

Requests for Changes in Resident or Fellow Complement

Review Committee for Urology

This Review Committee approves:

- Temporary increases in complement **over 90 days** in length
 - **Residency** programs must submit a request if the number of residents will exceed the approved **total** complement **or** the approved complement in a given **program year**.
 - For example, a program with a total complement of 15 (three residents per year) must request a temporary complement increase if there will be 16 or more residents total in the program **or** there will be more than three residents in a program year (e.g., PGY-1) **even if** the total complement will not exceed 15.
 - **Fellowship** programs must submit a request if the number of fellows will exceed the approval **total** complement.
- Permanent increases in complement
- Permanent decreases in complement

Note: Temporary increases in complement up to 90 days in length do **not** require submission of a request to the Review Committee.

Temporary Increase in Complement over 90 Days

A temporary increase in resident or fellow complement for more than 90 days in length must first be approved by the designated institutional official (DIO), after which approval must be requested from the Review Committee through the Accreditation Data System (ADS).

Educational rationale, institutional procedural volume, and proposed block diagram(s) must be submitted with the request:

- The educational rationale must explain why the temporary increase is being requested. Any missed minimums or concerning ACGME Survey results should be addressed.
- A downloadable Clinical Data Form to report the institutional procedural volume is available once the request is initiated in ADS. Carefully read the instructions on the form and ensure it is completed correctly.
 - If the temporary increase is due to resident/fellow remediation or a leave of absence, the Review Committee may not require institutional data. Contact the Review Committee's accreditation administrator (email below) to ask if this form is needed.
- The proposed block diagram(s) must demonstrate how the requested increase will impact the curriculum **over the period of the request**. The request must include a proposed block diagram **for each academic year** that the temporary increase will be in effect, including **all** educational years. Label each block diagram with the academic year. Additional block diagram guidance is available on the [Documents and Resources](#) page of the Urology section of the ACGME website. If the program's block diagram will not change with the increase, submit the current block diagram and explain in the educational rationale why there will be no change.

Ensure that ADS provides the Review Committee with up-to-date program information by reviewing and updating (if needed) any citation responses, major changes and other updates, and the current block diagram.

To initiate a temporary increase for more than 90 days in length, the program director must log into ADS and from the menu under the **“Program”** tab, select **“Requests”** > **“Complement Change.”** The request will be electronically sent to the DIO for approval, as dictated by the Institutional Requirements. The DIO may approve the request, reject and delete the request, or reject and return the request for modifications. If the DIO approves the request, the information is submitted in ADS and forwarded to the Review Committee for consideration.

Temporary complement increase requests are typically reviewed within a month of submission. A Letter of Notification will inform the program of the Review Committee’s decision.

Permanent Increase in Complement

A permanent increase in resident or fellow complement must first be approved by the Sponsoring Institution’s Graduate Medical Education Committee (GMEC), after which approval must be requested from the Review Committee through ADS. Programs must hold a status of Continued Accreditation to be considered for a permanent complement increase. The Review Committee reviews permanent increase requests at its **scheduled meetings**. Programs considering a permanent complement increase are encouraged to check **meeting agenda closing dates** in the [Urology](#) section of the ACGME website and plan accordingly.

To be approved, the program must demonstrate a **sound justification** and the **necessary resources** (e.g., faculty, procedures). An educational rationale, institutional procedural volume, and proposed block diagrams must be submitted with the request:

- The educational rationale should include a description of how a permanent complement increase will **enhance** resident/fellow education. Any missed minimums or concerning ACGME Survey results should be addressed.
- A downloadable Clinical Data Form to report the institutional procedural volume is available once the request is initiated in ADS. Carefully read the instructions on the form and ensure it is completed correctly.
- The proposed block diagrams must clearly demonstrate how the requested increase will impact the curriculum over the transition to a full complement. The request must include a proposed block diagram **for each academic year**, including **all** educational years, until the full complement is realized. Label each block diagram with the academic year. Additional block diagram guidance is available on the [Documents and Resources](#) page of the Urology section of the ACGME website. If the program’s block diagram will not change with the increase, submit the current block diagram and explain in the educational rationale why there will be no change.

Ensure that ADS provides the Review Committee with up-to-date program information by reviewing and updating (if needed) any citation responses, major changes and other updates, and the current block diagram.

Programs approved for a permanent complement increase are generally expected to roll out the increased complement on a year-by-year basis, i.e., adding only a Uro-1 resident each year.

However, in some circumstances the Review Committee will allow a Uro-2 resident to also start in the first year of the increase. See the [Urology FAQs](#) for more information.

To initiate a permanent change in the approved complement, the program director must log into ADS and from the menu under the “**Program**” tab, select “Requests” > “Complement Change.” The request will be electronically sent to the DIO for approval, as dictated by the Institutional Requirements. The DIO may approve the request, reject and delete the request, or reject and return the request for modifications. If the DIO approves the request, the information is submitted in ADS and forwarded to the Review Committee for consideration.

Permanent complement increase requests that are received by the agenda closing date are reviewed at the next Review Committee meeting. Requests received after the agenda closing date will be considered at the subsequent meeting. A Letter of Notification will inform the program of the Review Committee’s decision.

Permanent Decrease in Complement

A voluntary permanent decrease in resident or fellow complement must first be approved by the Sponsoring Institution’s GMEC, after which approval must be requested from the Review Committee through ADS. The request in ADS should be made **after** the effective date of the decrease has passed.

An educational rationale, institutional procedural volume, and a proposed block diagram will be requested in ADS. Depending on the circumstances, the Review Committee may not require all of this information. Contact the Review Committee’s senior accreditation administrator (email below) to inquire about what must be included in the request.

To initiate a permanent decrease in the approved complement, the program director must log into ADS and from the menu under the “**Program**” tab, select “Requests” > “Complement Change.” The request will be electronically sent to the DIO for approval, as dictated by the Institutional Requirements. The DIO may approve the request, reject and delete the request, or reject and return the request for modifications. If the DIO approves the request, the information is submitted in ADS and forwarded to the Review Committee for consideration.

A permanent complement decrease request is typically reviewed within a month of submission. A Letter of Notification will inform the program of the Review Committee’s decision.

Email questions to Accreditation Administrator Angel Mathis: amathis@acgme.org.