

ACGME Program Requirements for Graduate Medical Education in Pediatric Endocrinology

Effective: July 1, 2009

Introduction

Int.A. Scope of Training

- Int.A..1. Pediatric endocrinology programs must provide fellows with the ability to diagnose and manage endocrine diseases and to understand the physiology of hormonal regulation in infancy, childhood, adolescence, and young adulthood.
- Int.A.2. The program must emphasize fundamentals of clinical diagnosis, with special emphasis on history taking, physical examination, and interpretation of pertinent laboratory data.

VIII. Program Personnel and Resources

VIII.A. Faculty

VIII.A.1. Pediatric Endocrinology Specialists

A program must have at least two qualified pediatric endocrinologists, inclusive of the program director.

VIII.A.2. Other Physician Teaching and Consultant Faculty

The following physician faculty from other disciplines must be available: obstetrics/gynecology, internal medicine, child and adolescent psychiatry, child neurology, as well as the following physician faculty with significant experience in pediatrics: surgery, neurological surgery, radiology, nuclear medicine, ophthalmology, urology, and genetics.

VIII.B. Resources

VIII.B.1. Outpatient and Inpatient Facilities

Facilities should include space in an ambulatory setting for optimal evaluation and care of outpatients and an inpatient area with a full array of pediatric and related services staffed by pediatric residents and faculty.

VIII.B.2. Laboratory/Support Services

Facilities and services, including laboratory and comprehensive diagnostic imaging, must be available. There must be a diabetes education service; a nutrition/dietary education service; mental health services; and a pathology laboratory for the interpretations of surgical and cytologic specimens, including immunohistologic studies. There must be the capacity for specialized hormone measurements and genetic testing

relevant to endocrine disorders either on-site or through established commercial laboratories.

VIII.B.3. Patient Population

There must be an adequate number of patients with endocrine disorders, including diabetes, who range in age from newborn through young adulthood available to the training program to ensure that each fellow achieves competence in patient care.

IX. Educational Program

IX.A. Patient Care

IX.A.1. Fellows must have a diversified and complex endocrine outpatient experience and experience with inpatient management. In particular, fellows must have responsibility for longitudinal care of patients with diabetes mellitus and other chronic endocrine disorders.

IX.A.2. Fellows must learn through patient care about normal and abnormal hormonal regulation. The interaction of endocrine pathology and psychosocial problems must be addressed.

IX.A.3. The clinical experience must include, but not be limited to, the following:

IX.A.3.a) disorders of growth;

IX.A.3.b) disorders of anterior pituitary hormone physiology;

IX.A.3.c) disorders of posterior pituitary hormone physiology;

IX.A.3.d) disorders of thyroid hormone physiology;

IX.A.3.e) endocrine neoplasia;

IX.A.3.f) disorders of adrenal gland physiology;

IX.A.3.g) disorders of androgen and estrogen physiology, including adolescent reproductive endocrinology;

IX.A.3.h) disorders of sexual differentiation and development;

IX.A.3.i) disorders of parathyroid gland physiology;

IX.A.3.j) disorders of calcium, phosphorus, and vitamin D;

IX.A.3.k) disorders of bone physiology;

IX.A.3.l) disorders of fluid and electrolyte balance;

IX.A.3.m) disorders of carbohydrate metabolism, including diabetes mellitus

and hypoglycemia;

IX.A.3.n) disorders of nutrition; and,

IX.A.3.o) obesity including obesity related endocrine disorders.

IX.B. Medical Knowledge

IX.B.1. Fellows must have instruction in: physiology, pathology, immunology, biochemistry, pharmacology, and embryology of endocrine and related systems including sexual development.

IX.B.2. The fellows must understand the principles of laboratory techniques for measurements of hormones. They must be taught to recognize the limitations of interpretation of laboratory results. Fellows must be instructed in interpreting endocrine laboratory results including stimulation and suppression tests. Fellows should be provided with a background that will enable them to choose the most appropriate imaging procedure(s) for a given endocrine disorder.

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