

## Combined Aerospace Medicine-Emergency Medicine Curricular Requirements

This document enumerates the **minimum** curricular requirements for combined ACGME-accredited programs in aerospace medicine and emergency medicine, as approved by the American Board of Emergency Medicine (ABEM), American Board of Preventive Medicine (ABPM), American Osteopathic Board of Emergency Medicine (AOBEM), and American Osteopathic Board of Preventive Medicine (AOBPM). This information was collated on April 20, 2026 and will be updated as needed.

1. Total duration:
  - a. 48 months
  - b. During the combined residency, rotations such as anesthesiology, emergency medical services, orthopedics, trauma surgery, hyperbaric medicine, austere medical care, toxicology, and trauma/acute care may qualify for meeting both the aerospace medicine and emergency medicine requirements; these rotations must be approved by all participating certifying boards
2. Critical Care:
  - a. Four months, including care of infants and children (neonatal-only critical care is not sufficient)
  - b. Two of these months must be at the PGY-2 level or above
  - c. At least three percent of the emergency department patient population must present with critical illness or injury
3. Emergency Medicine:
  - a. 22 months (including experiences dedicated to the care of pediatric patients in the pediatric emergency department) caring for patients in an emergency department
  - b. Residents must be supervised by ABEM- or AOBEM-certified physicians
4. Pediatric Emergency Medicine:
  - a. Five full-time equivalent (FTE) months or 20 percent of all emergency department encounters
  - b. 50 percent should be in an emergency setting
5. Emergency Medical Services:
  - a. Must have experience in emergency medical services, emergency preparedness, and disaster management
  - b. Must include ground unit runs and direct medical command
  - c. Should include participation in multi-casualty incident drills

- d. Residents should have experience teaching out-of-hospital emergency personnel

Aerospace medicine curricular components must include the following:

6. Must complete a Master of Public Health (MPH) or another equivalent degree program, or an equivalent activity that meets the ACGME Program Requirements for Graduate Medical Education in Aerospace Medicine, requirement 4.11.d. (describe in block diagram notes)
7. Must include flight training that provides a baseline understanding of clinical problems encountered in flight medicine and development of aeromedical skills as outlined in Aerospace Medicine requirement 4.11.f.2.b. (indicate in block diagram)
8. Must include educational experiences in patient care environments that address clinical issues relevant to aerospace medicine, including management of health and provision of health care for the aerospace population that meets Aerospace Medicine requirement 4.11.c.
9. Residents must demonstrate competence in aeromedical transport and educating passengers and physicians about medical conditions that make flight hazardous and serve as a passenger advocate to promote flight safety as listed in Aerospace Medicine requirements 4.4.n. and 4.8.h.
10. Must participate in a real or simulated aviation or space vehicle mishap response and investigation, or a disaster or toxic exposure exercise, or an equivalent activity that meets Aerospace Medicine requirements 4.4.g. and 4.4.p. (describe in block diagram notes)
11. Must participate in at least one patient safety or quality improvement activity and in at least one scholarly activity or research project (or an equivalent activity) that meets Aerospace Medicine requirements 4.14.a., 4.15., and 6.3; in some cases, these can be combined into a single research project with a patient safety/quality improvement emphasis
12. Clinical and training activities must incorporate experiences in pilot medical certification, operational flight medical support, disability assessment of pilots, and the development

of medical standards and waiver criteria for certification that meet Aerospace Medicine requirements 4.4.k., 4.4.m.2., 4.4.m.4., and 4.11.f.3. (describe in block diagram notes)

### **Important Additional Considerations**

- ABEM may deny board eligibility to a resident who enters a combined program whose participating emergency medicine program is on Probation when that resident was recruited (or potentially enters) the program.
- Residents may not enter a combined program beyond the PGY-1 level or transfer between combined programs in different institutions without prior approval from ABEM.
- Physicians cannot take the ABEM certifying examination until they have successfully completed all four years of the program.
- ABEM may choose not to recognize board eligibility for graduates of combined programs that have had no residents for a period of five years or more.