assessed as per local applicants
 - Those applicants previously assessed as suitable trainees can enter the match for the current year without further appraisal*, although a re-acquaintance interview is advised.
 - Irrespective of prior renal training, all other interstate applicants will be required to attend an interview with the joint HODs to establish a consensus on their suitability for training in the Victorian and Tasmanian systems§.

**: This assumes a favourable training report for the intervening years, with a statute of limitation of 2 years' absence; §: Dependent on achieving a sufficient score based on CV and referee reports.*

ALL TRAINEES MUST AGREE TO BE PLACED AT ANY OF THE INSTITUTIONS TABLED ABOVE. REFUSAL MAY RESULT IN EXPULSION FROM THE PROGRAM

- Exceptions to this rule may be considered (e.g. for illness or disability on the part of the applicant or a close family member **AND** requiring personal presence in Melbourne or their

current site); dependent children; pregnancy. A partner's employment requirements are not usually considered reasonable grounds for the applicant to request to remain in Melbourne.

- Please notify the matching coordinator (Prof. Lawrence McMahon) as early as possible if you believe that you have grounds for exceptional circumstances.
- Other personal issues will be assessed as they arise and a decision made based on the individual's circumstances
- You must notify the coordinator well before the matching process takes place if you believe that you should be given a rotation that allows you to commute from your chosen residence.
- This year's timeline for ongoing trainees is outlined on page 14.

4. Match Process 2026

All participating Health Services have agreed to participate in the Victorian state-wide selection process, with no Health Services permitted to go outside the match.

Subject to satisfactory performance, ongoing trainees can expect to be reappointed to fulfil the training requirements.

5. Interview

Health Services participating in the Continuing Trainee Match for Nephrology Advanced Training will organise interviews individually. Please contact each Health Service directly regarding interviews.

6. Candidate Preferences

Candidates will be able to add all available positions to their preferences in the Allocation and Placement Service until **5:00 PM 30 July 2026**.

Candidates will be able to re-order existing positions on their preference listing until **5:00 PM 17 August 2026**.

Health Services will have access to information only from candidates that apply to them via the PMCV allocation and placement service.

Both candidates and Health Services will rank their preferences prior to the match. In accordance with the allocation and placement process, the preference of candidates will be considered with reference to where a candidate is ranked by a Health Service.

Candidates must complete an application through the APS (Allocation and Placement Service) website prior to the closing date. Any incomplete application will not be considered.

7. Match Results

Successful applicants will be contacted by phone by the hospital Head of Unit or delegate, after a valid match has been declared. If the successful applicant declines a job offer at that hospital, they will be out of the match and the next highest applicant who missed selection initially will be offered that position.

Health Services and candidates will be able to access their match results via log in to the Allocation and Placement Service.

The PMCV will supply the coordinator the complete match results.

IMPORTANT: Only one offer will be made to each successful candidate.

Applicants who decline that offer will NOT be offered any other position within the network.

Matched Applicants: Computer Matching results are available to candidates and Health Service administrators via the PMCV computer matching website from **10.00am on 3 September 2026**. Matched candidates will receive an email from the PMCV advising them that they have been offered a position through the match and should check the details on the PMCV website.

Letters of appointment are made to successful applicants by the relevant institution.

Overall ranking will not be available to candidates.

Applicants who are not offered a position in the initial round of offers may be contacted if positions become vacant or if new positions are created if they scored sufficiently well as to be considered suitable for employment in a Nephrology Advanced Training position.

8. Unmatched Candidates

Unmatched applicants will receive an email from the PMCV advising them that they have not been offered a position through the match. Unmatched applicants will remain on a ranked list and will be notified should a position become available.

Unmatched applicants are advised to contact the coordinator for further information.

Please note: Nephrology Advanced Registrar positions which become available during any year due to unforeseen circumstances (such as parental leave or resignation of a registrar already in the training program) may occur outside the PMCV matching service.

9. Unaccredited, Gen Med, and Part-time Positions (EFT):

Unaccredited, Gen Med, and Part-time Positions (EFT):

WH: 1 EFT - 2 x 6 months (Gen Med)

RHH: 2 EFT x 6 months (Gen Med)

MMC: 1 EFT x 12 months (Neph)

The above list indicates those positions for 2027 that are within nephrology but unaccredited. Most if not all are accredited for gen med training (6 months). Two positions are not yet confirmed. These positions could be particularly suitable for those who are in the match but not successful in obtaining a training position for 2027. It is suggested that the HOD is contacted to discuss each position further after the match is run.

10. Application of Business Rules

These business rules apply only to the 2026 Nephrology Match.

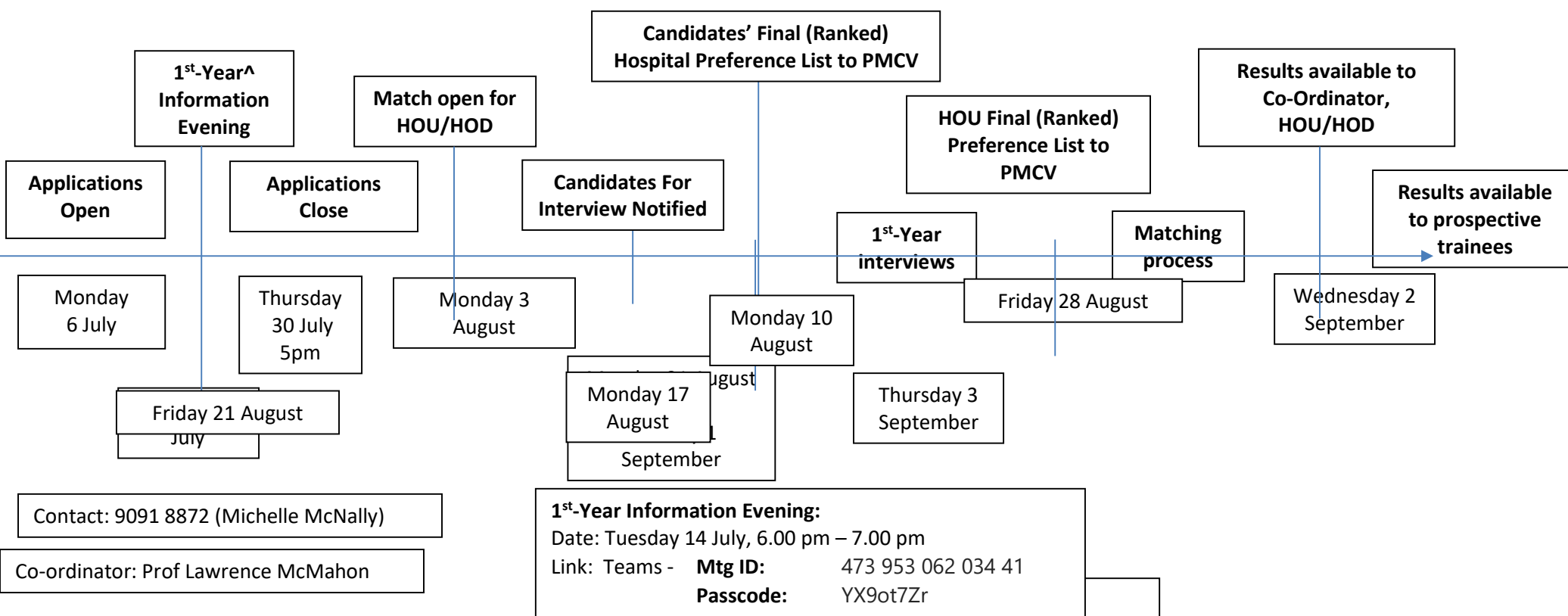
11. Privacy and Confidentiality

All personal information submitted by candidates including their application, CV, referee reports and current supervisor's reports will be accepted as private and confidential information.

In submitting that information the candidate consents for their application, CV and referee reports to be made available to the Health Services which the candidate has nominated on their Candidate Preference List and to the members of the relevant interview panel specifically for the purpose of the Central Appointments Process only.

Supervisors' reports will only be made available to the Training Coordinator and to the members of the HOU Interview Panel.

VICTORIAN and TASMANIAN NEPHROLOGY 1st-YEAR ADVANCED TRAINEE SELECTION PROCESS 2026 (for 2027) TIMELINE



VICTORIAN AND TASMANIAN

NEPHROLOGY **CONTINUING** ADVANCED TRAINEE SELECTION PROCESS 2026 (for 2027)

TIMELINE

