

May 23, 2006

Guidelines to Evaluate Proposals for Integrated Vascular Surgery Programs

The Program Requirements for Residency Education in Vascular Surgery state that: "Residents must complete 5 years of vascular surgery education following completion of an MD or DO degree from an institution accredited by the Liaison Committee of Medical Education (LCME) or by the American Osteopathic Association (AOA). Graduates of schools of medicine from countries other than the United States or Canada must present evidence of final certification by the Education Commission for Foreign Medical Graduates (ECFMG)."

- a) The integrated curriculum must contain 5 years of clinical surgical education under the authority and direction of the vascular surgery Program Director.
- b) Two of these 5 years must include documented educational experiences in core surgical education, including pre and post operative evaluation and care; critical care and trauma management; and basic technical experience in skin and soft tissue, abdomen and alimentary track, airway management, laparoscopic surgery, and thoracic surgery.
- c) Three of the 5 years must include documented educational experiences concentrated in vascular surgery.
- d) The last year of the program must comprise chief resident responsibility on the vascular surgery service at an integrated institution.
- e) Residents must complete, at minimum, the last 2 years of vascular surgery education in the same institution.
- f) No more than 6 months of the 5-year program may be dedicated to research.

To apply for this format, please submit the following information:

1. Please complete a modified PIF documenting the outline of the educational program:

Documentation of the assignments/rotations to the various educational experiences listing clear educational objectives for each. The following areas must be addressed: objectives and proposed time frame; outline of topics and conference schedule, planned resident-staff participation in sessions, and method for assessment of resident academic/clinical performance.

- a. Describe how the written curriculum will be structured. (Submit a written outline.)

- b. Provide a narrative that identifies the educational goals to be achieved in each of the rotations for each of the participating institutions. (Submit educational objectives/goals for each assignment and for each year in the program.)
 - c. Provide the block diagram for all years of the program. (Submit for all years of the 5-year program.)
 - d. Complete and attach the ACGME Competency addendum to the PIF which outlines how the Competencies will be taught and evaluated.
2. Include a statement from each of the appropriate individuals (program director or chief of service external to the vascular surgery service) supporting the goals for the assignments and supporting the authority of the vascular surgery program director to control the vascular surgery residency program.
3. The Designated Institutional Official (DIO) of the sponsoring institution must document support for the authority of the vascular surgery program director to control the integrated residency program (all 5 years) and to provide funding of these residency positions. (Submit the letter of support from the DIO.)
4. Justify the number of residents, i.e., show how the program will provide adequate peer interaction, will provide good operative experience, and rationalize how the number of residents should not exceed the ability of the program director and faculty to supervise and monitor the resident education. (Submit a narrative justifying peer interaction, the proposed resident complement, the faculty/resident ratio, use operative data.)
6. Justify the number of program faculty from all specialties (including the vascular surgery faculty) who will be involved in the vascular surgery residency.

The Program Requirements state: "In addition to the Program Director, there must be for each approved residency position at least one geographic full-time faculty member whose major function is to support the residency program. These faculty must be appointed for a period long enough to ensure adequate continuity in the supervision of the residents. At minimum, one surgeon on the faculty, in addition to the Program Director, must be certified in Vascular Surgery by the American Board of Surgery, or possess suitable equivalent qualifications as determined by the RRC." This means that faculty in addition to the 2 VS faculty are to be identified, such as, general surgery, cardiology, interventional radiology, etc., who are responsible for each clinical rotation or who contribute to resident education. (Submit an abbreviated curriculum vitae for each of the VS and non-VS faculty.)

7. Identify the outcome criteria the Program Director and Faculty will use to evaluate the educational effectiveness of the proposed program. (This information about the

effectiveness of the 3+3 program will be evaluated by the RRC at the time of the next site visit and should be included in the PIF prepared for that next site visit.)

8. Call or e-mail me if you need assistance.

Submit all of the materials under one cover to:

Executive Director
RC Surgery
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312 755-5499 (phone)
312 755-7498 (fax)