ACGME Program Requirements for Graduate Medical Education  
in Psychiatry  
Summary and Impact of Focused Requirement Revision

Requirement Revision:

Requirement #: III.A.2.: Admission Requirements—Physicians may enter psychiatry programs at either the first or second year. Physicians entering at the second year must document successful completion of a clinical year of education in an ACGME-accredited specialty program requiring comprehensive and continuous patient care, such as internal medicine, family medicine, pediatrics, or a transitional year program. For physicians entering in the second year after completion of such a program, the first year may be credited toward the 48-month requirement. (Core)

Requirement #: III.C.4: If previous ACGME-accredited training was not in a psychiatry program, residents may receive up to but no more than 12 months credit for prior training as part of the expected 48 months of the educational program. (Core)

1. Describe the Review Committee’s rationale for this revision:

The Review Committee for Psychiatry (RC) is proposing the focused revision to address a significant issue that has arisen from the National Resident Matching Program’s (NRMP-Match) “All-In Policy” as it applies to psychiatry residency programs. For advanced programs, all open psychiatry residency positions with entry at either the PGY-1 or PGY-2 level must be filled through the Match if training begins on the customary June/July start date or after January 31. PGY-2 psychiatry openings are customarily due to unexpected resident transfers or non-renewals. Such occurrences are not rare. When openings are unexpected or fall outside of the Match window, recruitment required by the Match is very difficult and does not accommodate the uncertainties of the resident application process for unfilled slots nor the effect caused as matched residents create new openings late in the year. Most of the applicants for PGY-2 positions have already been through the Match process to gain a PGY-1 position, either in a transitional year program, in psychiatry, or in another specialty.

After discussions between the RC, the American Association of Directors of Psychiatric Residency Training, and the NRMP regarding this issue, it was agreed by all parties that the proposed revision that includes deleting III.A.2. and adding the new and clarifying requirement under Resident Transfers, III.C.1.a), will satisfy compliance with the NRMP’s “All-In Policy” in regard to Matching services for advanced programs.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality? N/A

3. How will the proposed requirement or revision impact continuity of patient care? N/A

4. Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how? N/A

5. How will the proposed revision impact other accredited programs? N/A