**New Application: Critical Care Medicine**

**Review Committee for Internal Medicine**

**ACGME**

**Oversight**

**Participating Sites**

|  |
| --- |
| Describe the reporting relationship between the subspecialty program director and the core internal medicine residency director. [PR I.B.1.d)] (Limit response to 300 words) |
| Click here to enter text. |

Will the following be available at the primary clinical site? [PR. I.B.1.b)]

|  |  |
| --- | --- |
| An ACGME-accredited IM-cardiovascular disease program | YES  NO |
| An ACGME-accredited IM-gastroenterology program | YES  NO |
| An ACGME-accredited IM-infectious disease program | YES  NO |
| An ACGME-accredited IM-nephrology program | YES  NO |
| An ACGME-accredited IM-pulmonary program | YES  NO |

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| If at the primary site there are fewer than three ACGME-accredited programs in the noted internal medicine subspecialties (cardiovascular disease, gastroenterology, infectious diseases, nephrology, pulmonary disease), then describe how this program will ensure that its fellows are educated in a multidisciplinary clinical environment with the opportunity to interact with and learn from other subspecialty fellows and faculty members as they provide care to critically ill patients. [PR I.B.1.b)] |

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**Resources**

|  |  |
| --- | --- |
| Will there be adequate facilities i (e.g., meeting/conference room, and work area) for the fellowship program? [PR I.D.1.a)] | YES  NO |
| Will there be adequate inpatient facilities (e.g., conference rooms, on-call rooms) for the fellowship program? [PR I.D.1.b)] | YES  NO |

Explain any “NO” responses. (Limit response to 250 words)

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In the Medical Intensive Care Unit at the primary training site, what will the ratio of the number of patients to the number of fellows assigned to the unit be, when averaged over the year (e.g., 4:1, 6:1, etc?) [PR I.D.1.f)]

|  |  |
| --- | --- |
| Ratio of patients to fellows (example entry - 4:1) | 0:0 |

|  |  |
| --- | --- |
| Will the program provide opportunities to manage adult patients with a wide variety of serious illnesses and injuries that require treatment in a critical care setting? [PR I.D.1.f).(1).(a)] | YES  NO |

Complete the following table. Use site numbers as they appear in the Accreditation Data System (ADS) for the participating sites used by the program.

|  | **Site #1** | **Site #2** | **Site #3** | **Site #4** | **Site #5** | **Site #6** |
| --- | --- | --- | --- | --- | --- | --- |
| **Will the following facilities/laboratories/resources be available?** | | | | | | |
| Facilities to care for patients with acute myocardial infarction [PR I.D.1.b).(5)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Facilities to care for patients with severe trauma [PR I.D.1.b).(5)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Facilities to care for patients with shock [PR I.D.1.b).(5)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Facilities to care for patients with recent open heart surgery [PR I.D.1.b).(5)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Facilities to care for patients with recent major thoracic or abdominal surgery [PR I.D.1.b).(5)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Facilities to care for patients with severe neurologic and neurosurgical conditions [PR I.D.1.b).(5)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| A supporting laboratory to provide complete and prompt laboratory evaluation [PR I.D.1.c).(1)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Timely bedside imaging services [PR I.D.1.c).(2)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Computed tomography (CT) imaging, including CT angiography [PR I.D.1.c).(3)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| An active open heart surgery program [PR I.D.1.d).(1)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| An active emergency medicine service [PR I.D.1.d).(2)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Postoperative care services [PR I.D.1.d).(3)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Respiratory care services [PR I.D.1.d).(3)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Nutritional support services [PR I.D.1.d).(4)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Coronary intensive care unit (CICU) [PR I.D.1.d).(6).(a)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Medical intensive care unit (MICU) [PR I.D.1.d).(6).(a)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Surgical intensive care unit (SICU) [PR I.D.1.d).(6).(a)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Anesthesiology services [PR I.D.1.d).(7)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Laboratory medicine services [PR I.D.1.d).(7)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Radiology services [PR I.D.1.d).(7)] | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |

In the Medical Intensive Care Unit at the primary training site, what will the ratio of the number of patients to the number of fellows assigned to the unit be, when averaged over the year (e.g., 4:1, 6:1, etc?) [PR I.D.1.f)]

|  |  |
| --- | --- |
| Ratio of patients to fellows (example entry - 4:1) | 0:0 |

**Personnel**

**Other Program Personnel**

Indicate if services are available from the following health care professionals at each participating site. Use site numbers as they appear in the Accreditation Data System (ADS) for the participating sites used by the program. [PR II.D.1-2]

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Site #1** | **Site #2** | **Site #3** | **Site #4** | **Site #5** | **Site #6** |
| Dieticians | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Language interpreters | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Occupational therapists | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Physical therapists | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Social workers | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |
| Specially-trained nurses and technicians who are skilled in critical care instrumentation, respiratory function, and laboratory medicine | Y  N | Y  N | Y  N | Y  N | Y  N | Y  N |

**educational program**

**ACGME Competencies**

**Patient Care and Procedural Skills**

Will fellows demonstrate competence in the evaluation and management of patients with?

|  |  |
| --- | --- |
| Acute lung injury, including radiation, inhalation, and trauma [PR IV.B.1.b).(1).(b).(i)] | YES  NO |
| Acute metabolic disturbances, including over dosages and intoxication syndromes [PR IV.B.1.b).(1).(b).(ii)] | YES  NO |
| Anaphylaxis and acute allergic reactions in the critical care unit [PR IV.B.1.b).(1).(b).(iii)] | YES  NO |
| Cardiovascular diseases in the critical care unit [PR IV.B.1.b).(1).(b).(iv)] | YES  NO |
| Circulatory failure [PR IV.B.1.b).(1).(b).(v)] | YES  NO |
| End-of-life issues and palliative care [PR IV.B.1.b).(1).(b).(vi)] | YES  NO |
| Hypertensive emergencies [PR IV.B.1.b).(1).(b).(vii)] | YES  NO |
| Immunosuppressed conditions in the critical care unit [PR IV.B.1.b).(1).(b).(viii)] | YES  NO |
| Hematologic and coagulation disorders associated with critical illness [PR IV.B.1.b).(1).(b).(ix)] | YES  NO |
| Metabolic, nutritional, and endocrine effects of critical illnesses [PR IV.B.1.b).(1).(b).(ix)] | YES  NO |
| Multi-organ system failure [PR IV.B.1.b).(1).(b).(x)] | YES  NO |
| Perioperative management of critically ill patients [PR IV.B.1.b).(1).(b).(xi)] | YES  NO |
| Perioperative critically-ill patients, including hemodynamic and ventilatory support [PRs IV.B.1.b).(1).(b).(xi)-(xi).(a)] | YES  NO |
| Renal disorders in the critical care unit, including electrolyte and acid-base disorders [PRs IV.B.1.b).(1).(b).(xii)-(xii).(a)] | YES  NO |
| Acute and chronic respiratory failure [PR IV.B.1.b).(1).(b).(xiii).(a)] | YES  NO |
| Respiratory failure, including the acute respiratory distress syndrome, acute and chronic respiratory failure in obstructive lung diseases, and neuromuscular respiratory drive disorders [PRs IV.B.1.b).(1).(b).(xiii)-(xiii).(a)] | YES  NO |
| Sepsis and sepsis syndrome [PR IV.B.1.b).(1).(b).(xiv)] | YES  NO |
| Severe organ dysfunction resulting in critical illness to include disorders of the gastrointestinal, neurologic, endocrine, hematologic, musculoskeletal, and immune systems as well as infections and malignancies [PRs IV.B.1.b).(1).(b).(xv)-(xv).(a)] | YES  NO |
| Shock Syndromes [PR IV.B.1.b).(1).(b).(xv).(b)] | YES  NO |

For the procedures/technical skills listed, indicate whether instruction will be provided for fellows, and will proficiency be documented in a log book or equivalent method.

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| --- | --- | --- |
| **Procedure/Technical Skill** | **Instruction Provided?** | **Competence Documented?** |
| Airway management [PR IV.B.1.b).(2).(b).(i)] | YES  NO | YES  NO |
| Initiation and maintenance of ventilatory support [PR IV.B.1.b).(2).(b).(ii).(a)] | YES  NO | YES  NO |
| Respiratory care techniques [PR IV.B.1.b).(2).(b).(ii).(b)] | YES  NO | YES  NO |
| Withdrawal of mechanical ventilatory support [PR IV.B.1.b).(2).(b).(ii).(c)] | YES  NO | YES  NO |
| Use of reservoir masks and continuous positive airway pressure masks for delivery of supplemental oxygen, humidifiers, nebulizers, and incentive spirometry [PR IV.B.1.b).(2).(b).(iii)] | YES  NO | YES  NO |
| Flexible fiber-optic bronchoscopy procedures [PR IV.B.1.b).(2).(b).(iv)] | YES  NO | YES  NO |
| Use of chest tubes and drainage systems [PR IV.B.1.b).(2).(b).(vi)] | YES  NO | YES  NO |
| Insertion of arterial catheters [PR IV.B.1.b).(2).(b).(vii)] | YES  NO | YES  NO |
| Insertion of central venous catheters [PR IV.B.1.b).(2).(b).(vii)] | YES  NO | YES  NO |
| Insertion of pulmonary artery balloon catheters [PR IV.B.1.b).(2).(b).(vii)] | YES  NO | YES  NO |
| Operation of bedside hemodynamic monitoring systems instruction provided? [PR IV.B.1.b).(2).(b).(viii)] | YES  NO | YES  NO |
| Operation of bedside hemodynamic monitoring systems [PR IV.B.1.b).(2).(b).(viii)] | YES  NO | YES  NO |
| Emergency cardioversion [PR IV.B.1.b).(2).(b).(ix)] | YES  NO | YES  NO |
| Interpretation of intracranial pressure monitoring [PR IV.B.1.b).(2).(b).(x)] | YES  NO | YES  NO |
| Nutritional support [PR IV.B.1.b).(2).(b).(xi)] | YES  NO | YES  NO |
| Use of ultrasound techniques to perform thoracentesis and place intravascular and intracavitary tubes and catheters [PR IV.B.1.b).(2).(b).(xii)] | YES  NO | YES  NO |
| Use of transcutaneous pacemakers [PR IV.B.1.b).(2).(b).(xiii)] | YES  NO | YES  NO |

**Medical Knowledge**

Will fellows demonstrate knowledge of the following content areas?

|  |  |
| --- | --- |
| Pericardiocentesis [PR IV.B.1.c).(2).(a) | YES  NO |
| Placement of Percutaneous tracheostomies [PR IV.B.1.c).(2).(b)] | YES  NO |
| Renal replacement therapy [PR IV.B.1.c).(2).(e)] | YES  NO |
| Ethical, economic, and legal aspects of critical illness [PR IV.B.1.c).(3).(b)] | YES  NO |
| Psychosocial and emotional effects of critical illnesses on patients and their families [PR IV.B.1.c).(3).(c)] | YES  NO |
| Recognition and management of the critically ill from disasters, including those caused by chemical and biological agents [PR IV.B.1.c).(3).(d)] | YES  NO |
| Use of paralytic agents and sedative and analgesic drugs [PR IV.B.1.c).(3).(e)] | YES  NO |
| Detection and prevention of Iatrogenic and nosocomial problems in critical care medicine [PR IV.B.1.c).(3).(f)] | YES  NO |
| Monitoring and supervising respiratory care units [PR IV.B.1.c).(4).(g).(i) | YES  NO |
| Monitoring and supervising respiratory care techniques and services [PR IV.B.1.c).(4).(g).(ii) | YES  NO |
| Pharmacodynamics [PR IV.B.1.c).(3).(g).(iii)] | YES  NO |
| Pharmacokinetics [PR IV.B.1.c).(3).(g).(iii)] | YES  NO |
| Drug metabolism and excretion in critical illness [PR IV.B.1.c).(3).(g).(iii)] | YES  NO |

**Practice-Based Learning and Improvement**

Briefly describe how fellows will demonstrate competence in investigating and evaluating their care of patients, appraising and assimilating scientific evidence, and continuously improving their patient care based on self-evaluation and lifelong learning. [PR IV.B.1.d).] (Limit response to 400 words)

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**Interpersonal and Communication Skills**

Briefly describe how fellows will develop skills that result in the effective exchange of information and collaboration with patients, their families and health professionals. [PR IV.B.1.e)] (Limit response to 400 words)

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| Click or tap here to enter text. |

**Systems Based Practice**

Briefly describe how fellows will demonstrate an awareness of and responsiveness to the larger context and system of health care, including the structural and social determinants of health, as well as the ability to call effectively on other resources to provide optimal health care. [PR IV.B.1.f] (Limit response to 400 words)

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**Curriculum Organization and Fellow Experiences**

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| --- | --- |
| How many months of experience will the fellowship program provide for each fellow in the care of critically ill medical patients (i.e., MICU/CICU or equivalent)? [PR IV.C.3.a)] | # |
| How many months of experience will the fellowship program provide each fellow in the care of critically ill non-medical patients (i.e., SICU, Burn Unit, Transplant Unit, Neuro-intensive Care, or equivalent)? [PR IV.C.3.b)] | # |
| Of the time spent in the care of critically ill non-medical patients, how many months of experience will the fellowship program provide each fellow in direct patient care activity? [PR IV.C.3.b).(1)] | # |
| Of the time spent in the care of critically ill non-medical patients, how many months of experience will the fellowship program provide each fellow in consultative activities? [PR IV.C.3.b).(1)] | # |
| Will fellows participate in training using simulation? [PR IV.C.6.] | YES  NO |

Will fellows have clinical experience in the evaluation and management of patients with the following?

|  |  |
| --- | --- |
| Trauma [PR IV.C.8.a)] | YES  NO |
| Neurosurgical emergencies [PR IV.C.8.b)] | YES  NO |
| Critical obstetric and gynecologic disorders [PR IV.C.8.c)] | YES  NO |
| After discharge from the critical care unit [PR IV.C.8.d)] | YES  NO |

**Conferences**

Will fellows routinely participate in the following conferences: [PR IV.C.10.]

|  |  |
| --- | --- |
| Core Curriculum Conference Series | YES  NO |
| Clinical Case Conferences | YES  NO |
| Research Conferences | YES  NO |
| Journal Club | YES  NO |
| Morbidity and Mortality Conferences | YES  NO |
| Quality Improvement Conferences | YES  NO |

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| --- | --- |
| Will the faculty participate in required conferences? [PR IV.C.10.c)] | YES  NO |
| Describe how the program will ensure that the fellows have the opportunity to make up missed core conferences (e.g., when off-site). [PR IV.C.10.a)] | | | |
| Click here to enter text. | | | |

**EDUCATIONAL PROGRAM NARRATIVE**

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| Describe the conduct of Core Curriculum Conference Series in your program. [PR IV.C.10.] (Limit response to 300 words) |
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| Describe the program's teaching rounds; including the frequency and duration spent per week. [PR IV.C.11.a)] (Limit response to 300 words) |
| Click here to enter text. |

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| Will fellows receive instruction in practice management relevant to the specialty? [PR. IV.C.12.] | YES  NO |

**Faculty Scholarly Activity [PR IV.D.2.]**

As evidence of a scholarly environment, the Review Committee expects the program to provide evidence of scholarly activity by documenting that at least 50% of its required minimum number of core faculty (CF) annually engage in a variety of scholarly activity. Please **list one example** of scholarly activity for your program’s core faculty during the past academic year.

*Identify academic year:*

|  |  |  |
| --- | --- | --- |
| Name of Core Faculty | Type of Activity | Citation/Description of Product |
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**Evaluation**

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| Will the program director review fellow procedure logs in order to document that each fellow has performed the minimum number and achieved competence in invasive procedures? [PR V.A.1.a).(2)] | YES  NO |

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| --- |
| Describe the method for assessment of procedural competence. [PR V.A.1.a).(2)] |
| Click here to enter text. |

|  |  |
| --- | --- |
| Will the program use multi-source evaluation, including patients, peers, and non-physician team members, to assess each fellow's ability to meet professional responsibilities? [PR V.A.1.c).(1)] | YES  NO |

**Faculty Evaluation**

|  |  |
| --- | --- |
| Will these faculty evaluations be written and confidential? [PR V.B.1.b)] | YES  NO |
| Will the results of these evaluations be communicated on a regular basis, at least annually, to faculty members? [PR V.B.2.] | YES  NO |

**The Learning and Working Environment**

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| Describe how faculty and residents will be educated about fatigue and its negative effects. [PR VI.D.] |
| Click here to enter text. |