**Continued Accreditation Application: Critical Care Medicine (Internal Medicine)**

401 North Michigan Avenue · Chicago, Illinois 60611 · United States · +1.312.755.7042

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 it 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 Critical Care 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.

Email questions regarding ADS to 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 a length. |

**Institutions**

**Sponsoring Institution**

1. Does the fellowship function as an integral part of an ACGME-I-accredited residency in internal medicine? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

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

 [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

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**Program Personnel and Resources**

**Program Director**

1. How does the program director monitor fellow stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction? (Limit 400 words)

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| Click here to enter text. |

1. Does the program director:
2. ensure that fellows’ service responsibilities are limited to patients for whom the teaching service has diagnostic and therapeutic responsibility? [ ] YES [ ] NO
3. monitor and modify situations that consistently produce undesirable stress on fellows?
 [ ] YES [ ] NO
4. monitor and modify situations that demand excessive service? [ ] YES [ ] NO
5. monitor and modify situations that consistently produce undesirable stress on fellows?

 [ ] YES [ ] NO

1. provide fellows access to timely confidential counseling and psychological support? [ ] YES [ ] NO

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

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1. Describe the program director’s participation in academic societies and educational programs designed to enhance educational and administrative skills. (Limit 300 words)

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**Faculty**

1. Are the core faculty members:
2. committed to critical care medicine as a discipline? [ ] YES [ ] NO
3. responsible for evaluating the clinical and research education? [ ] YES [ ] NO
4. responsible for implementing the curriculum? [ ] YES [ ] NO
5. responsible for monitoring the curriculum? [ ] YES [ ] NO
6. responsible for planning the curriculum? [ ] YES [ ] NO
7. physicians with experience in critical care medicine? [ ] YES [ ] NO
8. physicians with knowledge of critical care medicine? [ ] YES [ ] NO

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

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1. Which of the core faculty members are knowledgeable in evaluation and assessment of the ACGME-I Competencies?

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1. Which of the core faculty members spend significant time evaluating fellows, including direct observation of fellows with patients?

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1. List the board-certified (or equivalent) faculty members in the following disciplines who participate in the education of fellows. Note that to be equivalent to American Board of Medical Specialties (ABMS) board certification, the certification must be conferred by an independent third party that uses predetermined pass criteria and specific criteria for entry into the examination process.

|  |  |  |
| --- | --- | --- |
| **Specialty** | **Faculty Member Name** | **Board Certification** |
| Cardiology |  |  |
| Gastroenterology |  |  |
| Hematology |  |  |
| Infectious disease |  |  |
| Nephrology |  |  |
| Oncology |  |  |
| Pulmonary disease |  |  |

1. Are faculty members from the following specialties available to participate in the education of fellows?
2. Anesthesiology [ ] YES [ ] NO
3. Cardiovascular surgery [ ] YES [ ] NO
4. Emergency medicine [ ] YES [ ] NO
5. Neurological surgery [ ] YES [ ] NO
6. Neurology [ ] YES [ ] NO
7. Obstetrics and gynecology [ ] YES [ ] NO
8. Orthopaedic surgery [ ] YES [ ] NO
9. Surgery [ ] YES [ ] NO
10. Thoracic surgery [ ] YES [ ] NO
11. Urology [ ] YES [ ] NO
12. Vascular surgery [ ] YES [ ] NO

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

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**Other Program Personnel**

1. Are services from the following health care professionals available to the program?
2. Technicians or nurses skilled in critical care instrumentation [ ] YES [ ] NO
3. Technicians or nurses skilled in laboratory medicine [ ] YES [ ] NO
4. Technicians or nurses skilled in respiratory function [ ] YES [ ] NO

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

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**Resources**

* + 1. How does the Sponsoring Institution provide a broad range of facilities and clinical support services required to provide comprehensive care of adult patients? (Limit 400 words)

|  |
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* + 1. Are facilities available to care for patients with or following:
1. myocardial infarction? [ ] YES [ ] NO
2. neurosurgical conditions? [ ] YES [ ] NO
3. recent abdominal surgery? [ ] YES [ ] NO
4. recent major thoracic surgery? [ ] YES [ ] NO
5. recent open-heart surgery? [ ] YES [ ] NO
6. severe neurologic conditions? [ ] YES [ ] NO
7. severe trauma? [ ] YES [ ] NO
8. shock? [ ] YES [ ] NO

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

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| Click here to enter text. |

* + 1. Are the following laboratory and diagnostic services available at the primary clinical site?
1. A supporting laboratory providing complete and prompt laboratory evaluation [ ] YES [ ] NO
2. Bedside ultrasound [ ] YES [ ] NO
3. Computed tomography (CT) angiography [ ] YES [ ] NO
4. CT imaging [ ] YES [ ] NO
5. Echocardiogram [ ] YES [ ] NO
6. Portable chest x-ray (CXR) [ ] YES [ ] NO

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

|  |
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| Click here to enter text. |

* + 1. Are the following support services available to the program?
1. An active open heart surgery program [ ] YES [ ] NO
2. Anesthesiology [ ] YES [ ] NO
3. Emergency department [ ] YES [ ] NO
4. Nutrition [ ] YES [ ] NO
5. Post-operative care [ ] YES [ ] NO
6. Radiology [ ] YES [ ] NO
7. Respiratory care [ ] YES [ ] NO

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

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* + 1. Whether operating in separate locations or in combined facilities, are the following critical care units located in a designated area within the hospital and constructed and designed specifically for the care of critically ill patients?
1. Coronary intensive care unit (CICU) [ ] YES [ ] NO
2. Medical intensive care unit (MICU) [ ] YES [ ] NO
3. Surgical intensive care unit (SICU) [ ] YES [ ] NO

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

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* + 1. Does the MICU or its equivalent at the primary clinical site serve as the focus of the teaching service?

 [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

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* + 1. Using site numbers as assigned in ADS, complete the table below indicating the average daily patient census for the most recent 12-month period for each intensive care service at each participating site. *Note that Site #1 is the primary clinical site.*

Average daily census for the period from \_\_\_\_\_ to \_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| Participating Site Number in ADS | MICU | SICU | CICU |
| Average Daily Census | % Female | % Over 65 Years  | Average Daily Census | % Female | % Over 65 Years | Average Daily Census | % Female | % Over 65 Years |
| Site #1 *Primary clinical site* |  |  |  |  |  |  |  |  |  |
| Site #2 |  |  |  |  |  |  |  |  |  |
| Site #3 |  |  |  |  |  |  |  |  |  |
| Site #4 |  |  |  |  |  |  |  |  |  |
| Site #5 |  |  |  |  |  |  |  |  |  |

If additional sites are used, indicate the average daily patient census for the most recent 12-month period (same period as noted for the table above) for each intensive care service at each site. (Limit 250 words)

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* + 1. Do fellows have access to an electronic health record (EHR) at each participating site? [ ] YES [ ] NO

Explain if ‘NO,’ explain (Limit 250 words)

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* + 1. What types of clinical problems and stages of diseases do fellows encounter during their educational program? (Limit 400 words)

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**Eligibility Criteria**

1. How does the program ensure that all fellows appointed at the F1 level have completed an ACGME-I-accredited internal medicine residency program, or an emergency medicine or internal medicine residency program acceptable to the Sponsoring Institution’s Graduate Medical Education Committee (GMEC)? (Limit 300 words)

|  |
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1. Have all fellows who completed a program in emergency medicine also completed at least six months of direct patient care experience in internal medicine, of which three months were in the MICU?
 [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

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1. How does the program ensure that all fellows appointed at the F2 level have completed an ACGME-I-, accredited internal medicine subspecialty program or another internal medicine subspecialty program acceptable to the Sponsoring Institution’s GMEC? (Limit 300 words)

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1. Does the program consider fellows appointed at the F2 level as having satisfied the requirement for 12 months of elective experience or scholarly activity? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

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**Specialty-Specific Educational Program**

**ACGME-I Competencies**

**Professionalism**

1. How do graduating fellows demonstrate a commitment to carrying out professional responsibilities, an adherence to ethical principles, and high standards of ethical behavior, including maintaining appropriate professional boundaries and relationships with other physicians and other health care team members and avoiding conflicts of interest? (Limit 300 words)

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**Patient Care and Procedural Skills**

1. How do graduating fellows demonstrate the ability to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health? (Limit 300 words)

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1. How do graduating fellows demonstrate competence in providing care:
2. in a variety of health care settings, including inpatient and various ambulatory settings?
3. using critical thinking and evidence-based tools?
4. using population-based data?

Describe how competence is evaluated in each of the areas listed. (Limit 400 words)

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1. How do graduating fellows demonstrate competence in prevention, evaluation, and management of patients with the following?

Acute lung injury, including radiation, inhalation, and trauma

Acute metabolic disturbances, including overdosages and intoxication syndromes

Anaphylaxis and acute allergic reactions in the critical care unit

Cardiovascular disease in the critical care unit

Circulatory failure

End-of-life issues and palliative care

Hypertensive emergencies

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

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1. How do graduating fellows demonstrate competence in prevention, evaluation, and management of patients with the following?
2. Hematologic and coagulation disorders associated with critical illness
3. Immunosuppressed conditions in the critical care unit
4. Metabolic, nutritional, and endocrine effects of critical illness
5. Multi-system organ failure
6. Peri-operative critical illness, including for those patients requiring hemodynamic and ventilator support
7. Renal disorders in the critical care unit, including electrolyte and acid-base disturbance and acute renal failure
8. Respiratory failure, including acute respiratory distress syndrome, acute and chronic respiratory failure in obstructive lung diseases, and neuromuscular respiratory drive disorders
9. Sepsis and sepsis syndrome

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

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1. How do graduating fellows demonstrate competence in prevention, evaluation, and management of patients with severe organ dysfunction resulting in critical illness, including the following?
2. Disorders of the gastrointestinal, neurologic, endocrine, hematologic, musculoskeletal, and immune systems
3. Infections
4. Malignancies
5. Shock syndromes

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

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1. How do graduating fellows demonstrate competence in interpretation of data derived from various bedside devices commonly employed to monitor patients? (Limit 300 words)

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1. How do graduating fellows demonstrate competence in the following procedural and technical skills?
2. Airway management
3. Humidifiers, nebulizers, and incentive spirometry
4. Initiation, maintenance and weaning off ventilator support
5. Respiratory care techniques
6. The use of a variety of positive pressure ventilator modes
7. Use of reservoir masks and continuous positive airway pressure masks for delivery of supplemental oxygen
8. Withdrawal of mechanical ventilator support

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

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1. How do graduating fellows demonstrate competence in the following procedural and technical skills?
2. Diagnostic aspiration of airway secretions or lavaged fluid or airway management
3. Therapeutic flexible fiber-optic bronchoscopy procedures limited to indications for therapeutic removal of airway secretions

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

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1. How do graduating fellows demonstrate competence in the following diagnostic and therapeutic procedures?
2. Endotracheal intubation
3. Lumbar puncture
4. Paracentesis
5. Thoracentesis

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

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1. How do graduating fellows demonstrate competence in the following procedural and technical skills?
2. Emergency cardioversion
3. Insertion of arterial, central venous, and pulmonary artery balloon flotation catheters
4. Interpretation of intracranial pressure monitoring
5. Nutrition support
6. Operation of bedside hemodynamic monitoring systems
7. Use of chest tubes and drainage systems
8. Use of transcutaneous pacemakers
9. Use of paralytic agents and sedative and analgesic drugs in the critical care unit

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

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1. How do graduating fellows demonstrate competence in critical care ultrasound, including image acquisition interpretation at point of care, and use of ultrasound to place intravascular and intracavitary tubes and catheters. (Limit 300 words)

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**Medical Knowledge**

1. How do 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? (Limit 400 words)

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1. How do graduating fellows demonstrate knowledge of the scientific method of problem solving and evidence-based decision-making? (Limit 300 words)

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1. How do graduating fellows demonstrate knowledge of indications, contraindications, limitations, complications, techniques, and interpretation of results of those diagnostic and therapeutic procedures integral to the discipline, including the appropriate indication for and use of screening tests and procedures to include:
	1. imaging techniques commonly employed in the evaluation of patients with critical illness, including ultrasound;
	2. pericardiocentesis;
	3. placement of percutaneous tracheostomies;
	4. renal replacement therapy; and,
	5. technical and procedural use of ultrasound and interpretation of ultrasound images?

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

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1. How do graduating fellows demonstrate knowledge of the following?
	1. Detection and prevention of iatrogenic and nosocomial problems in critical care medicine
	2. Pharmacokinetics, pharmacodynamics, and drug metabolism and excretion in critical illness
	3. Basic sciences with particular emphasis on biochemistry and physiology, including cell and molecular biology and immunology as they relate to critical care medicine
	4. Ethical, economic, and legal aspects of critical illness
	5. Psychosocial and emotional effects of critical illness on patients and patients’ families
	6. Recognition and management of patients critically ill from disasters, including those caused by chemical and biological agent inhalation and trauma
	7. Use of paralytic agents and sedative and analgesic drugs in the critical care unit

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

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1. How do graduating fellows demonstrate knowledge of monitoring and supervising special services, including respiratory care techniques and services? (Limit 400 words)

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**Practice-Based Learning and Improvement**

* + - 1. How do 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? (Limit 300 words)

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How do graduating fellows demonstrate their ability to obtain procedure-specific informed consent by competently educating patients about rationale technique and complications of procedures? (Limit 300 words)

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**Interpersonal and Communication Skills**

1. How do graduating fellows demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, patients’ families, and other health professionals? (Limit 300 words)

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| Click here to enter text. |

**Systems-Based Practice**

1. How do 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? (Limit 300 words)

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1. How do graduating fellows demonstrate their ability to participate in quality improvement and patient safety activities in the intensive care unit? (Limit 300 words)

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1. How do graduating fellows demonstrate their ability to organize, administer, and direct a critical care unit? (Limit 300 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. Does the didactic curriculum include the following?
3. At least one faculty member at each session [ ] YES [ ] NO
4. Clinical case conferences [ ] YES [ ] NO
5. Core knowledge content in the subspecialty area [ ] YES [ ] NO
6. Fellow-to-fellow and fellow-to-faculty member interaction [ ] YES [ ] NO
7. Journal clubs [ ] YES [ ] NO
8. Morbidity and mortality conferences [ ] YES [ ] NO
9. Quality improvement conferences [ ] YES [ ] NO
10. Research conferences [ ] YES [ ] NO
11. Practice management relevant to critical care medicine [ ] YES [ ] NO

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

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| Click here to enter text. |

1. How does the program ensure fellows have an opportunity to review topics covered during conferences they were unable to attend? (Limit 300 words)

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**Clinical Experiences**

1. How does the program ensure that rotations are structured to:
2. allow fellows to function as part of an effective interprofessional team;
3. minimize conflicting inpatient and outpatient responsibilities;
4. minimize the frequency of transitions;
5. provide continuity of patient care;
6. provide ongoing supervision of fellows; and,
7. provide meaningful assessment and feedback?

Describe how this is achieved. (Limit 300 words)

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1. How does the program ensure each fellow has a minimum of 12 months devoted to clinical experiences? (Limit 300 words)

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1. Are at least six months of the educational program devoted to the care of critically ill medical patients? [ ] YES [ ] NO

Note: This experience may be reduced up to three months by an equivalent ICU experience completed during a previous two- or three-year ACGME-I-accredited internal medicine subspecialty fellowship.

Explain if ‘NO.’ (Limit 250 words)

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1. Are at least three months of the educational program devoted to the care of critically ill non-medical patients? [ ] YES [ ] NO

Note: This experience should consist of at least one month of direct patient care with the remainder being fulfilled in either consultative activities or direct care of patients.

Explain if ‘NO.’ (Limit 250 words)

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1. Are at least 12 months of the educational program devoted to appropriate electives or scholarly activities? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

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1. How does the program ensure each fellow participates in training using simulation? (Limit 300 words)

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1. How does the program ensure the fellows will be informed of the clinical outcomes of their patients who are discharged from the critical care units? (Limit 300 words)

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1. Do all fellows have clinical experience in the evaluation and management of patients:
2. after discharge from the critical care unit? [ ] YES [ ] NO
3. with critical obstetric and gynecological disorders? [ ] YES [ ] NO
4. with neurosurgical emergencies? [ ] YES [ ] NO
5. with trauma? [ ] YES [ ] NO
6. with tracheostomies? [ ] YES [ ] NO

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

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| Click here to enter text. |

1. Do all fellows have experience in the role of critical care medicine consultant in the inpatient setting?

 [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

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| Click here to enter text. |

**Scholarly Activity**

**Fellow Scholarly Activity**

How does the program ensure that all fellows engage in scholarly activity? (Limit 300 words)

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**The Learning and Working Environment**

**Supervision and Accountability**

1. How does the program ensure that direct supervision of procedures performed by each fellow occurs until competence has been acquired and documented by the program director? (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 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 a site is listed*.

Number sessions **consecutively** from the first year through the final year so that 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-101. Introduction to Critical Care Medicinea) Seminarb) Required Y-1c) Survey of contemporary methods and styles of critical care, including approaches to clinical work with minority populationsd) Weekly, for 8 sessions02. Departmental Grand Roundsa) Discussion groupsb) 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 fellows’ 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. |