

SES048 Specialty Update: Pathology

February 21, 2025 | 3:15pm – 4:30pm

Cindy McCloskey, MD, Chair

Cindy Riyad, PhD, Executive Director

Conflict of Interest Disclosure

Speakers:

Cindy McCloskey, MD – Chair, Review Committee for Pathology

Cindy Riyad, PhD – Executive Director, Review Committee for Pathology

Disclosure

The speaker for this educational activity does not have relevant financial relationships to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.



Session Topics

1. Review Committee Statistics
2. Annual Program Review
3. Frequently Asked Questions
4. ACGME/Review Committee Updates



Review Committee Statistics

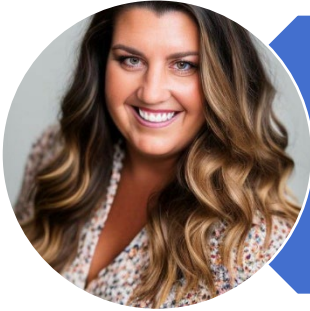
Review Committee Staff



Cindy Riyad, PhD

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Associate Executive Director

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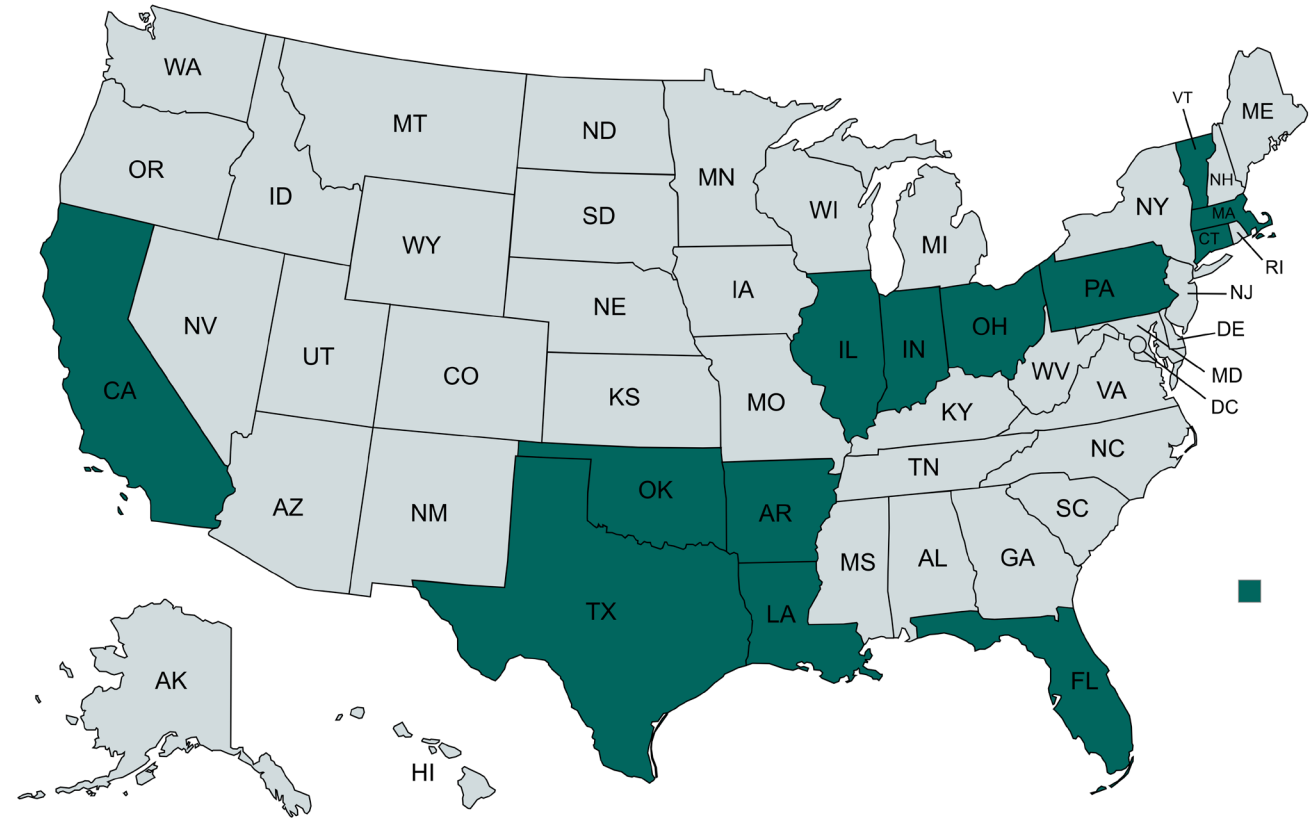
Rebecca Houston, MA

Accreditation Administrator

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Review Committee Composition

- ✓ Three nominating organizations: American Board of Pathology (ABPath), American Medical Association (AMA), and Association for Academic Pathology (AAPath)
- ✓ One public member
- ✓ One resident member
- ✓ 10 voting members
- ✓ Ex-officio member from ABPath (non-voting)
- ✓ Six-year terms (*except resident member, who serves two years*)
- ✓ *Program Directors, Chairs, Faculty, DIOs, Resident and Public Representation*





Review Committee Members

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MEANING
in MEDICINE

Cindy McCloskey, MD
*OU Health
(Chair)*

Scott Anderson, MD
*University of Vermont Medical Center
(Vice Chair)*

Haneen Salah, MD
*Methodist Hospital Program
(Resident Member)*

Ritu Bhalla, MD
Louisiana State University HSC

Eric Glassy, MD
Affiliated Pathologists Medical Group

Jennifer Hammers, DO
Jennifer Hammers Pathology LLC

Matthew Kuhar, MD
Indiana University SOM

Jennifer Laudadio, MD
Univ. of Arkansas for Medical Sciences

Maria Martinez-Lage, MD
Mass General Brigham

Ritu Nayar, MD
Northwestern University



Henry Rinder, MD
Yale University School of Medicine



Wendy Love, MBA
*Retired Teacher
(Public Member)*



Ex-Officio



Gary Procop, MD, MS

- American Board of Pathology

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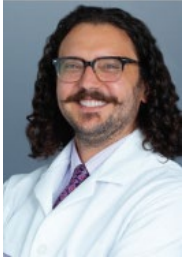
Welcome Incoming Members!

Term begins July 1, 2025



Deborah Chute, MD

- Cleveland Clinic



Nicholas Frazzette, MD

- NYU Langone



Bruce Levy, MD

- Geisinger Health



Christina Wojewoda, MD

- University of Vermont Medical Center





Pathology Program Trends

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Academic Year	# Residents	# Core Programs	# Fellows	# Sub Programs
2020-2021	2379	142	779	580
2021-2022	2370	144	790	582
2022-2023	2422	145	797	597
2023-2024	2390	142	736	601
2024-2025	2410	141	785	614





Subspecialties – 2024-2025

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Subspecialty	# Programs	# Fellows	% Filled
Blood Banking/Transfusion Medicine	57	48	52%
Clinical Informatics	10	19	61%
Chemical Pathology	4	1	20%
Cytopathology	91	113	66%
Dermatopathology	57	73	66%
Forensic Pathology	51	60	54%
Hematopathology	86	130	75%
Medical Microbiology	15	9	43%
Molecular Genetic Pathology	43	64	80%
Neuropathology	41	58	62%
Pediatric Pathology	27	19	45%
Selective Pathology	132	191	67%



Annual Program Review



January 2025 Accreditation Decisions

#ACGME2025

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Anatomic and Clinical Pathology Programs	
Continued Accreditation	131
Continued Accreditation with Warning	1
Initial Accreditation with Warning	1





January 2025 Accreditation Decisions

#ACGME2025

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Subspecialty Programs	
Continued Accreditation	542
Continued Accreditation without Outcomes	2
Continued Accreditation with Warning	1
Initial Accreditation	5
Initial Accreditation with Warning	1
Complement Increase Requests Approved	10
Complement Increase Requests Denied	1



Common Citations

- Responsibilities of Faculty
 - Faculty Development
 - Educational Environment
 - Sufficient Time
 - Interest in Resident Education
 - Professionalism
- Responsibilities of Program Director
 - Resident Ability to Raise Concerns
 - Accurate and Complete Information
- Culture of Professional Responsibilities
 - Process for Reporting Concerns



Common Citations

- Board Pass Rate
- Service to Education Imbalance
 - Appropriate Blend of Supervised Activities
 - Non-Physician Service Obligations
- Evaluation of Residents/Fellows
 - Frequent Faculty Feedback
 - Final Evaluation
- Progressive Resident Responsibility
 - Appropriate Faculty Member Supervision





Common Areas for Improvement

- Faculty Supervision and Teaching
- Patient Safety
- Professionalism
- Educational Content
- Evaluations
- Resources
- Teamwork
- Learning and Working Environment
- Faculty Scholarly Activity
- Board Pass Rate



What is a Citation?

- Area of noncompliance with a program requirement
- Something the program doesn't have, doesn't do, or didn't clearly describe
- Citations *must* be responded to in ADS
- Reviewed by the Review Committee each year until determined issue is resolved



What is an Area for Improvement?

- Often referred to as “AFI”
- Areas of concern or repeat trends/issues
- May or may not be tied to program requirement
- ‘Heads up’ to the program before it becomes serious
- Do not have to respond to in ADS
 - Can provide updates to Review Committee via ‘Major Changes’ section
- Repeat areas may become citations



Block Diagram

- Must have:
 - Legend
 - Rotation name (specific)
 - Electives listed/identified (if applicable)
- Should *not* be actual resident/fellow schedule, just representation of typical experience
- Read and follow all instructions and recommended format!
 - See FAQ on Pathology section of ACGME website



Clinical Experience-Autopsies

- All autopsies must be logged no later than end of July for graduating residents (prior to archival in ADS)
- Ensure resident's specialty track in ADS is correct before archiving
- Required number of autopsies is at least 30
 - Programs can require more autopsies than what is in program requirements; cannot require less
- ***NEW*** for 2024-2025: Forensic Pathology is using Case Logs – programs will not be cited in initial year of implementation



Faculty Certification Status

Information in ADS is auto-populated
from ABMS & AOA

If certification information is incorrect,
faculty can manually add corrections



Resident/Fellow and Faculty Survey

- Programs receive results if:
 - There are at least four respondents
 - The response rate is at least 70%
- Programs who do not receive annual results will receive multi-year results once enough data is collected
- Important to preserve anonymity



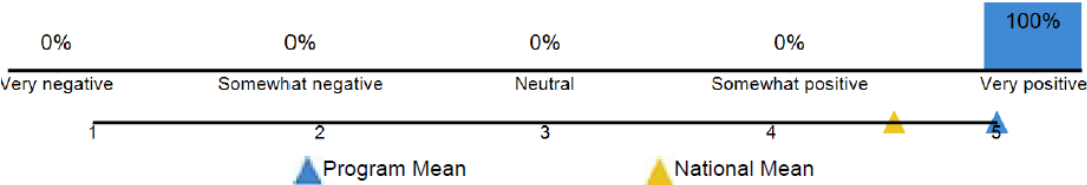
How to Use Survey Results

- Review results with Program Evaluation Committee (PEC)
 - Program should still do 'internal' survey
- Review areas of concern with residents
 - Try to identify source of problem
 - Solicit specific improvement suggestions
- Use the 'Major Changes' section of ADS to proactively communicate how you are addressing poor survey results
- Poor Resident/Fellow Survey results alone will *not* cause the Review Committee to withdraw accreditation

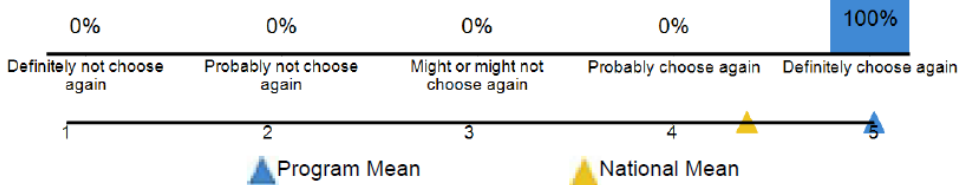


Residents Surveyed 11
Residents Responded 11
Response Rate 100%

Residents' overall evaluation of the program



Residents' overall opinion of the program



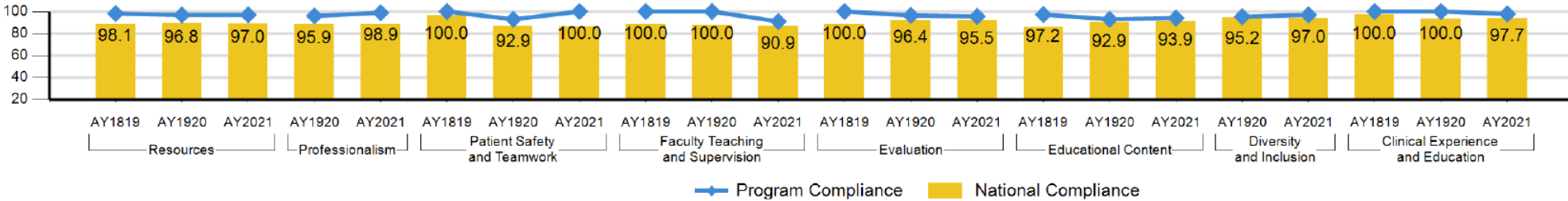
Resources

Education compromised by non-phvician obligations

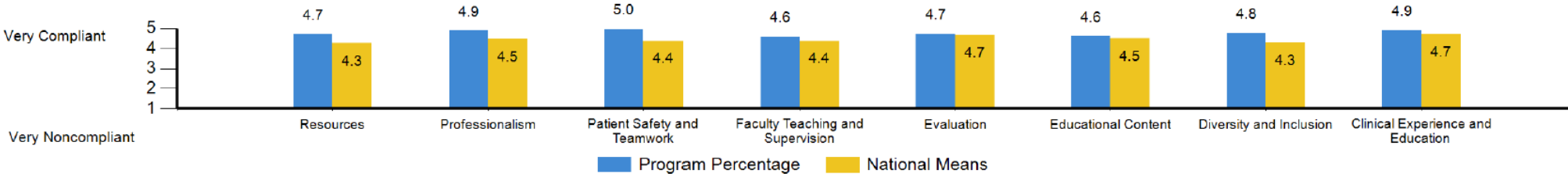
- Impact of other learners on education
- Appropriate balance between education (e.g., clinical teaching, conferences, lectures) and patient care
- Faculty members discuss cost awareness in patient care decisions
- Time to interact with patients
- Protected time to participate in structured learning activities
- Able to attend personal appointments
- Able to access confidential mental health counseling or treatment
- Satisfied with safety and health conditions

% Program Compliant	Program Mean	% Specialty Compliant	Specialty Mean	% National Compliant	National Mean
100%	5.0	95%	4.8	88%	4.4
100%	4.5	97%	3.7	89%	3.7
100%	5.0	95%	4.6	80%	4.1
73%	3.3	92%	3.6	90%	3.5
100%	4.6	99%	4.7	89%	4.3
100%	5.0	97%	4.8	85%	4.3
100%	5.0	100%	5.0	92%	4.7
100%	5.0	97%	4.9	95%	4.8
100%	5.0	97%	4.8	88%	4.5

Total Percentage of Compliance by Category



Program Percentage at-a-glance



Board Pass Rate

- No longer a flat percentage, now bottom 5th percentile of all takers for that exam
 - Three-year lookback
- 5th percentile is a moving target, as it is recalculated with each set of exam results
- Review Committee is being consistent with citations
- If your program falls below the bottom 5th percentile, you will be cited
 - Even if one-year performance is good



Program	Specialty	Board Name	Exam Type	3-Year Aggregate Pass Rate	Sort Order	
A	ACGME Specialty	ABMS Board	Written	25.0	1	5.0%
B	ACGME Specialty	ABMS Board	Written	25.0	2	10.0%
C	ACGME Specialty	ABMS Board	Written	50.0	3	15.0%
D	ACGME Specialty	ABMS Board	Written	50.0	4	20.0%
E	ACGME Specialty	ABMS Board	Written	59.3	5	25.0%
F	ACGME Specialty	ABMS Board	Written	66.7	6	30.0%
G	ACGME Specialty	ABMS Board	Written	68.2	7	35.0%
H	ACGME Specialty	ABMS Board	Written	71.4	8	40.0%
I	ACGME Specialty	ABMS Board	Written	75.0	9	45.0%
J	ACGME Specialty	ABMS Board	Written	80.0	10	50.0%
K	ACGME Specialty	ABMS Board	Written	83.3	11	55.0%
L	ACGME Specialty	ABMS Board	Written	87.5	12	60.0%
M	ACGME Specialty	ABMS Board	Written	90.5	13	65.0%
N	ACGME Specialty	ABMS Board	Written	92.3	14	70.0%
O	ACGME Specialty	ABMS Board	Written	93.8	15	75.0%
P	ACGME Specialty	ABMS Board	Written	97.2	16	80.0%
Q	ACGME Specialty	ABMS Board	Written	100.0	17	85.0%
R	ACGME Specialty	ABMS Board	Written	100.0	18	90.0%
S	ACGME Specialty	ABMS Board	Written	100.0	19	95.0%
T	ACGME Specialty	ABMS Board	Written	100.0	20	100.0%

Bottom 5% of
the distribution
defines the 5th
percentile

2 programs have
a pass rate below
the 5th percentile

18 of 20 programs have a pass
rate > 5th percentile

Board Pass Rate Calculation



Core Faculty Members

- AP/CP must have at least five core faculty members (including program director)
- Subspecialties must have at least two core faculty members (including program director)
 - One must be certified by ABPath in the subspecialty
- Must have a significant role in the education and supervision of residents/fellows
 - Faculty hours listed in ADS should reflect this
- Must be designated by the program director in ADS



Faculty Supervision

- Resident/fellow experiences must be designed to allow appropriate faculty member supervision such that residents progress to the performance of assigned clinical responsibilities under oversight in order to demonstrate their ability to enter the autonomous practice of [specialty/subspecialty] prior to completion of the program (see IV.C.3.)
- This does *not* mean residents/fellows have to do independent sign-out when in program
 - Must have the capability and confidence to do so prior to completion of the program so they are prepared for autonomous practice.



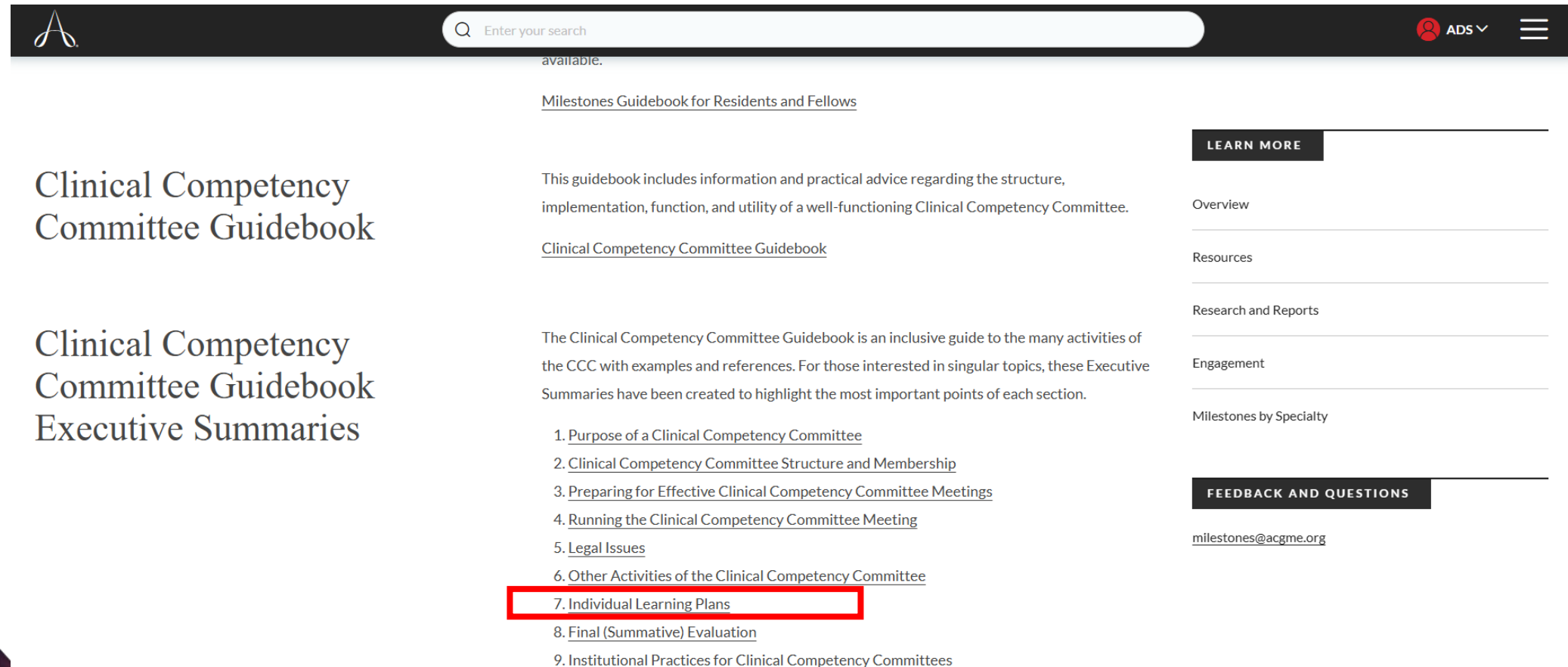
Frequently Asked Questions

Individualized Learning Plans

The program director or their designee, with input from the Clinical Competency Committee, must assist residents in developing individualized learning plans to capitalize on their strengths and identify areas for growth. (Requirement V.A.1.d).(2))

Individualized Learning Plans

- Information provided in Faculty Development Resources on ACGME Milestones website



ACGME

Enter your search

ADS

available.

[Milestones Guidebook for Residents and Fellows](#)

[Clinical Competency Committee Guidebook](#)

[Clinical Competency Committee Guidebook Executive Summaries](#)

This guidebook includes information and practical advice regarding the structure, implementation, function, and utility of a well-functioning Clinical Competency Committee.

The Clinical Competency Committee Guidebook is an inclusive guide to the many activities of the CCC with examples and references. For those interested in singular topics, these Executive Summaries have been created to highlight the most important points of each section.

- [1. Purpose of a Clinical Competency Committee](#)
- [2. Clinical Competency Committee Structure and Membership](#)
- [3. Preparing for Effective Clinical Competency Committee Meetings](#)
- [4. Running the Clinical Competency Committee Meeting](#)
- [5. Legal Issues](#)
- [6. Other Activities of the Clinical Competency Committee](#)
- [7. Individual Learning Plans](#)**
- [8. Final \(Summative\) Evaluation](#)
- [9. Institutional Practices for Clinical Competency Committees](#)

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[Research and Reports](#)

[Engagement](#)

[Milestones by Specialty](#)

[FEEDBACK AND QUESTIONS](#)

milestones@acgme.org

Scholarly Activity

- Faculty scholarly activity reviewed annually and 5-year aggregate (requirement IV.D.2.b).(1))
- Resident/Fellow scholarly activity reviewed at conclusion of residency/fellowship (requirement IV.D.3.)
- ADS categories for scholarly activity include PubMed/non-PubMed publications, conference presentations, chapters/textbooks, participation in research, teaching presentations
- Encourage all residents/fellows to enter scholarly activity across categories
 - Should a resident/fellow/faculty member have a manuscript currently under review/consideration, encourage all programs to use Major Changes section to update the Review Committee with information



Frequently Asked Questions



Q Enter your search

ADS



Program Requirements, FAQs, and Applications

Share This



The Program Requirements specify the Core Competencies and other standards of quality and education for each specialty and subspecialty. *Note: The Program Requirements below that have (TCC) in the title are tracked changes copies. Tracked changes copies reflect any changes that were made to the Requirements following the last Program Requirement revision.*

The Frequently Asked Questions (FAQs) documents help to clarify the Program Requirements.

The Specialty-Specific Applications correspond to these Requirements and are provided for those seeking to apply for a new specialty or subspecialty program. *Note: Program applications must be initiated first in the Accreditation Data System (ADS). The Specialty-Specific Applications below must be completed and uploaded into ADS.*

For more information on the process to submit a program application, visit the [Program Application Information](#) web page or review this three-part course [Applying for Program Accreditation](#), available in Learn at ACGME.

Anatomic Pathology and Clinical Pathology

[Program Requirements Effective 7/1/2023](#)

[FAQs](#)

[Reformatted Program Requirements Effective 7/1/2025](#)

[Current and Reformatted Crosswalk](#)

Blood Banking/Transfusion Medicine

[Program Requirements Effective 7/1/2024](#)

[FAQs](#)

[Reformatted Program Requirements Effective 7/1/2025](#)

[Current and Reformatted Crosswalk](#)

Chemical Pathology

[Program Requirements Effective 7/1/2024](#)

[FAQs](#)

[Reformatted Program Requirements Effective 7/1/2025](#)

[Current and Reformatted Crosswalk](#)

Clinical Informatics

[Program Requirements Effective 7/1/2023](#)

[FAQs](#)

[Program Requirements Effective 7/1/2025](#)

[Program Requirements \(TCC\) Effective 7/1/2025](#)

ACGME/Review Committee Updates

Site Visits for Programs on Continued Accreditation

- Suspension 10-Year Accreditation Site Visits
- Continued Accreditation Site Visits
 - In 2024, the ACGME conducted site visits for 149 programs on Continued Accreditation that have not had a site visit in approximately 9 years or more. These site visits were identified through a sampling process and will support the ACGME's assurance responsibility to the public.
 - For 2025, ACGME selected 200 programs for these randomly selected site visits and notifications were sent out in November with future approximate site visit target dates ranging from April to October 2025.



Temporary Complement Increase Requests

- All RCs will allow extensions of education up to 90 days without requiring formal submission of a temporary complement increase request.
- This applies to all specialty/subspecialty programs except one-year programs.
- Requests for temporary changes in complement longer than 90 days are still required and must be approved by the Designated Institutional Official (DIO) prior to being submitted in ADS for RC consideration.





The ACGME is now accepting nominations for the 2025 ACGME Awards.

**Deadline:
Wednesday, March 12, 2025**

For additional information and to download nomination materials:

<https://www.acgme.org/initiatives/awards/>

Program Resources

www.acgme.org

- [Accreditation Data System](#) | [ADS Public Site](#)
- [ACGME Policies and Procedures](#)
- [Clinical Competency Committee \(CCC\) Guidebook](#)
- [Milestones Guidebook](#) | [Milestones FAQs](#)
- [How to Complete an Application](#)
- [Institutional Requirements](#)
- [Sample Program Letter of Agreement \(PLA\)](#)
- [FAQs for New Programs](#)
- [Resident Survey Crosswalk Document](#)
- [Faculty Survey Crosswalk Document](#)
- [*Journal of Graduate Medical Education*](#)
- Specialty Specific Resources (Program Requirements, Application Forms, Case Log entry instructions, complement increase policy, Guide to Construction of a Block Diagram) | Access via specialty pages
- Common Resources (e.g., [Program Directors' Guide to the Common Program Requirements](#), ACGME Glossary of Terms, [Common Program Requirements FAQs](#), Key to Standard LON) | Access via specialty pages
- [Site Visit Information](#) (e.g., types of visits, [Site Visit FAQ](#), [remote site visit FAQs](#), [listing of accreditation field representatives](#))
- Weekly *e-Communication* | Sent via email



Accreditation

Targeted learning to support your understanding and compliance with all things related to ACGME accreditation.



ACGME Equity Matters®

Educational experiences that promote meaningful change toward diversity, equity, and inclusion while remaining aware of audience impact.



Faculty Development

Tailored resources for faculty assessment and development that cultivate expertise in competency-based medical education.



Well-Being

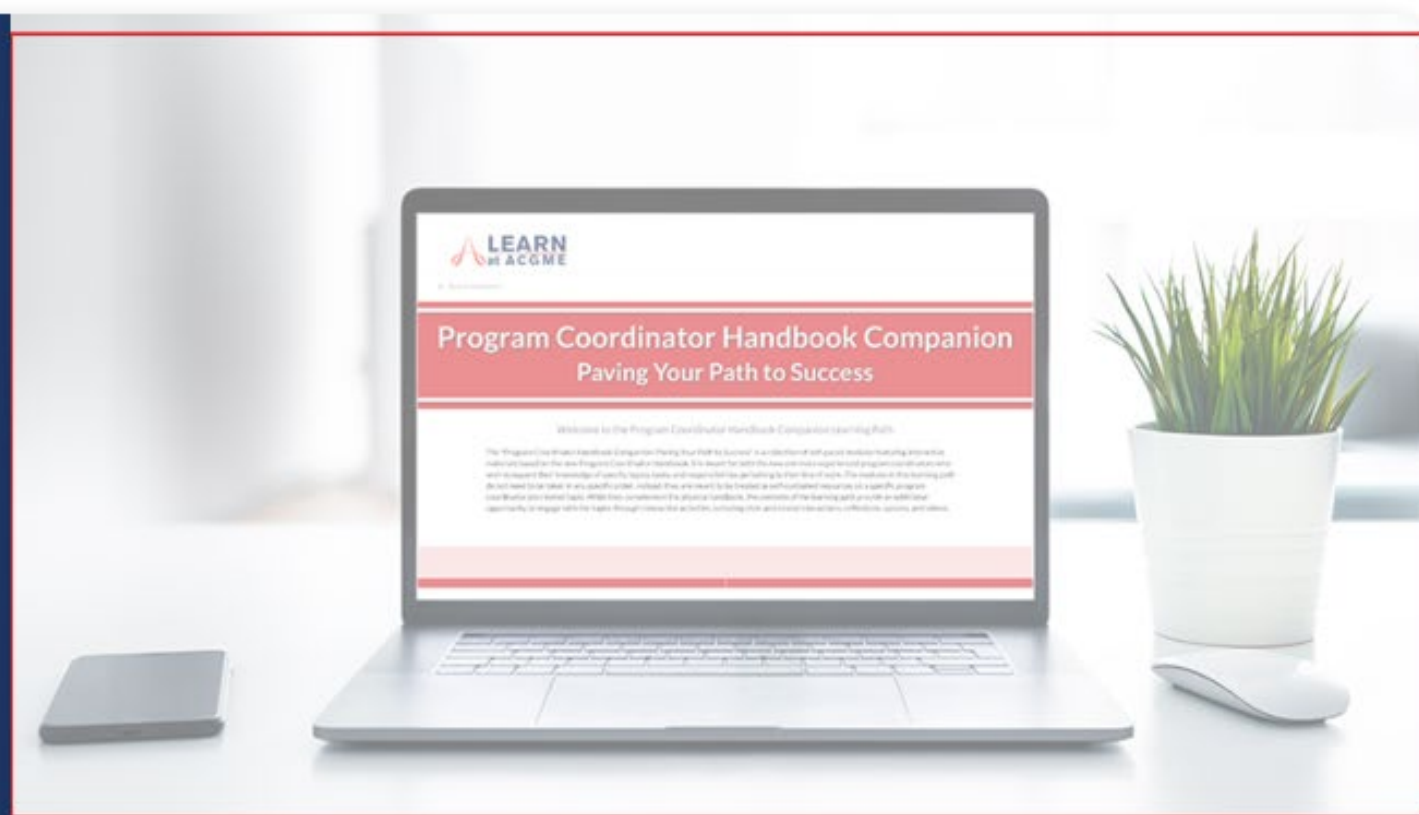
Essential insights and resources for promoting well-being in graduate medical education.

Program Coordinator Handbook Companion: Paving Your Path to Success

Collection of self-paced modules featuring interactive materials based on the ACGME's Program Coordinator Handbook.



Learn More





Your Opinion Matters to Milestones!

Please complete this 15-minute survey regarding your experience with the Milestones.

Deadline to complete:
March 30, 2025



Are you in Program Leadership, Program Faculty, or a member of the CCC?



Please join our Milestones Focus
Group on Practice-Based
Learning and Improvement

Use the QR code to enter your
information

Available Now

ACGME Self-Empowerment Workshop for Coordinators

Be on the lookout (ACGME e-Communications post)

Focus

- acting as a **leader** in the coordinator role
- recognizing effective **networking** practices
- overcoming challenges to **professionalism**
- distinguishing between productive and unproductive strategies for promoting your **achievements**
- effectively navigating complex **interpersonal situations**



Learn More in the Hub!

Available Now

ACGME Program Coordinator Handbook Companion

Focus

- developing a comprehensive understanding of the coordinator role
- expanding knowledge of **accreditation processes** and **requirements to ensure compliance**
- improving skills to **support recruitment, orientation, and onboarding**, and other relevant tasks
- selecting appropriate **professional development** and **continuous growth** strategies



Learn More in the Hub!

Coming Soon

ACGME Coordinator's Guide to Effective Abstract Writing

Focus

- outlining the **structure of an abstract**;
- assessing abstracts for their **adherence to accepted standards** and overall effectiveness;
- discussing **issues that arise** when writing an abstract and developing **strategies to overcome them**;
- exploring available resources and identifying those that are still needed to support abstract writing; and,
- applying information about proper abstract structure and content to **compose a sample abstract**.



Learn More in the Hub!



Review Committee Meeting Dates

Meeting Dates:	Agenda Closes:
April 24-25, 2025	February 10, 2025
September 19, 2025 *NEW*	July 18, 2025
January 28-30, 2026	October 24, 2025
April 23-24, 2026	February 9, 2026



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Field Activities Site visit, Self-Study questions

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Accreditation Team Requirements, LON questions

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Questions?



Thank you