

Specialty-Specific Program Requirements: Core Faculty Dedicated Time

Effective as of July 1, 2023

Unless otherwise specified, the effective date for all requirements below is July 1, 2022. Some Review Committees have decided to defer issuing citations on new core faculty dedicated time Program Requirements until a later date. Those specialties for which implementation is delayed are indicated in the table below.

Common Program Requirements are in bold

Specialty/Subspecialty Name	Program Requirement Language
Allergy and Immunology	-
Anesthesiology	-
Adult Cardiothoracic Anesthesiology Anesthesiology Critical Care Medicine Obstetric Anesthesiology Pediatric Anesthesiology Pediatric Cardiac Anesthesiology Regional Anesthesiology and Acute Pain Medicine	-
Colon and Rectal Surgery	-
Dermatology	-
Micrographic Surgery and Dermatologic Oncology Pediatric Dermatology	-
Diagnostic Radiology	-
Interventional Radiology	-
Abdominal Radiology	-

Specialty/Subspecialty Name	Program Requirement Language
Musculoskeletal Radiology Neuroradiology Nuclear Radiology Pediatric Radiology	
Emergency Medicine	II.B.4.d) At a minimum, each required core faculty member, excluding program leadership, must be provided with support equal to a dedicated minimum of 10 percent FTE for educational and administrative responsibilities that do not involve direct patient care. ^(Core)
Emergency Medical Services	-
Family Medicine	<p>Currently in Effect</p> <p>II.B.4.b) There must be at least one core family medicine physician faculty member, in addition to the program director, for every six residents in programs with 12 or fewer residents, and one family medicine physician faculty member, in addition to the program director, for every four residents in programs with more than 12 residents. ^(Core)</p> <p>II.B.4.c) Core faculty members in programs with an approved complement of 13 or more residents should devote at least 60 percent time (at least 24 hours per week, or 1200 hours per year) to the program, exclusive of patient care without residents. ^(Detail)</p> <p>II.B.4.d). Core faculty members in programs with an approved complement of 12 or fewer residents should devote at least 40 percent time (at least 16 hours per week or 800 hours per year) to the program, exclusive of patient care without residents. ^(Detail)</p> <p>II.B.4.e) Core faculty members should devote the majority of this professional effort to teaching, administration, scholarly activity, and supervising resident patient care within the program. ^(Detail)</p> <p>Background and Intent: The core faculty time requirements address the role and responsibilities of core faculty members, inclusive of both clinical and non-clinical activities, and the corresponding time to meet those responsibilities. The requirements do not address how this is accomplished, and do not mandate dedicated or protected time for these activities. Programs, in partnership with their Sponsoring Institutions, will determine how compliance with the requirements is achieved.</p>

Specialty/Subspecialty Name	Program Requirement Language																																								
Internal Medicine	<p data-bbox="705 246 1913 345">II.B.4.c) In addition to the program director and associate program director(s), programs must have the minimum number of ABIM- or AOBIM-certified core faculty members based on the number of approved resident positions, as follows. ^(Core)</p> <p data-bbox="705 383 1961 482">II.B.4.d) At a minimum, the required core faculty members, in aggregate and excluding program leadership, must be provided with support equal to an average dedicated minimum of 0.1 FTE for educational and administrative responsibilities that do not involve direct patient care. ^(Core)</p> <table border="1" data-bbox="1087 513 1766 1297"> <thead> <tr> <th data-bbox="1087 513 1396 626">Number of Approved Resident Positions</th> <th data-bbox="1396 513 1766 626">Minimum number of ABIM- or AOBIM-certified Core Faculty Members</th> </tr> </thead> <tbody> <tr><td data-bbox="1087 626 1396 662"><30</td><td data-bbox="1396 626 1766 662">3</td></tr> <tr><td data-bbox="1087 662 1396 698">30-39</td><td data-bbox="1396 662 1766 698">4</td></tr> <tr><td data-bbox="1087 698 1396 734">40-49</td><td data-bbox="1396 698 1766 734">5</td></tr> <tr><td data-bbox="1087 734 1396 769">50-59</td><td data-bbox="1396 734 1766 769">6</td></tr> <tr><td data-bbox="1087 769 1396 805">60-69</td><td data-bbox="1396 769 1766 805">7</td></tr> <tr><td data-bbox="1087 805 1396 841">70-79</td><td data-bbox="1396 805 1766 841">8</td></tr> <tr><td data-bbox="1087 841 1396 876">80-89</td><td data-bbox="1396 841 1766 876">9</td></tr> <tr><td data-bbox="1087 876 1396 912">90-99</td><td data-bbox="1396 876 1766 912">10</td></tr> <tr><td data-bbox="1087 912 1396 948">100-109</td><td data-bbox="1396 912 1766 948">11</td></tr> <tr><td data-bbox="1087 948 1396 984">110-119</td><td data-bbox="1396 948 1766 984">12</td></tr> <tr><td data-bbox="1087 984 1396 1019">120-129</td><td data-bbox="1396 984 1766 1019">13</td></tr> <tr><td data-bbox="1087 1019 1396 1055">130-139</td><td data-bbox="1396 1019 1766 1055">14</td></tr> <tr><td data-bbox="1087 1055 1396 1091">140-149</td><td data-bbox="1396 1055 1766 1091">15</td></tr> <tr><td data-bbox="1087 1091 1396 1127">150-159</td><td data-bbox="1396 1091 1766 1127">16</td></tr> <tr><td data-bbox="1087 1127 1396 1162">160-169</td><td data-bbox="1396 1127 1766 1162">17</td></tr> <tr><td data-bbox="1087 1162 1396 1198">170-179</td><td data-bbox="1396 1162 1766 1198">18</td></tr> <tr><td data-bbox="1087 1198 1396 1234">180-189</td><td data-bbox="1396 1198 1766 1234">19</td></tr> <tr><td data-bbox="1087 1234 1396 1269">190-199</td><td data-bbox="1396 1234 1766 1269">20</td></tr> <tr><td data-bbox="1087 1269 1396 1305">200-209</td><td data-bbox="1396 1269 1766 1305">21</td></tr> </tbody> </table> <p data-bbox="705 1333 1944 1399">Specialty-Specific Background and Intent: The Review Committee specified the minimum required number of ABIM- or AOBIM-certified internal medicine core faculty, but did not specify</p>	Number of Approved Resident Positions	Minimum number of ABIM- or AOBIM-certified Core Faculty Members	<30	3	30-39	4	40-49	5	50-59	6	60-69	7	70-79	8	80-89	9	90-99	10	100-109	11	110-119	12	120-129	13	130-139	14	140-149	15	150-159	16	160-169	17	170-179	18	180-189	19	190-199	20	200-209	21
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	<p>how the aggregate FTE support should be distributed to allow programs, in partnership with their sponsoring institution, to allocate the support as they see fit. For instance, a program with an approved complement of 36 residents is required to have a minimum of four ABIM- or AOBIM-certified core faculty members and a minimum aggregate FTE of 40 percent. The program could choose to operationalize this as four ABIM- or AOBIM-certified faculty members each with 10 percent FTE support, but it could also have eight members each with five percent FTE support, or one member with twenty percent FTE and four members with five percent each.</p> <p>The duties of the program director, associate program director(s), and internal medicine core faculty members are separate and distinct. As such, the minimum required internal medicine core faculty members are in addition to the program director and the associate program director(s). One individual cannot “count” as both an associate program director and internal medicine core faculty member.</p> <p>The requirement related to support for core internal medicine faculty members is intended to ensure these faculty members have sufficient protected time to meet the following educational responsibilities:</p> <ul style="list-style-type: none"> • Membership on the Clinical Competency Committee • Participation in the annual program review as Chair or member of the Program Evaluation Committee • Implementation and analysis of the outcome of action plans developed by the Program Evaluation Committee • Significant participation in recruitment and selection, including efforts related to the program’s commitment to diversity • Advising, mentoring, and coaching residents (co-creating, implementing, and monitoring individualized learning plans) • Designing and overseeing remediation plans • Supporting/overseeing residents in the development/assessment of quality improvement/patient safety projects • Supporting/overseeing residents in the conduct of their scholarly work, including the dissemination of such work through presentations, posters/abstracts, and peer-reviewed publications

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	<ul style="list-style-type: none"> • Significant participation in educational activities (didactics, lab, or simulation) • Overseeing faculty development for the program’s faculty members • Designing and implementing simulation and/or standardized patients for teaching and assessment • Developing, implementing, and assessing one or more of the major components of the curriculum, such as patient safety, quality, health disparities, or core didactics • Designing and implementing the program’s assessment strategies, making certain there are robust methods used to assess each competency, and ensuring they provide meaningful information by which the Clinical Competency Committee can judge resident performance on the Milestones • Leading the program’s efforts related to resident and faculty member well-being <p>Each core faculty member does not need to participate in every listed educational responsibility.</p>
<p>Adult Congenital Heart Disease</p> <p><i>Will not issue citations until July 1, 2025</i></p> <p><i>[Proposed revision to II.B.4.b)-II.B.4.d) posted for public comment on January 12, 2023]</i></p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>
<p>Advanced Heart Failure/Transplant Cardiology</p> <p><i>Will not issue citations until July 1, 2025</i></p> <p><i>[Proposed revision to II.B.4.b)-II.B.4.d) posted for public comment on January 12, 2023]</i></p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>
<p>Cardiovascular Disease</p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>

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<p>Clinical Cardiac Electrophysiology</p> <p><i>Will not issue citations until July 1, 2025</i></p> <p><i>[Proposed revision to II.B.4.b)-II.B.4.d) posted for public comment on January 12, 2023]</i></p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>
<p>Critical Care Medicine</p> <p><i>Will not issue citations until July 1, 2025</i></p> <p><i>[Proposed revision to II.B.4.b)-II.B.4.d) posted for public comment on January 12, 2023]</i></p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>
<p>Endocrinology, Diabetes and Metabolism</p> <p><i>Will not issue citations until July 1, 2025</i></p> <p><i>[Proposed revision to II.B.4.b)-II.B.4.d) posted for public comment on January 12, 2023]</i></p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>
<p>Gastroenterology</p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>

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<p>Hematology</p> <p><i>Will not issue citations until July 1, 2025</i></p> <p><i>[Proposed revision to II.B.4.b)-II.B.4.d) posted for public comment on April 3, 2023]</i></p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>
<p>Hematology and Medical Oncology</p> <p><i>Will not issue citations until July 1, 2025</i></p> <p><i>[Proposed revision to II.B.4.b)-II.B.4.d) posted for public comment on April 3, 2023]</i></p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>
<p>Infectious Disease</p> <p><i>Will not issue citations until July 1, 2025</i></p> <p><i>[Proposed revision to II.B.4.b)-II.B.4.d) posted for public comment on January 12, 2023]</i></p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>
<p>Interventional Cardiology</p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>

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<p>Medical Oncology</p> <p><i>Will not issue citations until July 1, 2025</i></p> <p><i>[Proposed revision to II.B.4.b)-II.B.4.d) posted for public comment on January 12, 2023]</i></p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>
<p>Nephrology</p> <p><i>Will not issue citations until July 1, 2025</i></p> <p><i>[Proposed revision to II.B.4.b)-II.B.4.d) posted for public comment on May 15, 2023]</i></p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>
<p>Pulmonary Disease and Critical Care Medicine</p> <p><i>Will not issue citations until July 1, 2025</i></p> <p><i>[Proposed revision to II.B.4.b)-II.B.4.e) posted for public comment on January 12, 2023]</i></p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>
<p>Pulmonary Disease</p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>

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<p>Rheumatology</p> <p><i>Will not issue citations until July 1, 2025</i></p> <p><i>[Proposed revision to II.B.4.b)-II.B.4.d) posted for public comment on January 12, 2023]</i></p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>
<p>Transplant Hepatology</p> <p><i>Will not issue citations until July 1, 2025</i></p> <p><i>[Proposed revision to II.B.4.b)-II.B.4.d) posted for public comment on January 12, 2023]</i></p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>
<p>Medical Genetics and Genomics</p>	<p>-</p>
<p>Clinical Biochemical Genetics</p> <p>Laboratory Genetics and Genomics</p> <p>Medical Biochemical Genetics</p>	<p>-</p>
<p>Neurological Surgery</p>	<p>II.B.4.e) At a minimum, each required core faculty member, excluding program leadership, must be provided with support equal to a dedicated minimum of 5 percent FTE for educational and administrative responsibilities that do not involve direct patient care. (Core)</p>
<p>Neurology</p> <p>Child Neurology</p>	<p>-</p>

Specialty/Subspecialty Name	Program Requirement Language
Clinical Neurophysiology Epilepsy Neurodevelopmental Disabilities Vascular Neurology	-
Nuclear Medicine	-
Obstetrics and Gynecology	-
Complex Family Planning Gynecologic Oncology Maternal-Fetal Medicine Reproductive Endocrinology and Infertility	-
Ophthalmology	-
Ophthalmic Plastic and Reconstructive Surgery	-
Orthopaedic Surgery	-
Adult Reconstructive Orthopaedic Surgery Foot and Ankle Orthopaedic Surgery Musculoskeletal Oncology Orthopaedic Sports Medicine Orthopaedic Surgery of the Spine Orthopaedic Trauma Pediatric Orthopaedic Surgery	-

Specialty/Subspecialty Name	Program Requirement Language
Osteopathic Neuromusculoskeletal Medicine	-
Otolaryngology – Head and Neck Surgery	-
Neurotology Pediatric Otolaryngology	-
Pathology	-
Blood Banking/Transfusion Medicine Chemical Pathology Cytopathology Forensic Pathology Hematopathology Medical Microbiology Neuropathology Pediatric Pathology Selective Pathology	-
Pediatrics	-
Adolescent Medicine Child Abuse Pediatrics Developmental-Behavioral Pediatrics Pediatric Cardiology Pediatric Critical Care Pediatric Endocrinology Pediatric Gastroenterology	-

Specialty/Subspecialty Name	Program Requirement Language
Pediatric Hematology Oncology Pediatric Infectious Diseases Pediatric Neonatal-Perinatal Pediatric Nephrology Pediatric Pulmonology Pediatric Rheumatology Pediatric Transplant Hepatology	
Physical Medicine and Rehabilitation	II.B.4.d) At a minimum, the required core faculty members, in aggregate and excluding program leadership, must be provided with support equal to an average dedicated minimum of 0.1 FTE for educational and administrative responsibilities that do not involve direct patient care. <small>(Core)</small>
Pediatric Rehabilitation Medicine Spinal Cord Injury Medicine	-
Plastic Surgery	-
Craniofacial Plastic Surgery	-
Aerospace Medicine Occupational and Environmental Medicine Public Health and General Preventive Medicine	-
Psychiatry	-
Addiction Psychiatry Child and Adolescent Psychiatry	-

Specialty/Subspecialty Name	Program Requirement Language
Forensic Psychiatry Geriatric Psychiatry Consultation-Liaison Psychiatry	
Radiation Oncology	-
Surgery	-
Complex General Surgical Oncology Pediatric Surgery Surgical Critical Care	-
Vascular Surgery - Integrated	-
Vascular Surgery - Independent	-
Thoracic Surgery - Integrated	-
Thoracic Surgery – Independent Congenital Cardiac Surgery	-
Urology	-
Pediatric Urology	-
Transitional Year	-
Multidisciplinary Specialties/Subspecialties	
Addiction Medicine (subspecialty of Family Medicine, Internal Medicine, or Psychiatry)	II.B.4.d) At a minimum, each required core faculty member, excluding members of the program's leadership, must be provided with support equal to a dedicated minimum of 0.1 FTE for educational and administrative responsibilities that do not involve direct patient care. ^(Core)
Brain Injury Medicine (subspecialty of Child Neurology,	-

Specialty/Subspecialty Name	Program Requirement Language
Neurology, Physical Medicine and Rehabilitation, or Psychiatry)	
Clinical Informatics (Subspecialty of Anesthesiology, Family Medicine, Internal Medicine, Pathology, or Pediatrics)	<p>II.B.4.d) At a minimum, the required core faculty members, in aggregate and excluding program leadership, must be provided with support equal to an average dedicated minimum of .1 FTE for educational and administrative responsibilities that do not involve direct patient care. ^(Core)</p> <p>Subspecialty-Specific Background and Intent: The Review Committee specified the minimum required number of core faculty members, but did not specify how the aggregate FTE support should be distributed to allow programs, in partnership with their sponsoring institution, to allocate the support as they see fit.</p> <p>Because an associate program director is also a core faculty member, the minimum dedicated time requirements for associate program directors are inclusive of core faculty activities. An additional 10 percent FTE for the core faculty position is not required. For example, if one core faculty member is named the associate program director for a 12-fellow program, the required minimum support for that position is 14 percent FTE.</p>
Dermatopathology (subspecialty of Dermatology or Pathology)	-
Neuroendovascular Intervention (subspecialty of Child Neurology, Neurological Surgery, Neurology, or Radiology)	-
Female Pelvic Medicine and Reconstructive Surgery (subspecialty of Obstetrics and Gynecology or Urology)	-
Geriatric Medicine (subspecialty of Family Medicine)	<p>II.B.4.d) At a minimum, the required core faculty members, in aggregate and excluding program leadership, must be provided with support equal to an average dedicated minimum of .1 FTE for educational and administrative responsibilities that do not involve direct patient care. ^(Core)</p>

Specialty/Subspecialty Name	Program Requirement Language
or Internal Medicine)	<p>Subspecialty-Specific Background and Intent: The Review Committee specified the minimum required number of subspecialty-certified core faculty members, but did not specify how the aggregate FTE support should be distributed to allow programs, in partnership with their sponsoring institution, to allocate the support as they see fit.</p> <p>Because an associate program director is also a core faculty member, the minimum dedicated time requirements for associate program directors are inclusive of core faculty activities. An additional 10 percent FTE for the core faculty position is not required. For example, if one core faculty member is named the associate program director for a 12-fellow program, the required minimum support for that position is 14 percent FTE.</p>
<p>Hand Surgery (subspecialty of Orthopaedic Surgery, Plastic Surgery, or Surgery)</p>	-
<p>Hospice and Palliative Medicine (subspecialty of Anesthesiology, Family Medicine, Internal Medicine, Pediatrics, Psychiatry, or Radiation Oncology)</p>	<p>II.B.4.d) At a minimum, the required core faculty members, in aggregate and excluding program leadership, must be provided with support equal to an average dedicated minimum of .1 FTE for educational and administrative responsibilities that do not involve direct patient care. ^(Core)</p> <p>Subspecialty-Specific Background and Intent: The Review Committee specified the minimum required number of subspecialty-certified core faculty members, but did not specify how the aggregate FTE support should be distributed to allow programs, in partnership with their sponsoring institution, to allocate the support as they see fit.</p> <p>Because an associate program director is also a core faculty member, the minimum dedicated time requirements for associate program directors are inclusive of core faculty activities. An additional 10 percent FTE for the core faculty position is not required. For example, if one core faculty member is named the associate program director for a 12-fellow program, the required minimum support for that position is 14 percent FTE.</p>
<p>Internal Medicine-Pediatrics (Combined program for Internal Medicine and Pediatrics)</p>	-

Specialty/Subspecialty Name	Program Requirement Language
<p>Medical Toxicology (subspecialty of Emergency Medicine or Preventive Medicine)</p>	-
<p>Molecular Genetic Pathology (subspecialty of Medical Genetics and Genomics or Pathology)</p>	-
<p>Neurocritical Care (Subspecialty of Neurology and Neurological Surgery)</p>	-
<p>Neuromuscular Medicine (subspecialty of Child Neurology, Neurology, or Physical Medicine and Rehabilitation)</p>	-
<p>Pain Medicine (subspecialty of Anesthesiology, Child Neurology, Neurology, or Physical Medicine and Rehabilitation)</p>	-
<p>Pediatric Emergency Medicine (subspecialty of Emergency Medicine and Pediatrics)</p>	-
<p>Sleep Medicine (subspecialty of Child Neurology, Internal Medicine, Neurology, Pediatrics, or Psychiatry)</p> <p><i>Will not issue citations until July 1, 2025</i></p>	<p>The current FTE requirements are not subject to citation and are currently under revision.</p>

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<p>Sports Medicine (subspecialty of Emergency Medicine, Family Medicine, Pediatrics, or Physical Medicine and Rehabilitation)</p>	<p>II.B.4.d) At a minimum, each required core faculty member, excluding program leadership, must be provided with support equal to a dedicated minimum of 10 percent FTE for educational and administrative responsibilities that do not involve direct patient care. ^(Core)</p>
<p>Undersea and Hyperbaric Medicine (subspecialty of Emergency Medicine or Preventive Medicine)</p>	<p>-</p>

Sponsoring Institution-Based Fellowships	
Fellowship Name	Program Requirement Language
<p>Health Care Administration, Leadership, and Management</p>	<p>-</p>