Requests for Changes in Resident Complement
Review Committee for Diagnostic Radiology
ACGME

This specialty approves:
- Changes in resident complement
- Complement total

A permanent change in resident complement, increase or decrease, requires prior approval by the designated institutional official (DIO), and must be reported to the Review Committee through the Accreditation Data System (ADS). A request for a permanent increase requires additional documentation and DIO approval prior to Committee review. A request for a temporary increase requires less documentation, but still requires DIO approval prior to Committee review, and must also be submitted in ADS. An educational rationale must be provided with any complement change request.

To officially initiate a change in the approved resident complement, a program director must log into ADS and under the “Program” tab, select “Complement Change” from the right-hand menu. All complement change requests will be electronically sent to the DIO for approval, as dictated by the Institutional Requirements. After the DIO has approved the request, the materials submitted in ADS are forwarded to the Review Committee for consideration. The Review Committee Executive Director will notify the program director of the Committee’s decision.

Programs must hold a status of Continued Accreditation to be considered for a complement increase. Programs with statues of Continued Accreditation with Warning, Initial Accreditation, Initial Accreditation with Warning, or Probationary Accreditation are not eligible for a permanent increase. A site visit may be required for complement change requests depending on the details of the request.

The following documents/information will be required to complete a request for an increase in complement (instructions are also provided in ADS):

- Educational rationale for the change
- Key faculty-to-resident ratio
- Major changes in the program since its last review
- Response to previous citations
- Current block diagram
- Proposed block diagram
- Clinical data update (as specified in ADS)