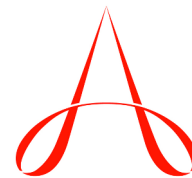


RRC NEWS

PATHOLOGY



ACGME

Accreditation Council for Graduate Medical Education

DECEMBER 2009

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MEETING AND AGENDA CLOSING DATES

Meeting: April 16-17, 2010

Agenda Closing: March 8, 2010

Meeting: October 1-2, 2010

Agenda Closing: August 27, 2010

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Change in Process for New Pathology Residency Applications

Beginning January 1, 2010 all applications for accreditation of new pathology residency programs will require a site visit prior to a program's evaluation by the Residency Review Committee (RRC). This requirement is not unique to pathology programs and supports the ACGME's efforts to ensure that education programs in all medical specialties will provide adequate resident education prior to enrolling residents. A prospective program will not be accredited until after a site visit and a decision by the RRC to award accreditation, provided the program demonstrates substantial compliance with the accreditation standards. It is likely to require approximately one year from the time an application is received until accreditation is granted. Prospective program directors (PDs) can access the program requirements as well as the new application Program Information Form (PIF) directly from the Pathology RRC webpage on the ACGME's website, www.acgme.org. All required information, including the PIF, must also be available for site visitors during the accreditation visit. For the foreseeable future, fellowship applications will continue to be considered for approval without a site visit.

Pathology Program Requirements Timeline

Currently, the program requirements for Pathology and each of its nine subspecialties are undergoing major revision. According to ACGME policy, major revisions of program requirements must take place at least every five years; with Program Information Forms (PIFs) revised in conjunction to reflect any changes to the requirements. Although some minor changes to the requirements were implemented in 2007, the last major revision for all nine subspecialties of Pathology took place in 2004. Members of the RRC are working closely with ACGME's Requirements Development Committee (RDC) to determine where changes or updates must be made in an effort to promote a high standard for graduate medical education. The revised program requirements will be posted for 45-day public comment period most likely in the winter or early spring of 2009-2010. This public comment period is your opportunity to be involved in the program requirements revision process. Comments should be submitted to: pathology@acgme.org. Please look for an announcement, as well as a link to the posted proposed requirements, in the ACGME's weekly e-Communication. All feedback will be carefully reviewed and, when warranted, may trigger changes to the proposed requirements. The revised program requirements will be reviewed by the ACGME Committee on Requirements at its February 2011 meeting and become effective no earlier than July 1, 2011.

Selective Pathology

Subspecialty-specific program requirements and a PIF have been developed for selective pathology. The approximate effective date for the new requirements and PIF is July 1, 2011. At that time, the practice of using relevant core program requirements and core PIFs will be discontinued, and all programs seeking accreditation must complete the new, selective pathology-specific program requirements and PIFs.

Changes to the Process for Requests for Increases in Resident Complement

In order to facilitate transparency and consistency of the guidelines used by the RRC to determine approval of permanent increase requests, the RRC will use the following guidelines in addition to other program information:

Guidelines for Permanent Increases

1. If a site visit is pending within a year of the request:
Any request for an increase in complement that is received within a year of an anticipated full program review with site visit will be (potentially) approved on a temporary basis only, until the full program review can be completed. A decision on the permanent increase will be made at the time of the review.
2. Site visit later than one year from time of request:
The following documentation/information will be required to complete a complement change request (instructions also provided in ADS):
 - a. A sound educational rationale for the increase
 - b. Description of the adequacy of facilities
 - c. Patient population: the number and variety of cases available for resident education
 - d. Number of procedures available to residents (list the number of autopsies, surgicals, frozen sections, cytologies available for resident education)
 - e. Sufficient research opportunities

- f. Sufficient number of faculty with expertise in all major disciplines covered within subspecialty
- g. Major changes in the program since its last review
- h. A description of the manner in which the program has corrected previous citations

Please note: Pathology core programs must have an ABP exam pass rate of greater than 75% for first-time takers educated in your program for the most recent three-year period of the combined AP/CP to be considered for a permanent increase in resident complement.

Resident Nomination Communication

Information regarding calls for resident nominations (for new resident members of the RRC) will now be disseminated through a variety of methods, including meetings, organizations, and websites (tentatively including CAP, ACAP, ACP Prods, USCAP) with links to ACGME nomination information. The RRC is striving to include a broad range of stakeholders in addition to the program directors.

ACGME Pathology Programs at a Glance

Currently there are 2411 residents enrolled in 149 ACGME-accredited pathology residency programs (2009-2010). 52% of AP/CP residents are female and 31% have completed their medical training outside the United States (i.e., International Medical Graduates, or IMGs). The maximum length of accreditation for new applications and existing programs is three years and five years, respectively. The accreditation cycle length is set by the RRC at the time of program review. Cycle length reflects the degree to which an individual program is in compliance with the program requirements so that substantial compliance is rewarded with a longer approval cycle.

Average Cycle Length : Academic Year 2009-10 : Pathology

Specialty/Subspecialty	Cycle
Pathology-anatomic and clinical	4.18
Selective Pathology	4.09
Blood Banking/ Transfusion Medicine	4.54
Chemical Pathology	4.50
Cytopathology	4.52
Forensic Pathology	3.84
Hematology	4.29
Medical Microbiology	4.21
Neuropathology	4.59
Pediatric Pathology	4.30

Number of Programs and Residents/Fellows : 2009-10

	Programs	Residents/ Fellows
Pathology-anatomic and clinical	149	2411
Selective Pathology	59	133
Blood Banking/Transfusion Medicine	46	43
Chemical Pathology	2	2
Cytopathology	87	135
Forensic Pathology	37	40
Hematology	80	117
Medical Microbiology	12	9
Neuropathology	34	43
Pediatric Pathology	22	27
TOTALS-fellowships/fellows	379	549

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