

# The Importance of Certification in Orthopedics and Traumatology Training

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The Residency Committee of the Asociación Argentina de Ortopedia y Traumatología (AAOT) is responsible for overseeing every aspect of the specialty's residency program. This includes a variety of activities such as conferences, CIROT, soccer tournaments, and more. The Committee supervises resident training across both the specialty and its subspecialties. Residents are also involved through a subcommittee and participate in various Committee activities. These competitions and events not only strengthen the relationships within each residency but also enhance interactions among different residencies. In addition to these activities, the Committee has the essential duty of reviewing and accrediting residencies. This process is critical to ensuring the quality and competence of future traumatology professionals and involves a well-defined structure and regular evaluations.

Orthopedic and traumatology training typically lasts four years, while some programs extend up to five years. In addition, many physicians opt to further their specialization through advanced programs. Instead of using the term "fellowship," the Committee suggests "post-basic residency" or "post-residency training" for these programs. Combined with the initial residency, the total training time can range from six to seven years. Considering that a medical degree program lasts 6 or 7 years, a young professional might spend 12 to 14 years in training before entering the workforce. This is a significant commitment compared to other professions.

Several years ago, the Residency Committee collaborated with the Ministry of Health and other organizations to establish a framework for orthopedic and traumatology training programs. This framework, along with one for post-basic residencies developed with AAOT subsidiary societies, sets minimum standards and defines operational areas for these residencies. These frameworks provide some flexibility for program leaders while establishing essential requirements for residency accreditation.

The Residency Committee plays a crucial role in conducting periodic visits and evaluations of orthopedic and traumatology residencies. Despite logistical and economic challenges, this task has been carried out continuously for many years. During these visits, the Committee assesses whether the residencies meet minimum requirements and decides whether to grant or deny accreditation. This process is not merely administrative; it involves evaluating the center's capacity to train professionals based on its surgical and academic activities and physical conditions. The Committee has occasionally ceased accrediting centers for not meeting minimum standards or requested reductions in the number of available positions.

Despite these challenges, the evaluation and accreditation process by the AAOT and the Ministry of Health benefits all parties involved. Evaluators gain direct insights from residents across the country, helping identify previously unrecorded issues, guide new activities, and disseminate existing ones. The AAOT receives updated information on residents in training at each center, strengthening its national presence. Evaluated residencies gain valuable

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external feedback, which highlights opportunities for improvement and change. Residents also have the chance to address difficulties, including allegations of physical and occupational abuse, that might otherwise go unreported.

With the information provided by the Committee, we were able to conduct the first census of 1st-year residency positions. We found that 346 positions were offered in 140 facilities in 2022. Personally, I have observed improvements in residencies following each evaluation, with the Committee's recommendations serving as a roadmap.

Training processes are dynamic and evolve over time, influenced by changes in management, institutional idiosyncrasies, new technologies, and shifts in established practices. The rise of remote and asynchronous training is one such change. It is essential to continuously evaluate, improve, and challenge these processes. Is it necessary to train for 15 years to provide high-quality medical care? Accrediting both basic and post-basic training processes is one way to ensure the delivery of high-quality medical education.