

Combined Anesthesiology-Pediatrics Curricular Requirements

This document enumerates the **minimum** curricular requirements for combined ACGME-accredited programs in anesthesiology and pediatrics, as approved by the American Board of Anesthesiology (ABA), American Board of Pediatrics (ABP), American Osteopathic Board of Anesthesiology (AOBA), and American Osteopathic Board of Pediatrics (AOBP). This information was collated on April 20, 2026 and will be updated as needed.

1. Total duration:
 - a. Five years (60 months) of education and training in combined anesthesiology and pediatrics
 - b. Additional time outside of the minimum requirements must be customized per the mission of the program and the individual needs of each resident
 - c. The first year of the program must be spent in direct patient care of pediatric patients

2. Anesthesiology: 130 weeks (30 months)
 - a. Adult anesthesiology:
 - i. 50 weeks, either general or subspecialty
 - ii. No more than 26 weeks of these in one specialty
 - iii. This is in addition to the subspecialty requirements below
 - b. Obstetric anesthesiology: eight weeks
 - c. Pediatric anesthesiology: eight weeks after PGY-1
 - d. Neuroanesthesiology: eight weeks
 - e. Cardiothoracic anesthesiology: eight weeks
 - f. Critical care:
 - i. Adult surgical critical care: eight weeks
 - ii. Pediatric intensive care: four weeks in addition to the four weeks required by pediatrics
 - g. Pain medicine: 12 weeks to consist of four weeks of acute pain, four weeks of chronic pain, and four weeks of regional anesthesiology
 - h. Post-anesthesia care unit: two weeks

- i. Preoperative medicine: two weeks
 - j. Non-operative room anesthesia: two weeks
 - k. Advanced anesthesiology
 - i. 18 weeks
 - ii. Rotations to be decided by the program director and the resident
 - iii. For these rotations, the resident must be engaged in operating room (OR)-based anesthesiology (or engaged in the delivery of anesthesia in non-OR anesthetizing locations, such as endoscopy, interventional radiology, regional anesthesiology, and obstetric anesthesiology)
 - iv. Rotations that are excluded for these 18 weeks include post-anesthesia care unit (PACU), intensive care unit (ICU), acute pain medicine, chronic pain medicine, pre-operative clinic, and research rotations
3. Pediatrics: 130 weeks (30 months) of broad-based, clinically oriented general pediatrics experiences as described in the ACGME Program Requirements for Graduate Medical Education in Pediatrics, which must include:
- a. Newborn nursery: four weeks
 - b. Adolescent medicine: four weeks
 - c. Developmental-behavioral pediatrics: four weeks
 - d. Pediatric emergency medicine and acute illness: 12 weeks, eight of which must occur in an emergency department
 - e. Mental health: four weeks
 - f. ICU:
 - i. Eight weeks neonatal ICU
 - ii. Four weeks pediatric ICU
 - g. Outpatient pediatric subspecialties: four weeks (composed of at least two subspecialties)
 - h. Inpatient pediatrics: 24 weeks
 - i. 16 weeks of general pediatrics or pediatric hospital medicine service
 - i. General ambulatory pediatric clinic: 12 weeks in addition to the longitudinal clinic requirement and must be a broad experience
 - j. Individualized pediatrics curriculum: 40 weeks
 - i. 20 weeks of pediatric subspecialty experiences

1. Double counting of subspecialty experiences is not allowed, and anesthesiology rotations should not be utilized to fulfill the pediatric subspecialty requirements
 - ii. 20 weeks of elective experiences
- k. Supervisory experiences: 16 weeks
 - i. Eight weeks on general pediatrics/pediatric hospital medicine service
- l. 30 months of broad-based, general pediatrics ambulatory longitudinal continuity clinic experiences
 - i. Minimum of 90 half-day sessions over the duration of education and training, scheduled to maximize continuity of care (describe in block diagram notes)