

October 17, 2021

Jerry Vasilias, PhD  
Executive Director  
Review Committee for Internal Medicine  
Accreditation Council for Graduate Medical Education  
Suite 2000  
401 North Michigan Avenue  
Chicago, IL 60611

Dear Dr. Vasilias,

On behalf of the Association of Pulmonary and Critical Care Medicine Program Directors (APCCMPD); Association of Program Directors in Endocrinology, and Metabolism (APDEM); American College of Rheumatology (ACR); Infectious Diseases Society of America (IDSA); American Geriatrics Society (AGS); American Gastroenterological Association (AGA); and American Association for the Study of Liver Diseases (AASLD) we are writing in response to the recently proposed focused revisions to the Program Requirements in Graduate Medical Education for the Internal Medicine Subspecialties as related to support for Program Directors; Associate Program Directors; Program Leadership; and Program Coordinators and Additional Administration.

Collectively, we represent Program Directors in Pulmonary; Critical Care Medicine; Pulmonary and Critical Care Medicine; Endocrinology and Metabolism; Rheumatology; Infectious Diseases; Geriatrics; Gastroenterology; and Hepatology, representing nearly 1,100 Accreditation Council on Graduate Medical Education (ACGME) Accredited Programs and nearly 7,000 trainees.

The administration of postgraduate medical education programs has become more and more time-consuming as accreditation standards have (rightly) standardized expectations, and as medical education knowledge has improved.

We applaud the ACGME and the Review Committee for Internal Medicine for recognizing the current gap between the support needed and support provided to meet our subspecialty program requirements today, and in the future. These proposed focused revisions to our respective Sub Specialty Program Requirements, as related to support for Program Directors (II.A.2, a.); Associate Program Directors (II.A.2,b.); Program Leadership (II.B.4.); and Program Coordinators and Additional Administration (II.C.2.a.), represent a needed and welcomed significant step toward bridging this support gap.

Our intention with this letter, as the representatives of Program Directors in our individual subspecialties, is to collectively recognize the ACGME's effort toward greater fellowship program support. As individual subspecialties we will provide comments to our respective subspecialty program requirements that represent the nuances of our unique subspecialty needs. These comments will be made using the ACGME on-line subspecialty program requirements comment form.

Thank you to the ACGME for recognizing what it takes for us to do what we do and what it will take to reach the goals of Internal Medicine 2035 (and beyond). We believe this lays a framework for all our programs to move our specialties forward together.

Sincerely,



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President, Association of Pulmonary and Critical Care Medicine Program Director  
Pulmonary and Critical Care Medicine Fellowship Program Director, The University of Pennsylvania



Andrew G. Gianoukakis, MD  
President, Association of Program Directors in Endocrinology, and Metabolism  
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