

Frequently Asked Questions: Laboratory Genetics and Genomics

Review Committee for Medical Genetics and Genomics ACGME

Question	Answer
Introduction	
Does the Review Committee allow laboratory genetics and genomics programs to be longer than 24 months in length? <i>[Program Requirement: 4.1.]</i>	The Review Committee understands that historically, the American Board of Medical Genetics and Genomics (ABMGG) allowed programs in both the 24-month and 36-month formats. The Review Committee determined that the accredited length of the educational program will be 24 months, but programs are free to offer additional education and training to post-doctoral fellows if they wish. Programs seeking to offer education and training outside of the 24-month accredited educational program should contact the ABMGG to determine a fellow's eligibility for certification.
Oversight	
Will the Review Committee accept laboratory genetics and genomics programs at institutions that do not sponsor an ACGME-accredited program in medical genetics and genomics? <i>[Program Requirement: 1.2.a.]</i>	While it is ideal for laboratory genetics and genomics programs to be sponsored by institutions that have ACGME-accredited medical genetics and genomics programs, the Review Committee understands there may be circumstances where this is not feasible. The Review Committee will accredit laboratory genetics and genomics programs at institutions that do not sponsor ACGME-accredited medical genetics and genomics programs as long as a fellowship program can demonstrate substantial compliance with the Program Requirements.
Does the program director have to submit additions or deletions of participating sites providing required educational experiences of less than one month FTE in duration? <i>[Program Requirement: 1.6.]</i>	No, the program director is only required to submit additions or deletions of participating sites providing required educational experiences if those experiences are one month FTE or greater. Program directors can choose to submit sites with less than one month FTE, but it is not a requirement.
Does the Review Committee accept only Clinical Laboratory Improvement Amendments (CLIA) certification? <i>[Program Requirement: 1.7.a.]</i>	All laboratories affiliated with the program must be CLIA-certified. Programs may also hold College of American Pathologists (CAP) Laboratory Accreditation, which includes CLIA certification. The Review Committee considers CAP Laboratory Accreditation to be an aspiration goal for programs.
What are the Review Committee's expectations for the availability of private sleep/rest facilities since post-doctoral	The Review Committee expects that sleep/rest facilities be present within the Sponsoring Institution and be available to them should any post-doctoral fellows become fatigued, but these facilities do not have to be located specifically within or adjacent to

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fellows do not have overnight responsibilities or shifts of extended time periods? <i>[Program Requirement: 1.8.b.]</i>	the laboratory facilities.
Personnel	
Does the Review Committee allow co-program directors? <i>[Program Requirements: 2.1. and 2.5.a.1.]</i>	The Review Committee does not allow co-program directors. There must be one faculty member appointed as program director with authority and accountability for the overall program. The Review Committee does, however, allow for associate program directors. The Review Committee requires an associate program director if the program director is certified by the ABMGG in only clinical molecular genetics and genomics or in only clinical cytogenetics and genomics. This associate program director must be certified in the complementary specialty area, or certified in laboratory genetics and genomics, and should assist with education in the complementary specialty area.
What other qualifications would the Review Committee consider acceptable for program faculty members? <i>[Program Requirement: 2.9.a.]</i>	The Review Committee recognizes that some qualified individuals may have certification in molecular genetic pathology and would evaluate those qualifications on an individual basis. Appropriately qualified genetic counselors, laboratory technicians, or educational specialists who serve in teaching roles are also acceptable.
Does the program director count as one of the three required core faculty members? <i>[Program Requirement: 2.11.b.]</i>	Yes, the program director counts as a core faculty member and can count toward the requirement for three core faculty members.
Can the program director also be the program coordinator? <i>[Program Requirement: 2.12.]</i>	No. The program director and the program coordinator are two distinct roles, which cannot both be fulfilled by the same person. The program coordinator is intended to provide administrative support for the program director to allow the program director to target their educational efforts.
Post-Doctoral Fellow Appointments	
If a program accepts a fellow with a PhD in a field related to genetics and the fellow intends to seek board certification through the ABMGG, are there any considerations that should be taken under advisement? <i>[Program Requirements: 3.2.a.1. and 3.2.a.1.a.]</i>	Programs must be aware that completing an ACGME-accredited post-doctoral fellowship program alone may not be sufficient to meet the ABMGG eligibility requirements for certification. Programs must contact the ABMGG directly to determine an individual applicant's or fellow's eligibility for certification. Programs may, in rare situations, accept a fellow with a PhD in a field not related to genetics who has post-doctoral experience in genetics and genomics. Acceptance of such a fellow is at the program director's discretion, but again, the program must contact the ABMGG directly to determine the individual's eligibility for certification.

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	The Program Requirements include specialty-specific Background and Intent addressing these eligibility requirements.
Educational Program	
What are the Review Committee's expectations regarding post-doctoral fellows demonstrating competence in respect and responsiveness to heterogeneous patient populations, as post-doctoral fellows do not frequently interact with patients? <i>[Program Requirement: 4.3.f.]</i>	The Review Committee understands that post-doctoral fellows will have limited opportunity to demonstrate competence in respect for heterogeneous patient populations, as they interact with patients so infrequently. The Review Committee recommends that faculty members and others evaluating post-doctoral fellows during interactions with patients focus on this area so that competence can be evaluated.
What are the Review Committee's expectations regarding post-doctoral fellows communicating with patients and families, as post-doctoral fellows do not frequently interact with patients? <i>[Program Requirement: 4.8.]</i>	The Review Committee understands that post-doctoral fellows will have limited opportunity to communicate with patients and patients' families, as they interact with patients so infrequently. The Review Committee recommends that faculty members and others evaluating post-doctoral fellows during interactions with patients focus on this area so that competence can be evaluated, even during limited interactions.
Must the required eight months of constitutional/germline testing and the eight months of experience in cancer genetics be completely separate? <i>[Program Requirements: 4.11.b.3. and 4.11.b.4.]</i>	The eight months of constitutional genetics experience and the eight months of cancer genetics experience may overlap. However, at least 16 months between the two experiences are still required to meet the overall requirement.
Do post-doctoral fellows have to spend time in a specific clinical area of concentration? <i>[Program Requirement: 4.11.c.]</i>	No, post-doctoral fellows do not have to spend time in a specific clinical area of concentration. However, if they choose to do so, this time must not exceed six months.
What does "integrated" mean in the context of having cytogenetics and molecular genetics education integrated throughout the program? <i>[Program Requirement: 4.11.d.]</i>	Education in and exposure to cytogenetics and molecular genetics must be distributed equally or close to equally throughout the 24 months of the educational program, as opposed to having education in one experience follow education in the other. Twelve months of cytogenetics education and experiences followed by 12 months of molecular genetics education and experiences would not fulfill this requirement.
What are the Review Committee's expectations for post-doctoral fellows' participation in patient case conferences? <i>[Program Requirement: 4.11.g.]</i>	The Review Committee expects that this requirement be fulfilled through post-doctoral fellow participation in patient case conferences, such as tumor boards or post-clinic conferences, and not in review of laboratory cases.

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Will the Review Committee accept presentations made at the local level to fulfill the requirement for scholarly activity? [Program Requirement: 4.14.a.]	Yes, the Review Committee accepts presentations made at the international, national, regional, or local level to fulfill the scholarly activity requirement.
Evaluation	
Does the program director have to appoint a separate Clinical Competency Committee (CCC) and Program Evaluation Committee (PEC) for the laboratory genetics and genomics program? [Program Requirements: 5.3. and 5.5.]	Each accredited laboratory genetics and genomics program must have its own dedicated CCC and PEC. While separate from the CCC and PEC for the medical genetics and genomics and/or clinical biochemical genetics program(s), it may be appropriate for the membership to overlap or be identical to that of the other program(s). Faculty members can serve on more than one committee across programs.
How can small programs ensure that post-doctoral fellows' annual written evaluations of faculty members remain confidential? [Program Requirements: 5.4. and 5.4.b.]	Small programs can combine evaluations with larger programs (such as the medical genetics and genomics program, if available) or other learners rotating through the program and report aggregate results. The designated institutional official should collect all evaluations and report the results with the evaluator <i>de-identified</i> to the program director.
The Learning and Working Environment	
What are the Review Committee's expectations regarding post-doctoral fellow education and participation in patient safety events and adverse events? [Program Requirements: 6.2. 6.3.]	The Review Committee understands that post-doctoral fellows do not participate in patient safety in the same way that many other residents/fellows do and expects programs to focus education on patient safety around proper handling of biological samples and patient information, especially when working in interprofessional teams.
What are the Review Committee's expectations regarding post-doctoral fellow education and participating in quality improvement activities? [Program Requirement: 6.3.]	The Review Committee understands that post-doctoral fellows have infrequent interactions with patients, so the opportunities for quality improvement may be different from other graduate medical education programs' residents/fellows. Examples of quality improvement opportunities for post-doctoral fellows include improvement of lab processes and/or proper handling of biological samples.
How should programs handle transitions of care, since post-doctoral fellows do not frequently interact with patients? [Program Requirements: 6.19.- 6.19.b.]	The Review Committee understands that post-doctoral fellows have infrequent interactions with patients, however, they should still be provided with education in how to maximize effective communication and minimize errors during hand-offs of biological samples and patient information.
Other	

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How will the Review Committee interpret requirements that mention clinical care and patient care, since post-doctoral fellows do not participate in direct patient or clinical care?	In the context of post-doctoral laboratory education and training, the terms “clinical care” and “patient care” will be interpreted to represent clinical laboratory training.