



**Accreditation Council for  
Graduate Medical Education**

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TO: Surgery and Vascular Surgery Programs  
FROM: Peggy Simpson, EdD, Executive Director  
Review Committee for Surgery  
DATE: September 22, 2011  
RE: Early Specialization Project

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The Review Committee for Surgery voted to consider applications for the Early Specialization Project (ESP) as a pilot. Institutions sponsoring an ACGME-accredited general surgery program, and an ACGME-accredited pediatric surgery or vascular surgery program are eligible to apply for participation in the ESP. The application criteria and required documentation follow:

- 1) There must be letters of support from the program directors of both the surgery program and the pediatric or vascular surgery program.
- 2) There must be a letter of support from the designated institutional official (DIO).
- 3) Both the surgery and the pediatric or vascular surgery programs must be in substantial compliance with the Program Requirements as judged by the Review Committee. (Each program's accreditation history, ability to correct areas cited in the last program review, and breadth of operative experience available for education, including the defined category data, will be evaluated and addressed.)
- 4) Both programs' passing rates on the Qualifying and Certifying Examinations must meet or exceed those specified in the Program Requirements.
- 5) The procedure outlining the resident selection process must be submitted.
- 6) The first four years of surgery education justifying resident preparation for the ESP must be completely described. (NB: Normally, no more than four months of the first 36 months of surgery residency may be spent exclusively on the applicable subspecialty service, i.e., the pediatric or vascular surgery service.)
- 7) Operative data must be submitted and should reflect that the program can provide sufficient operative experience during the PG1-4 years in the principal (essential) content areas.
- 8) The program director making the application for the ESP must document sufficient resources to provide all other residents and subspecialty fellows with a sufficient

breadth and balance of operative experience in the principal (essential) content areas.

- 9) A block diagram of the proposed clinical assignments for the PG3, 4, and 5, as well as the ESP-1 and -2 years in the applicable subspecialty must be submitted.
- 10) A narrative statement describing the implementation and sequencing of the chief resident experience is required. (NB: The program will be required to track each resident's operative experience and provide the Review Committee with an annual progress report of these data. When a resident completes the ESP, he or she must meet or exceed these requirements: the defined category data, the chief year data, and the data in aggregate for the four years of general surgery experience.)
- 11) Both program directors must stipulate in writing that they and all faculty members will comply with the Program Requirements regarding resident evaluation, i.e., documenting a written, semiannual evaluation, and a written, summative evaluation at the completion of each PG year, including the PG4 and ESP years.
- 12) The program may submit a proposal for **only one** position per subspecialty during the duration of the ESP pilot project. Early identification of residents interested in the ESP is encouraged.
- 13) The program may, at its discretion, apply for a temporary increase in categorical positions per current Review Committee policy. However, the program is not encouraged to request approval for additional non-designated preliminary positions.

Submit three copies of the proposal, including 1-13 above, to:  
Peggy Simpson, EdD  
Executive Director

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Accreditation Council for Graduate Medical Education  
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Outlined below is the proposed evaluation process for the ESP:

- 1) Annually, the program must justify the volume and breadth of operative experience available for all residents and fellows, including the ability to provide the ESP resident with sufficient cases in the essential content areas by completion of the PG4 year. Areas of insufficiency and noncompliance with the Program Requirements may be justification for discontinuation of the ESP.
- 2) The passing rate of candidates on both the Qualifying and Certifying Examinations for surgery and the subspecialty examinations will serve as one evaluation measure.

- 3) The faculty evaluation of the educational quality of the program should play an integral role in the implementation and development of the program, and this should be documented.
- 4) Employer and graduate evaluations of the quality of the graduate and the educational program should also prove helpful.