

## INTERNATIONAL ADVANCED SPECIALTY PROGRAM REQUIREMENTS: SUMMARY OF REQUIREMENTS FOR A NEWLY ACCREDITED SUBSPECIALTY

Advanced Specialty Requirements: **Pediatric Otolaryngology**  
Proposed Effective Date: **1 October 2024**

Comments are currently being solicited on Advanced Specialty Program Requirements for a newly accredited subspecialty. To aid those providing comment, the following table summarizes and provides a rationale for the unique elements of these new requirements.

The comments provided will be used by the Review Committee-International to determine the final version of the Requirements for approval by the ACGME-I Board of Directors, and which will be posted on the ACGME-I website.

Requirement Number	Line Number	Rationale
<b>I.A.1.a)</b> A fellowship in pediatric otolaryngology must function as an integral part of an ACGME-I-accredited residency in otolaryngology.	33-35	The relationship between the otolaryngology residency program and the fellowship can take many forms. The Review Committee-International does not expect a financial relationship but does expect that there is a system to ensure effective communication, planning, and evaluation of educational experiences between the two programs. Examples include (1) faculty members from the residency and fellowship programs collaborating to plan rotations in pediatric otolaryngology for residents; (2) faculty members of the fellowship being involved in teaching otolaryngology residents; or (3) fellows being involved in teaching and providing education to the otolaryngology residents.
<b>II.A.1.</b> The program director should have completed a pediatric otolaryngology fellowship or have extensive experience in pediatric otolaryngology.	49-50	The Review Committee expects that program directors have sufficient education, experience, and leadership in the subspecialty to fulfill their responsibilities to educate fellows in each of the ACGME-I Competencies. If a program director has not completed a pediatric otolaryngology fellowship, the Review Committee-International will assess the program director's education, experience, research, and leadership in the subspecialty.

<b>II.B.1.</b> To enhance fellows' educational experience, there must be participation from appropriately qualified faculty members from other related pediatric disciplines, including a) anesthesiology; b) audiology and speech pathology; c) gastroenterology; d) medical genetics; e) neonatology; f) pathology; g) perinatal and fetal medicine; h) pulmonology; i) radiology; and j) sleep medicine.	54-76	The requirement for other faculty members is tailored to fit the needs of pediatric otolaryngology. This is intended to relieve the burden of requiring non-essential faculty members, and clearly identifies which specialists are essential to the education of the fellows. Physician and non-physician faculty members may be available. Having faculty members from related disciplines should enhance fellow education, patient safety, and patient care quality by providing interdisciplinary education and care.
<b>III.A.1.</b> Prior to appointment in the program, fellows should have completed an ACGME-I-accredited residency program in otolaryngology or another otolaryngology residency program acceptable to the Sponsoring Institution's Graduate Medical Education Committee.	105-108	It is recognized that qualified applicants may not have completed an ACGME-I-accredited residency program. When this occurs, the Sponsoring Institution's Graduate Medical Education Committee should review the applicant's qualifications and determine eligibility for admission.
<b>IV.C.2.</b> Fellows must participate in a multispecialty, interdisciplinary team to manage and treat conditions for at least three of the following: a) cochlear implant; b) craniofacial disorders; c) tumors; or, d) vascular anomalies.	276-285	The requirement can be met through activities such as multi-disciplinary team rounds. These teams can function in inpatient or outpatient clinic settings.