

Thoracic Surgery Review Committee Update

Mark Iannettoni, MD, MBA, FACS, FCCP, Chair

Chris Fox, PhD, Executive Director



RC Membership

Name	Role	Name	Role
Mark lannettoni, MD, MBA, FACS, FCCP	Chair	Sandra Starnes, MD, FACS, FCCP	Vice-Chair
Thomas Beaver, MD, MPH	Member	James Jaggers, MD, FACS	Member
Robert Shen, MD, FACS, FCCP	Member	Mark Swofford, PhD, MHA, FACHE	Public Member
Stephen Yang, MD, FACS, FCCP	Member	Akshitha Vijayakumar, MD	Resident Member
Cameron Wright, MD	Ex-Officio, ABTS	Patrice Blair, DrPH, MPH	Ex-Officio - ACS



Program Info

Specialty	Accredited Programs	Applications (01/23/24)	Complement Approved 23-24	Complement Filled 23-24
Thoracic Surgery				
Independent	75	2	317	256 (81%)
Integrated	34	2	318	254 (80%)
Congenital Cardiac Surgery	17	0	17	9 (53%)



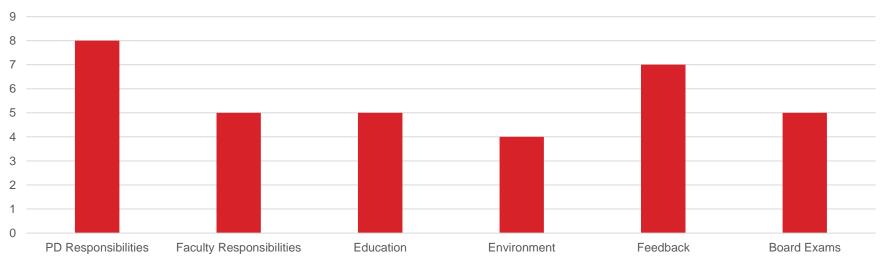
Program Status

Specialty	Initial Accreditation	Continued Accreditation	Continued Accreditation with Warning	Probation/ Withdrawal
Thoracic Surgery				
Independent	2 (3%)	71 (95%)	2 (3%)	0
Integrated	4 (12%)	29 (85%)	1 (3%)	0
Congenital Cardiac Surgery	4 (24%)	13 (76%)	0	0



Citations

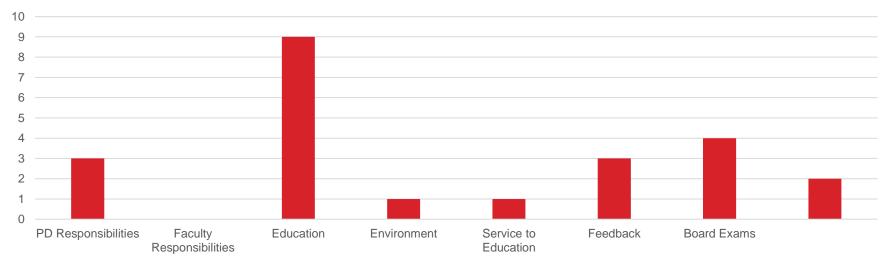
Thoracic Surgery Independent 2022-23 Citations (34 Total)





Citations

Thoracic Surgery Integrated 2022-23 Citations (23 Total)





3 Pathways

Requirements	Existing Thoracic Pathway		Existing Cardiothoracic Pathway		New Cardiac Pathway	
	Subtotal	Total	Subtotal	Total	Subtotal	Total
	CONGENI	TAL HEART I	DISEASE			
Congenital Heart Disease		10		20		20
Primary Surgeon			5		5	
First Assistant	10		15		15	
	AD	ULT CARDIA	C			
Acquired Valvular Heart Disease		30		60		90
Aortic Valve Repair/Replacement	15		25		25	
Mitral Valve Repair/Replacement	5		15			
Mitral Valve Repair					10	
Mitral Valve Replacement					5	
Tricuspid Valve Repair/Replacement,	5		5		5	
Annuloplasty						
TAVR as primary			5		20	
TAVR as assistant	5		10		20	
Transcatheter Mitral/Tricuspid					5	
Intervention						



Robotic Checkbox



Has been added to the Case Log system



TAVR

- Changes to case log forthcoming:
- TAVR/TAVI with checkbox for the type of approach: transfemoral, trans axillary, trans carotid, open transaortic, open transapical.



4+3

 Remember to designate which experiences count towards GS/TS during the PGY4/5 training years



Site Visits



Combination of Virtual and In-person



Assurance site-visits have begun



What should programs do for now?

Continue to conduct and document high quality annual program evaluations.



Complement

- Per year (not total)
- Fellowships with 1-0 complement may recruit every other year



Thank You!









