



Anesthesiology RC Update



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Committee*

Disclosures

Dr. Gravel Sullivan works for the ACGME



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Objectives

- Introduce new RC members
- Update on New and Osteopathic Programs
- Pain Medicine Program Requirement Revision Timeline
- Core Anesthesiology Program Requirement Revisions (proposed)
- Review ACGME and RC Initiatives in 2018
- Answer questions



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New RC Members

Manuel Vallejo, Jr., MD (2018)
DIO, Dept. of Obstetric Anesthesiology
West Virginia University

Anne Marie McKenzie-Brown, MD, (2018)
Associate Professor, Dept. of Anesthesiology
Director, Division of Pain Management and Pain Center
Emory University



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New Programs in 2017

Core Residencies	9
Adult Cardiac	3
Critical Care Anesthesiology	2
OB Anesthesiology	1
Pain Medicine	2
Regional Anesthesiology	12
TOTAL	31



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Osteopathic Programs

Residencies

- 10 of 13 AOA Anesthesiology Programs on Initial Accreditation
- One merged with existing ACGME-accredited program
- 1 on Continued Pre-Accreditation
- 1 not applying

Pain Medicine fellowships applying

Fellows, faculty may be boarded by AOBA or Osteopathic
Conjoint Pain Medicine Examination Committee



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Multidisciplinary Pain Medicine PR Revision

Proposed Requirements posted for Review & Comment.....TBD (late 2017)
 Review & Comment ends.....TBD
 Committee on Requirements review.....March 2, 2018
 Effective Date (tentative).....July 1, 2018



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Anesthesiology Core PR Revision

Proposed Requirements posted for Review & Comment.....TBD
 Committee on Requirement review.....March 2, 2018
 Anticipated Effective Date.....July 1, 2018



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IV.A.5.a).(2).(m) patients undergoing a variety of diagnostic or therapeutic procedures outside the surgical suite. This must include: (Outcome)

IV.A.5.a).(2).(n) use of surface **ultrasound**, and transesophageal and transthoracic echocardiography to guide the performance of invasive procedures and to evaluate organ function and pathology as related to anesthesia and critical care, and resuscitation

IV.A.5.a).(2).(n).(i) Must understand the principles of ultrasound including: the physics of ultrasound transmission, ultrasound transducer construction and transducer selection for specific applications; be able to obtain images with with an understanding of limitations and artifacts.



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IV.A.5.a).(2).(n).(ii) Be able to obtain standard views of the heart and inferior vena cava with transthoracic echocardiography allowing the evaluation of myocardial function, estimation of central venous pressure, and gross pericardial/cardiac pathology (e.g. large pericardial effusion)

IV.A.5.a).(2).(n).(iii) Be able to obtain standard views of the heart with transesophageal echocardiography allowing the evaluation of myocardial function and gross pericardial/cardiac pathology (e.g. large pericardial effusion)

IV.A.5.a).(2).(n).(iv) Be able to use transthoracic ultrasound for the detection of pneumothorax and pleural effusion

IV.A.5.a).(2).(n).(v) Be able to use surface ultrasound to guide vascular access (both central and peripheral) and to guide regional anesthesia procedures.

IV.A.5.a).(2).(n).(vi) Be able to describe techniques, views, and findings in standard language.



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IV.A.5.b).(1).(a).(vi) **healthcare finance**, legislative and regulatory issues; and, (Outcome)

IV.A.5.b).(1).(b) management skills to include basic knowledge of organizational culture, decision making, change management, conflict resolution, and negotiation and advocacy. (Outcome)

IV.A.5.b).(1).(c) knowledge of the care of the patient in the continuum of the perioperative period, including collaboration with medical and surgical colleagues to:

IV.A.5.b).(1).(c).(i) optimize preoperative patient condition. (Outcome)

IV.A.5.b).(1).(c).(ii) optimize recovery. (Outcome)



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Core Program Board Pass Rate

- Basic Exam not included in program Board Pass Rate



Academic Calendar

- Calculation will be made by graduation rather than calendar year



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Other RC Activities

- Implementation of Final Adult Cardiac Case Logs (required as of 7/1/2017)
- Revision of Core Requirement FAQs
- Changes to Pediatric Anesthesiology Case Logs



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Updates to Pediatric Case Log Classifications

Proposed RC Changes:

- Specific locations of peripheral nerve blocks and catheters (upper or lower) added
- Blood transfusion patients will be tracked
- Number of CVCs dropped to 6



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ACGME Initiatives

- CPR Revision Task Force
 - Section VI implemented July 1, 2017*
 - Other Sections currently under revision
- Program Coordinator Advisory Council
 - Third meeting Sept 2017
 - Coordinator Position Description and Manual
- New Educational resources available through Distance Learning in [ACGME's Bridge LMS](http://www.tiny.cc/acgme) (www.tiny.cc/acgme)



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RC Presentations & Outreach

- Annual Education Conference - **March 2018**
- American Osteopathic Colleges of Anesthesiology Meetings - **March & September 2018**
- New Program Coordinator Workshop - **August 2018**



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Questions?

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