INTEGRATED MODEL

MATCHING DIRECTLY FROM MEDICAL SCHOOL

The Integrated plastic surgery model begins by matching directly from medical school into a plastic surgery program for 6 years under the direction of the plastic surgery program director. The resident who desires to enter plastic surgery training directly from medical school may should participate in the National Resident Matching Program (www.nrmp.org). The training includes the Required Clinical and Strongly Suggested Clinical Experiences listed above. The exact rotations are determined by the Plastic Surgery Program Director and must occur at programs accredited by the ACGME. No less than 3 years of the Integrated program must be concentrated in plastic surgery, and the final 12 months must include senior clinical plastic surgery responsibility. The last 3 years of Integrated training must be completed in the same program. The required content of training in these 3 plastic surgery years is documented under Requisite Training. All training programs must be accredited by the Accreditation Council for Graduate Medical Education (ACGME) during all years of training completed.

Competency Based Integrated Plastic Surgery Programs

As of July 1, 2018, the Board accepts plastic surgery residents who complete no less than 5 full academic years of training in an Integrated Plastic Surgery Competency Based Residency Program approved for the Competency Based Time Variable Training Pilot, by the Residency Review Committee for Plastic Surgery (RRC-PS) and the ABPS. Programs are required to identify all residents to the Board Office upon acceptance into the program, but no later than the beginning of PSY-IV year. Residents completing the Competency-Based training pathway are required to complete 5 full academic years of plastic surgery residency training with progressive responsibility.

The Board will require PSOLs from all residents in the program, both integrated and competency based, during the competency based residents' PSY-IV and PSY-V years. Submission of milestones are also required from competency based residents at the end of the PSY-IV and PSY-V years. Should a Competency Based Program receive a "warning" from the ACGME RRC-PS, all residents in that pathway are required to move from the Competency Based Program into the standard Integrated program and complete the entire 6 years. Once the "warning" has been removed and the program status is considered "Continued Full Accreditation", then only new residents can enter the Competency Based Program to potentially complete training in five years. Those residents who are required to move into the standard Integrated program must remain there and complete the 6 years. Residents in a Competency Based Program who desire to transfer into another plastic surgery program must transfer into a full 6-year Integrated Program. If a resident in a Competency Based Program must repeat a plastic surgery year, or training is extended for any reason, the resident will no longer qualify for the Competency Based pathway. The resident must then move into the standard 6-year Integrated Program, and complete the entire PSY-VI year of training.

5+1 Joint Plastic Surgery and Hand Surgery Accelerated Fellowship

As of July 1, 2022, the Board has established a training pathway through which plastic surgery residents who complete 5 progressive years of plastic surgery training plus 1 year of a hand fellowship accredited by the ACGME RRC-PS in the same institution, will be considered eligible for both ABPS primary certification in Plastic Surgery and Subspecialty Certification in Hand Surgery. Only Integrated Plastic Surgery programs with a Hand Fellowship accredited through the ACGME RRC-PS may participate in this pathway. The program must apply to both the Board and the RRC-PS for approval **prior to** designating residents into this pathway. The resident must be identified by PSY-IV year and must complete all plastic surgery requisite requirements and graduate from plastic surgery training at the end of their PSY-V year. Plastic surgery training and hand fellowship training must be completed sequentially, at the same institution in this 5+1 model. Residents who complete this 5+1 Joint Plastic Surgery and Hand Surgery Accelerated Fellowship program are eligible to take the ABPS Plastic Surgery Written Examination in the final year of plastic surgery residency training (year 5) and prior to the start of the hand fellowship. Once successful on the ABPS Written Examination, the resident has the opportunity to sit for the Hand Surgery Examination following hand surgery fellowship graduation and prior to the ABPS Oral Examination.

RESIDENTS WHO TRAIN IN CANADA

It is the responsibility of residents in Canada to ensure their training is approved by the ABPS. The Resident Registration and Evaluation of Training Form must be submitted for review. If approved, the ABPS will issue a Preliminary Confirmation of Approval Letter. This initial evaluation of training is required and pertains to all residents applying for admission to The American Board of Plastic Surgery, Inc. certification process. To be eligible for entry into a United States ACGME-accredited Plastic Surgery Residency Training Program, the following provisos and documentation must be completed:

- I. Canadian Surgical Residents who complete an alternate prerequisite pathway and intend to apply to an ACGME-accredited <u>Independent Plastic Surgery Training Program in the US:</u>
 - 1. Must be a graduate of a medical school in the United States or Canada approved by the Liaison Committee for Medical Education (LCME) or by the Committee on Accreditation of Canadian Medical Schools (CACMS). Medical degrees obtained through an international medical school (IMGs) will be accepted only if the resident matches directly into a Canadian Surgical Residency through CaRMS (Canadian Residency Matching System), completing prerequisite training in one of the below accepted surgical specialties in Canada.
 - 2. Must have entered an ABPS approved surgical residency through the Canadian Resident Matching Service (CaRMS). The only surgical residencies approved are: General Surgery, Vascular Surgery, Neurological Surgery, Orthopaedic Surgery, Otolaryngology-Head and Neck Surgery, Thoracic and Cardiac Surgery, and Urology.

- 3. Prerequisite training must be completed in no more than two residency training programs. Residents who are completing, or have completed, general surgery residency training (or one of the other approved surgical specialties) and applying for an **Independent** plastic surgery residency training position must:
 - complete the <u>last three</u> years of general surgery residency training, or training in the approved surgical specialty, in the same program, with progressive responsibility.
 - provide a letter from the prerequisite surgical residency training Program Director or Department Chair attesting to the resident completing their prerequisite surgical residency training, including exact dates of training, the year levels completed/to be completed, a complete clinical month by month rotation schedule, and a certificate of completion. The letter must also confirming the resident is in good standing.
 - obtain primary certification in the approved surgical specialty by the Royal College of Physicians and Surgeons of Canada (RCPSC).
 - obtain eligibility to the examination and certification process in the same surgical specialty from the United States ABMS surgical member board.
- 4. Complete 48 weeks of clinical training per year, averaged over the length of the training.
- 5. Have no more than 3 months of non-clinical or non-surgical training during the residency.
- 6. Have no more than 12 months of rotations outside of the primary specialty residency training.
- 7. Train in a residency program accredited by the Royal College of Physicians and Surgeons of Canada (RCPSC) for the entire length of residency training.

Residents will be approved as meeting the ABPS prerequisite training requirements after the satisfactory completion of a formal surgical training program in Canada, sufficient to qualify for certification, in one of the following ABMS specialties: general surgery (including the Vascular Surgery Board of the American Board of Surgery), neurological surgery, orthopaedic surgery, otolaryngology-head and neck surgery, thoracic and cardiac surgery, or urology. Prospective candidates, including residents trained in Canadian programs, must meet, and comply with the most current requirements in these specialties sufficient to qualify for certification by the respective ABMS Board.

Plastic surgery training is not required to be completed in the same institution as the alternate prerequisite pathway.

The Board requires a verification letter from the prerequisite training program director verifying completion of all training requirements, including the chief year, sufficient to qualify for certification by the specific ABMS specialty board. Residents considering plastic surgery training in the United States should notify the ABPS two years prior to the expected completion of their Canadian surgical training. The Board Office will forward an ABPS Verification Form to the Canadian surgical training program director for completion. This step is required to obtain written primary source verification from the program director to the completion of training and an evaluation of performance. It is the resident's responsibility to determine that the form has been completed and returned to the ABPS office. In lieu of the ABPS Verification Form, evidence of current admissibility to the examination process, or certification by, the respective ABMS specialty boards in the United States is acceptable.

II. Canadian Plastic Surgery Residents who desire to Transfer into an ACGME-accredited Integrated Plastic Surgery Residency Program in the U.S.:

See the section on TRANSFERS INTO INTEGRATED PROGRAMS. No transfers are allowed into Independent Plastic Surgery programs.

- III. Canadian Integrated plastic surgery residents who graduated from residency and are applying for ABPS eligibility:
 - 1. Must be a graduate of a medical school in the United States or Canada approved by the Liaison Committee for Medical Education (LCME) or by the Committee on Accreditation of Canadian Medical Schools (CACMS).
 - 2. Medical degrees obtained through a non-Canadian international medical school will be accepted only if the resident matches directly into a Canadian Plastic Surgery Residency through CaRMS.
 - 3. Must have entered Canadian Plastic Surgery Training through the Canadian Resident Matching Service (CaRMS).
 - 4. Complete 48 weeks of clinical training per year, averaged over the length of the training.
 - 5. Train in a residency program accredited by the Royal College of Physicians and Surgeons of Canada (RCPSC) for the entire length of residency training.
 - 6. Must successfully obtain certification in plastic surgery by the RCPSC. (ABPS Written Examination results will not be provided until receipt of RCPSC certification).
 - 7. ABPS Certification must be achieved within eight years after successful completion of plastic surgery residency training. Refer to the ABPS Admissibility Policy for details.

Canadian residents who obtain certification by the Royal College of Physicians and Surgeons of Canada

Canadian residents certified by the RCPSC <u>prior to 2007</u> must be reviewed by the Board's Credentials and Requirements Committee. Additionally, they must complete the Professional Standing Requirements of the Board's Continuous Certification in Plastic Surgery Program prior to being approved for application to the Board. The Professional Standing requirements must be supported with documentation and must include:

- 1. Current, valid, full and unrestricted state, province or international medical license;
- 2. Verification of active, hospital inpatient admitting privileges in plastic surgery;
- 3. ABPS Peer Review Evaluations (at least one must be from a Chief of Surgery, Chief of Staff or Chief of Plastic Surgery at one of the hospitals where privileges are held. Two additional forms from any of the following categories: ABPS certified plastic surgeon, anesthesiologist, nursing supervisor, or Chiefs of Staff, Surgery, Plastic Surgery);
- 4. Accreditation Certificates for Outpatient Surgical Facilities, if applicable; and
- 5. Confirmation of completion of plastic surgery residency training and recommendation to the Board's examination process by the plastic surgery program director.

NON-APPROVED RESIDENCIES

The Board grants no credit for training, residency and/or experience in disciplines other than the approved surgical specialties named above. Residencies completed in locations other than the United States or Canada are not acceptable in lieu of those specified under the acceptable pathways. This in no way implies that quality training cannot be acquired elsewhere, but the Board has no method of evaluating the quality of such programs and must be consistent in its requirements.

TRANSFERS DURING RESIDENCY TRAINING

TRANSFERS INTO INTEGRATED PROGRAMS

The following rules apply to residents requesting a transfer from either a U.S. or Canadian training program. The Board will allow residents to transfer from one Integrated program to another Integrated program at or below the beginning of the PSY-IV year. 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.

All transfer requests must be approved by the ABPS **prior** to the resident transferring. Program Directors must request any anticipated transfers in writing and obtain prior approval by the Board 6 months in advance of any proposed transfers.

Residents may not exchange accredited years of training between the 2 different models (i.e., independent and integrated) without prior approval by the Board. 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. Only full training years will be accepted. The Board does not grant credit for a partial year of training. Residents cannot use rotations completed during prerequisite training towards training to be completed in the Integrated plastic surgery residency training program.

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 acknowledging the transfer request, indicating acceptance of the transferring resident and confirming at what level of training the resident will start; and
- 3. Completed Resident Registration and Evaluation of Training Form, Evaluation of Training Fee as listed in the Fee Schedule and photocopy of medical school diploma.

The 3 steps above must be completed for ALL transfers.

Transfers into Integrated programs will only be allowed as follows:

Plastic Surgery Year (PSY) I or II:

Residents may transfer into a Plastic Surgery Integrated PSY I or II position, after completion of a PGY I year in the same 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-Head and Neck Surgery, Thoracic and Cardiac Surgery, Urology or another ACGME or RCPSC accredited Integrated Plastic Surgery residency program.