

AASPD Panel: Update from the Subs: What have we learned & where are we going? : Adult Cardiothoracic Anesthesia (ACTA) Update

SAAA 2016 Annual Meeting, Chicago, IL
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The ACTA Fellowship was ACGME approved in 2007, but remains without a certification exam (see below). A summary of current topics and issues being discussed by the ACTA PDs and affecting the ACTA Fellowships are outlined below.

ACTA Fellowship Match:

Four successful matches using SF Match have occurred since 2013 (see below). In the 2016 match there was a notable increase (~25%) in the number of ACTA applicants, relative to the previous 3 years. Sixty of sixty three ACGME-approved ACTA programs (95.3%), representing 199 of 207 (95.7%) total positions participated in the 2016 match. Many of the withdrawals each year have been attributable to individuals matching to a 2 year fellowship involving an ICU fellowship first, followed by an ACTA fellowship – this trend appears to be increasing. The ACTA Fellowship Directors continue to use a handful of identified situations (e.g., applicant from home program, 2-year program), to allow pre-match “agreements” documented through an SCA website tool, where PDs and applicants agree to rank each other to match – these have been occurring at a rate of approximately 40 per year. The content of the electronic application for the 2017 match has been updated to include ABA Basic, and COMLEX scores, and an optional photo (after interview acceptance).

Adult Cardiothoracic Anesthesiology Fellowship	June 2013	June 2014	June 2015	June 2016
APPLICANT DATA				
Applicant Registrations	267	268	268	331
# Applicant Rank Lists Submitted	230	213	211	258
Matched Total	166	172	182	199
Unmatched Total	64	41	29	59
Applicant Matching % (Overall)	72%	81%	86%	77%
Total # of Withdrawals	9	21	14	25
PROGRAM DATA				
# of Participating Programs	54	55	57	60
Positions Offered	168	174	183	199
Positions Failed	166	172	182	199
Unfilled Positions	2	2	1	0

Timelines for the upcoming June 2017 Match are as follows.

Timelines:

- Friday, Nov. 11, 2016 Applicant registration begins
- Wednesday, Feb. 1, 2017 CAS deadline (suggested)
- Monday, June 5, 2017 Rank lists must be submitted by 12 PM (Pacific)
- Monday, June 19, 2017 Match results available to programs/applicants
- Wednesday, June 21, 2017 Vacancies listed on SF Match

Fellow/Program Director Questionnaire:

Using the (generously offered) pediatric anesthesia fellowship questionnaire tool as a model, a task force (Shook/Ural/Augoustides) has edited and modified the document with input from PDs at the ASA meeting to be pertinent to the ACTA fellowship. The intention is to circulate the document to current (2016-17) fellows/PDs - timing still to be determined.

ACGME Case Log:

The previously published version was intended for July 2016 roll out but was deemed inadequate and withdrawn. A task force (Sniecinski, Shook, Stafford Smith) generated a revised template developed with input from the PDs which was provided to the ACGME for formatting, and is currently in an advanced stage of development – the intention is that the tool can produce TEE printouts for TEE certification as well as provide a log for the Fellowship itself – hopefully this will be available for the July 2017 start date.

Fellow Web Seminars:

A task force has been formed (Weitzel, Bottiger, Ahlgren, Stafford Smith) to investigate formats, technologies and tools for creating online media (videos, podcasts etc.), to complement the already-existing 15 presentations constituting the SCA fellowship lecture series, for use by ACTA fellowships through the SCA website. Two prototypes were developed, and reviewed by the PDs at the ASA PD meeting and were well received. Suggested topics and other ideas are currently being solicited from the PDs and others for further development of this initiative. The SCA Board is in support, and opportunities for the use of such educational resources beyond the Fellowships are being discussed.

ACTA Fellowship Certification:

A strong perception of the PDs, voiced unanimously at the ASA meeting as on previous occasions, is that the demands of the TEE certification exam during the ACTA fellowship distract from a balanced learning experience. The belief is that a comprehensive certification exam covering all aspects of ACTA anesthesia would re-balance this disequilibrium. The ABA and other options are currently being explored as viable SCA-sponsored pathways towards such a certification exam.