**New Application: Pediatric Anesthesiology (Anesthesiology)**

401 North Michigan Avenue · Chicago, Illinois 60611 · United States · +1.312.755.7042 www.acgme-i.org

**Submission for Initial Accreditation:** This Advanced Specialty application is for programs applying for **Initial Accreditation ONLY** and is used in conjunction with the Accreditation Data System (ADS).

All sections of the form applicable to the program must be completed for the application to be accepted for review. The information provided should describe the existing program. For items that do not apply, indicate “N/A” in the space provided. Where patient numbers are requested, provide exact numbers as requested and indicate the exact dates for the data entered. If any requested information is unavailable, an explanation must be given, and it should also be indicated as unavailable in the appropriate place on the form. Once the form is complete, number the pages sequentially in the bottom center.

The program director is responsible for the accuracy of the information supplied in this form and must sign it. It must also be signed by the designated institutional official (DIO) of the Sponsoring Institution, who will submit the application electronically in ADS.

Review the International Foundational Program Requirements for Graduate Medical Education and Advanced Specialty Program Requirements for Graduate Medical Education in Pediatric Anesthesiology. The International Foundational, Advanced Specialty, and Institutional Requirements may be downloaded from the ACGME International website: [www.acgme-i.org](http://www.acgme-i.org/).

Email questions regarding the form’s content to [acgme-i@acgme-i.org](mailto:acgme-i@acgme-i.org).

Email questions regarding ADS to [ADS@acgme.org](mailto:ADS@acgme.org) (type the program number in the subject line).

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| --- |
| Program Name: Click here to enter text. |

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**Introduction**

**Duration and Scope of Education**

|  |
| --- |
| * + - 1. What will be the length, in months, of the educational program?   Choose a length. |
|  |

**Institutions**

**Sponsoring Institution**

1. Will the fellowship program function as an integral part of an ACGME-I-accredited residency in anesthesiology? YES NO

Explain if ‘NO.’ (Limit 250 words) For information on independent subspecialty status, email [acgme-i@acgme-i.org](mailto:acgme-i@acgme-i.org)

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1. Will the primary clinical site be a general hospital or a children’s hospital? YES NO

Explain if ‘NO.’ (Limit 250 words)

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**Program Personnel and Resources**

**Program Director**

1. Will the program director possess the following qualifications?
2. Completion of a pediatric anesthesiology fellowship or at least three years participation in a pediatric anesthesiology fellowship as a faculty member YES NO
3. Post-residency experience in clinical pediatric anesthesiology YES NO
4. Current appointment as a member of the anesthesiology residency faculty at the primary clinical site YES NO
5. Academic achievements appropriate to pediatric anesthesiology YES NO

Explain any ‘NO’ responses. (Limit 250 words)

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**Faculty**

1. Will there be at least three faculty members, including the program director? YES NO

Explain if ‘NO.’ (Limit 250 words)

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1. How will the program ensure all faculty members have fellowship education or post-residency experience in clinical pediatric anesthesiology? (Limit 400 words)

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1. Will fellows have access to consultants in the following pediatric subspecialties?
2. Child neurology YES NO
3. Neonatology YES NO
4. Pediatric cardiology YES NO
5. Pediatric critical care YES NO
6. Pediatric emergency medicine YES NO
7. Pediatric pulmonology YES NO
8. Pediatric radiology YES NO
9. Pediatric surgery YES NO

Explain any ‘NO’ responses. (Limit 250 words)

|  |
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1. Will the following pediatric surgical specialists be available for the education of the fellows?
2. Neurological surgeons YES NO
3. Orthopaedic surgeons YES NO
4. Otolaryngologists YES NO
5. Plastic surgeons YES NO

Explain any ‘NO’ responses. (Limit 250 words)

|  |
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**Other Program Personnel**

* 1. Describe how the program will ensure that allied health staff members and other appropriate support personnel with subspecialty experience will be available to support the program. (Limit 250 words)

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**Resources**

* 1. Does the primary clinical site have the following?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **Number of Beds** |
| An emergency department where children can be managed 24 hours a day |  |  | # |
| Neonatal intensive care unit |  |  | # |
| Pediatric intensive care unit |  |  | # |

* 1. Briefly describe how the program will provide consultations for pediatric patients in the emergency room. (Limit 250 words)

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* 1. Provide the data requested for each participating site listed in ADS. Use the site numbers as indicated in ADS. The primary clinical site is site #1.

Inclusive Dates: Click here to enter date Click here to enter date

|  | **Site #1** | | **Site #2** | | **Site #3** | | **Site #4** | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Total** | **Peds** | **Total** | **Peds** | **Total** | **Peds** | **Total** | **Peds** |
| **Number of Anesthetics Administered Annually by:** | | | | | | | | |
| Residents and/or fellows | # | # | # | # | # | # | # | # |
| Attending staff | # | # | # | # | # | # | # | # |
| Certified Registered Nurse Anesthetist (CRNA) | # | # | # | # | # | # | # | # |
| **Total** | **#** | **#** | **#** | **#** | **#** | **#** | **#** | **#** |
| Total pediatric beds | **#** | | **#** | | **#** | | **#** | |
| **Anesthetizing Locations** | | | | | | | | |
| Total number of operating rooms | # | | # | | # | | # | |
| Operating rooms designed and equipped for pediatric patients | **#** | | **#** | | **#** | | **#** | |
| Number of anesthetizing locations used regularly and simultaneously | # | # | # | # | # | # | # | # |

Describe any other anesthetizing areas. Include the name and describe the function of each.

(Limit 250 words)

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* 1. Is there a separate post-anesthesia care unit for pediatric patients at the primary clinical site?

YES  NO

If ‘NO,’ how are these patients cared for post-operatively? (Limit 250 words)

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* 1. Is there monitoring and advanced life support equipment representative of current levels of technology at each of the required participating sites?  YES  NO

Explain if ‘NO.’ (Limit 250 words)

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* 1. Will clinical services that provide prompt laboratory results pertinent to the care of pediatric patients, including for the following, be available?

1. Blood chemistries  YES  NO
2. Blood gases and pH  YES  NO
3. Clotting function  YES  NO
4. Hematocrit/hemoglobin  YES  NO
5. Oxygen saturation  YES  NO

Explain any ‘NO’ responses. (Limit 250 words)

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| Click here to enter text. |

**Eligibility Criteria**

1. Describe how the program will ensure that all fellows have completed an Accreditation Council for Graduate Medical Education- or ACGME-I-accredited anesthesiology residency program or an anesthesiology residency that is acceptable to the Sponsoring Institution’s Graduate Medical Education Committee. (Limit 300 words)

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**Specialty-Specific Educational Program**

**ACGME-I Competencies**

**Professionalism**

1. How will graduating fellows demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles, including trustworthiness, leadership skills, and the capacity to recognize that ambiguity is part of clinical medicine, and to respond by using appropriate resources in dealing with uncertainty?

Describe how this will be evaluated. (Limit 400 words)

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**Patient Care and Procedural Skills**

* 1. How will graduating fellows demonstrate competence in providing patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health?

Describe how this will be evaluated. (Limit 300 words)

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* 1. How will graduating fellows will demonstrate competence in providing clinical consultation for both medical and surgical pediatric patients under the direction of faculty members, including assessment of the appropriateness of a patient’s preparation for surgery?

Describe how this will be evaluated. (Limit 400 words)

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* 1. How will graduating fellows demonstrate competence in patient management and peri-operative care of neonates, infants, children, and adolescents, including the following?

1. Pre-operative assessment
2. Pharmacologic support of the circulation
3. Management of both normal peri-operative fluid therapy and massive fluid and/or blood loss
4. Interpretation of laboratory results
5. Post-anesthetic assessment and management of routine and medically challenging pediatric patients
6. Recognition, prevention, and treatment of pain in medical and surgical pediatric patients
7. Recognition and treatment of peri-operative vital organ dysfunction, including in the post-anesthesia care unit
8. Diagnosis and peri-operative management of congenital and acquired disorders
9. Participation in the care of critically ill pediatric patients in a neonatal and/or pediatric intensive care unit

Describe how competence will be evaluated, emphasizing at least five of the areas listed. (Limit 500 words)

|  |
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1. How will graduating fellows demonstrate effective management of pediatric patients requiring general anesthesia for elective and emergent surgery for a wide range of surgical conditions, including neonatal surgical emergencies, cardiopulmonary bypass, and congenital disorders, including the following?
2. Techniques for administering regional anesthesia for inpatient and ambulatory surgery
3. Sedation or anesthesia outside the operating rooms, including for those patients undergoing procedures
4. Cardiopulmonary resuscitation (CPR) and advanced life support
5. Management of normal and abnormal airways
6. Mechanical ventilation
7. Temperature regulation
8. Placement of venous and arterial catheters

Describe how four of the seven skills listed will be evaluated. (Limit 400 words)

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1. How will the program ensure all fellows maintain certification as providers of pediatric advanced life support? (Limit 300 words)

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**Medical Knowledge**

1. How will graduating fellows demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care?

Describe how knowledge will be evaluated. (Limit 400 words)

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1. How will graduating fellows demonstrate knowledge of the following?
2. Airway problems common in children
3. Cardiovascular, respiratory, renal, hepatic, and central nervous system physiology, pathophysiology, and therapy
4. Coagulation abnormalities and therapy
5. Congenital anomalies and developmental delay
6. CPR
7. Effects of anesthetics on the developing brain
8. Ethical and legal aspects of care
9. Infectious disease pathophysiology and therapy
10. Medical and surgical problems common in children
11. Metabolic and endocrine effects of surgery and critical illness
12. Neonatal physiology and pharmacology
13. Normal and abnormal physical and psychological development
14. Organ transplantation in children
15. Pain management in pediatric patients of all ages
16. Pharmacokinetics and pharmacodynamics, and mechanisms of drug delivery
17. Post-anesthetic care and critical care management
18. Transport of critically ill patients
19. Trauma, including burn management
20. Use and toxicity of local and general anesthetic agents

Provide an example of how knowledge will be assessed in 10 of the 19 areas listed. (Limit 600 words)

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**Practice-based Learning and Improvement**

* 1. How will graduating fellows demonstrate their ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning?

Describe how these skills will be evaluated. (Limit 300 words)

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**Interpersonal and Communication Skills**

* + 1. How will graduating fellows demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals?

Describe how these skills will be evaluated. (Limit 300 words)

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**Systems-based Practice**

* + - 1. How will graduating fellows demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care?

Describe how these skills will be evaluated. (Limit 300 words)

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**Regularly Scheduled Educational Activities**

1. Complete Appendix A., Formal Didactic Sessions by Academic Year, and attach to submission.
2. Will the didactic curriculum include the following?
3. Peer-reviewed case conferences YES NO
4. Morbidity and mortality conferences YES NO
5. Multidisciplinary conferences YES NO
6. Departmental grand rounds YES NO

Explain any ‘NO’ responses. (Limit 250 words)

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1. Describe how the program will ensure faculty members and fellows are actively involved in planning and conducting the conferences. (Limit 250 words)

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1. Describe how the program will ensure that multidisciplinary conferences and case presentations involve faculty members from other specialties. (Limit 250 words)

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**Clinical Experiences**

1. Complete Appendix B., Patient Population Data, and attach to submission.

If the program will be 12 months in length, answer Question 1 and then skip to Question 3; if the program will be 24 months in length, skip Question 1 and begin with Question 2.

1. For programs that are 12 months in length, indicate the number of months fellows will be engaged in the following:
2. Completing required clinical experiences #
3. Conducting research #
4. Elective rotations #
5. Clinical experiences outside the primary clinical site #
6. For programs that are 24 months in length, indicate the number of months fellows will be engaged in the following:
7. Completing required clinical experiences #
8. Conducting research #
9. Elective rotations #
10. Clinical experiences outside the primary clinical site #
11. Will the program have a specialty-specific policy regarding substance abuse? YES NO

Explain if ‘NO.’ (Limit 250 words)

|  |
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| Click here to enter text. |

1. Describe how the curriculum will be designed to allow fellows to develop self-assessment and reflection skills and habits. (Limit 300 words)

|  |
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1. Describe how the curriculum will be designed to allow fellows to develop effective communication skills in acquisition of informed consent, description and management of the patient care plan, and disclosure and management of complications/errors. (Limit 300 words)

|  |
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1. Describe how the curriculum will be designed to allow fellows to develop competence in providing psychological support to patients and their families. (Limit 300 words)

|  |
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1. Describe how the curriculum will be designed to allow fellows to develop a commitment to carrying out professional responsibilities and adherence to ethical principles, including compassion, integrity, and respect for others; responsiveness to patient needs; respect for patient privacy and autonomy; accountability to patients, society, and the profession; sensitivity and responsiveness to a diverse patient population; and compliance with institutional, departmental, and program policies. (Limit 300 words)

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1. Describe how the curriculum will be designed to allow fellows to work in interprofessional teams; identify system errors and assist in the implementation of potential system solutions; and be involved in continuous quality improvement, utilization review, and risk management. (Limit 300 words)

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**Fellows’ Scholarly Activities**

1. Describe the planned curriculum in research design and the interpretation and presentation of data. Include in the response the topics that will be covered, and the type and number of sessions planned. (Limit 400 words)

|  |
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1. Describe how the program will ensure that each fellow designs, conducts, and disseminates a scholarly project in the area of pediatric anesthesiology. (Limit 300 words)

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Appendix A. Formal Didactic Sessions by Academic Year

For each year of the fellowship, attach (Label: Appendix A.) a list of all scheduled didactic courses (including discussion groups, seminars and conferences, grand rounds, basic science, skills labs, and journal club) at all participating sites to which fellows will rotate using the format below. If attended by fellows from multiple years, list in each year, but provide a full description *only the first time the site is listed*.

Number sessions consecutively from the first year through the final year so the scheduled didactic sessions can be easily referenced throughout the application. Be brief and use the outline that follows.

Year in the program:

Number: Title:

a) Type of Format (e.g., seminar, conference, discussion groups)

b) Required or elective

c) Brief description (three or four sentences)

d) Frequency, length of session, and total number of sessions

**Example:**

|  |
| --- |
| Y-1  01. Introduction to pediatric anesthesiology  a) Seminar  b) Required Y-1  c) Survey of contemporary methods and styles of pediatric anesthesiology, including approaches to clinical work with minority populations  d) Weekly, for 8 sessions  02. Departmental Grand Rounds  a) Discussion groups  b) Required, Y-1, Y-2, Y-3; Elective  c) Clinical case presentations, sponsored by each departmental division, followed by discussion and review of contemporary state of knowledge. Format includes fellow presentations and discussions with additional faculty discussant.  d) Twice monthly, 24 sessions |

If fellow attendance is monitored, explain how this is accomplished and how feedback is given regarding non-attendance. (Limit 250 words)

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| Click here to enter text. |

**Appendix B. Patient Population Data**

Complete and attach the following tables summarizing the total number of cases seen annually at each of the planned participating sites (Label: Appendix B.). Numbers should reflect total volume at each institution where residents plan to rotate.

Participating sites are indicated by a number which must correspond to the number designated for that site in the ADS. The primary clinical site must be designated as Site #1. If additional sites are not planned, columns can be left blank. If additional sites are planned, add columns as needed.

The data in Table 1 below is for the following one-year period:

From: Date\_\_\_\_\_\_\_\_\_\_\_ To: Date\_\_\_\_\_\_\_\_\_\_\_

|  | **Total number for Reporting Year by Site** | | | |
| --- | --- | --- | --- | --- |
| **Site #1** | **Site #2** | **Site #3** | **Site #4** |
| **Type of Surgery** | | | | |
| Airway surgery (excluding T&A) | # | # | # | # |
| Cardiac - with cardiopulmonary bypass | # | # | # | # |
| Cardiac - without cardiopulmonary bypass | # | # | # | # |
| Craniofacial surgery | # | # | # | # |
| Cleft lip palate | # | # | # | # |
| Intra-abdominal (intra-cavitary; excluding inguinal hernia) | # | # | # | # |
| Intra-cranial – neuro (excluding shunts) | # | # | # | # |
| Neonatal emergencies (neonates <1 month and premature <45 weeks PCA) | # | # | # | # |
| TEF (tracheoesophageal fistula) | # | # | # | # |
| Gastroschisis and/or omphalocele | # | # | # | # |
| Diaphragmatic hernia | # | # | # | # |
| Necrotizing enterocolitis and bowel obstruction | # | # | # | # |
| Ophthalmological surgery | # | # | # | # |
| Orthopaedic surgery, major (scoliosis, tumors) | # | # | # | # |
| Plastic surgery (excludes craniofacial) | # | # | # | # |
| Solid organ transplant | # | # | # | # |
| Heart | # | # | # | # |
| Kidney | # | # | # | # |
| Liver | # | # | # | # |
| Lung | # | # | # | # |
| Urologic surgery | # | # | # | # |
| Non-OR diagnostic and therapeutic procedures (MRI, CT scan radiation therapy, cardiac catheterization etc.) | # | # | # | # |
| Other Click here to enter text. | # | # | # | # |
| Other Click here to enter text. | # | # | # | # |
| **Patient age** | | | | |
| Neonates-less than one month or premature less than 45 weeks PCA | # | # | # | # |
| 1-11 months | # | # | # | # |
| 1-2 years | # | # | # | # |
| 3-11 years | # | # | # | # |
| 12-17 years | # | # | # | # |
| Greater than 18 years | # | # | # | # |
| **Total number of cases** | # | # | # | # |
| **Techniques for Anesthesia (not pain)** | | | | |
| Epidural/caudal | # | # | # | # |
| General anesthesia | # | # | # | # |
| Intrathecal | # | # | # | # |
| Peripheral nerve block | # | # | # | # |
| **Procedures** | | | | |
| Arterial cannulation | # | # | # | # |
| Central venous cannulation | # | # | # | # |
| Flexible fiberoptic intubation | # | # | # | # |
| **Pain management outside the operating room** | | | | |
| Central neuraxis blocks | # | # | # | # |
| Consultations | # | # | # | # |
| Patient-controlled analgesic | # | # | # | # |
| Peripheral nerve blocks | # | # | # | # |

Minimum numbers for graduating fellows are listed in the table below.

|  |  |
| --- | --- |
| **Category** | **Minimum Case Number** |
| **Total Number of Patients** | 240 |
| **Age of Patient** | |
| Neonates | 15 |
| 1-11 months | 40 |
| 1-2 years | 40 |
| 3-11 years | 75 |
| 12-17 years | 30 |
| **American Society of Anesthesiologists** (**ASA) level** | |
| ASA 1 | 25 |
| ASA 2 | 42 |
| ASA 3 | 50 |
| ASA 4 | 20 |
| ASA 5 | 0 |
| ASA 6 | 0 |
| **Anesthesiology Procedures** | |
| Epidural/caudal | 10 |
| General | 200 |
| Peripheral nerve block | 11 |
| Arterial cannulation | 30 |
| Central venous cannulation | 6 |
| Flexible fiberoptic technique | 4 |
| **Type of Surgery** | |
| Airway (except tonsillectomy and adenoidectomy) | 7 |
| Cardiac – with bypass | 15 |
| Cardiac – without bypass | 5 |
| Craniofacial | 3 |
| Intra-Abdominal/intracavitary | 12 |
| Intracranial neurological surgery | 9 |
| Intrathoracic non-cardiac | 5 |
| Major orthopaedic | 5 |
| Total neonate emergency | 3 |
| Other operative | 55 |
| Other non-operative | 10 |
| **Pain Management** | |
| Consultations and patient-controlled analgesia (PCA) | 17 |