

**Specialty-specific References for DIOs:
Resident Complement Change**

Specialty	Increase Requires Approval	Decrease Requires Approval	Educational Rationale Required	Proposed Block Diagram Required	Current Block Diagram Required	Clinical Data Update Required	Caselog Required	Site Visit Approval Required	Faculty/Resident Ratio Required	Require Prog. to Address Major Changes	Require Prog. to Address Citations	Temp Increase Only Requires Educational Rational	Posit. Approve By
Allergy & Immunology	Yes	No	Yes	No	No	No	No	No	No	No	No	Yes	total only
Anesthesiology	Yes	No	Yes	No	No	No	Yes	No	Yes	Yes	Yes	Yes	total only
Colon & Rectal Surgery	Yes	No	Yes	Yes	No	No	Yes	No	Yes	Yes	Yes	Yes	total only
Dermatology	Yes	Yes	Yes	Yes	Yes	No	No	No	Yes	Yes	Yes	Yes	total only
Emergency Medicine	Yes	No	Yes	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes	year & total
Family Medicine	Yes (6 or more)	No	Yes	Yes	Yes	No	No	No	Yes	Yes	Yes	Yes	total only
Internal Medicine	Yes	Yes	Yes	No	No	No	No	No	Yes	Yes	Yes	Yes	total only
Medical Genetics	Yes	No	Yes	Yes	Yes	No	No	No	No	Yes	Yes	Yes	total only
Neurological Surgery	Yes	No	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	year & total
Neurology	Yes	No	Yes	Yes	Yes	No	No	No	Yes	Yes	Yes	Yes	total only
Nuclear Medicine	Yes (2 or more)	No	Yes	No	No	No	No	No	No	No	No	Yes	total only
Obstetrics & Gynecology	Yes	Yes	Yes	Yes	No	No	Yes	No	Yes	Yes	Yes	Yes	year & total
Ophthalmology	Yes	Yes	Yes	Yes	Yes	No	Yes	No	Yes	Yes	Yes	No	year & total
Orthopaedic Surgery	Yes	Yes	Yes	Yes (in PIF)	Yes (in PIF)	No	Yes (in PIF)	Yes	No	Yes (in PIF)	Yes (in PIF)	Yes	year & total

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Otolaryngology	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	No	year & total
Pathology	Yes	Yes	Yes	Yes	Yes	No	No	No	No	Yes	Yes	Yes	total only
Pediatrics	Yes (6 or more)	No	Yes	Yes	Yes	No	No	No	Yes	Yes	Yes	Yes	total only
Physical Medicine & Rehabilitation	Yes	No	Yes	Yes	Yes	No	No	No	Yes	Yes	Yes	Yes	year & total
Plastic Surgery	Yes	Yes	Yes	Yes	Yes	No	Yes	No	Yes	Yes	Yes	No	year & total
Preventive Medicine	Yes	Yes	Yes	Yes	Yes	No	No	No	Yes	Yes	Yes	Yes	total only
Psychiatry	Yes	No	Yes	Yes	Yes	No	No	No	Yes	Yes	Yes	Yes	total only
Radiation Oncology	Yes	Yes	Yes	No	No	Yes	Yes	No	No	Yes	Yes	No	total only
Radiology-Diagnostic	Yes	No	Yes	No	No	Yes	No	No	Yes	Yes	Yes	Yes	total only
Surgery	Yes	Yes	Yes	Yes	Yes	No	Yes	No	Yes	Yes	Yes	No	year & total
Thoracic Surgery	Yes	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes	Yes	No	year & total
Urology	Yes	Yes	Yes	Yes	Yes	No	Yes	No	Yes	Yes	Yes	No	year & total
Transitional Year	Yes	Yes	Yes	No	No	No	No	No	No	Yes	Yes	Yes	total only

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