

# SES091: Review Committee for Thoracic Surgery Specialty Update

**Kelsey Sill, MHA**  
Associate Executive Director

# Conflict of Interest Disclosure

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Speaker: Kelsey Sill, MHA

## Disclosure

None of the speakers for this educational activity have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

# Objectives

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- Review Committee Overview
- Accreditation Activity
- Specialty Information
- Review Committee Updates
- ACGME Updates

# Review Committee Overview

# Review Committee Membership

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- All members are volunteers
- 6 members nominated by American Board of Thoracic Surgery (ABTS), American College of Surgeons (ACS), and American Medical Association (AMA)
  - Six-year term
- 1 public member
  - Six-year term
- 1 resident/fellow member
  - Two-year term
- 2 non-voting ex-officios from ABTS and ACS



# Review Committee Members

**Mark Iannettoni, MD, *Chair\****

ECU Health Medical Center

**Sandra Starnes, MD, *Vice Chair***

University of Cincinnati Medical Center

**Ammu Alvarez, MD, *Resident Member\****

Ohio State University Hospital

**Mark Swofford, PhD, *Public Member***

Optum Serve Health Services

**James Jagers, MD, *Incoming Chair***

University of Colorado

**Thomas Beaver, MD**

University of Florida

**K. Robert Shen, MD**

Mayo Clinic - Rochester

**Stephen Yang, MD**

Johns Hopkins University

**Cameron Wright, MD, *Ex-officio***

American Board of Thoracic Surgery

**Patrice Blair, DrPH, MPH, *Ex-officio***

American College of Surgeons

\*Term ends June 30, 2025

# Incoming Chair - Dr. Jaggers



- Review Committee chair beginning July 1, 2025
- Program Director, Congenital Cardiac Surgery Fellowship at University of Colorado

# Incoming Members

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**Sara J. Pereira, MD**

University of Utah

**Chi Chi Do-Nguyen, DO**

*Resident Member*

University of Michigan



# **What Does the Review Committee Do?**

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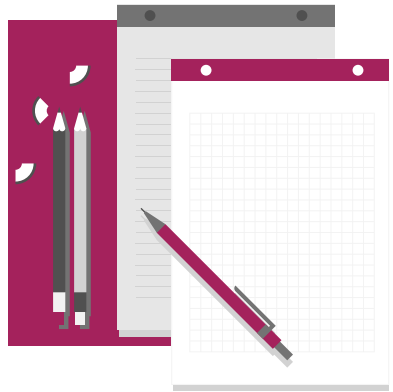
- Peer review
- Determination of a program's "substantial compliance" against a defined set of standards

## **How Does the Review Committee Do It?**

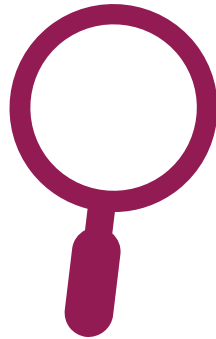
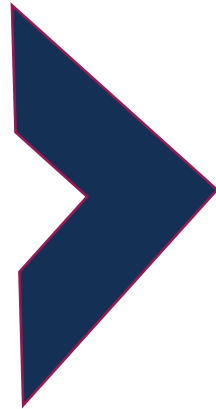
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- Review of program information in Accreditation Data System (ADS), response to citations, annual/multi-year Resident/Fellow and Faculty Surveys, graduate Case Log data, board pass rate data, Site Visit Reports

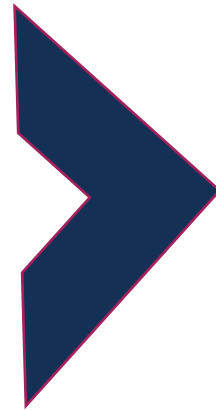
# Annual Data Review Cycle



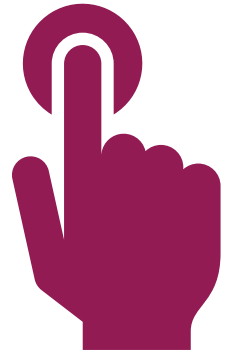
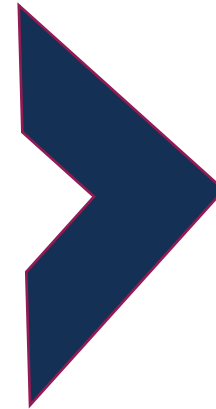
**Data Collection**  
(January -  
September)



**Executive  
Committee  
Review**  
(October -  
November)



**Review Committee  
Review and  
Decision**  
(December and  
March)



**Program  
Notification**

# Accreditation Activity

# Program Accreditation Status Breakdown

## 2023-2024 Academic Year

Specialty	Initial Accreditation	Continued Accreditation without Outcomes	Continued Accreditation	Continued Accreditation with Warning	Probationary Accreditation	Total
Thoracic Surgery - Independent	5	2	69	2	1	79
Thoracic Surgery - Integrated	3	9	22	1	1	36
Congenital Cardiac Surgery	2	3	12	0	0	17



ACGME

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# Program Complement

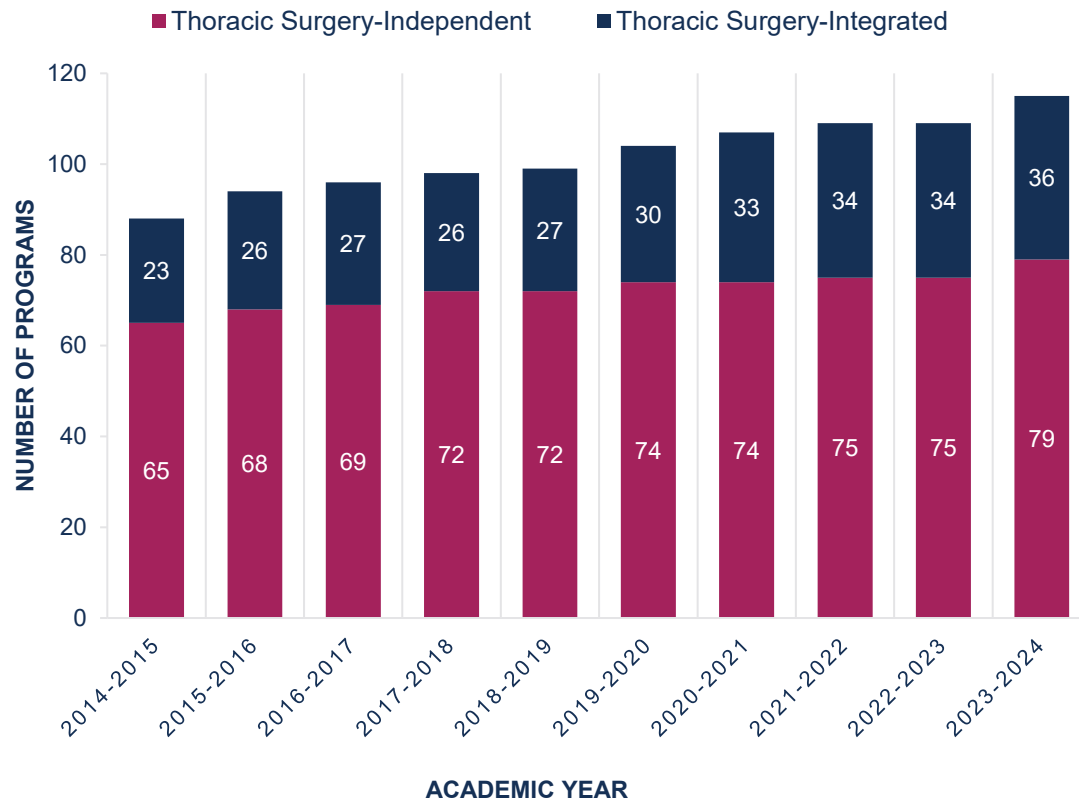
## 2023-2024 Academic Year

Specialty	Approved Complement	Filled Complement	Percentage Filled
Thoracic Surgery - Independent	323	254	78.6%
Thoracic Surgery - Integrated	336	249	74.1%
Congenital Cardiac Surgery	17	9	52.9%

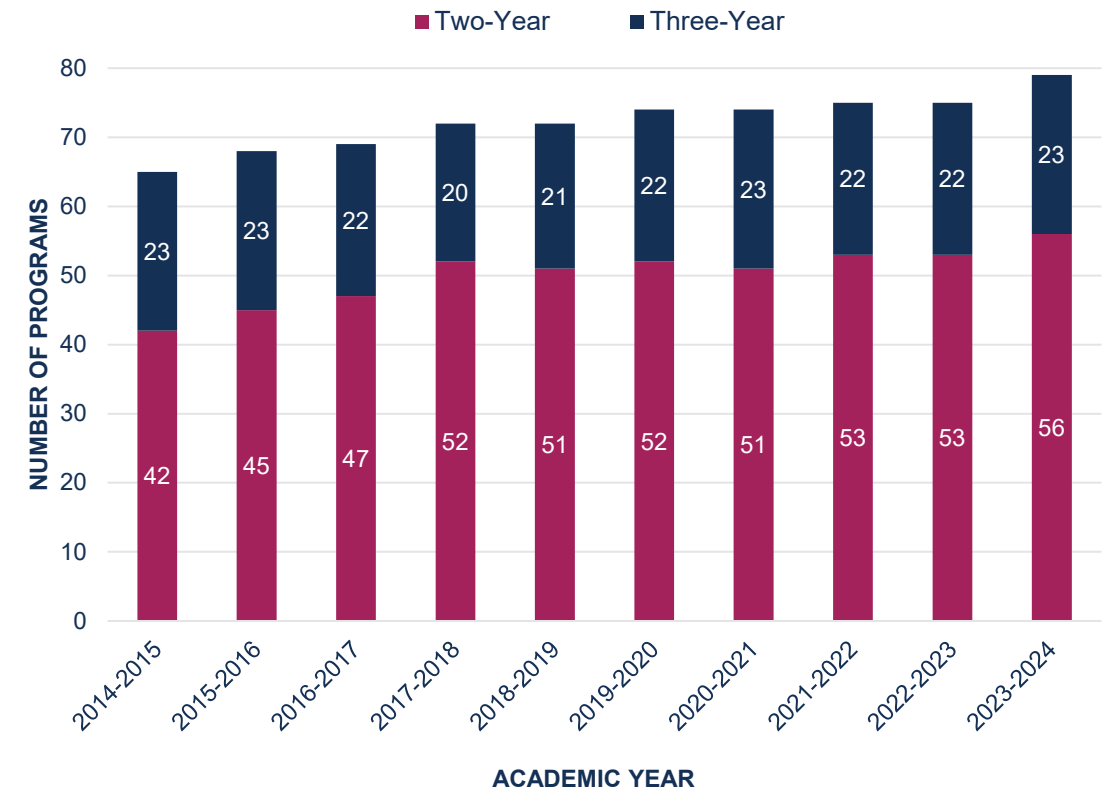


# Accredited Programs Ten-Year Trends

## ACCREDITED PROGRAMS

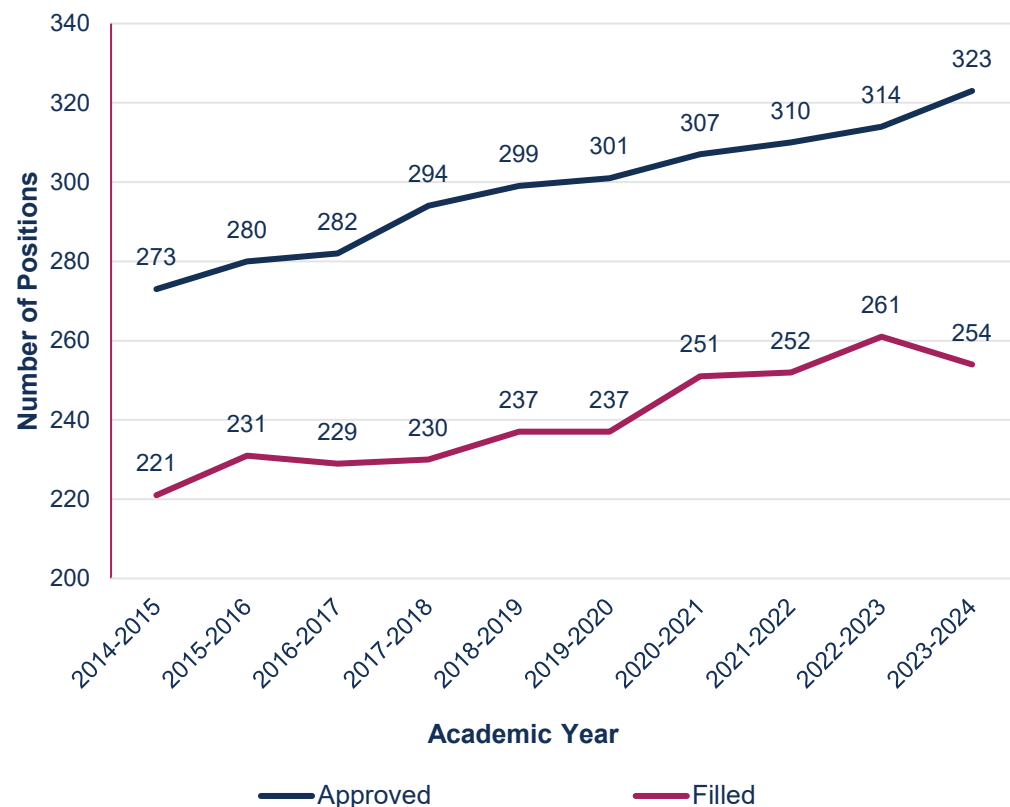


## INDEPENDENT PROGRAM FORMAT

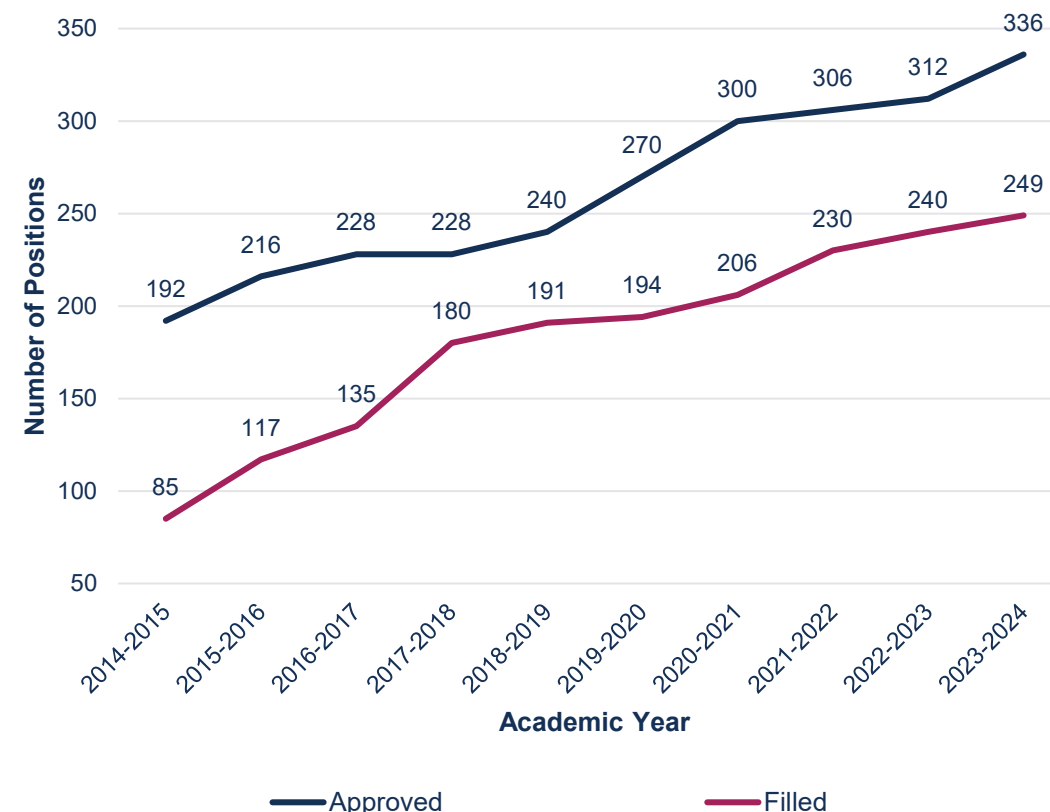


# Thoracic Surgery Complement Ten-Year Trends

## Thoracic Surgery-Independent

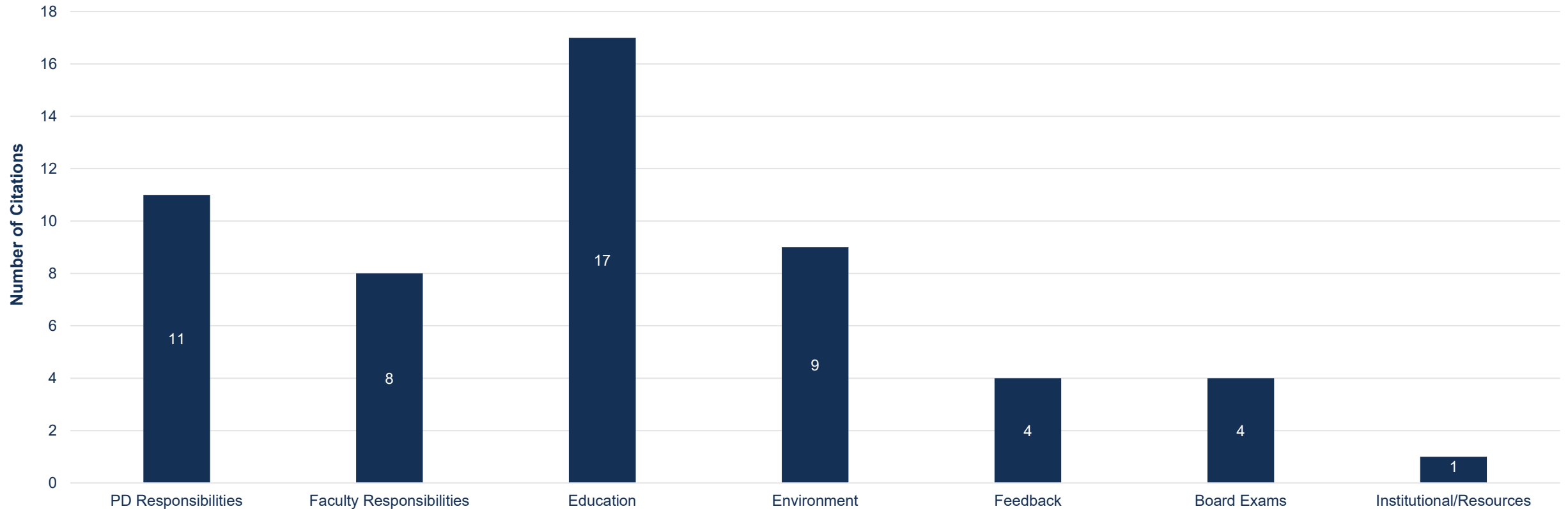


## Thoracic Surgery - Integrated



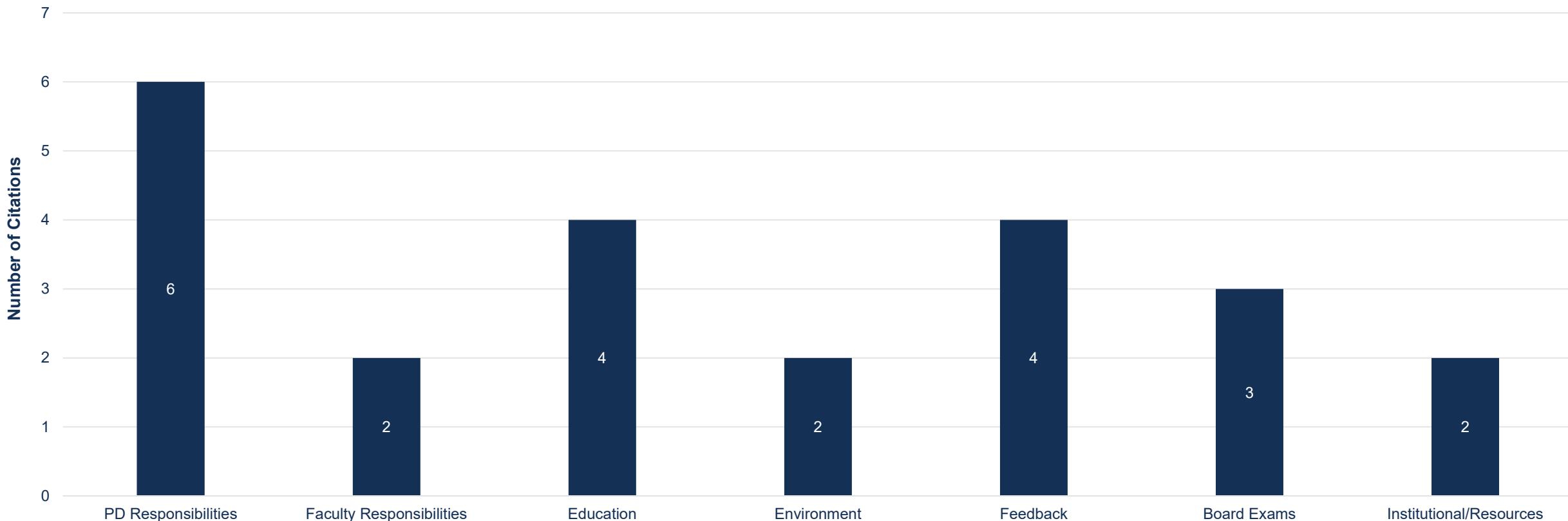
# Thoracic Surgery - Independent Citations

## 2023-2024 Academic Year



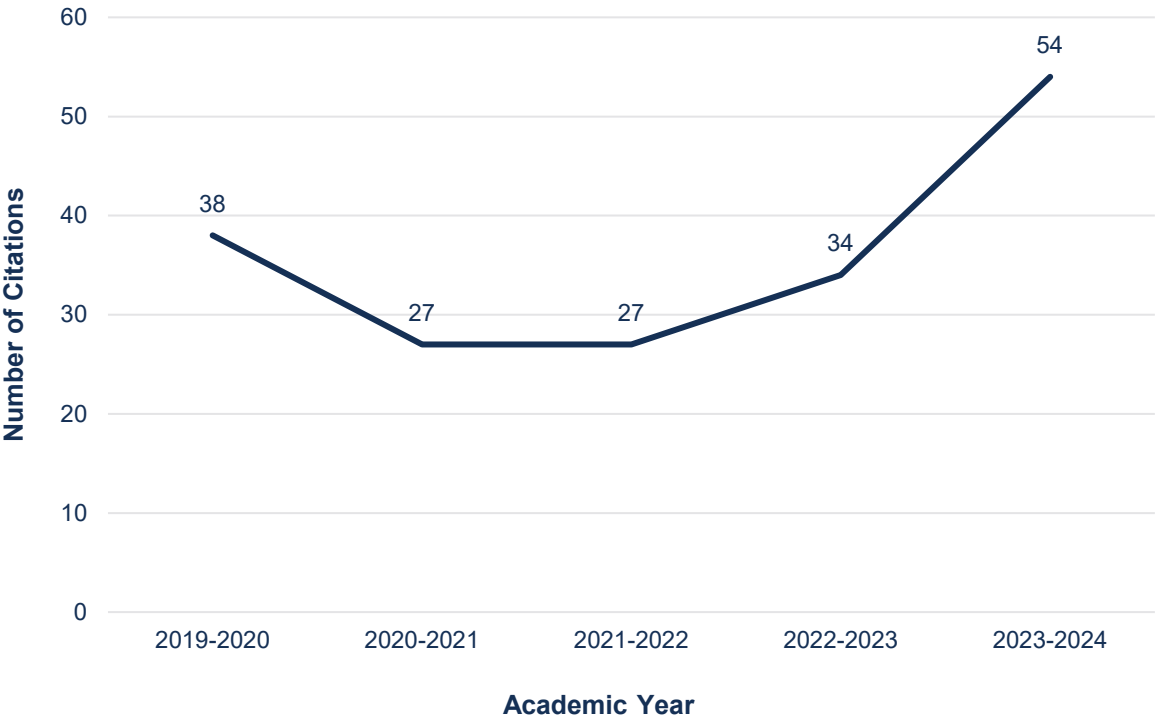
# Thoracic Surgery - Integrated Citations

## 2023-2024 Academic Year

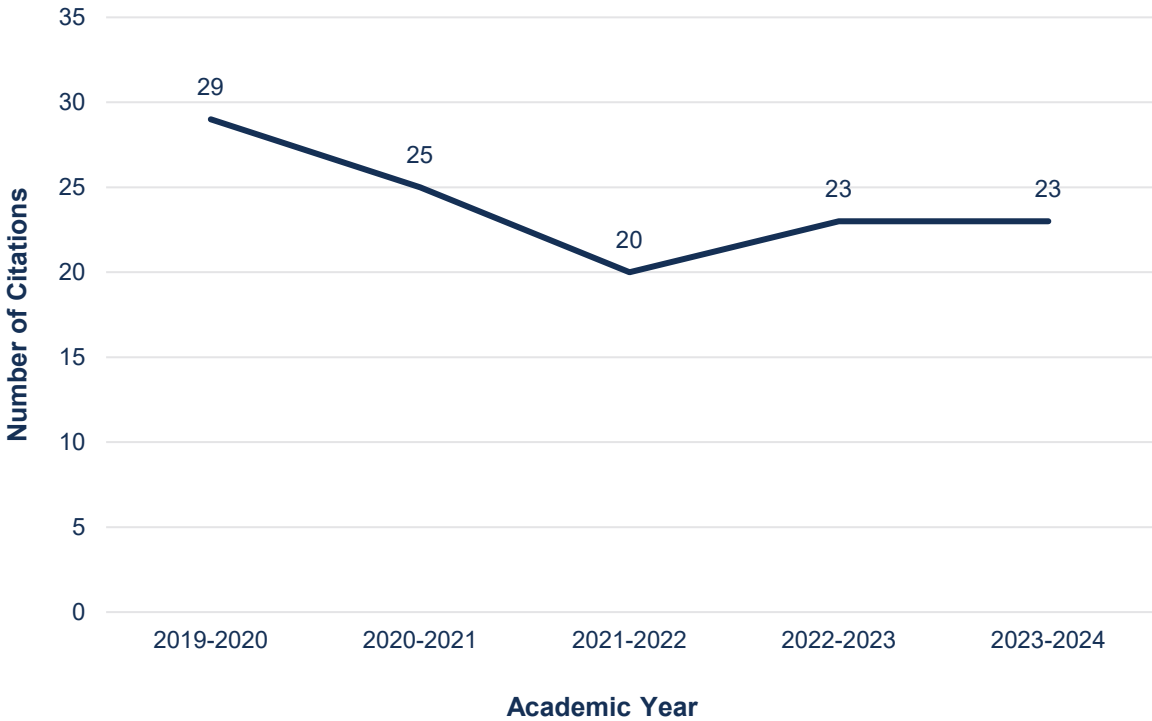


# Five-Year Citation Trends

Total Citations for Independent Programs



Total Citations for Integrated Programs





# Most Frequently Cited Requirements

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## **Operative Experience**

IV.B.1.b).(2) Residents/Fellows must be able to perform all medical, diagnostic, and surgical procedures considered essential for the area of practice. (Core)

## **Program Director Responsibilities**

II.A.4.a).(7) The Program Director must provide a learning and working environment in which residents/fellows have the opportunity to raise concerns, report mistreatment, and provide feedback in a confidential manner as appropriate, without fear of intimidation or retaliation; (Core)

## **Faculty Responsibilities**

II.B.2.c) Faculty members must demonstrate a strong interest in the education of residents/fellows, including devoting sufficient time to the educational program to fulfill their supervisory and teaching responsibilities; (Core)

# Most Frequently Cited Requirements

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## Professionalism of Faculty

II.B.2.a) Faculty members must be role models of professionalism; (Core)

## Feedback

V.A.1.a) Faculty members must directly observe, evaluate, and frequently provide feedback on resident/fellow performance during each rotation or similar educational assignment. (Core)

## 80 Hours

VI.F.1. Clinical and educational work hours must be limited to no more than 80 hours per week, averaged over a four-week period, inclusive of all in-house clinical and educational activities, clinical work done from home, and all moonlighting. (Core)

# Most Frequently Cited Requirements

## Board Pass Rate

V.C.3.a) For specialties in which the ABMS [American Board of Medical Specialties] member board and/or AOA [American Osteopathic Association] certifying board offer(s) an annual written exam, in the preceding three years, the program's aggregate pass rate of those taking the examination for the first time must be higher than the bottom fifth percentile of programs in that specialty. (Outcome)

V.C.3.c) For specialties in which the ABMS member board and/or AOA certifying board offer(s) an annual oral exam, in the preceding three years, the program's aggregate pass rate of those taking the examination for the first time must be higher than the bottom fifth percentile of programs in that specialty. (Outcome)

- Board pass rate will **change** every year
- Must be higher than fifth percentile or 80 percent

Specialty	ABMS Threshold for Written Exam	ABMS Threshold for Oral Exam
Thoracic Surgery - Independent	33.33%	8.75%
Thoracic Surgery - Integrated	76.25%	0.0%
Congenital Cardiac Surgery	0.0%	75.00%

# Specialty Information

# Responding to Citations

- When reviewing responses to citations, the Review Committee considers:
  - Does the program **understand the problem/reason** they are not in compliance?
  - Is there an explicit statement of how the program **engaged the faculty/residents/fellows/institution** in the **identification of the problem(s)** and creation of an action plan?
  - Are there **actionable items** implemented by the program and/or institution that directly addressed the program requirement(s) out of compliance?
  - Is there an explicit identification of how the program will **monitor and sustain improvement**?
- Citation responses are considered with supporting materials (program information in ADS, annual/multi-year Resident/Fellow and Faculty Surveys, graduate Case Log data, board pass rate data, Site Visit Reports)



# Major Changes and Other Updates

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- Communicate action plans and initial results regarding:
  - ACGME Resident/Fellow and/or Faculty Survey results
  - Areas for Improvement (AFIs)
  - Missed Case Log minimums
  - Resident/fellow attrition
- Provide updates about changes to the program in the last academic year
  - Faculty attrition, if applicable
  - Major block diagram/rotation changes

# Review Committee Meetings

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Two meetings per academic year

*Upcoming Meetings*

**March 21, 2025**

**December 5, 2025**

**March 6, 2026**

[www.acgme.org](http://www.acgme.org) > Specialties > Thoracic Surgery > Scroll Down > Review Committee Dates

# Review Committee Meetings Application Submission Deadline

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- **Applications** are due approximately **six months** before the meeting to allow time for a site visit
- Site visits are required for all core and subspecialty applications

*Upcoming Application Submission Deadlines*

**June 20, 2025 for December 2025 meeting**

**September 5, 2025 for March 2026 meeting**

# Review Committee Meetings Agenda Closing Date

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- Meeting agenda closes approximately **two months** before the meeting
- **Permanent complement requests** must be submitted by the designated institutional official (DIO) by the agenda closing date to make the meeting agenda

*Upcoming Agenda Closing Dates*

**October 24, 2025 for December 2025 meeting**

**January 23, 2026 for March 2026 meeting**

# Joint General Surgery/Thoracic Surgery (4+3) Applications

- During PGY-4 and -5, a minimum of 12 months must be spent as a chief resident in general surgery in the principal content areas
- Rotations counting toward general surgery during PGY-4 and -5 must be clearly designated on the block diagram

**PGY-4 (6 Months General Surgery, 6 Months Cardiothoracic Surgery)**

Block	1	2	3	4	5	6
Site	Site 5	Site 5	Site 5	Site 1	Site 1	Site 1
Rotation Name	Gen Surg	Gen Surg	Gen Surg	Thoracic	Cardiac	Thoracic
% Outpt.	20	20	20	5	30	25
%Res.	0	0	0	0	0	0

\*Vacation= 4 weeks typically taken in one 2-week block and 2 1-week blocks, with vacation float coverage

\*Each block is 2 months

**PGY-5 (Chief Resident: 6 Months Cardiothoracic Surgery, 6 Months General Surgery)**

Block	1	2	3	4	5	6
Site	Site 2	Site 1	Site 1	Site 3	Site 5	Site 5
Rotation Name	Cardiac	Thoracic	Cardiac	Vascular	Surgical Oncology	Surgical Oncology
% Outpt.	5	20	20	20	20	20
%Res.	0	0	0	0	0	0

\*Vacation= 4 weeks typically taken in one 2-week block and 2 1-week blocks, with vacation float coverage

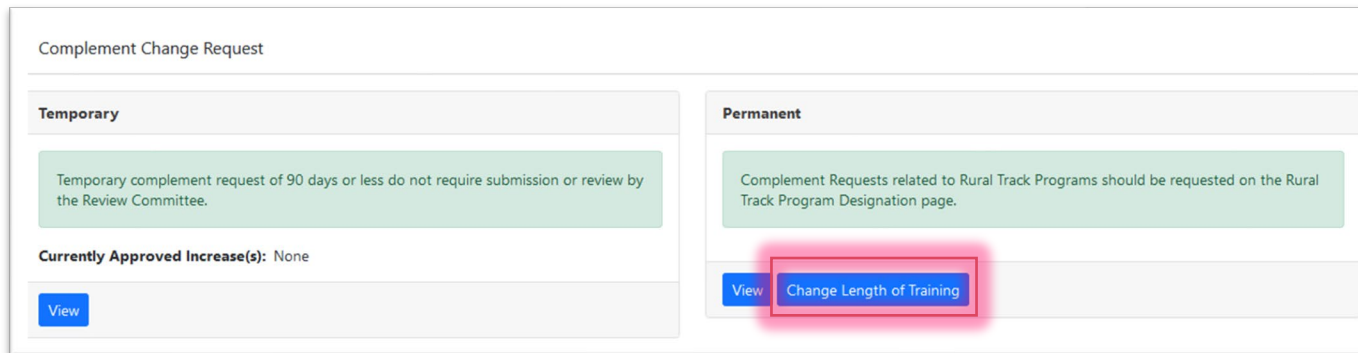
\*Each block is 2 months



# Length of Training Change Request for Independent Programs

- Independent programs interested in transitioning from two-year to three-year format
- Must submit request form in ADS by agenda closing date to make the meeting agenda
- Letter of support from DIO, proposed goals and objectives, and proposed block diagram for the new training format must be sent to Review Committee staff

ADS Program Page > Program Tab Dropdown Menu > Requests >  
Length of Training Change > Change Length of Training (Under Permanent)



Complement Change Request

**Temporary**

Temporary complement request of 90 days or less do not require submission or review by the Review Committee.

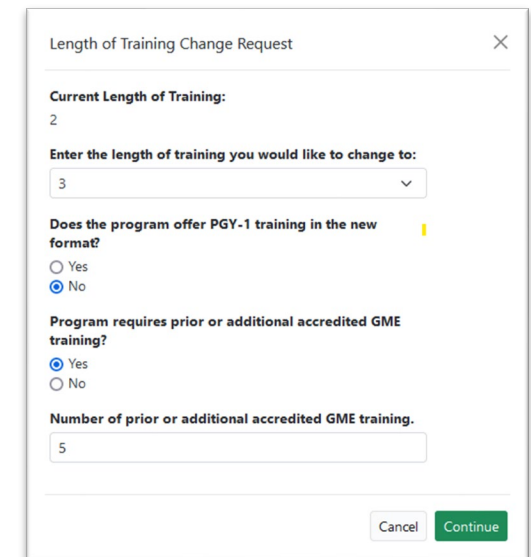
Currently Approved Increase(s): None

[View](#)

**Permanent**

Complement Requests related to Rural Track Programs should be requested on the Rural Track Program Designation page.

[View](#) [Change Length of Training](#)



Length of Training Change Request

Current Length of Training:  
2

Enter the length of training you would like to change to:  
3

Does the program offer PGY-1 training in the new format?  
☐ Yes  
☒ No

Program requires prior or additional accredited GME training?  
☒ Yes  
☐ No

Number of prior or additional accredited GME training.  
5

[Cancel](#) [Continue](#)

# Transfer Requests

Transfers must be approved in advance by the Review Committee and ABTS.

## Independent Program Requirements

- III.C.2. Only fellows currently enrolled in an independent thoracic surgery fellowship are eligible to transfer to another independent fellowship. (Core)
- III.C.3. Fellows may not transfer in their final year. (Core)

## Integrated Program Requirements

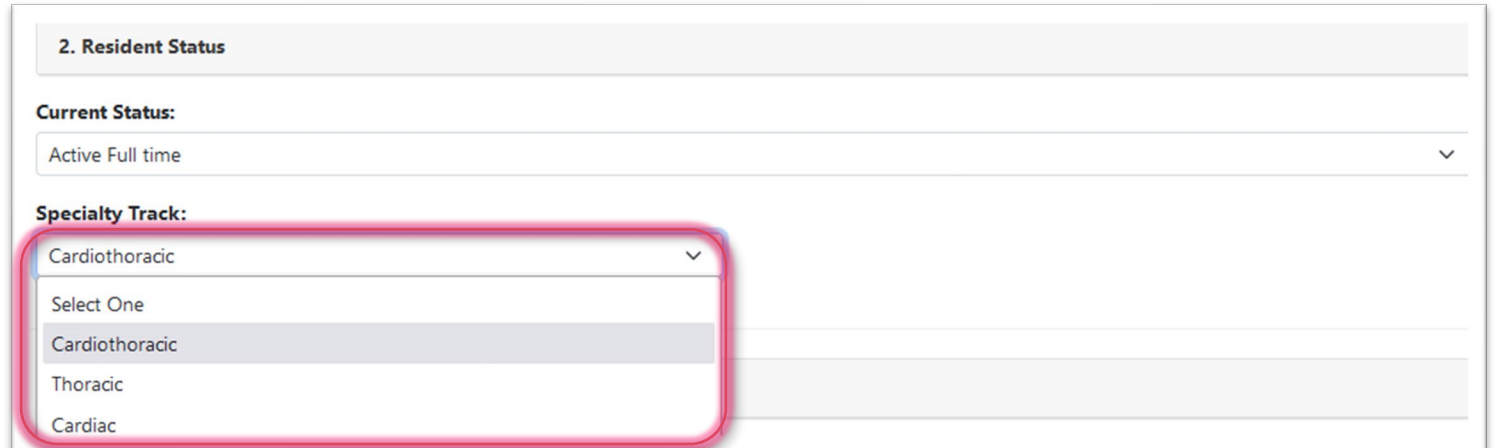
- III.C.2. To be eligible for transfer at the PGY-2 level, residents must have satisfactorily completed a minimum of one year in an ACGME-accredited program in surgery, integrated vascular surgery, or integrated thoracic surgery. (Core)
- III.C.3. To be eligible for transfer at the PGY-3 level, residents must have satisfactorily completed a minimum of two years in an ACGME-accredited integrated thoracic surgery program, or a combination of a minimum of one year in an ACGME-accredited program in surgery or integrated vascular surgery and a minimum of one year in an ACGME-accredited integrated thoracic surgery program. (Core)
- III.C.4. No resident may transfer into an integrated thoracic surgery program during the PGY-4, -5, or -6.

# Review Committee Updates

# Thoracic Surgery Specialty Track

Review Committee will issue an automatic citation for missed minimums related to incorrect specialty track in ADS

PLEASE ENSURE CORRECT TRACK IS SELECTED!



**2. Resident Status**

**Current Status:**

Active Full time

**Specialty Track:**

Cardiothoracic

Select One

Cardiothoracic

Thoracic

Cardiac

# Case Requirements for Thoracic Surgery Pathways

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Review Committee and ABTS working to resolve discrepancies

**PLEASE ENSURE RESIDENTS MEET ABTS INDEX CASE REQUIREMENTS!**

[ABTS Index Case Requirements](#)

[Review Committee Case Requirements for Thoracic Surgery Pathways](#)



# Congenital Cardiac Surgery Case Log Updates

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- Congenital cardiac surgery fellows who started their education and training on or after July 1, 2023 are required to complete:
  - 150 major cases
  - Minimum of 50 major cases in the first year of the program
- ADS congenital cardiac surgery minimum report has been updated to reflect the new requirements
- Fellows now able to record re-operative procedures



# ACGME Updates

# Department of Field Activities

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- 10-Year Accreditation Site Visits for programs discontinued in 2023
- New site visit model for programs on Continued Accreditation that have not had a site visit in nine or more years
  - 149 programs site visited in 2024
  - 200 programs selected for site visits in 2025
    - Notice sent in November with target dates in April-October
- Data-prompted site visits may be ordered at the discretion of the Review Committee after review of annual data or in response to a complaint

# New ACGME President and CEO

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## Education

- Undergraduate: Wellesley College
- Medical School: Harvard Medical School
- Clinical Education: Internal Medicine and Gastroenterology, Massachusetts General Hospital (MGH)

## Prior Roles

- Executive Vice Dean for Academic Affairs, University of Michigan Medical School
- Chief Academic Officer, Michigan Medicine
- Professor of Learning Health Sciences and Internal Medicine, University of Michigan Medical School



# Thoracic Surgery Accreditation Team



**Chris Fox, PhD**  
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**Courtney Maxfield**  
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# Questions?





# Thank you

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Evaluations are tied to your registered sessions.

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Deadline – March 14, 2025

Questions? [cme@acgme.org](mailto:cme@acgme.org)