

Summary and Impact of Major Program Requirement Revisions Procedural Dermatology

Line Number(s): 141-144
Requirement Revision (major revisions only): 1. Qualifications of the program director must include: the completion of an ACGME-accredited <u>procedural dermatology fellowship or American College of Mohs Micrographic Surgery approved fellowship.</u> format 12-month PGY-5 fellowship in dermatologic surgery or appropriate clinical experience;
Describe, as appropriate, how the revision:
<ul style="list-style-type: none"> 1) impacts the quality and safety of patient care: Fellowship trained PDs in procedural dermatology have knowledge and experience in quality and safety which can be passed along to those they train with the intent that program graduates will implement these practices. 2) improves the quality of resident education: Fellowship trained PDs in procedural dermatology tend to have a broader well defined personal educational experience. Because they have completed fellowship training themselves they understand program requirements and curriculum content and can provide a similar experience for their fellows. 3) affects the way the resident, the service, and the staff provide patients with continuing care: PD who completes accredited training will have a positive effect on how their subordinates provide care. 4) requires a change in institutional resources (e.g., facilities; organization of other services; addition of faculty; financial impact): If an institution does not have a PD who meets this criteria they will need to recruit a qualified individual. Almost all institutions with an existing Procedural Dermatology fellowship program have a PD who qualifies. This is the same requirement for the surgical director in the core dermatology residency. In lieu of a Procedural Dermatology Fellowship, fellowship training approved by the ACMS is deemed equivalent because prior to 2003 ACGME did not accredit these fellowship programs and ACMS programs where the only ones in existence. 5) may change the volume and variety of patients required to provide proper educational resources in the institution(s): Fellowship trained PDs in procedural dermatology will be capable of providing care to the full range of patients seeking skin procedures with the potential of increasing patient volumes. 6) impacts residency education in other specialties: N/A
Line Number(s): 237-241
Requirement Revision (major revisions only): Members of the teaching staff <u>faculty</u> who have responsibility for fellow education in Mohs micrographic surgery must have completed <u>an ACGME accredited procedural dermatology fellowship or American College of Mohs Micrographic Surgery approved fellowship</u> a 12-month PGY-5 dermatologic surgery fellowship or have appropriate clinical experience.
Describe, as appropriate, how the revision:
<ul style="list-style-type: none"> 1) impacts the quality and safety of patient care: Fellowship trained faculty in procedural dermatology have knowledge and experience in

quality and safety which can be passed along to those they train with the intent that program graduates will implement these practices.

- 2) improves the quality of resident education:
Fellowship trained faculty in procedural dermatology tend to have a broader well defined personal educational experience. Because they have completed fellowship training themselves they understand program requirements and curriculum content and can provide a similar experience for their fellows.
- 3) affects the way the resident, the service, and the staff provide patients with continuing care:
Faculty who complete accredited training will have a positive effect on how their subordinates provide care.
- 4) requires a change in institutional resources (e.g., facilities; organization of other services; addition of faculty; financial impact):
If an institution does not have faculty who meets this criteria they will need to recruit a qualified individual. Almost all institutions with an existing Procedural Dermatology fellowship program have a faculty member who qualifies. In lieu of a Procedural Dermatology Fellowship, fellowship training approved by the ACMS is deemed equivalent because prior to 2003 ACGME did not accredit these fellowship programs and ACMS programs were the only ones in existence.
- 5) may change the volume and variety of patients required to provide proper educational resources in the institution(s):
Fellowship trained PDs in procedural dermatology will be capable of providing care to the full range of patients seeking skin procedures with the potential of increasing patient volumes.
- 6) impacts residency education in other specialties:
N/A

Line Number(s): 267-273

Requirement Revision (major revisions only):

Adequate space should be dedicated to the performance of dermatologic surgery procedures; this must include a Mohs micrographic frozen section laboratory and examination areas for surgical patients. The space must be accredited by an appropriate oversight body (e.g., Joint Commission on Accreditation of Healthcare Organizations(JCAHO), Accreditation Association for Ambulatory Health Care (AAAHC), Centers for Medicare & Medicaid Services (CMS), or state medical board.

Describe, as appropriate, how the revision:

- 1) impacts the quality and safety of patient care:
Will ensure higher quality and safety for patients cared for in the teaching facility.
- 2) improves the quality of resident education:
Exposes fellows to quality standards and oversight process that the fellowship program promotes as an important part of the curriculum.
- 3) affects the way the resident, the service, and the staff provide patients with continuing care:
Oversight by external quality and safety experts will be a positive force on all members of the delivery team to provide safe and efficient care to patients.
- 4) requires a change in institutional resources (e.g., facilities; organization of other services; addition of faculty; financial impact):
Compliance with external oversight will likely require changes to facilities, personnel and work routines. These changes will have a financial impact of varying degrees.
- 5) may change the volume and variety of patients required to provide proper educational

resources in the institution(s): N/A 6) impacts residency education in other specialties: N/A
Line Number(s): 279-282
Requirement Revision (major revisions only): Program laboratories should <u>must</u> be in compliance with all federal, state and local regulations regarding a work environment (e.g., Occupational Safety and Health Administration (OSHA) and Clinical Laboratory Improvement Amendments (CLIA).
Describe, as appropriate, how the revision: 1) impacts the quality and safety of patient care: A safer work environment will translate into higher quality and safety for patients cared for in those environments. 2) improves the quality of resident education: Exposes fellows to quality standards and oversight process that the fellowship program promotes as an important part of the curriculum. 3) affects the way the resident, the service, and the staff provide patients with continuing care: Oversight by external quality and safety experts will be a positive force on all members of the delivery team to provide safe and efficient care to patients. 4) requires a change in institutional resources (e.g., facilities; organization of other services; addition of faculty; financial impact): Compliance with external oversight will likely require changes to facilities, personnel and work routines. These changes should have a modest financial impact. 5) may change the volume and variety of patients required to provide proper educational resources in the institution(s): N/A 6) impacts residency education in other specialties: N/A
Line Number(s): 284-286
Requirement Revision (major revisions only): <u>Frozen section slides for Mohs micrographic surgery must be reviewed and approved by an appropriate peer reviewed organization (e.g., American College of Mohs Surgery (ACMS)).</u>
Describe, as appropriate, how the revision: 1) impacts the quality and safety of patient care: Mohs surgery microscopic slide quality is a critical aspect of performing this procedure correctly. If slide quality is poor then treatment may be incomplete and patient care suffers. External oversight of slide quality ensures highest quality is provided to patient seen in the educational environment. At present ACMS is the only group in the USA with a slide quality program tailored to meet the needs of these training programs. 2) improves the quality of resident education: Exposes fellows to quality standards and oversight process that the fellowship program promotes as an important part of the curriculum. 3) affects the way the resident, the service, and the staff provide patients with continuing care: External quality and safety oversight of slide quality is a critical first step to ensuring safe and quality care is provided to patients.

- 4) requires a change in institutional resources (e.g., facilities; organization of other services; addition of faculty; financial impact):
Compliance with external oversight will likely require changes to supplies used and work routines. These changes will have a minimal financial impact.
- 5) may change the volume and variety of patients required to provide proper educational resources in the institution(s):
N/A
- 6) impacts residency education in other specialties:
N/A

Line Number(s): 416-419

Requirement Revision (major revisions only):

Must demonstrate competency in *cutaneous reconstructive surgery including random pattern and axial flap repair, grafting techniques, and staged reconstructive techniques.* (moved from IV.A.2.4.d).

Describe, as appropriate, how the revision:

This requirement lists many skills acquired by most dermatology residents prior to beginning the PD fellowship which is expanded upon during the fellowship year. The PD fellowship provides opportunity to mature these skills.

- 1) impacts the quality and safety of patient care:
Impact should be minimal on patients treated by fellows in the educational environment.
- 2) improves the quality of resident education:
Performing these procedures under the guidance of the PD and other faculty will provide fellows the experiences necessary to develop confidence necessary to practice Procedural Dermatology upon completion of the fellowship.
- 3) affects the way the resident, the service, and the staff provide patients with continuing care:
Will improve the manner in which the delivery team provides continuing care.
- 4) requires a change in institutional resources (e.g., facilities; organization of other services; addition of faculty; financial impact):
N/A
- 5) may change the volume and variety of patients required to provide proper educational resources in the institution(s):
If the institution is not servicing sufficient numbers of patients who require these types of procedures then the fellows' educational experience is in jeopardy. Specific numeric requirements, for each of these procedures, that correlate in a positive way with trainee competency are difficult to determine. In the absence of a certifying exam for PD, the RRC will depend on the PD assessment of competency in the execution of these procedures by the trainee.
- 6) impacts residency education in other specialties:
Again in the situation in which the institution has a paucity of patients routinely undergoing these procedures, it is likely that fellows in affiliated dermatology or facial reconstruction training programs may compete for these cases.

Line Number(s): 426-428

Requirement Revision (major revisions only):

Must demonstrate proficiency in the *early identification of Benign premalignant and malignant lesions through unaided and aided visual morphologic recognition.*

Describe, as appropriate, how the revision:

- 1) impacts the quality and safety of patient care:
Will ensure higher quality and safety for patients cared for in the teaching facility.
- 2) improves the quality of resident education:
The Procedural Dermatology fellowship provides opportunities to broaden these skills which are another prerequisite to participation in the fellowship
- 3) affects the way the resident, the service, and the staff provide patients with continuing care:
Use of these tools and competency in the use of these tools raises the quality of care standard that patients will experience in the educational environment.
- 4) requires a change in institutional resources (e.g., facilities; organization of other services; addition of faculty; financial impact):
These tools are a minimal financial investment and are presently available in most training environments. No special facilities are required and training is straightforward and inexpensive.
- 5) may change the volume and variety of patients required to provide proper educational resources in the institution(s):
All teaching environments in which Procedural Dermatology fellows receive instruction contain patients with skin lesions for which these skills are required. No change in patient makeup or quantity will be required for compliance.
- 6) impacts residency education in other specialties:
N/A

Line Number(s): 433-434

Requirement Revision (major revisions only):

Must perform at least 400 surgical cases of which at least 200 are Mohs micrographic surgery procedures.

Describe, as appropriate, how the revision:

- 1) impacts the quality and safety of patient care:
N/A
- 2) improves the quality of resident education:
This numeric requirement defines the minimum thought to ensure an adequate educational experience by the Dermatology RRC. By setting a standard requirement the RRC can determine in the future if in fact these numbers are adequate or need modification. In other words, without a starting point it is impossible to determine impact on trainee education.
- 3) affects the way the resident, the service, and the staff provide patients with continuing care:
N/A
- 4) requires a change in institutional resources (e.g., facilities; organization of other services; addition of faculty; financial impact):
Most existing Procedural Dermatology programs are in compliance and no additional resources will need to be used but new programs will need to gauge startup expenses to comply with these minimums.
- 5) may change the volume and variety of patients required to provide proper educational resources in the institution(s):
Existing programs are in compliance.
- 6) impacts residency education in other specialties:
N/A

Line Number(s): 443-455

Requirement Revision (major revisions only):

~~Fellows must also expand~~ demonstrate their knowledge of related disciplines such as surgical anatomy, sterilization of equipment, aseptic technique, anesthesia ~~(including preoperative sedation, local and regional anesthesia, and indications for conscious sedation and general anesthesia)~~, closure materials ~~(sutures, staples)~~, and instrumentation.

~~Appropriate evaluation and management skills must~~ demonstrate advanced evaluation and management skills ~~be mastered~~ for all cutaneous surgical patients regardless of diagnosis, including preoperative, perioperative, and postoperative evaluation. ~~Training with certification in advanced cardiopulmonary resuscitation is required.~~

Describe, as appropriate, how the revision:

- 1) impacts the quality and safety of patient care:
Improvement.
- 2) improves the quality of resident education:
Provides PD and fellows with a more precise definition of two major goals of the fellowship program.
- 3) affects the way the resident, the service, and the staff provide patients with continuing care:
Improvement.
- 4) requires a change in institutional resources (e.g., facilities; organization of other services; addition of faculty; financial impact):
N/A
- 5) may change the volume and variety of patients required to provide proper educational resources in the institution(s):
N/A
- 6) impacts residency education in other specialties:
N/A

Line Number(s): 611-614

Requirement Revision (major revisions only):

Fellows must have an opportunity to work with health care personnel from dermatology, dermatopathology and medical oncology. Fellow experience should include interaction with general surgery, ophthalmology, otolaryngology, plastic surgery and radiation therapy.

Describe, as appropriate, how the revision:

- 1) impacts the quality and safety of patient care:
Improvement.
- 2) improves the quality of resident education:
Provides PD and fellows with more precise definition the types of relationships that need to exist between the Procedural Dermatology fellowship program and other pathology and surgical colleagues. These relationships are critical to fellow experiences during the fellowship as well as how they practice upon completion of the fellowship.
- 3) affects the way the resident, the service, and the staff provide patients with continuing care:
Improvement.
- 4) requires a change in institutional resources (e.g., facilities; organization of other services; addition of faculty; financial impact):
N/A

- 5) may change the volume and variety of patients required to provide proper educational resources in the institution(s):
Institutions that restrict their clinical practices to non-complicated patients or do not provide a variety of skin procedures will have difficulty developing the types of relationship outlined here.
- 6) impacts residency education in other specialties:
N/A

Line Number(s): 618-626

Requirement Revision (major revisions only):
Scholarly activity by the fellow must include:

preparation of manuscripts suitable for submission to peer-reviewed publication.

active engagement in teaching,

presentations at local, regional, or national professional society meetings on topics relevant to procedural dermatology.

Describe, as appropriate, how the revision:

- 1) impacts the quality and safety of patient care:
Improvement.
- 2) improves the quality of resident education:
Adding more structure to the requirements for scholarly activity ensures enhancement of the educational experience and attempts to prepare the fellow to develop skills in communicating his expertise to medical colleagues in his future practice community.
- 3) affects the way the resident, the service, and the staff provide patients with continuing care:
Improvement.
- 4) requires a change in institutional resources (e.g., facilities; organization of other services; addition of faculty; financial impact):
Minimal expense to the institution to support fellows in this way and only minor disruption to patient scheduling if any.
- 5) may change the volume and variety of patients required to provide proper educational resources in the institution(s):
Impact on patient volume and composition would be dependent upon type of projects or areas of study selected and agreed upon.
- 6) impacts residency education in other specialties:
N/A

Line Number(s): 668-669

Requirement Revision (major revisions only):
be completed using the evaluation form available on the American Board of Dermatology website.

Describe, as appropriate, how the revision:

- 1) impacts the quality and safety of patient care:
N/A.
- 2) improves the quality of resident education:
Provides formal feedback, monitored by ABD.
- 3) affects the way the resident, the service, and the staff provide patients with continuing care:

N/A.

- 4) requires a change in institutional resources (e.g., facilities; organization of other services; addition of faculty; financial impact):

N/A.

- 5) may change the volume and variety of patients required to provide proper educational resources in the institution(s):

N/A.

- 6) impacts residency education in other specialties:

Fosters inter specialty cooperation and team based management of complex cases through education multi-specialty assessment of the fellow.