



# Committee on Advanced Subspecialty Training

www.societyofns.org

September 4, 2019

Dear Fellowship Program Director:

As the summer of 2019 draws to a close, The Committee on Advanced Subspecialty Training (CAST) of the Society of Neurological Surgeons (SNS) would like to update you with some news of importance to the CAST subspecialty fellowship Accreditation process. At the 2019 Annual Meeting of the SNS, it was determined that the web-based platform for the Society would be transitioning along with administrative support. This includes the administrative and online resources for CAST.

As of September 1, 2019, these CAST resources are now housed in the office of the American Board of Neurological Surgery (ABNS) in Rochester, MN. The new contact in that office will be [Linda Kvall-Boynton](#). We express our appreciation to Shannon Gignac her years of service as she concludes her work with CAST. In addition to this administrative change, the website will also have a new look and platform. We have made every effort to maintain the same outward facing website address and linkages with seamless connections to the SNS homepage. Yet, this transition effort has required intense effort over the past 60 days and therefore some elements of the fellowship guidelines and reporting expectations that we anticipated would be in force this year, have been suspended until 2020.

Outlined below are the requirements that are **currently in force** and those that will **begin in 2020**.

## **Fellowship expectations that are currently in force:**

Standardized definition of the timing of training into two categories:

- 1. Post-graduate Fellowships:** Prior to beginning a CAST-accredited post-graduate neurological surgery subspecialty fellowship, each fellow candidate will have satisfactorily completed an ACGME-accredited (or the Canadian/international equivalent) residency training program in neurological surgery or other specialties as applicable.
- 2. Enfolded Advanced Sub-Subspecialty Training:** Currently, only trainees in an ACGME-approved neurosurgery residency program are eligible to participate in CAST-accredited enfolded fellowships, and must comply with ACGME mandated work hours rules. Details of that training must meet specific timing requirements dictated by the sub-specialty. The SNS Executive Council and the sub-specialty AANS/CNS Joint Sections (Sections) advising CAST on prerequisite training and experience for their fellowships believe that fellowship training

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should occur at the appropriate senior level of residency, meaning after the designated Chief Resident year. Exceptions are Neurocritical Care, and the prerequisite 12 months in CNS Endovascular Surgery that mainly includes exposure to and competence in the performance and interpretation of diagnostic intravascular procedures (i.e. cerebral and spinal arteriography).

- a. Therefore, beginning in July 2019 and thereafter, the “senior resident level” requirement for participation in all enfolded CAST accredited fellowships (other than Neurocritical Care and CNS Endovascular Surgery) will be **after the completion of their ABNS designated Chief Resident year.**

### 3. Annual Fellowship Program report:

- a. All CAST-accredited fellowships are required to submit an annual report on the ACGME ADS reporting system:
- b. CAST and the SNS have recently entered into an agreement with the ACGME that includes the **joint and annual** collection of essential fellowship data regarding leadership, faculty, and trainees, as well as a block diagram for the trainee experience, for each CAST-accredited training program. This is referred to as the **ACGME Annual Update**, and its contents closely parallel those already submitted within the CAST application form.
- c. Under the SNS/CAST/ACGME agreement, the ACGME will send out yearly requests for existing fellowship programs to update their existing data using this same ACGME Annual Update process. This will occur in July. **The Fellowship Director must respond and ensure that all updated information is entered into the ACGME ADS system by August 31 each year.**

4. **New and Renewal Applications:** All applications submitted for the 2019 review should follow the guidelines and documentation requirements currently posted on the CAST website. Questions regarding applications should be directed to the CAST Office by phone (507-322-0400) or [email](#).

### **Fellowship expectations anticipated to begin in 2020:**

Guidelines and Case Reporting Requirements:

1. **Guidelines for CAST Fellowship Accreditation (Forms 1 and 2)** – Once the website transition is complete, updated guidelines for fellowship application and renewals will be posted. These guidelines have been developed and submitted by Section and CAST representatives to provide clear guidance to the accreditation process. For now, overall institutional case numbers experience will be a required component of the application (Form 1). Discussion is underway to limit these requirements to those relevant to the sub-specialty. In addition, documentation of cases specific to the unique subspecialty fellowship will be required. This will be known as **Form 2**. Applications submitted for approval in 2020 and in subsequent years will be required to include a completed Form 2 in the online application materials.

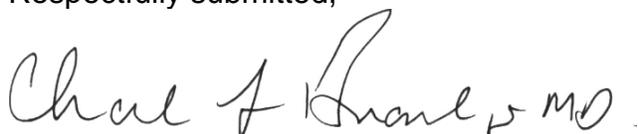
2. **Individual Case Report Form - Trainee (Form 3)** – This form will document the individual graduate training experience while in the subspecialty fellowship

**Form 3** is defined by the appropriate Section Fellowship Review Committee (FRC), and is different for each type of sub-specialty fellowship. A **Form 3** is complete by the Fellowship Program and its Director, and its accuracy confirmed with the individual trainee. A finalized **Form 3** is required for each trainee completing fellowship subspecialty training in a CAST accredited program. This document must be submitted to CAST online by August 31. Receipt of the trainee's Form 3 and the fellowship program's ADS Annual Update will result in the issuance of a Diploma of Completion by CAST for that fellow.

Thank you for your support and patience as CAST transitions its online platforms. As a reminder, factors that may affect and/or jeopardize continued fellowship accreditation include any adverse actions of the Neurosurgical Surgery Review Committee relative to the parent residency training program, changes in fellowship leadership or faculty, failure to graduate a fellow over a three-year period and failure to maintain a satisfactory volume of subspecialty cases. The CAST office and Secretary should be notified immediately if any of these changes occur, so that the continued quality of the fellowship is validated and meets the expected standards for subspecialty fellowship training accreditation. Annual submission of the ADS is mandatory and failure to do so may jeopardize the fellowship accreditation as well.

Thank you for your participation in the CAST accreditation process and for your advanced subspecialty training efforts within neurosurgery. Please feel free to contact [CAST office](#), [CAST Secretary](#) or your designated CAST representative at any time should any questions arise regarding the details of these efforts.

Respectfully submitted,



Charles L Branch Jr, MD  
Secretary, SNS Committee on Advanced Subspecialty Training (CAST)

CAST membership:

Section(s) represented

- |                                |                                  |
|--------------------------------|----------------------------------|
| 1. Nick Barbaro                | CAST Chair                       |
| 2. Charlie Branch              | CAST Secretary                   |
| 3. Shelley Timmons             | Neurocritical Care, Neurotrauma  |
| 4. Cormac Maher                | Pediatrics                       |
| 5. Vince Traynelis             | Spine, Peripheral Nerve          |
| 6. Linda Liau                  | Tumor                            |
| 7. Doug Kondziolka             | Functional and Stereotactic,     |
| 8. Sander Connolly             | Open Cerebrovascular, Skull Base |
| 9. Kevin Cockroft (ex officio) | Endovascular                     |