

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

Requirement #: I.D.1.d)

Requirement Revision (significant change only):

I.D.1.d) Laboratories must ~~be equipped to perform~~ or provide access to all 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).(1).(a).(i) - IV.B.1.b).(1).(a).(i).(o)

Requirement Revision (significant change only):

IV.B.1.b).(1).(a).(i) [These must include the following analytes and specimens:]

IV.B.1.b).(1).(a).(i).(a) amino acids, peptides, and proteins; ^(Core)

~~IV.B.1.b).(1).(a).(i).(a)~~ IV.B.1.b).(1).(a).(i).(b) bilirubin, hemoglobin, iron, and porphyrins; ^(Core)

~~IV.B.1.b).(1).(a).(i).(b)~~ IV.B.1.b).(1).(a).(i).(c) blood, cerebrospinal fluid, plasma, serum, and other body fluids; ^(Core)

IV.B.1.b).(1).(a).(i).(d) carbohydrates; ^(Core)

~~IV.B.1.b).(1).(a).(i).(c)~~ IV.B.1.b).(1).(a).(i).(e) cardiac, liver, and kidney function tests; ^(Core)

~~IV.B.1.b).(1).(a).(i).(d)~~ IV.B.1.b).(1).(a).(i).(f) clinical toxicology, therapeutic drugs, and toxic elements tests; ^(Core)

~~IV.B.1.b).(1).(a).(i).(e)~~ IV.B.1.b).(1).(a).(i).(g) electrolytes and blood gases; ^(Core)

~~IV.B.1.b).(1).(a).(i).(f)~~ erythrocyte enzymes; ^(Core)

~~IV.B.1.b).(1).(a).(i).(g)~~ hemoglobin, iron, and bilirubin; ^(Core)

IV.B.1.b).(1).(a).(i).(h) hormones; ^(Core)

IV.B.1.b).(1).(a).(i).(i) infectious disease tests, (e.g., for Epstein-Barr virus, herpes simplex virus, HIV, and viral hepatitis or HIV); ^(Core)

~~IV.B.1.b).(1).(a).(i).(j)~~ kidney function; ^(Core)

~~IV.B.1.b).(1).(a).(i).(k)~~ IV.B.1.b).(1).(a).(i).(j) lipids, lipoproteins, and apolipoproteins; ^(Core)

~~IV.B.1.b).(1).(a).(i).(l)~~ IV.B.1.b).(1).(a).(i).(k) metabolites associated with metabolic diseases; ^(Core)

~~IV.B.1.b).(1).(a).(i).(m)~~ IV.B.1.b).(1).(a).(i).(l) molecular diagnostics for genetics, tumor genomics, and microbiology; ^(Core)

~~IV.B.1.b).(1).(a).(i).(n)~~ porphyrins; ^(Core)

~~IV.B.1.b).(1).(a).(i).(o)~~ IV.B.1.b).(1).(a).(i).(m) serum and erythrocyte enzymes; ^(Core)

~~IV.B.1.b).(1).(a).(i).(p)~~ therapeutic drugs; ^(Core)

~~IV.B.1.b).(1).(a).(i).(q)~~ toxic elements; ^(Core)

~~IV.B.1.b).(1).(a).(i).(r)~~ IV.B.1.b).(1).(a).(i).(n) tumor markers; and, ^(Core)

~~IV.B.1.b).(1).(a).(i).(s)~~IV.B.1.b).(1).(a).(i).(o) vitamins. (Core)

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

This revision was made to reflect the current scope of practice.

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

No impact is anticipated on patient safety or patient care quality. With this revision, fellow education will be improved, as required topics are relevant to the current scope of practice.

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?

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.a)~~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 chemical 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.