

**ACGME Program Requirements for Graduate Medical Education  
in Endocrinology, Diabetes and Metabolism  
Summary and Impact of Focused Requirement Revisions**

Requirement #s: IV.A.5.a).(2).(d) – (g)

Requirement Revision (significant change only):

**IV.A.5.a).(2) Fellows must be able to competently perform all medical, diagnostic, and surgical procedures considered essential for the area of practice. Fellows:**  
(Outcome)

must demonstrate competence in the performance of:

IV.A.5.a).(2).(d) thyroid ultrasound; (Outcome)

IV.A.5.a).(2).(e) skeletal dual photon absorptiometry interpretation; (Outcome)

IV.A.5.a).(2).(f) management of insulin pumps; and, (Outcome)

IV.A.5.a).(2).(g) continuous glucose monitoring. (Outcome)

1. Describe the Review Committee's rationale for this revision:

**In 2014, the American Board of Internal Medicine (ABIM) Specialty Board in Endocrinology, Diabetes, and Metabolism, in collaboration with the Association of Program Directors in Endocrinology and Metabolism (APDEM), proposed uniform standards of procedural competency for endocrine fellowship programs in four additional areas: thyroid ultrasound, management of insulin pumps, continuous glucose monitoring, and interpretation of skeletal dual photon absorptiometry. At the ABIM's January 16, 2015 meeting, it approved a resolution that these procedural competencies be adopted as requirements for initial certification in Endocrinology, Diabetes and Metabolism for fellows beginning a fellowship in or after Academic Year 2016-17 (see revised ABIM Certification Policies at: <http://www.abim.org/certification/policies/imss/endo.aspx>). The Review Committee for Internal Medicine has revised the procedural Program Requirements in order to be congruent with the new ABIM policies for board certification in Endocrinology, Diabetes, and Metabolism, effective July 1, 2016.**

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?

**The proposed requirements will enhance fellow education by including rigorous criteria for procedural competence that reflect the advances in clinical imaging and other technologies that have revolutionized the detection, differential diagnosis, and localization of endocrine disorders, and are currently the expected outcomes necessary for practicing endocrinologists in their clinical practice. Further, focusing the requirements on the expected outcomes necessary for clinical practice should promote continuity of patient-centered care.**

**Because of the growing public expectations about quality and transparency in health care delivery, the Review Committee for Internal Medicine agrees with the ABIM and APDEM that there must be a more complete and specific definition of the competencies expected for procedures currently being performed by fellows who will ultimately become practicing clinical endocrinologists. Further, these additional procedural requirements are essential to ensuring optimal patient care, meeting society's expectations of health care delivery systems and strengthening the role of the fellow who will ultimately seek procedural privileges. [*The Journal of Clinical Endocrinology & Metabolism*, May 3, 2014, "Defining, Assessing, and Certifying Procedural Competency in Endocrinology, Diabetes, & Metabolism (<http://dx.doi.org/10.1210/jc.2014-1555>)]**

3. How will the proposed requirement or revision impact continuity of patient care?

**See response to #2.**

4. Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?

**N/A**

5. How will the proposed revision impact other accredited programs?

**The proposed revision may impact other accredited programs or health care providers that have traditionally delivered some of these procedures, e.g., physicians practicing radiology and radiology-based programs. However, in anticipation of the ABIM's change in policy regarding the procedural requirements, many endocrinology, diabetes, and metabolism fellowships have adjusted their curricula to include training in these procedures. At this time, the impact on other health care providers is unknown.**