**New Application: Plastic Surgery**

401 North Michigan Avenue · Chicago, Illinois 60611 · United States · +1.312.755.7042 www.acgme-i.org

**Submission for Initial Accreditation:** This Advanced Specialty application is for programs applying for **Initial Accreditation ONLY**and is used in conjunction with the Accreditation Data System (ADS).

All sections of the form applicable to the program must be completed for it to be accepted for review. The information provided should describe the existing program. For items that do not apply, indicate “N/A” in the space provided. Where patient numbers are requested, provide exact numbers as requested and indicate the exact dates for the data entered. If any requested information is unavailable, an explanation must be given, and it should also be indicated as unavailable in the appropriate place on the form. Once the form is complete, number the pages sequentially in the bottom center.

The program director is responsible for the accuracy of the information supplied in this form and must sign it. It must also be signed by the designated institutional official (DIO) of the Sponsoring Institution, who will submit the application electronically in ADS.

Review the International Foundational Program Requirements for Graduate Medical Education and Advanced Specialty Program Requirements for Graduate Medical Education in Plastic Surgery. The International Foundational, Advanced Specialty, and Institutional Requirements may be downloaded from the ACGME International website: [www.acgme-i.org](http://www.acgme-i.org/).

Email questions regarding the form’s content to acgme-i@acgme-i.org.

Email questions regarding ADS to ADS@acgme.org (type the program number in the subject line).

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| Program Name:Click here to enter text. |

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**Introduction**

**Duration and Scope of Education**

1. What will be the length, in months, of the educational program?

Choose an item.

**Program Personnel and Resources**

**Program Director**

* 1. Will the program director annually compile a comprehensive record of the number and type of operative procedures performed by each resident completing the program? [ ] YES [ ] NO
1. Will this record include all procedures in which each resident was either Surgeon or Assistant during the program? [ ] YES [ ] NO
2. Will this record be provided as requested in the format and form specified by the Review Committee-International and signed by both the resident and the program director as a statement of its accuracy? [ ] YES [ ] NO
3. Will this record be maintained by the program director using the ACGME-I Case Log System?

 [ ] YES [ ] NO

Explain any ‘NO’ responses (Limit 250 words)

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1. Will the program director document periodic review of the morbidity and mortality experiences of the service? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

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1. How will the program director demonstrate that each resident has generally equivalent and adequate distribution of categories and cases? (Limit 300 words)

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**Other Program Personnel**

1. Will there be a program coordinator appointment as follows: 0.5 full-time equivalent (FTE) for programs with up to six residents or 1.0 FTE for programs with more than six residents? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 300 words)

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**Specialty-Specific Educational Program**

**ACGME-I Competencies**

**Professionalism**

* 1. How will graduating residents demonstrate a commitment to carrying out professional responsibilities and adhering to ethical principles?

Describe how these skills will be evaluated. (Limit 300 words).

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2. How will graduating residents demonstrate the following?

1. Compassion, integrity, and respect for others
2. Responsiveness to patient needs that supersedes self-interest
3. Respect for patient privacy and autonomy
4. Accountability to patients, society, and the profession
5. Sensitivity and responsiveness to a diverse patient population, including to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation

Provide examples of how skill will be evaluated in three of the five areas listed. (Limit 300 words)

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**Patient Care and Procedural Skills**

* + 1. How will graduating residents demonstrate the ability to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health?

Describe how this will be evaluated. (Limit 300 words)

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2. How will graduating residents demonstrate competence in the following?

1. Aesthetic (cosmetic) surgery of the head and neck, trunk, and extremities
2. Burn reconstruction
3. Congenital defects of the head and neck, including clefts of the lip and palate, and craniofacial surgery
4. Craniomaxillofacial trauma, including fractures
5. Microsurgical techniques applicable to plastic surgery
6. Neoplasms of the head and neck surgery, including neoplasms of the head and neck and the oropharynx
7. Plastic surgery of the breast
8. Plastic surgery of the lower extremities
9. Plastic surgery of the trunk and genitalia
10. Reconstruction by tissue transfer, including flaps and grafts
11. Surgery of benign and malignant lesions of the skin and soft tissues
12. Surgery of the hand/upper extremities

Provide examples of how competence will be evaluated in seven of the 12 areas listed. (Limit 700 words)

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**Medical Knowledge**

* + - 1. How will graduating residents demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care?

Describe how this knowledge will be evaluated. (Limit 400 words)

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* + 1. How will graduating residents demonstrate knowledge in the basic science subjects pertinent to plastic surgery, including the following?
1. Anatomy and physiology
2. Embryology
3. Genetics
4. Microbiology
5. Pathology
6. Pharmacology
7. Radiation biology

Provide examples of how knowledge will be evaluated in four of the seven areas listed. (Limit 400 words)

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* 1. How will graduating residents demonstrate knowledge of practice management, ethics, and medico-legal topics?

Describe how knowledge will be evaluated. (Limit 400 words)

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* 1. How will residents demonstrate knowledge of the following?
1. Adjunctive oncological therapy
2. Biomechanics
3. Rehabilitation
4. Surgical and artistic anatomy
5. Surgical design
6. Surgical diagnosis
7. Surgical instrumentation fundamental to the specialty
8. Surgical pathology and microbiology
9. Surgical physiology and pharmacology
10. Wound healing

Provide examples of how knowledge will be evaluated in six of the 10 areas listed. (Limit 600 words)

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* 1. How will graduating residents demonstrate sound judgment and technical capabilities to achieve satisfactory surgical results?

Describe how this will be evaluated. (Limit 400 words)

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**Practice-based Learning and Improvement**

* + 1. How will graduating residents demonstrate their 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?

Describe how this will be evaluated. (Limit 300 words)

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* + 1. How will graduating residents demonstrate they have developed skills and habits to meet the following goals?
	1. Identify strengths, deficiencies, and limits in one’s knowledge and expertise
	2. Identify and perform appropriate learning activities
	3. Incorporate formative evaluation feedback into daily practice
	4. Locate, appraise, and assimilate evidence from scientific studies related to their patients’ health problems
	5. Participate in the education of patients, patients’ families, students, other residents, and other health professionals
	6. Set learning and improvement goals
	7. Systematically analyze practice using quality improvement methods, and implement changes with the goal of practice improvement
	8. Use information technology to optimize learning

Provide examples of how skills will be evaluated in five of the eight areas listed. (Limit 500 words)

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**Interpersonal and Communication Skills**

* + 1. How will graduating residents demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals?

Describe how these skills will be evaluated. (Limit 300 words)

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* + 1. How will graduating residents demonstrate their ability to:
1. communicate effectively with patients, patients’ families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds;
2. communicate effectively with physicians, other health professionals, and health-related agencies;
3. work effectively as a member or leader of a health care team or other professional group;
4. act in a consultative role to other physicians and health professionals; and,
5. maintain comprehensive, timely, and legible medical records?

Provide examples of how skill will be evaluated in three of the five areas listed. (Limit 300 words)

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**Systems-based Practice**

* + 1. How will graduating residents demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care?

Describe how these skills will be evaluated. (Limit 300 words)

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2. How will graduating residents demonstrate their ability to:

1. work effectively in various health care delivery settings and systems relevant to their clinical specialty;
2. coordinate patient care within the health care system relevant to their clinical specialty;
3. incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population-based care as appropriate;
4. advocate for quality patient care and optimal patient care systems;
5. work in interprofessional teams to enhance patient safety and improve patient care quality; and,
6. participate in identifying system errors and implementing potential systems solutions?

Provide examples of how skill will be evaluated in four of the six areas listed. (Limit 400 words)

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**Regularly Scheduled Educational Activities**

* + 1. Complete Appendix A., Formal Didactic Sessions by Academic Year, and attach to submission.
		2. Will resident didactic sessions include basic science subjects pertinent to plastic surgery, including the following?
1. Anatomy and physiology [ ] YES [ ] NO
2. Embryology [ ] YES [ ] NO
3. Genetics [ ] YES [ ] NO
4. Microbiology [ ] YES [ ] NO
5. Pathology [ ] YES [ ] NO
6. Pharmacology [ ] YES [ ] NO
7. Radiation biology [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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* + 1. Will residents participate and present educational material at conferences? [ ] YES [ ] NO
		2. Will residents have adequate time to prepare for didactic presentations? [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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* + 1. Will resident didactic sessions include the following?
1. Ethics [ ] YES [ ] NO
2. Medico-legal topics [ ] YES [ ] NO
3. Practice management [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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**Clinical Experiences**

1. Complete Appendix B., Patient Population Data, and attach to submission.
2. Will the formal curriculum contain 72 months of clinical surgical education under the authority and direction of the plastic surgery program director? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

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If ‘YES,’ will:

* 1. at least 36 months be concentrated plastic surgery education? [ ] YES [ ] NO
	2. at least 12 months include chief responsibility on the clinical service of plastic surgery?

 [ ] YES [ ] NO

Explain if ‘NO’ to a. or b. above. (Limit 250 words)

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1. Will up to 36 months of clinical experiences appropriate to plastic surgery education be provided in the following, with progressive responsibility?
	1. Abdominal surgery [ ] YES [ ] NO
	2. Alimentary tract surgery [ ] YES [ ] NO
	3. Breast surgery [ ] YES [ ] NO
	4. Emergency medicine [ ] YES [ ] NO
	5. Pediatric surgery [ ] YES [ ] NO
	6. Surgical critical care [ ] YES [ ] NO
	7. Surgical oncology [ ] YES [ ] NO
	8. Transplant [ ] YES [ ] NO
	9. Trauma management [ ] YES [ ] NO
	10. Vascular surgery [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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1. Will all residents have clinical experience during the plastic surgery-specific portion of the educational program in the following areas?
	1. Congenital defects of the head and neck, including:
		1. clefts of the lip [ ] YES [ ] NO
		2. clefts of the palate [ ] YES [ ] NO
		3. craniofacial surgery [ ] YES [ ] NO
	2. Neoplasms of head and neck surgery, including neoplasms of the:
2. head and neck [ ] YES [ ] NO
3. oropharynx [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

|  |
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1. Will all residents have clinical experience during the plastic surgery-specific portion of the educational program in the following areas?
2. Aesthetic (cosmetic) surgery of the extremities [ ] YES [ ] NO
3. Aesthetic (cosmetic) surgery of the head and neck [ ] YES [ ] NO
4. Aesthetic (cosmetic) surgery of the trunk [ ] YES [ ] NO
5. Burn reconstruction [ ] YES [ ] NO
6. Craniofacial surgery [ ] YES [ ] NO
7. Craniomaxillofacial trauma, including fractures [ ] YES [ ] NO
8. Congenital defects of head and neck, including cleft lip and palate [ ] YES [ ] NO
9. Microsurgical techniques applicable to plastic surgery [ ] YES [ ] NO
10. Neoplasms of head and neck surgery, including neoplasms of the head, neck, and oropharynx
 [ ] YES [ ] NO
11. Plastic surgery of the breast [ ] YES [ ] NO
12. Plastic surgery of the genitalia [ ] YES [ ] NO
13. Plastic surgery of the lower extremities [ ] YES [ ] NO
14. Plastic surgery of the trunk [ ] YES [ ] NO
15. Reconstruction by tissue transfer, including flaps and grafts [ ] YES [ ] NO
16. Surgery of benign and malignant lesions of the skin and soft tissues [ ] YES [ ] NO
17. Surgery of the hand/upper extremities [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 300 words)

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1. How will the program ensure all residents have a well-organized and -supervised outpatient clinic experience operating in relation to an inpatient service used in the program? (Limit 400 words)

|  |
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1. Will the outpatient experience include opportunities to:
2. see patients? [ ] YES [ ] NO
3. establish provisional diagnoses? [ ] YES [ ] NO
4. initiate preliminary plans prior to patient treatment? [ ] YES [ ] NO
5. provide follow-up care so that the results of surgical care may be evaluated by the responsible residents? [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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1. How will the program ensure there is appropriate faculty member supervision during residents’ outpatient clinic experience? (Limit 400 words)

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1. Will residents participate in patient care in a private office setting? [ ] YES [ ] NO

If ‘NO,’ skip to Question 10.

If ‘YES,’ how will the program ensure residents function with an appropriate degree of responsibility, adequate supervision, and with program director oversight. (Limit 400 words)

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1. Will residents have specific clinical experience in the following areas, either in the general or the plastic surgery portion of the educational program?
2. Acute burn management [ ] YES [ ] NO
3. Anesthesia [ ] YES [ ] NO
4. Dermatology [ ] YES [ ] NO
5. Oculoplastic surgery or ophthalmology [ ] YES [ ] NO
6. Oral and maxillofacial surgery [ ] YES [ ] NO
7. Orthopaedic surgery [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

|  |
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**The Learning and Working Environment**

**Supervision and Accountability**

* + 1. How will the program ensure that residents who participate in a private office setting function with an appropriate degree of responsibility and adequate supervision? (Limit 300 words)

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Appendix A. Formal Didactic Sessions by Academic Year

For each year of the residency, attach (Label: Appendix A.) a list of all scheduled didactic courses ( including discussion groups, seminars and conferences, grand rounds, basic science, skills labs, and journal club) at all participating sites to which residents will rotate using the format below. If attended by residents from multiple years, list in each year but provide a full description *only the first time the site is listed.*

Number sessions **consecutively** from the first year through the final year so that the scheduled didactic sessions can be easily referenced throughout the application. **Be brief and use the outline that follows.**

Year in the Program:

Number: Title:

a) Type of Format (e.g., seminar, conference, discussion groups)

b) Required or elective

c) Brief description (three or four sentences)

d) Frequency, length of session, and total number of sessions

**Example:**

|  |
| --- |
| Y-101. Introduction to Plastic Surgerya) Seminarb) Required Y-1c) Survey of contemporary methods and styles of plastic surgery, including approaches to clinical work with minority populations.d) Weekly, for 8 sessions.02. Departmental Grand Roundsa) Discussion groupsb) Required, Y-1, Y-2, Y-3; Elective Y-4c) Clinical case presentations, sponsored by each departmental division, followed by discussion and review of contemporary state of knowledge. Format includes resident presentations and discussions with additional faculty discussant.d) Twice monthly, 24 sessions |

If resident attendance will be monitored, explain how this will be accomplished and how feedback will be given regarding non-attendance. (Limit 250 words)

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**Appendix B. Patient Population Data**

Complete and attach the following tables summarizing the total number of cases seen annually at each of the planned participating sites (Label: Appendix B.). Numbers should reflect total volume at each participating site to which residents will rotate.

Participating sites are indicated by a number that must correspond to the number designated for that site in ADS. The primary clinical site must be designated as Site #1. If additional sites are not planned, columns can be left blank.

The data in Table 1 and 2 below is for a one-year period:

From: Date\_\_\_\_\_\_\_\_\_\_\_\_ To: Date\_\_\_\_\_\_\_\_\_\_\_\_

Table 1. Reconstructive Procedures

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Operative Procedure | Site #1 | Site #2 | Site #3 | Site #4 |
| Head and Neck Congenital Defects |  |  |  |  |
| Primary cleft lip repair |  |  |  |  |
| Primary cleft palate repair |  |  |  |  |
| Secondary cleft lip or palate repair |  |  |  |  |
| Cleft lip nasal deformity repair |  |  |  |  |
| Craniomaxillofacial reconstruction |  |  |  |  |
| Vascular malformation (laser) |  |  |  |  |
| Other Head and Neck Congenital Defects procedures |  |  |  |  |
| Head and Neck Neoplasms |  |  |  |  |
| Reconstruction after neoplasm resection with skin graft |  |  |  |  |
| Reconstruction after neoplasm resection with local flap |  |  |  |  |
| Reconstruction after neoplasm resection with free flap |  |  |  |  |
| Resection of skin cancer |  |  |  |  |
| Resection of other head and neck neoplasms |  |  |  |  |
| Other Head and Neck Neoplasms procedures |  |  |  |  |
| Head and Neck Trauma |  |  |  |  |
| Treat occlusal injury |  |  |  |  |
| Treat upper midface fracture |  |  |  |  |
| Treat nasal fracture |  |  |  |  |
| Treat complex soft tissue injury |  |  |  |  |
| Other Head and Neck Trauma procedures |  |  |  |  |

**Table 1 *(continued)*. Reconstructive Procedures**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Operative Procedure | Site #1 | Site #2 | Site #3 | Site #4 |
| Breast Macromastia and Reconstruction |  |  |  |  |
| Breast reduction |  |  |  |  |
| Breast reconstruction with implant or expander |  |  |  |  |
| Breast reconstruction with pedicle flap |  |  |  |  |
| Breast reconstruction with free flap |  |  |  |  |
| Secondary procedures |  |  |  |  |
| Fat grafting (absent breast) |  |  |  |  |
| Other deformities of breast (reconstructive) |  |  |  |  |
| Trunk Procedures |  |  |  |  |
| Treat pressure ulcer – debridement or VAC |  |  |  |  |
| Treat pressure ulcer with flap |  |  |  |  |
| Treat wounds of trunk with flap |  |  |  |  |
| Treat other deformities or disease processes of trunk |  |  |  |  |
| Hand and Upper Extremity Wound Requiring Reconstruction |  |  |  |  |
| Reconstruction by primary closure |  |  |  |  |
| Reconstruction with skin graft |  |  |  |  |
| Reconstruction with flap |  |  |  |  |
| Amputation |  |  |  |  |
| Tendon (Extensor or Flexor) |  |  |  |  |
| Repair/reconstruct tendon with or without graft |  |  |  |  |
| Operative release of tendon adhesion/tendon lengthening |  |  |  |  |
| Tendon transfer |  |  |  |  |
| Fracture or Dislocation |  |  |  |  |
| Operative repair of fracture or dislocation |  |  |  |  |
| Release of joint contracture |  |  |  |  |

**Table 1 *(continued)*. Reconstructive Procedures**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Operative Procedure | Site #1 | Site #2 | Site #3 | Site #4 |
| Repair/reconstruct nerve with or without graft |  |  |  |  |
| Operative repair of fracture or dislocation |  |  |  |  |
| Release of joint contracture |  |  |  |  |
| Operative Treatment of Dupuytren’s contracture, including needle and collagenase |  |  |  |  |
| Nerve decompression |  |  |  |  |
| Arterial repair, revascularization or replantation of digit, hand, or upper extremity |  |  |  |  |
| Other Deformity or Disease Process |  |  |  |  |
| Arthroplasty/arthrodesis |  |  |  |  |
| Treat congenital deformity |  |  |  |  |
| Treat neoplasm (benign or malignant) |  |  |  |  |
| Other deformity or disease process procedures |  |  |  |  |
| Hand and Upper Extremity Procedures |  |  |  |  |
| Lower Extremity Wounds or Deformities |  |  |  |  |
| Treatment with graft |  |  |  |  |
| Treatment with local flap |  |  |  |  |
| Treatment with free flap or revascularization/replantation |  |  |  |  |
| Integument Burns |  |  |  |  |
| Burn reconstruction |  |  |  |  |
| Other Integument Burns procedures |  |  |  |  |
| Lesions and Wounds of the Integument |  |  |  |  |
| Treat benign lesions |  |  |  |  |
| Treat malignant lesions |  |  |  |  |
| Treat deformities |  |  |  |  |

**Table 2. Aesthetic Procedures**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Procedure | Site #1 | Site #2 | Site #3 | Site #4 |
| Facelift |  |  |  |  |
| Brow lift |  |  |  |  |
| Blepharoplasty |  |  |  |  |
| Rhinoplasty |  |  |  |  |
| Breast augmentation |  |  |  |  |
| Mastopexy |  |  |  |  |
| Brachioplasty |  |  |  |  |
| Abdominoplasty |  |  |  |  |
| Body lift |  |  |  |  |
| Thighplasty |  |  |  |  |
| Suction assisted lipoplasty |  |  |  |  |
| Microvascular/free tissue transplant |  |  |  |  |
| Tissue expansion |  |  |  |  |
| Botulinum toxin injection |  |  |  |  |
| Soft tissue fillers |  |  |  |  |
| Autologous fat |  |  |  |  |
| Aesthetic laser |  |  |  |  |
| Reconstructive laser |  |  |  |  |

Minimum required procedure numbers for each graduating resident are listed in the tables below.

|  |  |
| --- | --- |
| Operative Procedure | Minimum |
| Head and Neck Congenital Defects |  |
| Primary cleft lip repair | 7 |
| Primary cleft palate repair | 7 |
| Secondary cleft lip or palate repair | 7 |
| TOTAL- Head and Neck Congenital Defects | 50 |
| Head and Neck Neoplasms |  |
| Reconstruction after neoplasm resection with local flap | 16 |
| Reconstruction after neoplasm resection with free flap | 2 |
| TOTAL- Head and Neck Neoplasms | 70 |
| Head and Neck Trauma |  |
| Treat occlusal injury | 8 |
| Treat upper midface fracture | 8 |
| Treat nasal fracture | 4 |
| Treat complex soft tissue injury | 15 |
| TOTAL- Head and Neck Trauma | 50 |

|  |  |
| --- | --- |
| Operative Procedure | Minimum |
| Breast Macromastia |  |
| Breast reduction | 24 |
| TOTAL- Breast Macromastia | 24 |
| Absent Breast |  |
| Breast reconstruction with implant or expander | 30 |
| Breast reconstruction with pedicle flap | 4 |
| Breast reconstruction with free flap | 4 |
| TOTAL- Absent Breast | 100 |
| TOTAL- Breast Reconstructive procedures | 100 |
| Wounds or Deformities of Trunk |  |
| Treat pressure ulcer – debridement or VAC | 3 |
| Treat pressure ulcer with flap | 5 |
| Treat wounds of trunk with flap | 15 |
| TOTAL- Wounds or Deformities of Trunk | 23 |
| TOTAL- Trunk Procedures | 25 |
| Hand and Upper Extremity Wound requiring Reconstruction |  |
| Reconstruction by primary closure | 5 |
| Reconstruction with skin graft | 5 |
| Reconstruction with flap | 6 |
| Amputation | 7 |
| TOTAL- Hand and Upper Extremity Wound requiring Reconstruction | 23 |
| Tendon Extensor or Flexor |  |
| Repair/reconstruction tendon with or without graft | 16 |
| Operative release of tendon adhesion/tendon lengthening | 4 |
| Tendon Transfer | 2 |
| TOTAL- Tendon Extensor or Flexor | 22 |
| Nerve Injury |  |
| Repair/reconstruct nerve with or without graft | 10 |
| TOTAL- Nerve Injury | 10 |
| Fracture or dislocation |  |
| Operative repair of fracture or dislocation | 30 |
| Release of joint contracture | 2 |
| TOTAL- Fracture or Dislocation | 32 |
| Operative Treatment of Dupuytren’s contracture, including needle and collagenase | 2 |
| Nerve decompression | 16 |
| Arterial insufficiency or traumatic amputation of digit, hand, or upper extremity.  | 4 |
| Arterial repair, revascularization or replantation of digit, hand or upper extremity | 4 |
| Other Deformity or Disease Process |  |
| Arthroplasty/arthrodesis | 3 |
| Treat congenital deformity | 2 |
| Treat neoplasm (benign or malignant) | 8 |
| TOTAL- Other Deformity or Disease Process | 13 |
| TOTAL- Hand and Upper Extremity Procedures | 122 |
| Lower Extremity Wounds or Deformities |  |
| Treatment with graft | 12 |
| Treatment with local flap | 9 |
| Treatment with free flap or revascularization/replantation | 3 |
| TOTAL- Lower Extremity Wounds or Deformities | 24 |
| TOTAL- Lower Extremity Procedures | 25 |
| Integument Burns |  |
| Burn reconstruction | 16 |
| TOTAL- Integument Burns | 24 |
| TOTAL OF RECONSTRUCTIVE PROCEDURES | 1000 |

|  |  |
| --- | --- |
| Aesthetic Procedures | Minimum |
| Face lift | 10 |
| Brow lift | 2 |
| Blepharoplasty | 20 |
| Rhinoplasty | 10 |
| TOTAL- Head and Neck Aesthetic Deformity | 50 |
| Breast Augmentation | 16 |
| Mastopexy | 12 |
| TOTAL- Breast Aesthetic Procedures | 30 |
| Brachioplasty | 2 |
| Abdominoplasty | 10 |
| Body lift | 2 |
| Thighplasty | 2 |
| Suction assisted lipoplasty | 15 |
| TOTAL- trunk/extremity aesthetic deformities procedures | 50 |
| TOTAL- Aesthetic Procedures | 150 |
| Microvascular/free tissue transplant | 20 |
| Tissue expansion | 30 |
| Suction Assist Lipoplasty | 15 |
| Botulinum toxin injection | 7 |
| Soft tissue fillers | 7 |
| Autologous fat | 7 |
| Aesthetic laser | 5 |
| Reconstructive laser | 5 |
| TOTAL- Laser | 10 |