## ACGME Program Requirements for Graduate Medical Education in Complex General Surgical Oncology
### Summary and Impact of Focused Requirement Revisions

#### Requirement #: I.B.1.a)

**Requirement Revision (significant change only):**
The complex general surgical oncology program must be sponsored by an institution that (1) also sponsors an ACGME-accredited medical oncology residency program; or (2) is an affiliated site for an ACGME-accredited medical oncology residency program, affiliated with an ACGME-accredited medical oncology program. *(Core)*

1. **Describe the Review Committee’s rationale for this revision:** *This revision is actually not a change; rather it provides for clarity that was previously given in an FAQ.*
2. **How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?** *N/A*
3. **How will the proposed requirement or revision impact continuity of patient care?** *N/A*
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?** *N/A*

#### Requirement #: II.A.2.a), b), c)

**Requirement Revision (significant change only):**
In programs with five or fewer fellows, the program director must be provided with a minimum of 10 percent protected time for the administration of the program. *(Core)*

In programs with six to 10 fellows, the program director must be provided with a minimum of 15 percent protected time for the administration of the program. *(Core)*

In programs with more than 11 fellows, the program director must be provided with a minimum of 20 percent protected time for the administration of the program. *(Core)*

1. **Describe the Review Committee’s rationale for this revision:** *In determining the minimum amount of protected time, the Review Committee attempted to ensure that program directors would have sufficient time for the administration of the program without creating a burden that would adversely affect clinical and teaching time.*
2. **How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?** *This will provide protected time for facilitating the administrative needs of the program.*
3. **How will the proposed requirement or revision impact continuity of patient care?** *N/A*
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? **This requirement may potentially necessitate additional resources, depending on the organization’s structure and available resources for program directors. This may create addition funding support needs and may require additional faculty support for the clinical environment during the time the program director needs for administrative duties.**

5. How will the proposed revision impact other accredited programs? **N/A**

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<tr>
<th>Requirement #: II.B.1.a).(2)</th>
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<tbody>
<tr>
<td>Requirement Revision (significant change only):</td>
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<td>[In addition to the program director, the faculty must include] at least one faculty member who is ABMS-certified, Society of Surgical Oncology-certified, AOA-certified, or who possesses qualifications acceptable to the Review Committee in each of the following areas: breast oncology, hepatobiliary/pancreatic, non-hepatobiliary – GI, endocrine, melanoma/soft tissue, medical oncology, interventional radiology; and radiation oncology; or possess qualifications acceptable to the Review Committee. (Core)</td>
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1. Describe the Review Committee’s rationale for this revision: **This is a clarification of the allowable qualifications for complex general surgical oncology program directors and faculty members since SSO certification has only recently transitioned to certification by the American Board of Surgery.**

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

3. How will the proposed requirement or revision impact continuity of patient care? **N/A**

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? **N/A**

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<th>Requirement #: II.B.4.c)</th>
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<td>Requirement Revision (significant change only):</td>
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<td>There must be at least one core faculty member in each of the defined areas for surgery, medical oncology, interventional radiology, and radiation oncology as outlined in II.B.1.a).(2). (Core)</td>
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1. Describe the Review Committee’s rationale for this revision: **This requirement does not specifically constitute a change from the prior requirements to identify faculty members in the areas outlined.**
2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality? **This requires that the program identify faculty members of specific specialties/subspecialties as integral members of the faculty who regularly interact with and have responsibility for teaching and supervising fellows.**

3. How will the proposed requirement or revision impact continuity of patient care? **This could potentially impact continuity of care, since fellows may spend more time with these specialists/subspecialists in all phases of patient care.**

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? **This is not a new requirement.**

5. How will the proposed revision impact other accredited programs? **N/A**

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**Requirement #: II.C.2.a)-e)**

**Requirement Revision (significant change only):**

There must be institutional support for a program coordinator as follows:

- 0.25 FTE for programs with up to five fellows; *(Core)*
- 0.5 FTE for programs with six to 10 fellows; and, *(Core)*
- 1.0 FTE for programs with 11-20 fellows. *(Core)*

Coordinators overseeing more than one program (residency or fellowship), that have 20 or more residents and/or fellows in all programs combined, must have additional administrative assistance. *(Core)*

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1. Describe the Review Committee’s rationale for this revision: **The Review Committee identified the minimum administrative/coordinator support in accordance with the revised Common Program Requirements.**

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality? **This will reduce the administrative burden on the program director.**

3. How will the proposed requirement or revision impact continuity of patient care? **N/A**

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? **This could potentially necessitate additional resources, depending on the organizational structure and resources available to the program.**
5. How will the proposed revision impact other accredited programs? **This could potentially impact other accredited programs if the organization has a shared coordinator resource.**

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<tr>
<th>Requirement #: IV.B.1.b).(2).(c)</th>
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<td>Requirement Revision (significant change only):</td>
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<td>Fellows must demonstrate competence in performing a minimum of 240 cancer-related operative procedures. (Core)</td>
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<td>1. Describe the Review Committee’s rationale for this revision: <strong>The case minimum requirements for complex general surgical oncology for fellows have been posted since 2015 and are in effect for graduates.</strong></td>
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<td>2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality? <strong>The requirement ensures that programs meet the minimum operative experience required for fellows for both program completion and certification eligibility.</strong></td>
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<td>3. How will the proposed requirement or revision impact continuity of patient care? <strong>N/A</strong></td>
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<td>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? <strong>No, this has already been in effect.</strong></td>
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<td>5. How will the proposed revision impact other accredited programs? <strong>N/A</strong></td>
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