

AMERICAN BOARD OF COLON & RECTAL SURGERY
POLICY FOR ASSESSING MINIMUM CASE NUMBERS

Adopted September 28, 2008

In September 2008, the Board adopted new Minimum Case Numbers with regard to acceptable operative performance by residents in colon and rectal training programs.

Because the new minimums are more challenging, implementation (with periodic modifications) will be based on a three-year transition plan beginning with the 2009-2010 residency year. Programs should strive to achieve 50% of the minimums in all categories in the training years 2010-2011, and the full number by the years 2011-2012. The intent is for program directors to review the new requirements and develop plans that will facilitate their compliance. In the meantime, the Board will not penalize residents who do not meet the minimums. Rather, its Standards and Credentials Committee will manually review each resident's case report and make a practical assessment (based on aggregate data) whether or not sufficient progress has been made toward meeting the new minimums. If sufficient progress is not evidenced, program directors will be notified.

As previously recommended, it is strongly suggested that program directors review the case numbers of their residents (for the past three years) on the ACGME Website in order to have a better understanding of where their program presently stands. The Board is hopeful that awareness of the deficiencies will stimulate programs to anticipate that some alterations may be necessary to achieve the minimum standards.

The new Minimum Requirements are below:

ABCRS Approved Procedures & Minimums

Procedure	ABCRS Minimums
Anorectal Procedures (1)	
Excisional hemorrhoidectomy (total)	20
- Coventional	10
- PPH	*
Fistulotomy	15
Endorectal Advancement Flap	3
Sphincteroplasty	3
Internal Sphincterotomy	5
Abdominal Procedures (2)	
Strictureplasty	3
Segmental colectomy (Include Ileocolic resection)	50
Laparoscopic Resections	50
Low anterior resection (total)	*
- Straight anastomosis	*
- With colon pouch or coloplasty	3
Abdominoperineal resection	6
Transanal excision (total)	10
Proctocolectomy (total)	*
- With ileostomy	*
- With ileoanal reservoir (Include Proctectomy/Ileoanal reservoir)	8
- Stapled Anastomosis	5
- Hand Sewn (Either IPAA or Coloanal with/without Resivoir)	3
Prolapse repair (total)	10
- Abdominal	5
- Perineal	5
Stomas	30
- Stoma Complications (Parastomal hernia, stenosis retraction prolapse, fistula)	15
Total pelvic dissections	40
- Rectal Cancer - Min 20; APR, LAR, Coloanal, Proctocolectomy, IPAA	
Endoscopy/Pelvic Floor (3)	
Proctoscopy/Anoscopy	30
Colonoscopy (total)	140
- Diagnostic	*
- With polypectomy	30
ERUS/EAUS	*
Pelvic Floor Evaluation	15
(MEDICAL MANAGEMENT & TREATMENT)	
Diagnoses - Anorectal (4)	
- Anal fissure	15
- Anal fistula	15
- Hemorrhoids	30
- Pelvic Floor	15
Constipation	5
Incontinence	10
Diagnoses - Abdominal (5)	
- Carcinoma of the rectum	20
- Crohn's disease	20
- Diverticular disease	20
- FAP/Gardner's	3
- Prolapse	10
- Ulcerative colitis	15
These procedures will be tracked but no minimums are currently required	
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Revised by Blue Ribbon Committee - 07/08/08	
Revised by Board 09/21/08	

ACGME Resident Operative Case Log for Colon and Rectal Surgery

As of May 11, 2009 the following changes have been made to the ACGME Resident Operative Case Log Procedure:

- The ACGME database has been changed to allow “**no procedure performed.**”

New Code	Description	
99499	No Operative Procedure	The new code "99499" is mapped to allow residents to log-in diagnosis where an operative procedure was not performed.

- New laparoscopy codes for Abdominal Procedures were added. They are:

New Code	Description	Category	Inactivated Code
45395	Abdominal Perineal Resection	LAP	45110
44188	Colostomy	LAP	44320 and 44322
44180	Enterolysis	LAP	
44187	Ileostomy	LAP	44310
45397	LAR, J-Pouch or Coloplasty	LAP	45119
44207	Segmental Colectomy	LAP	
44227	Segmental Colectomy	LAP	
44157, 44158	Total Proctocolectomy, Ileal Pouch	LAP	
45400, 45402	Rectopexy (+/-Colon Resection)	LAP	45540 and 45550
44227	Stoma Takedown (Colorectal Anast)	LAP	44626