



COUNCIL OF RESIDENCY DIRECTORS IN EMERGENCY MEDICINE

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March 14, 2019

CORD Representatives,

The CORD Board of Directors, along with many other Emergency Medicine organizations, recently participated in a project to support our membership. As you may remember, during the ACEP18 conference at the CORD business meeting, we discussed changes in the ACGME common program requirements (CPRs) that would affect the protection of EM faculty academic time, specifically core faculty.

The ACGME in their revision of the CPRs, has eliminated the ability of the Emergency Medicine RRC to articulate limitations of clinical hours for EM core faculty. The concerns of many of the people at the CORD business meeting was that with the release of these restrictions, there might be loss of core faculty protected teaching time at many institutions. This would be detrimental to our academic productivity, physician wellness, simulation training, ultrasound training, and weekly conference quality.

In response to this issue CORD, along with several Emergency Medicine organizations, wrote letters to the ACGME to protest this change and identify the potential detrimental effects this would have on education and training. Please see our letter to the ACGME [here](#).

At the ACGME's most recent board meeting, Doug McGee, CORD Past-President and Vice-Chair of the EM RRC, gave testimony regarding the unique needs of Emergency Medicine and put the many letters from the various EM organizations into context for the ACGME.

Unfortunately, the board of the ACGME has not accepted the request of the Emergency Medicine organizations to create an exception to the CPRs at this time. See their response to CORD [here](#). The ACGME states they are working with EM RRC to find alternative language that may work within our specialty specific program requirements. We will wait to see how this comes to resolution.

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As part of the protocol for the ACGME, there will be an official public comment period (likely in April) prior to the institution of the new CPRs. During this comment period, institutions, organizations, and individuals can make comments about the proposed CPR changes. Once this comment period opens, we will send this information out to our members to facilitate any input you might desire to make. We encourage you to let the ACGME hear your voice.

Additionally, after the CORD business meeting at Academic Assembly in Seattle in a few weeks, Doug McGee, will be presenting an RRC update and will be available to discuss this issue and report any news the RRC is able to share. The RRC has been active in trying to advocate for our interests on this issue.

Thank you to everyone that participated, particularly the CORD executive board, in formulating a response to the ACGME. I would also like to thank the other organizations in Emergency Medicine who also stepped up to have our concerns heard. It was nice to see such synergy with our other EM professional associations. We will continue to monitor this issue and keep you in the loop.

Thank you,

Christopher Doty, MD  
President, CORD EM