

**ACGME Program Requirements for Graduate Medical Education  
in Advanced Heart Failure and Transplant Cardiology (Internal Medicine)**

**IMPACT STATEMENT**

**Describe how the revision impacts the quality and safety of patient care.**

Patients with advanced heart failure have high mortality rates, frequent hospitalization, poor quality of life, and a complex therapeutic regimen. An increasing number of interventions have been shown to improve clinical outcomes in patients with heart failure and prolong the course of the illness. The care of these patients, especially those with advanced disease, being treated with devices, or awaiting heart transplantation, has become increasingly complex. General cardiologists and primary care physicians are experiencing an increased need to refer these patients to physicians with special expertise in the modalities of care associated with heart failure. Specialized education in the subspecialty of Advanced Heart Failure and Transplant Cardiology (AHFTC) will ensure that fellows in these programs will be equipped with the advanced clinical skills to ensure quality and increased safety in the provision of care to patients with advanced or complex heart failure.

**Describe how the revision improves the quality of resident education.**

The patient care and medical knowledge competencies in the AHFTC program requirements are sufficiently distinct from the core residency program and will not impact the quality of education for internal medicine residents.

The expertise that will be acquired in an AHFTC program builds on the foundational competencies of the existing three-year Cardiovascular Disease fellowship. The quality of education for the Cardiovascular Disease fellows will improve as the proliferation of the number of AHFTC specialists will provide increased opportunities to include these individuals as teaching faculty within Cardiovascular Disease programs. Accreditation of AHFTC programs will also provide elective opportunities for those fellows who may be considering specializing in this area.

**Describe how the revision affects the way the fellows, the service, and the staff provide patients with continuing care.**

Since the patient care competencies of AHFTC are built on the foundational competencies of the existing three-year Cardiovascular Disease fellowship, there will be no change to the delivery of continuing patient care.

**Describe how the revision requires a change in institutional resources (e.g., facilities; organization of other services; addition of faculty; financial impact).**

It is anticipated that most fellowship programs in AHFTC will be small, less than five fellows. There are a significant number of experts currently in the field who are eligible to serve as teaching faculty/preceptors. The Heart Failure Society of America reports approximately 707 physician members and the International Society for Heart and Lung Transplantation identifies over 350 members as U.S. heart transplant physicians and/or cardiologists. It is not anticipated that there will be a need for an increase in institutional resources. Currently there are approximately 45 unaccredited AHFTC programs. Most of these existing programs will probably

seek accreditation and most already have the requisite faculty resources and institutional support.

**Describe how the revision may change the volume and variety of patients required to provide proper educational resources in the institution(s).**

The variety and volume of patients required for AHFTC programs must include:

*Program Requirement: II.D.3.a): The patient population must have a variety of clinical problems and stages of diseases and must include a full range of patients with advanced or complex heart failure.*

*Program Requirement: II.D.3.c).(1): 200 hospitalized patients diagnosed with heart failure including both pre and post-transplant patients and patients with ventricular assist devices.*

Most of the programs that will seek accreditation are the existing unaccredited programs that already have these patient resources in place; therefore there should be minimal to no change to the required volume and variety of patients.

**Describe how the revision impacts residency education in other specialties.**

The presence of an accredited fellowship program in AHFTC is not likely to adversely affect the education in other specialties within the institution, since these programs are very likely to have specific heart failure services. With regard to potential impact on general cardiology programs, experience with other advanced fellowship programs suggests that the development of such programs only enhances the educational opportunities within the cardiovascular disease program.