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

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**Introduction**

**Duration and Scope of Education**

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

1. Are there programs in the following ACGME-I-accredited subspecialties at the primary clinical site?
2. Cardiovascular disease YES NO
3. Gastroenterology YES NO
4. Infectious disease YES NO
5. Nephrology YES NO
6. Pulmonary disease 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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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. How does the program director participate in academic societies and educational programs designed to enhance educational and administrative skills? (Limit 300 words)

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**Faculty**

1. List the core faculty members.

|  |  |
| --- | --- |
| Core Faculty Member Name | Title |
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1. Regarding the core faculty members listed above:
2. are they committed to critical care medicine as a discipline? YES NO
3. are they responsible for evaluating the clinical and research education? YES NO
4. are they responsible for implementing the curriculum? YES NO
5. are they responsible for monitoring the curriculum? YES NO
6. are they responsible for planning the curriculum? YES NO
7. do they have experience in critical care medicine? YES NO
8. do they have 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? (Limit 250 words)

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1. Which of the core faculty members spend significant time evaluating fellows, including direct observation of fellows with patients? (Limit 250 words)

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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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| Click here to enter text. |

**Other Program Personnel**

1. Are services from the following health care professionals available to the program?
2. Dietitians YES NO
3. Language interpreters YES NO
4. Nurses YES NO
5. Occupational therapists YES NO
6. Physical therapists YES NO
7. Social workers YES NO
8. Technicians or nurses skilled in critical care instrumentation YES NO
9. Technicians or nurses skilled in laboratory medicine YES NO
10. Technicians or nurses skilled in respiratory function ` YES NO

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

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| Click here to enter text. |

1. How does the program ensure appropriate and timely consultation from other specialties? (Limit 300 words)

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**Resources**

* + 1. Using site numbers assigned to each participating site in ADS, check the appropriate box to indicate the resources provided at each. *Note that Site #1 is the primary clinical site.*

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Participating Site Number in ADS | Meeting Rooms | | Examination Rooms | | Computer | | Visual Aids and Other Education  Resources | | Work/ Study Space | | Lounge Facility | | Secure Place for Fellows’ Belongings | |
| YES | NO | YES | NO | YES | NO | YES | NO | YES | NO | YES | NO | YES | NO |
| Site #1 *Primary clinical site* |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Site #2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Site #3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Site #4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Site #5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

If additional sites are used, describe the resources available at each site. (Limit 250 words)

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| Click here to enter text. |

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

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* + 1. How does the program ensure inpatient and outpatient systems are in place to prevent fellows from performing routine clerical functions, such as scheduling tests and appointments and retrieving records and letters? (Limit 300 words)

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| Click here to enter text. |

* + 1. How does the program ensure the Sponsoring Institution provides 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 the 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. Computed tomography angiography YES NO
3. CT imaging YES NO
4. Bedside imaging services in the critical care units YES NO

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

|  |
| --- |
| 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 service YES NO
4. Nutrition support services YES NO
5. Post-operative care services YES NO
6. Radiology YES NO
7. respiratory care services YES NO

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

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| Click here to enter text. |

* + 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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| Click here to enter text. |

* + 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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| Click here to enter text. |

* + 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

If ‘NO,’ explain the commitment to develop an EHR. (Limit 250 words)

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* + 1. What types of clinical problems and stages of diseases do fellows encounter. (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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| Click here to enter text. |

**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?

Describe how these skills are evaluated. (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?

Describe how this is evaluated. (Limit 300 words)

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1. How do graduating fellows demonstrate competence in the practice of health promotion, disease prevention, diagnosis, care, and treatment of patients of all genders, from adolescence to old age, during health and all stages of illness?

Describe how competence is evaluated. (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?

Describe how this is evaluated. (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 does the program ensure each fellow performs a minimum of 50 therapeutic flexible fiber-optic bronchoscopy procedures? (Limit 250 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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| Click here to enter text. |

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 ultrasound techniques to perform thoracentesis and placement of intravascular and intracavity tubes and catheters

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

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| Click here to enter text. |

**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?

Describe how knowledge is evaluated. (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 the following?
   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
   5. Screening tests and procedures

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. The basic sciences with particular emphasis on biochemistry and physiology, including cell and molecular biology and immunology as they relate to critical care medicine
   3. The ethical, economic, and legal aspects of critical illness
   4. The psychosocial and emotional effects of critical illness on patients and their families
   5. The recognition and management of patients critically ill from disasters, including those caused by chemical and biological agent inhalation and trauma
   6. The 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 the following?
   1. Pharmacokinetics, pharmacodynamics, and drug metabolism and excretion in critical illness
   2. Respiratory care techniques and services

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

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| Click here to enter text. |

**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?

Describe how these skills are evaluated. (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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| Click here to enter text. |

**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, their families, and health professionals?

Describe how these skills are evaluated. (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?

Describe how these skills are evaluated. (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?

Describe how these skills are evaluated. (Limit 300 words)

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1. How do graduating fellows demonstrate their ability to organize, administer, and direct a critical care unit?

Describe how these skills are 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. 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. Journal clubs YES NO
7. Morbidity and mortality conferences YES NO
8. Quality improvement conferences YES NO
9. Research conferences YES NO
10. Peer-peer and peer-faculty member interaction 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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1. Is patient-based teaching provided? YES NO

Explain if ‘NO.’ (Limit 250 words)

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If ‘YES,’ does the patient-based teaching include the following?

1. Bedside teaching YES NO
2. Direct interaction between fellows and faculty members YES NO
3. Discussion of pathophysiology YES NO
4. Use of current evidence in diagnostic and therapeutic decisions YES NO

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

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| Click here to enter text. |

1. Is patient-based teaching conducted on the following?
2. All consultative services YES NO
3. Inpatient services YES NO
4. Outpatient services YES NO

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

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| Click here to enter text. |

1. How does the program ensure that patient-based teaching is conducted with a frequency and duration that ensures a meaningful and continuous teaching relationship between the assigned supervising faculty member(s) and fellows? (Limit 400 words)

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**Clinical Experiences**

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 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 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 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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| Click here to enter text. |

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

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

|  |
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| Click here to enter text. |

1. Are procedures documented in each fellow’s record, including indications, outcomes, diagnoses, and supervisor? YES NO

Explain if ‘NO.’ (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. |

1. Do all fellows have clinical experience in the placement of percutaneous tracheostomies?

YES NO

Explain if ‘NO.’ (Limit 250 words)

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| Click here to enter text. |

**Scholarly Activity**

**Faculty Scholarly Activity**

1. How does the program ensure that at least 50 percent of the core faculty members demonstrate productivity in scholarship, including peer-reviewed funding, publication of original research, review articles, editorials or case reports in peer-reviewed journals, or chapters in textbooks? (Limit 300 words)

|  |
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| Click here to enter text. |

**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-1  01. Introduction to Critical Care Medicine  a) Seminar  b) Required Y-1  c) Survey of contemporary methods and styles of critical care, 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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