# 2028 Emergency Medicine Defined Key Index Procedure Minimums

## Effective July 1, 2028

## Review Committee for Emergency Medicine

The following are key index procedures identified by the Review Committee as essential to the independent practice of emergency medicine, based on the Program Requirements, the Emergency Medicine Milestones, and the Model of the Clinical Practice for Emergency Medicine.

Residents are required to perform the minimum numbers indicated for each key index procedure below by the time of graduation from the program. Competence in each procedure should be determined by the program.

| Procedure | Minimum Total | Maximum Simulation Allowance |
|---|---|---|
| Adult Medical Resuscitation – Supervised Team Leader | 45 | 10 |
| Adult Trauma Resuscitation – Supervised Team Leader | 35 | 10 |
| Arterial Lines | 10 | 3 |
| Arthrocentesis | 10 | 5 |
| Cardiac Pacing** | 6 | 6 |
| Endotracheal Intubation | | |
| Neonatal** | 3 | 3 |
| Pediatric* | 10 | 7 |
| Adult | 50 | 15 |
| Lumbar puncture | 10 | 5 |
| Orthopaedic Reduction | | |
| Dislocation | 10 | 0 |
| Fracture | 10 | 0 |
| Paracentesis | 10 | 5 |
| Pediatric Resuscitation | | |
| Neonatal Assessment at Delivery | 7 | 2 |
| Neonatal Resuscitation (0-28 days) ** | 4 | 4 |
| Pediatric Resuscitation (Medical) * | 15 | 10 |
| Pediatric Resuscitation (Trauma) * | 10 | 5 |
| Pericardiocentesis** | 3 | 3 |
| Procedural Sedation (adult) | 15 | 5 |
| Procedural Sedation (pediatric)* | 15 | 5 |
| Regional Anesthesia | 10 | 5 |
| Surgical Airway** (Cricothyrotomy) | 3 | 3 |
| Thoracostomy (to include both chest tube and pigtail catheters) | 10 | 3 |
| Ultrasound (Diagnostic and Procedural) | 300 | 0 |
| Vaginal Delivery | 10 | 3 |
| Vascular Access | | |
| Pediatric Vascular Access* | 5 | 2 |
| Central Venous Access*** | 20 | 10 |
| Intra-Osseous Access | 5 | 3 |

*Pediatric patients are defined as children 12 years of age and under. (Procedures performed on patients 13 years of age and older should be logged as adults.)
**Rarely performed procedures that may be completed entirely in a simulated environment
***To include varied anatomic locations and types of central access

6/2026