STANDARDS AND GUIDING STATEMENTS

The following statements describe elements common for all institutions participating in the American College of Surgeons (ACS) Mastery in General Surgery Program in General Surgery, and should guide the development of new Mastery GS Programs.

Mastery GS Programs will:

1. Have a dedicated Program Chief to provide program leadership, administrative supervision, and quality oversight.

2. Have one, or more, Senior Associates who will serve as clinical mentors and are in full-time surgical practice.

3. Plan a Mastery GS Program experience that avoids interference with the training of residents or fellows.

4. Provide salary, benefits, medical malpractice, liability, and tail coverage for the Junior Associate.

5. Have a program budget sufficient to cover the costs associated with hiring a Junior Associate and hosting a Mastery GS Program.

6. Conduct an intake assessment of the Junior Associate to inform program objectives and goals followed by periodic (minimum quarterly) assessments to appraise performance and monitor progress. Assessments consist of both formative and summative types.

7. Offer a flexible curriculum of progressive responsibility designed around the individual Junior Associate resulting in a well-balanced general surgery experience.

8. Offer opportunities for graded responsibility with sufficient autonomy to develop and demonstrate requisite skills in ambulatory, office, inpatient, emergency, and OR settings, and provide continuity of care.

9. Include a robust practice management component, covering topics such as billing and coding, medical liability, contract negotiations, quality improvement, or patient safety.

10. Provide CME activity opportunities for the Junior Associate.

11. Use a system to track/collect cases performed by the Junior Associate, preferably the ACS Surgeon Specific Registry (SSR).

12. Conduct a follow-up of the Junior Associate after program completion, including information on practice setting and Mastery GS Program feedback.