

# SES012

# Review Committee For Surgery

Stephanie Heller, MD, Chair

Chris Fox, PhD, Executive Director



# Conflict of Interest Disclosure

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**Speaker(s):**

**Stephanie Heller, MD**

**Chris Fox, PhD**

## **Disclosure**

**None of the speakers for this educational activity have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.**



# Objectives

- **Overview of the Review Committee**
- **Accreditation Activity**
- **Citations:**
  - Most Frequently Cited Areas
  - Responding to Citations
- **ACGME/Review Committee Updates**
  - Major Revisions
  - Administrative Updates
  - Field Activities (Site Visits, Self-Study, and 10-Year Site Visits)
  - Additional Resources/Information

# About the ACGME

**“The mission of the ACGME is to improve health care and population health by assessing and advancing the quality of resident physicians’ education through accreditation.”**



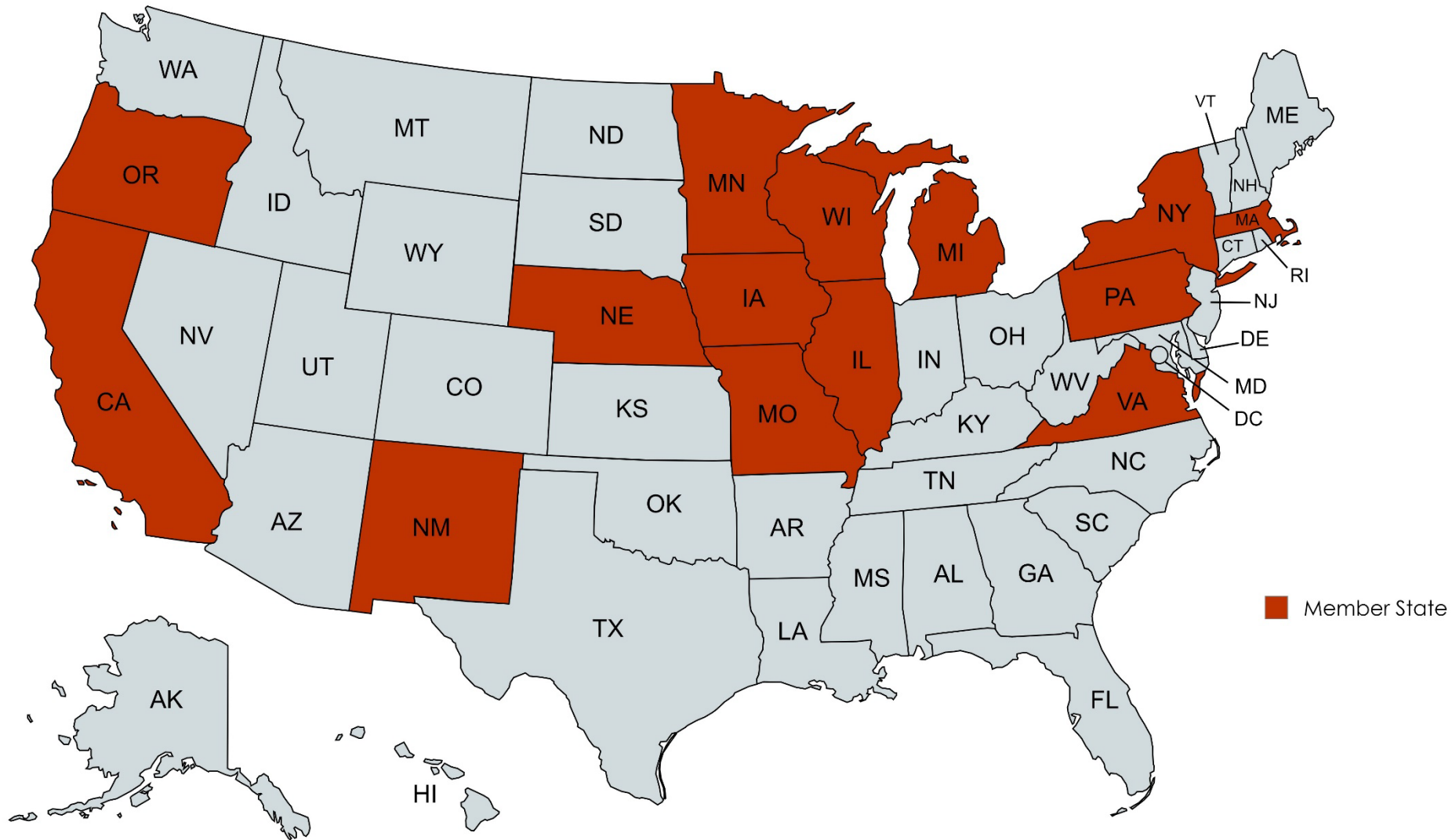


# Review Committee Membership

| Name  | Role                   | Name   | Role                   |
|---|------------------------|--|------------------------|
| <b>Stephanie Heller, MD, FACS*</b>              | <b>Chair</b>           | <b>Sunita Srivastava, MD, FACS</b>             | <b>Vice Chair</b>      |
| <b>Chandrakanth Are, MBBS, MBA, FACS, FRCS*</b> | <b>Member</b>          | <b>Kenneth Azarow, MD, FACS, FAAP</b>          | <b>Member</b>          |
| <b>Russell Berman, MD, FACS</b>                 | <b>Member</b>          | <b>Rebecca Britt, MD, FACS</b>                 | <b>Member</b>          |
| <b>Katharine Caldwell, MD, MSCI*</b>            | <b>Resident Member</b> | <b>Sharmila Dissanaiké, MD, FACS, FCCM</b>     | <b>Member</b>          |
| <b>Mary Edwards, MD, FACS</b>                   | <b>Member</b>          | <b>Kenji Inaba, MD, FRCSC, FACS</b>            | <b>Member</b>          |
| <b>Kenneth Lee, MD, FACS</b>                    | <b>Member</b>          | <b>James McQuiston, DO, FACOS, FACS</b>        | <b>Member</b>          |
| <b>Rachael Nicholson, MD, FACS, RPVI</b>        | <b>Member</b>          | <b>John Rectenwald III, MD, MS, FACS, RPVI</b> | <b>Member</b>          |
| <b>Mariela Rivera, MD, FACS</b>                 | <b>Member</b>          | <b>Drew Weil, MPH</b>                          | <b>Public Member</b>   |
| <b>Karen Brasel, MD, MPH, FACS</b>              | <b>Ex-Officio, ABS</b> | <b>Patrice Blair, DrPH, MPH</b>                | <b>Ex-Officio, ACS</b> |
| <b>Kimberly Lomis, MD, FACS</b>                 | <b>Ex-Officio, AMA</b> | <b>Valerie Sheridan, DO, FACOS</b>             | <b>Ex-Officio, AOA</b> |

\*term ends June 30, 2025

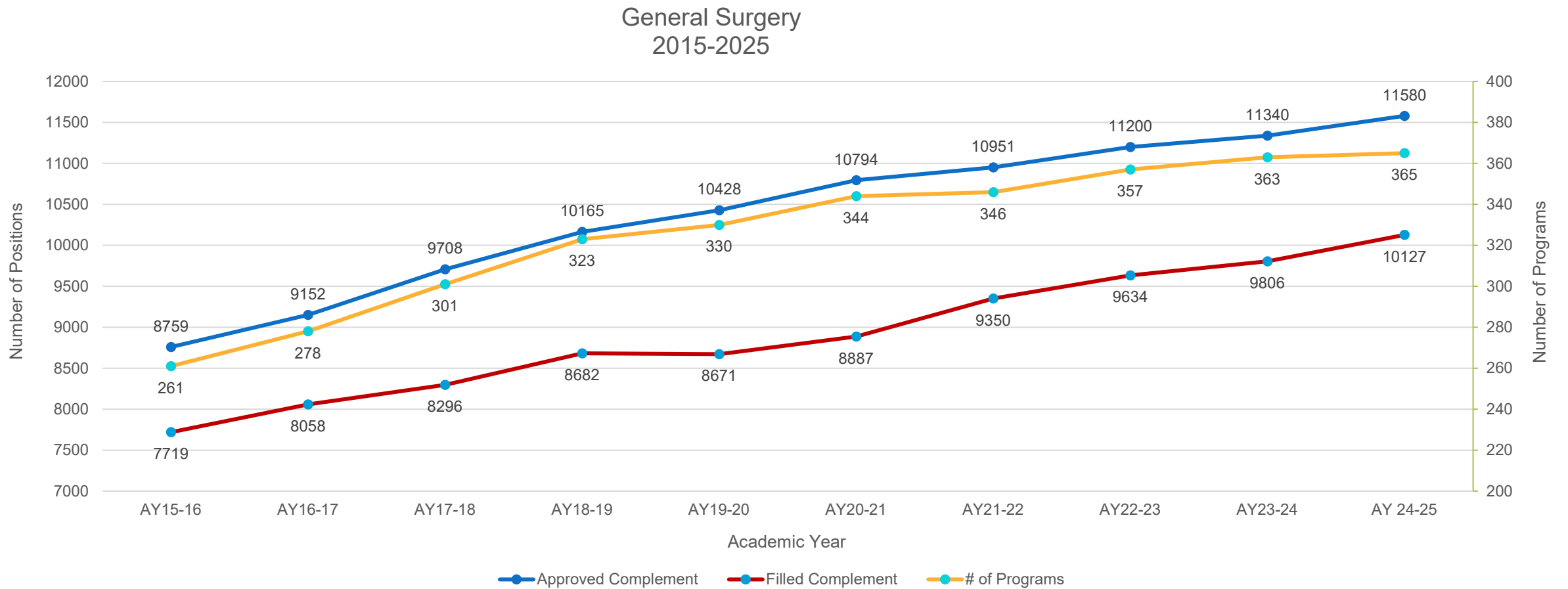






# Program Demographics

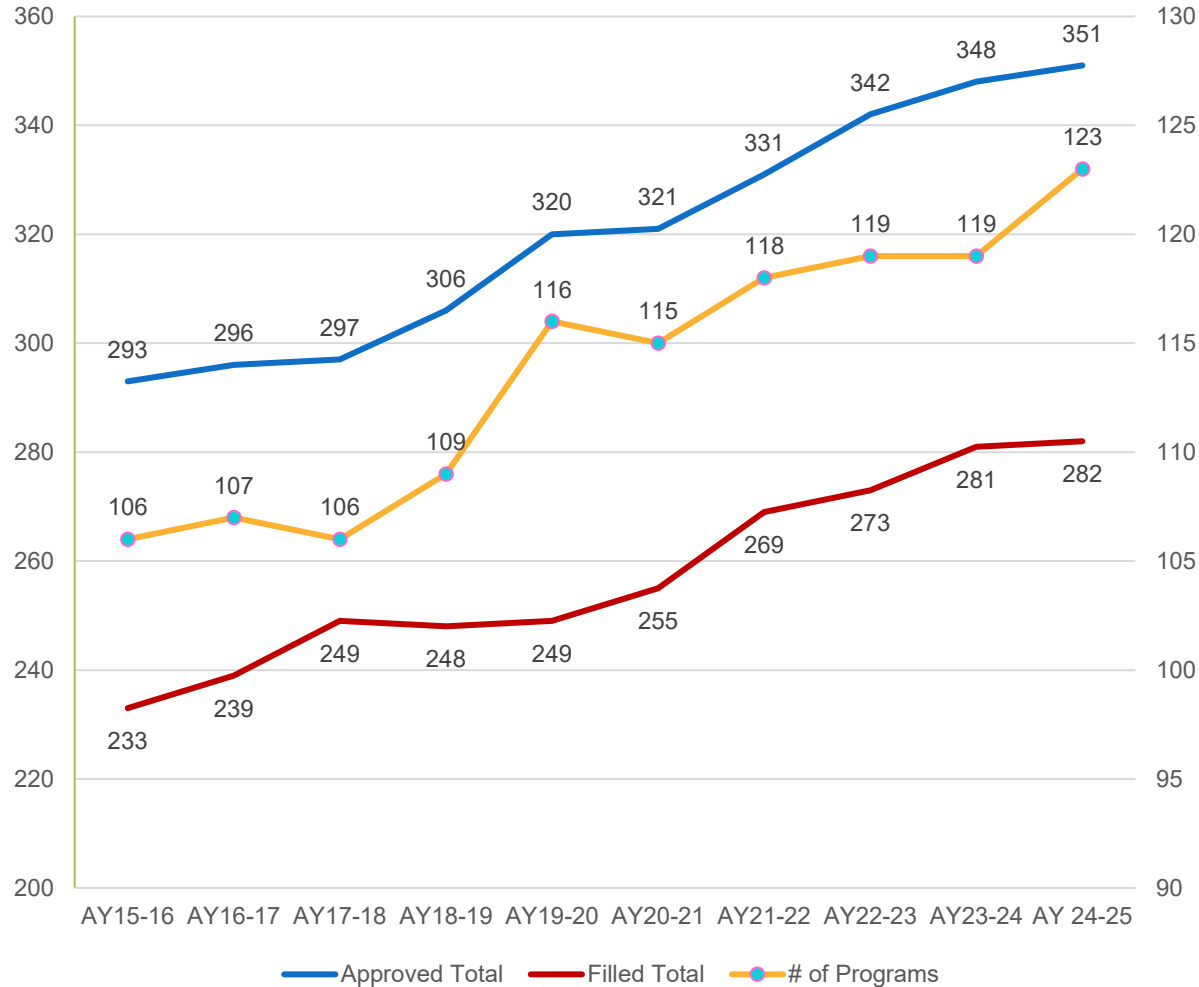
# Program Trends: General Surgery



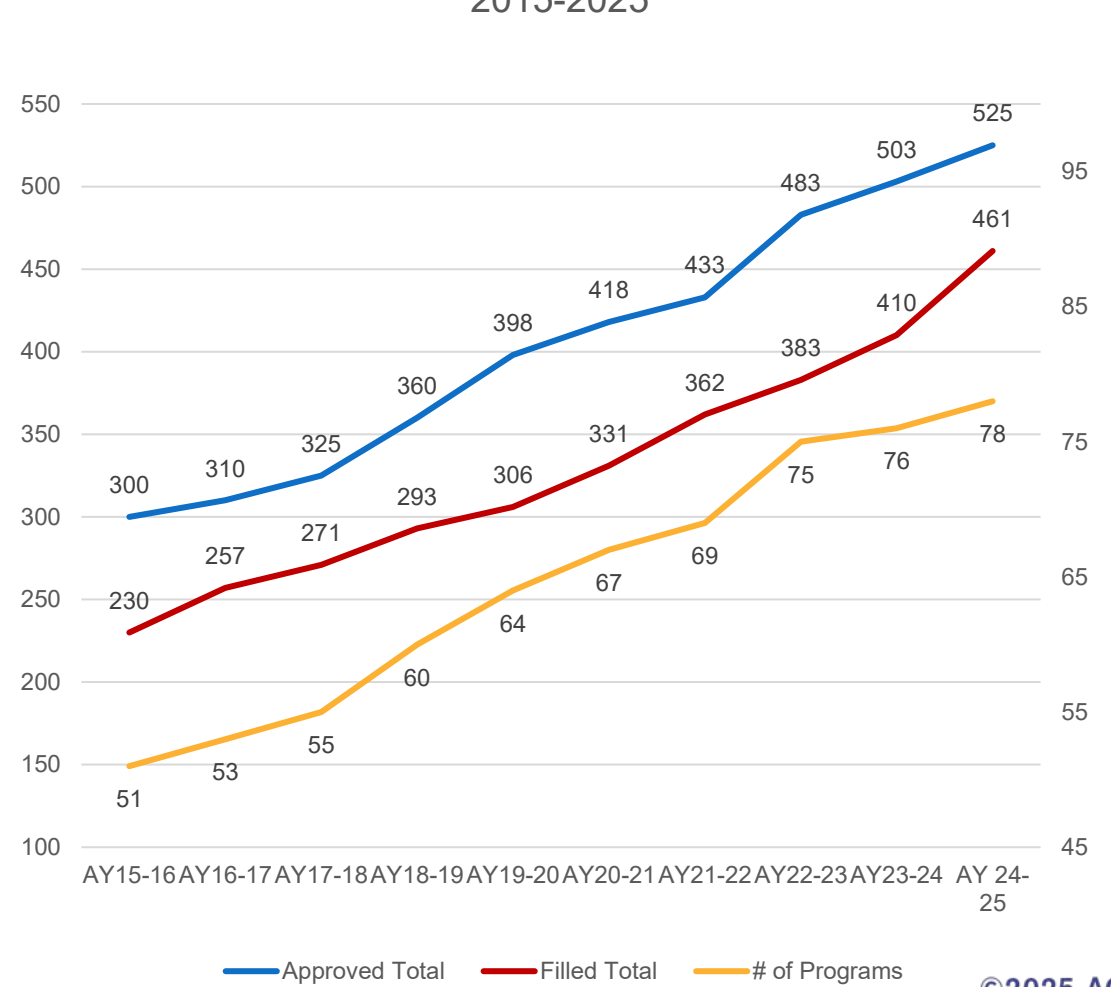


# Program Trends: Vascular Surgery

Vascular Surgery Independent  
2015-2025



Vascular Surgery Integrated  
2015-2025

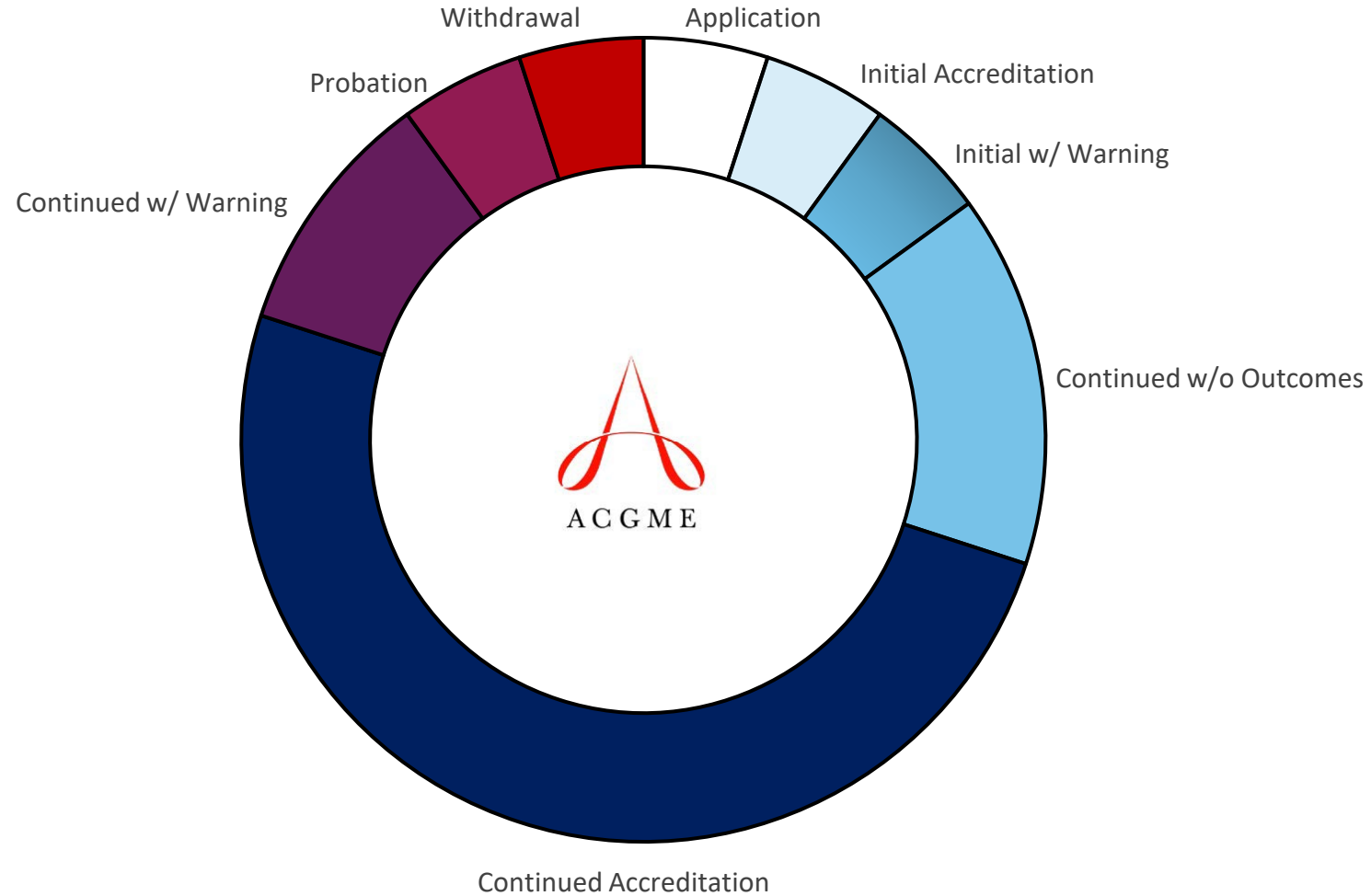


# Surgery Program Information

| Specialty                         | Accredited Programs | Applications | Complement Approved 2024-2025 | Complement Filled 2024-2025 |
|-----------------------------------|---------------------|--------------|-------------------------------|-----------------------------|
| Surgery                           | 364                 | 1            | 11,580                        | 10,127 (87%)                |
| Complex General Surgical Oncology | 35                  | 0            | 146                           | 134 (92%)                   |
| Hand Surgery                      | 2                   | 0            | 10                            | 8 (80%)                     |
| Pediatric Surgery                 | 52                  | 0            | 95                            | 89 (94%)                    |
| Surgical Critical Care            | 167                 | 1            | 422                           | 379 (90%)                   |
| Vascular Surgery:                 |                     |              |                               |                             |
| Independent                       | 123                 | 2            | 351                           | 282 (80%)                   |
| Integrated                        | 78                  | 1            | 525                           | 461 (88%)                   |



# Accreditation Status



# Accreditation Status (2023-2024)

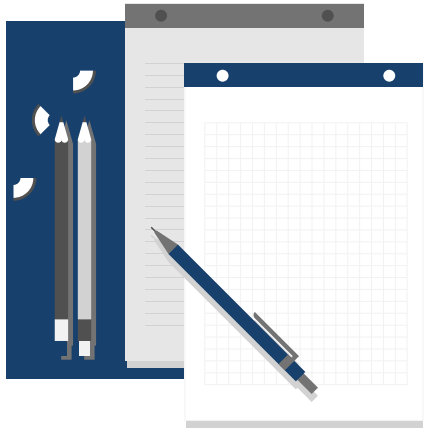
| Specialty                         | Initial Accreditation | Continued Accreditation | Continued Accreditation with Warning | Probation/ Withdrawal |
|-----------------------------------|-----------------------|-------------------------|--------------------------------------|-----------------------|
| Surgery                           | 31                    | 306                     | 25                                   | 2 (P)                 |
| Complex General Surgical Oncology | 3                     | 31                      | 0                                    | 0                     |
| Hand Surgery                      | 0                     | 2                       | 0                                    | 0                     |
| Pediatric Surgery                 | 1                     | 48                      | 3                                    | 0                     |
| Surgical Critical Care            | 21                    | 143                     | 1                                    | 0                     |
| Vascular Surgery                  |                       |                         |                                      |                       |
| Independent                       | 10                    | 110                     | 2                                    | 1(W)                  |
| Integrated                        | 13                    | 63                      | 1                                    | 1(P)                  |



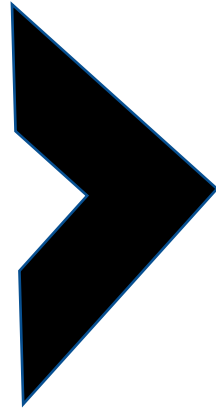
# Annual Data Review



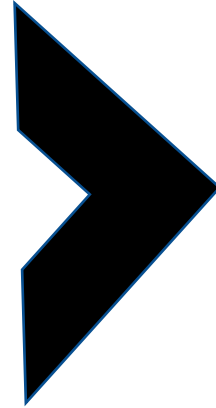
# Annual Review Cycle



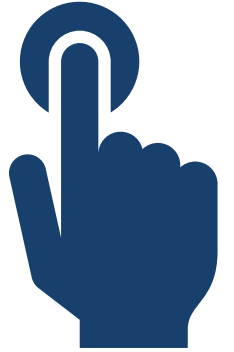
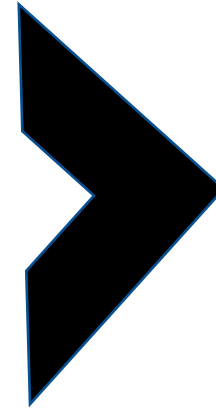
**Data Collection  
(July - September)**



**Review Committee  
Executive  
Committee Review  
(November)**



**Committee  
Review and  
Decision  
(January, April,  
September)**

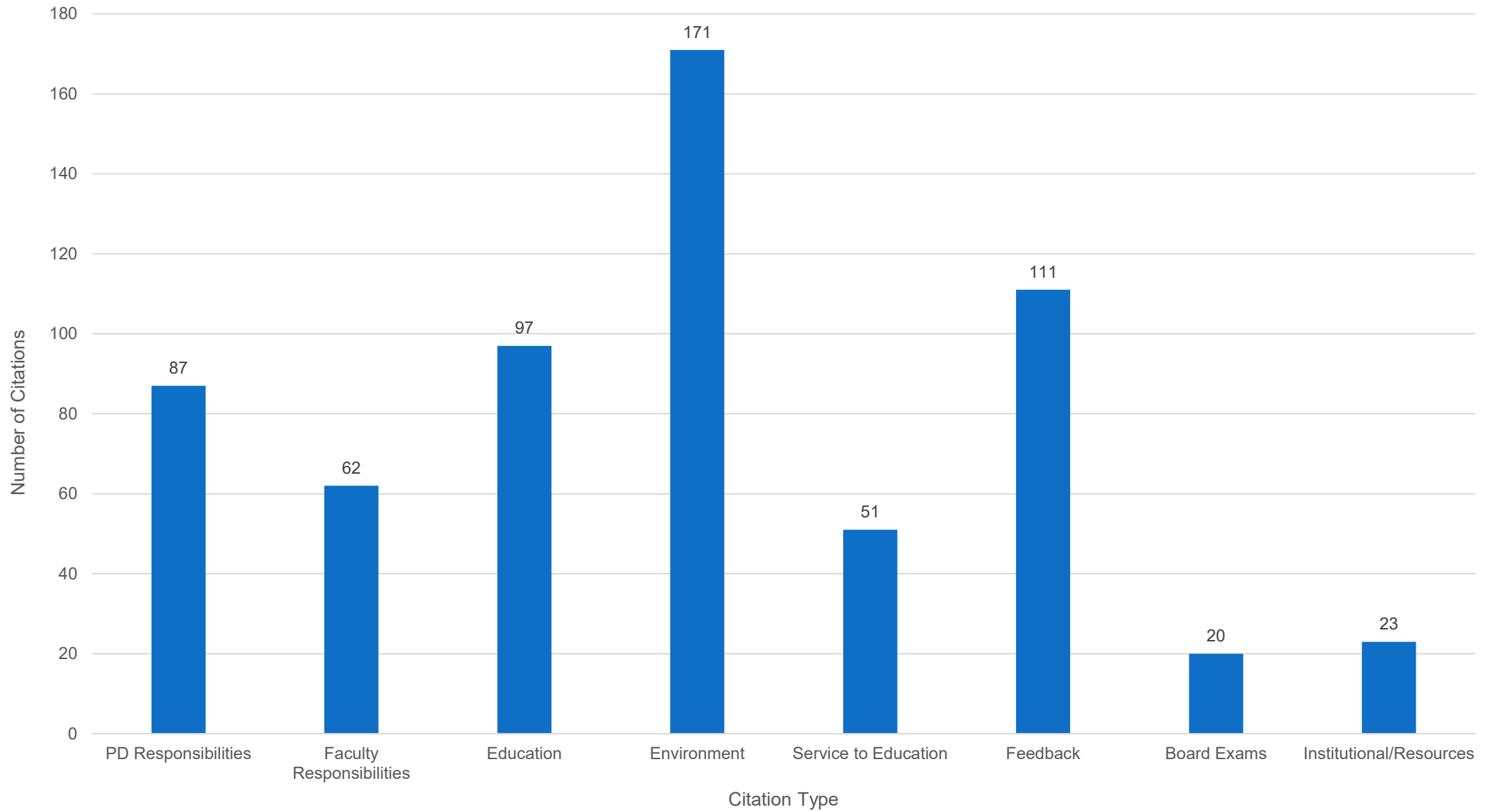


ACGME

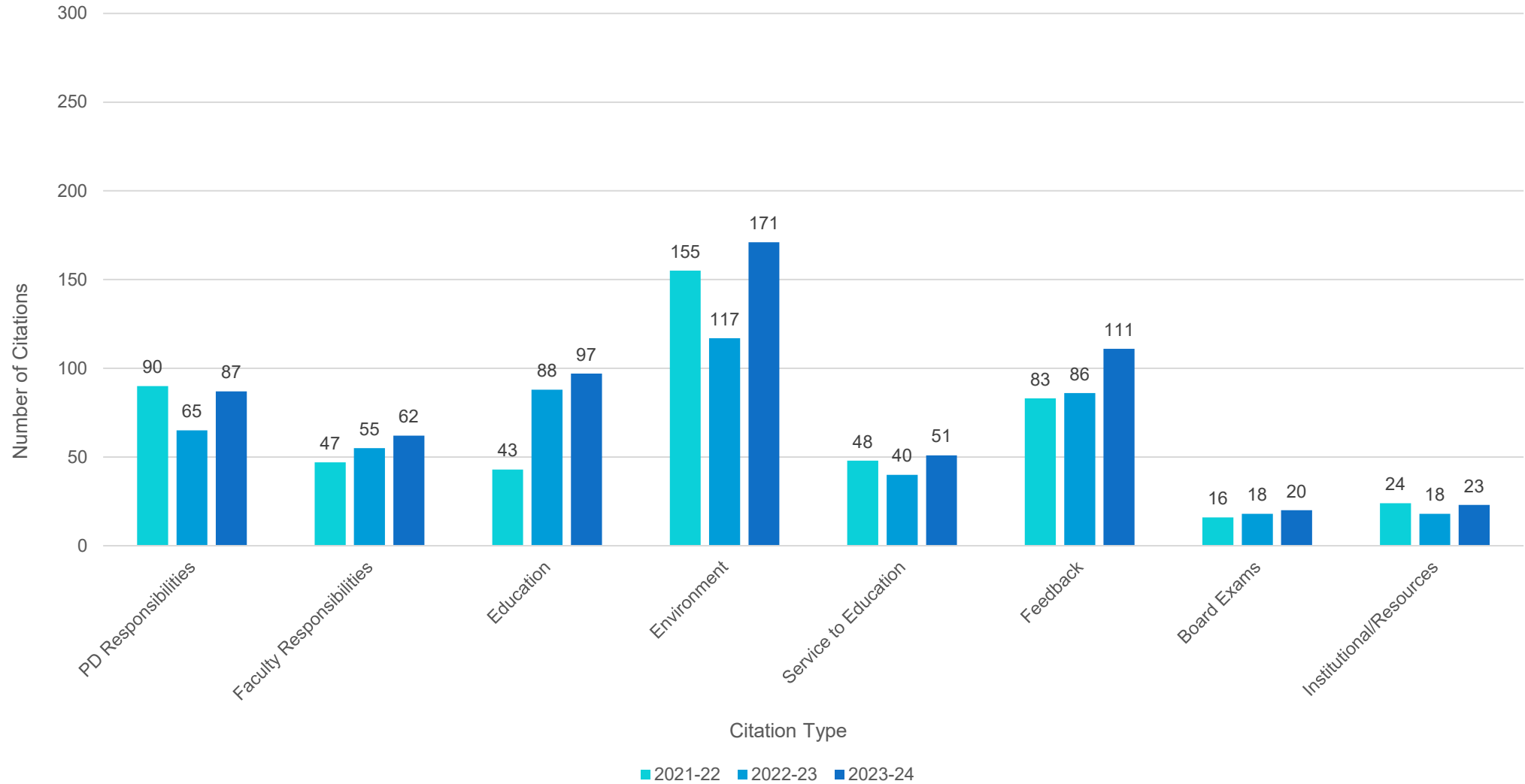
©2025 ACGME



# General Surgery 2023-2024 Citations (622 Total)



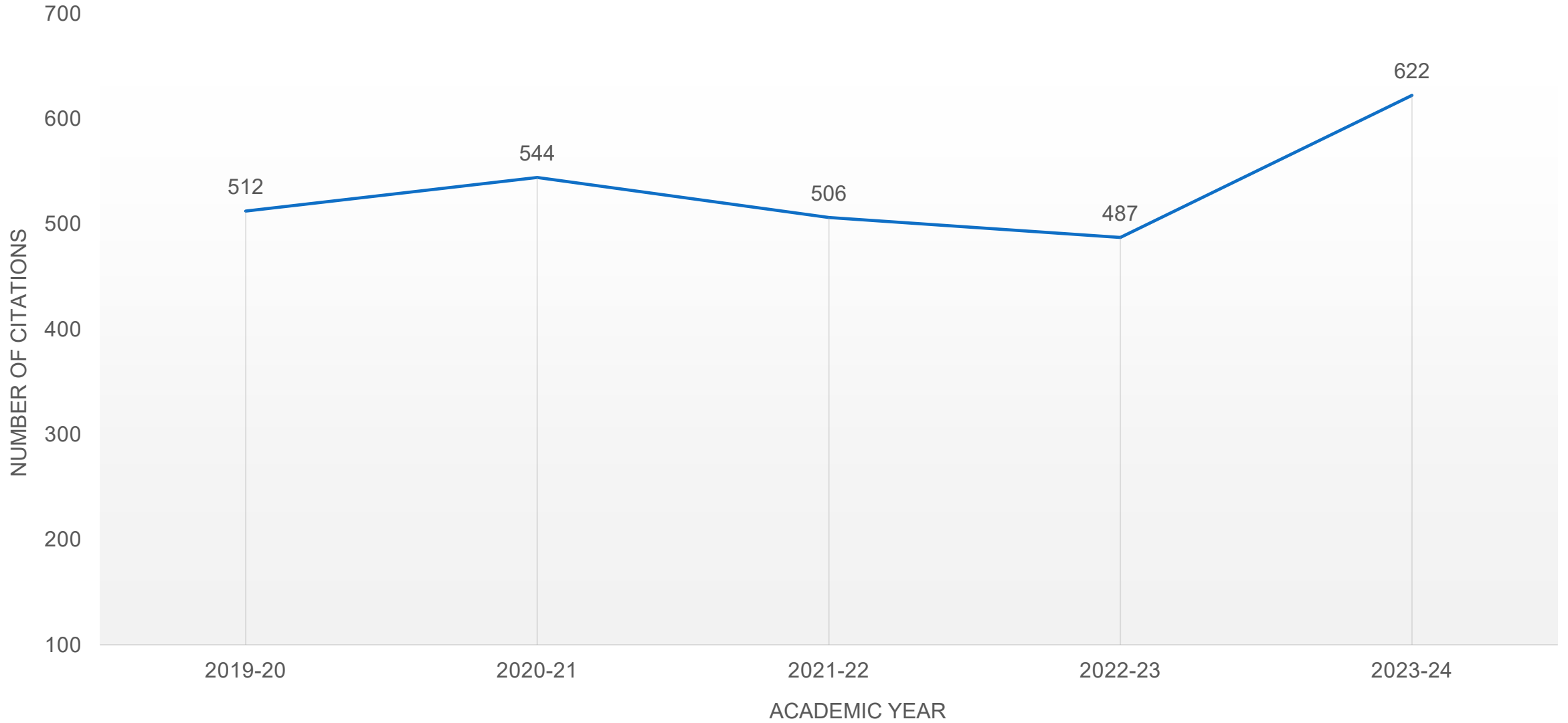
## General Surgery Three-Year Citation Trend



# Top Five Citations

- Fear of retaliation (65)
- 80 hours (55)
- Faculty interest in education (54)
- Service to education imbalance (51)
- One day in seven (30)

# General Surgery Total Citations 2019-2024







# Trouble Areas

|                                   | 2022-2023 |   | 2023-2024 |
|-----------------------------------|-----------|---|-----------|
| Safety/Security                   | 0         | → | 8         |
| Program Director Responsibilities | 65        | → | 86        |
| Progressive Responsibility        | 1         | → | 18        |
| Service to Education              | 40        | → | 51        |
| One Day in Seven                  | 14        | → | 30        |
| Evaluation of Residents           | 82        | → | 107       |





# Board Pass Rate - Fifth Percentile (2024)

#ACGME2025

The board pass rate will **CHANGE** each year  
Must achieve higher than the fifth percentile **OR** 80%

## Surgery:

ABMS Written: 75%

ABMS Oral: 62.5%

## Pediatric Surgery:

ABMS Written: 58.34%

ABMS Oral: 33.33%

## Surgical Critical Care:

ABMS: 51.50%

## Vascular Surgery:

### Integrated:

ABMS Written: 66.67%

ABMS Oral: 66.67%

### Independent:

ABMS Written: 50%

ABMS Oral: 66.67%

# Responding to Citations

The program director response to citations in the Accreditation Data System (ADS) **heavily** guides the Review Committee review.

In reviewing responses to citations, the Review Committee considers:

- Does the program **understand the problem/reason** they are not in compliance?
- Is there an explicit statement of how the program engaged the faculty/residents/fellows/institution in the **identification of the problem(s)** and creation of an action plan?
- Are there **actionable items** implemented by the program and/or institution that directly addressed the program requirement(s) out of compliance?
- Is there an explicit identification of how the program will **monitor and sustain improvement**?

Citation responses are taken into consideration, along with supporting materials (most recent Resident and Faculty Surveys, updated program information, performance metrics, Case Logs, etc.)



# **Review Committee/ACGME News and Announcements**

# Review Committee Meetings

## **April 3-4, 2025**

Agenda Closing Date: January 24, 2025

Application Deadline: October 4, 2024

## **September 4-5, 2025**

Agenda Closing Date: June 27, 2025

Application Deadline: April 4, 2025



# Major Revisions

**General Surgery** - Go into effect on July 1, 2025

**Vascular Surgery** - Currently out for review and comment

Anticipated effective date of July 1, 2026

**Surgical Critical Care** - Currently under revision

**Complex General Surgical Oncology** - Currently under revision

# General Surgery Major Revisions

- **I.D.1.e) The program must offer clinical experiences in a resource-limited environment. (Detail)**
- **IV.C.3.a) Residents must participate in a structured, comprehensive curriculum which includes a combination of simulation, didactic, and other educational modalities. (Core)**
  - IV.C.3.d) The educational program must include simulation-based curriculum that:
    - IV.C.3.d).(2) has the ability to incorporate new and evolving technologies and treatments into the simulation curriculum; and, (Detail)
    - IV.C.3.d).(3) complements clinical experience and is tailored to each resident's level of skill. (Detail)
- **I.B.5.c) Chief residents (residents in the PGY-5 or residents in the PGY-4 and PGY-5 with approved chief rotations) must not be assigned to a participating site that sponsors or provides clinical training to another ACGME-accredited general surgery residency program without explicit delineation of roles and responsibilities to ensure that there is no overlap in clinical care, decision-making, or team leadership. (Core)**

# Complement Requests

Temporary and permanent complement increases:

- Temporary ad hoc
- Permanent increases at Review Committee meetings
- Permanent decreases ad hoc at end of the academic year

Categorical positions

- Approved by PGY level
- Not interchangeable between PGY levels

Preliminary positions

- Approved by total
- May be used in either the PG-1 or PG-2 year



# Announcement!



**Only programs with a status of Continued Accreditation may request a permanent complement increase**

- **Programs on all other statuses may request temporary increases**

**All permanent complement increases must be accompanied by an institutional data form**

- **Should be a thoughtful, detailed analysis of case volumes available for the residents/fellows; not a data dump**

# International Rotations

- Programs must hold a status of Continued Accreditation or Continued Accreditation with Warning
  - **No longer allowing Continued Accreditation without Outcomes**
  - **Now allowing programs on Continued Accreditation with Warning**
- Must have an ABMS-certified supervising faculty or equivalent (as determined by the Review Committee)
- Must be approved by both the Review Committee and ABS
- Sites need to be approved once; all rotators require approval
- Checklists available online



# ADS Request Processing

## Must be submitted through ADS:

### Complement Change Requests:

- Temporary\* (Reviewed by Executive Committee of the Review Committee)
- Permanent\*\* (Reviewed at Review Committee meeting. Must be approved by designated institutional official (DIO) by agenda closing date)

### Program Director Changes\* (reviewed by Executive Committee of the Review Committee)

- Not approved until Letter of Notification is received

### Participating Site Changes\* (reviewed by Executive Committee of the Review Committee)

\*will receive email decision within 30 days

\*\* will receive an email decision within five days of Review Committee meeting







# Accreditation and Recognition Site Visits

#ACGME2025

- Assurance site visits will continue for programs that have not been visited for ten or more years
  - Random selection (200 programs in 2025)
  - Percentage per specialty
- In-person and virtual modalities will continue
  - In-person: complaints, potential egregious, probation



# Resources

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- Guide to the Common Program Requirements
- Coordinator Timelines
  - Residency
  - Fellowship
- Program Coordinator Handbook

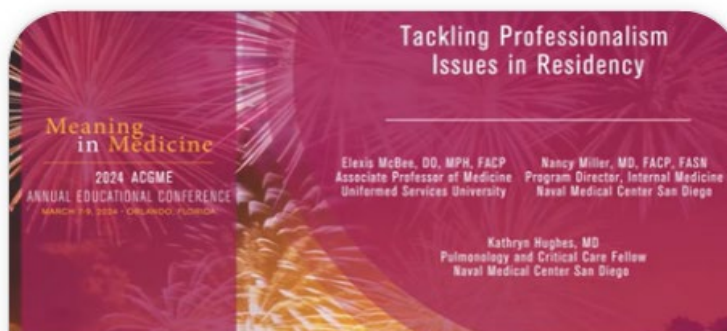
# LEARN at ACGME



## Program Coordinator Handbook Companion:...

Learning Path

[View Details](#)



## Tackling Professionalism Issues in Residency - 2024

Video

Dealing with professionalism lapses and deficiencies in residents is one of...

★★★★★

[View Details](#)



## Introduction to ACGME Site Visits

Interactive Course

This course provides an overview of the types of ACGME site visits, the sit...

[View Details](#)



**New ACGME  
President and  
CEO**

**Debra F. Weinstein, MD**



# Meet the Surgery Team



**Chris Fox, PhD**  
Executive Director



**Kelsey Sill, MHA**  
Associate Executive  
Director



**Aimee Morales**  
Associate Executive  
Director



**Caleb Mitchell**  
Senior Accreditation  
Administrator



**Colleen Morris**  
Accreditation  
Administrator





# Questions?



Thank you

# Claim Your CME Today!

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## Complete the Evaluation for CME or Certificate of Completion!

The evaluation can be found in the Conference Mobile App and a link will be sent post-conference by email to attendees.

Evaluations are tied to your registered sessions.

Register/un-register for sessions in the Conference Mobile App.

Deadline – March 14, 2025

Questions? [cme@acgme.org](mailto:cme@acgme.org)