ACGME Program Requirements for Graduate Medical Education in Urology
Summary and Impact of Focused Requirement Revisions

Requirement #: I.B.1.a)

Requirement Revision (significant change only):

I.B.1. The program, with approval of its Sponsoring Institution, must designate a primary clinical site. (Core)

I.B.1.a) To provide an adequate interdisciplinary educational experience, the primary clinical site must participate in an ACGME-accredited general surgery program through the same Sponsoring Institution as the urology program, unless an exception is granted by the Review Committee. (Core)

1. Describe the Review Committee's rationale for this revision:
   During the Uro-1 year, residents will have six to nine months of core surgical education. The Committee believes the best educational environment for these important, fundamental experiences is in an ACGME-accredited general surgery program located at the same site and sponsored by the same institution. This requirement ensures there is a structure in place to support a quality educational experience.

   The Committee recognizes there may be a rare situation in which an institution has or wants to establish a urology program but does not have a general surgery program at the primary clinical site. In this case, the Committee will consider an exception. The program will need to demonstrate a strong core surgical experience during the Uro-1 year.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   The requirement will help ensure residents’ core surgical education takes place in a clinical environment with experienced faculty educators, peer residents, and an organizational structure that supports resident learning.

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 will not necessitate additional resources for most, if not all, institutions currently sponsoring a urology program. Urology programs have traditionally been sponsored by institutions with a general surgery program. However, should the situation arise where this is not the case, the institution would need to establish a general surgery program or request an exception from the Committee.

5. How will the proposed revision impact other accredited programs?
This requirement is unlikely to impact other accredited programs. As noted above, urology programs have traditionally been sponsored by institutions with a general surgery program.

Requirement #: IV.C.1.a)

Requirement Revision (significant change only):

IV.C.1. The curriculum must be structured to optimize resident educational experiences, the length of these experiences, and supervisory continuity. (Core)

VI.C.1.a) Chief resident rotations must be at least two months in length. (Core)

1. Describe the Review Committee’s rationale for this revision:
The Committee believes the intent of this requirement is best achieved in urology by ensuring that supervising faculty members have sufficient time with chief residents. A two-month period will allow faculty members to adequately assess chief residents’ knowledge and skills, and foster continued development as residents near the completion of the program.

The requirement does not preclude rotations of less than two months during the Uro-4 and -5 years as long as the resident is not the chief.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
The requirement gives supervising faculty members sufficient time with chief residents to observe, teach, give feedback, and support improvement.

3. How will the proposed requirement or revision impact continuity of patient care?
Continuity of care may increase in programs that currently have chief resident rotations that are less than two months in length.

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 #: IV.C.3.

Requirement Revision (significant change only):

IV.C.3. The Uro-1 through Uro-5 years must include 48 months of education dedicated to didactic, clinical, and surgical urology. (Core)

IV.C.3.a) At least three and not more than six months of this urology education must occur in the Uro-1 year. (Core)

1. Describe the Review Committee’s rationale for this revision:
The Committee clarified that urology rotations that take place during the Uro-1 year are included in the total of 48 months of required urology education. The revision ensures consistency with the ABU certification requirements.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   The revision helps ensure residents meet ABU certification requirements upon completion 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?
   N/A

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

Requirement #: IV.C.4.a).(2)

Requirement Revision (significant change only):

IV.C.4.a).(2) IV.C.3, at least three months of additional non-urological surgical training surgery which must be selected from the following: colon and rectal surgery, reconstructive plastic surgery, surgical critical care, transplantation, and trauma.

1. Describe the Review Committee’s rationale for this revision:
   The Committee clarified the surgical rotations that are acceptable for the three months of core surgical education not devoted to general surgery during the Uro-1 year. The revision ensures consistency with the ABU certification requirements.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   The revision helps ensure residents' core surgical education is focused on areas that enhance urological training and makes certain residents meet ABU certification requirements upon completion 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?
   N/A

5. How will the proposed revision impact other accredited programs?
It is expected this revision will have little impact on surgery programs as these are long-standing rotations for urology residents during the PGY-1.

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<tr>
<th>Requirement #: IV.C.5-IV.C.5.b)</th>
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<tr>
<td>Requirement Revision (significant change only):</td>
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<td>V.C.5.b) Residents must have 45 months of urology rotations in the Uro-2 through -5 years, except that up to three months of urology rotations in the Uro-1 year, in excess of the required minimum of three months, may be counted. (Core)</td>
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<td>IV.C.5.b) The remaining months must be devoted to clinical education and/or research consistent with the program aims, and at the discretion of the program director. (Core)</td>
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1. Describe the Review Committee’s rationale for this revision:

The Committee clarified that the required number of months of clinical urology during the Uro-2 through -5 years is 45. Importantly, the revision makes clear that up to three months of urology during Uro-1 (beyond the required three months) can count toward the 45.

The Committee also clarified that there are between three and six months of “flexible” education during Uro-2 through -5 years, depending on the time spent in urology during the Uro-1 year. These months may be devoted to clinical education or research, at the discretion of the program director.

The revision ensures consistency with the ABU certification requirements.

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

The revision helps ensure residents meet ABU certification requirements upon completion of the program. Clarifying the flexibility of the non-urology months may result in some residents having new educational opportunities.

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?

There may be some institutions where urology residents start to rotate on other services (e.g., nephrology, transplant surgery) during the flexible months. This may impact learners in the other accredited programs. However, it is expected that rotations would only be established by other programs if there is a net positive effect for their learners (e.g., interdisciplinary learning).