

**ACGME Program Requirements for Graduate Medical Education in Anesthesiology
Impact Statement for Focused Revision**

Line Number(s): 1037-1038

Requirement Revision: Residents must participate in at least one simulated clinical experience each year.

Describe, as appropriate, how the revision:

1. impacts the quality and safety of patient care; **In clinical anesthesiology the complexity and pace of change in patient condition is often too rapid to allow the resident to fully appreciate the pathophysiology of the event or have the opportunity to reflect on the options for care and their implications. In addition, simulation allows the program to provide additional management experiences to residents for uncommon clinical situations. Simulation can provide each resident the opportunity to participate in complex scenarios that mimic perioperative experiences, allow reflection about clinical assessment, decision making and how to most effectively work collaboratively to optimize clinical management.**
2. improves the quality of resident education; **Programs will be expected to use simulation to assess medical knowledge, patient care management during critical clinical situations, optimize interpersonal and communication skills, professionalism, system based practice and practice based learning. The American Board of Anesthesiology (ABA) currently requires simulation as part of the Maintenance of Certification process (MOCA). Having experience with simulation during training will make this requirement more consistent with a process that reinforces education.**
3. affects the way the resident, the service, and the staff provide patients with continuing care; **Each department will be able to design their own simulated clinical event. The Anesthesiology RRC will require that each program design and implement simulated clinical situations that will build on their other educational initiatives and ultimately improve the ability to manage the breadth and depth of clinical situations confronted by the anesthesiologist. The simulation experience should include clinical situations that mimic perioperative care, including, but not limited to operating room management, intensive care and cardiopulmonary resuscitation.**
4. requires a change in institutional resources (e.g., facilities; organization of other services; addition of faculty; financial impact); **The institution must be able to provide simulation experiences, either in the form of simulation centers, computer based simulation or other methods.**
5. may change the volume and variety of patients required to provide proper educational resources in the institution(s); **None**
6. impacts residency education in other specialties. **While this simulation experiences must reflect the educational goals and objectives for anesthesiology residents at each level of training, the simulations may include experiences that involve residents from other specialties, including surgery and surgical subspecialties or medicine to optimize clinical management in crisis situations and facilitate team building.**