**New Application: Hand Surgery**

**Review Committee for Surgery, Orthopaedic Surgery, or Plastic Surgery**

**ACGME**

The questions that follow provide programs with an opportunity to systematically describe the manner in which they comply with accreditation requirements. Responses should be **concise and focused**. During the site visit, fellows, faculty members, and others will be asked for comment on the information provided. **As such, those who will be interviewed should read the application prior to their meeting with the Accreditation Field Representative**.

**Oversight**

**Participating Sites**

1. Enter the number of any type of residents and/or fellows assigned to each site *for education and training in hand surgery* each year. Site numbers must correspond to the information provided in the ACGME’s Accreditation Data System (ADS). *Add columns as needed.* [PR I.B.4.a)]

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| **Type of Other Learners** | **Site #1** | | **Site #2** | | **Site #3** | | **Site #4** | |
| **Total/ Year** | **Present at Any One Time** | **Total/ Year** | **Present at Any One Time** | **Total/ Year** | **Present at Any One Time** | **Total/ Year** | **Present at Any One Time** |
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**Resources**

1. Describe the inpatient facilities available for fellow education, including the number of beds and support staff members, as well as the operative suite(s) and diagnostic facilities, including technologically current equipment that will be available at each site for fellows’ clinical education. [PR I.D.1.a).(1)]

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1. Describe the clinic and office space, that will be available for fellow participation in the pre-operative evaluation, treatment, and post-operative follow-up of patients for whom fellows will have responsibility. [PR I.D.1.a).(3)]

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1. How will the program ensure that fellows are provided with new and follow-up adult and pediatric hand surgery patients with a variety of problems on both an inpatient and outpatient basis? How will the program ensure adequate operative experience and progressive responsibility for each fellow without adversely diluting the educational experience of residents, if present? [PR I.D.1.b)]

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**Personnel**

**Responsibilities of the Program Director**

1. How will the program director select, supervise, and evaluate the members of the teaching staff and other program personnel at each participating site used by the program? How will the program director monitor fellow supervision at each site? [PR II.A.4.]

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1. Does the program require fellows to sign a non-competition guarantee or restrictive covenant? [CPR II.A.4.a).(9).(a)]  YES  NO

Explain if “YES”.

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**Program Coordinator and Other Program Personnel**

1. How does the program ensure administrative support for program coordination and the availability of necessary personnel for the effective administration of the program? [CPR II.C.1.a); II.D.]

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**Educational Program**

**ACGME Competencies**

**Patient Care and Procedural Skills**

1. Describe how the program will ensure that fellows develop competence in managing patients with the following.
2. Fractures and dislocations, including phalangeal or metacarpal, with and without internal fixation; carpus, radius, and ulna, with and without internal fixation; and injuries to joints, nerves, and ligaments [PR IV.B.1.b).(1).(a).(i)]

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1. Upper extremity vascular disorders and insufficiencies [PR IV.B.1.b).(1).(a).(ii)]

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1. Upper extremity pain [PR IV.B.1.b).(1).(a).(iii)]

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1. Describe how the program will ensure that fellows develop competence in performing each of the following operative procedures.
2. Wound closure, to include skin grafts, tissue flaps (local, regional, and distant), and free microvascular tissue transfer [PR IV.B.1.b).(2).(b).(i)]

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1. Treatment of fingertip injuries [PR IV.B.1.b).(2).(b).(ii)]

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1. Tenorrhaphy, to include flexor tendon repair and graft, implantation of tendon spacer, extensor tendon repair, and tenolysis/tenodesis [PR IV.B.1.b).(2).(b).(iii)]

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1. Tendon transfer and tendon balancing [PR IV.B.1.b).(2).(b).(iv)]

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1. Nerve repair and reconstruction, to include upper extremity peripheral nerves, nerve grafts, nerve transfer, neurolysis, neuroma management, nerve decompression, and transposition [PR IV.B.1.b).(2).(b).(v)]

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1. Bone grafts and corrective osteotomies [PR IV.B.1.b).(2).(b).(vi)]

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1. Joint and tendon sheath repairs, to include release of contracture, synovectomy, arthroplasty with and without implant, arthrodesis, trigger finger release, and stiff joints that result from rheumatoid or other injury management of arthritis, to include synovectomy, arthroplasty (with and without implant), arthrodesis; and joint repair and reconstruction, to include contracture release [PR IV.B.1.b).(2).(b).(vii)]

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1. Thumb reconstruction, to include pollicization, toe-hand transfer, and thumb metacarpal lengthening [PR IV.B.1.b).(2).(b).(viii)]

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1. Fasciotomy, deep incision and drainage due to infection, and wound debridement [PR IV.B.1.b).(2).(b).(ix)]

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1. Foreign body and implant removal [PR IV.B.1.b).(2).(b).(x)]

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1. Replantation and revascularization [PR IV.B.1.b).(2).(b).(xi)]

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1. Amputations [PR IV.B.1.b).(2).(b).(xii)]

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1. Wrist arthroscopy [PR IV.B.1.b).(2).(b).(xiii)]

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**Medical Knowledge**

1. Describe how the program will ensure that fellows develop competence in their knowledge in each of the following areas.
2. Osteonecrosis, including Kienböck’s disease [PR IV.B.1.c).(1).(a)]

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1. Tumors (benign and malignant) [PR IV.B.1.c).(1).(b)]

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1. Thermal injuries [PR IV.B.1.c).(1).(c)]

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1. Rehabilitation and therapy [PR IV.B.1.c).(1).(d)]

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1. Major disorders and conditions, including acquired conditions, to include: tumor (Dupuytren’s, tenosynovitis, vascular contractures); arthritis; congenital; nerve; bone and joint trauma; soft tissue trauma and infections; and tendon [PR IV.B.1.c).(1).(e).(i)-IV.B.1.c).(c).(1).(e).(vii)]

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1. Application of research methods, including the ability to critically analyze research reports and design and implement clinical or basic research in the field of hand surgery [PR IV.B.1.c).(1).(f)]

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**Curriculum Organization and Fellow Experiences**

1. Describe how the program is structured to ensure fellows continue to provide care to their own post-operative patients until discharge or until the patients’ post-operative conditions are stable and the episode of care is concluded. [PR IV.C.1.a)]

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1. Describe the curriculum for instruction and experience in multimodal pain treatment, including non-narcotic pain medication and alternative pain reducing modalities. [PR IV.C.1.b)]

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1. Provide a list of all the didactic sessions/conferences, including scheduled lectures, courses, seminars, and conferences that will be given for one year. Use the same site numbers as in the previous tables, and as noted in ADS. [PR IV.C.4.a)-c); IV.C.5)] *Add rows as needed.*

| **Title of Session or Conference** | **Topic** | **Presenter** |
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1. Describe how the program director will ensure that conferences are attended by both the fellows and faculty members. How will attendance be documented? How will the program ensure that fellows assigned to participating sites other than the Sponsoring Institution will participate in hand conferences at those sites? What is the frequency of subspecialty conferences, including teaching and morbidity and mortality conferences, as well as journal club related to hand surgery? [PR IV.C.5 – 5.c)]

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1. Describe how the program will ensure fellows are provided with adequate opportunities to assume a major role in the continuing care of patients, and that they will have progressive responsibility for patient assessment, pre-operative evaluation, post-operative intensive care, other post-operative management, rehabilitation, and other outpatient care. [PR IV.C.6]

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1. Will fellows’ clinical experiences include the following?
   1. Repair, resection, and reconstruction of defects of form and function of the hand, including vascular and neurologic defects resulting from trauma or tumor reconstruction [PR IV.C.6.a).(1)]  YES  NO
   2. Design, construction, and transfer of flaps and tissue transplantation, including microsurgery of multiple tissues [PR IV.C.6.a).(2)]  YES  NO
   3. Surgical and ancillary methods of tumor treatment [PR IV.C.6.a).(3)]  YES  NO
   4. Management of complex wounds and use of alloplastic materials [PR IV.C.6.a).(4)]  YES  NO

Explain any “NO” responses.

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1. Describe how the program director will ensure the timely, accurate, and complete collection, in the ACGME Resident Case Log System, of operative procedures performed by each fellow. [PR IV.C.7]

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1. Describe how fellows will be evaluated within six weeks of their entry into the program for expected entry level skills, as well as the provision of additional education and training in a timely manner if needed. [PR IV.C.8]

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**Scholarship**

**Program Responsibilities**

1. Describe the facilities and resources (including space, equipment, support personnel, funding) that will be utilized to support fellow research. [PR IV.D.1.a)]

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1. Describe how fellows will be provided with protected time free of clinical responsibilities for research activities. [PR IV.D.1.b)]

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**Fellow Scholarly Activity**

1. Describe how the program will ensure that fellows demonstrate scholarship during the program through one or more of the following: peer-reviewed publications; abstracts, posters, or presentations at international, national, or regional meetings; publication of book chapters; or lectures or formal presentations (such as grand rounds or case presentations). [PR IV.D.3.a)]

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**The Working and Learning Environment**

**Supervision and Accountability**

1. Describe the planned responsibilities of fellows for inpatients, emergency rooms, outpatient clinics, operating rooms, and private offices. How will supervision be provided in each area?   
   [CPR VI.A.2.b).(1)-(3)]

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1. Describe how assignment of progressive authority and responsibility, conditional independence, and a supervisory role in patient care will be determined. Include the specific criteria used by the program director to evaluate fellows’ abilities, the timing of such evaluation(s), and how the program director ensures that each faculty member and fellow functioning as a supervising physician uses this information to delegate portions of care to fellows and residents based on the needs of the patient and the skills of each fellow. [CPR VI.A.2.d)-VI.A.2.d).(3)]

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1. Describe the guidelines for circumstances and events in which fellows must communicate with the supervising faculty member(s). [CPR VI.A.2.e)]

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**Clinical Experience and Education**

How many months of night float will fellows be assigned in each year of the program?   
[PR VI.F.6.a)] (#)

**Institutional Operative Data**

Report the number of procedures performed at each participating site used by the program during the most recently completed academic year. Site numbers must correspond to the information provided in ADS as in previous tables in this application. *Add columns as needed.* [PR I.D.1.b)]

| **Procedure (CPT Codes)** | **Site #1** | **Site #2** | **Site #3** | **Site #4** | **Site #5** | **Total** |
| --- | --- | --- | --- | --- | --- | --- |
| **HAND SURGERY** | | | | | | |
| Amputation |  |  |  |  |  |  |
| Congenital |  |  |  |  |  |  |
| Decompression of tendon sheath/synovectomy/ganglions |  |  |  |  |  |  |
| Dupuytren's |  |  |  |  |  |  |
| Forearm and proximal fracture/dislocation |  |  |  |  |  |  |
| Forearm/elbow/shoulder reconstruction, releases |  |  |  |  |  |  |
| Hand fractures/dislocation/ligament injury/other |  |  |  |  |  |  |
| Hand fractures/dislocation/ligament injury/metacarpal |  |  |  |  |  |  |
| Hand fractures/dislocation/ligament injury/phalangeal |  |  |  |  |  |  |
| Hand reconstruction, releases, etc. |  |  |  |  |  |  |
| Nerve decompression |  |  |  |  |  |  |
| Nerve injury |  |  |  |  |  |  |
| Soft tissue reconstruction |  |  |  |  |  |  |
| Tendon/muscle |  |  |  |  |  |  |
| Tendon/muscle/extensor |  |  |  |  |  |  |
| Tendon/muscle/flexor |  |  |  |  |  |  |
| Tumor/osteomyelitis |  |  |  |  |  |  |
| Vascular repair/reconstruction/replantation/microvascular |  |  |  |  |  |  |
| Wound closure with graft |  |  |  |  |  |  |
| Wound closure without graft |  |  |  |  |  |  |
| Wound I&D fasciotomy/wound preparation |  |  |  |  |  |  |
| Wound reconstruction with flap |  |  |  |  |  |  |
| Wrist fracture/dislocation |  |  |  |  |  |  |
| Wrist reconstruction, releases, arthrodesis, etc. |  |  |  |  |  |  |
| Wrist/scaphoid fracture |  |  |  |  |  |  |
| **TOTAL Hand Surgery** |  |  |  |  |  |  |
| **ARTHROSCOPY** | | | | | | |
| Elbow |  |  |  |  |  |  |
| Shoulder |  |  |  |  |  |  |
| Wrist |  |  |  |  |  |  |
| **TOTAL Arthroscopy** |  |  |  |  |  |  |
| **OTHER** | | | | | | |
| Bone/cartilage/fascia grafts |  |  |  |  |  |  |
| Closed treatment of fractures and dislocations |  |  |  |  |  |  |
| Miscellaneous insertion or removal of devices |  |  |  |  |  |  |
| Nail surgery |  |  |  |  |  |  |
| **TOTAL OTHER** |  |  |  |  |  |  |

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| **All Defined Case Category Cases Report** | | | | | | |
| **DEFINED CASE CATEGORY** | **Site 1** | **Site 2** | **Site 3** | **Site 4** | **Site 5** | **Total** |
| **Amputations:** 25900; 25905; 25907; 25909; 25920; 25922; 25924; 25927; 25927; 25931; 26910; 26951; 26952 |  |  |  |  |  |  |
| **Carpal tunnel decompression:** 29848; 64721 |  |  |  |  |  |  |
| **Extensor tendon repair:** 20924; 25270; 25272; 25274; 25280; 26410; 26412; 26415; 26416; 26418; 26420; 26426; 26438; 26432; 26433; 26434; 26437; 26476; 26477 |  |  |  |  |  |  |
| **Finger arthrodesis or arthroplasty:** 26530; 26531; 26535; 26536; 26841; 26850; 26852; 26860; 26861; 26862; 26863 |  |  |  |  |  |  |
| **Fixation of metacarpal fractures:** 26546; 26565; 26568; 26608; 26615; 26650; 26665; 26706; 26715; 26746 |  |  |  |  |  |  |
| **Fixation of phalangeal fractures:** 26546; 26567; 26568; 26727; 26735; 26746; 26756; 26765; 26776; 26785 |  |  |  |  |  |  |
| **Flexor tendon repair:** 20924; 25260; 25263; 25265; 25280; 26350; 26352; 26356; 26357; 26358; 26370; 26372; 26373; 26390; 26392; 26478; 26479 |  |  |  |  |  |  |
| **Nerve repair:** 20802; 20805; 20808; 20816; 20822; 20824; 20827; 26551; 26553; 26554; 26556; 64831; 64832; 64834; 64835; 64836; 64837; 64856; 64857; 64859; 64861; 64872; 64874; 64876; 64890; 64891; 64892; 64893; 64895; 64896; 64897; 64898; 64901; 64902; 64905; 64907; 64910; 64911 |  |  |  |  |  |  |
| **ORIF/CREF distal radius fractures:** 25606; 25607; 25608; 25609 |  |  |  |  |  |  |
| **Scaphoid fracture:** 25430; 25440; 25628; 25685 |  |  |  |  |  |  |
| **Soft tissue reconstruction:** 14000; 14020; 14021; 14040; 14041; 14350; 15050; 15100; 15101; 15110; 15111; 15115; 15116; 15120; 15121; 15130; 15131; 15135; 15136; 15220; 15221; 15572; 15574; 15610; 15620; 15734; 15736; 15740; 15750; 15756; 15757; 15758; 20969; 20972; 20973; 26551; 26553; 26554; 16556; 26560; 26561; 26562; 26580; 26587; 26590; 26596 |  |  |  |  |  |  |
| **Tendon transfers:** 25310; 25312; 26485 |  |  |  |  |  |  |
| **Thumb CMC reconstruction:** 25210; 25445; 25447 |  |  |  |  |  |  |
| **Ulnar nerve decompression, with or without transposition:** 64718; 64719 |  |  |  |  |  |  |
| **Vascular repair:** 15756; 15757; 15758; 20802; 20805; 20808; 20816; 20822; 20824; 20827; 20955; 20956; 20962; 20969; 20970; 20972; 20973; 26551; 26553; 26554; 26556; 35045; 35206; 35207; 35236; 35266; 64820; 64821; 64822; 64823 |  |  |  |  |  |  |
| **Wrist arthrodesis, limited or complete:** 25800; 25805; 25810; 25820; 25825; 25830 |  |  |  |  |  |  |
| **Wrist arthroscopy:** 29840; 29843; 29844; 29845; 29846; 29847 |  |  |  |  |  |  |
| **Wrist Instability or dislocation:** 25107; 25320; 25337; 25645; 25670; 25671; 25676; 25685; 25695 |  |  |  |  |  |  |
| **TOTAL MINIMUM CASES** | **0** | **0** | **0** | **0** | **0** | **0** |