

**ACGME Program Requirements for Graduate Medical Education
in Pediatric Pathology
Summary and Impact of Major Requirement Revisions**

Requirement #: I.D.1.d)

Requirement Revision (significant change only):

I.D.1.d) Laboratories must perform or provide access to all tests required for the education of fellows ~~Laboratories must be equipped to perform tests required for the education of fellows.~~

(Core)

1. Describe the Review Committee's rationale for this revision:

Because not all programs perform diagnostic testing in house, the Review Committee noted fellows should have access to results from reference labs that are essential to the practice of their subspecialty focus area. The proposed revision was made to simplify this requirement and align the program requirements with other pathology subspecialties.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?

Fellow education will be improved, as the requirement ensures programs have access to and expose fellows to all testing relevant to the subspecialty, including both testing performed in house and testing sent to reference laboratories.

3. How will the proposed requirement or revision impact continuity of patient care?

No impact is anticipated.

4. Will the proposed requirement or revision 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?

No impact is anticipated.

5. How will the proposed revision impact other accredited programs?

The proposed revision was made to align this program requirement with the requirements of other pathology subspecialties.

Requirement #: IV.B.1.b).(2)- IV.B.1.b).(2).(c)

Requirement Revision (significant change only):

IV.B.1.b).(2) Fellows must be able to perform all medical, diagnostic, and surgical procedures considered essential for the area of practice. (Core)

IV.B.1.b).(2).(a) Fellows must demonstrate competence in performing pediatric autopsies, including general pediatric, metabolic, forensic, perinatal, embryo-fetal, and stillborn autopsies; (Core)

IV.B.1.b).(2).(a).(i) Each fellow ~~must~~ should perform or supervise at least 340 pediatric autopsies during the program. (Core Detail)

IV.B.1.b).(2).(a).(i).(a) Fellows must document all pediatric autopsies performed or supervised in the ACGME Case Log System. (Core)

IV.B.1.b).(2).(b) Fellows must demonstrate competence in diagnosing common and unusual pediatric problems, including metabolic, prenatal, genetic, and neoplastic diseases; and, (Core)

IV.B.1.b).(2).(b).(i) Each fellow ~~must~~ should perform at least 2000 gross and/or histologic examinations of pediatric surgical pathology specimens during the program, including obstetrics-related materials (placentas and abortions) and cytology. (Core Detail)

IV.B.1.b).(2).(c) Fellows must demonstrate competence in interpreting the results of laboratory assays used in pediatric pathology, to include immunopathologic and histochemical assays, and molecular and genomic techniques, including diagnostic assays for metabolic diseases. (Core)

1. Describe the Review Committee's rationale for this revision:

The Review Committee is introducing competency-based language by moving toward a model that requires fellows to demonstrate competence in procedures and allowing programs increased flexibility in the minimum number of required procedures.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?

The proposed revision shifts the focus from numbers-based acquisition to a competency-based model. This change will lead to improvements in fellow education, patient safety, and patient care quality by ensuring fellows achieve competence.

3. How will the proposed requirement or revision impact continuity of patient care?

No impact is anticipated.

4. Will the proposed requirement or revision 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?

Programs should consider whether their current curriculum evaluation system ensures achievement of competence. Programs may need to consider additional institutional resources to implement competency-based education.

5. How will the proposed revision impact other accredited programs?
No impact is anticipated.

Requirement #: IV.C.4.- IV.C.4.c)

Requirement Revision (significant change only):

IV.C.4. [Fellow experiences must include:]

IV.C.4.a) ~~supervision of trainees and/or laboratory personnel, and with graduated responsibility, including independent diagnoses and decision-making; and,~~ ^(Core)

IV.C.4.b) supervision of residents and/or other learners; and, ^(Detail)

~~IV.C.4.b)~~IV.C.4.c) educational activities specific to pediatric pathology, review of the medical literature in the subspecialty area, and use of study sets of unusual cases. ^(Core)

1. Describe the Review Committee's rationale for this revision:

The proposed revision was made to clarify that experiences should include supervision of residents and other learners, and it also standardizes program requirements across the pathology subspecialties.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?

No impact is anticipated.

3. How will the proposed requirement or revision impact continuity of patient care?

No impact is anticipated.

4. Will the proposed requirement or revision 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?

No impact is anticipated.

5. How will the proposed revision impact other accredited programs?

Residents and/or learners from other accredited programs may be supervised by fellows.

Requirement #: V.A.1.a).(1)

Requirement Revision (significant change only):

V.A.1.a).(1) The feedback, based on direct observation, should incorporate competency-based assessments. (Core)

1. Describe the Review Committee's rationale for this revision:

The proposed revision is in alignment with the ongoing work toward the integration of competency-based medical education into ACGME-accredited programs and focuses on direct observation as a method to provide formative feedback.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?

The proposed revision will improve fellow education by moving toward competency-based medical education and focusing more on the individual fellow.

3. How will the proposed requirement or revision impact continuity of patient care?

No impact anticipated.

4. Will the proposed requirement or revision 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?

Programs may need to consider additional institutional resources to implement competency-based education, specifically on direct observation and feedback. Additional institutional resources may include the possibility of further faculty development.

5. How will the proposed revision impact other accredited programs?

No impact anticipated.