

ACGME Competencies

The Surgical Pathology (SP) Fellowship will integrate the following ACGME Competencies into the curriculum:

Professionalism

Fellows will demonstrate a commitment to professionalism and an adherence to ethical principles.

Patient Care and Procedural Skills

Fellows will be able to provide patient care that is patient- and family-centered, compassionate, equitable, appropriate, and effective for the treatment of health problems and the promotion of health.

Fellows will demonstrate competence in:

- advocating for quality patient care and optimal patient care systems;
- communicating pathology results, including directly to patients;
- educating others in the knowledge, skills, and abilities related to patient care in SP;
- preparing and presenting pathology material at clinicopathologic correlation conferences and/or tumor boards; and,
- providing appropriate and effective consultations to physicians and other health professionals, both intra- and inter- departmentally.

Consultations will include providing medical advice on the diagnosis and management of patients whose specimens are received and interpreted on SP service.

Fellows will be able to perform all medical, diagnostic, and surgical procedures considered essential for the area of practice.

Fellows will participate in performing the patient and laboratory procedures for which they will be expected to supervise ancillary staff members.

Fellows will demonstrate competence in:

- the gross examination of anatomic pathology specimens;
- the histologic examination and diagnosis of common and uncommon neoplastic and non-neoplastic diseases, including those of the bone, breast, cardiovascular system, gastrointestinal system, gallbladder and extrahepatic biliary tract, head and neck, kidney, liver, lung, lymph nodes, male reproductive system, mediastinum, pancreas, peritoneum, pleural, products of conception and placenta, spleen, soft tissue, and urinary tract; and,
- interpreting the results of laboratory assays routinely used in surgical pathology, including histochemical, immunohistochemical, and molecular and genomic assays.

Each fellow will perform at least 2000 gross and/or histologic examinations of surgical pathology specimens.

Each fellow will perform at least 100 intra-operative surgical pathology diagnostic consultations.

Medical Knowledge

Fellows will demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social- behavioral sciences, including scientific inquiry, as well as the application of this knowledge to patient care.

Fellows will demonstrate expertise in their knowledge of surgical pathology, including:

- common and uncommon neoplastic and non- neoplastic diseases of the bone, breast, cardiovascular system, endocrine, female reproductive system, gastrointestinal system, gallbladder and extrahepatic biliary tract, head and neck, kidney, liver, lung, lymph nodes, male reproductive system, mediastinum, pancreas, peritoneum, pleural, products of conception and placenta, spleen, soft tissue, and urinary tract;
- histochemistry, immunohistochemistry, and molecular and genomic techniques as they apply to surgical pathology; and,
- the operation and management of surgical pathology and relevant laboratories, including assay development, laboratory regulations, quality control procedures, and quality improvement activities.

Practice-based Learning and Improvement

Fellows will demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning.

Interpersonal and Communication Skills

Fellows will demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals.

Systems-based Practice

Fellows will demonstrate an awareness of and responsiveness to the larger context and system of health care, including the structural and social determinants of health, as well as the ability to call effectively on other resources to provide optimal health care.

Curriculum Organization and Fellow Experiences

The curriculum will be structured to optimize fellow educational experiences, the length of the experiences, and the supervisory continuity. These educational experiences include an appropriate blend of supervised patient care responsibilities, clinical teaching, and didactic educational events.

Fellow experiences will be designed to allow appropriate faculty member supervision such that fellows progress to the performance of assigned clinical responsibilities under oversight, in order to demonstrate their ability to enter the autonomous practice in *SP* prior to completion of the program.

Fellow experiences will include:

- supervision of residents, and with graduated responsibility, including independent diagnoses and decision-making;
- laboratory management, quality assurance activities, and committee service; and,
- use of laboratory information systems and database management.

Rotations

- In-House Surgical Pathology (10-12 of 52 weeks at UWMC, 4 weeks at HMC- Medical knowledge, Patient Care)
 - General surgical pathology training is a rotation with experience in frozen section evaluation, gross examination and dissection, microscopic evaluation and formulation of final diagnosis. Fellows are expected to be more independent than junior residents and to have cases in a final form for attending review. They are expected to be nearly independent in evaluation of frozen sections and gross examination, and to have the knowledge to know when to ask for help.
- Mentor (6 of 52 weeks - These duties encompass all of the essential competencies and do not

easily segregate between competencies.)

- Evaluate ALL large gross specimens with junior residents in a specific subspecialty area; the fellow should assume co-responsibility for these specimens; this includes shared responsibility for both well-prosected specimens and for errors. During the first 6 months of the year it is expected that the surgical fellow will closely supervise first year residents on anatomic pathology; they will be expected not only to supervise, but also to assist the first year resident with workload when necessary. The surgical pathology fellow will also be responsible for assisting first year residents with interpreting slides and case write-ups before they are presented to faculty. Fellows are expected to have the knowledge to know when to call for attending input on gross specimens, to do so on all complex specimens, and to foster a culture of active interactions between residents and attendings in the gross room.
- Consult Surgical Pathology (10-12 of 52 weeks at UWMC, 4 weeks at HMC – All competencies)
 - Orders pertinent immunohistochemistry and ancillary testing on consults pertinent to specific subspecialty areas.
 - Prepares and presents subspecialty-specific tumor boards with assistance of the covering attending.
- Dermatopathology (4 of 52 weeks - All competencies)
 - Responsible for signout of dermatopathology specimens including evaluation of histories with expectation of increased independence compared to junior residents.
 - Attend dermatology clinic.
 - Present at dermatopathology conferences.
- Junior Attending (4 of 52 weeks - All competencies)
 - In the selected subspecialty area, serve as the primary contact for residents rotating through the service, being responsible for guidance of gross evaluation, histologic examination and ordering ancillary testing of all cases in the selected service. Teaching the rotating residents in this area is a key element of this rotation.
 - Bring cases to the assigned attending when they are ready to be finalized, with the least amount of corrections necessary.

The didactic curriculum will include teaching conferences and journal clubs in *SP*, as well as joint conferences with clinical services involved in the diagnosis and management of patients in *SP*.

- Didactic topics will include new technologies in *SP*.
- Fellows will actively participate in conferences, at least once per month on average, in *SP*.
- Fellows will present a minimum of two conferences per year; and will be evaluated in their presentation skills.
- Fellows' clinical experience will be augmented through didactic sessions, review of the relevant medical literature, and use of study materials for unusual cases.
- Fellows will participate in laboratory quality assurance activities and inspections.

Fellow Scholarly Activity

Each fellow will participate in scholarly activity, including at least one of the following:

- evidence-based presentations at journal clubs or meetings (local, regional, or national);
- preparation and submission of articles for peer-reviewed publications; or,
- clinical or basic science research projects.

Call Responsibilities

Call is taken once a week during the 10-12 weeks that the fellows cover the in-house surgical pathology services, and during their mentorship rotation (as support for the first year residents, including their weekend call). There is no call coverage during consult or Junior attending rotations. Faculty members are on call with the resident/fellow and review all frozen sections before a diagnosis is rendered. Fellows are expected to be more independent than residents in the workup of frozen sections, gross pathology cases and final diagnoses, and they may call preliminary diagnoses to clinical colleagues. Immediate feedback is given for every call by the involved faculty member. If specific areas requiring improvement are identified, additional feedback may also be given by the fellowship director or director of surgical pathology as appropriate.