ACGME Program Requirements for Graduate Medical Education in Interventional Pulmonology Summary and Impact of New Specialty Requirements

1. Describe the scope of practice of the new specialty, as well as the process involved in development of the requirements (e.g., date of recognition of the specialty by the ACGME Board, involvement of specialty boards/organizations, etc.).

A joint proposal to the ACGME from the American Association for Bronchology and Interventional Pulmonology (AABIP) and the Association of Interventional Pulmonology Program Directors (AIPPD), dated October 15, 2021, requested approval from the ACGME Board of Directors to accredit fellowship programs in the sub-subspecialty of interventional pulmonology, under the subspecialty of internal medicine pulmonary disease or combined pulmonary disease and critical care medicine. Interventional pulmonology focuses on the evaluation and management of thoracic diseases primarily involving the airways, lung parenchyma, and pleural space with a focus on minimally-invasive diagnostic and therapeutic procedural skills beyond the scope of adult pulmonary medicine fellowship requirements. Currently, interventional pulmonology fellowships provide advanced training for 12 months after completion of a standard fellowship in pulmonary disease to allow a fellow to acquire competence in the sub-subspecialty with sufficient expertise to act as an independent consultant and expert provider of advanced diagnostic and therapeutic interventional bronchoscopic and pleural procedures. Since 2016, interventional pulmonology fellowship programs have been accredited according to a standard created jointly by the major pulmonary medical societies: AABIP; AIPPD; American Thoracic Society (ATS); American College of Chest Physicians (ACCP); and Association of Pulmonary and Critical Care Medicine Program Directors (APCCMPD).

At its June 10-11, 2022 meeting, the ACGME Board approved accreditation of the new one-year sub-subspecialty of pulmonary disease and pulmonary disease/critical care medicine. The Review Committee for Internal Medicine began developing Program Requirements for the sub-subspeciality in the fall of 2022, utilizing the expertise and counsel of interventional pulmonology program directors associated with the AABIP and AIPPPD.

2. How will the proposed requirements improve resident/fellow education?

Compliance with the Program Requirements will ensure fellows are provided with the curriculum and resources necessary to be educated to competently provide safe patient care, consistently and comprehensively, and in the least invasive way possible to adults requiring treatment of the airways, lungs, and pleural space.

3. How will the proposed requirements improve patient care and patient safety/quality?

Interventional pulmonology is devoted to the evaluation and management of thoracic diseases primarily involving the airways, lung parenchyma, and pleural space, with focus on minimally invasive diagnostic and therapeutic procedural skills beyond the scope of pulmonary disease or pulmonary disease-critical care medicine. Interventional pulmonology fellowships provide advanced training to allow a fellow to acquire competence with sufficient expertise to act as an independent consultant and expert provider of complex and advanced interventional procedures. Establishing and monitoring compliance with the Program

Requirements will help to ensure there are physicians with the necessary subspecialty expertise to competently provide patient care in this area.

4. How will the proposed requirements impact continuity of patient care?

Compliance with the Program Requirements will ensure that programs provide fellows with opportunities to provide continuing care to patients using interventional pulmonology through all stages of disease.

5. Will the proposed requirements necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?

It is anticipated that only an institution with the necessary facilities, faculty, structure to support interdisciplinary cooperation, and funding would apply for accreditation of such a program. The cost in adding any of those resources is difficult to estimate.

6. How will the proposed requirements impact other accredited programs?

The need for interventional pulmonology fellowship programs was borne in part out of the constraint for providing adequate procedural training during a pulmonary disease fellowship, which remains fixed in duration, with the challenge of an increasing body of knowledge in the pulmonary disease space. In most institutions, an interventional pulmonology fellowship will be additive to other specialty programs through exposure of new knowledge/disease management and procedures and increased opportunities for those interested to develop advanced procedural skills in this area. Interventional pulmonology is not expected to negatively impact other specialties, particularly existing pulmonary disease and pulmonary disease/critical care medicine fellowships.