Specialty-Specific Program Requirements: Program Director Qualifications

Effective as of July 1, 2025

Common Program Requirements are in bold

COMMON PROGRAM REQUIREMENTS LANGUAGE

Residency:

2.5. Qualifications of the program director:

The program director must possess specialty expertise and at least three years of documented educational and/or administrative experience, or qualifications acceptable to the Review Committee. ^(Core)

Background and Intent: Leading a program requires knowledge and skills that are established during residency and subsequently further developed. The time period from completion of residency until assuming the role of program director allows the individual to cultivate leadership abilities while becoming professionally established. The three-year period is intended for the individual's professional maturation.

The broad allowance for educational and/or administrative experience recognizes that strong leaders arise through diverse pathways. These areas of expertise are important when identifying and appointing a program director. The choice of a program director should be informed by the mission of the program and the needs of the community.

In certain circumstances, the program and Sponsoring Institution may propose and the Review Committee may accept a candidate for program director who fulfills these goals but does not meet the three-year minimum.

2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of ______, or specialty qualifications that are acceptable to the Review Committee. ^(Core)

2.5.b. The program director must demonstrate ongoing clinical activity. (Core)

Background and Intent: A program director is a role model for faculty members and residents. The program director must participate in clinical activity consistent with the specialty. This activity will allow the program director to role model the Core Competencies for the faculty members and residents.

Fellowship/One-Year Fellowship:

2.4. Qualifications of the program director:

The program director must possess subspecialty expertise and qualifications acceptable to the Review Committee; and, (Core)

2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of ______ or by the American Osteopathic Board of ______, or specialty qualifications that are acceptable to the Review Committee. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
Allergy and Immunology	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Allergy and Immunology or by the American Osteopathic Board of Internal Medicine or the American Osteopathic Board of Pediatrics, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.c. The program director must have leadership qualities and sufficient time and effort devoted to the program to provide day-to-day continuity of leadership and to fulfill the responsibilities of meeting the educational goals of the program. ^(Detail)
Anesthesiology	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Anesthesiology or by the American Osteopathic Board of Anesthesiology, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.c. The program director must demonstrate ongoing academic achievements in anesthesiology, including publications, the development of educational programs, or the conduct of research. (Core)
Adult Cardiothoracic Anesthesiology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Anesthesiology or by the American Osteopathic Board of Anesthesiology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the American Osteopathic Association (AOA) acceptable, there is no ABMS or AOA board that offers certification in this subspecialty]
	2.4.b. The program director must have a current appointment as a member of the anesthesiology faculty at the primary clinical site; ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.c. The program director must demonstrate completion of an adult cardiothoracic anesthesiology fellowship, or at least three years of participation in a clinical adult cardiothoracic anesthesiology fellowship as a faculty member.
	2.4.d. The program director must have current certification in advanced peri-operative transesophageal echocardiography (TEE) by the National Board of Echocardiography (NBE). ^(Core)
	2.4.d.1. The program director must demonstrate participation in the NBE's Maintenance of Certification in Echocardiography (MOCE) process. ^(Core)
	2.4.e. The program director must demonstrate ongoing academic achievements appropriate to the subspecialty, including publications, the development of educational programs, or the conduct of research. ^(Core)
	2.4.f. The program director must devote at least 50 percent of the program director's clinical, educational, administrative, and academic time to adult cardiothoracic anesthesiology. ^(Core)
	2.4.g. The program director must have privileges to perform peri-operative TEE. (Core)
Anesthesiology Critical Care Medicine	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Anesthesiology or by the American Osteopathic Board of Anesthesiology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. The program director must have privileges to practice critical care medicine and procedures relevant to the practice of critical care medicine. ^(Core)
	2.4.c. The program director must have a current appointment as a member of the anesthesiology faculty at the primary clinical site. ^(Core)
	2.4.d. The program director must demonstrate ongoing academic achievements with appropriate dissemination, including publications, the development of educational programs, or the conduct of research. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.e. The program director must have at least three years of post-fellowship experience in the care of critically ill patients. ^(Core)
	2.4.f. The program director must devote at least 50 percent of the program director's clinical, educational, administrative, and academic time to critical care medicine. (Core)
Obstetric Anesthesiology	2.4.a. The program director must possess current certification in the specialty by the American Board of Anesthesiology or the American Osteopathic Board of Anesthesiology, or subspecialty qualifications that are acceptable to the Review Committee; ^(Core)
	[Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the American Osteopathic Association (AOA) acceptable, there is no ABMS or AOA board that offers certification in this subspecialty]
	2.4.b. The program director must demonstrate completion of an ACGME-accredited obstetric anesthesiology fellowship, or at least three years' participation in a clinical obstetric anesthesiology fellowship as a faculty member. ^(Core)
	2.4.c. The program director must have at least three years of post-fellowship experience in clinical obstetric anesthesiology. ^(Detail)
	2.4.d. The program director must have current appointment as a member of the anesthesiology faculty at the primary clinical site. ^(Core)
	2.4.e. The program director must devote at least 50 percent of the program director's clinical, educational, and academic time to the anesthetic care of pregnant patients. ^(Core)
	2.4.f. The program director must demonstrate ongoing academic achievements appropriate to the subspecialty, including publications, the development of educational programs, or the conduct of research. (Core)
Pediatric Anesthesiology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Anesthesiology or by the American

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Osteopathic Board of Anesthesiology, or subspecialty qualifications that are acceptable to the Review Committee; (Core)
	2.4.b. The program director must demonstrate at least three years of post-fellowship experience in pediatric anesthesiology. ^(Detail)
	2.4.c. The program director must have current appointment as a member of the anesthesiology faculty at the primary clinical site. ^(Core)
	2.4.d. The program director must demonstration of ongoing academic achievements appropriate to the subspecialty, including publications, development of educational programs, or conduct of research. ^(Core)
	2.4.e. The program director must devote at least 50 percent of the program director's clinical, educational, administrative, and academic time to pediatric anesthesiology. ^(Core)
	Frequently Asked Questions If the program director is not board-certified in the subspecialty, what specialty qualifications are acceptable to the Review Committee? [Program Requirement: 2.4.a.]
	The Committee expects that all program directors eligible for board certification in pediatric anesthesiology are actively pursuing certification, even if the process is not complete. For program directors who are not eligible for subspecialty certification, the Review Committee will evaluate qualifications on a case-by-case basis, including consideration of each of the remaining qualifications as outlined in Program Requirements 2.4. and 2.4.bd.
Pediatric Cardiac Anesthesiology	2.4.a. The program director must include current certification in the subspecialty of pediatric anesthesiology or adult cardiothoracic anesthesiology by the American Board of Anesthesiology or by the American Osteopathic Board of Anesthesiology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the American Osteopathic Association (AOA) acceptable, there is no ABMS or AOA board that offers certification in this subspecialty.]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.a.1. If certified in adult cardiothoracic anesthesiology, the program director must demonstrate experience, expertise, and scholarship in pediatric cardiac anesthesiology. ^(Core)
	2.4.b. The program director must include current appointment as a member of the pediatric anesthesiology faculty at the primary clinical site; ^(Core)
	2.4.c. The program director must include demonstration of completion of a pediatric cardiac anesthesiology fellowship, and/or at least three years of participation in a clinical pediatric cardiac anesthesiology fellowship as a faculty member; ^(Core)
	2.4.d. The program director must include at least three years of post-fellowship experience in clinical pediatric cardiac anesthesiology; ^(Core)
	2.4.e. The program director must include demonstration of ongoing academic achievements appropriate to the subspecialty, including publications, the development of educational programs, or the conduct of research. ^(Core)
	2.4.f. The program director must include devotion of at least 50 percent of the program director's clinical, educational, administrative, and academic time to pediatric cardiac anesthesiology. ^(Core)
Anesthesiology and	2.4.a. The program director must include current certification in the specialty by the American Board of Anesthesiology or the American Osteopathic Board of Anesthesiology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the American Osteopathic Association (AOA) acceptable, there is no ABMS or AOA board that offers certification in this subspecialty]
	2.4.b. The program director must include current appointment as a member of the anesthesiology faculty at the primary clinical site; ^(Core)

Specialty-Specific Requirements Referencing "Program Director Qualifications"
2.4.c. The program director must include completion of a regional anesthesiology and acute pain medicine fellowship, or at least three years' participation in a regional anesthesiology and acute pain medicine fellowship as a faculty member; ^(Core)
2.4.d. The program director must include at least three years of post-fellowship experience in regional anesthesiology and/or acute pain medicine; ^(Core)
2.4.e. The program director must include devotion of at least 50 percent of the program director's clinical, educational, administrative, and academic time to regional anesthesiology and acute pain medicine. ^(Core)
2.4.f. The program director must include demonstration of ongoing academic achievements appropriate to the subspecialty, including publications, the development of educational programs, or the conduct of research. ^(Core)
2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Colon and Rectal Surgery (ABCRS) or specialty qualifications that are acceptable to the Review Committee. ^(Core)
[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this specialty]
2.5.a.1. The Review Committee only accepts ABCRS colon and rectal surgery certification. (Core)
2.5.c. The program director must include membership on the medical staff of either the sponsoring institution or a participating site. ^(Core)
2.5. The program director must possess current certification in the specialty for which they are the program director by the American Board of Dermatology or by the American Osteopathic Board of Dermatology, or specialty qualifications that are acceptable to the Review Committee.

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.5.c. The program director must demonstrate a minimum of one year of documented experience serving as a core faculty member for an ACGME-accredited dermatology program, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Dermatology or by the American Osteopathic Board of Dermatology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. The program director must possess at least three years of patient care experience as a pediatric dermatologist after fellowship. ^(Core)
	2.4.c. The program director must possess at least one year of post-fellowship experience as a faculty member in graduate medical education in dermatology or pediatric dermatology; or qualifications acceptable to the Review Committee. ^(Core)
	Frequently Asked Questions What are some examples of alternative qualifications for the program director that would be acceptable to the Review Committee? [Program Requirements: 2.4.a2.4.c.]
	The committee will review and determine if other qualifications are acceptable on a case-by-case basis. Examples that may be approved could include for an individual who did not complete a pediatric dermatology fellowship but achieved pediatric dermatology certification by the American Academy of Dermatology and then was 'grandfathered in' by the American Board of Dermatology for subspecialty certification eligibility, or for individuals with pediatric dermatology expertise who served at least one year as an associate program director, Clinical Competency Committee faculty member, or Program Evaluation Committee faculty member in a dermatology residency program.
Micrographic Surgery and Dermatologic Oncology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Dermatology or by the American Osteopathic Board of Dermatology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. This must include completion of an ACGME- or AOA-accredited procedural dermatology or micrographic surgery and dermatologic oncology fellowship, an American College of Mohs Surgery-

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	approved fellowship, or experience as a program director of a dermatologic surgery fellowship program for at least 10 years; ^(Core)
	2.4.c. This must include at least six years of patient care experience as a dermatologist and dermatologic surgeon; ^(Core)
	2.4.d. This must include at least three years of experience as a teacher in graduate medical education in dermatology and dermatologic surgery. ^(Core)
	2.4.e. This must include an ongoing clinical practice in micrographic surgery and dermatologic oncology that includes personal performance of key aspects of micrographic surgery and dermatologic oncology as the fellow observes. ^(Core)
	Frequently Asked Questions What does ongoing clinical practice in micrographic surgery and dermatologic oncology entail? [Program Requirement: 2.4.e.]
	The expectation is that the program directors continue to be the primary surgeon in at least some dermatologic surgical and Mohs cases while overseeing a micrographic surgery and dermatologic oncology program.
Diagnostic Radiology	Specialty-Specific Background and Intent: The Review Committee considers three years of educational and/or administrative experience an important quality for new program director candidates. Examples of educational and/or administrative experiences may include previous participation as an active faculty member in an ACGME-accredited or AOA-approved diagnostic radiology residency, interventional radiology residency, or vascular and interventional radiology fellowship program. In submitting a new program director request in ADS, the Review Committee will additionally request a letter of support from the DIO and a copy of the candidate's full CV for review.
	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Radiology or by the American Osteopathic Board of Radiology, or specialty qualifications that are acceptable to the Review Committee. (Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.5.a.1. The Review Committee accepts only ABMS and AOA certification as acceptable qualifications for program director certification. ^(Core)
	2.5.c. The program director should demonstrate an active practice in radiology. (Core)
	Frequently Asked Questions Are there any considerations for the program director qualifications requirement of at least three years' experience as a faculty member? [Program Requirement: 2.5.]
	The Review Committee will accept three years of faculty experience in either an ACGME-accredited or AOA-approved program.
Interventional Radiology	Specialty-Specific Background and Intent: The Review Committee considers three years of educational and/or administrative experience an important quality for new program director candidates. Examples of educational and/or administrative experiences may include previous participation as an active faculty member in an ACGME-accredited or AOA-approved diagnostic radiology residency, interventional radiology residency, or vascular and interventional radiology fellowship program. In submitting a new program director request in ADS, the Review Committee will additionally request a letter of support from the DIO and a copy of the candidate's full CV for review.
	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Radiology (ABR) or by the American Osteopathic Board of Radiology, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.a.1. The program director must have certification by either the ABR or the American Osteopathic Board of Radiology (AOBR) in interventional radiology/diagnostic radiology, or in diagnostic radiology with subspecialty certification in vascular and interventional radiology. ^(Core)
	2.5.a.2. The Review Committee accepts only ABMS and AOA certification as acceptable qualifications for program director certification. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.5.c. The program director must demonstrate commitment of at least 80 percent of the program director's clinical time in the specialty and to the administrative and educational activities of the interventional radiology program; ^(Core)
Abdominal Radiology	2.4.a. The program director must possess current certification in the specialty by the American Board of Radiology or by the American Osteopathic Board of Radiology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Board of Medical Specialties (ABMS) or the American Osteopathic Association (AOA) acceptable, there is no ABMS or AOA board that offers certification in this subspecialty]
	2.4.b. The program director must possess post-residency experience in abdominal radiology, including fellowship education and training, or five years of practice in the subspecialty. (Core) ^(Core)
	2.4.c. The program director must possess experience as an educator and supervisor of fellows in abdominal radiology ^(Core)
	2.4.d. The program director must possess at least three years' experience as a faculty member in an ACGME-accredited or AOA-approved diagnostic radiology or interventional radiology residency, or abdominal radiology fellowship program. ^(Core)
	2.4.e. The program director must devote sufficient time to fulfill all responsibilities inherent to meeting the educational goals of the program. (Core). ^(Core)
	2.4.f. The program director must devote sufficient time to fulfill all responsibilities inherent to meeting the educational goals of the program. ^(Core)
Musculoskeletal Radiology	2.4.a. The program director must possess current certification in the specialty by the American Board of Radiology or by the American Osteopathic Board of Radiology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of ABMS or the AOA acceptable, there is no ABMS or AOA board that offers certification in this subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.b. The program director must possess post-residency experience in musculoskeletal radiology, including fellowship education or five years of practice focused in musculoskeletal radiology. ^(Core)
	2.4.c. The program director must possess experience as an educator and supervisor of fellows in musculoskeletal radiology. ^(Core)
	2.4.d. The program director must possess at least three years' experience as a faculty member in an ACGME-accredited or American Osteopathic Association (AOA)-approved residency or fellowship program. ^(Core)
	2.4.e. The program director must devote at least 80 percent of professional clinical contributions in musculoskeletal radiology ^(Core)
	2.4.f. The program director must devote sufficient time to fulfill all responsibilities inherent to meeting the educational goals of the program. ^(Core)
Neuroradiology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Radiology or by the American Osteopathic Board of Radiology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. The program director must possess at least three years' experience as a faculty member in an ACGME-accredited diagnostic radiology residency or neuroradiology fellowship program. ^(Core)
	2.4.c. The program director should demonstrate that at least 80 percent of their time is spent in the practice of neuroradiology. (Core) ^(Core)
Nuclear Radiology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Radiology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.b. The program director must possess post-residency experience in nuclear radiology, including fellowship education. ^(Core)
	2.4.c. The program director must possess at least three years' experience as a faculty member in an ACGME-accredited diagnostic radiology, interventional radiology, or nuclear medicine residency or nuclear radiology fellowship program. ^(Core)
	2.4.a.1. In lieu of subspecialty certification by the American Board of Radiology, the Review Committee only accepts current certification by the American Board of Nuclear Medicine or the American Osteopathic Board of Nuclear Medicine. ^(Core)
	2.4.d. The program director must include devotion of at least 80 percent of professional clinical contributions in nuclear radiology. ^(Core)
	2.4.e. The program director must devote sufficient time to fulfill all responsibilities inherent to meeting the educational goals of the program. ^(Core)
Pediatric Radiology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Radiology or by the American Osteopathic Board of Radiology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. Other acceptable qualifications include possession of the American Board of Radiology Certificate of Added Qualifications. ^(Core)
	2.4.b. The program director must possess post-residency experience in pediatric radiology, including an ACGME-accredited fellowship program. ^(Core)
	2.4.c. The program director must possess at least three years' experience as a faculty member in an ACGME-accredited or AOA-approved residency or fellowship program. ^(Core)
	2.4.d. The program director must devote at least 80 percent of professional clinical contributions in pediatric radiology ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.e. The program director must devote sufficient time to fulfill all responsibilities inherent to meeting the educational goals of the program. ^(Core)
Emergency Medicine	Specialty-Specific Background and Intent: To ensure programs can maintain compliance with ACGME requirements, provide a stable learning environment, and provide residents with an optimal learning experience, it is essential that program director candidates have previous experience as a core faculty member in an ACGME-accredited or AOA-approved emergency medicine program. It is desirable that the core faculty experience occurred in the program the program director will lead.
	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Emergency Medicine (ABEM) or by the American Osteopathic Board of Emergency Medicine (AOBEM), or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.a.1. The Review Committee for Emergency Medicine will only consider ABMS and AOA board certification as acceptable program director certification qualifications. ^(Core)
	2.5.c. The program director must be a core physician faculty member; (Core)
	2.5.d. The program director must have demonstrated experience in a leadership role (Core)
	 Specialty-Specific Background and Intent: Leadership experiences acceptable to the Review Committee when considering a new program director candidate include: experience as an assistant/associate program director or site director administrative program experience, such as serving on the program's Clinical Competency Committee (CCC), Program Evaluation Committee, or GMEC, or serving as a fellowship program director leadership role in the program, such as chair of the department, chair of the CCC, research director, etc.
	2.5.e. The program director must include evidence of ongoing involvement in scholarly activity, including peer-reviewed publications. ^(Core)
	Frequently Asked Questions

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	What educational and administrative experience is acceptable for a new program director? [Program Requirements: 2.5. and 2.5.b.]
	Educational and administrative experience(s) acceptable to the Review Committee when considering a new program director include:
	 Experience as an assistant/associate program director or site director Administrative program experience, such as serving on the program's Clinical Competency Committee (CCC), Program Evaluation Committee, or Graduate Medical Education Committee, or serving as a fellowship program director Leadership role in the program, such as Chair of the department, Chair of the CCC, Research Director, etc.
	An individual's administrative and educational experiences should be from the most recent three-year period.
	Why must a program director have at least three years' experience as a core faculty member in an ACGME-accredited emergency medicine program? [Program Requirement: 2.5.b.]
	The administration of a program is so complex that experience with and understanding of program operations are necessary for program director candidates. This is why the Review Committee believes that to ensure that programs can maintain compliance with ACGME requirements, provide a stable learning environment, and provide residents an optimal learning experience, the program director should have a minimum of three years' experience as a core faculty member in an accredited emergency medicine program. The Committee will also accept core faculty experience in an American Osteopathic Association (AOA)-approved program. It is desirable that the core faculty experience occurred in the program the program director will lead, and should have occurred within the most recent three-year period.
Emergency Medica	2.4. Qualifications of the program director:
Services	2.4. The program director must include subspecialty expertise and qualifications acceptable to the Review Committee. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Emergency Medicine or by the American Osteopathic Board of Emergency Medicine, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. This must include at least three years' experience as a core physician faculty member in an ACGME-accredited emergency medicine program or emergency medical services program; ^(Core)
	2.4.c. This must include continuation in his or her position for a length of time adequate to maintain continuity of leadership and program stability. ^(Detail)
	2.4.d. This must include current clinical activity in the practice of emergency medical services (Core)
	2.4.e. This should include demonstrated participation in academic societies and educational programs designed to enhance his or her educational and administrative skills. ^(Core)
	Frequently Asked Questions Does the Review Committee accept any qualifications other than board certification in EMS for the program director? [Program Requirements: 2.4.b. and 2.4.a.]
	No; the Review Committee expects American Board of Emergency Medicine (ABEM) or American Osteopathic Board of Emergency Medicine (AOBEM) EMS certification for all EMS fellowship program directors. The Review Committee currently does not accept any other subspecialty qualifications in lieu of board certification for program directors.
Family Medicine	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Family Medicine or by the American Osteopathic Board of Family Physicians, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.a.1. The Review Committee for Family Medicine only accepts ABMS and AOA certification for the program director. ^(Core) 2.5.c. The program director must have previous leadership experience. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Specialty-Specific Background and Intent: Roles on the Clinical Competency Committee (CCC) or Program Evaluation Committee (PEC) and/or significant leadership in the clinical setting, such as serving as a residency site medical director, are examples of experience that would demonstrate to the Review Committee that a program director has had significant prior leadership experience to serve in the role.
Internal Medicine	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.a.1. The Review Committee only accepts current certification in internal medicine from the ABIM or AOBIM. ^(Core)
	2.5.c. The program director must have experience working as part of an interdisciplinary, inter- professional team to create an educational environment that promotes high-quality care, patient safety, and resident well-being. ^(Core)
Adult Congenital Heart Disease	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty.]
	2.4.a.1. The Review Committee only accepts current ABIM certification in ACHD. (Core)
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited fellowship in internal medicine cardiovascular disease, pediatric cardiology, or ACHD. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as program director, associate program director, core faculty member, or faculty member for an ACGME accredited cardiovascular disease, pediatric cardiology, or ACHD. The experience does not include time spent as a fellow. Teaching/administrative experience is cumulative across multiple programs.
Advanced Heart Failure/Transplant Cardiology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or the America Board of Osteopathic Internal Medicine (AOBIM) or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine cardiovascular disease fellowship or advanced heart failure and transplant cardiology. ^(Core)
	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.
	2.4.b. The Review Committee only accepts current ABIM or AOBIM certification in advanced heart failure and transplant cardiology. ^(Core)
Cardiovascular Disease	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that ar acceptable to the Review Committee. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.a.1. The Review Committee only accepts current ABIM or AOBIM certification in cardiovascular disease. (Core)
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine residency or cardiovascular disease fellowship. ^(Core)
	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.
Clinical Cardiac	
Electrophysiology	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.
	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that ar acceptable to the Review Committee. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.a.1. The Review Committee only accepts current ABIM or AOBIM certification in clinical cardiac electrophysiology. ^(Core)
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine cardiovascular disease fellowship or clinical cardiac electrophysiology fellowship. ^(Core)
Critical Care Medicine	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. The Review Committee only accepts current ABIM or AOBIM certification in critical care medicine. ^(Core)
	Subspecialty-Specific Background and Intent: Critical care medicine physicians with certification from the American Board of Emergency Medicine can also be identified as program directors if they have completed a 24-month critical care medicine fellowship in an ACGME-accredited internal medicine critical care medicine program.
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine residency or critical care medicine fellowship. ^(Core)
	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
Endocrinology, Diabetes and Metabolism	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. The Review Committee only accepts current ABIM or AOBIM certification in endocrinology, diabetes and metabolism. ^(Core)
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine residency or endocrinology, diabetes, and metabolism fellowship. ^(Core)
	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.
Gastroenterology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. The Review Committee only accepts current ABIM or AOBIM certification in gastroenterology. (Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine residency or gastroenterology fellowship. ^(Core)
	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.
Hematology	 2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that ar acceptable to the Review Committee. (Core) 2.4.a.1. The Review Committee only accepts current ABIM or AOBIM certification in hematology. (Core)
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine residency or hematology fellowship. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
Hematology and Medical Oncology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. The Review Committee only accepts current ABIM or AOBIM certification in hematology or medical oncology. ^(Core)
	2.4.a.2. If the program director has ABIM or AOBIM certification in only one of the subspecialties, a faculty member certified by the ABIM or AOBIM in the other subspecialty must be appointed associate program director, be responsible for the educational program in that second area, and assist the program director with the administrative and clinical oversight of the program. ^(Core)
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine residency or hematology or medical oncology fellowship. ^(Core)
	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.
Infectious Disease	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.a.1. The Review Committee only accepts current ABIM or AOBIM certification in infectious disease.
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine residency or infectious disease fellowship. ^(Core)
	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.
Interventional Cardiology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. The Review Committee only accepts current ABIM or AOBIM certification in interventional cardiology. ^(Core)
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine cardiovascular disease fellowship or interventional cardiology fellowship. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.
Interventional Pulmonology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification in the specialty by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the American Osteopathic Association (AOA) acceptable, there is no ABMS or AOA board that offers certification in this subspecialty.]
	2.4.a.1. The program director must possess current certification in pulmonary disease by the ABIM or AOBIM; ^(Core)
	2.4.a.2. The program director must complete an interventional pulmonology fellowship, or credentials in interventional pulmonology and practice as an interventional pulmonologist for a minimum of five years; and, ^(Core)
	2.4.a.3. The program director must devote at least 50 percent of the program director's practice to interventional pulmonology. ^(Core)
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine pulmonary disease or combined pulmonary disease and critical care medicine fellowship, or in interventional pulmonology. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: The educational/administrative experience may be as an associate program director, core faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, or core faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.
Medical Oncology	 2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that ar acceptable to the Review Committee. (Core) 2.4.a.1. The Review Committee only accepts current ABIM or AOBIM certification in medical oncology (Core)
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine residency or medical oncology fellowship. ^(Core)
	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.
Nephrology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that are acceptable to the Review Committee. (Core)
	2.4.a.1. The Review Committee only accepts current ABIM or AOBIM certification in nephrology. (Core)
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine residency or nephrology fellowship. ^(Core)
	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.
Pulmonary Disease and Critical Care Medicine	 2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. The Review Committee only accepts current ABIM or AOBIM certification in pulmonary disease or critical care medicine. ^(Core)
	2.4.a.2. If the program director has ABIM or AOBIM certification in only one of the subspecialties, a faculty member certified in the other subspecialty by the ABIM or AOBIM must be appointed as an associate program director, be responsible for the educational program in that second area, and assist the program director with the administrative and clinical oversight of the program. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine residency or pulmonary disease or critical care medicine fellowship. ^(Core)
	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.
Pulmonary Disease	2.4.a. The program director must possess current certification in the subspecialty for which
	they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. The Review Committee only accepts current ABIM or AOBIM certification in pulmonary disease. (Core)
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine residency or pulmonary disease fellowship. ^(Core)
	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	multiple programs.
Rheumatology	 2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or by the American Osteopathic Board of Internal Medicine (AOBIM), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core) 2.4.a.1. The Review Committee only accepts current ABIM or AOBIM certification in rheumatology. ^(Core)
	 2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine residency or rheumatology fellowship. ^(Core) Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty
	education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
Transplant Hepatology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Internal Medicine (ABIM) or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty.]
	2.4.a.1. The Review Committee only accepts current ABIM certification in transplant hepatology. (Core)
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited internal medicine residency, or gastroenterology or transplant hepatology fellowship. ^(Core)
	Subspecialty-Specific Background and Intent: The educational/administrative experience can be as an associate program director, core faculty member, faculty member, or subspecialty education coordinator for an ACGME-accredited internal medicine residency program, or as program director, associate program director, core faculty member, or faculty member for an ACGME-accredited internal medicine subspecialty program. The experience does not include time spent as a fellow. Chief residency experience in a fourth-year position with junior faculty member responsibilities does count. Teaching/administrative experience is cumulative across multiple programs.
Medical Genetics and	2.5.a. The program director must possess current certification in the specialty for which they
Genomics	are the program director by the American Board of Medical Genetics and Genomics, or specialty qualifications that are acceptable to the Review Committee. (Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this specialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.5.a.1. The Review Committee accepts only current ABMGG certification in clinical genetics and genomics. ^(Core)
	2.5.a.2. The program director must be actively participating in the ABMGG Continuing Certification program in clinical genetics and genomics. ^(Core)
	2.5.c. The program director must have a full-time faculty appointment. (Core)
	<u>Frequently Asked Questions</u> Does the Review Committee accept credentials other than American Board of Medical Genetics and Genomics (ABMGG) certification for program directors? [Program Requirement: 2.5.a.1.]
	The Committee does not consider exceptions to ABMGG certification and will withhold accreditation of a new program that is not led by an ABMGG-certified program director.
	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Medical Genetics and Genomics (ABMGG) if available for their field of study, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this specialty]
	2.5.a.1. The program director must be certified by the ABMGG and actively participating in the ABMGG's Continuing Certification Program in clinical biochemical genetics. ^(Core)
	2.5.c. The program director should be a full-time faculty member, and must be based at the primary clinical site. ^(Detail)
	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Medical Genetics and Genomics (ABMGG) if available for their field of study, or specialty qualifications that are acceptable to the Review Committee. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this specialty]
	2.5.a.1. The program director must be certified by the ABMGG and actively participating in the ABMGG's Continuing Certification program in the specialty(ies) in which they are certified. ^(Core)
	2.5.a.2. If the program director is certified by the ABMGG in only clinical molecular genetics and genomics or only clinical cytogenetics and genomics, there must be an associate program director with certification in the complementary specialty area, or laboratory genetics and genomics. ^(Core)
	2.5.c. The program director should be a full-time faculty member, and must be based at the primary clinical site. ^(Detail)
	Frequently Asked Questions Does the Review Committee allow co-program directors? [Program Requirements: 2.1. and 2.5.a.1.]
	The Review Committee does not allow co-program directors. There must be one faculty member appointed as program director with authority and accountability for the overall program.
	The Review Committee does, however, allow for associate program directors. The Review Committee requires an associate program director if the program director is certified by the ABMGG in only clinical molecular genetics and genomics or only clinical cytogenetics and genomics. This associate program director must be certified in the complementary specialty area, or certified in laboratory genetics and genomics, and should assist with education in the complementary specialty area.
Medical Biochemical Genetics	
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.a.1. The Review Committee will also accept current ABMGG certification in both clinical genetics and genomics and clinical biochemical genetics. ^(Core)
	2.4.a.2. The program director must be actively participating in the ABMGG's Continuing Certification program in the specialty(ies) in which the program director is certified. ^(Core)
	2.4.b. The program director should have at least three years of active participation as a specialist in biochemical genetics following completion of all graduate medical education. ^(Detail)
	2.4.c. The program director must possess current medical licensure and appropriate medical staff appointment. ^(Core)
	2.4.d. The program director must demonstrate ongoing clinical activity. (Core)
	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Neurological Surgery (ABNS) or by the American Osteopathic Board of Surgery (AOBS) in neurological surgery, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.a.1. The Review Committee only accepts ABNS or AOBS neurological surgery certification for the program director. ^(Core)
	2.5.c. must include ongoing scholarly activity, including contributions to the peer-reviewed literature. (Core)
	2.5.d. The program director must demonstrate ability as a faculty leader within the department and as a resident mentor. ^(Core)
Neurology	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Psychiatry and Neurology (ABPN) or by the American Osteopathic Board of Neurology and Psychiatry (AOBNP), or specialty qualifications that are acceptable to the Review Committee. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.5.a.1. Only ABPN and AOBNP certification are considered acceptable. (Core)
	2.5.c. The program director must be a member of the staff at the primary clinical site. ^(Core)
	Frequently Asked Questions
	Where must the program director have a staff appointment if the Sponsoring Institution is not a clinical site? [Program Requirement: 2.5.c.]
	If the Sponsoring Institution is a non-clinical site, such as a medical school, the program director must have a staff appointment at the primary clinical site.
Child Neurology	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Psychiatry and Neurology or by the American Osteopathic Board of Neurology and Psychiatry, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
Clinical Neurophysiology	2.4.a. The program director must possess certification in the subspecialty for which they are the program director by the American Board of Psychiatry and Neurology (ABPN) or by the American Osteopathic Board of Neurology and Psychiatry (AOBNP), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. The Review Committee only accepts current ABPN or AOBNP certification in clinical neurophysiology. ^(Core)
	Frequently Asked Questions
	Does the program director need to have ABPN or American Osteopathic Board of Neurology and Psychiatry (AOBNP) certification in clinical neurophysiology? [Program Requirement: 2.4.a.]
	The program director must have current certification in clinical neurophysiology by the ABPN, AOBNP, or American Board of Physical Medicine and Rehabilitation (ABPMR).
Epilepsy	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Psychiatry and Neurology (ABPN, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. The Review Committee only accepts current ABPN certification in epilepsy. (Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this specialty.]
	Frequently Asked Questions
	Can a neurologist certified by the American Board of Clinical Neurophysiology (ABCN) be considered for the position of program director for an epilepsy fellowship program? [Program Requirement: 2.4.a.]
	No. The program director must have current certification in epilepsy by the ABPN.
Neurodevelopmental Disabilities	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Psychiatry and Neurology (ABPN) or the American Board of Pediatrics (ABP), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	2.4.a.1. The Review Committee only accepts current ABPN or ABP certification in neurodevelopmental disabilities. (Core)
Vascular Neurology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Psychiatry and Neurology (ABPN), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. The Review Committee only accepts current ABPN certification in vascular neurology. (Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
Nuclear Medicine	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Nuclear Medicine or by the American Osteopathic Board of Nuclear Medicine, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.a.1. Other acceptable qualifications are certification by the American Board of Radiology with subspecialty certification in Nuclear Radiology. ^(Core)
	2.5.a.2. The program director should actively participate in Maintenance of Certification. (Core)
	2.5.c. Program director qualifications must include being an authorized user for 10CFR 35.190, 290, and 390, including 392, 394, and 396; ^(Core)
	2.5.d. Program director qualifications must include full-time appointment. (Core)
	2.5.e. Program director qualifications must include broad knowledge of, experience with, and commitment to general nuclear medicine/molecular imaging. ^(Core)
	Frequently Asked Questions
	Can experience as a nuclear medicine faculty member, required for appointment as program director take place at an institution other than the Sponsoring Institution? [Program Requirement: 2.5.d.]
	Yes. The required experience as a nuclear medicine faculty member is not institution-specific.
Obstetrics and Gynecology	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Obstetrics and Gynecology (ABOG) or by the American Osteopathic Board of Obstetrics and Gynecology (AOBOG), or specialty qualifications that are acceptable to the Review Committee. ^(Core)
Complex Family Planning	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Obstetrics and Gynecology or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	2.4.b. The program director must possess five years of experience in complex family planning, or other qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.c. The program director must demonstrate active engagement in the care of patients in the subspecialty. ^(Core)
	2.4.d. The program director must demonstrate academic expertise in complex family planning by a minimum of one original research or review article in a peer-reviewed journal within the past three years and at least one of the following within the past three years: ^(Core)
	• peer-reviewed funding; (Core)
	• presentation(s) at regional or national professional and scientific society meeting(s); or, (Core)
	 participation on a committee(s) of a national professional, scientific, or educational organization(s). ^(Core)
Gynecologic Oncology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Obstetrics and Gynecology, or by the American Osteopathic Board of Obstetrics and Gynecology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. The program director must possess five years of experience as a gynecologic oncologist following completion of a gynecologic oncology fellowship, or possess qualifications that are acceptable to the Review Committee. ^(Core)
	Subspecialty-Specific Background and Intent: The Committee believes five years of experience as a gynecologic oncologist provides a new program director with the clinical, educational, research, and administrative background needed to effectively lead a program. The Committee will consider a candidate for program director who has fewer than five years of experience provided the faculty

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	member demonstrates clinical and scholarly expertise in gynecologic oncology, is exceptionally well- prepared and positioned to take on this leadership position, and has mentorship and support by at least one faculty member that can be documented.
	2.4.c. The program director must have active engagement in the care of patients in the subspecialty. (Core)
	2.4.d. The program director must demonstrate clinical and scholarly expertise in gynecologic oncology by publication of a minimum of one original research or review article in a peer-reviewed journal within the past three years and at least one of the following within the past three years: (Core)
	• peer-reviewed funding; (Core)
	 invited or research presentation at regional/ national/international professional and scientific society meetings; or, ^(Core)
	 participation on committees of national or international professional, scientific, or educational organizations. ^(Core)
Maternal-Fetal Medicine	2.4.a. must current certification in the subspecialty for which they are the program director by the American Board of Obstetrics and Gynecology, or by the American Osteopathic Board of Obstetrics and Gynecology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. The program director must possess five years of experience as a maternal-fetal medicine physician following completion of a maternal-fetal medicine fellowship, or possess qualifications that are acceptable to the Review Committee. ^(Core)
	Subspecialty-Specific Background and Intent: The Committee believes five years of experience as a maternal-fetal medicine physician provides a new program director with the clinical, educational, research, and administrative background needed to effectively lead a program. The Committee will consider a candidate for program director who has fewer than five years of experience provided the faculty member demonstrates clinical and scholarly expertise in maternal-fetal medicine, is

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	exceptionally well-prepared and positioned to take on this leadership position, and has mentorship and support by at least one faculty member that can be documented.
	2.4.c. The program director must demonstrate active care of patients in the subspecialty. (Core)
	2.4.d. The program director must demonstrate clinical and scholarly expertise in maternal fetal medicine by publication of original research in peer-reviewed journals within the past three years; and at least one of the following within the past three years: ^(Core)
	• extramural peer-reviewed funding; (Core)
	 invited or research presentation(s) at regional/national/international scientific or faculty development meeting(s) (primary presenter, co-presenter, co-investigator, or senior author).
	• participation in national or international committees or educational organizations. (Core)
Reproductive Endocrinology and Infertility	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Obstetrics and Gynecology, or by the American Osteopathic Board of Obstetrics and Gynecology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. The program director must possess five years' experience as a reproductive endocrinology and infertility subspecialist following completion of a reproductive endocrinology and infertility fellowship, or possess qualifications that are acceptable to the Review Committee. ^(Core)
	Subspecialty-Specific Background and Intent: The Committee believes five years of experience as a reproductive endocrinology and infertility physician provides a new program director with the clinical, educational, research, and administrative background needed to effectively lead a program. The Committee will consider a candidate for program director who has fewer than five years of experience provided the faculty member demonstrates clinical and scholarly expertise in reproductive endocrinology and infertility, is exceptionally well-prepared and positioned to take on this leadership position, and has mentorship and support by at least one faculty member that can be documented.

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.c. The program director must demonstrate active care of patients in the subspecialty. (Core)
	2.4.d. The program director must demonstrate clinical and scholarly expertise in reproductive endocrinology and infertility by publication of at least three original peer-reviewed publications within the past three years, and at least two of the following annually: ^(Core)
	• grant with leadership role (principal investigator, co- investigator, site director); (Core)
	 invited or research presentation at regional/national/international scientific or faculty development meetings (primary presenter, co-presenter, co-investigator, or senior author). ^(Core)
	 active leadership role in a national or international organization or as an editorial board member for a peer-reviewed journal. ^(Core)
Ophthalmology	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Ophthalmology or by the American Osteopathic Board of Ophthalmology and Otolaryngology – Head and Neck Surgery, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.a.1. The program director must be a member of the staff at the Sponsoring Institution, primary clinical site, or a participating site acceptable to the Review Committee. ^(Core)
	Frequently Asked Questions
	Do programs need to review program director and faculty member certification information that is automatically provided in ADS? [Program Requirements: 2.5.a. and 2.10.]
	Yes, programs are expected to review faculty member certification information for accuracy during the ADS Annual Update and when a new faculty member is entered into ADS. If an error is identified, programs should correct this in the faculty roster (Specialty Certification – Manual Entries > +Add > enter correct certification information and an explanation in "Explain Equivalent Qualifications for Review Committee Consideration (or missing information)").
	Under what circumstances does the Committee need to review the qualifications of a program director or faculty member who is not certified in ophthalmology by the American Board of

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Ophthalmology (ABO) or American Osteopathic Board of Ophthalmology and Otolaryngology-Head and Neck Surgery (AOBOO-HNS)? [Program Requirements: 2.5.a. and 2.10.]
	 Programs are expected to submit a request for a proposed program director or faculty member: whose certification is from a country outside of the United States, Note: Faculty members trained outside of the United States are expected to participate in the ABO's Internationally Trained Ophthalmologists program once eligible. who is not certified by the ABO or AOBOO-HNS and does not plan on becoming certified by the ABO or AOBOO-HNS in the near future, or, who has lapsed ABO or AOBOO-HNS certification.
	 A request is <i>not</i> needed for: a faculty member who recently completed an ACGME-accredited ophthalmology residency program and has not yet received ABO or AOBOO-HNS certification, or, Note: Programs should enter "ABMS Board Eligible" or "AOA Board Eligible" in the ADS Faculty Roster (Specialty Certification – Manual Entries > +Add). non-ophthalmologist faculty members who are board certified in their (sub)specialty.
	How should a program request the Committee's consideration of the qualifications of a proposed program director or faculty member who is not certified in ophthalmology by the ABO or AOBOO-HNS? [Program Requirements: 2.5.a. and 2.10.]
	The program must submit a letter of support to the Review Committee, signed by the program director and the designated institutional official (DIO). A CV for the faculty member must be attached. Email the letter to the Review Committee's Accreditation Administrator, contact information for whom can be found in the <u>Ophthalmology</u> section of the ACGME website.
	If the Review Committee approves the request, programs should note this in the ADS Faculty Roster (Specialty Certification – Manual Entries > +Add > enter certification information > indicate Review Committee approval under "Explain Equivalent Qualifications for Review Committee Consideration (or missing information)").
Ophthalmic Plastic and Reconstructive	2.4.a. The program director must possess current certification in the specialty by the American Board of Ophthalmology or by the American Osteopathic Board of Ophthalmology and

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
Surgery	Otolaryngology – Head and Neck Surgery, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the American Osteopathic Association (AOA) acceptable, there is no ABMS or AOA board that offers certification in this subspecialty]
	2.4.b. The program director must have completed an ophthalmic plastic and reconstructive surgery fellowship. ^(Core)
	2.4.b.1. If the program director completed a one-year ophthalmic plastic and reconstructive surgery fellowship, there must be a core faculty member who completed a two-year ophthalmic plastic and reconstructive surgery fellowship, or have qualifications that are acceptable to the Review Committee. (Core)
	2.4.c. The program director must have at least three years clinical experience in ophthalmic plastic and reconstructive surgery following completion of an ophthalmic plastic and reconstructive surgery fellowship. ^(Core)
	2.4.d. The program director must have clinical practice consisting predominantly of ophthalmic plastic and reconstructive surgery. ^(Core)
	2.4.e. The program director must demonstrate engagement in ongoing research in the area of ophthalmic plastic and reconstructive surgery as demonstrated by regular publications in peer-reviewed journals and/or presentations of research material at national meetings. ^(Core)
Orthopaedic Surgery	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board Orthopaedic Surgery (ABOS) or by the American Osteopathic Board of Orthopaedic Surgery (AOBOS), or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.a.1. The Review Committee for Orthopaedic Surgery accepts only ABOS and AOBOS certification for the program director. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.5.c. The program director must demonstrate evidence of periodic updates of knowledge and skills to discharge the roles and responsibilities for teaching, supervision, and formal evaluation of residents. (Core)
	Frequently Asked Questions
	What types of evidence of periodic updates of knowledge and skills would the Review Committee consider for complying with the requirement for additional program director qualifications? [Program Requirement: 2.5.c.]
	Examples of acceptable evidence include:
	• Peer-reviewed publications and book chapters related specifically to teaching, supervision, and assessment of residents
	 Participation in education courses/workshops, such as those offered through the ACGME, American Academy of Orthopaedic Surgeons, American Orthopaedic Association, or AOA Active participation in the Council of Orthopaedic Residency Directors (CORD) Development of educational materials, such as simulations, video-taped lectures, or items for examination guestion banks
	Participation in or leadership of department and/or institutional committees related to resident education, such as the Clinical Competency Committee, Program Evaluation Committee, Patient Quality/Safety Committee, Graduate Medical Education Committee, Institutional Review Board
	2.4.a. must include current certification in the specialty by the American Board of Orthopaedic Surgery or by the American Osteopathic Board of Orthopaedic Surgery, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the American Osteopathic Association (AOA) acceptable, there is no ABMS or AOA board that offers certification in this subspecialty.]
	2.4.b. All program directors appointed after the effective date of these requirements must have current ABOS or AOBOS certification in orthopaedic surgery. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.c. Prior to appointment, the program director must demonstrate the following:
	2.4.c.1. completion of an adult reconstructive orthopaedic surgery fellowship; (Core)
	2.4.c.2. at least three years of clinical practice experience in adult reconstructive orthopaedic surgery; (Core)
	2.4.c.3. three years as a faculty member in an ACGME- or AOA-accredited orthopaedic surgery residency or an adult reconstructive orthopaedic surgery fellowship program. ^(Core)
	2.4.c.4. evidence of periodic updates of knowledge and skills to discharge the roles and responsibilities for teaching, supervision, and formal evaluation of fellows. ^(Core)
Foot and Ankle Orthopaedic Surgery	2.4.a. The program director must possess current certification in the specialty by the American / Board of Orthopaedic Surgery or by the American Osteopathic Board of Orthopaedic Surgery, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the American Osteopathic Association (AOA) acceptable, there is no ABMS or AOA board that offers certification in this subspecialty]
	2.4.a.1. All program directors appointed after the effective date of these requirements must have current ABOS or AOBOS certification in orthopaedic surgery. ^(Core)
	2.4.b. Prior to appointment, the program director must demonstrate the following: (Core)
	2.4.b.1. completion of a foot and ankle orthopaedic surgery fellowship; (Core)
	2.4.b.2. at least three years of clinical practice experience in foot and ankle orthopaedic surgery; (Core)
	2.4.b.3. three years as a faculty member in an ACGME- or AOA-accredited orthopaedic surgery residency or a foot and ankle orthopaedic surgery fellowship program. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.b.4. evidence of periodic updates of knowledge and skills to discharge the roles and responsibilities for teaching, supervision, and formal evaluation of fellows. ^(Core)
Musculoskeletal Oncology	2.4.a. The program director must possess current certification in the specialty by the American Board of Orthopaedic Surgery (AOBS) or by the American Osteopathic Board of Orthopaedic Surgery (AOBOS), or subspecialty qualifications that are acceptable to the Review Committee.
	[Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the AOA acceptable, there is no ABMS or AOA board that offers certification in this subspecialty]
	2.4.a.1. All program directors appointed after the effective date of these requirements must have current ABOS or AOBOS certification in orthopaedic surgery. ^(Core)
	2.4.b. Prior to appointment, the program director must demonstrate completion of a musculoskeletal oncology fellowship; ^(Core)
	2.4.c. Prior to appointment, the program director must demonstrate at least three years of clinical practice experience in musculoskeletal oncology; ^(Core)
	2.4.d. Prior to appointment, the program director must demonstrate three years as a faculty member in an ACGME-accredited or American Osteopathic Association (AOA)-approved orthopaedic surgery residency or musculoskeletal oncology fellowship program. ^(Core)
	2.4.e. Prior to appointment, the program director must demonstrate evidence of periodic updates of knowledge and skills to discharge the roles and responsibilities for teaching, supervision, and formal evaluation of fellows. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
Orthopaedic Sports Medicine	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Orthopaedic Surgery (ABOS) or by the American Osteopathic Board of Orthopaedic Surgery (AOBOS), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. All program directors appointed after the effective date of these requirements must have current ABOS or AOBOS certification in orthopaedic surgery, as well as subspecialty certification in orthopaedic sports medicine. ^(Core)
	2.4.b. Prior to appointment, the program director must demonstrate completion of an ACGME-accredited orthopaedic sports medicine fellowship; ^(Core)
	2.4.c. Prior to appointment, the program director must demonstrate at least three years of clinical practice experience in orthopaedic sports medicine; ^(Core)
	2.4.d. Prior to appointment, the program director must demonstrate three years as a faculty member in an ACGME-accredited or AOA-approved orthopaedic surgery residency or ACGME-accredited orthopaedic sports medicine fellowship program. ^(Core)
	Subspecialty-Specific Background and Intent: Current program directors of ACGME-accredited orthopaedic sports medicine fellowship programs are exempt from requirements 2.4.b 2.4.d Program directors appointed after the effective date of these requirements are expected to comply with these requirements.
	2.4.e. Prior to appointment, the program director must demonstrate evidence of periodic updates of knowledge and skills to discharge the roles and responsibilities for teaching, supervision, and formal evaluation of fellows. ^(Core)
	Frequently Asked Questions What subspecialty qualifications are acceptable to the Review Committee? [Program Requirement: 2.4.a.]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	All newly appointed program directors must have subspecialty certification in orthopaedic sports medicine from the American Board of Orthopaedic Surgery. Current program directors who are eligible are strongly encouraged to obtain subspecialty certification.
Orthopaedic Trauma	2.4.a. The program director must possess current certification in the specialty by the American Board of Orthopaedic Surgery (ABOS) or by the American Osteopathic Board of Orthopaedic Surgery (AOBOS), or subspecialty qualifications that are acceptable to the Review Committee.
	[Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the AOA acceptable, there is no ABMS or AOA board that offers certification in this subspecialty]
	2.4.a.1. All program directors appointed after the effective date of these requirements must have current ABOS or AOBOS certification in orthopaedic surgery. ^(Core)
	2.4.b. Prior to appointment, the program director must demonstrate completion of an orthopaedic trauma fellowship; ^(Core)
	2.4.c. Prior to appointment, the program director must demonstrate at least three years of clinical practice experience in orthopaedic trauma; ^(Core)
	2.4.d. Prior to appointment, the program director must demonstrate three years as a faculty member in an ACGME-accredited or American Osteopathic Association (AOA)-approved orthopaedic surgery residency or orthopaedic trauma fellowship program. ^(Core)
	2.4.e. Prior to appointment, the program director must demonstrate evidence of periodic updates of knowledge and skills to discharge the roles and responsibilities for teaching, supervision, and formal evaluation of fellows. ^(Core)
Pediatric Orthopaedic Surgery	2.4.a. The program director must possess current certification in the specialty by the American Board of Orthopaedic Surgery (ABOS) or by the American Osteopathic Board of Orthopaedic

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Surgery (AOBOS), or subspecialty qualifications that are acceptable to the Review Committee.
	[Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the AOA acceptable, there is no ABMS or AOA board that offers certification in this subspecialty.]
	2.4.b. Prior to appointment, the program director must demonstrate completion of a pediatric orthopaedic surgery fellowship; ^(Core)
	2.4.c. Prior to appointment, the program director must demonstrate at least three years of clinical practice experience in pediatric orthopaedic surgery; ^(Core)
	2.4.d. Prior to appointment, the program director must demonstrate three years as a faculty member in an ACGME-accredited or American Osteopathic Association (AOA)-approved orthopaedic surgery residency or a pediatric orthopaedic surgery fellowship program. ^(Core)
	2.4.e. Prior to appointment, the program director must demonstrate evidence of periodic updates of knowledge and skills to discharge the roles and responsibilities for teaching, supervision, and formal evaluation of fellows. ^(Core)
	2.9.b. Subspecialty physician faculty members must have current certification in the specialty by the American Board of Orthopaedic Surgery or the American Osteopathic Board of Orthopaedic Surgery, or possess qualifications judged acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a member board of the ABMS or a certifying board of the AOA acceptable, there is no ABMS or AOA board that offers certification in this subspecialty]
Orthopaedic Surger of the Spine	ry 2.4.a. The program director must possess current certification in the specialty by the American Board of Orthopaedic Surgery (ABOS) or by the American Osteopathic Board of Orthopaedic

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Surgery (AOBOS), or subspecialty qualifications that are acceptable to the Review Committee.
	[Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the AOA acceptable, there is no ABMS or AOA board that offers certification in this subspecialty.]
	2.4.a.1. All program directors appointed after the effective date of these requirements must have current ABOS or AOBOS certification in orthopaedic surgery. ^{(Core}
	⁾ 2.4.b. Prior to appointment, the program director must demonstrate completion of an orthopaedic surgery of the spine fellowship; ^(Core)
	2.4.c. Prior to appointment, the program director must demonstrate at least three years of clinical practice experience in orthopaedic spine surgery; ^(Core)
	2.4.d. Prior to appointment, the program director must demonstrate three years as a faculty member in an ACGME-accredited or American Osteopathic Association (AOA)-approved orthopaedic surgery residency or an orthopaedic surgery of the spine fellowship program. ^(Core)
	2.4.e. Prior to appointment, the program director must demonstrate evidence of periodic updates of knowledge and skills to discharge the roles and responsibilities for teaching, supervision, and formal evaluation of fellows. ^(Core)
Osteopathic Neuromusculoskeletal Medicine	2.5. The program director must possess current certification in the specialty for which they are the program director by the American Osteopathic Board of Neuromusculoskeletal Medicine, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) acceptable, there is no ABMS member board that offers certification in this specialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.5.a.1. Current certification through the American Osteopathic Board of Special Proficiency in Osteopathic Manipulative Medicine (AOBSPOMM) is also acceptable. ^(Core)
Otolaryngology – Head and Neck Surgery	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Otolaryngology – Head and Neck Surgery (ABOHNS) or by the American Osteopathic Board of Ophthalmology and Otolaryngology – Head and Neck Surgery (AOBOO-HNS), or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.a.1. The Review Committee accepts only ABOHNS or AOBOO-HNS certification. (Core)
	2.5.c. The program director must demonstrate evidence of periodic updates of knowledge and skills to discharge the roles and responsibilities for teaching, supervision, and formal evaluation of residents. (Core)
	Frequently Asked Questions What activities are acceptable as evidence of the program director's periodic updates of knowledge and skills related to program responsibilities? [Program Requirement: 2.5.c.]
	Program directors can attend a variety of educational and/or continuing medical education (CME) venues relating to GME in otolaryngology – head and neck surgery, including the ACGME Annual Educational Conference, Society of University Otolaryngologists - Program Directors Organization meetings, the American Academy of Otolaryngology – Head and Neck Surgery Annual Meeting, and/or institutional courses.
Neurotology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Otolaryngology – Head and Neck Surgery (ABOHNS) or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	2.4.a.1. The Review Committee only accepts certification in neurotology by the ABOHNS. (Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
Pediatric Otolaryngology	2.4.a.1. The Review Committee only accepts American Board of Otolaryngology – Head and Neck Surgery (ABOHNS) or American Osteopathic Board of Ophthalmology and Otolaryngology – Head and Neck Surgery (AOBOO-HNS) certification in otolaryngology – head and neck surgery. ^(Core)
	2.4.b. The program director should have also completed a pediatric otolaryngology fellowship. (Core)
	[Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the American Osteopathic Association (AOA) acceptable, there is no ABMS or AOA board that offers certification in this subspecialty]
	Frequently Asked Questions What qualifications are acceptable to the Review Committee for program directors who completed their education prior to the existence of formal pediatric otolaryngology fellowships? [Program Requirement: 2.4.b.]
	Program directors must be American Board of Otolaryngology – Head and Neck Surgery (ABOHNS)- or American Osteopathic Board of Ophthalmology and Otorhinolaryngology Head and Neck Surgery (AOBOOHNS)-certified in otolaryngology and must have a record demonstrating that pediatric otolaryngology has been their career focus. All program director changes must be submitted through the ACGME Accreditation Data System (ADS). All such changes require submission of a current curriculum vitae and will be reviewed by the Committee.
Pathology	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Pathology or by the American Osteopathic Board of Pathology, or specialty qualifications that are acceptable to the Review Committee. and, ^(Core)
	2.5.a.1. The program director must have current certification in anatomic and clinical pathology, anatomic pathology, or clinical pathology from the American Board of Pathology (ABPath) or in either anatomic pathology or clinical pathology/laboratory medicine from the American Osteopathic Board of Pathology (AOBPa). ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.5.a.2. If the program director is not certified in both anatomic and clinical pathology, there must be an associate program director with certification in the complementary specialty area by the ABPath or the AOBPa. ^(Core)
Blood Banking/Transfusion Medicine	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pathology (ABPath) or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this specialty/subspecialty]
	2.4.b. The program director must possess at least three years of active participation as a specialist in blood banking/transfusion medicine following completion of all graduate medical education. ^(Core)
Chemical Pathology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pathology (ABPath) or subspecialty qualifications that are acceptable to the Review Committee. and, ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this specialty/subspecialty]
	2.4.b. The program director must possess at least three years of active participation as a specialist in chemical pathology following completion of all graduate medical education. (Core)
Cytopathology	2.4. Qualifications of the program director:
	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pathology (ABPath) or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this specialty/subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.b. The program director must possess at least three years of active participation as a specialist in cytopathology following completion of all graduate medical education. ^(Core)
Forensic Pathology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pathology (ABPath) or by the American Osteopathic Board of Pathology (AOBPath), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. The program director must possess at least three years of active participation as a specialist in forensic pathology following completion of all graduate medical education. ^(Core)
Hematopathology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pathology (ABPath) or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	2.4.b. The program director must possess at least three years of active participation as a specialist in hematopathology following completion of all graduate medical education. ^(Core)
Medical Microbiology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pathology (ABPath) or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	2.4.b. The program director must possess at least three years of active participation as a specialist in medical microbiology following completion of all graduate medical education. ^(Core)
Neuropathology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pathology (ABPath) or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	2.4.b. The program director must possess at least three years of active participation as a specialist in neuropathology following completion of all graduate medical education. ^(Core)
Pediatric Pathology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pathology (ABPath) or subspecialty qualifications that are acceptable to the Review Committee. and, ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	2.4.b. The program director must possess at least three years of active participation as a specialist in pediatric pathology following completion of all graduate medical education. ^(Core)
Selective Pathology	2.4.a. The program director must possess current certification in the specialty by the American Board of Pathology (ABPath) or by the American Osteopathic Board of Pathology (AOBPa) or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the American Osteopathic Association (AOA) acceptable, there is no ABMS or AOA board that offers certification in this subspecialty]
	2.4.a.1. Tracks A and B: The program director must have current certification in anatomic pathology and clinical pathology or in anatomic pathology by the ABPath or the AOBPa. ^(Core)
	2.4.a.2. Track C: The program director must have current certification in anatomic pathology and clinical pathology or in clinical pathology by the ABPath or the AOBPa. ^(Core)
	2.4.b. The program director must possess at least three years of active participation as a specialist in:

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.b.1. Track A: surgical pathology or an area of focused anatomic pathology; (Core)
	2.4.b.2. Track B: the identified area of focused anatomic pathology. (Core)
	2.4.b.3. Track C: the identified area of focused clinical pathology. (Core)
	2.4.c. The program director should possess at least three years of experience as an educator in pathology. ^(Core)
	2.4.d. The program director should have completed a fellowship in the identified area of the selective pathology program. ^(Core)
	2.4.d.1. For Track A programs, the fellowship must have been completed in surgical pathology or in an area of focused anatomic pathology. ^(Core)
Pediatrics	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Pediatrics (ABP) or by the American Osteopathic Board of Pediatrics (AOBP), or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.a.1. The program director must meet the requirements for either Maintenance of Certification in pediatrics or a subspecialty of pediatrics through the ABP or Osteopathic Continuous Certification through the AOBP. ^(Core)
Adolescent Medicine	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	Subspecialty-Specific Background and Intent: Qualifications other than adolescent medicine certification by the American Board of Pediatrics (ABP) will be considered only in exceptional circumstances. For a program director without adolescent medicine certification from the ABP, the

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	 completion of an adolescent medicine fellowship program scholarship within the field of adolescent medicine; specifically, evidence of ongoing scholarship documented by contributions to the peer-reviewed literature in adolescent medicine, and adolescent medicine presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in adolescent medicine
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. The program director must have a record of ongoing involvement in scholarly activities. (Core)
Child Abuse	2.4. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: Qualifications other than child abuse pediatrics certification by the American Board of Pediatrics (ABP) will be considered only in exceptional circumstances. For a program director without child abuse pediatrics certification from the ABP, the Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	 completion of a child abuse pediatrics fellowship program scholarship within the field of child abuse pediatrics; specifically, evidence of on-going scholarship documented by contributions to the peer-reviewed literature in child abuse pediatrics, and child abuse pediatrics presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in child abuse pediatrics
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. must have a record of ongoing involvement in scholarly activities. (Core)
Developmental- Behavioral Pediatrics	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: Qualifications other than developmental-behavioral pediatrics certification by the American Board of Pediatrics (ABP) will be considered only in exceptional circumstances. For a program director without developmental-behavioral pediatrics certification from the ABP, the Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	 completion of a developmental-behavioral pediatrics fellowship program scholarship within the field of developmental-behavioral pediatrics; specifically, evidence of on-going scholarship documented by contributions to the peer-reviewed literature in developmental-behavioral pediatrics, and developmental-behavioral pediatrics presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in developmental-behavioral pediatrics
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. The program director must have a record of ongoing involvement in scholarly activities. (Core)
Neonatal-Perinatal Medicine	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics or by the American Osteopathic Board of Pediatrics, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: Qualifications other than neonatal-perinatal medicine certification by the American Board of Pediatrics (ABP) or American Osteopathic Board of Pediatrics (AOBP) will be considered only in exceptional circumstances. For a program director without neonatal-perinatal medicine certification from the ABP or AOBP, the Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	 completion of a neonatal-perinatal medicine fellowship program scholarship within the field of neonatal-perinatal medicine; specifically, evidence of on-going scholarship documented by contributions to the peer-reviewed literature in neonatal-perinatal medicine, and neonatal-perinatal medicine presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in neonatal-perinatal medicine
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. The program director must have a record of ongoing involvement in scholarly activities. (Core)
Pediatric Cardiology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: Qualifications other than pediatric cardiology certification by the American Board of Pediatrics (ABP) will be considered only in exceptional circumstances. For a program director without pediatric cardiology certification from the ABP, the Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	 completion of a pediatric cardiology fellowship program scholarship within the field of pediatric cardiology; specifically, evidence of on-going scholarship documented by contributions to the peer-reviewed literature in pediatric cardiology, and pediatric cardiology presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in pediatric cardiology
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. The program director must demonstrate a record of ongoing involvement in scholarly activities.
Pediatric Critical Care Medicine	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: Qualifications other than pediatric critical care medicine certification by the American Board of Pediatrics (ABP) will be considered only in exceptional circumstances. For a program director without pediatric critical care medicine certification from the ABP, the Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	 completion of a pediatric critical care medicine fellowship program scholarship within the field of pediatric critical care medicine; specifically, evidence of on-going scholarship documented by contributions to the peer-reviewed literature in pediatric critical care medicine, and pediatric critical care medicine presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in pediatric critical care medicine
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. The program director must demonstrate a record of ongoing involvement in scholarly activities
Pediatric Endocrinology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics or by the American Osteopathic Board of Pediatrics, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: Qualifications other than pediatric endocrinology certification by the American Board of Pediatrics (ABP) or American Osteopathic Board of Pediatrics (AOBP) will be considered only in exceptional circumstances. For a program director without pediatric endocrinology certification from the ABP or AOBP, the Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	 completion of a pediatric endocrinology fellowship program scholarship within the field of pediatric endocrinology; specifically, evidence of on-going scholarship documented by contributions to the peer-reviewed literature in the pediatric endocrinology, and pediatric endocrinology presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in pediatric endocrinology
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. The program director must demonstrate a record of ongoing involvement in scholarly activities.
Pediatric Gastroenterology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	Subspecialty-Specific Background and Intent: Qualifications other than pediatric gastroenterology certification by the American Board of Pediatrics (ABP) will be considered only in exceptional circumstances. For a program director without pediatric gastroenterology certification from the ABP, the Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	completion of a pediatric gastroenterology fellowship program

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	 scholarship within the field of pediatric gastroenterology; specifically, evidence of on-going scholarship documented by contributions to the peer-reviewed literature in pediatric gastroenterology, and pediatric gastroenterology presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in pediatric gastroenterology
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. The program director must demonstrate a record of ongoing involvement in scholarly activities.
Pediatric Hematology Oncology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics or subspecialty qualifications that are acceptable to the Review Committee. and, ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: Qualifications other than pediatric hematology-oncology certification by the American Board of Pediatrics (ABP) will be considered only in exceptional circumstances. For a program director without pediatric hematology-oncology certification from the ABP, the Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	 completion of a pediatric hematology-oncology fellowship program scholarship within the field of pediatric hematology-oncology; specifically, evidence of on- going scholarship documented by contributions to the peer-reviewed literature in pediatric hematology-oncology, and pediatric hematology-oncology presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in pediatric hematology-oncology
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. The program director must demonstrate a record of ongoing involvement in scholarly activities.
Pediatric Hospital Medicine	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: Prior to 2025, the program director must hold current certification by the American Board of Pediatrics (ABP), and is expected to take the pediatric hospital medicine certifying examination by 2024.
	Effective 2025, the program director is expected to hold current subspecialty certification in pediatric hospital medicine. Qualifications other than pediatric hospital medicine certification by the ABP will be considered only in exceptional circumstances. For a program director who has not achieved pediatric hospital medicine certification from the ABP, the Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	 completion of a pediatric hospital medicine fellowship program scholarship within the field of pediatric hospital medicine; specifically, evidence of on-going scholarship documented by contributions to the peer-reviewed literature in pediatric hospital medicine, and pediatric hospital medicine presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in pediatric hospital medicine
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. The program director must have a record of ongoing involvement in scholarly activities. (Core)
Pediatric Infectious Diseases	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	Subspecialty-Specific Background and Intent: Qualifications other than pediatric infectious diseases certification by the American Board of Pediatrics (ABP) will be considered only in exceptional circumstances. For a program director without pediatric infectious diseases certification from the

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	ABP, the Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	 completion of a pediatric infectious diseases fellowship program scholarship within the field of pediatric infectious diseases; specifically, evidence of on-going scholarship documented by contributions to the peer-reviewed literature in pediatric infectious diseases, and pediatric infectious diseases presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in pediatric infectious diseases
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. The program director must have a record of ongoing involvement in scholarly activities. (Core)
Pediatric Nephrology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: Qualifications other than pediatric nephrology certification by the American Board of Pediatrics (ABP) will be considered only in exceptional circumstances. For a program director without pediatric nephrology certification from the ABP, the Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	 completion of a pediatric nephrology fellowship program scholarship within the field of pediatric nephrology; specifically, evidence of on-going scholarship documented by contributions to the peer-reviewed literature in pediatric nephrology, and pediatric nephrology presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in pediatric nephrology
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. The program director must have a record of ongoing involvement in scholarly activities. (Core)
Pediatric Pulmonology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics or by the American Osteopathic Board of Pediatrics, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: Qualifications other than pediatric pulmonology certification by the American Board of Pediatrics (ABP) or American Osteopathic Board of Pediatrics (AOBP) will be considered only in exceptional circumstances. For a program director without pediatric pulmonology certification from the ABP or AOBP, the Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	 completion of a pediatric pulmonology fellowship program scholarship within the field of pediatric pulmonology; specifically, evidence of on-going scholarship documented by contributions to the peer-reviewed literature in pediatric pulmonology, and pediatric pulmonology presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in pediatric pulmonology
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. The program director must have a record of ongoing involvement in scholarly activities. (Core)
Pediatric Rheumatology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: Qualifications other than pediatric rheumatology certification by the American Board of Pediatrics (ABP) will be considered only in exceptional circumstances. For a program director without pediatric rheumatology certification from the ABP, the Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	 completion of a pediatric rheumatology fellowship program scholarship within the field of pediatric rheumatology; specifically, evidence of on-going scholarship documented by contributions to the peer-reviewed literature in pediatric rheumatology, and pediatric rheumatology presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in pediatric rheumatology
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. The program director must have a record of ongoing involvement in scholarly activities (Core)
Pediatric Transplant Hepatology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Pediatrics or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: Qualifications other than subspecialty certification by the American Board of Pediatrics (ABP) will be considered only in exceptional circumstances. For a program director without pediatric transplant hepatology certification from the ABP, the Review Committee will consider the following criteria in determining whether alternate qualifications are acceptable:
	 completion of a pediatric transplant hepatology fellowship program scholarship within the field of pediatric transplant hepatology; specifically, evidence of on- going scholarship documented by contributions to the peer-reviewed literature in pediatric transplant hepatology, and pediatric transplant hepatology presentations at national meetings leadership and/or participation on committees in national pediatric subspecialty organizations current clinical activity in pediatric transplant hepatology
	Years of practice are not an equivalent to specialty board certification, and the Review Committee does not accept the phrase "board eligible."
	2.4.b. The program director must have a record of ongoing involvement in scholarly activities. (Core)
Physical Medicine and Rehabilitation	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Physical Medicine and Rehabilitation or by the American Osteopathic Board of Physical Medicine and Rehabilitation, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.a.1. The Review Committee will not accept alternate qualifications to ABPMR or AOBPMR certification. ^(Core)
Pediatric Rehabilitation Medicine	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Physical Medicine and Rehabilitation, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.a.1. Dual primary certifications through both the American Board of Physical Medicine and Rehabilitation or the American Osteopathic Board of Physical Medicine and Rehabilitation and the American Board of Pediatrics or the American Osteopathic Board of Pediatrics are considered acceptable qualifications. ^(Detail)
	2.4.b. The program director should have experience as a faculty member in pediatric rehabilitation medicine for a minimum of three years prior to appointment as program director. ^(Core)
Spinal Cord Injury Medicine	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Physical Medicine and Rehabilitation or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	2.4.b. The program director should have experience as a faculty member in spinal cord injury medicine for a minimum of three years prior to appointment as program director. ^(Core)
	Subspecialty-Specific Background and Intent: Experience serving as a subspecialty faculty member of a physical medicine and rehabilitation residency program is acceptable.
Plastic Surgery	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Plastic Surgery or by the American Osteopathic Board of Surgery - Plastic and Reconstructive Surgery, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.c. The program director must have medical staff appointment at the primary clinical site for the residency program, unless otherwise approved by the Review Committee. and, ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.5.d. The program director must participate in Continuous Certification by the American Board of Plastic Surgery or Maintenance of Certification by the American Osteopathic Board of Surgery – Plastic and Reconstructive Surgery. ^(Core)
	Specialty-Specific Background and Intent: Training plastic surgery residents is a complex undertaking. Program directors must be sufficiently prepared to take on the role, established in the field of plastic surgery, and have the support of the department and Sponsoring Institution to devote the time and effort required to oversee a high quality plastic surgery program. In addition to having three years of documented experience, the Review Committee suggests that new program director candidates have experience serving in a leadership capacity relevant to graduate medical education and complete a training/mentoring program for new program directors. A letter outlining the Sponsoring Institution's plan for mentoring and provision of appropriate resources should accompany requests for approval of program director candidates who do not have the minimum requisite experience. Sponsoring Institutions submitting a program director candidate who is not board certified as referenced in II.A.3.b) must provide the candidate's credentials and letter(s) of explanation from the institution's GMEC and plastic surgery clinical leadership (e.g., Department Chair, Section Chief, etc.).
Craniofacial Surgery	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Plastic Surgery or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	2.4.b. The program director must possess requisite clinical experience in craniofacial surgery acceptable to the Review Committee. ^(Detail)
Aerospace Medicine	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Preventive Medicine or by the American Osteopathic Board of Preventive Medicine, or specialty qualifications that are acceptable to the Review Committee. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Frequently Asked Questions
	Must the program director have current certification in aerospace medicine? [Program Requirement: 2.5.a.]
	While it is desirable for the program director to have current certification in aerospace medicine, individuals with current certification in either occupational medicine or public health and general preventive medicine can be considered. In such circumstances, there should be evidence of other qualifications in aerospace medicine, including administrative experience, peer-reviewed publications, and/or acknowledged work in the specialty.
	What specialty qualifications are acceptable to the Review Committee if the program director does not have current certification by the ABPM or the American Osteopathic Board of Preventive Medicine (AOBPM)? [Program Requirement: 2.5.a.]
	In rare and unusual circumstances, the Review Committee will consider an exception to the requirement for ABPM or AOBPM certification for the program director. Exceptions are made on a case-by-case basis. In these cases, the Committee considers physicians with certification in a specialty recognized by the American Board of Medical Specialties or AOA who have demonstrated experience in the field of aerospace medicine through:
	 at least three years of administrative experience; significant peer-reviewed publications; or,
	acknowledged work in the field.
Occupational and Environmental Medicine	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Preventive Medicine or by the American Osteopathic Board of Preventive Medicine, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	Frequently Asked Questions
	Must the program director have current certification in occupational and environmental medicine? [Program Requirement: 2.5.a.]
	While it is desirable for the program director to have current certification in occupational and

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	environmental medicine, individuals with current certification in either aerospace medicine or public health and general preventive medicine can be considered. In such circumstances, there should be evidence of other qualifications in occupational and environmental medicine, including administrative experience, peer-reviewed publications, and/or acknowledged work in the specialty.
	What specialty qualifications are acceptable to the Review Committee if the program director does not have current certification by the ABPM or the American Osteopathic Board of Preventive Medicine (AOBPM)? [Program Requirement: 2.5.a.]
	In rare and unusual circumstances, the Review Committee will consider an exception to the requirement for ABPM or AOBPM certification for the program director. Exceptions are made on a case-by-case basis. In these cases, the Committee considers physicians with certification in a specialty recognized by the American Board of Medical Specialties or AOA who have demonstrated experience in the field of occupational and environmental medicine through: at least three years of administrative experience; significant peer-reviewed publications; or, acknowledged work in the field.
Public Health and Genera Preventive Medicine	 I 2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Preventive Medicine or by the American Osteopathic Board of Preventive Medicine, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	Frequently Asked Questions
	Must the program director have current certification in public health and general preventive medicine? [Program Requirement: 2.5.a.]
	While it is desirable for the program director to have current certification in public health and general preventive medicine, individuals with current certification in either aerospace medicine or occupational medicine can be considered. In such circumstances, there should be evidence of other qualifications in public health and general preventive medicine, including administrative experience, peer-reviewed publications, and/or acknowledged work in the specialty.
	What specialty qualifications are acceptable to the Review Committee if the program director does not

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	have current certification by the ABPM or the American Osteopathic Board of Preventive Medicine (AOBPM)? [Program Requirement: 2.5.a.]
	 In rare and unusual circumstances, the Review Committee will consider an exception to the requirement for ABPM or AOBPM certification for the program director. Exceptions are made on a case-by-case basis. In these cases, the Committee considers physicians with certification in a specialty recognized by the American Board of Medical Specialties or AOA who have demonstrated experience in the field of public health and general preventive medicine through: at least three years of administrative experience; significant peer-reviewed publications; or, acknowledged work in the field.
Psychiatry	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Psychiatry and Neurology (ABPN) or by the American Osteopathic Board of Neurology and Psychiatry, or specialty qualifications that are acceptable to the Review Committee. and, ^(Core)
Addiction Psychiatry	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Psychiatry and Neurology (ABPN) or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem AOA certification acceptable, certification in this subspecialty is not offered by a certifying board of the AOA]
	2.4.a.1. The Review Committee accepts only ABPN certification in the subspecialty. (Core)
	2.4.b. The program director must demonstrate ongoing clinical activity. (Core)
	Frequently Asked Questions Does the Review Committee grant waivers to the requirement for program director certification by the American Board of Psychiatry and Neurology (ABPN)? [Program Requirement: 2.4.a.]
	No, the Review Committee does not grant waivers to this requirement and will withhold accreditation of new programs that are not led by ABPN-certified addiction psychiatrists.
Child and	2.4.a. The program director must possess current certification in the subspecialty for which

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
Adolescent Psychiatry	they are the program director by the American Board of Psychiatry and Neurology (ABPN) or by the American Osteopathic Board of Neurology and Psychiatry (AOBPN), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	Frequently Asked Questions Can a current fellow hold the position of associate program director? [Program Requirement: 2.4.]
	No. Fellows cannot hold this position, as they are not eligible for certification in the subspecialty until completion of the program. American Board of Psychiatry and Neurology (ABPN) certification in child and adolescent psychiatry is a requisite qualification for the position.
Consultation-Liaison Psychiatry	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Psychiatry and Neurology (ABPN) or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem AOA certification acceptable, certification in this subspecialty is not offered by a certifying board of the AOA]
	2.4.a.1. The Review Committee accepts only ABPN certification in the subspecialty. (Core)
	Frequently Asked Questions
	Does the Review Committee grant waivers to the requirement for the program director's certification by the American Board of Psychiatry and Neurology (ABPN)? [Program Requirement: 2.4.a.1.]
	No, the Review Committee does not grant waivers to this requirement and will withhold accreditation of new programs that are not led by ABPN-certified consultation-liaison psychiatrists.
Forensic Psychiatry	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Psychiatry and Neurology (ABPN) or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem AOA certification acceptable, certification in this subspecialty is not offered by a certifying board of the AOA]

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.a.1. The Review Committee accepts only ABPN certification in the subspecialty. (Core)
	2.4.b. The program director must demonstrate ongoing clinical activity. (Core)
	Frequently Asked Questions Does the Review Committee grant waivers to the requirement for the program director's certification by the American Board of Psychiatry and Neurology (ABPN)? [Program Requirement: 2.4.b.]
	No, the Review Committee does not grant waivers to this requirement and will withhold accreditation of new programs that are not led by ABPN-certified forensic psychiatrists.
Geriatric Psychiatry	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Psychiatry and Neurology (ABPN) or by the American Osteopathic Board of Neurology and Psychiatry (AOBNP), or subspecialty qualifications that are acceptable to the Review Committee. and, ^(Core)
	2.4.b. The program director must demonstrate ongoing clinical activity. (Core)
	Frequently Asked Questions Does the Review Committee grant waivers to the requirement for the program director's certification by the American Board of Psychiatry and Neurology (ABPN) or the American Osteopathic Board of Neurology and Psychiatry (AOBNP)? [Program Requirement: 2.4.a.]
	No, the Review Committee does not grant waivers to this requirement and will withhold accreditation of new programs that are not led by ABPN- or AOBNP-certified geriatric psychiatrists.
Radiation Oncology	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Radiology or by the American Osteopathic Board of Radiology, or specialty qualifications that are acceptable to the Review Committee.
	2.5.a.1. The program director must actively participate in Maintenance of Certification in radiation oncology through the American Board of Radiology or the American Osteopathic Board of Radiology. (Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.5.c. The program director should be an active faculty member at the primary or at a participating clinical site. ^(Detail)
	2.5.c.1. If at a participating site, the program director should be readily available to residents as needed. ^(Detail)
Surgery	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Surgery or by the American Osteopathic Board of Surgery, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	Specialty-Specific Background and Intent: Sponsoring Institutions considering candidates for appointment as program director holding qualifications equivalent to those of the American Board of Surgery or the American Osteopathic Board of Surgery (e.g., Royal College of Physicians and Surgeons Canada) may submit a request for consideration and approval of qualifications to the executive director of the Review Committee. In accordance with Program Requirement II.A.4.a).(16) all requests must be co-signed by the DIO.
	There may be situations in programs when a qualified program director cannot be immediately appointed or when a temporary absence of the permanent program director is anticipated. In situations where an interim program director is needed as a temporizing measure to provide stability to a program, a request should be entered into ADS, and "interim" chosen as the term of appointment. Included in the submission of the request for approval, the institution/program will be required to submit an action plan outlining the support (e.g., institutional, division, department, and program) that will be provided to the interim program director, the plan for recruitment or placement of a qualified permanent program director, and the anticipated timeline until such placement. The program will be expected to submit a progress report six months following the request for approval of the interim program director has not been appointed and approved by the Review Committee. Instructions for the submission of an interim program director may be found at: https://www.acgme.org/Specialties/Documents-and-Resources/pfcatid/24/Surgery .
	2.5.c. The program director must demonstrate scholarly activity in at least one of the areas delineated in the Scholarship section of this document. ^(Detail)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Specialty-Specific Background and Intent: The Committee recommends that the program director's scholarly activities be reflective of the institution's and program's scholarly environment, and should align with the program's mission and aims.
Complex General Surgical Oncology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Surgery or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	2.4.b. The program director must possess acceptable qualifications include successful completion of a surgical oncology program sponsored by the Society of Surgical Oncology or a complex general surgical oncology program accredited by the ACGME. ^(Core)
	Subspecialty-Specific Background and Intent: As a senior leader and role model, the program director is expected to be an expert in the specific field of the program, and is expected to be actively engaged in the practice of surgery at the clinical site where the program is located. Current board certification is the minimum benchmark of expertise. However, the Review Committee recognizes that Sponsoring Institutions may wish to appoint physicians with board certification in specialties other than complex general surgical oncology (e.g., head and neck surgeons, colon and rectal surgeons, etc.) as program directors. The Review Committee will review requests for appointment and the qualification of these individuals individually.
	In order to be prepared to function as a new program director, an individual should already have a comprehensive understanding of and ability in educational and evaluation methods, active experience in managing and administering a complex organization/environment, and leadership and communication skills. It is recommended that individuals appointed as new program directors should have served for at least five years as a GME faculty member, and when possible, have at least two years of experience at the institution at which he or she is being appointed as program director and have served in a GME leadership capacity for at least one year.

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
Pediatric Surgery	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Surgery or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	2.4.b. The program director must be licensed to practice medicine in the state where the program is located. ^(Core)
	2.4.c. The program director must demonstrate scholarly activity in at least one of the areas listed in section 4.14. ^(Detail)
	2.4.c.1. Program directors must demonstrate ongoing peer-reviewed scholarship. (Core)
	2.4.c.1.a. Scholarship should include at least three peer-reviewed scholarly projects over the most recent five-year period, or other scholarship acceptable to the Review Committee. ^(Detail)
	2.4.d. The program director must demonstrate at least five years of practice after completion of a pediatric surgery fellowship. ^(Core)
	2.4.e. The program director must demonstrate at least two years of prior experience in graduate medical education, as a site director, program director, associate program director in a general surgery program, or another position of responsibility in a residency/fellowship program. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Subspecialty-Specific Background and Intent: The Review Committee believes the training of pediatric surgery fellows is a complex undertaking, and as such, the accreditation requirements are extensive. Individuals who take on the role to direct such programs must already be a respected member of the medical staff in their Sponsoring Institution, be senior members of the faculty, and have reached a stage in their academic practices that enables them to truly devote the time and effort required to oversee a high quality program. New program directors must have a comprehensive understanding of, and ability in, educational and evaluation methods, active experience in managing and administering a complex organization, and leadership and communication skills. In addition to the experiential requirements, programs are advised to appoint new program directors who have also served at least two years at the Sponsoring Institution, and where applicable, have been promoted or be eligible for promotion to the position of Associate Professor.
	In circumstances where a program director change is complicated by there being no qualified successor or the Sponsoring Institution has not identified a permanent successor, Sponsoring Institutions may request approval of an "interim" program director. Sponsoring Institutions requesting approval of an interim program director will be asked to submit an action plan outlining institutional support for the interim program director, the plan for the recruitment/placement of a permanent program director, and will be asked to provide a progress report to the Review Committee within six months from the date of appointment.
	It is important to note that while the Review Committee understands there are a multitude of reasons for program leadership change, programs are encouraged to establish a leadership succession plan that ensures continuity of leadership and program stability.
	Appointment of an associate program director, with adequate support and protected time, is encouraged to provide the individual an opportunity to gain the experience needed to learn how to direct a pediatric surgery fellowship program.
Surgical Critical Care	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Surgery or by the American Osteopathic Board of Surgery, or subspecialty qualifications that are acceptable to the Review Committee. (Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.b. The program director must possess unrestricted credentials and licensure to practice medicine at the primary clinical site. ^(Core)
	2.4.c. The program director must possess responsibility to direct or co-direct one or more of the critical care units in which the clinical aspects of the educational program take place, and personally supervise and teach surgery and surgical critical care fellows in that unit. ^(Core)
Vascular Surgery - Integrated	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Surgery or by the American Osteopathic Board of Surgery, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
Vascular Surgery - Independent	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Surgery or by the American Osteopathic Board of Surgery, or subspecialty qualifications that are acceptable to the Review Committee. (Core)
	2.4.b. The program director must possess current medical licensure and appropriate medical staff appointment. ^(Core)
	2.4.c. The program director must demonstrate ongoing clinical activity. (Core)
Thoracic Surgery - Integrated	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Thoracic Surgery or by the American Osteopathic Board of Surgery, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.c. The program director must have documented experience educating thoracic surgery residents/fellows; ^(Core)
	2.5.d. The program director must demonstrate documented participation in a national thoracic surgery educational association (e.g., the Thoracic Surgery Directors Association). ^(Core)
	2.5.e. The program director must have documented formal faculty development activities in education and teaching, such as participation at local and national program director workshops and other educational activities. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Specialty-Specific Background and Intent: The Review Committee feels that the training of thoracic surgery residents/fellows is a complex undertaking and the accreditation requirements are extensive. Individuals pursuing a program director role must be sufficiently prepared to take on the role and have the support of the department and Sponsoring Institution to devote the time and effort required to oversee a high-quality thoracic surgery program. Therefore, the Review Committee suggests that new program director candidates should have a minimum of five years' experience as a faculty member in graduate medical education and some experience as an associate program director or other residency/fellowship program leadership experience. A letter of support outlining the Sponsoring Institution's plan for mentoring and providing appropriate resources should accompany requests for approval of program director candidates who do not have the minimum requisite experience. Sponsoring Institutions submitting a program director candidate who is not board certified by the American Board of Thoracic Surgery (ABTS) or American Osteopathic Board of Surgery (AOBS) must provide the candidate's credentials and letter(s) of support from the institution's graduate medical education and thoracic surgery clinical leadership (e.g., Department Chair, Section Chief).
Thoracic Surgery - Independent	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Thoracic Surgery or by the American Osteopathic Board of Surgery, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. The program director must have documented experience educating thoracic surgery residents/fellows; ^(Core)
	2.4.c. The program director must demonstrate documented participation in a national thoracic surgery educational association (e.g., the Thoracic Surgery Directors Association). ^(Core)
	2.4.d. The program director must demonstrate documented formal faculty development activities in education and teaching, such as participation at local and national program director workshops and other educational activities. ^(Core)
	Specialty-Specific Background and Intent: The Review Committee feels that training thoracic surgery residents/fellows is a complex undertaking and the accreditation requirements are extensive. Individuals pursuing a program director role must be sufficiently prepared to take on the role and have

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	the support of the department and Sponsoring Institution to devote the time and effort required to oversee a high-quality thoracic surgery program. Therefore, the Review Committee suggests that new program director candidates should have a minimum of five years' experience as a faculty member in graduate medical education and some experience as an associate program director or other residency/fellowship program leadership experience. A letter of support outlining the Sponsoring Institution's plan for mentoring and providing appropriate resources should accompany requests for approval of program director candidates who do not have the minimum requisite experience. Sponsoring Institutions submitting a program director candidate who is not board certified by the American Board of Thoracic Surgery (ABTS) or American Osteopathic Board of Surgery (AOBS) must provide the candidate's credentials and letter(s) of support from the institution's graduate medical education and thoracic surgery clinical leadership (e.g., Department Chair, Section Chief).
Congenital Cardiac Surgery	 2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Thoracic Surgery, or subspecialty qualifications that are acceptable to the Review Committee. and, ^(Core) [Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	2.4.b. The program director must demonstrate active participation in scholarly activity by one or more of the following: ^(Core)
	 2.4.b. peer-reviewed funding; ^(Detail) 2.4.b. publication of original research or review articles in peer-reviewed journals or chapters in textbooks; ^(Detail)
	2.4.b. publication or presentation of case reports or clinical series at local, regional, or national professional and scientific society meetings; or, ^(Detail)
	2.4.b. participation in national committees or educational organizations. (Detail)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.c. The program director must possess documented experience in education of congenital cardiac surgery fellows. ^(Core)
	2.4.c.1. This should include a minimum of five years' experience as a residency or fellowship faculty member and/or associate program director. ^(Detail)
	Subspecialty-Specific Background and Intent: The training of congenital cardiac surgery fellows is a complex undertaking and the accreditation requirements are extensive. Individuals pursuing a program director role require sufficient preparation to take on the position as well as the support of the department and Sponsoring Institution to devote the time and effort required to oversee a high-quality program. If a program requests to appoint a qualified individual with less than five years' experience, the program and Sponsoring Institution are encouraged to develop a mentoring plan and provide appropriate developmental resources for the new program director.
Transitional Year	2.5.a. The program director must possess current certification by a member board of the American Board of Medical Specialties or by a certifying board of the American Osteopathic Association, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	Frequently Asked Questions
	How does the Review Committee define "documented educational and/or administrative experience"? [Program Requirement: 2.5.]
	Educational and administrative experience can include time spent as a faculty member in an ACGME- accredited or AOA-approved residency program, as well as time as a fellow in a subspecialty residency program.
Urology	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Urology or by the American Osteopathic Board of Surgery, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.5.c. The program director should demonstrate scholarly activity. (Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
Pediatric Urology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Urology or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
Multidisciplinary Subspec	ialties
Addiction Medicine (subspecialty of Anesthesiology, Emergency Medicine, Family Medicine, Internal Medicine, Obstetrics and Gynecology, Pediatrics, Preventive Medicine, or Psychiatry)	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Preventive Medicine (ABPM) or by the American Osteopathic Board of Family Physicians (AOBFP), American Osteopathic Board of Internal Medicine (AOBIM), or American Osteopathic Board of Neurology and Psychiatry (AOBNP), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	 Frequently Asked Questions What are the expectations for certification if the program director does not yet have American Board of Preventive Medicine (ABPM) certification in addiction medicine? [Program Requirement: 2.4.a.] The Review Committees recognize that program directors may not have had the opportunity to obtain certification in addiction medicine from the ABPM during the initial application phase. Therefore, any of the following are acceptable through June 30, 2022: Certification by the American Board of Addiction Medicine (ABAM); or,
	 Subspecialty American Board of Medical Specialties (ABMS) certification in addiction psychiatry, medical toxicology, or pain medicine; or, Subspecialty American Osteopathic Association (AOA) certification in addiction medicine, medical toxicology, pain management, or pain medicine. After July 1, 2022, the program director must be certified in addiction medicine by the ABPM.

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	Note: Certification in addiction medicine by a certifying board of the American Osteopathic Association also does and will continue to meet this certification requirement.
Brain Injury Medicine (subspecialty of Child Neurology, Neurology, Physical Medicine and Rehabilitation, or Psychiatry)	 2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Physical Medicine and Rehabilitation or the American Board of Psychiatry and Neurology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core) [Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty] 2.4.b. The program director must demonstrate ongoing education and acquisition of skills and knowledge in brain injury medicine and related fields. ^(Core) Subspecialty-Specific Background and Intent: The Review Committee recommends that an individual spend two years as a faculty member in an ACGME-accredited neurology, physical medicine and rehabilitation, or psychiatry residency or fellowship program prior to taking on the role and responsibilities of program director. This would allow an individual to gain graduate medical education expertise, as well as institutional credibility to direct the fellowship and ensure compliance with the Program Requirements.
Clinical Informatics (subspecialty of Anesthesiology, Radiology, Emergency Medicine, Family Medicine, Internal Medicine, Medical Genetics, Pathology, Pediatrics, or Preventive Medicine)	 2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by a member board of the American Board of Medical Specialties or by a certifying board of the American Osteopathic Association, or subspecialty qualifications that are acceptable to the Review Committee; ^(Core) 2.4.b. The program director must have least three years of experience in clinical informatics; ^(Core) 2.4.c. The program director must have experience in clinical informatics education. ^(Core) Frequently Asked Questions Can a program director hold an administrative medical license as allowed by their respective state?

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	[Program Requirement: 2.4.a.]
	The program director must be a physician; however, if medical staff appointment to practice clinical informatics is permitted with an administrative license, then it is acceptable.
Dermatopathology	2.4.a. The program director must possess current certification in the subspecialty for which
(subspecialty of Dermatology or Pathology)	they are the program director by the American Board of Dermatology or American Board of Pathology or by the American Osteopathic Board of Dermatology or American Osteopathic Board of Pathology, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. The program director must have at least three years of post-fellowship experience in resident or fellow education. ^(Core)
Urogynecology and Reconstructive Surgery (Formerly Female Pelvic Medicine and Reconstructive Surgery) (subspecialty of Obstetrics and	2.4.b. The program director must have completed a urogynecology and reconstructive pelvic surgery fellowship at least five years prior to appointment as the program director, or possess qualifications
Gynecology or Urology)	acceptable to the Review Committee. ^(Core) Subspecialty-Specific Background and Intent: The Committee believes five years of experience as a
	urogynecology and reconstructive pelvic surgery physician provides a new program director with the clinical, educational, research, and administrative background needed to effectively lead a program. The Committee will consider a candidate for program director who has fewer than five years of experience provided the faculty member demonstrates clinical and scholarly expertise in urogynecology and reconstructive pelvic surgery, is exceptionally well-prepared and positioned to take on this leadership position, and has mentorship and support by at least one faculty member that can be documented.
	2.4.c. The program director must demonstrate clinical and scholarly activity in urogynecology and reconstructive pelvic surgery by publication of a minimum of one original research or review article in a

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	peer-reviewed journal within the past three years and at least one of the following within the past three years: (Core)
	• peer-reviewed funding; (Core)
	 invited or research presentation(s) at regional/national/international professional or scientific society meeting(s); or, ^(Core)
	• participation on a committee of a national or international professional, scientific, or educational organization. (Core)
Geriatric Medicine	2.4.a. The program director must possess current certification in the subspecialty for which
(subspecialty of Family Medicine or Internal Medicine)	they are the program director by the American Board of Internal Medicine (ABIM), American Board of Family Medicine (ABFM) or by the American Osteopathic Board of Internal Medicine (AOBIM), American Osteopathic Board of Family Physicians (AOBFP), or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. The Review Committee only accepts current ABIM, ABFM, AOBIM, or AOBFP certification in geriatric medicine. ^(Core)
	2.4.b. The program director must have at least three years of documented educational and/or administrative experience in an ACGME-accredited family medicine or internal residency or geriatric medicine fellowship. (Core)
Hand Surgery	2.4.a. The program director must possess current certification in the subspecialty for which
(subspecialty of Orthopaedic Surgery, Plastic Surgery, or Surgery)	they are the program director by the American Board of Orthopaedic Surgery, the American Board of Plastic Surgery, or the American Board of Surgery or by the American Osteopathic Board of Orthopaedic Surgery, the American Osteopathic Board of Plastic Surgery, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. All program directors appointed after the effective date of these requirements must have current certification in orthopaedic surgery, plastic surgery, or surgery by an American Board of Medical Specialties (ABMS) board or AOA board, as well as subspecialty certification in hand surgery. ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.b. Prior to appointment, the program director must demonstrate completion of an ACGME-accredited or American Osteopathic Association (AOA)-approved hand surgery fellowship; ^(Core)
	2.4.c. Prior to appointment, the program director must possess at least three years of clinical practice experience in hand surgery; ^(Core)
	2.4.d. Prior to appointment, the program director must demonstrate three years as a faculty member in an ACGME-accredited or AOA-approved orthopaedic surgery, plastic surgery, or surgery residency or hand surgery fellowship program. ^(Core)
	Subspecialty-Specific Background and Intent: Current program directors of ACGME-accredited hand surgery fellowship programs are exempt from II.A.3.a).(1).(a)-(c). Program directors appointed after the effective date of these requirements are expected to comply with these requirements.
	2.4.e. Prior to appointment, the program director must demonstrate evidence of periodic updates of knowledge and skills to discharge the roles and responsibilities for teaching, supervision, and formal evaluation of fellows. ^(Core)
	Frequently Asked Questions What specialty qualifications are acceptable to the Review Committee? [Program Requirement: 2.4.a.]
	All newly-appointed program directors must have subspecialty certification in hand surgery from the American Board of Surgery (ABS), American Board of Orthopaedic Surgery (ABOS), or American Board of Plastic Surgery (ABPS). Current program directors who are eligible are strongly encouraged to obtain subspecialty certification.
Hospice and Palliative Medicine	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Anesthesiology, Emergency Medicine,
(subspecialty of Anesthesiology, Family Medicine, Internal	Family Medicine, Internal Medicine, Obstetrics and Gynecology, Pediatrics, Physical Medicine and Rehabilitation, Psychiatry and Neurology, Radiology, or Surgery or by a certifying board of the

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	American OsteopathicAssociation , or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. The program director must have an active clinical practice in hospice and palliative medicine. (Core)
	2.4.c. The program director must have a record of involvement in education and scholarly activities, which includes mentoring fellows (i.e., guiding fellows in the acquisition of competence in the clinical, teaching, research and advocacy skills pertinent to the discipline), serving as a clinical supervisor in an inpatient or outpatient setting, developing curricula, and/or participating in didactic activities. ^(Core)
	2.4.d. The program director must have served a minimum of two years in a clinical practice of hospice and palliative medicine. ^(Core)
	2.4.e. The program director must have at least two years of documented educational and/or administrative experience in an ACGME-accredited hospice and palliative medicine program. ^(Core)
Internal Medicine- Pediatrics	2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of Internal Medicine (ABIM) or the American
(Combined program for Internal Medicine and Pediatrics)	Osteopathic Board of Internal Medicine, and the American Board of Pediatrics (ABP) or the American Osteopathic Board of Pediatrics, or specialty qualifications that are acceptable to the Review Committee. ^(Core)
Medical Toxicology	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Emergency Medicine, the American Board
(subspecialty of Emergency Medicine or Preventive Medicine)	of Pediatrics, or the American Board of Preventive Medicine, or by the American Osteopathic Board of Emergency Medicine, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.a.1. This must include at least three years' experience as a core physician faculty member in an ACGME-accredited emergency medicine, pediatrics, preventive medicine, or medical toxicology program; ^(Core)

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.b. The program director must have current clinical activity in the practice of medical toxicology; ^(Core)
	2.4.c. The program director must have active involvement in scholarly activity. (Core)
	2.4.d. The program director should demonstrate demonstrated participation in academic societies and educational programs designed to enhance his or her educational and administrative skills. ^(Core)
Molecular Genetic Pathology (subspecialty of Medical Genetics and Genomics or Pathology)	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Medical Genetics and Genomics or the American Board of Pathology or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty]
	2.4.b. The program director must have at least three years of active participation as a specialist in molecular genetic pathology following completion of all graduate medical education. ^(Core)
	2.4.c. The program director must meet the requirements for continuing certification by the American Board of Medical Genetics and Genomics (ABMGG) and/or the American Board of Pathology (ABPath). ^(Core)
	Frequently Asked Questions
	Do program directors holding time-limited molecular genetic pathology certifications need to meet the requirements for recertification by the American Board of Medical Genetics and Genomics and/or the American Board of Pathology? [Program Requirement: 2.4.c.]
	Yes. Program directors holding time-limited molecular genetic pathology certification must meet the requirements for recertification.
	By contrast, program directors with time-unlimited molecular genetic pathology certificates and those diplomates holding certification with no expiration date or maintenance of certification requirements

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	only need to maintain certification that is active and in good standing, as the requirement for recertification is not applicable to these individuals.
Neurocritical Care (Subspecialty of Neurology and Neurological Surgery	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Anesthesiology, Emergency Medicine, Internal Medicine, or Psychiatry and Neurology-or subspecialty qualifications that are acceptable to the Review Committee; ^(Core)
	2.4.a.1. Other qualifications acceptable to the Review Committee include American Board of Neurological Surgery (ABNS) certification in neurological surgery and ABNS Recognized Focused Practice in neurocritical care. ^(Core)
	[Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty.]
	Subspecialty-Specific Background and Intent: The ABMS boards that will issue this certification began offering the certification examination in October 2021. Prior to July 1, 2026, the Review Committee will consider alternate qualifications for individuals with certification in anesthesiology, emergency medicine, internal medicine, or neurology by a board referenced in II.A.3.b) and completion of fellowship education in neurocritical care. Beginning July 1, 2026, it is the expectation of the Review Committee that these individuals will be certified in neurocritical care by one of the boards specified in the requirement.
	Effective immediately, the Review Committee expects individuals with certification in neurological surgery to have Recognized Focused Practice in neurocritical care by the American Board of Neurological Surgery.
	2.4.b. The program director must include status as a clinically active faculty member, with no less than 25 percent of responsibilities devoted to the practice and administration in neurocritical care. ^(Core)
	2.4.c. The program director must include a minimum of three years' experience as an attending physician in neurocritical care. ^(Core)
Neuroendovascular	

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
Intervention (subspecialty of Child Neurology, Neurological Surgery, Neurology, or Radiology)	 2.4.a. The program director must possess current certification in the specialty by the American Board of Neurological Surgery, Psychiatry and Neurology, Radiology, or the American Osteopathic Board of Neurological Surgery, Neurology and Psychiatry, or Radiology, or possess qualifications judged acceptable to the Review Committee. (^{Core}) [Note that while the Common Program Requirements deem certification by a member board of the American Board of Medical Specialties (ABMS) or a certifying board of the American Osteopathic Association (AOA) acceptable, there is no ABMS or AOA board that offers certification in this subspecialty] 2.4.b. This must include special expertise in neuroendovascular interventions. (^{Core}) 2.4.c. The program director must be appointed to the faculty in the departments of neurological surgery, radiology, and child neurology, or neurology. (^{Core}) 2.4.d. The program director must devote at least 50 percent of their practice to neuroendovascular intervention. (^{Core})
Neuromuscular Medicine (subspecialty of Child Neurology, Neurology, or Physical Medicine and Rehabilitation)	 2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Psychiatry and Neurology (ABPN) or the American Board of Physical Medicine and Rehabilitation (ABPMR) or subspecialty qualifications that are acceptable to the Review Committee. ^(Core) [Note that while the Common Program Requirements deem certification by a certifying board of the American Osteopathic Association (AOA) acceptable, there is no AOA board that offers certification in this subspecialty] 2.4.a.1. The Review Committee does not allow other subspecialty qualifications for program directors. ^(Core) Frequently Asked Questions Does the program director need to have ABPN certification in neuromuscular medicine? [Program Requirement: 2.4.a.] The program director must have current certification in neuromuscular medicine by the ABPN or the

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	American Board of Physical Medicine and Rehabilitation (ABPMR).
Pain Medicine (subspecialty of Anesthesiology, Child Neurology, Neurology, or Physical Medicine and Rehabilitation)	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Anesthesiology, Physical Medicine and Rehabilitation, or Psychiatry and Neurology, the American Osteopathic Board of Anesthesiology, or a member board of the American Osteopathic Conjoint Pain Medicine Examination Committee, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	Subspecialty-Specific Background and Intent: This requirement refers to certification in the subspecialty of pain medicine and includes reference to all ABMS member boards and AOA certifying boards that offer this certification. It is recognized that some certifying boards may offer certification in pain medicine to individuals with primary certification in a specialty not listed in 2.4.a., and the requirement above should not be interpreted to mean that only individuals with primary certification by one of the boards listed above are eligible to serve as a program director of a pain medicine fellowship.
	to the subspecialty, including publications, the development of educational programs, or the conduct of research. (Core)
Pediatric Emergency Medicine (subspecialty of Pediatrics and Emergency Medicine)	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Emergency Medicine, the American Board of Pediatrics or by the American Osteopathic Board of Emergency Medicine, or the American Osteopathic Board of Pediatrics, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. The program director must have three years' experience as a clinician, teacher, and administrator in pediatric emergency medicine. ^(Core)
	Subspecialty-Specific Background and Intent: Qualifications other than pediatric emergency medicine certification by the American Board of Emergency Medicine (ABEM), American Osteopathic Board of Emergency Medicine (AOBEM), American Board of Pediatrics (ABP), or American Osteopathic Board of Pediatrics (AOBP) will be considered only in exceptional circumstances.

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
	2.4.c. The program director must possess a record of ongoing involvement in scholarly activities. (Core)
Sleep Medicine (subspecialty of Child Neurology, Internal Medicine, Neurology, Pediatrics, or Psychiatry)	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Family Medicine, Internal Medicine, Psychiatry and Neurology, Otolaryngology – Head and Neck Surgery, Pediatrics, or Psychiatry or by the American Osteopathic Board of Family Physicians, Internal Medicine, Neurology and Psychiatry, or Ophthalmology and Otolaryngology – Head and Neck Surgery, or subspecialty qualifications that are acceptable to the Review Committee. ^(Core)
	2.4.b. The program director should continue in his or her position for a length of time adequate to maintain continuity of leadership and program stability. ^(Detail)
	2.4.c. The program director must have at least three years of participation as an active faculty member in an ACGME-accredited education program. ^(Detail)
	Frequently Asked Questions Are the program director and key clinical faculty members of a sleep medicine fellowship required to hold current Board certification by a member board of the American Board of Medical Specialties (ABMS)? [Program Requirements: 2.4.a.]
	Yes. The Review Committee requires that the program director and key clinical faculty members be certified in sleep medicine. Only certification in sleep medicine by a member board of the ABMS will be acceptable.
	For all ACGME-accredited internal medicine sponsored programs, at least one key clinical faculty member must be certified in internal medicine or one of its subspecialties by the American Board of Internal Medicine.
Sports Medicine (subspecialty of Emergency Medicine, Family Medicine, Pediatrics, or Physical	2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Emergency Medicine, Family Medicine, Internal Medicine, Pediatrics, or Physical Medicine and Rehabilitation or by the American Osteopathic Board of Emergency Medicine, Family Physicians, Internal Medicine,

Specialty/Subspecialty Name	Specialty-Specific Requirements Referencing "Program Director Qualifications"
Medicine and Rehabilitation)	Neuromusculoskeletal Medicine, Pediatrics, or Physical Medicine and Rehabilitation, or subspecialty qualifications that are acceptable to the Review Committee. (Core)
Renabilitation) Undersea and Hyperbaric Medicine (subspecialty of Emergency Medicine or Preventive Medicine)	 2.4.a. The program director must possess current certification in the subspecialty for which they are the program director by the American Board of Emergency Medicine, American Board of Preventive Medicine, or by the American Osteopathic Board of Emergency Medicine, American Osteopathic Board of Family Physicians, American Osteopathic Board of Preventive Medicine, or subspecialty qualifications that are acceptable to the Review Committee. (Core) 2.4.b. This must include at least three years' experience as a physician faculty member in an ACGME-accredited program, as well as possession of adequate undersea and hyperbaric medicine experience judged to be acceptable by the Review Committee. (Core) 2.4.c. The program director's subspecialty expertise and qualifications must include current clinical
	 activity in the practice of undersea and hyperbaric medicine ^(Core) 2.4.d. The program director's subspecialty expertise and qualifications should include demonstrated participation in academic societies and educational programs designed to enhance his or her educational and administrative skills. ^(Core) Frequently Asked Questions Are there any considerations for military program director candidates in meeting the requirement for three years of experience as a physician faculty member in an ACGME-accredited program? [Program Requirement: 2.4.b.]
	Requirement: 2.4.b.] The Review Committee understands that military programs may experience difficulty in meeting this requirement due to deployment and other military staffing changes. Military programs experiencing t difficulty should contact the Review Committee staff for further instruction and consideration.

Fellowship Name	Specialty Specific Requirements Referencing "Program Director Qualifications"
Health Care Administration, Leadership, and Management	2.4.a. The program director must possess current certification by a member Board of the American Board of Medical Specialties or by a certifying board of the American Osteopathic Association, or subspecialty* qualifications that are acceptable to the Review Committee. ^{(Core}
	2.4.b. The program director must have experience of at least five years as a physician executive leader; ^(Core)
	2.4.c. The program director must have must include experience of at least five years (part-time or full-time) of medical practice. ^(Core)
	2.4.d. The program director should have include experience of at least three years as an educator (not necessarily specific to graduate medical education (GME)). ^(Core)
	2.4.d.1. A mentorship plan for the program director must be developed and implemented by the Sponsoring Institution if the program director has fewer than three years' experience as an educator at the time of appointment. ^(Core)
	Frequently Asked Questions What are examples of roles that would count toward the program director's required experience as a physician executive leader? [Program Requirement: 2.4.b.]
	A qualified program director will have at least five years of cumulative experience in any of a variety of executive roles within health systems, including but not limited to, those of a chief executive officer, president, chief medical officer, physician practice plan executive, chief quality officer, or medical director of a health care service line (inpatient or outpatient).
	What are examples of roles that would count toward the program director's required experience as an educator? [Program Requirement: 2.4.d.]
	A qualified program director will have at least three years of experience providing formal education to any type(s) of learner(s) in health care environments, or will be subject to an educational mentorship plan overseen by the administration of the Sponsoring Institution.