**New Application: Neurocritical Care**

**Review Committee for Neurology and Neurological Surgery**

**ACGME**

**Oversight**

**Resources**

1. Describe the facilities and space used to support the educational needs of the fellow, including, meeting rooms, conference rooms, computers, office space, audiovisual support, and work and study space. [PR I.D.1.a)] (Limit response to 400 words)

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1. Describe the primary clinical site’s facilities and equipment used for diagnostic, imaging, monitoring, and therapeutic procedures. [PR I.D.1.b)] (Limit response to 400 words)

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1. Does the Sponsoring Institution have a neurologic/neurosurgical intensive care unit or dedicated beds in a general ICU devoted to patients with neurological and neurosurgical conditions? [PR I.D.1.c)]

 [ ]  YES [ ]  NO

1. Does the ICU have a designated space for the following?

Patient care [ ]  YES [ ]  NO

Conferences [ ]  YES [ ]  NO

Nursing and support personnel [ ]  YES [ ]  NO

Family waiting/consultation [ ]  YES [ ]  NO

1. Explain any “NO” responses. (Limit response to 400 words)

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1. In the table below, describe each distinct critical care unit, including patient volumes, in which fellows may care for patients. Identify the average daily census and average length of stay for each neurosurgical critical care (NCC) unit to which fellows are assigned. [PR I.D.1.d) and I.D.4.a)]

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| **Start and End Dates for Data Collection** *Use the same 12-month period throughout document* | **Start:** Click here to enter text. | **End:** Click here to enter text. |  |
| **Patient Data** | **Unit #1** | **Unit #2** | **Unit #3** | **Unit #4** |
| Total NCC admissions for the year | # | # | # | # |
| Average daily census | # | # | # | # |
| Average length of stay | # | # | # | # |
| Number of beds | # | # | # | # |

1. Describe each distinct critical care unit listed above in terms of the types of patients seen, the supervising physicians, and if it is located in an institution of distinction for neurocritical care (comprehensive stroke center, Level 1 Trauma Center, etc.) [PR I.D.1.d). and IV.C.4.] (Limit response to 400 words)

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1. Complete the following grid (replicate as necessary) and identify the average daily census and average length of stay for each neurosurgical critical care unit to which fellows are assigned. Include the daytime and nighttime team and number of residents/fellows that may be taught by the fellow. [PR I.D.4.b), I.E.1.a). and IV.C.7.a)]

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| **Inpatient Team Composition****Team # [**#**] at Site # [**#**]****(insert number for team and site)** | **Daytime**(do not include residents post-call or assigned to morning clinic) | **Nighttime** |
| Planned total # of residents/fellows actually on the service acting as primary providers (include learners from other specialties) | # | # |
| Neurocritical care fellows | # | # |
| Other critical care fellows | # | # |
| Residents | # | # |
| Other (specify) | # | # |
| Planned average number of patients for each fellow  | # | # |
| Planned total number of residents providing direct supervision or indirect supervision but immediately available  | # | # |
| Planned number of NCC faculty members | # | # |

1. Explain any unique scenarios occurring in the program that do not fit within the confines of this form. (Limit response to 400 words)

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**Personnel**

**Program Director**

1. Will the program director receive at least 10 percent FTE salary support and protected time? [PR II.A.2.a)] [ ]  YES [ ]  NO
2. Will program directors with four or more fellows receive at least 15 percent FTE salary support and protected time? [PR II.A.2.a).(1)] [ ]  YES [ ]  NO

Explain any “NO” responses. (Limit response to 400 words)

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**Educational Program**

**ACGME Competencies**

**Patient Care and Procedural Skills**

Indicate the settings and activities in which fellows will demonstrate competence in the following areas of patient care. Also indicate the method(s) that will be used to assess competence. [PR IV.B.1.b).(1).(a)- IV.B.1.b).(1).(b).(ix)].(1); PR V.A.1.c)]

| **Competency Area** | **Settings/Activities** | **Assessment Method(s)** |
| --- | --- | --- |
| Use of advanced technology and instrumentation to monitor the physiologic status of adults. [PR IV.B.1.b).(1).(a)] | Settings/activities | Assessment method(s) |
| The following neurocritical care skills: [PR IV.B.1.b).(1).(b)] |
| Respiratory: airway management and mechanical ventilation (invasive and non-invasive) and bronchoscopy, including bronchoalveolar lavage [PR IV.B.1.b).(1).(b).(i)] | Settings/activities | Assessment method(s) |
| Cardiac/Circulatory: invasive and non-invasive techniques, including cardiac telemetry, interpretation of echocardiography, cardiac output monitoring, and arterial line waveform interpretation [PR IV.B.1.b).(1).(b).(ii)] | Settings/activities | Assessment method(s) |
| Neurological: neurological examination, interpretation of intracranial pressure monitoring (intraparenchymal and intraventricular monitors), application of electroencephalography and sensory evoked potentials; interpretation of neuroimaging; and cerebrospinal fluid analysis [PR IV.B.1.b).(1).(b).(iii)] | Settings/activities | Assessment method(s) |
| Renal: the evaluation of renal function based on blood and urinary and imaging studies [PR IV.B.1.b).(1).(b).(iv)] | Settings/activities | Assessment method(s) |
| Gastrointestinal: nasogastric tube placement (pre- and post-pyloric); use of enteral feedings; and management principles of percutaneous enteral devices [PR IV.B.1.b).(1).(b).(v)] | Settings/activities | Assessment method(s) |
| Hematologic: evaluation of coagulation status; correction of intrinsic and extrinsic coagulopathies; evaluation and management of hypercoagulable conditions; and use of transfusion products [PR IV.B.1.b).(1).(b).(vi)] | Settings/activities | Assessment method(s) |
| Infectious Disease: classification of infections and application of isolation techniques, pharmacokinetics, drug interactions, and management of antibiotic therapy[PR IV.B.1.b).(1).(b).(vii)] | Settings/activities | Assessment method(s) |
| Nutritional: application of parenteral and enteral nutrition; and monitoring and assessing metabolism and nutrition [PR IV.B.1.b).(1).(b).(viii)] | Settings/activities | Assessment method(s) |
| Miscellaneous: use of special beds for specific injuries; and traction and fixation devices[PR IV.B.1.b).(1).(b).(ix)] | Settings/activities | Assessment method(s) |

**Medical Knowledge**

Indicate the activities (lectures, conferences, journal clubs, clinical teaching rounds, etc.) in which fellows will demonstrate competence in their knowledge in each of the following areas. Also indicate the method(s) that will be used to assess competence. [PR IV.B.1.c).(1).; PR V.A.1.c)]

| **Competency Area** | **Settings/Activities** | **Assessment Method(s)** |
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| Cardiorespiratory resuscitation [PR IV.B.1.c).(1).(a)] | Settings/activities | Assessment method(s) |
| Coagulation and hematologic and coagulation disorders [PR IV.B.1.c).(1).(b)] | Settings/activities | Assessment method(s) |
| Endocrine, metabolic, and nutritional, effects of critical illness [PR IV.B.1.c).(1).(c)] | Settings/activities | Assessment method(s) |
| Ethical and legal aspects of neurosurgical critical care[PR IV.B.1.c).(1).(d)] | Settings/activities | Assessment method(s) |
| Monitoring and medical instrumentation[PR IV.B.1.c).(1).(e)] | Settings/activities | Assessment method(s) |
| Pharmacokinetics and dynamics of drug metabolism and excretion in critical illness[PR IV.B.1.c).(1).(f)] | Settings/activities | Assessment method(s) |
| Physiology, pathophysiology, diagnosis, and therapy of disorder of the cardiovascular, gastrointestinal, neurological, endocrine, musculoskeletal and respiratory systems, as well as of infectious diseases[PR IV.B.1.c).(1).(g)] | Settings/activities | Assessment method(s) |
| Trauma as it relates to neurological disease[PR IV.B.1.c).(1).(h)] | Settings/activities | Assessment method(s) |

**Practice-based Learning and Improvement**

1. Describe one learning activity in which fellows will demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning. [PR IV.B.1.d)] (Limit response to 400 words)

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**Interpersonal and Communication Skills**

1. Describe one learning activity in which fellows will demonstrate interpersonal and communication 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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**Systems-based Practice**

1. Describe the learning activity(ies) by which fellows will 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. [PR IV.B.1.f)] (Limit response to 400 words)

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**Curriculum Organization and Fellow Experiences**

1. Describe the didactic activities offered to fellows, including seminars and conferences in critical care, neurological surgery, neuroradiology, and neurology. [PR IV.C.3.a)] (Limit response to 400 words)

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**Scholarship**

**Fellows’ Scholarly Activities**

1. Describe how fellows in the program will demonstrate scholarly activity during the educational program. [PR IV.D.3.a)-b)] (Limit response to 400 words)

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**The Learning and Working Environment**

**Clinical Responsibilities, Teamwork, and Transitions of Care**

1. Describe how the fellows will work with interprofessional teams to develop treatment plans for a diverse patient population. [PR VI.E.2.a)] (Limit response to 400 words)

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