**New Application: Neonatal-Perinatal Medicine**

**Review Committee for Pediatrics**

**ACGME**

*New program applications must use the online application process within the Accreditation Data System (ADS). For further information, review the “*[*Application Instructions*](http://www.acgme.org/Portals/0/Documents/Common%20Resources/ApplicationInstructions.pdf?ver=2017-06-06-130246-257)*.”*

*This document contains the “Specialty-specific Application Questions.” After completing this document, convert it to PDF and upload it as the “Attachment: Specialty-specific Application Questions” during Step 12 of the online application process within ADS.*

**Oversight**

**Participating Sites**

1. Briefly describe how the neonatal-perinatal medicine program is an integral part of a core pediatric residency program, including how the faculty members of each program, residents, and fellows will interact. [PR 1.2.a.]

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

1. Does the Sponsoring Institution or participating sites sponsor an ACGME-accredited residency program in obstetrics and gynecology that has board-certified maternal-fetal medicine specialists? [PR 1.2.a.2.] Yes [ ]  No [ ]

**Resources**

Indicate whether the program has access to the following facilities and services/resources for fellow education:

|  |  |  |  |
| --- | --- | --- | --- |
| **Facility/Service** | **Site #1** | **Site #2** | **Site #3** |
| A NICU with up-to-date facilities and equipment, which is appropriately staffed, and available 24-hours a day [PR 1.8.a.1.] | Choose an item. | Choose an item. | Choose an item. |
| A perinatal service with facilities and equipment appropriate for high-risk newborn resuscitation [PR 1.8.b.] | Choose an item. | Choose an item. | Choose an item. |
| Comprehensive laboratory [PR 1.8.c.] | Choose an item. | Choose an item. | Choose an item. |
| Pathology [PR 1.8.c.] | Choose an item. | Choose an item. | Choose an item. |
| Imaging [PR 1.8.c.] | Choose an item. | Choose an item. | Choose an item. |
| Laboratories that provide complete and prompt evaluation and support at the primary site[PR 1.8.d.] | Choose an item. | Choose an item. | Choose an item. |
| Bedside pediatric imaging and electroencephalogram (EEG) services for patients at the primary site at all times [PR 1.8.e.] | Choose an item. | Choose an item. | Choose an item. |

**Neonatal Intensive Care Unit (NICU) Data [PR 1.8.f.-** **1.8.f.1.]**

Provide patient data for the most recent 12-month period for which records can be obtained. **Note the same timeframe should be used throughout the forms**.

|  |  |  |
| --- | --- | --- |
| **Inclusive Dates:** | **From:** Click here to enter a date. | **To:** Click here to enter a date. |

1. Indicate the availability of the following at each of the sites participating in the program.:

|  | **Site #1** | **Site #2** | **Site #3** |
| --- | --- | --- | --- |
| Number of births per year | # | # | # |
| Number of neonatal ICU admissions per year | # | # | # |
| * Number of admissions in NICU. Of these, how many had a birth weight <1500 grams
 | # | # | # |
| * Number of admissions in NICU. Of these, how many had a birth weight <1000 grams
 | # | # | # |
| * Number of admissions inborn
 | # | # | # |
| * Number of patients outborn/transported
 | # | # | # |
| Average daily census in NICU: | # | # | # |
| Average length of stay in NICU  | Length | Length | Length |
| Number of patients requiring ventilatory support: | # | # | # |
| * CPAP only (without mechanical ventilation)
 | # | # | # |
| * Non-invasive ventilation
 | # | # | # |
| * Mechanical ventilation
 | # | # | # |
| * Extra corporeal membrane oxygenation (ECMO)
 | # | # | # |
| Number of neonatal surgical cases | # | # | # |
| * Cardiac
 | # | # | # |
| * General
 | # | # | # |
| Total number of residents in NICU (excluding neonatology fellows) during a block rotation | # | # | # |
| * Number of pediatric residents
 | # | # | # |
| * Number of other residents
 | # | # | # |
| * Number of primary, non-resident providers
 | # | # | # |

2. If all or most admissions are outborn/transported, explain how fellows will obtain sufficient experience in resuscitation and stabilization for deliveries.

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

1. Describe other required experiences relevant to the fellowship program (e.g., transplant, cardiology, intensive care).

***Limit response to 250 words.***

|  |
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| Click here to enter text. |

**Outpatient Experiences [PR I4.4.; 4.10.a.]**

Provide the following information. The date range should occur within the same 12-month period used in previous sections.

|  |  |  |
| --- | --- | --- |
| **Inclusive Dates:** | **From:** Click here to enter a date. | **To:** Click here to enter a date. |

1. Indicate the following at each of the sites participating in the program.

|  |  |
| --- | --- |
| **Clinic Data** |  |
| Is there a NICU follow-up clinic for patients discharged from the NICU?  | Choose an item. |
| Number of NICU follow up clinic sessions per week: | # |
| Number of NICU follow up visits per year:  | # |
|  | **Year 1** | **Year 2** | **Year 3** |
| Number of NICU high-risk follow-up clinics a subspecialty fellow attends while in the program: | # | # | # |
| Average number of NICU follow up patients per fellow per session: | # | # | # |

1. If there is no separate NICU follow-up clinic, explain where the NICU follow-up patients are seen (e.g., offices, clinics). If the experience is in a private office, provide full details, including the name and credentials of the supervisor, the numbers and types of patients, the degree of fellow responsibility for their care, and how the program director will monitor the experience and fellow performance.

***Limit response to 250 words.***

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

1. Describe how and by whom the fellows will be supervised during the provision of outpatient care and identify how the program ensures that the NICU follow-up clinic has staff members with expertise in performing developmental assessments and skilled neonatal or pediatric faculty members as teachers.

***Limit response to 250 words.***

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

**List of Diagnoses [PR 1.8.f.-** **1.8.f.1.]**

List 100 consecutive admissions. Identify the period during which these admissions occurred. The date range should occur within the same 12-month period used in previous sections. The dates must begin on the date the first patient on the list was admitted and end with the date the 100th patient was admitted (e.g., Patient #1 - July 1, 2022; Patient #100 - October 20, 2022). Submit a separate list for each site that provides required rotations. Duplicate tables as necessary.

|  |  |
| --- | --- |
| **Site Name:** | Click or tap here to enter text. |
| **Total Number of Patients Admitted in Most Recent 12-month Period** |  |
| **Inclusive Dates:** | **From:** Click or tap to enter a date. | **To:** Click or tap to enter a date. |
| **Patient ID** | **Number of Days in Hospital** | **Up to Three Most Significant Discharge Diagnoses** |
| **Number** | **Gestational Age** | **Birth Weight** |
| # | # | # | # | Click or tap here to enter text. |
| # | Age | Weight | # | Click or tap here to enter text. |
| # | Age | Weight | # | Click or tap here to enter text. |
| # | Age | Weight | # | Click or tap here to enter text. |
| # | Age | Weight | # | Click or tap here to enter text. |
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| # | Age | Weight | # | Click or tap here to enter text. |
| # | Age | Weight | # | Click or tap here to enter text. |

**Personnel**

**Program Leadership and Other Program Personnel**

Provide a summary of the program’s leadership and other program personnel, including the name and percent full-time equivalent (FTE) dedicated time. 1.0 FTE is greater than or equal to 40 hours per week. Add rows as needed. [PR 2.3.- 2.3.a.; 2.11.a.]

|  |  |  |
| --- | --- | --- |
| **Program Leadership** | **Name** | **% FTE Dedicated Time for the Administration of the Program (Excluding Scholarly Activity)** |
| Program Director | Name | #% |
| Associate Program Director(s) | Name | #% |
| Title | Name | #% |
| Title | Name | #% |
| Title | Name | #% |
| Title | Name | #% |
| Title | Name | #% |
| **Administrative/Support Personnel**  | **Number of Administrative Personnel** | **% FTE in this Fellowship Program for Each Personnel member** |
| *e.g., Fellowship Coordinator* | *1* | *100%* |
| *e.g., Administrative Assistant* | *1.5* | *100%/50%* |
| Title | # | #% |
| Title | # | #% |
| Title | # | #% |
| Title | # | #% |
| Title | # | #% |

**Other Program Personnel**

Indicate whether program personnel are present in each of the required disciplines. [PR 2.12.a.1.-2.12.a.9.]

|  |  |
| --- | --- |
| **Other Program Personnel with Pediatric Focus and Experience\*** | **Indicate with an “X” if these Personnel are Available at Each Site** |
|  | **Site #1** | **Site #2** | **Site #3** | **Site #4** | **Site #5** |
| Audiologist(s) |[ ] [ ] [ ] [ ] [ ]
| Dietician(s) |[ ] [ ] [ ] [ ] [ ]
| Hospice and palliative medicine professional(s) |[ ] [ ] [ ] [ ] [ ]
| Neonatal intensive care nurse(s) |[ ] [ ] [ ] [ ] [ ]
| Respiratory therapist(s) |[ ] [ ] [ ] [ ] [ ]
| Pharmacist(s) |[ ] [ ] [ ] [ ] [ ]
| Physical and occupational therapist(s) |[ ] [ ] [ ] [ ] [ ]
| Social worker(s) |[ ] [ ] [ ] [ ] [ ]
| Speech and language therapist(s) |[ ] [ ] [ ] [ ] [ ]

|  |
| --- |
| *\* If the other program personnel listed above are not present at the participating sites listed in ADS please explain:* Click or tap here to enter text. |

**Educational Program [PR: Section 4]**

**Patient Care and Procedural Skills [PR 4.4.]**

1. Provide the settings and activities in which fellows will develop competence in the following areas of patient care. Also, indicate which method(s) will be used to evaluate competence.

| **Competency Area** | **Settings/Activities****(d=didactic, s=simulation, c=observed clinical care, o=other, specify)** | **Method(s) Used to Evaluate Fellow Competence****(e.g., structured observation checklist, procedure log, course completion)**  |
| --- | --- | --- |
| Clinical skills needed in neonatal-perinatal medicine[PR 4.4.a.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Providing consultation, performing a history and physical examination, making informed diagnostic and therapeutic decisions that result in optimal clinical judgement, and development and carrying out management plans [PR 4.4.b.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Providing transfer of care that ensures seamless transitions[PR 4.4.c.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Understanding of the emotional impact on the family of having a child born prematurely or with a life-threatening/chronic condition and the communication skills necessary to encourage dialogue[PR 4.4.d.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Providing care that is sensitive to the developmental stage of the patient with common behavioral and mental health issues, and the cultural context of the patient and family[PR 4.4.e.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Referring and/or co-managing patients with common behavioral and mental health issues along with appropriate specialists when indicated[PR 4.4.f.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Providing or coordinating care with a medical home for patients with complex and chronic diseases[PR 4.4.g.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Use and interpretation of laboratory tests, imaging, and other diagnostic procedures[PR 4.4.h.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Management of patients with acute, common, single-system diseases in an inpatient setting.[PR 4.4.i.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Management of patients with complex, multisystem diseases in the NICU.[PR 4.4.j.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Resuscitation and stabilization of neonates and infants that aligns care with severity of illness [PR 4.4.k.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Participation in team-based care of critically-ill patients whose primary problem is surgical [PR 4.4.l.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Coordination of care and collegial relationships between pediatric surgeons, neonatologists, and critical care intensivists concerning the management of medical problems in complex critically-ill patients [PR 4.4.l.1.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Identification of high-risk pregnancy and familiarity with methods used to evaluate fetal well-being and maturation[PR 4.4.q.]  | Click or tap here to enter text. | Click or tap here to enter text. |
| Recognition of factors that may compromise the fetus during the intrapartum period and recognition of fetal distress[PR 4.4.r.]  | Click or tap here to enter text. | Click or tap here to enter text. |
| Preparation of neonates for transport, ventilatory support, and nutritional support[PR 4.4.s.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Management of neonates who require ventilatory assistance [PR 4.4.t.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Participation in the care of neonates requiring cardiac surgical procedures, and their post-operative complications [PR 4.4.t.1.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Leadership skills to enhance team function, the learning environment, and/or the health care delivery system/environment with the ultimate intent of improving care of patients [PR 4.4.u.] | Click or tap here to enter text. | Click or tap here to enter text. |

1. Explain how fellows will be directly involved in the care of critically ill surgical patients to acquire the requisite knowledge and skills to attain competence in evaluation, diagnosis, and pre-/post-operative management of such patients. Also describe the coordination of care between the pediatric surgeons and the neonatologists concerning the management of medical problems in these patients. [PR 4.4.l.- 4.4.l.1.]

***Limit response to 500 words***

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| Click here to enter text. |

1. Explain how fellows will be directly involved in the care of critically ill cardiac and cardiothoracic surgical patients to acquire the requisite knowledge and skills to attain competence in evaluation, diagnosis, and pre-/post-operative management of such patients. Also, describe the coordination of care between the cardiothoracic surgeons and neonatologists concerning the management of medical problems in these patients. [PR 4.4.l.- 4.4.l.1.]

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

1. Indicate the settings and activities in which fellows will develop competence in the following procedural skills, including an understanding of their indications, risks, and limitations. Also, indicate the method which will be used to evaluate competence.

| **Competency Area** | **Settings/Activities****(d=didactic, s=simulation, c=observed clinical care, o=other, specify)** | **Method(s) Used to Evaluate Fellow Competence****(e.g., structured observation checklist, procedure log, course completion)** |
| --- | --- | --- |
| Neonatal resuscitation[PR 4.5.a.1.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Venous and arterial access[PR 4.5.a.1.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Evacuation of air leaks[PR 4.5.a.1.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Endotracheal intubation[PR 4.5.a.1.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Umbilical catheterization[PR 4.5.a.1.] | Click or tap here to enter text. | Click or tap here to enter text. |

**Medical Knowledge [PR 4.6.]**

Indicate the activities (e.g., lectures, conferences, journal clubs, clinical teaching rounds) in which fellows will develop competence in their knowledge in each of the following areas. Also, indicate the method(s) which will be used to evaluate fellow competence in each area. [PR IV.B.1.c.(1)-IV.B.1.c).(2)]

| **Competency Area** | **Settings/Activities** | **Method(s) Used to Evaluate Fellow Competence** |
| --- | --- | --- |
| Biostatistics [PR 4.6.a.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Clinical research methodology[PR 4.6.a.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Laboratory research methodology (if appropriate) [PR 4.6.a.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Study design [PR 4.6.a.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Preparation of applications for funding and/or approval of clinical research protocols[PR 4.6.a.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Critical literature review[PR 4.6.a.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Principles of evidence-based medicine [PR 4.6.a.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Ethical principles involving clinical research [PR 4.6.a.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Teaching methods [PR 4.6.a.] | Click or tap here to enter text. | Click or tap here to enter text. |
| Utilization of institutional, regional, or national databases to inform practice [PR 4.6.b.] | Click or tap here to enter text. | Click or tap here to enter text. |

**Curriculum Organization and Fellow Experiences [PR 4.10.-4.12.]**

1. Describe the responsibilities fellows will have for inpatients when assigned to inpatient services. [PR 4.4.- 4.4.u.; 4.10.a.]

***Limit response to 500 words***

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

2. Describe how and by whom fellows will be supervised in the inpatient setting. [PR 4.4.- 4.4.u.; 4.10.a.]

***Limit response to 500 words***

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| Click here to enter text. |

1. Briefly explain how rotations are structured to minimize the frequency of rotational transitions, and provide quality educational experiences, especially as they relate to continuity of patient care, ongoing supervision, longitudinal relationships with faculty members, and meaningful assessment and feedback. [PR 4.10.a.]

|  |
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| Click here to enter text. |

1. Explain how fellows will function as part of an effective interprofessional team that works together longitudinally with shared goals of patient safety and quality improvement. [PR 4.10.b.]

|  |
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| Click here to enter text. |

1. Describe how fellows will serve as role models and provide supervision to residents and/or medical students. [PR 4.11.e.]

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

1. Will the program use a neonatal database of all patient admissions, diagnoses, and outcomes for fellow education? [PR 4.11.g.] Yes [ ]  No [ ]

**Conferences**

List regular subspecialty and interdepartmental conferences, rounds, etc. that are a part of the program. Identify the Site by using the corresponding number as it appears in the ADS portion of the application. Indicate the frequency (e.g., weekly, monthly) and whether conference attendance is required (R) or optional (O). List the planned role of the fellow in this activity (e.g., conducts conference, presents the case and participates in discussion, case presentation only, participation limited to Q and A component). Add rows as needed. [PR 4.11.h.- 4.11.i.]

| **Conference** | **Site #** | **Frequency** | **Attendance (Select Required or Optional)** | **Role of the Fellow** |
| --- | --- | --- | --- | --- |
| Conference | Site # | Frequency | Choose an item. | Role of fellow |
| Conference | Site # | Frequency | Choose an item. | Role of fellow |
| Conference | Site # | Frequency | Choose an item. | Role of fellow |
| Conference | Site # | Frequency | Choose an item. | Role of fellow |
| Conference | Site # | Frequency | Choose an item. | Role of fellow |
| Conference | Site # | Frequency | Choose an item. | Role of fellow |

**General Subspecialty Curriculum**

Identify the conferences and other teaching sessions where fellows will receive instruction related to neonatal-perinatal medicine in the areas listed below. Also, indicate which learners will participate (i.e., neonatal-perinatal medicine fellows, neonatal-perinatal medicine fellows and other subspecialty fellows, or residents and neonatal-perinatal medicine fellows). [PR 4.11.j.- 4.11.n.]

| **Topic** | **Where Taught in Curriculum (Name Should Match Name in Conference List)** | **# of Structured Teaching Hours Dedicated to Topic Area** | **Participants (Place an "X" in the Appropriate Column)** |
| --- | --- | --- | --- |
| **Fellows in this Discipline Attend** | **All Subspecialty Fellows Attend** | **Residents and Subspecialty Fellows Attend** |
| *e.g., Biostatistics* | *Research Course* | *14* |  | *X* |  |
| Anatomy [PR 4.11.j.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Physiology [PR 4.11.j.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Biochemistry [PR 4.11.j.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Embryology [PR 4.11.j.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Pathology [PR 4.11.j.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Microbiology [PR 4.11.j.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Pharmacology[PR 4.11.j.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Immunology [PR 4.11.j.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Genetics [PR 4.11.j.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Nutrition/metabolism[PR 4.11.j.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Maternal physiological, biochemical and pharmacological influences on the fetus[PR 4.11.j.1.a.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Fetal physiology[PR 4.11.j.1.a.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Fetal development[PR 4.11.j.1.a.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Placental function (placental circulation, gas exchange, growth) [PR 4.11.j.1.a.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Physiological and biochemical adaptation to birth [PR 4.11.j.1.a.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Cellular, molecular, and developmental biology and pathology relevant to diseases of the neonate[PR 4.11.j.1.a.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Psychology of pregnancy and maternal-infant interaction [PR 4.11.j.1.a.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Breast feeding and lactation[PR 4.11.j.1.a.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Growth and nutrition [PR 4.11.j.1.a.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Genetics [PR 4.11.j.1.a.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Pathophysiology of disease [PR 4.11.k.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Reviews of recent advances in clinical medicine and biomedical research[PR 4.11.k.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Conferences dealing with complications and death[PR 4.11.k.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Scientific, ethical, and legal implications of confidentiality and informed consent[PR 4.11.k.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Bioethics; including attention to physician-patient, physician-family, physician-physician/allied health professional, and physician-society relationships [PR 4.11.l.- 4.11.l.1.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Economics of health care and current health care management issues, such as cost-effective patient care, practice management, preventive care, population health, quality improvement, resource allocation, and clinical outcomes[PR 4.11.m.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |
| Emerging issues and factors impacting regional perinatal morbidity and mortality [PR 4.11.n.] | Click here to enter text. | # | [ ]  | [ ]  | [ ]  |

**Scholarship**

**Faculty Scholarly Activity**

1. Complete the table below regarding the involvement of faculty members in scholarly activities. Add rows as needed. [PR 2.4.b.; 4.14.- 4.14.a.2.]

| **Name** | **# of Current Grant Leadership** | **# of Publications in Peer-Review Journals in the Last 5 Years** |
| --- | --- | --- |
| **Program Director:** |
| Name | # | # |
| **Physician Faculty Members within the Program Subspecialty (i.e., for a Neonatal-Perinatal Medicine Program, Only List the Neonatal-Perinatal Medicine Faculty Members):** |
| Name | # | # |
| Name | # | # |
| Name | # | # |
| Name | # | # |
| Name | # | # |
| **Non-Physician Research Mentors or Physician Faculty Members from Other Subspecialties:** |
| Name/Specialty | # | # |
| Name/Specialty | # | # |
| Name/Specialty | # | # |
| Name/Specialty | # | # |
| Name/Specialty | # | # |

2. List active research projects in the subspecialty. Add rows as needed. [PR 2.4.b.; 4.14.- 4.14.a.2.]

| **Project Title** | **Funding Source** | **Place an "X" if Funding Awarded by Peer Review Process** | **Years of Funding (Dates)** | **Faculty Investigator and Role in Grant (i.e., PI, Co-PI, Co-Investigator)** |
| --- | --- | --- | --- | --- |
| Project title | Funding Source |[ ]  Years of funding | Faculty investigator/role in grant |
| Project title | Funding Source |[ ]  Years of funding | Faculty investigator/role in grant |
| Project title | Funding Source |[ ]  Years of funding | Faculty investigator/role in grant |
| Project title | Funding Source |[ ]  Years of funding | Faculty investigator/role in grant |
| Project title | Funding Source |[ ]  Years of funding | Faculty investigator/role in grant |
| Project title | Funding Source |[ ]  Years of funding | Faculty investigator/role in grant |
| Project title | Funding Source |[ ]  Years of funding | Faculty investigator/role in grant |

**Fellow Scholarly Activity**

**Scholarship Oversight Committee (SOC)**

1. Describe the process for SOC oversight and evaluation of the fellows’ scholarly projects. [PR 4.15.b.- 4.15.b.1.]

***Limit response to 500 words***

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

2. Explain how the program will ensure a meaningful supervised research experience for fellows beginning in their first year and extending throughout the educational program. [PR 4.15.c.]

***Limit response to 500 words***

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

**\*\*\***

The following area is optional and can be used to explain any unique scenarios occurring in the program that do not fit the confines of this form.

***Limit response to 500 words***

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