

# ***UPDATE—Surgery Residency Review Committee***

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*Association of Residency Coordinators in Surgery  
Surgical Education Week  
San Diego, CA  
March 21, 2012*

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Executive Director, RRC for Surgery



# Disclosure

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- No conflicts of interest to report

# Accredited Programs

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	Total Programs	Cont. Accred.	Initial Accred.	Other
Surgery	250	234	8	8
Pediatric Surgery	41	37	4	0
Critical Care	102	91	11	0
Hand	1	1	0	
Vascular-Independent	105	97	8	0
Vascular-Integrated	36	14	22	0
TOTAL	535	474	53	8

# Administrative Requests: Resident Complement

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- RRC approves by level and type
- Any changes **must** be approved in advance
  - All temporary or permanent changes
  - “Exchanging” position types must be requested in advance
- All requests must be submitted through ADS and include DIO approval

# Administrative Requests: Program Director

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- RRC approves all new program directors
- All requests must be submitted through ADS and include DIO approval

# Administrative Requests: Participating Sites

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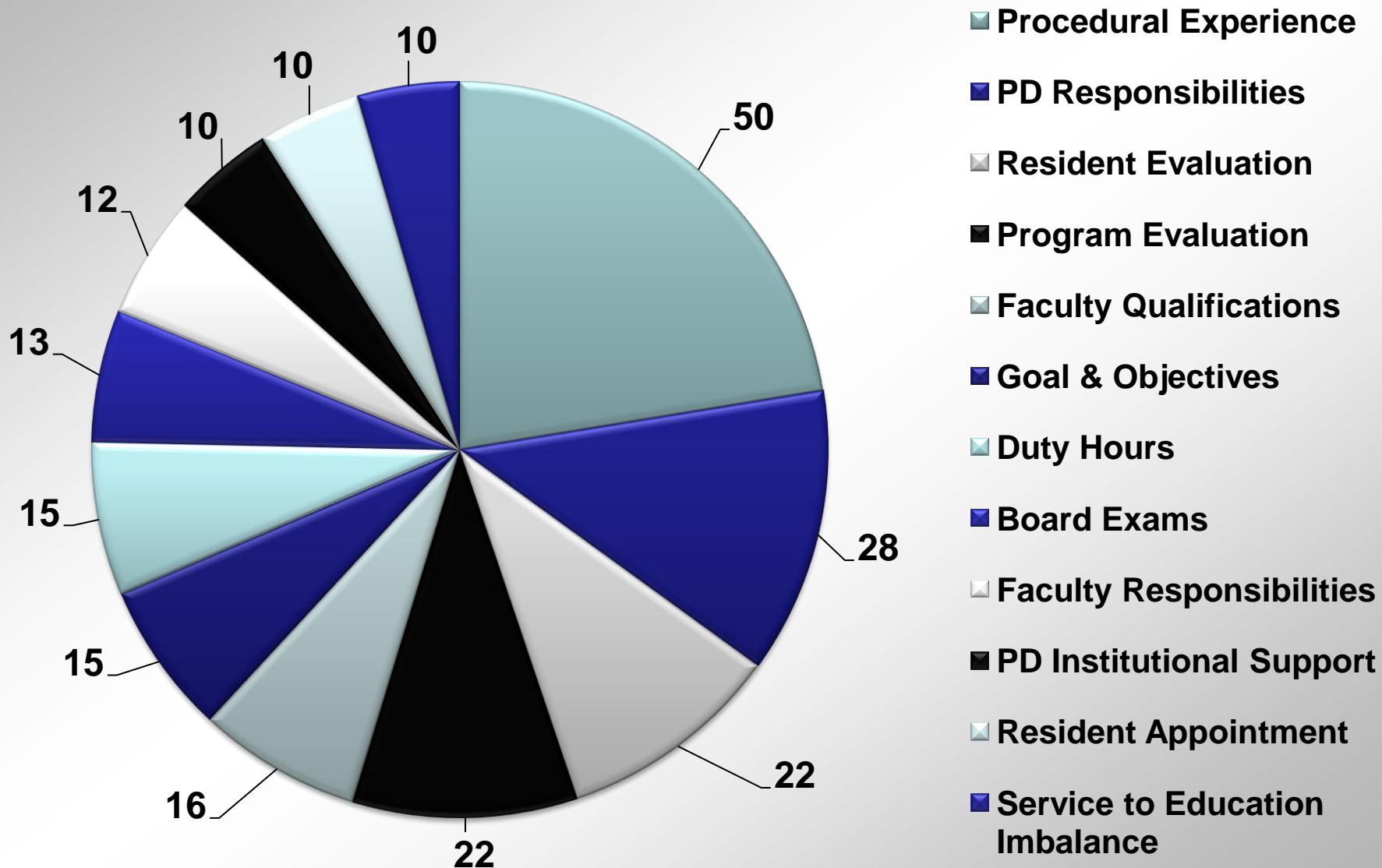
- RRC approves all changes in training sites
- All requests must be submitted through ADS and include DIO approval

# RRC Meeting Activity

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- 164 post-site visit reviews
- 266 citations issued by RRC
  - (1.62 citations per program)
- Average cycle length: 3.85 yrs.
- Common Citations Areas
  - Procedural Experience, PD Responsibilities, Evaluation of Residents, Evaluation of Program, Qualifications of Faculty, Goal & Objectives, Duty Hours

# 2011 Top Areas of Citation





# Surgery PR Changes (eff. 7/1/12)

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- New expectations for simulation learning
- Removal of the distinction between “designated preliminary” (DP) and “non-designated preliminary” positions
  - 300% limit on Preliminary Positions
  - Exceptions to phase out PS DPs must be made in writing to RRC
- Clarification of transplant surgery experience
- Flexibility for required chief year
  - 4 to 6 month maximum.

# Simulation Experience Expectations

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- In what ways can we demonstrate that our simulation and skills laboratory is compliant with the requirement?
- Programs are expected to ensure that competency-based methods of assessment and evaluation are used to assist residents in understanding their level of acquisition in the simulation environment. One such way to do this would be to adopt the standards of the Accredited Education Institutes of ACS.



# Surgical Critical Care Fellowships

## Major PR Revisions (Eff. 7/1/12)

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- Support for PDs
- Additional residency programs at the sponsoring institution
- Removed “25%” rule
  - Operating not to interfere with SCC training
- Time requirements
  - At least 8 months surgical ICU
  - No more than 2 months non-surgical ICU
  - No more than 2 months elective

# Surgical Critical Care

## Major PR Revisions (Eff. 7/1/12)

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- Non-surgical physician faculty qualifications
- Clarification of faculty scholarly activity
- Clarification of resources/facilities
- Additional acceptable previous ACGME-accredited graduate medical education for fellowship eligibility
- Additional resident evaluation requirements
- Resident logs
- Board-pass rate threshold

# General Complex Surgical Oncology

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- The program requirements for the **new** sub-specialty General Complex Surgical Oncology are under development.
- 2 year fellowship (post General Surgery residency)

# Contact Information

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# Web Site

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- Program Requirements
- Surgery FAQ's
- Duty Hour FAQ's
- Newsletters
- [http://www.acgme.org/acWebsite/navPages/nav\\_440.asp](http://www.acgme.org/acWebsite/navPages/nav_440.asp)

# Agenda Closing Dates

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- Meeting: June 21-22, 2012
  - **Agenda April 12, 2012**
- Meeting: November 1 - 2, 2012
  - Agenda Closing: August 23, 2012
- Meeting: February 21-22, 2013
  - Agenda Closing; December 12, 2012
- Meeting: June 20-21, 2013
  - Agenda Closing: April 12, 2013
- Meeting: November 7-8, 2013
  - Agenda Closing: August 29, 2013



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# THANK YOU



# Questions

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