**New Application: Orthopaedic Surgery**

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 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 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 forms are 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 Orthopaedic Surgery. 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 your program number in the subject line).

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| Program Name: Click here to enter text. |

**Table of Contents**

When the forms are completed, **number each page sequentially in the bottom center**. Report this pagination in the Table of Contents and submit this cover page with the completed application.

|  |  |
| --- | --- |
| **Advanced Specialty New Application**  | **Page(s)**  |
| **Int. Introduction** | #  |
| Duration of Education  | # |
| **I. Institution** | # |
| I.A. Sponsoring Institution  | # |
| I.B. Participating Sites  | NA   |
| **II. Program Personnel and Resources** | # |
| II.A. Program Director  | NA |
| II.B. Faculty  | NA |
| II.C. Other Program Personnel  | NA  |
| II.D. Resources  | #  |
| **III. Resident Appointment** | NA |
| **IV. Specialty-Specific Educational Program** | # |
| IV.A. ACGME-I Competencies | # |
| IV.B. Regularly Scheduled Educational Activities | # |
| IV.C. Clinical Experiences  | # |
| IV.D. Scholarly Activity | NA |
| **V. Evaluation** | NA |
| **VI. The Learning and Working Environment** | # |
| VI.A. Principles | NA |
| VI.B. Patient Safety | NA |
| VI.C. Quality Improvement | NA |
| VI.D. Supervision and Accountability | NA |
| VI.E. Professionalism | NA |
| VI.F. Well-Being | NA |
| VI.G. Fatigue | NA |
| VI.H. Transitions of Care | NA |
| VI.I. Clinical Experience and Education | # |
| VI.J. On-Call Activities | NA |
| Appendix A. Formal Didactic Sessions by Academic Year  | # |
| Appendix B. Patient Population Data  | # |

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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**

Will the Sponsoring Institution also sponsor ACGME-I-accredited programs in the following specialties?

General surgery [ ] YES [ ] NO

Internal medicine [ ] YES [ ] NO

Pediatrics [ ] YES [ ] NO

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

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**Program Personnel and Resources**

**Resources**

* + - 1. Explain how the program will ensure there are clinical problems of sufficient variety and volume to afford the residents adequate experience in the diagnosis and management of adult and pediatric orthopaedic disorders. (Limit 300 words)

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* + - 1. Will the following resources for scholarly activity be accessible to residents?
				1. Computer and data analysis services [ ] YES [ ] NO
				2. Faculty expertise and supervision [ ] YES [ ] NO
				3. Funding for resident research [ ] YES [ ] NO
				4. Laboratory equipment [ ] YES [ ] NO
				5. Laboratory space [ ] YES [ ] NO
				6. Research conferences [ ] YES [ ] NO
				7. Statistical consultation services [ ] YES [ ] NO
				8. Support personnel [ ] YES [ ] NO
				9. Time for resident research [ ] YES [ ] NO

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

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**Specialty-Specific Educational Program**

**ACGME Competencies**

**Professionalism**

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

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

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1. How will graduating residents demonstrate the following?
2. Compassion, integrity, and respect for others
3. Responsiveness to patient needs that supersedes self-interest
4. Respect for patient privacy and autonomy
5. Accountability to patients, society, and the profession
6. 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 skill will be evaluated in three of the five areas listed. (Limit 300 words)

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**Patient Care and Procedural Skills**

1. How will 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 will be evaluated. (Limit 300 words)

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1. How will graduating residents demonstrate competence in the following?
	1. Pre-admission, hospital, operative, and follow-up care (including rehabilitation) of patients
	2. Gathering essential and accurate information about their patients
	3. Making informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgement
	4. Developing and carrying out management plans
	5. Using information technology to support patient care decisions and patient education

Provide examples of how competence will be evaluated in three of the five areas listed.

(Limit 300 words)

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1. How will graduating residents demonstrate competence in performing all medical and invasive procedures essential for the practice of orthopaedic surgery?

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

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1. How will graduating residents demonstrate competence in the following?
2. Applying the basic and clinically supportive sciences that are appropriate to orthopaedic surgery
3. Providing health services aimed at preventing health problems or maintaining health
4. Using investigatory and analytic thinking approach to clinical situations

Provide examples of how competence will be evaluated in two of the three areas listed. (Limit 250 words)

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**Medical Knowledge**

1. How will 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 will be evaluated. (Limit 400 words)

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1. How will graduating residents demonstrate knowledge of the following?
	* 1. Anatomy and physiology of the musculoskeletal system
		2. Biomechanic principles, terminology, and applications to orthopaedics
		3. Bone metabolism
		4. Cartilage, bone, and tendon reparative processes
		5. Orthopaedic oncology
		6. Orthotics and prosthetics
		7. Pathology of the musculoskeletal system including correlative pathology (gross and microscopic pathology related to clinical and roentgenographic findings)
		8. Rehabilitation of neurologic injury and disease
		9. Spinal cord injury rehabilitation
		10. The appropriate use and interpretation of radioigraphic and other imaging techniques

Provide examples of how knowledge will be evaluated in six of the 10 areas listed. (Limit 600 words)

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**Practice-based Learning and Improvement**

1. How will graduating residents 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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1. How will 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. Participate in the education of patients, patients’ families, students, other residents, and other health professionals
7. Set learning and improvement goals
8. Systematically analyze clinical practice using quality improvement methods, and implement changes with the goal of practice improvement
9. Use information technology to optimize learning

Provide examples of how skill will be evaluated in five of the eight areas listed. (Limit 500 words)

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**Interpersonal and Communication Skills**

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

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

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How will graduating residents demonstrate their ability to:

1. communicate effectively with patients, patients’ families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds;
2. communicate effectively with physicians, other health professionals, and health-related agencies;
3. work effectively as a member or leader of a health care team or other professional group;
4. act in a consultative role to other physicians and health professionals; and,
5. maintain comprehensive, timely, and legible medical and administrative records?

Provide examples of how skill will be evaluated in three of the five areas listed. (Limit 300 words)

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| Click here to enter text. |

**Systems-based Practice**

1. How will 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 these skills will be evaluated. (Limit 300 words)

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

Provide examples of how skill will be evaluated in four of the six areas listed. (Limit 400 words)

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**Regularly Scheduled Educational Activities**

1. Complete Appendix A., Formal Didactic Sessions by Academic Year, and attach to submission.
2. How will the program ensure there are at least four hours of formal teaching activities each week? (Limit 300 words)

|  |
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| Click here to enter text. |

1. Will residents have instruction in basic motor skills? [ ] YES [ ] NO
2. If ‘YES,’ will this instruction include the following?

Operative techniques [ ] YES [ ] NO

Proper use of surgical instruments [ ] YES [ ] NO

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

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1. Will residents have instruction in anatomy? [ ] YES [ ] NO
2. If ‘YES,’ will this instruction include the following?
3. Lectures or other formal sessions [ ] YES [ ] NO
4. Study and dissection of anatomic specimens [ ] YES [ ] NO

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

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| Click here to enter text. |

1. Will residents have instruction in biomechanics? [ ] YES [ ] NO
2. If ‘YES,’ will this instruction include the following?
3. Application of biomechanics to orthopaedics [ ] YES [ ] NO
4. Principles of biomechanics [ ] YES [ ] NO
5. Terminology of biomechanics [ ] YES [ ] NO

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

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| Click here to enter text. |

1. Will residents have instruction in radiographic and other imaging techniques? [ ] YES [ ] NO
2. If ‘YES,’ will this instruction include the following?
3. Interpretation of radiographic and imaging [ ] YES [ ] NO
4. Use of radiographic and imaging techniques [ ] YES [ ] NO

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

|  |
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| Click here to enter text. |

1. Will residents have instruction in the following?
2. Ethics of medical practice resources [ ] YES [ ] NO
3. Orthopaedic oncology [ ] YES [ ] NO
4. Orthotics and prosthetics [ ] YES [ ] NO
5. Rehabilitation of neurologic injury and disease [ ] YES [ ] NO
6. Spinal cord injury rehabilitation [ ] YES [ ] NO

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

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| Click here to enter text. |

1. Will the following take place at the primary clinical site?
	1. Basic science education [ ] YES [ ] NO
	2. Education on basic genetics [ ] YES [ ] NO
	3. Education on biomaterials [ ] YES [ ] NO
	4. Education on biomechanics [ ] YES [ ] NO
	5. Education on biophosphonates and antimicrobials [ ] YES [ ] NO
	6. Education on pathophysiology of cartilage, bone, tendon, and muscle [ ] YES [ ] NO
	7. Education on pharmacology of non-sterioidal anti-inflammatory drugs (NSAIDs) [ ] YES [ ] NO
	8. Principal clinical conferences [ ] YES [ ] NO

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

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1. How will the program ensure residents will have organized instruction that links the pathophysiologic processes to the diagnosis, treatment, and management of clinical disorders? (Limit 300 words)

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14 Will evaluation of new or experimental techniques and/or materials be included in the residents’ didactic program? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

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**Clinical Experiences**

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

How will the program director maintain responsibility for the design, implementation, and oversight of the PGY-1? (Limit 300 words)

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Will the PGY-1 include six months of structured education on non-orthopaedic surgery rotations?

 [ ] YES [ ] NO

If ‘YES,’ are the rotations designed to foster development of competence in the following?

Airway management skills [ ] YES [ ] NO

Basic surgical skills [ ] YES [ ] NO

Medical management of patients [ ] YES [ ] NO

Musculoskeletal image interpretation [ ] YES [ ] NO

Peri-operative care of surgical patients [ ] YES [ ] NO

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

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Will at least three months of the non-orthopaedic surgery rotations be on surgical rotations in general surgery, general surgery trauma, plastic/burn surgery, surgical or medical intensive care, or vascular surgery? [ ] YES [ ] NO

Will three months of the non-orthopaedic surgery rotations be from among the following: anesthesiology; basic surgical skills; emergency medicine; general surgery; general surgery trauma; internal medicine; medical or surgical intensive care; musculoskeletal radiology; neurological surgery; pediatric surgery; physical medicine and rehabilitation; plastic/burn surgery; rheumatology; and vascular surgery?

 [ ] YES [ ] NO

Explain if ‘NO’ to Questions 4 or 5 above. (Limit 250 words)

|  |
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| Click here to enter text. |

Will a resident be assigned to any one service referenced in Questions 4 or 5 above for longer than two months? [ ] YES [ ] NO

Explain if ‘YES.’ (Limit 250 words)

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How will the program ensure that following the PGY-1, the curriculum includes at least 48 months of progressive education in orthopaedic surgery and clinical services? (Limit 400 words)

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Will residents’ clinical education include extensive experience in the following?

Pre-operative evaluation and decision making [ ] YES [ ] NO

Basic motor skills [ ] YES [ ] NO

Immediate and long-term care of inpatients [ ] YES [ ] NO

Immediate and long-term care of outpatients [ ] YES [ ] NO

Intra-operative treatment [ ] YES [ ] NO

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

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How will the program ensure that each resident will serve as Surgeon or First Assistant for at least 200 cases per year, and see at least 750 outpatients per year? (Limit 400 words)

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Will residents’ clinical experience include involvement in all aspects of care of the same patient?

 [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

|  |
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| Click here to enter text. |

Will residents’ clinical experiences include the following?

Arthroscopic-assisted surgery of the knee [ ] YES [ ] NO

Arthroscopic-assisted surgery of the shoulder [ ] YES [ ] NO

General adult orthopaedics [ ] YES [ ] NO

General pediatric orthopaedics [ ] YES [ ] NO

Orthopaedic oncology, including metastatic disease [ ] YES [ ] NO

Orthopaedic rehabilitation, including amputations and post-amputation care [ ] YES [ ] NO

Pediatric trauma including multisystem trauma [ ] YES [ ] NO

Surgery of the hand [ ] YES [ ] NO

Surgery of the foot [ ] YES [ ] NO

Surgery of the spine [ ] YES [ ] NO

Explain any ‘NO’ responses (Limit 250 words)

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How will the program ensure residents have adequate experience in non-operative outpatient diagnosis and care of adults and children for all orthopaedic anatomic areas? (Limit 400 words)

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Will residents:

evaluate patients before participating in their surgery? [ ] YES [ ] NO

have at least two half-days each week of directly supervised outpatient clinical experience in physician’s offices or hospital outpatient? [ ] YES [ ] NO

see a minimum of 10 patients per clinic session? ? [ ] YES [ ] NO

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

|  |
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| Click here to enter text. |

**The Learning and Working Environment**

**Supervision and Accountability**

* + - 1. How will the program ensure that after 24 hours of continuous duty, residents will not accept any patient for whom the orthopaedic surgery service or department has not previously provided care? (Limit 400 words)

|  |
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Appendix A. Formal Didactic Sessions by Academic Year

For each year of the residency, 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 residents will 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 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 Orthopaedic Surgerya) Seminarb) Required Y-1c) Survey of contemporary methods and styles of orthopaedic surgery, including approaches to clinical work with minority populations.d) Weekly, for 8 sessions.02. Departmental Grand Roundsa) Discussion groupsb) Required, Y-1, Y-2, Y-3; Elective Y-4c) 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 will be monitored, explain how this will be accomplished and how feedback will be given regarding non-attendance. (Limit 250 words)

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**Appendix B. Patient Population Data**

Complete and attach the following tables summarizing the total number of cases completed annually at each of the planned participating sites (Label: Appendix B.). Numbers should reflect total volume at each participating site to which residents will rotate.

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

The data in Table 1 below above is for a one-year period:

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

**Table 1. Annual Cases**

| **CATEGORY** | **Site #1** | **Site #2** | **Site #3** | **Site #4** | **Site #5** | **Site #6** |
| --- | --- | --- | --- | --- | --- | --- |
| Knee arthroscopy |  |  |  |  |  |  |
| Shoulder arthroscopy |  |  |  |  |  |  |
| ACL reconstruction |  |  |  |  |  |  |
| Total Hip Arthroplasty (THA) |  |  |  |  |  |  |
| Total Knee Arthroplasty (TKA) |  |  |  |  |  |  |
| Hip fracture |  |  |  |  |  |  |
| Carpal tunnel release |  |  |  |  |  |  |
| Spine decompression/posterior spine fusion |  |  |  |  |  |  |
| Ankle fracture fixation |  |  |  |  |  |  |
| Closed reduction forearm/wrist |  |  |  |  |  |  |
| Ankle and hind and mid-foot arthroscopy |  |  |  |  |  |  |
| Suparchondylar humerus percutaneous pinning |  |  |  |  |  |  |
| Operative treatment of femoral and tibial shaft fractures |  |  |  |  |  |  |
| All pediatric procedures |  |  |  |  |  |  |
| All oncology procedures |  |  |  |  |  |  |

Required minimum numbers for procedures to be completed by each graduating resident are listed in the table below.

|  |  |
| --- | --- |
| **Category** | **Minimum** |
| Knee arthroscopy | 30 |
| Shoulder arthroscopy | 20 |
| ACL reconstruction | 10 |
| Total Hip Arthroplasty (THA) | 30 |
| Total Knee Arthroplasty (TKA) | 30 |
| Hip fractures | 30 |
| Carpal tunnel release | 10 |
| Spine decompression/posterior spine fusion  | 15 |
| Ankle fracture fixation | 15 |
| Closed reduction forearm/wrist | 20 |
| Ankle and hind and mid-foot arthroscopy | 5 |
| Suprachondylar humerus perc | 5 |
| Operative treatment of femoral and tibial shaft fractures  | 25 |
| All pediatric procedures | 200 |
| All oncology procedures | 10 |
| **Total All Cases** | At least 1,000 but no more than 3,000 cases per resident |