

**ACGME Program Requirements for Graduate Medical Education  
in Neurocritical Care  
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.).

Neurocritical care encompasses a broad clinical practice spanning general and neurological critical care. The medical subspecialty of neurocritical care is devoted to the comprehensive multisystem care of critically ill neurology and neurological surgery patients. Like other intensivists, the neurointensivist assumes either primary or shared responsibility for the care of patients in the intensive care unit (ICU), coordinating both the neurological and medical management of the patient. Most uniquely, neurocritical care is concerned with the interface between the central and peripheral nervous system and other organ systems in the setting of critical illness.

At its February 2019 meeting, the ACGME Board of Directors approved a petition from the American Board of Psychiatry and Neurology (ABPN) to accredit programs in the subspecialty of neurocritical care. Neurocritical care will be a multidisciplinary certificate co-sponsored by the American Board of Psychiatry and Neurology (Administrative Board), American Board of Anesthesiology, American Board of Emergency Medicine, and the American Board of Neurological Surgery.

Data on the number of physicians concentrating their practice in neurocritical care come from the database of the Neurocritical Care Society (NCS), the number of Neurocritical Care Diplomates from the United Council of Neurological Subspecialties (UCNS) and the Society of Neurological Surgeons' Committee on Advanced Subspecialty Training (CAST). UCNS and CAST are non-profit organizations that accredit training fellowship programs in neurological and neurosurgical subspecialties and award certification to physicians who demonstrate their competence in these subspecialties.

The proposed Program Requirements for Graduate Medical Education in Neurocritical Care were developed by a working group composed of two representatives each from the Review Committees of Anesthesiology, Emergency Medicine, Neurological Surgery, and Neurology, as well as one representative from the ABPN. Each respective Review Committee also provided recommendations to the proposed Program Requirements.

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

The ultimate goal of neurocritical care is to provide optimal care to a unique patient population that simultaneously requires synergistic expert management of acute nervous system and critical care aspects of care. The neurocritical care program will provide fellows with education and training to become clinicians with an understanding of underlying neurological disease processes and specialized expertise in critical care. With this experience, fellows will be equipped to provide comprehensive integrated multisystem care to critically ill patients with nervous systems disorders.

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

The proposed requirements will improve patient care and patient safety/quality. Specialty education and training in the neurosciences addresses a broad and rapidly expanding body of knowledge. With the growth of diagnostic and therapeutic options in the clinical neurosciences, it became clear that additional subspecialty education and training was required to master them.

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

The patient care competencies of neurocritical care are built on the six foundational Core Competencies; there will be no change to the delivery of continuing patient care.

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?

The number of applicants seeking education and training in neurocritical care has steadily grown. It is anticipated that most fellowship programs in neurocritical care will be small, with approximately or fewer than five fellows. The cost of fellowship education and financial support will vary from program to program.

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

The presence of an accredited fellowship program in neurocritical care is not likely to adversely affect the education in other accredited programs. It is not the intent of this subspecialty to prevent physicians from any specialties (including anesthesia, emergency medicine, neurological surgery, and neurology) from caring for their patients with neurologic conditions who are in intensive care units, even if those units are staffed by neurointensivists. In fact, it is critical and expected that practitioners of this subspecialty fully engage the specialists or subspecialists caring for their patients in intensive care units who have neurological conditions, and collaborate with them in the best interest of the patients, even in those units staffed by neurointensivists.