



Take 3 with Eric Holmboe, MD, MACP, FRCP

Reflection on Residency and the ACGME during a Pandemic

By Eric Holmboe, MD, MACP, FRCP-Chief Research, Milestone Development, and Evaluation Officer, Accreditation Council for Graduate Medical Education (ACGME)

Transformational Times: Tell me a story about something that occurred during residency that influenced the development of your character as a doctor and a person.

Dr. Holmboe: One moment that stands out is from my chief residency. The chief of service at the West Haven VA was Asghar Rastegar. One day he asked me how the year was going. I told him that it was great but that I always felt as though I didn't know enough. He leaned back in his chair and said, "Eric, I hope you never stop feeling that way." I realized then that Asghar was the epitome of that kind of doctor. He role modeled that desire to always be learning and was explicit about how important it was. He said "I don't know" when he didn't know. He was a co-learner with others, even though he was brilliant. I realize now that those are the people that I admire the most. They are humble and quiet and always learning.

Transformational Times: What do you think was the most important role the ACGME played during the past year? Was that something you (as a group) explicitly decided?

Dr. Holmboe: The ACGME made an explicit decision to be flexible and to respond quickly as the pandemic unfolded. We wanted to provide programs with relief and give them flexibility to do what they needed to do, but we also wanted to hold firm on things like duty hours. We created first a tiered pandemic status, then revised the program to an "emergency status" so institutions could have sufficient flexibility to meet the demands of COVID surges in their communities, including moving residents and fellows around to help with the evolving patient care needs.

A specific intervention that proved to be very helpful was setting up routine national DIO (designated institutional official) calls by our Sponsoring Institution team to provide the DIOs with information and also to get input and feedback from them about what

was happening on the ground. We also quickly put together a supplemental survey for the annual update so that we could better understand what was happening around teaching and the health impacts of the pandemic. It was good that we did all that work in the spring because the winter surge was so much worse.

We also routinely asked ourselves, “How can we be more helpful?” We tried to be deliberate and proactive. For example, we moved our faculty development assessment courses from in-person to online and also made the courses free. In the end, we know that the GME community made many sacrifices, including residents and faculty that got sick, and some that died. One faculty member from Geisinger contracted COVID19, was on ECMO and ultimately needed a double lung transplant. His story can be seen in this [public service announcement](#), encouraging people to get vaccinated. The ACGME recognizes the loss and sacrifice that occurred in our community.

Transformational Times: What words of wisdom would you share with the residents who are graduating this month?

Dr. Holmboe: Remain curious. Take care of yourself (I didn’t do it as well). I do try to avoid [nostalgialitis imperfecta profunda](#) (the “profoundly imperfect recollection of or yearning for the past”). I loved my training but would not repeat it.

Stay involved. Your generation has already been amazing in this regard. Continue with your advocacy for yourselves and others.

Humility is really important. Medicine suffers from arrogance. You are a member of a team, an interprofessional team. You are not the most important person on a team – the patient and family are and remember they are also part of the team.

Always remain patient- and family-centered. Think about your community, outside the hospital walls. Your goal is to positively impact the lives of others through service.

Co-produce your work; co-produce your assessments; co-create learning.