

ADVANCING EMERGENCY CARE \_\_\_\_\_/\_ ICEP.org

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TO: ACGME

**RE**: Proposed Changes to Emergency Medicine Residency Training

The Illinois College of Emergency Physicians (ICEP), representing over 1,400 emergency physicians in Illinois, appreciates the opportunity to comment on proposed revisions to ACGME Emergency Medicine residency requirements. Our feedback reflects input from EM educators, practicing physicians, and hiring managers.

We urge the ACGME to **maintain flexibility** in training duration. The current model allowing both 3 - and 4 - year programs supports innovation, regional workforce needs, and educational diversity. Performance data shows no benefit to uniform 4-year programs and even suggests higher ABEM pass rates for 3-year graduates.

We support a **competency-based model** over volume-based requirements. Clinical competence - not arbitrary patient volume - is the best measure of readiness. Volume varies by site and should not define training quality.

Mandating 4-year programs would **exacerbate the physician shortage**, increasing reliance on non-EM trained APPs with less preparation. It would also worsen the **financial burden** on residents who already average \$250K in debt, and deter applicants from disadvantaged backgrounds, harming workforce diversity.

Finally, proposed changes lack clear **evidence of improved outcomes**. Educational policy should be guided by data, not assumptions.

We urge the ACGME to preserve flexibility and focus on competency, not time or volume, to ensure a strong future for emergency medicine.

On behalf of the ICEP Board of Directors,

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