

**ACGME Program Requirements for Graduate Medical Education
in Neuropathology**

Line Number(s): 177-178

Requirement Revision (major revisions only):

III.A.3.f). The Program Director must devote at least 35% time to include clinical work with fellows, teaching, and fellowship-related administration.

Describe, as appropriate, how the revision:

- 1) impacts the quality and safety of patient care;

N/A

- 2) improves the quality of resident education;

a) The proposed revision will ensure that adequate time is provided to the program director to teach fellows, observe and assess fellow progress, and to administer the program.

b) A defined percentage of protected time will allow the director to implement the program requirements and ensure that the program is providing the appropriate depth and breadth of educational and clinical experiences for the fellow.

- 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);

In some programs, some non-fellow oriented clinical and administrative responsibilities may need to be shifted to other faculty members to allow the program director to meet the 35% time requirement.

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

N/A

- 6) impacts residency education in other specialties.

N/A

Line Number(s): 189-190

II.B.2.a: The faculty must in aggregate devote at least 20 hours per week for the fellowship-related clinical work and teaching

Describe, as appropriate, how the revision:

- 1) impacts the quality and safety of patient care;

Sufficient faculty supervision and oversight ensures a high quality of fellow clinical work, and directly impacts the quality and safety of patient care.

- 2) improves the quality of resident education;

The RRC believes that ensuring a minimum amount of time for faculty involvement with and teaching of fellows should allow for improvement in

resident education quality. This amount of time for faculty interaction with fellows will allow for adequate assessment to determine whether fellows are meeting goals, competencies, and milestones.

- 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);

For most programs, there will be no impact. In some, however, there may be a need to shift non-fellow oriented service work, research, and administration to other faculty members.

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

N/A

- 6) impacts residency education in other specialties.

N/A

Line Number(s): 438-449

Requirement Revision (major revisions only):

IV.B. Fellows' Scholarly Activities

IV.B.1. Each fellow should participate in scholarly activity, including at least one of the following:

IV.B.1.a) research;

IV.B.1.b) evidence-based presentations at journal club or meetings (local, regional or national); or

IV.B.1.c) preparation/submission of articles for peer-reviewed publications.

Describe, as appropriate, how the revision:

- 1) impacts the quality and safety of patient care;

The RRC believes that the increased emphasis on evidence-based medicine and participation in laboratory inspections may improve quality and patient care.

- 2) improves the quality of resident education;

The RRC believes that the emphasis on joint conferences with clinical services and the greater specificity in the didactic curriculum may improve resident education in some programs. The expectations for scholarly activity are specified now and were vague before.

- 3) affects the way the resident, the service, and the staff provide patients with continuing care;

The emphasis on interdisciplinary care may help improve patient care.

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

Some programs may need to establish additional conferences including interdisciplinary conferences to meet the requirements.

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

N/A

- 6) impacts residency education in other specialties.

The proposed changes may improve residency education in other specialties as there is emphasis on joint conferences with other departments involved in diagnosis and management of patients.

Line Number(s):515-517

V.C.3 60% of the programs' graduates from the preceding five years taking the American Board of Pathology certifying examination for neuropathology for the first time must pass.

Describe, as appropriate, how the revision:

- 1) impacts the quality and safety of patient care;

N/A

- 2) improves the quality of resident education;

The new requirement provides a benchmark for programs to use to assess the educational effectiveness of their program. The requirement also provides the program with a way to assess how the program is helping its fellows attain this goal. The Review Committee will also use this information when determining accreditation decisions.

- 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);

No impact for most programs. Programs that report a low pass rate for fellows may need to provide additional educational resources in focused areas.

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

N/A

- 6) impacts residency education in other specialties.

N/A