Policy for Review and Approval of Documents Prior to Submission to the ACGME
IUSM-GME-PO-0029

Scope
This policy applies to all Indiana University School of Medicine (IUSM) Graduate Medical Education (GME) resident physicians and residency programs.

Reason for Policy
The purpose of this policy is to define the procedures for processing documents prior to submission to the ACGME.

Policy Statement
The DIO or a designee in the absence of the DIO must review and cosign all program information forms and any correspondence or document submitted to the ACGME by the program director that addresses the following issues:

A. All applications for ACGME accreditation of new programs and subspecialties
B. Changes in resident complement
C. Major changes in program structure or length of training
D. Additions and deletions of participating institutions used in a program
E. Appointments of new program directors
F. Progress reports requested by a Residency Review Committee (RRC)
G. Responses to Clinical Learning Environment Review (CLER) reports
H. Responses to all proposed adverse actions
I. Requests for increases or any change in resident duty hours
J. Requests for “inactive status” or to reactivate a program
K. Voluntary withdrawals of ACGME-accredited programs
L. Requests for an appeal of an adverse action
M. Appeal presentations to a Board of Appeal or the ACGME

**Procedures**

A. Submission of Documents
   The documents described above should be sent to the Assistant Director of Accreditation in the GME Office for inclusion in the agenda of the next GMEC meeting.

B. New Programs
   Program directors who are applying for accreditation of new programs must also be present at the GMEC meeting to describe the program and answer any questions the committee may have.

C. Approval
   Upon approval by GMEC, the DIO will sign the document prior to sending it to the ACGME.

**Definitions**

ACGME is the Accreditation Council for Graduate Medical Education.

A resident is an IUSM resident or fellow, or a non-IUSM resident or fellow electively rotating through IUSM and provides clinical care as part of a GME program.

**Implementation**

The Designated Institutional Official (DIO) for GME is responsible for implementation of this policy.
Oversight

Policy authority for this document resides with the Graduate Medical Education Committee. The DIO and the Graduate Medical Education Committee are responsible for oversight. This policy will be reviewed every three years or more often if deemed necessary.

History

2. Policy reviewed, updated, and approved by GMEC on 28 August 2013.