The ACGME has provided guidance for **residency and fellowship program**s that are accredited by the ACGME during the COVID-19 pandemic. These guidelines can be found at <https://acgme.org/COVID-19/>

Importantly, AAST Acute Care Surgery fellowships are not accredited by the ACGME and are not subject to this oversight. Surgical Critical Care fellowships are accredited by the ACGME and are subject to this oversight. Acute Care Surgery fellows can practice in their core specialty subject to local/institutional regulations.

For ACGME-accredited programs, each sponsoring institution declares itself in one of the following stages relative to education and the COVID-19 pandemic:

* Stage 1 – “business as usual”
* Stage 2 – increased but manageable clinical demand
* Stage 3 – crossing a threshold beyond which the increase in volume and/or severity of illness creates an extraordinary circumstance where routine care education and delivery must be reconfigured to focus only on patient care

The following outlines changes that may occur at each stage:

Stage 1—there are no changes to ACGME requirements, either Core or specialty-specific requirements.

Stage 2-- The Common Program Requirements, specialty-specific Program Requirements, and Institutional Requirements **remain in effect** with some flexibility.

What has **NOT** changed:

* Requirement for Adequate Resources and Training
* Requirement for Adequate Supervision
* Current Work Hour Requirements
* Requirement for Professionalism

What has changed:

* **Fellows Functioning in Core Specialty**
Fellows in ACGME-accredited programs can function within their core specialty, consistent with the policies and procedures of the Sponsoring Institution and its participating sites, if:
1. they are American Board of Medical Specialties (ABMS) or American Osteopathic Association (AOA) board-eligible or -certified in the core specialty;
2. they are appointed to the medical staff at the Sponsoring Institution; and,
3. their time spent on their core specialty service is limited to 20 percent of their annual education time in any academic year.

The uncertainty of the COVID-19 pandemic hits trainees particularly hard, as their role uncertainty and need to alter schedules increases anxiety and amplifies concerns about performance, skill, and professional “place”. Maintaining educational structure, even remotely, along with ongoing support is crucial.

Stage 3-- In circumstances where patient needs create a crisis in patient care delivery configuration, the designated institutional official (DIO), with the attestation of the Sponsoring Institution’s clinical leadership and chief executive officer, may self-declare Pandemic Emergency Status. Notice of this declaration and attestation of approval must be signed by the DIO and electronically delivered to dio@acgme.org . This status can last a **maximum of 30 days.**

**The only ACGME requirements that remain in effect are:**

* Requirement for Adequate Resources and Training
* Requirement for Adequate Supervision
* Current Work Hour Requirements
* Requirement for Professionalism

In addition, fellows may practice in their core specialty subject to the same requirements outlines for stage 2.

**All other Common Program Requirements and specialty-specific Program Requirements are suspended during the time of the declaration.**

Abuse of residents, use of residents in areas in which they do not have the knowledge and skills to provide the services demanded, or failure to comply with any of the above four expectations may result in ACGME intervention.

**No tolerance for discrimination**

Since the outbreak of the novel coronavirus COVID-19, first detected in China, Asian members of our community continue to experience profiling and targeting especially on social media and in public commentary. This racism, rooted in fear and misinformation, is hurtful, unacceptable and contrary to our values. As we embrace the challenges ahead of us, share your support with friends and colleagues. Treat everyone with kindness and respect. Together, we will care for each other and our patients.