INTRODUCTION

A university wishing to have an accredited program in Anesthesiology must also sponsor accredited programs in Internal Medicine, Obstetrics and Gynecology, Pediatrics and General Surgery.

The purpose of this document is to provide program directors and surveyors with an interpretation of the general standards of accreditation as they relate to the accreditation of residency programs in Anesthesiology. This document should be read in conjunction with the General Standards of Accreditation, the Objectives of Training and Specialty Training Requirements in Anesthesiology.

STANDARD B1: ADMINISTRATIVE STRUCTURE

There must be an appropriate administrative structure for each residency program.

Please refer to Standard B1 in the General Standards of Accreditation for the interpretation of this standard.

STANDARD B2: GOALS AND OBJECTIVES

There must be a clearly worded statement outlining the goals of the residency program and the educational objectives of the residents.

The general goals and objectives for Anesthesiology are outlined in the Objectives of Training and Specialty Training Requirements in Anesthesiology. Based upon these general objectives each program is expected to develop rotation specific objectives suitable for that particular program, as noted in Standard B2 of the General Standards of Accreditation.

STANDARD B3: STRUCTURE AND ORGANIZATION OF THE RESIDENCY PROGRAM

There must be an organized program of rotations and other educational experiences, both mandatory and elective, designed to provide each resident with the opportunity to fulfill the educational requirements and achieve competence in Anesthesiology.

Residents must be provided with increasing individual professional responsibility, under appropriate supervision, according to their level of training, ability and experience.

The structure and organization of each accredited program in Anesthesiology must be consistent with the specialty training requirements as outlined in the Objectives of Training and the Specialty Training Requirements in Anesthesiology.
In addition to offering the components noted in the specialty training requirements, all accredited programs in Anesthesiology must offer an elective community-based learning experience.

**STANDARD B4: RESOURCES**

There must be sufficient resources including teaching faculty, the number and variety of patients, physical and technical resources, as well as the supporting facilities and services necessary to provide the opportunity for all residents in the program to achieve the educational objectives and receive full training as defined by the Royal College specialty training requirements.

In those cases where a university has sufficient resources to provide most of the training in Anesthesiology but lacks one or more essential elements, the program may still be accredited provided that formal arrangements have been made to send residents to another accredited residency program for periods of appropriate prescribed training.

Learning environments must include experiences that facilitate the acquisition of knowledge, skills, and attitudes relating to aspects of age, gender, culture, and ethnicity appropriate to Anesthesiology.

1. **Teaching Faculty**
   
   a. There must be a sufficient number of qualified and dedicated teaching staff to supervise residents at all levels and in all aspects of Anesthesiology and provide teaching in the basic and clinical sciences related to Anesthesiology.
   
   b. There must be an adequate number of qualified teaching staff to provide for training in regional anesthesia and analgesia, diagnostic and therapeutic nerve blocks, and the management of pain.
   
   c. There must be a faculty member whose responsibility it is to facilitate the involvement of residents in research.

2. **Number and Variety of Patients**

   There must be a sufficient number and variety of patients available to the program to provide each resident registered in the program with the opportunity to meet the following specific objectives:

   a. to permit residents to be exposed to the provision of Anesthesiology services across all age groups and over the full range of surgical, interventional, and diagnostic specialties including Cardiac Surgery, General Surgery, major head and neck surgery, multiple trauma, Neurosurgery, Obstetrics and Gynecology, Orthopedic Surgery, Ophthalmology, Otolaryngology, Plastic Surgery, Thoracic Surgery, Urology, and Vascular Surgery;

   b. to provide for training in regional anesthesia and analgesia, diagnostic and therapeutic nerve blocks, and the management of pain;
c. to provide a broad experience for residents in consultations on the perioperative management of patients of all ages and physical status, in both elective and emergency situations, and in the fields of cardiorespiratory support and pain relief;

d. to provide experience in internal medicine and those subspecialties of particular importance to the Anesthesiologist. These may include Cardiology, Respiratory, Neurology, Hematology, Nephrology, Endocrinology and Metabolism, Infectious Diseases, and Palliative Care.

e. to provide opportunity for residents to manage critically ill patients in a variety of critical care settings embracing adult, pediatric and perinatal patients, including those who have sustained multiple trauma;

f. to provide broad training in anesthesiology for emergency operations of a major nature;

g. to provide training in the anesthetic management of patients for ambulatory surgery.

3. Clinical Services Specific to Anesthesiology

a. In-patient Services

There must be:
- well equipped and adequately staffed operating and recovery rooms;
- an accredited residency program in internal medicine and a liaison which ensures that rotations arranged for Anesthesiology residents are appropriately structured;
- an Anesthesiology consultation service which provides clinical risk assessment and perioperative management of patient in both elective and emergency situations;
- a consultation service and facilities for the management of chronic pain;
- intensive care units organized for teaching with an appropriate level of responsibility under expert supervision, where constant attention is paid to the particular educational needs of the resident in Anesthesiology;
- ready access to appropriate laboratory facilities.

There should be:
- a consultation service and facilities for the management of acute pain.

b. Ambulatory Services

There must be:
- facilities for ambulatory surgery;
- a consultation service or clinic for the preoperative assessment of patients for ambulatory surgery and same-day admission.

c. Community Experiences

Each accredited program in anesthesiology must offer an elective opportunity for each resident to have experience in Anesthesiology as practised in a community hospital.
STANDARD B5: CLINICAL, ACADEMIC AND SCHOLARLY CONTENT OF THE PROGRAM

The clinical, academic and scholarly content of the program must be appropriate for university postgraduate education and adequately prepare residents to fulfill all of the CanMEDS Roles of the specialist. The quality of scholarship in the program will, in part, be demonstrated by a spirit of enquiry during clinical discussions, at the bedside, in clinics or in the community, and in seminars, rounds, and conferences. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

Please refer to Standard B5 in the General Standards of Accreditation, the Objectives of Training, the Specialty Training Requirements in Anesthesiology, and the CanMEDS Framework for the interpretation of this standard. Each program is expected to develop a curriculum for each of the CanMEDS roles, which reflects the uniqueness of the program and its particular environment. Specific additional requirements are listed below.

1. Medical Expert

In addition to the General Standards of Accreditation, the following requirements apply:

The academic program must include organized teaching in the basic and clinical sciences relevant to anesthesiology. This program must include the following areas within the knowledge domain as a minimum:

- basic sciences as applicable to anesthesiology including anatomy, physiology, pharmacology, biochemistry and physics;
- internal medicine with particular reference to the cardiovascular, respiratory, renal, hepatic, endocrine, hematologic and neurologic systems;
- physics and mechanics of anesthetic and ventilatory equipment as well as its care and maintenance;
- preoperative evaluation of patients for anesthesia and surgery;
- local, regional and general anesthesia for all surgeries and procedures;
- postoperative management of surgical patients including the control of acute post-operative pain;
- critical care medicine and cardiopulmonary resuscitation;
- chronic pain.

2. Communicator

The General Standards of Accreditation apply to this section.

3. Collaborator

The General Standards of Accreditation apply to this section.

4. Manager

In addition to the General Standards of Accreditation, the following requirements apply:
Residents must be given opportunities to develop skills in management as applied to Anesthesiology such as efficient practice and record management, the ethical use of health care resources and operating room management.

5. Health Advocate

The *General Standards of Accreditation* apply to this section.

6. Scholar

The *General Standards of Accreditation* apply to this section.

7. Professional

The *General Standards of Accreditation* apply to this section.

**STANDARD B6: EVALUATION OF RESIDENT PERFORMANCE**

There must be mechanisms in place to ensure the systematic collection and interpretation of evaluation data on each resident enrolled in the program.

Please refer to Standard B6 in the *General Standards of Accreditation* for the interpretation of this standard.

Adopted by Council - April 8, 1995
Revised – March 2004
Specialty name change – March 1, 2006