**Continued Accreditation Application: Pediatric Surgery (Integrated)**

401 North Michigan Avenue · Chicago, Illinois 60611 · United States · +1.312.755.7042 · [www.acgme-i.org](http://www.acgme-i.org)

**Submission for Continued Accreditation:** This Advanced Specialty application is for programs applying for **Continued 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 Hospice and Palliative Medicine. 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 is the length, in months, of the educational program?   Choose an item.  **Institution**  **Sponsoring Institution** |

1. Does the Sponsoring Institution sponsor an ACGME-I-accredited residency in general surgery?

YES NO

Explain if ‘NO.’ (Limit 250 words)

|  |
| --- |
| Click here to enter text. |

1. Do all participating sites used by the program have the following?
2. Adequate inpatient surgical admissions YES NO
3. Classification as a general hospital or a children’s hospital YES NO
4. Emergency medicine departments where the care of neonates, infants, and children can be managed 24 hours a day YES NO
5. Intensive care units for neonates and infants YES NO
6. Intensive care units for older children YES NO
7. Pathology departments that provide services to neonate, infants, and children 24 hours a day

YES NO

1. Radiology departments that provide services to neonates, infants, and children 24 hours a day

YES NO

Explain any ‘NO’ response(s). (Limit 250 words)

|  |
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| Click here to enter text. |

1. How does the program ensure the pediatric surgery (integrated) program does not negatively impact the education of residents in the general surgery residency?(Limit 300 words)

|  |
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| Click here to enter text. |

1. Do residents from an ACGME-I-accredited pediatrics residency rotate through the same participating site(s) as the residents in the pediatric surgery (integrated) program? YES NO

Explain if ‘NO.’ (Limit 250 words)

|  |
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| Click here to enter text. |

1. Do residents have experience working in the following?
2. Interprofessional teams that include pediatric residents YES NO
3. Surgical teams that include attending surgeons, residents and fellows, medical students, and other health care providers YES NO

Explain any ‘NO’ response(s). (Limit 250 words)

|  |
| --- |
| Click here to enter text. |

**Participating sites**

1. Does the program ensure each participating site is in close geographic proximity to the primary clinical site? YES NO
2. When at a participating site, are residents able to participate in joint conferences, grand rounds, basic science and clinical conferences, journal clubs, and quality improvement and patient safety reviews such as morbidity and mortality reviews? YES NO

Explain if ‘NO.’ (Limit 250 words)

|  |
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| Click here to enter text. |

**Program Personnel and Resources**

**Program Director**

1. How does the program ensure the program director’s appointment is for at least three years? (Limit 300 words)

|  |
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| Click here to enter text. |

**Faculty**

1. How does the program director ensure faculty member appointments are of sufficient length to ensure continuity in the supervision and education of residents? (Limit 300 words)

|  |
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| Click here to enter text. |

1. Does the faculty include specialists in the following?
   1. Faculty with significant experience in pediatric urology YES NO
   2. Neonatal-perinatal medicine YES NO
   3. Neurological surgery YES NO
   4. Pediatric surgeons as core faculty members YES NO
   5. Pediatric critical care YES NO
   6. Pediatric surgery and critical care YES NO
   7. Plastic surgery YES NO

Explain any ‘NO’ response(s). (Limit 250 words)

|  |
| --- |
| Click here to enter text. |

1. Does the faculty include the following specialists with substantial experience in treating pediatric patients
   1. Anesthesiologist(s) YES NO
   2. Emergency medicine physician(s) YES NO
   3. Orthopaedic surgeon(s) YES NO
   4. Otolaryngologist(s) YES NO
   5. Pathologist(s) YES NO
   6. Radiologist(s) YES NO

Explain any ‘NO’ response(s). (Limit 250 words)

|  |
| --- |
| Click here to enter text. |

1. Do all faculty members participate in annual faculty development activities in resident evaluation and teaching? YES NO

Explain if ‘NO.’ (Limit 250 words)

|  |
| --- |
| Click here to enter text. |

**Resources**

* + - 1. How does the program ensure the pediatric surgical service has a sufficient breadth and volume of procedures to allow residents to meet the defined minimum procedural requirements? (Limit 300 words)

|  |
| --- |
| Click here to enter text. |

* + - 1. Complete the table below indicating the total number of pediatric surgery procedures performed at each of the required participating sites. Participating sites are indicated by a number that must correspond to the number designated for that site in ADS. The primary clinical site must be designated as Site #1. If there are not additional sites, leave rows blank. If there are other sights, add rows as needed.

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

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

|  |  |
| --- | --- |
| Sites | Total Number of Pediatric Surgery Cases |
| #1 Primary clinical site | # |
| #2 | # |
| #3 | # |
| #4 | # |
| #5 | # |

**Resident Appointment**

**Number of Residents**

1. How does the program ensure there is at least one resident in each year of the program? (Limit 250 words)

|  |
| --- |
| Click here to enter text. |

**Specialty-Specific Educational Program**

**ACGME-I Competencies**

**Professionalism**

1. How do graduating residents demonstrate a commitment to fulfilling their professional responsibilities and adhering to ethical principles?

Describe how this is evaluated. (Limit 400 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate the following?
   * + - 1. Compassion, integrity, and respect for others
   1. Responsiveness to patient needs that supersedes self-interest
   2. Respect for patient privacy and autonomy
   3. Accountability to patients, society, and the profession
   4. Sensitivity and responsiveness to a diverse patient population, including to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation

Provide examples of how evaluation is conducted in three of the five areas listed above. (Limit 300 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate that they assume personal responsibility to complete all tasks to which they are assigned in a timely fashion and use established methods for handing off tasks when necessary to another member of the team so that patient care is not compromised?

Describe how this is evaluated. (Limit 400 words)

|  |
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| Click here to enter text. |

**Patient Care and Procedural Skills**

1. How do graduating residents demonstrate the ability to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health?

Describe how this is evaluated. (Limit 300 words)

|  |
| --- |
| Click here to enter text. |

1. How do graduating residents demonstrate competence in surgical peri-operative management of the following?
2. Blood and vascular system
3. Clotting and coagulation disorders
4. Congenital, neoplastic, infectious, and other acquired conditions of the gastrointestinal system and other abdominal organs
5. Diaphragm and thorax, exclusive of the heart
6. Endocrine glands
7. Head and neck
8. Integument
9. Urogenital system

Provide examples of how competence is assessed in four of the eight areas listed. (Limit 500 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate competence in operative and non-operative traumatic conditions of the following?
2. Abdomen, chest, head and neck, and extremities
3. Children with sustained injuries to multiple organs
4. Children with trauma from child abuse

Provide examples of how competence is assessed in each of the areas listed. (Limit 300 words)

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| Click here to enter text. |

1. How do graduating residents demonstrate competence in endoscopy of the airway and gastrointestinal tract, including bronchoscopy, esophagoscopy, gastroduodenoscopy, laryngoscopy, and lower intestinal endoscopy?

Provide examples of how competence is assessed. Indicate if any of the procedures listed above are not evaluated. (Limit 300 words)

|  |
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| Click here to enter text. |

1. Provide examples of how graduating residents’ competence is assessed in advanced laparoscopic and thoracoscopic techniques? (Limit 300 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate competence in care of the critically ill infant or child, including in the following?
2. Cardiopulmonary resuscitation
3. Management of patients on ventilators
4. Nutritional assessment and management

Provide examples of how competence is assessed in each of the areas listed. (Limit 300 words)

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| Click here to enter text. |

1. How do graduating residents demonstrate competence in the following?
2. Pre-operative evaluation of patients
3. Making provisional diagnoses
4. Initiating diagnostic procedures
5. Forming preliminary treatment plans
6. Providing outpatient follow-up care of surgical patients

Provide examples of how competence is assessed in each of the areas listed. (Limit 400 words)

|  |
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| Click here to enter text. |

1. Provide examples of how graduating residents’ competence is assessed in follow-up care, including short- and long-term evaluation and extended periodic longitudinal care, particularly with major congenital anomalies and neoplasm cases? (Limit 400 words)

|  |
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| Click here to enter text. |

**Medical Knowledge**

* + - 1. How do graduating residents 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 is evaluated. (Limit 400 words)

|  |
| --- |
| Click here to enter text. |

1. How do graduating residents demonstrate knowledge of basic principles applicable to the pediatric population, including the following?
2. Anesthesia
3. Cardiothoracic surgery
4. Gynecology
5. Management of burns
6. Neurological surgery
7. Orthopaedic surgery
8. Otolaryngology
9. Transplant surgery
10. Urology
11. Vascular surgery

Provide examples of how knowledge is assessed in six of the 10 areas listed. (Limit 600 words)

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| Click here to enter text. |

1. How do graduating residents demonstrate knowledge of the following?
2. Invasive and non-invasive monitoring techniques and interpretation
3. The principles of management of patients on ventilators and extracorporeal membrane oxygenation (ECMO)

Describe how knowledge is assessed in each area. (Limit 300 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate knowledge of the design, implementation, and interpretation of clinical research studies?

Describe how this is assessed. (Limit 300 words)

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| Click here to enter text. |

**Practice-based Learning and Improvement**

1. How do graduating residents demonstrate the 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 this is evaluated. (Limit 300 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate they have developed skills and habits to be able to meet the following goals?
2. Identify strengths, deficiencies, and limits in one’s knowledge and expertise
3. Identify and perform appropriate learning activities
4. Incorporate formative evaluation feedback into daily practice
5. Locate, appraise, and assimilate evidence from scientific studies related to their patients’ health problems
6. Set learning and improvement goals
7. Systematically analyze clinical practice using quality improvement methods, and implement changes with the goal of practice improvement
8. Use information technology to optimize learning

Provide examples of how skills are assessed in five of the eight areas listed. (Limit 500 words)

|  |
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| Click here to enter text. |

**Interpersonal and Communication Skills**

1. How do graduating residents demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, patients’ families, and other health professionals?

Describe how this is evaluated. (Limit 300 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate their ability to:
   * + - 1. communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds?
   1. communicate effectively with physicians, other health professionals, and health-related agencies?
   2. maintain comprehensive, timely, and legible medical records, if applicable?
   3. participate in the education of patients, patients’ families, medical students, other residents, and other health care professionals?

Provide examples of how skills are assessed in three of the five areas listed. (Limit 300 words)

|  |
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| Click here to enter text. |

1. How are graduating residents’ skills assessed in working effectively as a member or leader of a health care team, or other professional group? (Limit 300 words)

|  |
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| Click here to enter text. |

**Systems-based Practice**

1. How do graduating residents 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 this is evaluated. (Limit 300 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate their ability to:
   1. work effectively in various health care delivery settings and systems relevant to their clinical specialty?
   2. coordinate patient care within the health care system relevant to their clinical specialty?
   3. incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population-based care as appropriate?
   4. advocate for quality patient care and optimal patient care systems?
   5. work in interprofessional teams to enhance patient safety and improve patient care quality?
   6. participate in identifying system errors and implementing potential systems solutions?

Provide examples of how skills are assessed in four of the six areas listed. (Limit 400 words)

|  |
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| Click here to enter text. |

**Regularly Scheduled Educational Activities**

1. Complete Appendix A., Formal Didactic Sessions by Academic Year, and attach to submission.
2. Do residents participate in the following?
3. Clinical presentations YES NO
4. Formal pediatric surgery conferences that are interdisciplinary YES NO
5. Formal pediatric surgery conferences that are specialty-specific YES NO
6. Journal clubs YES NO
7. Morbidity and mortality conferences YES NO
8. Quality improvement and/or patient safety conferences and workshops YES NO

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

|  |
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| Click here to enter text. |

1. In the final year of the program, do residents organize conferences? YES NO

Explain if ‘NO.’ (Limit 250 words)

|  |
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| Click here to enter text. |

**Clinical Experiences**

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

Do residents have core surgical education experiences During PGY-1 and -2?

YES NO

Explain if ‘NO.’ (Limit 250 words)

|  |
| --- |
| Click here to enter text. |

If ‘YES,’ does the experience include the following?

* + - * 1. Airway management YES NO

1. At least 24 months of core surgical education YES NO
2. Critical care and trauma management YES NO
3. Pre-and post-operative evaluation and care YES NO
4. Surgical care in the emergency department YES NO

Explain any ‘NO’ response(s). (Limit 250 words)

|  |
| --- |
| Click here to enter text. |

If ‘YES,’ do core surgical experiences include the following?

* 1. Abdominal and alimentary tact surgery YES NO
  2. Basic and advanced laparoscopic skills YES NO
  3. Burn surgery YES NO
  4. Cardiac surgery YES NO
  5. Cardiothoracic surgery YES NO
  6. Congenital heart surgery YES NO
  7. Endocrine surgery YES NO
  8. General surgery YES NO
  9. Gynecology YES NO
  10. Head and neck surgery YES NO
  11. Neurological surgery YES NO
  12. Plastic surgery YES NO
  13. Surgical oncology YES NO
  14. Thoracic surgery YES NO
  15. Transplantation YES NO
  16. Urologic surgery YES NO

Explain any ‘NO’ response(s). (Limit 250 words)

|  |
| --- |
| Click here to enter text. |

1. Describe how, during PGY-1 and -2, the program implements a level-specific, skill-based curriculum that complements clinical rotations in the development of operative and non-operative skills. How are resident skills assessed? (Limit 400 words)

|  |
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| Click here to enter text. |

1. During residents’ PGY-3-6 (or -7), how many weeks per year do residents have experiences in clinical pediatric surgery?

|  |
| --- |
| Click here to enter text. |

1. Complete the table below to indicate the total number of months per resident in the following clinical rotations during the PGY-3-6 (or -7). If clinical rotations are not in the designated area, enter 0 (zero).

|  |  |
| --- | --- |
| **Clinical Rotations** | **Total Number of Months Planned** |
| Neonatal intensive care unit | # |
| Pediatric intensive care unit | # |
| Pediatric anesthesiology | # |
| Pediatric cardiothoracic surgery | # |
| Pediatric gynecology | # |
| Pediatric burn management | # |
| Pediatric neurological surgery | # |
| Pediatric orthopaedic surgery | # |
| Pediatric otolaryngology | # |
| Pediatric plastic surgery | # |
| Pediatric transplant surgery | # |
| Pediatric urology | # |
| Pediatric vascular surgery | # |

1. Does all residents’ clinical care of surgical patients include involvement in the following?
2. Follow-up that is longitudinal and corresponds to each patient’s unique surgical problem YES NO
3. Pre-operative care YES NO
4. Post-operative care YES NO

Explain any ‘NO’ response(s). (Limit 250 words)

|  |
| --- |
| Click here to enter text. |

1. How does the program ensure all residents have primary patient care responsibility, under the supervision of pediatric surgery faculty members and the critical care specialist, to allow for development of competence in pre-, intra-, and post-operative care of critically ill surgical patients? (Limit 400 words)

|  |
| --- |
| Click here to enter text. |

1. Do residents have the following experiences?
   * + - 1. Decision-making around care YES NO
         2. Managing fluids/vasopressors YES NO
         3. Managing ventilators . YES NO
         4. Writing orders for total parenteral nutrition (TPN) YES NO

Explain any ‘NO’ response(s). (Limit 250 words)

|  |
| --- |
| Click here to enter text. |

1. How does the program ensure residents are actively engaged in coordination of care and developing collegial relationships among pediatric surgeons, neonatologists, and critical care intensivists concerning the management of medical problems in complex critically ill patients? (Limit 400 words)

|  |
| --- |
| Click here to enter text. |

1. During critical care experiences, do residents:
2. engage in decision-making and leadership in the care of patients with primary surgical problems? YES NO
3. lead daily multidisciplinary rounds? YES NO

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

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| Click here to enter text. |

1. How does the program ensure faculty members in neonatology, pediatric critical care, and pediatric surgical critical care attest to the experience gained by each resident at the end of each critical care rotation? (Limit 300 words)

|  |
| --- |
| Click here to enter text. |

1. Before beginning critical care experiences, do all residents complete the following?
2. Advanced trauma life support (ATLS) YES NO
3. Neonatal resuscitation (NRP) YES NO
4. Pediatric advanced life support (PALS) YES NO

Explain any ‘NO’ response(s). (Limit 250 words)

|  |
| --- |
| Click here to enter text. |

1. How does the program ensure all residents document 800 major pediatric surgery procedures as Surgeon and at least 50 and no more than 100 Teaching Assistant cases in ACGME-I’s Accreditation Data System (ADS)? (Limit 400 words)

|  |
| --- |
| Click here to enter text. |

1. How does the program ensure residents do not share primary responsibility for the same patient or serve as a Teaching Assistant for a general surgery chief resident? (Limit 300 words)

|  |
| --- |
| Click here to enter text. |

1. Do all residents have:
   * + - 1. at least one half-day of outpatient experience weekly, averaged over 48 weeks in each year of the residency? YES NO
         2. responsibility for teaching junior residents and medical students? YES NO

Explain any ‘NO’ response(s). (Limit 250 words)

|  |
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| Click here to enter text. |

**Scholarly Activity**

1. How does the program ensure the program director demonstrates scholarly activity annually in at least one of the following areas: peer-reviewed funding; publication of original research or review articles in peer-reviewed journals or chapters in textbooks; publication or presentation of case reports or clinical series at local, regional, or national professional and scientific society meetings; or participation in national committees or educational organizations. (Limit 400 words)

|  |
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| Click here to enter text. |

**The Learning and Working Environment**

**Patient Safety**

1. How does the program ensure all residents have a working knowledge of expected reporting relationships to maximize quality care and patient safety? (Limit 300 words)

|  |
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| Click here to enter text. |

**Supervision and Accountability**

Does the program:

ensure that faculty members have knowledge of each resident’s required level of supervision? YES NO

ensure that faculty members evaluate each resident’s supervision needs for each rotation? YES NO

review and document each resident’s required level of supervision at least annually? YES NO

Explain any ‘NO’ response(s). (Limit 250 words)

|  |
| --- |
| Click here to enter text. |

**Clinical Experience and Education**

1. How does the program ensure night float rotations do not exceed two months in succession, or three months in succession for rotations with night shifts? (Limit 300 words)

|  |
| --- |
| Click here to enter text. |

1. How does the program ensure residents have no more than four months of night float per year? (Limit 300 words)

|  |
| --- |
| Click here to enter text. |

1. How does the program ensure there are at least two months between each night float rotation? (Limit 300 words)

|  |
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| Click here to enter text. |

**Appendix A. Formal Didactic Sessions by Academic Year**

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

Number sessions **consecutively** from the first year through the final year so that the 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 Surgery  a) Seminar  b) Required Y-1  c) Survey of contemporary methods and styles of pediatric surgery, 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 Y-4  c) Clinical case presentations, sponsored by each departmental division, followed by discussion and review of contemporary state of knowledge. Format includes resident presentations and discussions with additional faculty discussant.  d) Twice monthly, 24 sessions |

If resident 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. |