Vascular Surgery Update

Association of Program Directors in Vascular Surgery Meeting

23 March 2018
Chicago, IL

Donna L. Lamb, DHSc, MBA BSN Executive Director
Disclosure

Dr. Lamb

No financial conflicts to disclose

ACGME employee
Review Committee Members

*Term Ending 30 June 2018

Jeff Matthews, MD, **Chair**

*Paula Termuhlen, MD, **Vice Chair**

Robert Cromer, MD

Mary Fallat, MD

George Fuhrman, MD

David Han, MD, **Incoming VC**

*David Herndon, MD

Pamela Lipsett, MD

Joseph Mills, MD

Maj. Gen. David Rubenstein, **Public**

Edward Shipper, MD, **Resident**

Joseph Stella, DO

*Danny Takanishi, MD

Richard Thirlby, MD

Thomas Tracey, MD

James Valentine, MD

#ACGME2018

*Ex Officio: Mark Malangoni, MD, ABS; Patrice Blair, ACS*
# Review Committee

<table>
<thead>
<tr>
<th>Incoming Members (2018)</th>
<th>Stephanie Heller, MD</th>
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<tbody>
<tr>
<td></td>
<td>Fred Luchette, MD</td>
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<td>Bruce Schirmer, MD</td>
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**Incoming Resident Member (2019)**

- Call for nominations in 
  Spring/Summer 2018

**Incoming Members (2020)**

- Four Members

- Call for nominations from ABS, ACS, and AMA in Summer/Fall 2018
## Overview: Accredited Programs

<table>
<thead>
<tr>
<th></th>
<th>Accredited Programs</th>
<th>Application</th>
<th>Approved Positions</th>
<th>Filled Positions</th>
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<tr>
<td>Integrated</td>
<td>54</td>
<td>0</td>
<td>320</td>
<td>271</td>
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<tr>
<td>Independent</td>
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<td>0</td>
<td>297</td>
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<th>Initial</th>
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<th>Continued</th>
<th>Continued w/o Outcomes</th>
<th>Continued w/ Warning</th>
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<tr>
<td>Integrated</td>
<td>3</td>
<td>0</td>
<td>47</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Independent</td>
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<td>0</td>
<td>99</td>
<td>3</td>
<td>2</td>
<td>0</td>
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Most Common Citations

Board Pass Rate – Independent VS

V.C.2.c) The program must monitor and track graduate performance, including performance of program graduates on the certification examination. (Core) and

V.C.2.c).(1) At least 60 percent of a program’s graduates from the preceding five years taking the American Board of Surgery qualifying and certifying examinations for vascular surgery for the first time must pass. (Outcome)
Educational Environment – Independent and Integrated VS

II.A.4. The program director must administer and maintain an educational environment conducive to educating the residents in each of the ACGME competency areas. (Core)

II.A.4.j) The program director must implement policies and procedures consistent with the institutional and program requirements for resident duty hours and the working environment, including moonlighting. (Core)
Most Common Citations

Supervisory and Teaching Responsibilities – Independent VS

II.B.1.a) The faculty must devote sufficient time to the educational program to fulfill their supervisory and teaching responsibilities; and to demonstrate a strong interest in the education of residents, and (Core)

II.B.1.b) The faculty must administer and maintain an educational environment conducive to educating residents in each of the ACGME competency areas. (Core)
Most Common Citations

Faculty/Scholarly Activity – Independent VS

Faculty should encourage and support residents in scholarly activities. (Core) [Program Requirement: II.B.5.c)]
New Program Requirement

IV.A.6.a).(1) 18 months of core surgical education experience of 24 months, which may include: general surgery, cardiac surgery, thoracic surgery, congenital cardiac surgery, cardiothoracic surgery, critical care, urology, gynecology, neurological surgery, plastic surgery, burn surgery, trauma, surgical critical care, pediatric surgery, abdominal and alimentary tract surgery, basic and advanced laparoscopic skills, head and neck and endocrine surgery, surgical oncology, and transplantation; (Core)
New Program Requirement

IV.A.6.a).(1).(a) This experience must include: two years of documented educational experiences in core surgical education, including: pre- and post-operative evaluation and care; critical care and trauma management; and basic technical experience in skin and soft tissue, abdomen and alimentary track, airway management, laparoscopic surgery, and thoracic surgery. (Core)
New Program Requirement

IV.A.6.a).(2) 36-30 months of documented educational experiences concentrated in vascular surgery; and, (Core)

IV.A.6.a).(3) Up to 12 months of documented educational experiences that may be a combination of:

IV.A.6.a).(3).(a) a maximum of six months of vascular surgery-related rotations (i.e.g., “vascular medicine” cardiology, interventional radiology) may be included as part of these 36 months.; (Core)

IV.A.6.a).(3).(b) no more than a maximum of six months in additional core surgery rotations; (Core)

IV.A.6.a).(3).(c) up to 12 months of vascular surgery rotations; and, (Core)

IV.A.6.a).(3).(d) a maximum of six months of dedicated to research experience. (Detail-Core)
New Program Requirement

V.C.2.c).(1) At least 60-65 percent of a program’s graduates from the preceding five years taking the American Board of Surgery examination for the first time must have passed each of the qualifying and certifying examinations. Qualifying and certifying examinations for vascular surgery for the first time must pass. (Outcome)
FYI - Operative Experience: 2018

Major Organ Trauma, No Operation Required (MOTNOR)

- CPT code 99199 - Guidelines:
  - The category “major organ trauma, no operation required” is defined as patients with major organ trauma who were admitted to a specialty care unit in the hospital, i.e., SICU, CCU, Burn Unit, etc.
  - The most senior resident on the trauma service should claim credit for the MOTNOR case.
  - If the patient subsequently requires a general surgery operative procedure that may be claimed in the defined category.
Non-Operative Trauma-Team Leader Resuscitation

CPT code 92950 - Guidelines:

- Team leader directing the management of a patient who has sustained trauma and is critically-ill from injury.

- Critical illness includes a range of conditions, including shock due to hemorrhage with resulting hypovolemia/fluid loss, organ injury, obstructive physiology due to pneumothorax, cardiac tamponade, etc.

- Cardiac arrest and/or CPR is NOT required log Non-Op Trauma-TLR.
In the past year, there have been 24 PD changes (14 independent; 10 integrated)!

Approvals require an action plan outlining I-PD support, recruitment plan, and the anticipated timeline for replacement.

Progress report required six months after approval.
There are two types of affiliations for subspecialty programs, residency-dependent and residency-independent.

All Surgery Sub-Specialties are Residency Independent

These programs are not required to function with an accredited residency program in its related specialty. These subspecialty programs are instead dependent on an ACGME-accredited Sponsoring Institution. These programs may occur in two circumstances:

1. The first circumstance is one which is reliant upon an ACGME-accredited Sponsoring Institution that sponsors programs in more than one specialty and/or subspecialties.

2. The second circumstance is one which is reliant upon an ACGME-accredited Sponsoring Institution that sponsors a program or programs in only one subspecialty.
Contact Information

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