

**Frequently Asked Questions: Internal Medicine Fellowships
Review Committee-International
ACGME-I**

Question	Answer
Sponsoring Institution	
<p>What is the expectation for the fellowship functioning as an integral part of the internal medicine residency program?</p> <p><i>[Advanced Specialty Program Requirement: I.A.1.]</i></p>	<p>The intent of the requirement is that there is a working, synergistic relationship between the residency and fellowship leadership that enhances each program. The program directors of the residency and fellowship programs should seek interactions that will enhance understanding of the requirements, implement the competency-based education program in a coordinated manner across the programs, and ensure that consideration is given to the potential impact of changes in one program on the other.</p> <p>This can be accomplished in a variety of ways such as participation in each program's program evaluation committee (PEC); joint meetings with the institution's DIO; or periodic scheduled meetings between the residency and fellowship program directors.</p>
Program Director	
<p>What are the expectations for the program director's qualifications if they are not ABMS certified?</p> <p><i>[Foundational Program Requirement: II.A.6.b)]</i></p>	<p>It is not required that the program director be ABMS certified; however, the program director must have a combination of education and experience that is sufficient to fulfill their responsibility to educate fellows in each of the ACGME-I competencies. The Review Committee International will judge the program director's clinical and educational experience, scholarship and leadership in the subspecialty when judging program director's qualifications and equivalency with ABMS certification.</p>
Regularly Scheduled Educational Activities	
<p>What can programs do to offer fellows the opportunity to review material from missed conferences?</p> <p><i>[Advanced Specialty Program Requirement: IV.B.1.a)]</i></p>	<p>Programs must have a mechanism to allow fellows to obtain information when conferences are missed due to vacation, day off, post-call or when assigned to a distant participating site. The Review Committee International will accept a variety of solutions. For example, programs can use videotaped conferences, web casting, making slides available online, repeating conferences, or offering a parallel conference at a distant participating site.</p>

Clinical Experiences	
<p>How can programs minimize rotational transitions?</p> <p><i>[Advanced Specialty Program Requirement: IV.C.1.]</i></p>	<p>Difficulty in rotational transitions can occur for a variety of reasons, such as conflicting demands across multiple services, specialties, and treatment settings; travel times and the distance between training sites; and multiple work shifts. The Review Committee International encourages programs to review the conflicts that occur in their clinical setting(s) and actively seek solutions.</p> <p>Some examples of solutions are scheduling rotations at a specific location in blocks to minimize commuting; scheduling hospital-based and more distant site rotations to occur separately from the outpatient clinic experience; and limiting the number of work shifts.</p>
<p>What experiences will fulfill the requirement that fellows participate in training using simulation?</p> <p><i>[Advanced Specialty Program Requirement: IV.C.]</i></p>	<p>The Review Committee International does not expect each fellowship program to have a simulation center or specific simulation equipment. The requirement for simulation means that the program provides learning about patient care in a setting that does not include actual patients. Examples of simulation activities include objective structured clinical examinations (OSCEs), standardized patients, patient simulators, or electronic simulation of codes, procedures or other clinical scenarios.</p>