

Orthopaedic Surgery Update

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Vice Chair, Review Committee for Orthopaedic Surgery

Conflict of Interest Disclosure

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 health care products used by or on patients.



Housekeeping

Session Etiquette

- Fire Marshal Code: Attendees cannot stand against the walls or block exits
- Please refrain from placing personal items on chairs next to you
- If there is time for questions, please keep questions brief to maximize participation

Main Locations

- Main Stage and Information Desk: Marriott Marquis
- Exhibit Hall: San Diego Convention Center

Emergencies

- Marriott Marquis security: Call 911 first, then call 415-531-3845
- San Diego Convention Center security: Call 619-525-5911 or ext. 5911 from wall mount house phones
- In the event of an emergency, listen to intercom instructions
- To report an incident, visit the ACGME Information Desk to fill out an incident report.

Discussion Topics

- ❖ Review Committee and Staff Members
- ❖ Annual Review – Data Elements
- ❖ Accreditation and Program Statistics
- ❖ Procedural Logs and Board Results
- ❖ ACGME Updates
- ❖ ACGME Resources

ACGME Mission

The Mission of the ACGME is to improve health care and population health by assessing and enhancing the quality of resident and fellow physicians' education through advancements in accreditation and education.

ACGME Mission, Vision, and Values



Review Committee Members and Staff

Review Committee Members

Scott E. Porter, MD, MBA
Chair, Exec Comm

Gregory P. Guyton, MD

Monica Kogan, MD

M. Daniel Wongworawat,
MD
Vice-chair, Exec Comm

MaCalus V. Hogan, MD,
MBA

Daniel E. Krenk, DO
Executive Committee

Brian Busconi, MD

Annemarie Lenoard, MD,
Resident Member

Melvyn Harrington, MD

Paul B. Gladden, MD

Scott Huber, Public
Member

Ann Van Heest, MD

ACGME Review Committee Staff

Kristen Ward Hirsch, MBA
Executive Director

Citlali Meza, MPA
Associate Executive Director

Jennifer Luna
Associate Executive Director

Lucy Nicholls
Accreditation
Data System
(ADS)

Stephanie Lose
Accreditation Administrator

Deanna Eallonardo
Accreditation Administrator

Where to go for help?

Review Committee Staff

Kwardhirsch@acgme.org

cmeza@acgme.org

slose@acgme.org

- Program Requirements
- Letters of Notification
- Complement requests
- Procedural Log content

Milestones Staff

milestones@acgme.org

- Milestones

ADS Staff

ADS@acgme.org

- ADS
- Surveys
- Case Log System

Field Activities Staff

fieldrepresentatives@acgme.org

- Site Visit
- Self-Study

Upcoming Review Committee Meetings

Future meeting dates will be posted to the Orthopaedic Surgery webpage

SCAN FOR WEBPAGE



❖ April 17-18, 2026 (deadline: March 20, 2026)

Applications and Initial Accreditation programs with completed site visits and permanent complement increase requests accepted

❖ Fall TBD

Applications and Initial Accreditation programs with completed site visits and increase in complement requests accepted

2026 ACGME ANNUAL
EDUCATIONAL CONFERENCE
Meaning in Medicine

FEBRUARY 19-21, 2026
SAN DIEGO, CALIFORNIA



Annual Program Review

Data Elements

Annual Program Review – Data Elements

All data reviewed will be from the most recently completed academic year **except** for major changes and response to citations.

- ❖ ADS Annual Update (Program Changes, Program Attrition, Scholarly Activity)
- ❖ Procedural Logs
(Graduate Case Log Data)
- ❖ Board Passage Rate
- ❖ Surveys (Resident and Faculty)
- ❖ Omission of Data

Block Diagrams

Residency – Representation of program's rotation schedule;
Not actual residents' schedules

Fellowships – representation of individual fellow

Be sure to use RC template and fill out all sections

Instructions are included at the bottom of the template

Orthopaedic Surgery – specific [Block Diagram templates](#) on ACGME website

Questions? Contact [Stephanie Lose](#)

Major Changes and Other Updates

Communicate to the Review Committee action plan and initial results regarding:

Low ACGME Survey ratings

Missed procedural minimums

Program changes: rotations, faculty growth, best practices

Program challenges: action plans and results, if applicable

Responding to Citations

- Keep in mind the audience: physician GME leader who does not know your program or institution
 - Be clear, concise, and frank
- Demonstrate that you have gotten to the root of the non-compliant area and **outline implemented action plan**
- Describe outcomes (e.g., survey trending up, procedural minimums met)
 - If goals not met, explain why and outline next steps

AY 2024 – 2025 Statistics

Program Statistics

Total Programs Accredited (AY 2024 – 2025)

Core 209

Fellowships 273

Pending Applications (as of February 1, 2026)

Core 4

Fellowships 4

Accreditation Status (AY 24 – 25)

Specialty	TOTAL	Initial Accreditation	Continued Accreditation	Continued Accreditation with Warning	Probationary Accreditation	Withdrawal of Accreditation
260 Orthopaedic Surgery (Residency)	209	5	200	4		
261 Adult Reconstructive orthopaedics	26	2	24			
262 Foot and ankle orthopaedics	9	1	8			
263 Hand surgery (Orthopaedic Surgery)	77	5	72			

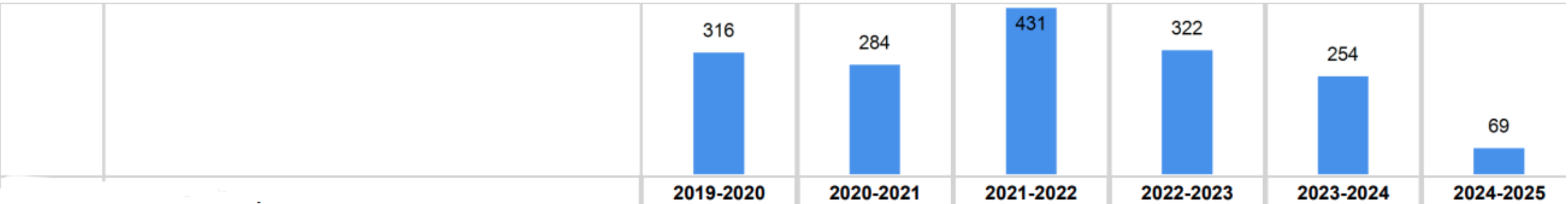
Accreditation Status (AY 24 – 25)

Specialty	TOTAL	Initial Accreditation	Continued Accreditation	Continued Accreditation with Warning	Probationary Accreditation	Withdrawal of Accreditation
270 Musculoskeletal oncology	12		11			1
268 Orthopaedic sports medicine	95	4	90		1	
267 Orthopaedic surgery of the spine	16	1	15			
269 Orthopaedic trauma	13	1	12			
265 Pediatric orthopaedics	25	1	24			

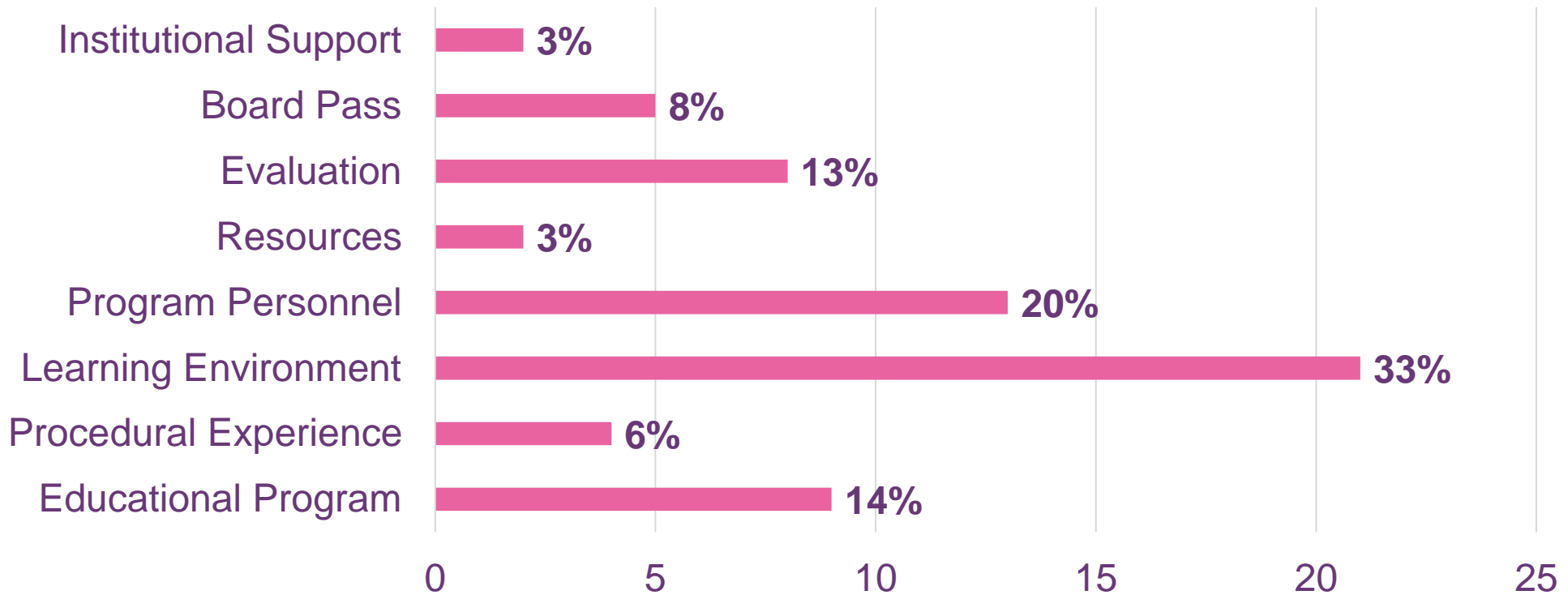
Citation Statistics by Academic Year (2019 – 2025)

Citation Statistics by Academic Year

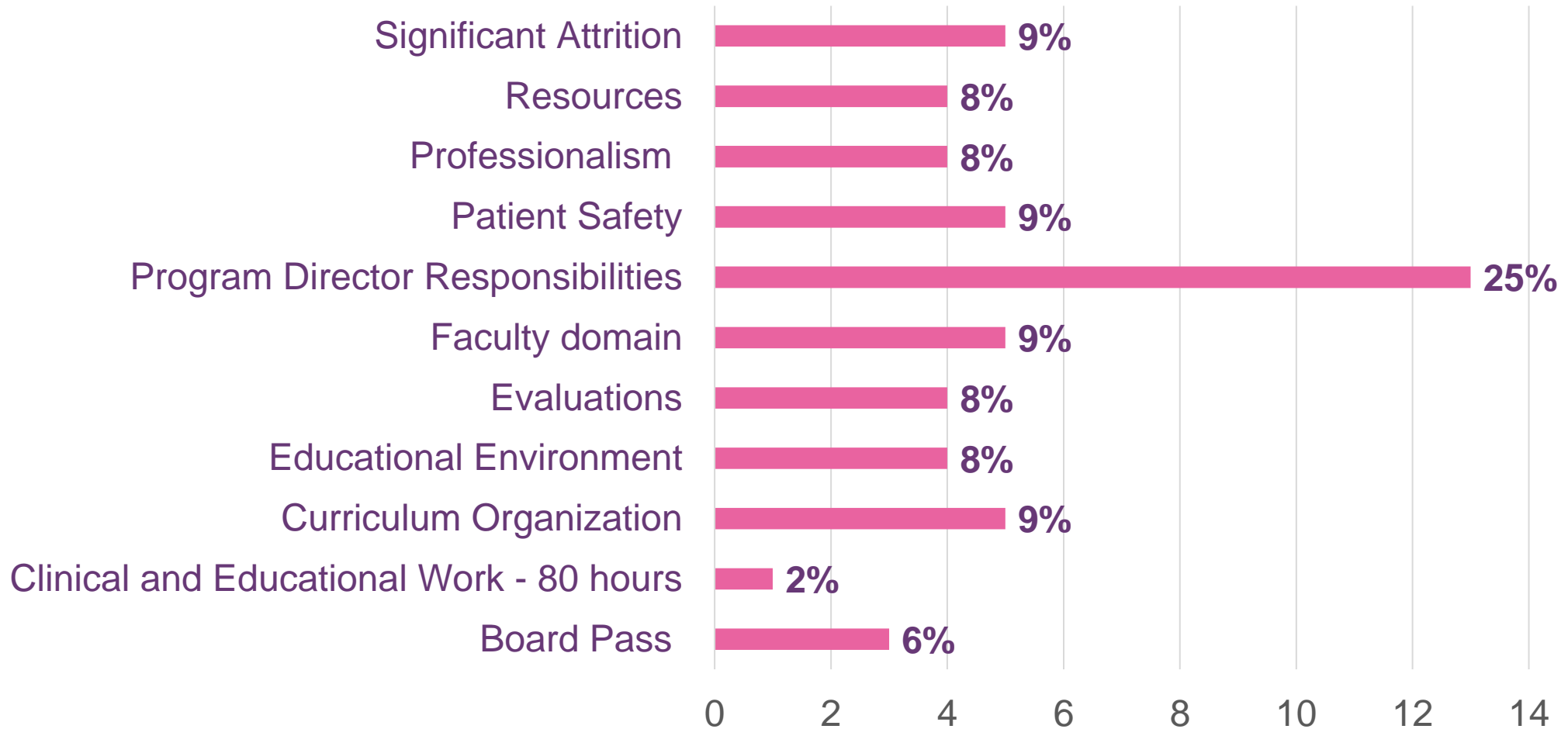
Specialty: Orthopaedic surgery
United States



2024-2025 AY Citations – Residency Programs (n=64)

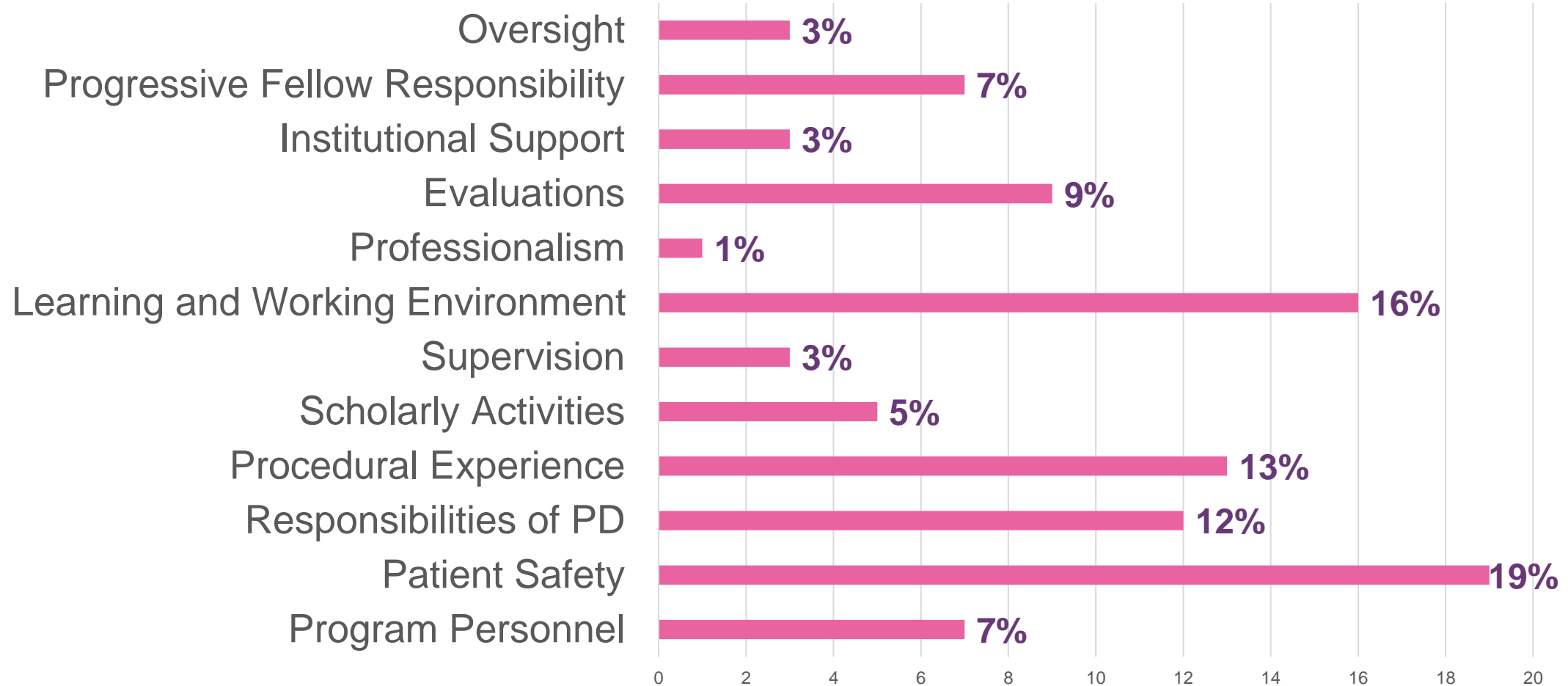


2024-2025 AY Areas for Improvement – Residency Programs (n= 53)

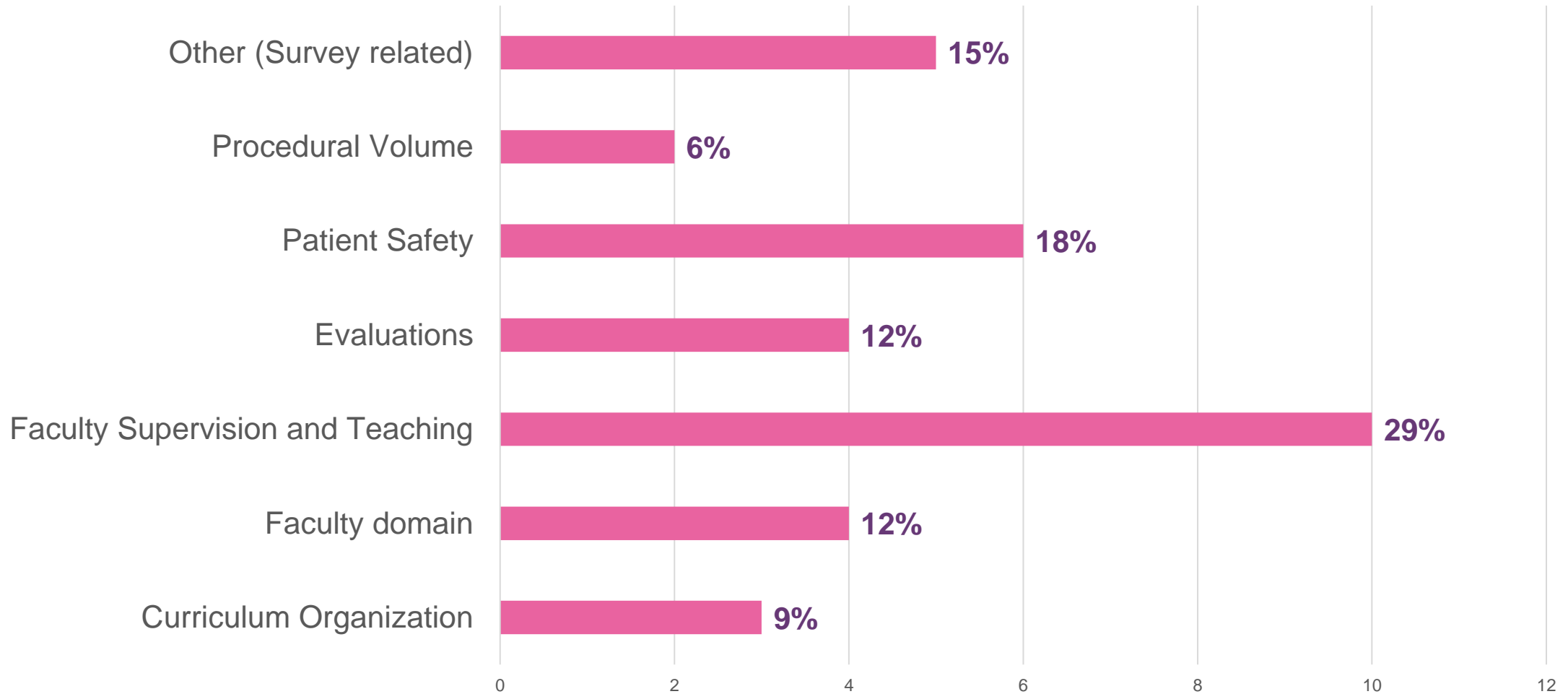


2024-2025 AY Citations – Fellowship Programs (n = 98)

#ACGME2026



2024-2025 AY AFIs – Fellowship Programs (n= 34)



Boards Pass Rate

2025 Annual Program Review

Board Pass Rate

First-time takers *only* during the most recent *three* years reported by American Board of Orthopaedic Surgery (ABOS) to the ACGME

Bottom fifth percentile nationally for the specialty *AND*

Subject to citation if <80% pass rate

Written fifth percentile:
2023-2025 = 89.5%

Oral fifth percentile:
2023-2025 = 70%

Non-Accreditation Status Requests

Changes in Resident/Fellow Complement

- ❖ Committee approves increases in resident/fellow complement total
- ❖ Requests must be submitted via ADS with designated institutional official (DIO) approval.
- ❖ Timing:
 - ❖ Permanent complement increase requests are reviewed at scheduled Review Committee meetings only.
 - ❖ Temporary complement increase requests are reviewed with other interim requests monthly.
 - ❖ See [guidelines](#).

ACGME Updates

Implementation of Nutrition Requirements

- ❖ Due to the raising national interest in nutrition, each specialty RC has been asked to consider including (additional) nutrition requirements
- ❖ ACGME is undertaking this work across all specialty RCs this winter and spring
- ❖ Specialties that propose adding nutrition requirements will post those for public comment in April-June
- ❖ Effective date of July 1, 2027

Shaping GME

- Stakeholders Summit will be held in Chicago on Friday, March 13th
- Future activity postponed until after Common Program Requirement revisions are completed.

Common Program Requirement Revisions

ACGME Process for Revisions



ACGME has a 3-year timeline



Board appointed the Task Force in the Fall



Task Force meets early 2025 with new CEO



Article defining goals, process, timeline in JGME



Commissioned papers* received – goal is to publish in 2025

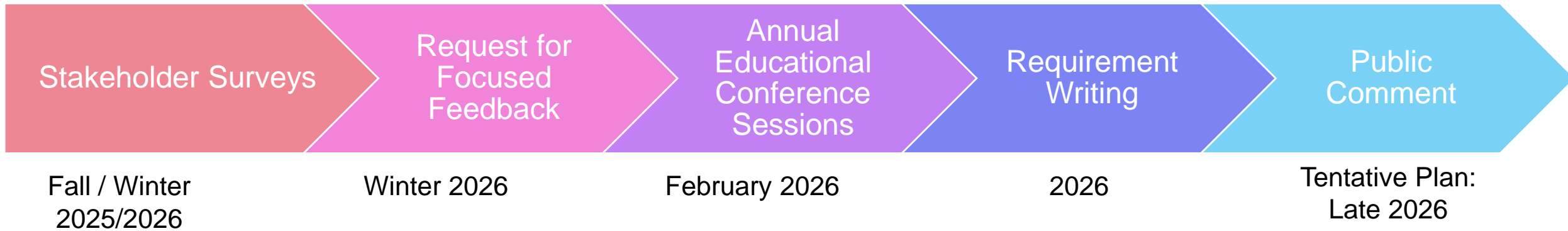


AEC Session 2025

***Commissioned papers:**

- **Work Hours**
- **Rotational Transitions**
- **Time to Competence**

Update: Projected Common Program Requirement Major Revision Timeline



Update: Projected Common Program Requirement Major Revision Timeline - Fellowships



Burden Reduction

- In service to ongoing burden reduction, the Common Program Requirements Task Force identified 10 requirements that are slated for deletion when the full set of new CPRs is posted for public comment in late 2026
- Given the time frame until the new CPRs are effective (likely in 2028), these 10 requirements are suspended effective February 7, 2026 (date of Board decision)

10 suspended requirements

- CPR 1.2 “The review committee may specify which other programs must be present at the primary clinical site”
- CPR 1.3.a “The PLA must be renewed at least every 10 years”
- CPR 2.2a “Final approval of the program director resides with the Review Committee”

10 suspended requirements

- CPR 2.8.c “Faculty members must administer and maintain an educational environment conducive to educating residents”
- CPR 4.2.a “[The curriculum must contain the following educational components:] a set of program aims consistent with the Sponsoring Institution’s mission, the needs of the community it serves, and the desired distinctive capabilities of its graduates, which must be made available to program applicants, residents, and faculty members”

10 suspended requirements

- CPR 4.2. e “[The curriculum must contain the following educational components:] formal educational activities that promote patient safety-related goals, tools, and techniques”
- CPR 5.5 f “The Program Evaluation Committee must evaluate the program’s mission and aims, strengths, areas for improvement, and threats”
- CPR 5.5 h “The program must complete a Self-Study and submit it to the DIO. ”

10 suspended requirements

- CPR 6.24 “A Review Committee may grant rotation-specific exceptions for up to 10 percent or a maximum of 88 clinical and educational work hours to individual programs based on a sound educational rationale. ”
- CPR 6.24 a “In preparing a request for an exception, the program director must follow the clinical and educational work hour exception policy from the ACGME Manual of Policies and Procedures”

Recent Requirement Revisions

Focused Revision to Common Program Requirements

Faculty qualifications

- Removes specialty-specific language that does not allow for alternate qualifications

Resident transfers

- Removes restrictions from specialty requirements that do not allow transfers


Coming in July 2026!

Frequently Asked Questions (FAQs)

Integration into Requirements documents

- As part of the ACGME's Digital Transformation and following the reformatting of all Requirements documents, FAQs will be integrated into the Requirements documents.
- All Common FAQs and specialty/subspecialty-specific FAQs will be available linked directly to specific requirements, where applicable.
- Except for FAQs already undergoing revision, **the content of the FAQs is not changing**, just their integration into requirements documents for ease of access.
- Revisions were also made to Resident/Fellow Transfers and Faculty Certification in many Program Requirements, effective July 1, 2026.

Frequently Asked Questions (FAQs) Integration into Requirements documents



ACGME Program Requirements for
Graduate Medical Education in
Anesthesiology with FAQs

Revision Information

ACGME-approved interim revision September 3, 2025; effective September 3, 2025

ACGME-approved interim revision September 29, 2025; effective July 1, 2026

Definitions

For more information, see the [ACGME Glossary of Terms](#).

Core Requirements: Statements that define structure, resource, or process elements essential to every graduate medical educational program.

Detail Requirements: Statements that describe a specific structure, resource, or process, for achieving compliance with a Core Requirement. Programs and sponsoring institutions in substantial compliance with the Outcome Requirements may utilize alternative or innovative approaches to meet Core Requirements.

Outcome Requirements: Statements that specify expected measurable or observable attributes (knowledge, abilities, skills, or attitudes) of residents or fellows at key stages of their graduate medical education.

Osteopathic Recognition

For programs with or applying for Osteopathic Recognition, the Osteopathic Recognition Requirements also apply (www.acgme.org/OsteopathicRecognition).

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Anesthesiology with FAQs
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Frequently Asked Questions (FAQs) Integration into Requirements documents

1.2. The program, with approval of its Sponsoring Institution, must designate a primary clinical site. (Core)

1.2.a. The Sponsoring Institution must also sponsor or be affiliated with ACGME-accredited residencies in at least the specialties of general surgery and internal medicine. (Core)

[See FAQ in Appendix]

Anesthesiology with FAQs

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7. Frequently Asked Questions: Anesthesiology

Review Committee for Anesthesiology

ACGME

Section 1: Oversight

Questions concerning *"The Sponsoring Institution must also sponsor or be affiliated with ACGME-accredited residencies in at least the specialties of general surgery and internal medicine. (Core)"* (1.2.a)

Q: How can affiliation with ACGME-accredited general surgery and internal medicine residency programs be demonstrated?

A: If the program's Sponsoring Institution does not sponsor ACGME-accredited residencies in both general surgery and internal medicine, affiliation can be demonstrated to the Review Committee as to the relationship between the programs through an affiliation agreement, program letter of agreement (PLA), or an explanation of how affiliation is demonstrated through the integration of resident education with each of the specialties.

Questions concerning *"Residents should not be required to rotate among multiple participating sites. (Detail)"* (1.6.a.1.a)

Q: Why should residents not be required to rotate among multiple participating sites?

A: The intent of this requirement is to ensure residents are not required to travel unnecessarily to hospitals or other clinical sites for education or training that could reasonably be provided locally by the Sponsoring Institution's affiliated sites. The Review Committee understands that some programs, such as those sponsored by institutions in rural areas based on a consortium model, will by necessity have residents rotate across three to four sites to achieve the required rotations. The focus of the requirement is to protect the residents from being used to meet the service needs of multiple hospitals/clinical operations.

Anesthesiology with FAQs

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Programs on Continued Accreditation (CA) random sampling site visits

- The ACGME conducts site visits annually for programs with a Continued Accreditation status through a random sampling process.
- For the current academic year, 250 site visits were selected and will be scheduled between April and October 2026.

Academic Year	Number of Randomly Selected Site Visits	Number of Completed Site Visits	<u>Post Site Visit Accreditation Decisions</u>
2023-2024	150	148*	<ul style="list-style-type: none"> • 140 Continued Accreditation • 7 Continued Accreditation with Warning • 1 Probationary Accreditation
2024-2025	200	198*	Decisions in progress
2025-2026	250	In progress	Decisions in progress

*Several programs voluntarily withdrew their accreditation after selection or were pulled for other types of site visits.

ACGME Resources



 Listening  Information  News  Collaboration

Register today! After registering you'll receive a confirmation with "Add to Calendar" option

Your monthly connection to ACGME updates and collaboration

- ✓ Stay informed on important updates and initiatives
- ✓ Engage in interactive activities
- ✓ Provide feedback and share ideas
- ✓ Visit the page on [acgme.org](https://www.acgme.org/education-and-resources/acgme-linc/) to view upcoming sessions and register: <https://www.acgme.org/education-and-resources/acgme-linc/>



[Add to Calendar\(.ics\)](#) | [Add to Google Calendar](#) | [Add to Yahoo Calendar](#)



ACGME Cloud

Reducing Burden | Reimagining GME

ACGME to Launch Next Phase of ACGME Cloud with New Features in April including a Unified User Experience and ACGME Cloud | Analytics Additions and Enhancements!

Learn More and connect with the ACGME team at the conference:

- Visit the ACGME Cloud team at the ACGME Hub in the Exhibit Hall
- Attend two key sessions on Friday, February 20
 - Featured Plenary SES003, Harnessing AI Agents in the GME Office: Innovations and Future Directions
 - SES022, ACGME Cloud: Progress, Next Steps, and Ways to Stay Engaged

Contact Cloud@acgme.org with questions.

The logo for ACGME Cloud features a stylized red 'A' icon to the left of the text 'ACGME Cloud' in a bold, red, sans-serif font. A thin horizontal line is positioned below the text.

ACGME Cloud

Reducing Burden | Reimagining GME

New ACGME Cloud features launching in April will offer:

- Unified User Experience – simplified, streamlined navigation across ACGME Cloud and the Accreditation Data System (ADS), including a user-friendly way to switch between products and an AI-powered smart search to find information in ADS and complete tasks.
- ACGME Cloud | Analytics Additions and Enhancements – additional dashboards for the annual Resident/Fellow and Faculty Surveys, operational dashboards, and Milestones dashboards.

Visit the ACGME Cloud team at the ACGME Hub in the Exhibit Hall to learn more!

Contact Cloud@acgme.org with questions.



FUNDING OPPORTUNITY FOR RESIDENT AND FELLOW LEADERS



OPPORTUNITY DESCRIPTION

Resident- or fellow-developed and led projects to enhance meaning in clinical learning environments by fostering the physician-patient relationship



PROJECT ASSESSMENT CRITERIA

- Strengthens relationships with patients
- Sustainable
- Adaptable to other programs or contexts
- Innovative and cost-effective



PROJECT FUNDING

Additional travel stipend available to offset costs to attend Learning Collaborative meetings in Chicago, Illinois and the 2028 ACGME Annual Educational Conference in Orlando, Florida.

FUNDING OPTIONS

- 1: up to \$10,000
- 2: up to \$5,000



**SCAN QR CODE
FOR MORE INFO**

**PROPOSALS DUE:
APRIL 20, 2026**

Available Now

ACGME Program Coordinator Handbook Companion

Focus

Developing a comprehensive understanding of the coordinator role

expanding knowledge of **accreditation processes** and **requirements to ensure compliance**

improving skills to **support recruitment, orientation, and onboarding**, and other relevant tasks

selecting appropriate **professional development** and **continuous growth** strategies





Questions?