ACGME Case Logs

General Guidelines

- All procedures performed by the resident should be logged, including minor cases such as central lines.
- Cases should be logged within 1 week of the procedure.

Resident Roles

- Surgeon Junior (SJ): Used for cases credited as “Surgeon” prior to Chief experience
- Surgeon Chief (SC): Used for cases credited as “Surgeon” during the 12 months of Chief experience
- Teaching Assistant (TA): Used when a Chief Resident is working with a junior resident who takes credit as “Surgeon Junior”
- First Assistant (FA): Used when a resident assists another surgeon with an operative procedure and when he or she is not the primary Surgeon; FA cases are not credited toward the total number of major cases (but do count toward total number of cases by PGY-3)
- A resident is considered the Surgeon only when he or she can document a significant role in the following aspects of management:
  - determination or confirmation of the diagnosis
  - provision of pre-operative care
  - selection and accomplishment of the appropriate operative procedure
  - direction of the post-operative care

Multi-procedure operations

- Residents must record all procedures performed and indicate which procedure will count as the primary procedure.
- When more than one resident is involved in the same patient/same day/same operation/procedure:
  - A senior resident may take credit as Surgeon, while another resident may take credit as First Assistant (does not count for major case credit).
  - A senior resident may take credit as Teaching Assistant while a more junior resident takes credit as Surgeon Junior.
- If two residents perform different procedures on the same patient (different CPT codes), then each may take credit as Surgeon.

Defined Category Minimum Cases

- Residents must function in the role of Surgeon for a minimum of 850 operative procedures over the five years of residency. Of these 850, at least 200 must be accomplished as a Chief Resident.
- The minimum required number of TA cases may be reported during the PGY-4 and 5 years. All TA cases will count toward the total major cases, and will count in the defined categories, but will not count towards the 200 minimum cases needed to fulfill the operative requirements for the Chief year.
Minimum Case Requirements by PGY-3

- Residents must have at least 250 operations by the beginning of their PGY-3 year.
- The 250 cases can include procedures performed as Operating Surgeon or First Assistant.
- Of the 250, at least 200 must be in the defined categories, endoscopies, or e-codes.
- Up to 50 non-defined cases can be applied to this requirement.

Defined Category Minimums

<table>
<thead>
<tr>
<th>Category</th>
<th>Minimum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Skin, Soft Tissue</td>
<td>25</td>
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<tr>
<td>Breast</td>
<td>40</td>
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<tr>
<td>Mastectomy</td>
<td>5</td>
</tr>
<tr>
<td>Axilla</td>
<td>5</td>
</tr>
<tr>
<td>Head and Neck</td>
<td>25</td>
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<tr>
<td>Alimentary Tract</td>
<td>180</td>
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<tr>
<td>Esophagus</td>
<td>5</td>
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<tr>
<td>Stomach</td>
<td>15</td>
</tr>
<tr>
<td>Small Intestine</td>
<td>25</td>
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<tr>
<td>Large Intestine</td>
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<tr>
<td>Appendix</td>
<td>40</td>
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<tr>
<td>Anorectal</td>
<td>20</td>
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<tr>
<td>Abdominal</td>
<td>250</td>
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<tr>
<td>Biliary</td>
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<tr>
<td>Hernia</td>
<td>85</td>
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<tr>
<td>Liver</td>
<td>5</td>
</tr>
<tr>
<td>Pancreas</td>
<td>5</td>
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<tr>
<td>Vascular</td>
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</tr>
<tr>
<td>Access</td>
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<tr>
<td>Anastomosis, Repair, or</td>
<td>10</td>
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<tr>
<td>Endarterectomy</td>
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<tr>
<td>Endocrine</td>
<td>15</td>
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<td>Thyroid or Parathyroid</td>
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<tr>
<td>Operative Trauma</td>
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<tr>
<td>Non-operative Trauma</td>
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<tr>
<td>Resuscitations as Team Leader</td>
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<tr>
<td>Thoracic Surgery</td>
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<tr>
<td>Thoracotomy</td>
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<tr>
<td>Pediatric Surgery</td>
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<td>Plastic Surgery</td>
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<tr>
<td>Surgical Critical Care</td>
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<tr>
<td>Laparoscopic Basic</td>
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<tr>
<td>Endoscopy</td>
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<td>Upper Endoscopy</td>
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<td>Colonoscopy</td>
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<tr>
<td>Laparoscopic Complex</td>
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<td>Total Major Cases</td>
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<tr>
<td>Chief Year Major Cases</td>
<td>200</td>
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<td>Teaching Assistant Cases</td>
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