TRANSFERS INTO INTEGRATED PROGRAMS

The following rules apply to residents requesting a transfer from either a U.S. or Canadian training program.

Residents may not exchange accredited years of training between the 2 different models (i.e., independent and integrated) without prior approval by the American Board of Plastic Surgery, Inc. Program Directors must request any anticipated transfers in writing, and obtain prior approval by the Board 6 months in advance of any proposed transfer in programs. It is imperative that residents hold positions of increasing responsibility when obtaining training in more than one institution, and one full year of experience must be at the senior level. When transferring, only full training years will be accepted. The Board does not grant credit for a partial year of training.

All resident transfers into a vacant position in an Integrated Program must be approved by the accepting Program Director and The American Board of Plastic Surgery, Inc. The transferring resident must assume the responsibility to request approval from ABPS, and must provide the following to the Board before approval will be considered:

1. Letter from the current program director indicating the exact dates of training and monthly rotations that will be completed at the time of the transfer;
2. Letter from the accepting Integrated plastic surgery program director indicating the application or acceptance of the transferring resident and at what level of training the resident will start; and
3. Completed Resident Registration and Evaluation of Training Form, Processing Fee as listed in the Fee Schedule and photocopy of medical school diploma.

The 3 steps above must be completed for ALL transfers.

Integrated transfers

Residents may transfer into an Integrated residency at the beginning of the PSY-IV level only if they have completed full residency training in General Surgery, Vascular Surgery, Neurological Surgery, Orthopaedic Surgery, Otolaryngology, Thoracic and Cardiac Surgery, or Urology, sufficient to qualify for certification by the corresponding ABMS Board. This is to ensure that all of the requirements have been met to allow the resident to enter the ABPS certification process.

Only transfers into Integrated plastic surgery programs at or below the PSY-IV level will be considered.

No transfers will be accepted after the plastic surgery PSY IV year because the last 3 years of an Integrated residency program must be completed in the same institution.
General surgery residency training does not need to be completed in the same institution as the accepting Plastic Surgery Program.

Residents can transfer from a Competency Based Program (5-year program) to a Non-Competency Based Program (6-year program). The resident must then complete the entire integrated program. Transfers will not be allowed after the beginning of the PSY IV year. All transfer requests must be approved by the ABPS prior to the resident transferring.

Residents cannot transfer from a Non-Competency Based Program (6-year program) to a Competency Based Program (5-year program).

Residents who have completed an Oral and Maxillofacial Residency sufficient to qualify for certification with the American Board of Oral and Maxillofacial Surgery, including two consecutive (progressive) years of general surgery training after receiving an MD degree, may transfer into an Integrated program at the PSY IV level and complete at least 3 years of plastic surgery residency training. For requirements see - Prospective candidates with a medical degree (MD) obtained in the United States or Canada combined with a Dental Degree (DMD or DDS).

Transfers into Integrated programs will only be allowed as follows:

1. **Plastic Surgery Year (PSY) I or II:** residents may transfer after completion of a PGY I year in a surgical residency with the status of ACGME or RCPSC accreditation (not pre-accreditation). Approved surgical residencies include: General Surgery, Vascular Surgery, Neurological Surgery, Orthopaedic Surgery, Otolaryngology, Thoracic and Cardiac Surgery, or Urology or another ACGME or RCPSC accredited Integrated Plastic Surgery residency program.

2. **Plastic Surgery Year (PSY) III:** residents may transfer into the start of PSY III position only if they have completed at least 2 progressive years in an approved surgical residency as listed in #1 above or another ACGME or RCPSC accredited Integrated Plastic Surgery residency program. Both years of residency training must have been completed in a surgical residency with the status of ACGME or RCPSC accreditation (not pre-accreditation). These years do not need to be completed in the same program to be accepted.

Transfers from one Integrated program to another are not allowed after the PSY III year.
3. **Plastic Surgery Year (PSY) IV**: residents may only transfer into the start of a PSY IV position if they have completed full training sufficient to qualify for certification by the related ABMS board in one of the ACGME accredited surgical residencies listed in #1 above.

**TRANSFERS INTO INDEPENDENT PROGRAMS**

No transfers are allowed into Independent Plastic Surgery programs. All residents must complete all 3 years of Independent Plastic Surgery Training at the same institution. All training must commence at the beginning of the Independent Plastic Surgery program. As of July 1, 2015, the Board eliminated the 3 year combined/coordinated pathway into plastic surgery residency training.

**CLINICAL TIME REQUIREMENTS DURING RESIDENCY TRAINING**

The Board considers a residency in plastic surgery to be a full-time endeavor and looks with disfavor upon any other arrangement. The minimum acceptable residency year, for both prerequisite and requisite training, must include at least 48 weeks of full-time training experience per year. The 48 weeks per year may be averaged over the length of the training program to accommodate unexpected extended leaves of absence.

**Military Leave**

Partial years of training will be accepted toward the minimum clinical time requirements for residents who serve in the military, however, the resident must make up the time away from residency just as any other leave. Residents do not receive credit for the time served during deployment.

Program Directors must send the Board a letter documenting the leave as military deployment and outlining how the resident will make up that time before the end of residency.

**Leave of Absence**

The Board does not define the remaining 4 weeks per year beyond the 48 weeks of required clinical training and therefore those weeks may be used for vacation or medical leave as determined by the local institution and/or program.

**Hardship Leave**: To accommodate unexpected extended leaves of absence that occur in the last 2 years of plastic surgery training, the Board will accept only 94 weeks of training averaged over the final 2 years of training in both the Integrated and Independent training pathways. Board approval is required for the exception of 94 weeks rather