

**ACGME Program Requirements for Graduate Medical Education  
in Medical Toxicology  
Summary and Impact of Focused Requirement Revisions**

**Requirement #: II.A.2.a)**

Requirement Revision (significant change only):

The program director must be provided minimum protected time for the administration of the program based on program size according to the following: <sup>(Core)</sup>

<u>Program Size</u>	<u>% FTE Required</u>
<u>0-3 fellows</u>	<u>20%</u>
<u>4-6 fellows</u>	<u>25%</u>
<u>7-9 fellows</u>	<u>30%</u>
<u>&gt;10 fellows</u>	<u>35%</u>

- Describe the Review Committee's rationale for this revision:  
**The requirement was added to define adequate support for the fellowship program director.**
- How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?  
**This will potentially improve education by providing increased clinical, supervisory, and administrative support to the fellows and the program.**
- How will the proposed requirement or revision impact continuity of patient care?  
**NA**
- Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?  
**In some cases, this may represent an increase in financial support for the program director from what has been previously provided.**
- How will the proposed revision impact other accredited programs?  
**NA**

**Requirement #: IV.C.1.a) and IV.C.1.b)**

Requirement Revision (significant change only):

Clinical experiences should be structured to facilitate learning in a manner that allows the fellows to function as part of an effective interprofessional team that works together towards the shared goals of patient safety and quality improvement. <sup>(Detail)</sup>

The program director must determine the length of clinical experiences for the fellows for any rotation. <sup>(Core)</sup>

- Describe the Review Committee's rationale for this revision:  
**This language is inserted to explain the new Common Program Requirement to minimize transitions in care and transitions in teaching.**

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?  
**Reliance on a team rather than an individual should improve patient safety.**
3. How will the proposed requirement or revision impact continuity of patient care?  
**Continuity of patient care should improve if team members start and end shifts at different times.**
4. Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?  
**NA**
5. How will the proposed revision impact other accredited programs?  
**NA**