Thoracic Surgery Major Revision Program Requirements

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Baltimore, MD
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Disclosures

Walter Merrill, MD

- No financial conflicts to disclose

Donna Lamb

- No financial conflicts to disclose

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Program Requirements

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- PRs originated in 2008

ACGME Program Requirements for Graduate Medical Education in Thoracic Surgery

ACGME approved: June 12, 2007; effective: January 1, 2008
Revised Common Program Requirements effective: July 1, 2011
Revised Common Program Requirements effective: July 1, 2013
ACGME approved focused revision with categorization: September 29, 2013; effective: July 1, 2014
ACGME approved focused revision: February 9, 2015; effective: July 1, 2015
Revised Common Program Requirements effective: July 1, 2016
ACGME approved focused revision: September 27, 2015; effective: July 1, 2016

Frequently Asked Questions: Thoracic Surgery
Review Committee for Thoracic Surgery
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Question	Answer
Introduction	
What experiences comprise the required core surgical education for an integrated program? *[Program Requirement: Int.C.3.b)]*	In an integrated program, core surgical education experience comprises rotations designed to expose the resident adequately to the fundamentals of general and cardiothoracic surgery. The rotations should focus on introduction to and understanding of the following suggested list of acceptable topics: general surgery, cardiac surgery, thoracic surgery, congenital cardiac surgery, critical care, plastic surgery, trauma, vascular surgery, pediatric surgery, abdominal and alimentary tract surgery, basic and advanced laparoscopic skills, head neck and endocrine surgery, surgical oncology, and transplantation. The core surgical education experience must be suitable to provide the resident with essential knowledge in the above suggested categories to function as a practicing cardiothoracic surgeon, and must also allow sufficient time to complete the required case numbers as determined by the American Board of Thoracic Surgery (ABTS) for certification.
Which sites are appropriate for chief-year rotations? *[Program Requirement: Int.C.3.c)]*	Chief-year rotations take place at the primary clinical site or at an integrated site. When the program believes there is a sound educational rationale for a chief-year rotation to take place at a participating site, it must petition the Review Committee for an exception, and include current and proposed block diagrams, as well as information about supervising faculty members at the proposed chief rotation site with the petition. Approval must be obtained prior to the start of a rotation at a participating site.
Institutions	
What does it mean that the sponsoring institution must provide and document faculty development in education and teaching for the program director and members of the faculty? *[Program Requirement: I.A.1.c)]*	Program directors and faculty members should regularly participate in educational sessions aimed at improving knowledge and techniques involved in teaching residents. Examples of such activities include lectures, workshops or courses on faculty development provided by the GME office of the sponsoring institution, and departmental grand rounds or faculty sessions on such topics as methods of teaching and methods of evaluation. More formal activities, such as national courses specifically created to help improve the teaching and assessment of residents, are also appropriate. Examples include the

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Requirement Revisions

- Common PR Changes
  - Eligibility and exception requirements for all programs
  - Clinical Competency Committee
  - Requirement for use of Milestones assessment in Summative Evaluation
- Focused PR Changes
  - Addition of vascular surgery for eligibility
  - Addition of Board pass rate
  - Clarification of operative and procedural experience requirements

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First Call for Public Input

- TSDA & ACGME eComm – open 2 mo

Major Revision to the Program Requirements for Thoracic Surgery
The Review Committee for Thoracic Surgery will begin the process of a major revision to the existing Program Requirements for Graduate Medical Education in Thoracic Surgery. Recognizing the value of the public perspective on accreditation-related issues, the Committee invites comments on the Program Requirements posted as "Approved but not in Effect until 2016," which can be found on the Review Committee web page under the "Program Requirements" header.

E-mail comments for Committee consideration to ThoracicSurgery-Revi@acgme.org by March 25, 2016.

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Next Steps

- RC and ACGME Staff began drafting proposed revisions at April 2016 mtg
- Next drafting session(s)
  - Jan and April 2017 RC mtgs
- Second call for public comment following next draft – will remain open for 90-days
- Effective date planned for July 2018

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Some Changes Being Considered

- I-6 residents
  - Should they be allowed to train in more than one institution?
  - Define the core surgical expectation?
- Program Director
  - Is protected time sufficient?
    - Should protected time be different for fellowship versus residency program?
  - Should there be an Associate PD $\geq$ 10 residents?

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Some Changes Being Considered

- Resources
  - Coordinator
    - Additional administrative support for coordinators with ≥ 20 residents (total)?
- Resident Transfers
  - Receive or provide receiving program with
    - Summative evaluation
    - Milestones assessment
    - Rotations to date
    - Assessment of operative experience

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Some Changes Being Considered

- Other learners
  - Remove requirement for non-accredited trainees to contract with ACGME program?
- Chiefs and Fellows
  - Shared service while on rotations?
  - Should Chiefs only be at primary or participating site?
- Clinical Responsibilities
  - Expected competency for pre-op, intra-op, and post-op

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Goals of the RC

- Early engagement in the discussion and development of revised PRs.
- Think proactively - what should a TS resident/fellow should look like in 10-yrs.
- Clarify training/operative expectations.
- Provide flexibility.

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ACGME Resources

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Thank you

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