

## Summary of CME Changes by Standard

Standard	Prior Standard	Change effective July 2018
CD 4-6	The MDCS must have 16 hours annually or 48 hours in 3 years of documented and verifiable external children's surgery-related Category 1 CME.	The MDCS must have <b>12 hours annually</b> or <b>36 hours</b> in 3 years of documented and verifiable external children's surgery-related Category 1 CME.
CD 4-11	The MDCA must have 16 hours annually or 48 hours in 3 years of documented and verifiable external children's surgery-related Category 1 CME.	The MDCA must have <b>12 hours annually</b> or <b>36 hours</b> in 3 years of documented and verifiable external children's surgery-related Category 1 CME.
CD 10-4	The MDCS, the liaison representatives from each of the surgical subspecialties performing children's surgery, and the liaison or medical director of pediatric anesthesiology, emergency medicine, and radiology must accrue an average of 16 hours annually or 48 hours in 3 years of related external Category 1 CME.	The liaison representatives from each of the surgical subspecialties performing children's surgery, and the liaison of pediatric anesthesiology, emergency medicine, and radiology <b>must meet the requirements as delineated in standard 10-5.</b>
CD 10-5	All members of children's surgical specialties who take call also must be knowledgeable and current in the care of children with surgical needs. This requirement may be met by documenting the acquisition of 16 hours of relevant CME per year on average, as above; by demonstrating participation in an internal educational process conducted by the children's surgical program and the specialty liaison based on the principles of practice-based learning and the PIPS program; or by meeting the requirements for maintenance of certification of the respective specialty board.	<b>All members of children's surgical specialties who take call must be knowledgeable and current in the care of children with surgical needs. This requirement is met by maintaining current board certification of their respective specialty board. Physicians/surgeons who are currently board-eligible (recent graduates) and those who have life-time (grandfathered) board certification, meet the CME requirement. Physicians/surgeons who are not board certified can meet this requirement by documenting the acquisition of 12 hours of relevant CME per year on average, or by demonstrating similar participation in an internal educational process conducted by the children's surgical program and the specialty liaison based on the principles of practice-based learning and the PIPS.</b>
Alternative Pathway-CME	A list of the 48 hours of children's anesthesia-related; emergency medicine-related; radiology-related continuing medical education during the past 3 years.	A list of the <b>36 hours</b> of children's anesthesia-related; emergency medicine-related; radiology-related continuing medical education during the past 3 years is required. The CSV program must have documentation of provider CME available at the site visit.