ACGME Program Requirements for Graduate Medical Education
in Interventional Cardiology
Summary and Impact of Focused Requirement Revisions

<table>
<thead>
<tr>
<th>Requirement: II.A.2.b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requirement Revision (significant change only):</td>
</tr>
<tr>
<td>This support must be in the range of 20 to 50 percent of the program director’s salary, or protected time, for administration of the program, depending on the size of the program. It is suggested that this support be 25-50% of the program director’s salary, or protected time, depending on the size of the program.</td>
</tr>
</tbody>
</table>

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

   The Committee is correcting a long overdue word-choice and categorization error. Salary support/protected time for the program director’s administrative responsibilities should always have been a “must” and a core requirement. The Committee also lowered the bottom of the range to 20 percent, recognizing that one day per week could suffice for smaller fellowships.

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

   This will directly improve fellow education (and indirectly improve patient safety and patient care quality) by ensuring that the program director has adequate time for the administrative responsibilities associated with the position.

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

   This should not affect continuity of patient care.

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?

   If a program director was not receiving the minimum salary support/protected time, this will necessitate additional financial resources.

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

   This should not affect other accredited programs.
Requirement: II.B.4.c)-d)

Requirement Revision (significant change only):

In addition to the program director, there must be at least one core faculty member certified in interventional cardiology by the ABIM or the AOBIM. *(Core)*

For programs approved for more than two fellows, there must be at least one core faculty member certified in interventional cardiology by the ABIM or the AOBIM for every 1.5 fellows. *(Core)*

1. Describe the Review Committee’s rationale for this revision:
   
   The Committee is supplementing the “Core Faculty” section of the Common Program Requirements with its long-standing requirements that there be a minimum number of faculty members who are certified in the subspecialty.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   
   This will not affect resident/fellow education, patient safety, and/or patient care quality.

3. How will the proposed requirement or revision impact continuity of patient care?
   
   This will not affect continuity of patient care.

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?
   
   This will not necessitate additional institutional resources.

5. How will the proposed revision impact other accredited programs?
   
   This will not affect other accredited programs.