



The American Board of Otolaryngology (ABOto) has historically supported Accreditation Council on Graduate Medical Education (ACGME) accreditation of residencies and fellowships. Completion of an ACGME-accredited residency or fellowship is a core requirement for eligibility to take the various certification examinations.

In the 1990s, the Education Council, which consisted of representatives from the Residency Review Committee for Otolaryngology, the Society of University Otolaryngologists, and the ABOto studied fellowship training in Neurotology and Pediatric Otolaryngology. The Council found that there was quite a bit of variability in the educational quality of the various programs. In order to improve educational standardization, the recommendation from this group was for the ACGME to establish an accreditation process for fellowships in these two specialties. The drive to proceed was generated from the programs themselves, but not unanimously.

More recently, the Sleep Medicine community recognized the value of ACGME accreditation of their fellowships, and there is now a mechanism for accreditation of Sleep Medicine fellowships.

Facial Plastic and Reconstructive Surgery (FPS) is an essential and integral part of the field of otolaryngology-head and neck surgery. The ACGME requirements for otolaryngology are very explicit about the need for FPS training. All ABOto exams, including the Otolaryngology Training Exam, the Written Qualifying Exam, and the Oral Certifying Exam, contain questions on FPS. In addition, FPS is one of the recognized practice-focus areas of the ABOto Maintenance of Certification (MOC) program. Furthermore, more graduating residents pursue FPS fellowships than any other type.

In December 2013, the ACGME requested a statement from the ABOto regarding the possibility of ACGME accreditation of FPS fellowships. After careful consideration, the ABOto communicated the following statement to the ACGME:

The ABOto is cognizant of and sensitive to the lack of consensus by Otolaryngology diplomates within the facial plastic community surrounding this issue. Their concerns are worthy of consideration by the ACGME. The guiding principal the ABOto uses to make decisions is what is best for the public – our patients. We support uniform standards for training, recognizing that excellent training programs exist today under accreditation by various organizations. The ACGME has, in the past, been the organization we have successfully utilized to assure uniform high quality training programs in various subspecialties. The ABOto Board of Directors believes that ACGME accreditation of programs in otolaryngology and its subspecialties will well serve the public and trainees.