Requests for Changes in Resident Complement
Review Committee for Internal Medicine

The Review Committee for Internal Medicine approves:

- Changes in resident complement
- Complement total

Both permanent and temporary increases in resident complement require prior approval of the designated institutional official (DIO), and must be submitted to the Review Committee through the Accreditation Data System (ADS) for prior approval. An educational rationale must be included with the request.

To officially initiate a request for a change in the approved resident complement, program directors must log into ADS and select “Complement Change” from the right-hand menu under the “Program” tab. All complement changes will be electronically sent to the DIO for approval. After the DIO has approved the request, the materials submitted in ADS are forwarded to the Review Committee for a final decision. For content-related questions, or to check the status of your request, please contact Review Committee staff.

Note: it could take up to 60 days to receive the final decision regarding a request.

Programs must hold a status of Continued Accreditation to be considered for a complement increase. Programs with statuses of Continued Accreditation with Warning, Initial Accreditation, Initial Accreditation with Warning, or Probationary Accreditation are not eligible for an increase. The Committee will consider requests for a change in complement between full reviews through the ADS mechanism. Consideration for approval will be given to programs with:

- an accreditation status that does not include Warning/Probation;
- no serious duty hour violations;
- reasonable compliance on the most recent Resident Survey;
- adequate faculty, facilities, patients;
- a sound educational rationale for the request; and,
- a stable administrative structure and program leadership.

If a site visit is scheduled based on the annual review of the program, the increase request may be deferred to the review following that site visit.

Instructions and the information required to complete a complement change request are provided in ADS. The educational rationale for an increase in resident complement need not be an educational innovation or change in program structure. For programs in good standing that can demonstrate they have adequate resources (patients, faculty, facilities, and funding), the Committee will consider “the desire and ability to educate an increased number of residents” as an adequate educational rationale. Additionally, programs requesting a temporary increase of one-to-two residents/fellows need not enter a detailed educational rationale. These “modest” temporary increases can be administratively approved by the Review Committee. However, the Review Committee will carefully consider whether such requests are driven by service needs or educational capacity, neither of which are sufficient reasons for requesting an increase.

Note: To be considered for a complement increase, core internal medicine programs must have an American Board of Internal Medicine board pass rate greater than 80% for first-time test takers during the most recent three-year period.