

International Rotation Application Process Complex General Surgical Oncology Review Committee for Surgery

When applying for an international rotation, a letter of request signed by the designated institutional official (DIO) and program director must be sent to both the Review Committee for Surgery and the American Board of Surgery (ABS) at the following addresses:

Chris Fox, PhD
Executive Director, Review Committee for Surgery
cfox@acgme.org

Jo Buyske, MD
American Board of Surgery
1617 John F. Kennedy Boulevard, Suite 860
Philadelphia, Pennsylvania 19103

The program will receive separate approval letters from the Review Committee and the ABS. Both approval letters must be received prior to implementation of an international rotation.

In addition to the letter of request, when requesting Review Committee approval for an international rotation for the first time, the information in Column A below must accompany the request. When additional fellows request to rotate to an approved rotation and there are no changes since approval, a notification letter from the program director, co-signed by the DIO, with the information marked in Column B below, must be submitted to the Review Committee. An acknowledgment letter will be sent to the program when the request is processed.

US territories are not considered international sites and do not need approval; these are considered elective rotations.

A Request for a New International Rotation	B Requests for Additional Candidates (Same International Site and Supervising Faculty Members)	
X	X	Name and location of international site
X	X	Documentation that the fellow for whom rotation is requested has the appropriate license (or equivalent approvals, which could be from the hospital at which the fellow will be rotating). It will be very challenging to get a license in many of these countries, particularly for a short period of time, such as one month or two weeks) to practice in the country of the rotation.
X	X	Name and PGY of the fellow for whom the rotation is requested
X	X	Dates of the rotation (Review Committee requires a minimum of a two-week rotation, exclusive of travel time)
X	X	Verification that salary, travel expenses, health insurance, and evacuation insurance are provided by the Sponsoring Institution If alternate funding other than from the Sponsoring Institution is to be used, specifics must be detailed as to the source and confirmation of funding.
X	X	Verification of the program's accreditation status and: <ul style="list-style-type: none"> • Program should have graduated at least two classes of fellows and have a status of Continued Accreditation • Board pass rates, for the prior two years, should meet or exceed requirements
X	X	List of ABMS-certified faculty member(s) (or faculty member(s) with qualifications deemed acceptable in advance by the Review Committee) who will supervise, OR an international physician who will partner with an ABMS-certified surgical oncologist to supervise the fellow on the rotation
X		A description of the clinical experience: <ul style="list-style-type: none"> • Type of center (governmental, non-governmental, private, etc.) • Brief statement of the scope of practice of the host center • Description of the fellow experience, including a statement ensuring that the fellow will gain exposure to surgical care of cancer patients. The fellow can provide multidisciplinary care of cancer patients when feasible. • Description of how outpatient experience will be provided • Verification that fellow will enter operative experiences into the ACGME Case Log System for credit

X		A statement addressing the physical environmental issues, including housing, transportation, communication, safety, and language, which should include any current or recent travel advisories issued by the government regarding the location of the educational site, as well as any special travel documentation needed for entry and exit of the country
X		A description of educational resources, including access to a library with reasonably current resources and/or reliable access to web-based educational materials
X		Educational rationale: a statement describing what educational experience the international rotation provides that the primary clinical site or affiliates do not; specifically, what oncologic experiences will be novel to this experience that would otherwise not be possible (refer to Addendum 1 below)
X		A statement of competency-based goals and objectives of the rotation
X		Verification that there will be an evaluation of fellow performance based on the stated goals and objectives and by whom
X		Verification that the rotation is an elective
X		A copy of the fully executed Program Letter of Agreement
	X	An informational letter with the name(s) of the additional resident(s) or fellow(s) who plan to take advantage of this opportunity and a statement that the framework for the international rotation has not changed since the original application

Addendum 1

International rotations are intended to enhance the education and training of surgical oncologists by providing novel and/or additional education and training opportunities that the primary clinical site and its affiliates cannot.

These additional opportunities include:

1. Exposure to cancers that the fellows would not usually encounter in the US, such as cancers that fall into the domains of gynecology (cervix and uterine cancers), head and neck (oral cavity), urology (bladder, penis, prostate, renal cell cancer), neurological surgery, as well as cancers of organs beyond the gastrointestinal system
2. Exposure to a wider variety and volume of open cancer surgical cases
3. Exposure to varied surgical approaches due to differences in surgical practices across the world (D2/D3 gastrectomy, different esophagectomy approaches, higher volume of mastectomies, etc.)
4. Exposure to newer surgical techniques, such as robotic procedures (gastrectomy, thyroidectomy, etc.)
5. Exposure to a larger number of cancer cases or more advanced cancer cases.
6. Exposure to resource-limited settings that will foster a fellow's ability to deliver cost-conscious care after returning home
7. Exposure to patients from different ethnic and linguistic backgrounds, which will promote cultural competence and enhance diversity and inclusion
8. Appreciation for the capability or lack thereof of neoadjuvant and chemoradiation treatments in a resource-limited environment
9. Appreciation for the value or lack of on-site, capable pathologic expertise in influencing the treatment plan for cancer patients

Email questions to Review Committee staff members, contact information for whom can be found on the [Surgery](#) section of the ACGME website.