# ACGME Program Requirements for Graduate Medical Education in Vascular Surgery (Independent)  
## Summary and Impact of Focused Requirement Revisions

### Requirement #: I.D.1.a).(1)-(3)

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

I.D.1.a) These resources must include:

- I.D.1.a).(1) a common office space for fellows that includes a sufficient number of computers and adequate workspace at the primary clinical site; *(Core)*
- I.D.1.a).(2) software resources for production of presentations, manuscripts, and portfolios; and, *(Core)*
- I.D.1.a).(3) online radiographic and laboratory reporting systems at the primary clinical site and all participating sites. *(Core)*

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1. **Describe the Review Committee’s rationale for this revision:**  
The Committee believes that fellows should have adequate access to the educational resources for the discipline of vascular surgery, which must include but not be limited to those stated in the requirement. These represent minimally necessary resources to support clinical activities, didactics, and scholarly activities.

2. **How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?**  
The requirement will support fellow education outside the clinical setting, providing fellows with dedicated resources to conduct academic work, support evidence-based medicine, and facilitate patient care.

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?**  
Additional financing and/or space may be necessary to meet the full scope of the requirement.

5. **How will the proposed revision impact other accredited programs?**  
This will not affect other accredited programs.

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### Requirement #: I.D.4.a)-c)

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

I.D.4.a) The program must be conducted in an institution(s) that can document a sufficient breadth of patient care that routinely cares for patients with a broad spectrum of vascular diseases and conditions. *(Core)*
I.D.4.b) In addition, these institutions must include facilities and staff members for a variety of other services that provide a critical role in the care of patients with vascular conditions, including cardiovascular services, critical care services, general surgery services, nephrology services, neurology services, and radiology services. There must be the capability to perform both open and endovascular procedures of sufficient breadth and volume to support the program. (Core)

I.D.4.c) The institutional volume and variety of open and endovascular operative experience must be adequate to ensure a sufficient number and distribution of complex cases (as determined by the Review Committee) for each fellow in the program. (Core)

1. Describe the Review Committee’s rationale for this revision:
   The Review Committee wants to clarify that an institution that sponsors an independent vascular surgery program must be one that routinely cares for patients with a broad spectrum of vascular diseases. The Committee believes that facilities and staff for other services that provide critical roles in the care of patients with vascular conditions should be available and accessible for the vascular surgery fellowship program.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   Ensuring that the Sponsoring Institution has an adequate patient volume (with a broad spectrum of vascular diseases and access to complementary specialty services) is essential for fellows to have a robust environment to in which to learn and train as competent vascular surgeons.

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?
   The requirement may necessitate additional services; additional sites may be needed if the primary clinical site does not provide sufficient case resources for fellow education.

5. How will the proposed revision impact other accredited programs?
   This will not affect other accredited programs.

Requirement #: II.A.2.a)-c)

Requirement Revision (significant change only):

II.A.2.a) The program director must be provided a minimum of 20 percent protected time for program administration. Program directors must devote at least 50 percent of his or her time to program management and administration. (Core)
II.A.2.b) Program directors who oversee both an independent and an integrated vascular surgery program must be provided a minimum of 10 percent additional protected time for administration of the independent program. (Core)

II.A.2.c) Program directors who oversee both an independent and an integrated vascular surgery program which, combined, have 10 or more residents/fellows must appoint an associate program director. (Core)

1. Describe the Review Committee’s rationale for this revision:
   The Committee is aware that many program directors are responsible for both independent and integrated vascular surgery programs. In recognition of that, the Committee revised the requirement because to ensure program directors have sufficient support to manage the total number of learners under their authority.

   Directing vascular surgery programs is a complex undertaking that requires oversight of the clinical, educational, and administrative program components. For program directors who are responsible for 10 or more residents/fellows, the Committee feels that additional program leadership is necessary.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   The Committee feels that greater support is necessary for those individuals who direct vascular surgery programs in two different formats and/or have ultimate responsibility for the education of 10 or more residents/fellows.

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?
   Appropriate support of an individual who directs vascular surgery programs in two formats and/or directs the education of 10 or more residents/fellows may add incremental expenses for some institutions.

5. How will the proposed revision impact other accredited programs?
   This will not affect other accredited programs.

Requirement #: II.A.3.c)-d)

Requirement Revision (significant change only): [Qualifications of the program director:]

II.A.3.c) must include current medical licensure and appropriate medical staff appointment; and, (Core)

II.A.3.d) must include ongoing clinical activity. (Core)

1. Describe the Review Committee’s rationale for this revision:
   The program director is a role model for faculty members and residents/fellows. As such, the program director must participate in clinical activity consistent with the
specialty. Current licensure and appropriate medical staff appointment are essential for such clinical activity.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
The Committee believes that a program director must be clinically active in order to serve as a role model and an appropriate mentor for residents/fellows.

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?
The requirement will not necessitate additional institutional resources.

5. How will the proposed revision impact other accredited programs?
The requirement will not impact other accredited programs.

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<th>Requirement #: II.B.3.b).(2)</th>
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<td>Requirement Revision (significant change only)</td>
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<td><strong>[Subspecialty physician faculty members must:]</strong></td>
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<td>II.B.3.b).(2) have current certification in their specialty (if other than vascular surgery) by the appropriate American Board of Medical Specialties (ABMS) member board or American Osteopathic Association (AOA) certifying board, or possess qualifications judged acceptable to the Review Committee. (Core)</td>
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1. Describe the Review Committee’s rationale for this revision:
   This requirement will ensure that faculty members who are supervising vascular surgery fellows but are not certified in vascular surgery are appropriately trained and certified in their specialty.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
The requirement ensures that all supervising faculty members are appropriately trained in their specialty, even if other than vascular surgery.

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?
   No additional institutional resources are expected.

5. How will the proposed revision impact other accredited programs?
   This will not affect other accredited programs.
Requirement #: II.B.4.c)

Requirement Revision (significant change only):

II.B.4.c) In addition to the program director, there must be, for each approved fellowship position, at least one board-certified vascular surgery core faculty member. (Core)

1. Describe the Review Committee’s rationale for this revision:
   The requirement specifies the minimum number of qualified core faculty members necessary to supervise, educate, and evaluate vascular surgery fellows.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   This will ensure that appropriately-qualified faculty members will be available to supervise, educate and evaluate fellows.

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?
   No additional institutional resources are expected.

5. How will the proposed revision impact other accredited programs?
   This will not affect other accredited programs.

Requirement #: II.C.2.a)-c)

Requirement Revision (significant change only):

II.C.2.a) At a minimum, the program coordinator must be supported at 50 percent FTE (at least 20 hours per week) for administrative time. (Core)

II.C.2.b) The program coordinator must be supported at 1.0 FTE (at least 40 hours per week) for a program with 10 or more fellows. (Core)

II.C.2.c) A program with 20 or more fellows must provide the program coordinator with additional administrative support. (Core)

1. Describe the Review Committee’s rationale for this revision:
   Coordinators fill an essential role in the function and operation of a program. They must be provided with sufficient resources to support program operations, the program director, resident/fellows, and faculty members. The Committee recognizes that some coordinators support large programs and/or multiple programs, including in other specialties. Support of large and/or multiple programs requires a facile working knowledge of each specialty’s requirements, as well as the ability to manage the day-to-day requirements of large/multiple programs and their required data. To ensure that program coordinators have sufficient support in performing those functions, the Committee limited the number of residents/fellows that a single coordinator should manage to 19 (in all programs, combined). The Committee
believes that coordinators that support 20 or more residents/fellow must have additional administrative support.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   Provision of additional administrative assistance where appropriate should increase the effectiveness of a coordinator’s work within the program. The allocation of percentage of full-time equivalent (FTE) support for the additional administrative support is not specified by the Committee, but should be based on the responsibilities of the program coordinator.

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?
   The addition of administrative personnel may impact the required financial and personnel resources of a program, multiple programs, and/or institution.

5. How will the proposed revision impact other accredited programs?
   This will not affect other accredited programs.

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<td>Requirement Revision (significant change only):</td>
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<td>III.C.1. Any fellow transfer must be approved in advance by the Review Committee. (Core)</td>
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<td>1. Describe the Review Committee’s rationale for this revision: The requirement will allow the Committee to ensure that transferring fellows have received appropriate education and training in their previous program.</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? N/A</td>
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<td>3. How will the proposed requirement or revision impact continuity of patient care? N/A</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? No additional institutional resources are expected.</td>
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<td>5. How will the proposed revision impact other accredited programs? This will not affect other accredited programs.</td>
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<th>Requirement #: IV.C.1.a)</th>
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<td>Requirement Revision (significant change only):</td>
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## IV.C.1.a) Fellows’ clinical rotations must be a minimum of four weeks in duration. (Core)

1. **Describe the Review Committee’s rationale for this revision:**
   The requirement reflects the need for programs to consider the impact of frequent rotational transitions, such as occur when fellows are scheduled for a series of short rotations, and the resulting disruption in supervisory continuity, on patient care, and on education. The requirement is also intended to address the negative impact of assigning supervising faculty members for very brief assignments.

2. **How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?**
   The requirement will address the lack of supervisory continuity on patient care and fellow education that results with frequent rotations transitions.

3. **How will the proposed requirement or revision impact continuity of patient care?**
   With the emphasis on supervisory continuity, it is expected that this requirement will have a positive impact on continuity, quality, and safety 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?**
   No additional institutional resources are expected.

5. **How will the proposed revision impact other accredited programs?**
   This will not affect other accredited programs.