

SES045: Review Committee for Plastic Surgery Update

Amanda Gosman, MD – Review Committee Chair
Kelsey Sill, MHA – Associate Executive Director

Conflict of Interest Disclosure

Speaker(s): Amanda Gosman, MD; Kelsey Sill, MHA

Disclosure

None of the speakers for this educational activity have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

Objectives

- **Review Committee Overview**
- **Accreditation Activity**
- **Specialty Information**
- **Review Committee Updates**
 - Specialty-Specific Resident Survey Questions
 - Joint Plastic Surgery-Hand Surgery (JPSHS) 5+1 Pathway
 - International Rotation Criteria
- **ACGME Updates**

Review Committee Overview



Review Committee Membership

- All members are volunteers
 - 10 plastic surgeon members nominated by:
 - American Board of Plastic Surgery (ABPS)
 - American College of Surgeons (ACS)
 - American Medical Association (AMA)
 - American Osteopathic Association (AOA)
 - One public member
 - One resident/fellow member

Review Committee Members

Amanda Gosman, MD, *Chair*

University of California, San Diego

Paul Cederna, MD, *Vice Chair**

University of Michigan

Malke Asaad, MD, *Resident Member**

University of Pittsburgh Medical Center

Kyle Campbell, FACHE, *Public Member*

WellMed Medical Management

Lisa David, MD, MBA

Wake Forest University

David Dellinger, DO

Elysian Plastic Surgery

Jeffrey Friedrich, MD, MC

University of Washington

Jeffrey Janis, MD*

Ohio State University Hospital

Bernard Lee, MD, MBA, MPH

Beth Israel Deaconess Medical Center

Amber Leis, MD

Washington University

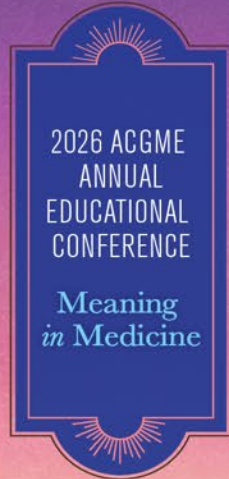
Ann Schwentker, MD

University of Cincinnati

Peter Taub, MD, MS

Icahn School of Medicine at Mount Sinai

*Term Ends June 30, 2026



Incoming Members

Paris Butler, MD, MPH

Yale School of Medicine

Sacha Hauc, MD, MPH, *Resident Member*

Ohio State University

Galen Perdikis, MD

Vanderbilt University Medical Center

2026 ACGME
ANNUAL
EDUCATIONAL
CONFERENCE

Meaning
in Medicine

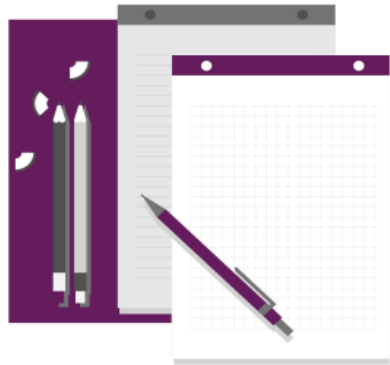
What does the Review Committee do?

- Peer review
- Determination of a program's "substantial compliance" against a defined set of standards

What does the Review Committee review?

- Program Information in the Accreditation Data System (ADS)
- Major Changes
- Response(s) to Citation(s)
- Resident/Fellow and Faculty Surveys
- Graduate Case Log Data
- Certification Examination Metrics
- Site Visit Reports

Annual Review Cycle



Data Collection
(January - September)



**RC Executive
Committee
Review**
(November)



**RC Review &
Decision**
(January, April)



**Program
Notification**



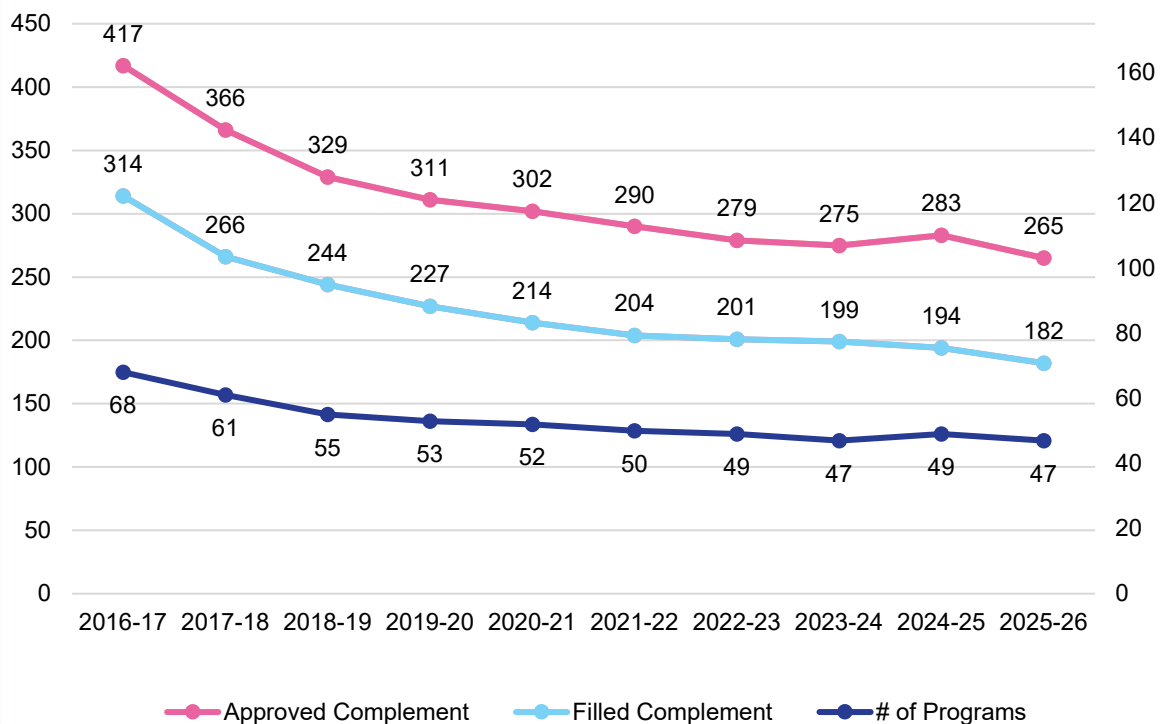
Accreditation Activity

Program Accreditation Status Breakdown

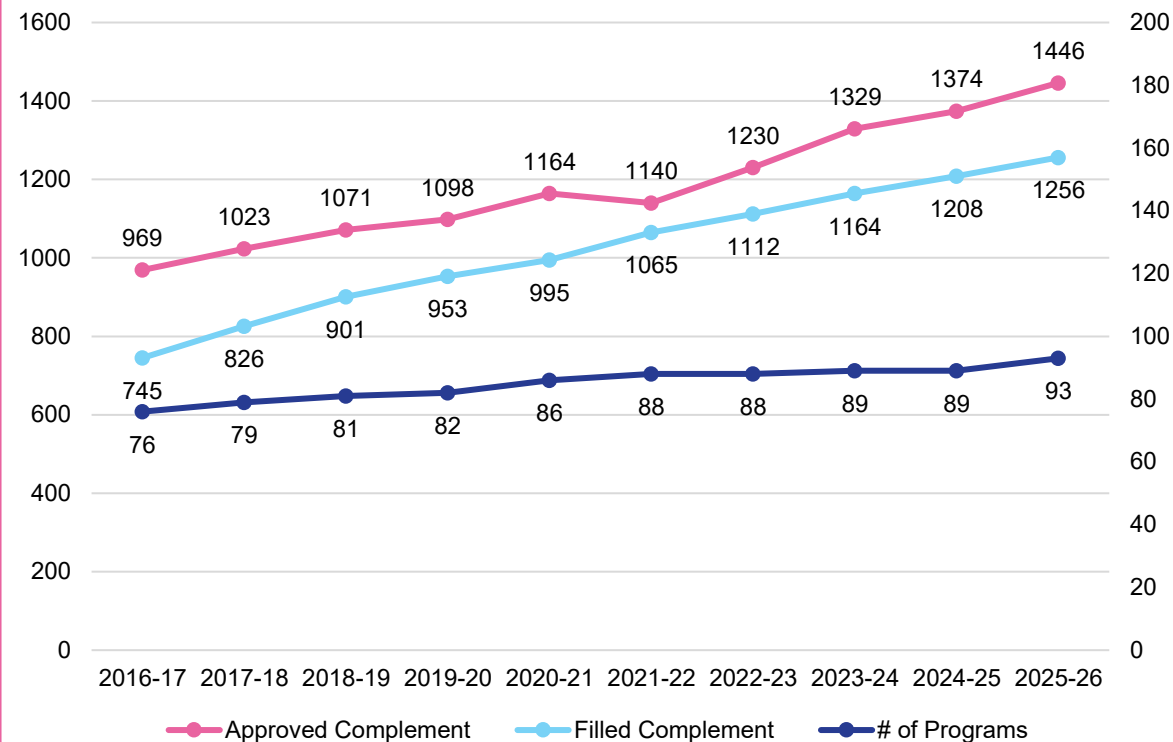
2024-2025 Academic Year

Specialty	Initial Accreditation	Continued Accreditation without Outcomes	Continued Accreditation	Continued Accreditation with Warning	Probationary Accreditation	Total
Plastic Surgery - Independent	5	1	38	3	0	47
Plastic Surgery - Integrated	2	14	66	5	2	89
Craniofacial Surgery	2	0	8	0	0	9
Hand Surgery	1	1	19	0	0	21

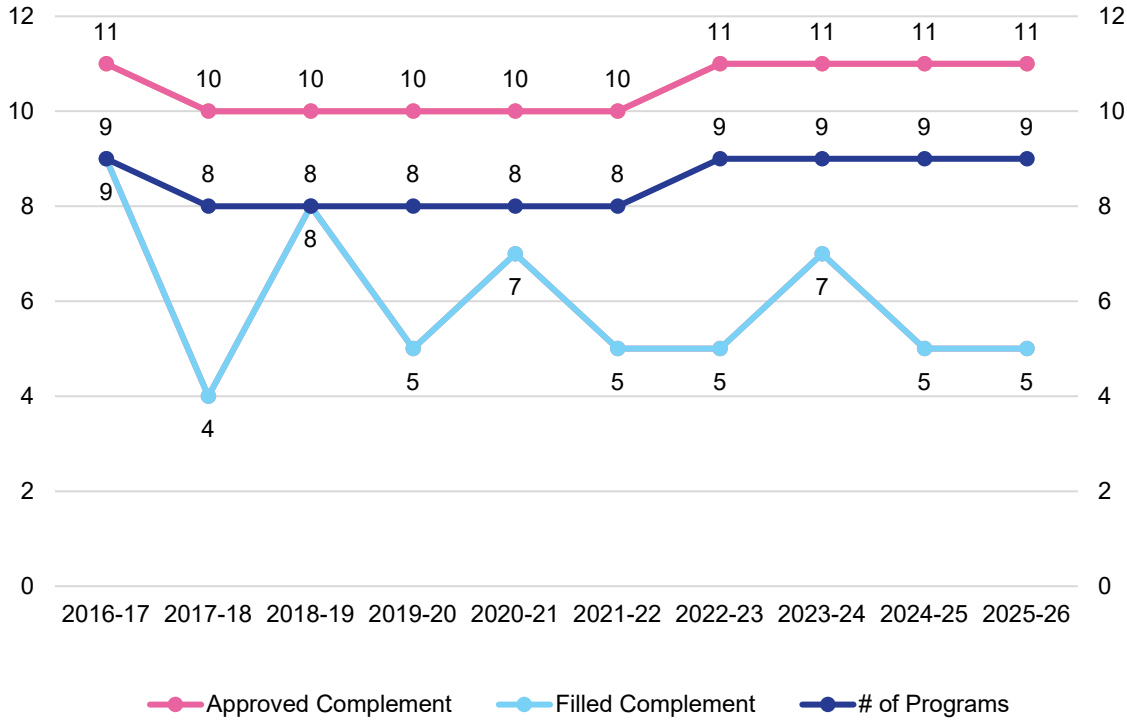
Plastic Surgery - Independent 10-Year Complement Trend



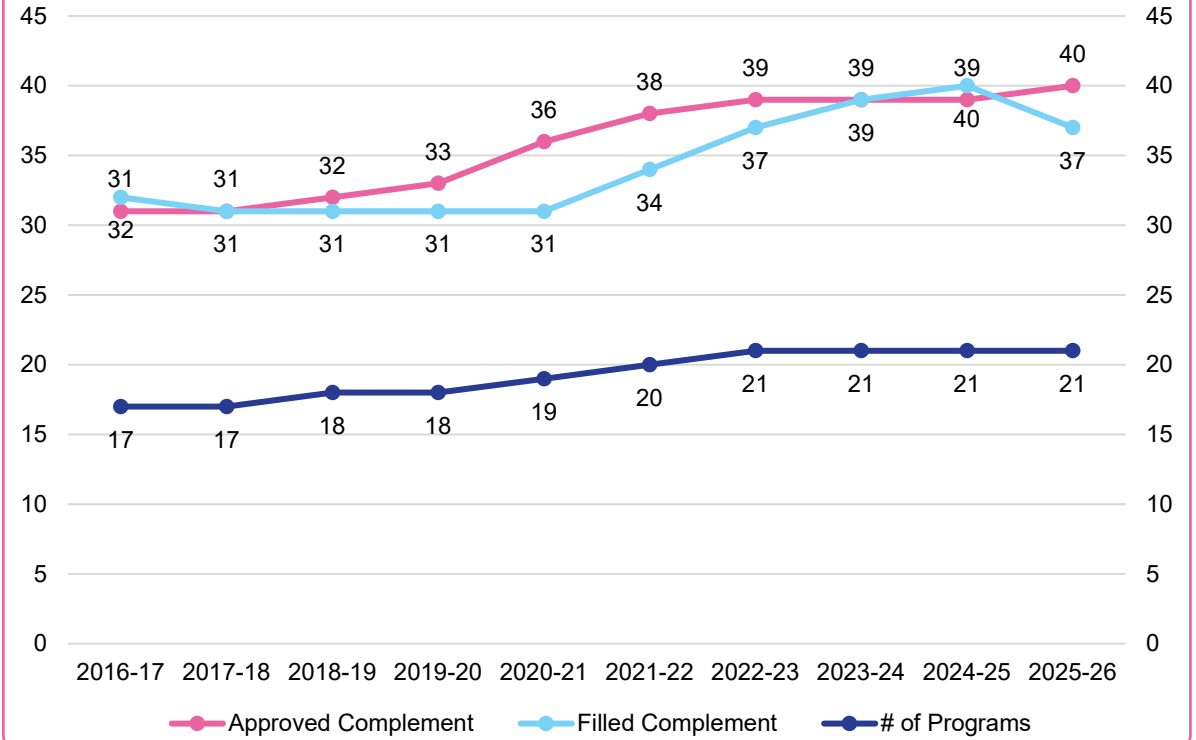
Plastic Surgery - Integrated 10-Year Complement Trend



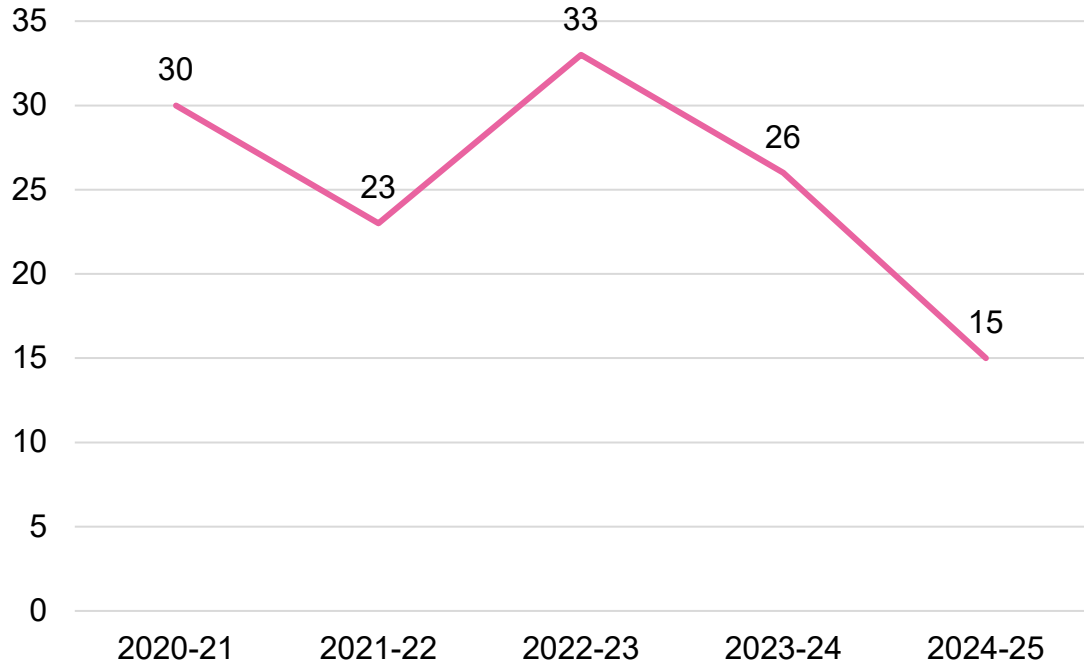
Craniofacial Surgery 10-Year Complement Trend



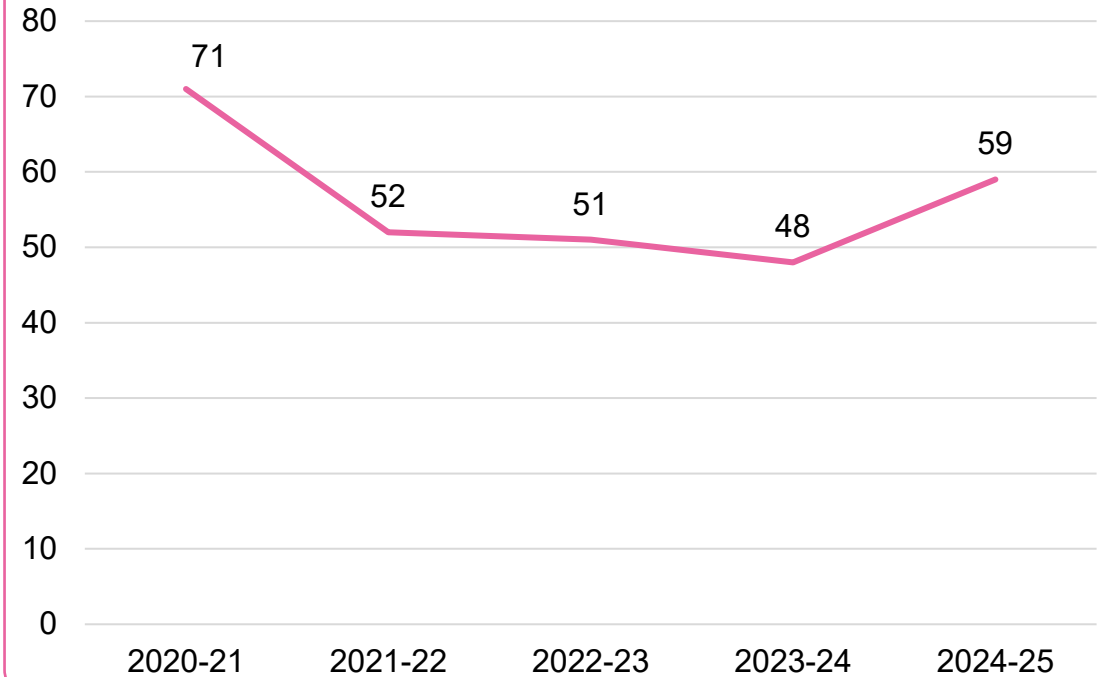
Hand Surgery 10-Year Complement Trend



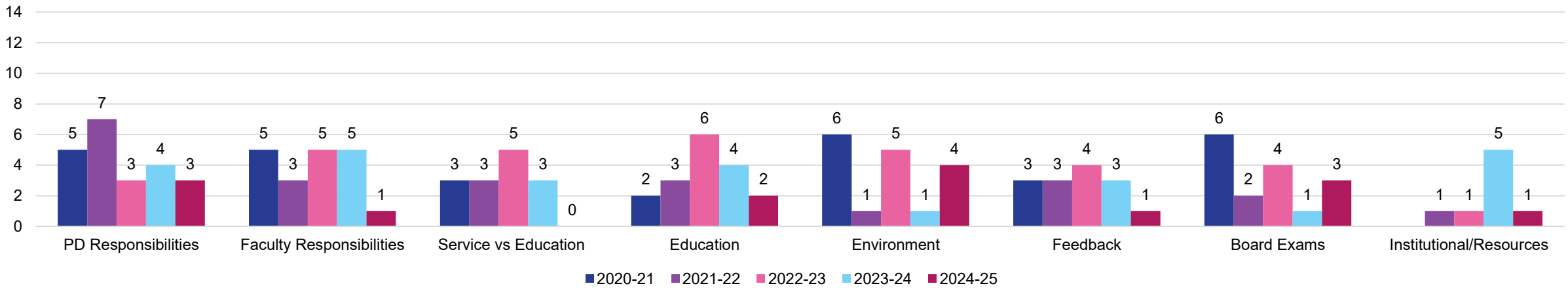
Plastic Surgery - Independent 5-Year Citation Trend



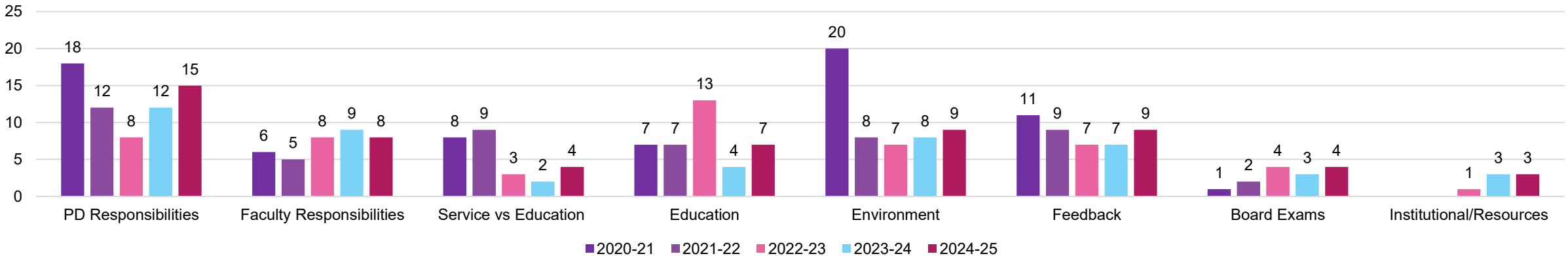
Plastic Surgery - Integrated 5-Year Citation Trend



Plastic Surgery - Independent 5-Year Citation Trend



Plastic Surgery - Integrated 5-Year Citation Trend



Most Common Citations

2024-2025

	Plastic Surgery – Independent	Plastic Surgery – Integrated	Hand Surgery
1.	Program Director Responsibilities (4)	Program Director Responsibilities (15)	Supervision (2)
2.	Faculty Responsibilities (4)	Faculty Responsibilities (8)	1 Day in 7 Free (2)
3.	Service to Education Imbalance (3)	Resident Evaluation (8)	Goals & Objectives (1)
4.	Supervision (2)	Board Exam Performance (4)	Procedural Experience (1)
5.	Resident Evaluation (2)	Service to Education Imbalance (4)	Fellow Evaluation (1)

Specialty Information

Responding to Citations

When reviewing responses to citations, the Review Committee considers:

- Does the program **understand the reason** why they are not in compliance?
- Is there an explicit statement of how the program engaged the faculty/residents/fellows/institution in the **identification of the problem(s)** and **creation of an action plan**?
- Are there **actionable items** implemented by the program and/or institution that directly addressed the program requirement(s) out of compliance?
- Is there an explicit identification of how the program will **monitor and sustain improvement**?

Citation responses are taken into consideration along with supporting materials

Board Pass Rate - Fifth Percentile

- Board pass rate will change every year
- Must achieve higher than the fifth percentile or 80%

Specialty	Threshold for ABMS Written Exam	Threshold for ABMS Oral Exam
Plastic Surgery – Independent	33.33%	62.50%
Plastic Surgery – Integrated	74.17%	66.67%

Future Meeting Dates



April 3, 2026

New Application: October 3, 2025

Agenda Close: January 30, 2026



January 8, 2027

New Application: August 7, 2026

Agenda Close: October 30, 2026



April 23, 2027

New Application: November 20, 2026

Agenda Close: March 1, 2027

Plastic Surgery Accreditation Team



Chris Fox, PhD
Executive Director



Kelsey Sill, MHA
Associate Executive
Director



Aimee Morales
Associate Executive
Director



Caleb Mitchell
Senior Accreditation
Administrator



Colleen Morris
Accreditation
Administrator



Contact Information

Chris Fox, PhD
Executive Director
cfox@acgme.org
312.755.5499

Caleb Mitchell
Senior Accreditation
Administrator
cmitchell@acgme.org
312.755.7067

Kelsey Sill, MHA
Associate Executive Director
ksill@acgme.org
312.755.5784

Colleen Morris
Accreditation Administrator
cmorris@acgme.org
312.755.5495

Aimee Morales
Associate Executive Director
amorales@acgme.org
312.755.7419

Lucy Nicholls
ADS Senior Applications and
Data Coordinator
ads@acgme.org
312.755.7111

Review Committee Updates

Updated Specialty-Specific Resident Survey Questions

- Specialty-specific questions on the Resident Survey have been updated using feedback from the community
- See the last page of the ACGME Resident Survey when it is released this spring

2024-2025 ACGME Resident/Fellow Survey - page 6
 362 Plastic Surgery - Integrated - Aggregated Program Data
 Specialty Specific Questions

Survey taken: February 2025 - April 2025

Residents Responded 339

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
My program provides appropriately graduated supervision in the operating room, progressing from direct supervision of beginning residents to oversight of the activities of residents in the final years of education.	0.0%	0.6%	1.8%	13.3%	84.3%
My program mandates sufficient experience as an assistant in the operating room before allowing residents to act as surgeon.	0.0%	1.2%	1.5%	18.9%	78.4%
My program encourages more senior residents to act as teaching assistant to more junior residents in the operating room.	0.3%	0.9%	1.8%	16.3%	80.8%
My program provides appropriately graduated supervision in non-operative patient care (wards, ICUs, Emergency Department, outpatient facilities, etc.) progressing from direct supervision of beginning residents to oversight of the activities of residents in the final years of education.	0.3%	0.6%	0.9%	13.6%	84.6%
The outpatient clinic/clinical office experience in my program regularly provides me with the opportunity to participate in all aspects of patient care, including but not limited to diagnosis, pre-operative planning, post-operative follow-up and continuity of care.	0.3%	0.6%	2.4%	16.3%	80.5%
My program provides sufficient breadth and depth of experience, and does so in such a way, that I am confident that I would be able to practice this specialty competently and independently without fellowship or other future training.	0.9%	1.2%	3.3%	14.8%	79.9%

	0	> 0, but < 1	1	> 1, but <= 2	> 2, but < 5	>= 5
The number of half-day sessions that I spend in the outpatient clinic per week (on average throughout the program) is:	0.3%	5.3%	26.0%	45.3%	23.1%	0.0%

Joint Plastic Surgery-Hand Surgery (JPSHS) 5+1 Pathway

- Accelerated track leading to ABPS certification in both plastic surgery and hand surgery
- The plastic surgery and hand surgery programs *should* be sponsored by the same ACGME-accredited Sponsoring Institution; exceptions allowed for programs in close geographic proximity
- The hand surgery program **must** be accredited by the Review Committee for Plastic Surgery
- Both programs **must** have held a status of Continued Accreditation for a minimum of five years
- Additional information about application process available on [Plastic Surgery Documents and Resources webpage](#)

Current Programs

Southern Illinois University Program,
Springfield, Illinois

University of Mississippi Medical Center
Program, Jackson, Mississippi

UPMC Medical Education Program,
Pittsburgh, Pennsylvania

Washington University/B-JH/SLCH
Consortium Program, St. Louis, Missouri

Updated International Rotation Criteria

- Independent and integrated plastic surgery programs may propose a rotation at the site of an established rotation for another ACGME-accredited plastic surgery residency program
- Both programs must have an accreditation status of Continued Accreditation, Continued Accreditation with Warning, or Continued Accreditation without Outcomes
- All programs are still required to submit subsequent rotation (new rotators to an approved rotation) requests
- Requests must be submitted at least **90 days** prior to the start date of the rotation
- Additional information about the application process is available on the [Plastic Surgery Documents and Resources](#) webpage

ACGME Updates

Accreditation & Recognition Site Visits

Assurance site visits continuing for programs that have not been visited for ten or more years

All programs with 2026 assurance site visits have been notified

Continuing with in-person and virtual modalities

Recent Requirement Revisions

Focused Revision to Common Program Requirements

Faculty Qualifications

- Removing specialty-specific language that does not allow for alternate qualifications

Resident Transfers

- Removing restrictions from specialty requirements that do not allow transfers.

Frequently Asked Questions (FAQs) Integration into Common Program Requirements

- As part of the ACGME's Digital Transformation and following the reformatting of all Requirements documents, FAQs will be integrated into the Requirements documents.
- All common FAQs and specialty/subspecialty-specific FAQs will be available linked directly to specific requirements, where applicable.
- Except for FAQs already undergoing revision, **the content of the FAQs is not changing**, just their integration into requirements documents for ease of access.
- Revisions were also made to the Resident/Fellow Transfers and Faculty Certification sections in many Program Requirements, effective July 1, 2026.

Projected Common Program Requirement Major Revision Timeline

Residency Common Program Requirements:



Fellowship Common Program Requirements:



ACGME Cloud

Reducing Burden | Reimagining GME

New ACGME Cloud features launching in April will offer:

- Unified User Experience – simplified, streamlined navigation across ACGME Cloud and the Accreditation Data System (ADS), including a user-friendly way to switch between products and an AI-powered smart search to find information in ADS and complete tasks.
- ACGME Cloud | Analytics Additions and Enhancements – additional dashboards for the annual Resident/Fellow and Faculty Surveys, operational dashboards, and Milestones dashboards.

Visit the ACGME Cloud team at the ACGME Hub in the Exhibit Hall to learn more!

Contact Cloud@acgme.org with questions.



 Listening  Information  News  Collaboration

Register today! After registering, you'll receive a confirmation with "Add to Calendar" option

Your monthly connection to ACGME updates and collaboration

- ✓ Stay informed on important updates and initiatives
- ✓ Engage in interactive activities
- ✓ Provide feedback and share ideas
- ✓ Visit the page on [acgme.org](https://www.acgme.org/education-and-resources/acgme-linc/) to view upcoming sessions and register: <https://www.acgme.org/education-and-resources/acgme-linc/>



[Add to Calendar\(.ics\)](#) | [Add to Google Calendar](#) | [Add to Yahoo Calendar](#)





FUNDING OPPORTUNITY FOR RESIDENT AND FELLOW LEADERS



OPPORTUNITY DESCRIPTION

Resident- or fellow-developed and led projects to enhance meaning in clinical learning environments by fostering the physician-patient relationship



PROJECT ASSESSMENT CRITERIA

- Strengthens relationships with patients
- Sustainable
- Adaptable to other programs or contexts
- Innovative and cost-effective



PROJECT FUNDING

Additional travel stipend available to offset costs to attend Learning Collaborative meetings in Chicago, Illinois and the 2028 ACGME Annual Educational Conference in Orlando, Florida.

FUNDING OPTIONS

- 1: up to \$10,000
- 2: up to \$5,000



**SCAN QR CODE
FOR MORE INFO**

**PROPOSALS DUE:
APRIL 20, 2026**

CBME EPAs

Are Graduating Residents Ready for Practice?

PAPERS OF THE 133RD ASA ANNUAL MEETING

General Surgery Residency Inadequately Prepares Trainees for Fellowship

Results of a Survey of Fellowship Program Directors

Samer G. Mattar, MD, Adnan A. Alseidi, MD, FACS,† Daniel B. Jones, MD, FACS,‡
D. Rohan Jeyarajah, MD, FACS,§ Lee L. Swanstrom, MD, FACS,|| Ralph W. Aye, MD, FACS,¶
Steven D. Wexner, MD, FACS, FRCS, FRCS(Edin), PhD (Hon),** José M. Martinez, MD, FACS,††
Sharon B. Ross, MD, FACS,‡‡ Michael M. Awad, MD, FACS,§§ Morris E. Franklin, MD, FACS,|||
Maurice E. Arregui, MD, FACS,¶¶ Bruce D. Schirmer, MD, FACS,*** and Rebecca M. Minter, MD, FACS†††*

Ann Surg 2013

EDUCATION

Are General Surgery Residents Ready to Practice? A Survey of the American College of Surgeons Board of Governors and Young Fellows Association

Lena M Napolitano, MD, FACS, FCCP, FCCM, Mark Savarise, MD, FACS, Juan C Paramo, MD, FACS, Laurel C Soot, MD, FACS, S Rob Todd, MD, FACS, Jay Gregory, MD, FACS, Gary L Timmerman, MD, FACS, William G Cioffi, MD, FACS, Elisabeth Davis, PhD, Ajit K Sachdeva, MD, FRCS, FACS

JACS 2014

DOCTOR AND PATIENT

Are Today's New Surgeons Unprepared?

By PAULINE W. CHEN, M.D. DECEMBER 12, 2013, 12:20 PM 159 Comments



©iStock

E-MAIL

FACEBOOK

TWITTER

SAVE

MORE

The surgeon had no prestigious named professorship, no N.I.H. grant and no plum administrative position in the hospital's hierarchy. But to the other surgeons-in-training and me, he was exactly who we wanted to be.

DOCTOR AND PATIENT
Dr. Pauline Chen on medical care.



New York Times Dec 12, 2013

HOLISTIC VIEW



Would you trust the learner to perform this task without supervision?

What are Entrustable Professional Activities (EPAs)



medical education

Full Access

Entrustability of professional activities and competency-based training

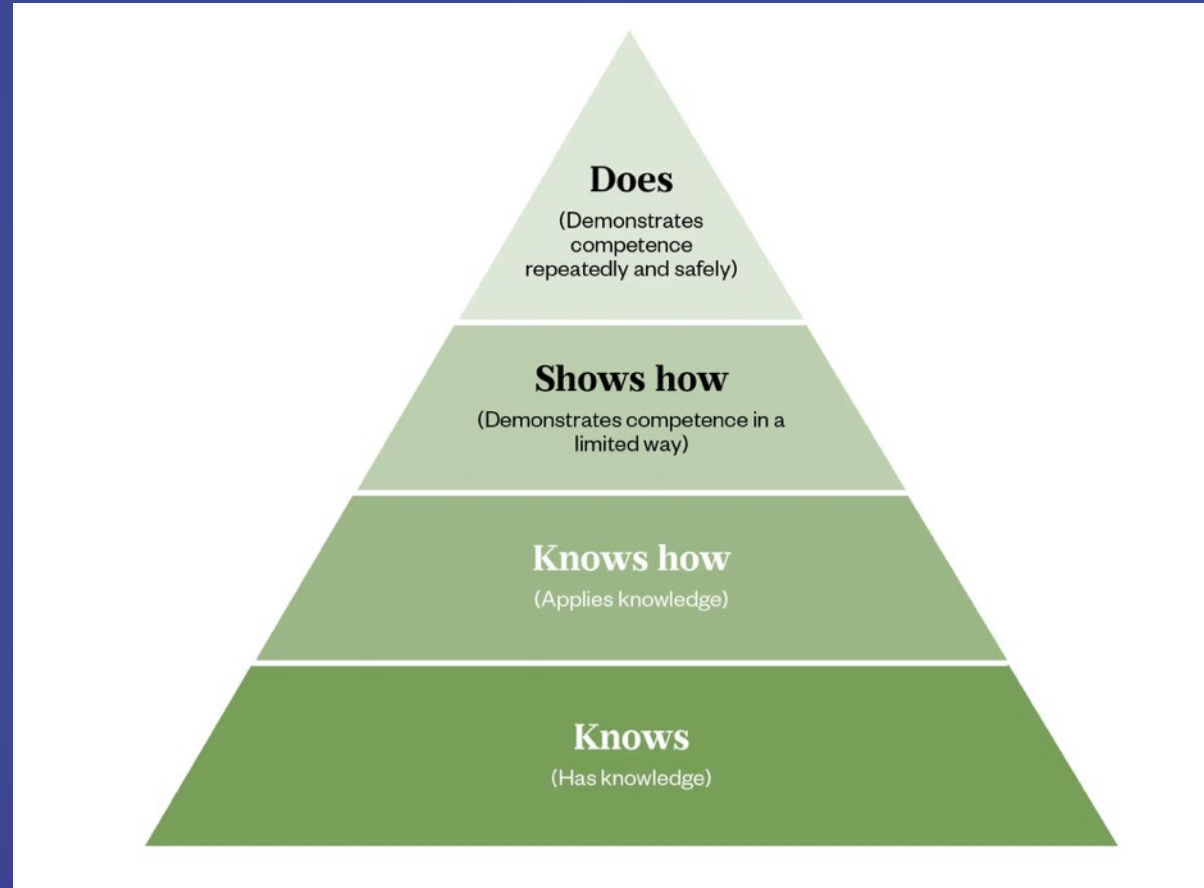
Olle Ten Cate



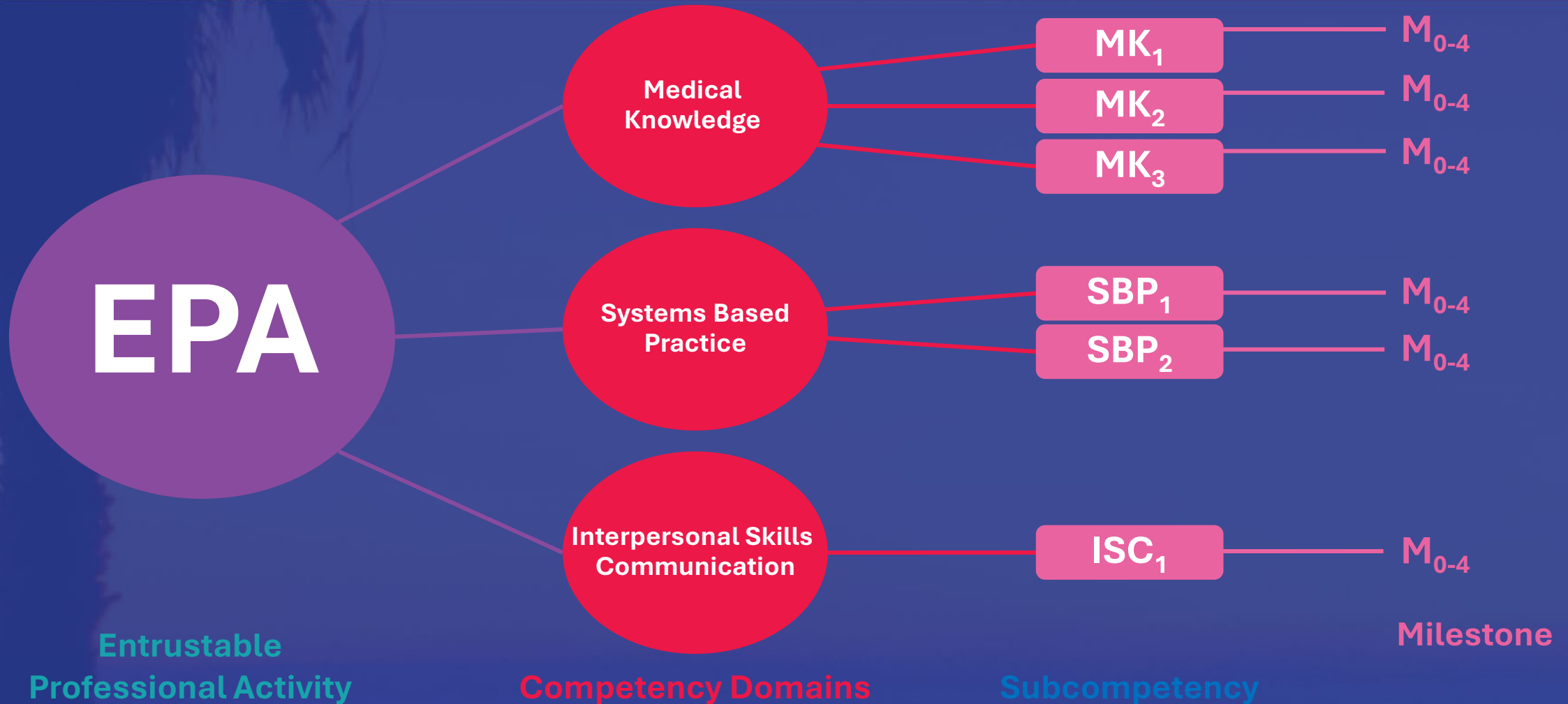
Olle ten Cate, MD, PhD
Utrecht University
Netherlands

	EPA1	EPA2	EPA3	EPA4	EPA5
Medical Knowledge	++	++	+		++
Clinical Care	+		+	++	
Interpersonal Skills	+	++			+
Professionalism		+	++	++	
Practice-based	+		++	+	
Systems-Based	+				++
Communication	+	+	+		

Entrustable Professional Activity (EPA)



EPAs Incorporate and Reflect Competencies and Milestones



Preliminary 15 Core PRS EPAs

1	Non- oncological breast reconstruction
2	Oncological breast surgery
3	Congenital craniofacial reconstruction
4	Craniofacial trauma surgery
5	Composite craniofacial reconstruction
6	Acute and traumatic hand
7	Non-acute hand
8	Peripheral nerve pathology
9	Burn
10	Soft tissue reconstruction in lower extremities
11	Soft tissue reconstruction in trunk
12	Cutaneous and subcutaneous pathology
13	Aesthetic surgery of the face
14	Aesthetic surgery of the body
15	Surgical consultation to other healthcare providers*

EPA Title	1. Oncological Breast Reconstruction
Specification and Limitations	<p><i>Qualified for this EPA implies and includes the unsupervised practice of:</i></p> <ul style="list-style-type: none"> • Evaluating and managing breast cancer reconstruction <ul style="list-style-type: none"> ○ TE placement ○ Direct to implant ○ Implant related revisions (capsular contracture, rupture, rippling, bottoming out, malposition, animation deformity) ○ Fat grafting ○ Oncoplastic reconstruction ○ Symmetrizing procedure (mastopexy, reduction) ○ Pedicled reconstruction (latissimus flap, LICAP) ○ Free flap reconstruction (DIEP, TUG) • Preoperative workup: <ul style="list-style-type: none"> ○ Synthesize essential information from the patient's records, history, PE, and initial diagnostic evaluations to develop surgical plan include assessment factors to determine optimal treatment, considerations of options for surgical treatment (mastectomy vs breast-conserving), skin sparing vs nipple sparing, neoadjuvant, radiation or systemic therapy ○ Communicating pertinent options/risk/benefits and expected outcomes to the patient including FDA implant check list, implant monitoring, ALCL, BII ○ Obtain informed consent • Directing the operation <ul style="list-style-type: none"> ○ Positioning and padding the patient ○ Selection of instruments, lighting, and other equipment ○ Incision selection ○ Prepares tumescent solution for fat grafting, medications needed for the case such as Betadine and/or antibiotic irrigation for implant cases, heparinized saline concentration, papavarine, lidocaine needed for free flap cases ○ Able to pick TE, sizers, implants, and/or biological mesh • Postoperative care <ul style="list-style-type: none"> ○ TE expansion ○ Recognize and manage complications such as mastectomy flap or nipple necrosis, flap congestion or ischemia, infection including workup • Written documentation of consultation, operative note, discharge summary with procedure, pertinent findings, and /or management plan. <p><i>Qualified professionals for this EPA are not qualified in case of:</i></p> <ul style="list-style-type: none"> • Out of scope: PAP, LAP

Defining Entrustment Levels

Intraoperative/Procedural Phase

1

Limited Participation

Can describe basic anatomy pertinent to operation/procedure
Difficulty coordinating hands to accomplish dissection of normal planes
Can identify normal anatomic structures in straightforward setting

2

Direct Supervision

Can articulate but not necessarily identify key anatomic landmarks
Sometimes does not use both hands in a coordinated manner, often tentative
Can do less critical parts of the operation/procedure independently

3

Indirect Supervision

Can perform key steps of operation/procedure in straightforward settings
Smooth instrument handling with effective use of both hands
Can do adjunctive maneuvers when needed in straightforward settings

4

Practice Ready

Can do operation/procedure safely including all steps in essentially all patients
Recognizes when deviation from initial plan indicated
Smooth movements but may lack economy of motion in most difficult cases



May 11-12, 2026

ACGME-ABMS Learning Community

Competency-Based Medical Education



Accreditation Council for
Graduate Medical Education



American Board
of Medical Specialties

Higher standards. Better care.®



Thank you!

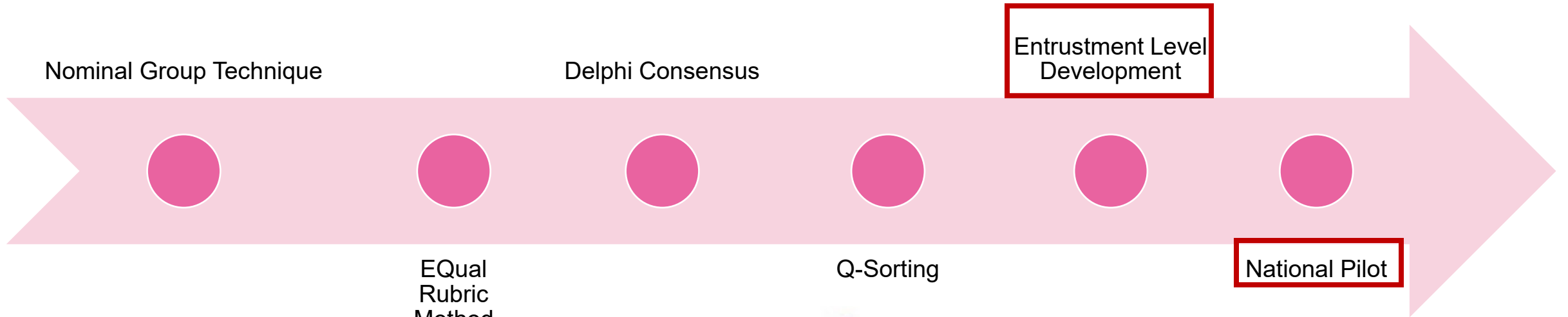
Additional Slides

Steps to Developing PRS EPAs

#ACG



Expected completion: April 2026



Expected launch: 2027

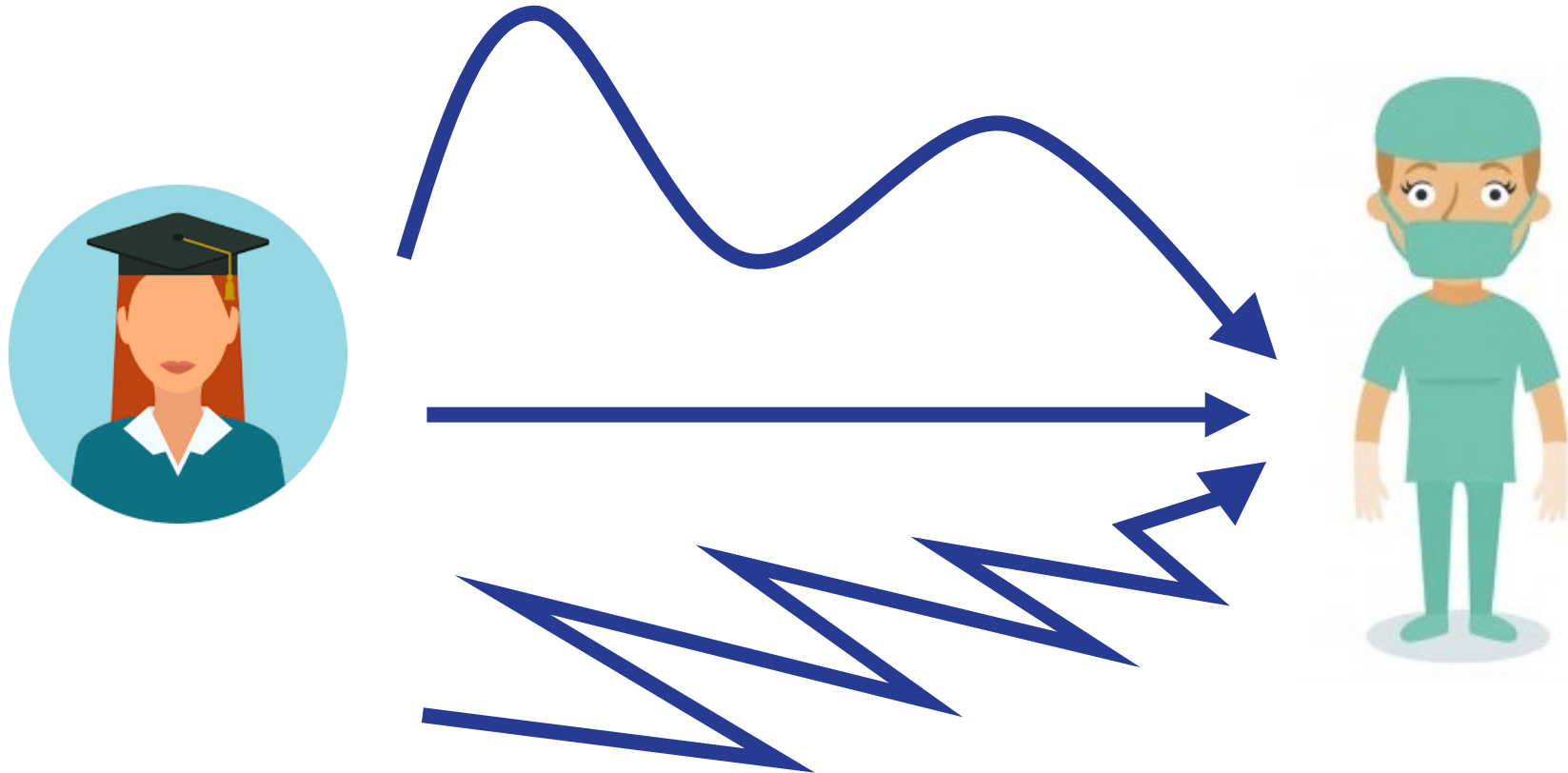
Plastic Surgery EPA Development

#ACGME2026



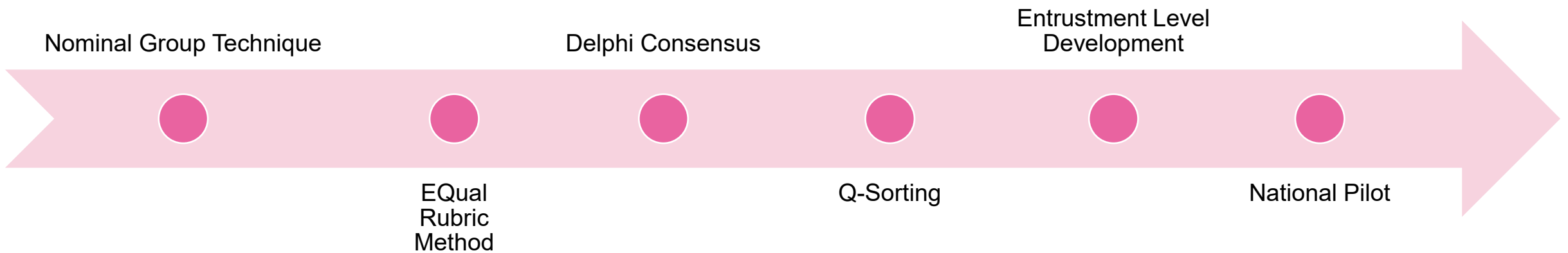
CBME

Competency-Based Medical Education



How Plastic Surgery EPAs Were Developed

- Led by a national ACEPS Task Force of plastic surgery educators
- Used structured consensus methods
- Designed to be procedure and context specific
- Mapped to milestones to inform CCC decisions



What do EPAs mean for PS residency training?



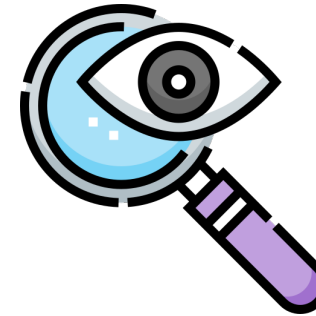
Create a model for frequent formative feedback



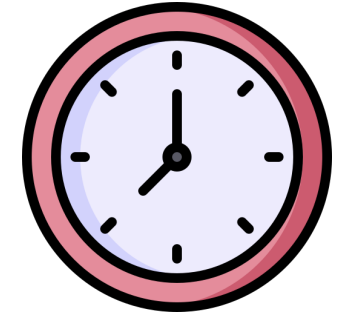
Establish a mechanism for assessment of trainee competence



Prioritize demonstrated competence as the outcome of training



Anchors assessment on discretely observed behaviors



CBME rather than time-based training