**New Application: Pediatrics**

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 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 of the Sponsoring Institution, who will submit the application electronically in ADS.

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

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

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

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

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**Introduction**

**Duration and Scope of Education**

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

**Program Personnel and Resources**

**Faculty**

Will there be a core faculty member responsible for each required educational unit? YES NO

Explain if ‘NO.’ (Limit 250 words)

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

* + - 1. If ‘YES’ to Question 1 above, will the core faculty member responsible for the following?

Curriculum development YES NO

Ensuring residents are oriented to the rotation YES NO

Ensuring adequate resident supervision YES NO

Ensuring sufficient teaching of residents YES NO

Ensuring faculty members provide timely feedback and evaluation of residents YES NO

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

|  |
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1. Will program leaders and core faculty members participate in faculty development or leadership development each year? YES NO

Explain if ‘NO.’ (Limit 250 words).

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1. How will the program ensure all faculty members involved in the education of residents participate in programs to enhance the effectiveness of their skills as educators? (Limit 350 words)

|  |  |
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1. Will there be faculty members with expertise in general pediatrics who have ongoing responsibility for the care of general pediatric patients? YES NO

Explain if ‘NO.’ (Limit 250 words)

|  |
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| Click here to enter text. |

1. If ‘YES’ to Question 5 above, will these faculty members:
2. participate in formal teaching sessions? YES NO
3. serve as attending physicians for inpatients? YES NO
4. serve as attending physicians for outpatients? YES NO
5. serve as attending physicians for term newborns? YES NO

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

|  |
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| Click here to enter text. |

1. Will there be faculty members with expertise in the following areas?
2. Neonatal-perinatal medicine YES NO
3. Pediatric critical care YES NO
4. Pediatric emergency medicine YES NO

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

|  |
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| Click here to enter text. |

1. Describe the qualifications of other faculty members in subspecialties not noted in Question 7 above. (Limit 350 words)

|  |
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| Click here to enter text. |

1. Will faculty members in the subspecialty areas listed in Questions 7 and 8 above function on an ongoing basis as an integral part of the following?
   1. The clinical components of the program YES NO
   2. The instructional components of the program YES NO
   3. Inpatient care YES NO
   4. Outpatient care YES NO

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

|  |
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1. Will there be at least one physician certified in each of the following specialties who is available for clinical consultation and teaching of residents at the primary clinical site?
   * + - 1. Diagnostic radiology YES NO
         2. Pathology YES NO
         3. Surgery YES NO

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

|  |
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| Click here to enter text. |

1. Describe how faculty members will review and respond to patient volume and acuity as it affects the workload and well-being of residents and the safety of patients. (Limit 300 words)

|  |
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**Resources**

* + - 1. Will the program have access to an intensive care facility? YES NO

Explain if ‘NO.’ (Limit 250 words)

|  |
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| Click here to enter text. |

* + - 1. If ‘YES’ to Question 1 above, will the facility be:
         1. able to provide required experiences for the number of residents in the program YES NO
         2. able to care for a sufficient number of critically ill pediatric patients to provide experience for all residents in the program? YES NO
         3. adequately staffed? YES NO
         4. appropriately equipped? YES NO

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

|  |
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| Click here to enter text. |

* + - 1. Will the program have access to an emergency facility? YES NO

Explain if ‘NO.’ (Limit 250 words)

|  |
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| Click here to enter text. |

* + - 1. If ‘YES’ to Question 3 above, will the facility:
         1. receive pediatric patients transported via an Emergency Medical Services system, if available?

YES NO

* + - * 1. specialize in the care of pediatric patients? YES NO

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

|  |
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**Resident Appointment**

**Number of Residents**

* + - 1. How will the program ensure there is a minimum of four residents per year in the program at all times? (Limit 300 words)

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

**Specialty-Specific Educational Program**

**ACGME-I Competencies**

**Professionalism**

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

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

|  |
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| Click here to enter text. |

1. How will 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 these traits will be assessed in three of the five areas listed. (Limit 300 words)

|  |
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| Click here to enter text. |

1. How will graduating residents demonstrate a commitment to engaging in personal and professional development that will sustain them in balancing a commitment to their profession with a healthy and productive personal life, including the following?
2. Flexibility and maturity in adjusting to change with the capacity to alter one’s own behaviors
3. Healthy responses to stressors
4. Leadership skills that enhance team function
5. Managing conflict between one’s personal and professional responsibilities
6. Self-awareness of one’s own knowledge, skill, and emotional limitations that leads to appropriate help-seeking behaviors
7. Self-confidence that puts patients, patients’ families, and members of the health care team at ease
8. The capacity to accept that ambiguity is part of clinical medicine and to recognize the need for and to utilize appropriate resources in dealing with uncertainty
9. Trustworthiness that makes colleagues feel secure when one is responsible for the care of patients

Provide examples of how these traits will be assessed in five of the eight areas listed. (Limit 500 words)

|  |
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| Click here to enter text. |

1. How will graduating residents demonstrate the following?
2. A commitment to lifelong learning and an attitude of caring derived from humanistic and professional values
3. High standards of ethical behavior, including maintaining appropriate professional boundaries and relationships with other physicians and avoiding conflicts of interest

Describe how these traits will be assessed. (Limit 250 words)

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| Click here to enter text. |

**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 and demonstrate the ability to provide comprehensive medical care to infants, children, and adolescents?

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

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

1. How will graduating residents demonstrate competence in the following?
   1. Gathering essential and accurate information about patients
   2. Organizing and prioritizing responsibilities to provide patient care that is safe, effective, and efficient
   3. Conducting health supervision, minor sick and acute severe illness encounters and managing complex or chronic conditions
   4. Interviewing patients and patients’ families about the medical condition for which they seek care

Provide examples of how competence will be assessed in two of the four areas listed. (Limit 200 words)

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| Click here to enter text. |

1. How will graduating residents demonstrate competence in the following?
   1. Developing and implementing management plans
   2. Incorporating consideration of the impacts of social determinants of health and advocating for social justice
   3. Making informed diagnostic and therapeutic decisions that result in optimal clinical judgement
   4. Performing complete and accurate physical exams
   5. Providing appropriate role modeling
   6. Providing effective health maintenance and anticipatory guidance

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

|  |
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| Click here to enter text. |

1. How will graduating residents demonstrate competence in the following?
   1. Assessing growth and development from birth through the transition to adult
   2. Identifying and managing common behavioral/mental health conditions of childhood
   3. Providing medical care that addresses concerns of groups of patients
   4. Recognizing normal variations in growth, development, and wellness, and anticipating, preventing, and detecting disruptions in health and well-being
   5. Referring patients who require consultation, including those with surgical concerns
   6. Resuscitating, stabilizing, and triaging patients to align care with severity of illness

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

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| Click here to enter text. |

1. How will graduating residents demonstrate competence after participation in real or simulated end-of-life care coordination and grief and bereavement management? (Limit 250 words)

|  |
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| Click here to enter text. |

1. How will graduating residents demonstrate competence in performing all medical, diagnostic, and therapeutic procedures considered essential for pediatric practice in the country or jurisdiction, including the following?
2. Developmental screening
3. Giving immunizations
4. Lumbar puncture
5. Neonatal delivery room stabilization
6. Peripheral intravenous catheter placement

Provide examples of how competence will be assessed for each of the procedures listed. (Limit 500 words)

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| Click here to enter text. |

1. How will graduating residents demonstrate competence in advanced life support skills in pediatrics and neonates? (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 these knowledge will be evaluated. (Limit 400 words)

|  |
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| Click here to enter text. |

1. How will graduating residents 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/procedures? (Limit 300 words)

|  |
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| Click here to enter text. |

1. How will graduating residents demonstrate knowledge of the following?
2. Diagnosis and management of common presentations
3. Evaluation and management of patients following traumatic injury during pediatric intensive care experience
4. Presentation and management of isolated and multi-organ system failure and assessment of its reversibility
5. Selection and interpretation of screening tests and tools
6. The full spectrum of inpatient and outpatient care of well and sick children and adolescents

Provide examples of how knowledge will be assessed for three of the five areas listed. (Limit 300 words)

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| Click here to enter text. |

1. How will graduating residents demonstrate knowledge of the following?
2. Evaluation and management of adolescent patients
3. Family structure, adoption, and foster care
4. Interviewing parents and children
5. Normal and abnormal child behavior and development
6. Psychosocial and developmental screening techniques

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

|  |
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| Click here to enter text. |

1. How will graduating residents demonstrate knowledge of the following?
2. Management strategies for children with developmental disabilities or special needs
3. Needs of children at risk (e.g., those in poverty, those from fragmented or substance-abusing families, or victims of child abuse/neglect)
4. The impact of chronic diseases, terminal conditions, and death on patients and patients’ families

Provide examples of how knowledge will be assessed in two of the three areas listed. (Limit 200 words)

|  |
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| Click here to enter text. |

1. How will graduating residents demonstrate knowledge of the following?
   * 1. Evidence-based guidelines that inform care
     2. Components of quality improvement and patient safety
     3. Medication side effects and identification of adverse events

Provide examples of how knowledge will be assessed in two of the three areas listed. (Limit 200 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 life-long learning?

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

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| Click here to enter text. |

1. How will graduating residents demonstrate they have developed skills and habits to be able to meet the following goals?
2. Apply new knowledge to the management and care of patients
3. Identify strengths, deficiencies, and limits in one’s knowledge and expertise
4. Incorporate formative evaluation feedback into daily practice
5. Locate, appraise, and assimilate evidence from scientific studies related to their patients’ health problems
6. Obtain procedure-specific informed consent by competently educating patients about the rationale, technique, and complications of procedures
7. Participate in the education of patients, patients’ families, students, other residents, and other health professionals
8. Participate in the education of students, other residents, and other health professionals
9. Set learning and improvement goals
10. Systematically analyze clinical practice using quality improvement methods, and implement changes with the goal of practice improvement
11. Take primary responsibility for lifelong learning to improve knowledge, skills, and practice performance through familiarity with general and experience-specific goals and objectives and attendance at conferences
12. Use information technology to optimize learning

Provide examples of how these skills will be assessed in six of the 11 areas listed. (Limit 600 words)

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| Click here to enter text. |

**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, patients’ families, and other health professionals?

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

|  |
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| Click here to enter text. |

1. How will graduating residents demonstrate their ability to:
   1. act in a consultative role to other physicians and health professionals;
   2. communicate effectively with patients, patients’ families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds;
   3. communicate effectively with physicians, other health professionals, and health-related agencies;
   4. demonstrate the insight and understanding into emotion and human response to emotion that allows one to appropriately develop and manage human interactions;
   5. maintain comprehensive, timely, and legible medical and administrative records;
   6. provide appropriate supervision; and,
   7. work effectively as a member or leader of a health care team or other professional group?

Provide examples of how these skills will be assessed in four of the seven areas listed. (Limit 400 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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| Click here to enter text. |

2. How will graduating residents demonstrate their ability to:

1. advocate for the promotion of health and the prevention of disease and injury in populations;
2. advocate for quality patient care and optimal patient care systems;
3. collaborate with community organizations, including schools and/or leaders in health care systems to improve health care and well-being of patients;
4. coordinate patient care within the health care system relevant to their clinical specialty;
5. incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population-based care as appropriate;
6. participate in identifying system errors and implementing potential systems solutions;
7. provide transfer of care that ensures seamless transitions;
8. work effectively in various health care delivery settings and systems relevant to their clinical specialty; and,
9. work in interprofessional teams to enhance patient safety and improve patient care quality?

Provide examples of how these traits will be assessed in five of the nine areas listed. (Limit 500 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. Will the didactic program be based on the core knowledge content areas in pediatrics? YES NO

Explain if ‘NO.’ (Limit 250 words)

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

1. Will all required core conferences include the following?
2. At least one faculty member present YES NO
   * + - 1. Peer-faculty member interaction YES NO
         2. Peer-peer interaction YES NO

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

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

1. Will patient-based teaching:

include direct interaction between residents and attending physicians? YES NO

include bedside teaching? YES NO

include discussion of pathophysiology? YES NO

include the use of current evidence in diagnostic and therapeutic decisions? YES NO

occur on all inpatient services? YES NO

occur on all consultative services? YES NO

occur with a frequency and duration to ensure a meaningful and continuous teaching relationship between supervising faculty members and residents? YES NO

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

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

**Clinical Experiences**

1. Complete Appendix B., Patient Population Data and attach to submission.
2. Will the program be structured to provide at least 30 months of required education at the primary clinical site and other participating sites? YES NO

Explain if ‘NO.’ (Limit 250 words)

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

1. How will the program ensure that assignment of rotations are structured to minimize the frequency of rotational transitions, and are of sufficient length to provide a quality educational experience that allows for continuity of patient care, ongoing supervision, and longitudinal relationships with faculty members. (Limit 250 words)

|  |
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| Click here to enter text. |

1. How will the program organize the curriculum as educational units. as a block of at least four weeks, or as a longitudinal experience? (Limit 400 words)

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

1. Will the curriculum include the following?

An inpatient education unit of at least 200 hours YES NO

An outpatient educational unit of at least 32 half-day sessions YES NO

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

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

1. Will residents act in a supervisory role, under faculty member guidance, for at least five educational units during the last 24 months of their educational program? YES NO

Explain if ‘NO.’ (Limit 250 words)

|  |
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| Click here to enter text. |

1. How will the program ensure all residents have an individualized curriculum determined by their learning needs and career plans? (Limit 350 words)

|  |
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| Click here to enter text. |

1. Will the program include a minimum of 10 educational units of inpatient care experiences? YES NO

Explain if ‘NO.’ (Limit 250 words)

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

1. If ‘YES’ to Question 8 above, will there be:
2. six educational units of inpatient medicine? YES NO
3. a minimum of four educational units of general pediatrics or pediatric hospital medicine? YES NO
4. no more than one educational unit devoted to the care of patients in a single subspecialty? YES NO
5. one educational unit in term newborn care? YES NO
6. three educational units of critical care to include at least one educational in the pediatric critical care unit (PICU) and one educational unity in the neonatal intensive care unit (NICU)? YES NO

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

|  |
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| Click here to enter text. |

1. For a 36-month program, will critical care experiences not exceed six educational units? For a 48-month program will critical care experiences not exceed eight educational units? YES NO

Explain if ‘NO.’ (Limit 250 words)

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

1. Will the program include a minimum of nine educational units of subspecialty experiences, including the following?
2. At least one unit of adolescent medicine YES NO
3. At least one unit of developmental-behavioral pediatrics YES NO

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

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

1. If ‘YES’ to Question 11 above, complete the table below.

|  |  |  |
| --- | --- | --- |
| Pediatric Subspecialty Area | If experiences are provided in the subspecialty area, indicate the number of educational units | Check if experiences *are not* provided in the subspecialty area |
| Child abuse | # |  |
| Medical genetics | # |  |
| Allergy and immunology | # |  |
| Cardiology | # |  |
| Dermatology | # |  |
| Endocrinology | # |  |
| Gastroenterology | # |  |
| Hematology-oncology | # |  |
| Infectious diseases | # |  |
| Nephrology | # |  |
| Neurology | # |  |
| Pulmonology | # |  |
| Rheumatology | # |  |
| **Total** | # |  |

1. If ‘YES’ to Question 11 above, complete the table below.

|  |  |  |
| --- | --- | --- |
| Pediatric Subspecialty Area | If experiences are provided in the subspecialty area, indicate the number of educational units | Check if experiences *are not* provided in the subspecialty area |
| Child and adolescent psychiatry | # |  |
| Hospice and palliative medicine | # |  |
| Neurodevelopmental disabilities | # |  |
| Anesthesiology | # |  |
| Dentistry | # |  |
| Ophthalmology | # |  |
| Orthopaedic surgery | # |  |
| Otolaryngology | # |  |
| Rehabilitative medicine | # |  |
| Radiology | # |  |
| Surgery | # |  |
| Sleep medicine | # |  |
| Sports medicine | # |  |
| **Total** | # |  |

1. Will the program include a minimum of 10 educational units of primarily ambulatory experiences?

YES NO

Explain if ‘NO.’ (Limit 250 words)

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

1. If ‘YES’ to Question 14 above:
   1. will two of these educational units of ambulatory experiences include ambulatory pediatric clinic experience? YES NO
   2. will one educational unit be in subspecialty outpatient experience in not fewer than two subspecialties? YES NO
   3. will three educational units include pediatric emergency medicine and acute illness? YES NO
   4. will at least two educational units in pediatric emergency medicine occur in the emergency department? YES NO
2. will emergency department experiences allow residents to provide first-contact evaluation of pediatric patients? YES NO

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

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| Click here to enter text. |

1. Complete the table below.

|  |  |  |
| --- | --- | --- |
| **Procedure** | **Check the appropriate box to indicate if real or simulated experience will be provided for the procedure** | |
| **YES** | **NO** |
| Arterial line placement |  |  |
| Arterial puncture |  |  |
| Chest tube placement |  |  |
| Endotracheal intubation of non-neonates |  |  |
| Procedural sedation |  |  |

Explain if experience in any of the procedures listed above will not be provided. (Limit 250 words)

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

1. Will each resident have a minimum of 36 half-day sessions per year of longitudinal outpatient experience? YES NO

Explain if ‘NO.’ (Limit 250 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 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 the 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 Pediatrics  a) Seminar  b) Required Y-1  c) Survey of contemporary methods and styles of pediatrics, 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 will be monitored, explain how this will be accomplished and how feedback will be given regarding non-attendance. (Limit 250 words)

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

**Appendix B. Patient Population Data**

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

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 additional sites are not planned, columns can be left blank.

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

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

Table 1. Patient Census Data

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | **Institution # 1** | | | | **Institution #2** | | | | **Institution #3** | | | | **Institution #4** | | | |
| **Inpatient Data** | | | | | | | | | | | | | | | | | | | |
| Total admissions for the year | | | |  | | | |  | | | |  | | | |  | | | |
| Annual admissions of patients of pediatric age – Medical | | | |  | | | |  | | | |  | | | |  | | | |
| Annual admissions of patients of pediatric age – Surgical | | | |  | | | |  | | | |  | | | |  | | | |
| Average daily census (total) | | | |  | | | |  | | | |  | | | |  | | | |
| Average daily census of medical patients | | Average length of stay for medical patients | |  | |  | |  | |  | |  | |  | |  | |  | |
| Average daily census of surgical patients | | Average length of stay for surgical patients | |  | |  | |  | |  | |  | |  | |  | |  | |
| **Emergency Room Data** | | | | | | | | | | | | | | | | | | | |
| Total visits per year | | | |  | | | |  | | | |  | | | |  | | | |
| If combined adult and pediatrics, what is the % of patients under 22 | | | |  | | | |  | | | |  | | | |  | | | |
| **NICU Data** | | | | | | | | | | | | | | | | | | | |
| NICU Level 2 or 3 | | | |  | | | |  | | | |  | | | |  | | | |
| Annual NICU admissions | | | |  | | | |  | | | |  | | | |  | | | |
| Total number of NICU beds | | Number of these designated for stepdown or intermediate care | |  | |  | |  | |  | |  | |  | |  | |  | |
| Average daily census | | Average length of stay | |  | |  | |  | |  | |  | |  | |  | |  | |
| Annual admissions less than 1,500 grams | | | |  | | | |  | | | |  | | | |  | | | |
| Annual number of neonates requiring mechanical ventilation | | | |  | | | |  | | | |  | | | |  | | | |
| Annual number of deaths in NICU | | | |  | | | |  | | | |  | | | |  | | | |
| **PICU data** | | | | | | | | | | | | | | | | | | | |
| Annual PICU admissions | | | |  | | | |  | | | |  | | | |  | | | |
| Total number of PICU beds | Number designated for step-down or intermediate care | | Are step-down or intermediate care located outside the PICU? (YES or NO) |  |  | |  |  |  | |  |  |  | |  |  |  | |  |
| Average daily census | | Average length of stay | |  | |  | |  | |  | |  | |  | |  | |  | |
| Are post-operative cardiac patients admitted to this unit? (YES or NO) | | | |  | | | |  | | | |  | | | |  | | | |
| Are other surgical patients admitted to this unit? (YES or NO) | | | |  | | | |  | | | |  | | | |  | | | |
| Annual number of deaths in PICU | | | |  | | | |  | | | |  | | | |  | | | |