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**National Institute for Health Specialties**

**Dermatology Residency Program Information Form**

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| **Application Information** | | |
| Date: | Click or tap here to enter text. | |
| Application Type: | New (Initial Accreditation Application)  Renewal (Continued Accreditation Application) | |
| Program Name: | Click or tap here to enter text. | |
| Institution Name: | Click or tap here to enter text. | |
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| When you have the completed forms, **number each page sequentially in the bottom**. Report this pagination in the Table of Contents and submit this cover page with the completed Program Information Form. | | |
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| **1. INTRODUCTION** | | | | | | | | | |
| **A. Duration of Education** | | | | | | | | | |
| 1. What will be the length, in months, of the educational program? | | | | | Click or tap here to enter text. | | | | |
| **2. INSTITUTIONS** | | | | | | | | | |
| **A. Participating Sites** | | | | | | | | | |
| Is the program based at the primary clinical site? | | | | | Yes | | | No | |
| Explain if ‘NO’. (Limit 100 words)  Click or tap here to enter text. | | | | | | | | | |
| Is there a program letter of agreement (PLA) between the program and all participating sites? | | | | | Yes | | | No | |
| Explain if ‘NO’. (Limit 100 words)  Click or tap here to enter text. | | | | | | | | | |
| Describe how the program ensures that each participating site offers significant educational opportunities to residents. (Limit 300 words) Click or tap here to enter text. | | | | | | | | | |
| Are any of the planned participating sites at such a distance from the primary clinical site that residents’ attendance at rounds and lectures is impractical? | | | | | Yes | | | No | |
| If ‘YES’, explain how the program ensures that residents can access or attend rounds and lectures when assigned to these sites. (Limit 300 words) Click or tap here to enter text. | | | | | | | | | |
| Complete the table below for all sites. List all participating sites (i.e., each location having a unique physical address where dermatology residents rotate). For instance, a single institution that has five different dermatology clinic outreach locations where residents rotate would be considered five sites). For each site, list the distance in kilometres to reach each site from the primary clinical site. Describe the percent of the educational experience that is anticipated to occur at each site listed, stratified by year in the program. Note that the Review Committee considers the primary clinical site to be the primary facility designated for clinical training in the program or the clinical site most commonly used by the program.Provide, in the table below, the principal clinical experience anticipated at each listed site (e.g., medical/general dermatology, dermatologic surgery, dermatopathology, inpatient dermatology, pediatric dermatology, and aesthetic dermatology). Note that the site numbers indicated must correlate with those entered into the common PIF. | | | | | | | | | |
| **Participating Site** | **Distance from Primary Clinical Site (kilometers)** | **% time DY1 will spend at this site** | **% time DY2 will spend at this site** | **% time DY3 will spend at this site** | | **% time DY4 will spend at this site** | **Clinical experience at this site (Gen, Med, Ped, DP, Surg, Cosm, Other)** | | **Other Value Factors (unique patient populations, etc.)** |
| **Primary Clinical Site** | N/A |  |  |  | |  |  | |  |
| **Site 1** |  |  |  |  | |  |  | |  |
| **Site 2** |  |  |  |  | |  |  | |  |
| **Site 3** |  |  |  |  | |  |  | |  |
| **Site 4** |  |  |  |  | |  |  | |  |
| **Site 5** |  |  |  |  | |  |  | |  |
| **Other:** |  |  |  |  | |  |  | |  |
| 1. Are any of the core clinical experiences (e.g., medical/general dermatology, dermatologic surgery, dermatopathology, inpatient dermatology, pediatric dermatology, and aesthetic dermatology) outsourced to rotations at another residency program, where the other program assumes the principal educational experience for the residency? If yes, is there a program letter of agreement in place with each outside site providing clinical experience? What is the evidence the outside program or clinical service is aware it is serving as the principal educational experience for the core content area for the program’s residents? (Limit response to 150 words)   Click or tap here to enter text. | | | | | | | | | |

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| **B. Institutional Support** | | | | | | | | | | |
| 1. Does the Sponsoring Institution have the same location as the primary clinical site of dermatology training and education? If not, how does the Sponsoring Institution provide ultimate responsibility for the oversight of the program? If the Sponsoring Institution is not at the same location as the primary clinical site of dermatology training and education, state the distance between the primary clinical site and the Sponsoring Institution (in kilometer). (Limit response to 400 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. If the Sponsoring Institution is a separate corporate entity from the program, how will the Sponsoring Institution ensure the program director has sufficient protected time and financial support for his or her educational and administrative responsibilities to the program? (Limit response to 400 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. Concisely summarize the technical, clerical, and other non-physician personnel who will provide support for the administrative and educational conduct of the program. Describe the time support provided to the program coordinator and describe whether this individual has other job duties besides acting as residency program coordinator, such as duties to the department or other GME programs. (Limit response to 400 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. Describe the equipment that will be used for taking clinical photographs at each site and projection equipment for reviewing clinical and/or dermatopathology images. (Limit response to 150 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. Describe the space that will be used for program education lectures, discussions, meetings and conferences. Will this space be dedicated to dermatology didactic activity? (Limit response to 150 words)   Click or tap here to enter text. | | | | | | | | | | |
| **3. PROGRAM PERSONNEL AND RESOURCES** | | | | | | | | | | |
| **A. Program Director** | | | | | | | | | | |
| 1. Describe the program director’s prior experience(s) in dermatology residency education, other graduate medical education, or residency administration. (Limit response to 150 words)  Click or tap here to enter text. | | | | | | | | | | |
| 2. How will the program director select, supervise, and evaluate the members of the teaching staff and other program personnel at each site participating in the program? (Limit response to 150 words)  Click or tap here to enter text. | | | | | | | | | | |
| 3. Has a local site director who meets the qualifications specified by the Program Requirements been identified in each site? | | | | | | Yes | | | No | |
| 4. How will the program director monitor resident supervision at each site? (Limit response to 150 words)  Click or tap here to enter text. | | | | | | | | | | |
| **B. Site Directors (if applicable)** | | | | | | | | | | |
| 5. During a temporary absence of the program director of any length, who is the faculty member designated to address program-related issues that cannot wait for the return of the program director (absence management)?  Click or tap here to enter text. | | | | | | | | | | |
| 6. Identify the director of dermatologic surgery education. Explain how this individual satisfies the qualifications specified in the Program Requirements. (Limit response to 150 words)  Click or tap here to enter text. | | | | | | | | | | |
| 7.Identify the director of dermatopathology education. Explain how this individual satisfies the qualifications specified in the Program Requirements. (Limit response to 150 words)  Click or tap here to enter text. | | | | | | | | | | |
| **C. Faculty** | | | | | | | | | | |
| 8. For each faculty member (not limited to core) on the Faculty Roster, list the clinical FTE (cFTE) (percent of workdays in clinic, e.g., if a clinician spends seven half-days evaluating and managing patients and three half-days for administration or other time not caring directly for patients, this would be 70% clinical FTE). Next to that percentage, state the clinical educator FTE (ceFTE) (the percent of time spent supervising dermatology residents during patient care). *(Example: Dr. Ahmed Abdulla evaluates and manages patients six half-days weekly, two of which are spent supervising)*  Click or tap here to enter text. | | | | | | | | | | |
| 9. Describe how the program will ensure that core faculty members are able to devote a significant portion of their time to fulfill responsibilities to the residency program (i.e., conference education, feedback and evaluations, faculty development, scholarship). Describe any “protected time” apart from clinical duties afforded during routine business hours to fulfill this role. (Limit response to 300 words)  Click or tap here to enter text. | | | | | | | | | | |
| 10. Will residents be supervised by dermatologist faculty members? If so, describe the experience, including the proportion of time or frequency, and exposure by year in the program. (Limit response to 300 words)  Click or tap here to enter text. | | | | | | | | | | |
| 11. How will the program monitor the quality of the educational experiences offered by the supervising faculty, including quality of clinical teaching? (Limit response to 150 words)  Click or tap here to enter text. | | | | | | | | | | |
| **4. RESIDENTS APPOINTMENT** | | | | | | | | | | |
| **A. Resident Appointment and Eligibility Criteria** | | | | | | | | | | |
| 1. Describe how the program will ensure that there will be a minimum of 8 residents enrolled and participating in the educational program at all times. (Limit 300 words).  Click or tap here to enter text. | | | | | | | | | | |
| 2. Describe the eligibility criteria for residents and resident selection criteria. (Limit 400 words).  Click or tap here to enter text. | | | | | | | | | | |
| **5. EDUCATIONAL PROGRAM** | | | | | | | | | | |
| **A. Clinical Experiences** | | | | | | | | | | |
| **Inpatient Dermatology Clinical Curriculum** | | | | | | | | | | |
| 1. Describe the planned clinical training and educational experience residents will have in inpatient consultative dermatology service. Description should include whether there will be a dedicated hospital consult rotation for each resident, and if not, explanation of how each resident will develop competence for caring for inpatient dermatology consultations. Description should also include the roles and responsibilities of the resident in this experience, including whether residents will perform consults on nights and weekends. (Limit response to 300 words).   Click or tap here to enter text. | | | | | | | | | | |
| 1. Describe how faculty members will supervise inpatient consultations performed by residents. (Limit response to 150 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. Describe how faculty members and residents will provide subsequent hospital care to inpatients after the initial consultation. (Limit response to 300 words).   Click or tap here to enter text. | | | | | | | | | | |
| 1. Does the inpatient experience include evaluation and management of inpatient pediatric patients? Explain the program’s plan to include pediatric inpatient consult evaluation and management in the residency. (Limit response to 300 words).   Click or tap here to enter text. | | | | | | | | | | |
| **Pediatric Dermatology Clinical Curriculum** | | | | | | | | | | |
| 1. Will the program have a dedicated pediatric dermatology rotation? | | | Yes | | | | | No | | |
| 1.a. If YES, will this clinical experience be directed by a fellowship-educated pediatric dermatologist? | | | Yes | | | | | No | | |
| 1.b. If NOT, what is the planned action that will allow residents to achieve competence in the evaluation and management of pediatric dermatology patients? (Limit response to 150 words)  Click or tap here to enter text. | | | | | | | | | | |
| 2. Describe the clinical training and educational experience residents will receive in performing basic pediatric dermatologic procedures, evaluate and manage newborns and infants, managing genetic skin disorders including parental counselling, birth defects and malformations, childhood skin neoplasms, infections, and inflammatory skin disorders. (Limit response to 150 words)  Click or tap here to enter text. | | | | | | | | | | |
| **Dermatologic Surgery Clinical Curriculum** | | | | | | | | | | |
| 1. Describe the plan for hands-on experiences for residents in dermatologic surgery. Include whether there will be a separate dermatologic surgery rotation, and if not, how residents will achieve competence in performing dermatologic procedures. (Limit response to 300 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. Review the NIHS list of required procedures that residents must either perform or directly assist in performing. Are there any required procedures that need special arrangements (i.e., external rotations) to ensure residents will obtain at least the minimum required experience? If yes, describe the program’s plan. (Limit response to 150 words)   Click or tap here to enter text. | | | | | | | | | | |
| **Dermatopathology Clinical Curriculum** | | | | | | | | | | |
| 1. Describe the plan for resident sign-out experience in dermatopathology and the qualifications of faculty members signing out (i.e., prior residency background or fellowship education). Include whether there will be a separate dermatopathology rotation, and if not, explain how residents will achieve the expected clinical competencies in reading dermatopathology slides. (Limit response to 300 words)  Click or tap here to enter text. | | | | | | | | | | |
| 2. Describe the clinical learning opportunities residents will have with direct slide review. Comment specifically on experiences that will involve both direct and virtual dermatopathology slide review. (Limit response to 300 words)  Click or tap here to enter text. | | | | | | | | | | |
| **Aesthetic Dermatology Clinical Curriculum** | | | | | | | | | | |
| 1. Describe the plan for residents’ aesthetic dermatology education with LASERs including hands-on experiences. (Limit response to 150 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. Describe the plan for residents’ aesthetic dermatology education with injecting neurotoxins and fillers, including hands-on experiences. (Limit response to 150 words).   Click or tap here to enter text. | | | | | | | | | | |
| 1. Describe the plan for residents’ aesthetic dermatology education and hands-on experiences with performing chemical peels and other dermatological esthetic procedures not listed above. (Limit response to 150 words)   Click or tap here to enter text. | | | | | | | | | | |
| **Continuity Clinic** | | | | | | | | | | |
| 1. Describe the plan for dermatology resident continuity clinic design, including the frequency of continuity clinic for each year of the educational program, and which faculty members will supervise the continuity clinic experience. (Limit response to 150 words)  Click or tap here to enter text. | | | | | | | | | | |
| 2.Will each resident follow a panel of patients that will be specifically scheduled to see him or her in follow-up? | | | | | Yes | | | | No | |
| 3.If NOT, explain how the program will ensure residents have a continuity experience? (Limit response to 150 words)  Click or tap here to enter text. | | | | | | | | | | |
| **Dermatology Clinical Supervision** | | | | | | | | | | |
| 1. Will there be any circumstances in which residents will evaluate patients without direct supervision by a program faculty member? | | | | | Yes | | | | No | |
| 1. If YES, state the year of the educational program and the setting(s), and estimate the percentage of encounters for which DY1, DY2, DY3 and DY4 residents will not have direct supervision (Limit response to 150 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. State the maximum number of dermatology residents and others (including medical students, residents from other specialties, and allied providers) that each faculty member will clinically supervise at one time. Describe the settings and how often this “total supervised-to-faculty member” ratio exceeds 3:1. (Limit response to 300 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. In clinical settings where faculty members are supervising resident(s), will the faculty members simultaneously evaluate patients? | | | | | Yes | | | | No | |
| If YES, in a half-day clinic (assume four hours of clinical care), what is the total number of patients (independent + supervised) for which each faculty member will typically be responsible while supervising residents? (Limit response to 150 words)  Click or tap here to enter text. | | | | | | | | | | |
| **Educational and Conference Program** | | | | | | | | | | |
| 1. Estimate the number of education sessions per academic year for which all residents (excluding those on approved leaves) will be gathered face-to-face for group learning. (Limit response to 150 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. Will educational sessions occur at times when residents are rotating at locations other than where the session is being held? | | | | | Yes | | | | No | |
| If so, describe the arrangements for remote participation by the residents. (Limit response to 150 words)  Click or tap here to enter text. | | | | | | | | | | |
| 1. Estimate the amount of time (e.g., hours) each week that residents will typically attend didactics/conferences, workshops, or other non-clinical learning sessions.   Click or tap here to enter text. | | | | | | | | | | |
| 1. List the conference settings in which dermatology residents will have the opportunity to present and discuss patients with challenging evaluations, diagnoses, complications, or management strategies (patient case reviews), where multiple faculty members are present to provide input.   Click or tap here to enter text. | | | | | | | | | | |
| 1. Describe the planned conferences in which residents will gain knowledge in research methodology, including study design, analysis, and interpretation of data. (Limit response to 150 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. Describe the planned conferences in which residents will gain knowledge in business aspects of dermatology, including practice management and health care policy.   Click or tap here to enter text. | | | | | | | | | | |
| 1. Complete the table below regarding didactic/conference experience. Note that “leading” a conference means attending and having a directing role for information presented. | | | | | | | | | | |
| **Conference Type** | **Site/ Location** | **Frequency (daily (d), weekly (w), monthly (m), quarterly (q), or less (l)** | | **Estimate Percentage That this Conference type will be led by Program Faculty** | | | **Estimate Percentage That this Conference type will be led by Program Residents** | | | **Estimate Percentage That this Conference type will be Outsourced to another program or outside meeting** |
| Journal club |  |  | |  | | |  | | |  |
| Grand rounds |  |  | |  | | |  | | |  |
| Basic science conference education |  |  | |  | | |  | | |  |
| Dermatopathology conference education |  |  | |  | | |  | | |  |
| Aesthetic dermatology conference education |  |  | |  | | |  | | |  |
| Dermatologic surgical education |  |  | |  | | |  | | |  |
| Conferences that discuss pathophysiology and diagnosis and management of complex medical dermatologic conditions of adults and children |  |  | |  | | |  | | |  |
| Conferences that discuss indications, risks, benefits, dosing, side effects, and monitoring of commonly used dermatologic therapies in children and adults |  |  | |  | | |  | | |  |
| Conferences that discuss diseases specific to pediatric patients, including neonatal disorders, congenital neoplasms, and hamartomas, cutaneous signs of child abuse, and inherited and sporadic multisystem skin diseases |  |  | |  | | |  | | |  |
| **Data Reporting**  For the following data reporting tables, a clinic session refers to a half-day clinic, or a four-hour period of patient scheduled time | | | | | | | | | | |
| 1. Provide the following information from a recent 12-month period for the dermatology outpatient clinics, subspecialty clinics, etc., where residents will be assigned. (Note: Do not include nurse-only visits.)  |  | **Site #1** | **Site #2** | **Site #3** | **Site #4** | **Site #5** | | --- | --- | --- | --- | --- | --- | | Total # of Dermatology Outpatient Visits. | # | # | # | # | # | | Estimate % of patients in practice who are pediatric patients (<18yo). | # % | # % | # % | # % | # % | | # of new patients. | # | # | # | # | # | | Total # of hours per week where residents will be scheduled to work. | # | # | # | # | # | | Average # of patients evaluated per resident per clinic session. | # | # | # | # | # | | Average # of patients scheduled (supervised + evaluated independently) per supervising faculty member per clinic session. | # | # | # | # | # | | Average # of residents planned per clinic session. | # | # | # | # | # | | Average # of faculty members supervising residents per session. | # | # | # | # | # | | Maximum number of all residents and allied providers simultaneously supervised by one faculty member. | # | # | # | # | # | | | | | | | | | | | |
| 1. Provide anticipated number of patients the residents will evaluate in a typical half-day clinic (four hours) for each year of the program and for each rotation where residents will directly evaluate and manage patients.  |  | **DY-1** | **DY-2** | **DY-3** | **DY-4** | | --- | --- | --- | --- | --- | | Adults’ dermatology | # | # | # | # | | Inpatient dermatology rounds | # | # | # | # | | Pediatric dermatology | # | # | # | # | | | | | | | | | | | |
| 1. Provide estimated maximum resident to faculty (core or non-core) ratio for supervised clinical sessions, for each year of the program.  |  | **DY-1** | **DY-2** | **DY-3** | **DY-4** | | --- | --- | --- | --- | --- | | Adults’ dermatology | # | # | # | # | | Inpatient dermatology rounds | # | # | # | # | | Pediatric dermatology | # | # | # | # | | Dermatologic surgery | # | # | # | # | | | | | | | | | | | |
| **Inpatient Information**   |  |  |  | | --- | --- | --- | | 12-month period covered by statistics | From: Click here to enter a date. | To: Click here to enter a date. |  |  | **Site #1** | **Site #2** | **Site #3** | **Site #4** | **Site #5** | **Row Total** | | --- | --- | --- | --- | --- | --- | --- | | Number of dermatology inpatient consults | # | # | # | # | # | # | | What percent of the above total is anticipated to have direct resident involvement? | # % | # % | # % | # % | # % | n/a | | | | | | | | | | | |
| **Dermatologic Procedures Information**  Provide the number of dermatologic procedures performed in each participating site from a recent 12-month period.   | **Level 1**  *Residents must become competent in the performance of the following procedures.* | **Site #1** | **Site #2** | **Site #3** | **Site #4** | **Site #5** | **Row Total** | | --- | --- | --- | --- | --- | --- | --- | | Excision - Benign or Malignant | # | # | # | # | # | # | | Repair (Closure) Simple/Intermediate/Complex | # | # | # | # | # | # | | | | | | | | | | | |
| | **Level 2**  *Residents* *must have significant exposure to other procedures, either through direct observation or as an assistant in Mohs micrographic surgery, and reconstruction of these defects, to include flaps and grafts, and the application of a wide range of lasers and other energy sources. (Core)* | **Site #1** | **Site #2** | **Site #3** | **Site #4** | **Site #5** | **Row Total** | | --- | --- | --- | --- | --- | --- | --- | | Mohs Micrographic Surgery | # | # | # | # | # | # | | Laser - Combined (Ablative, Non-ablative,  Vascular, etc.) | # | # | # | # | # | # | | Botulinum Toxin Chemodenervation | # | # | # | # | # | # | | Soft Tissue Augmentation/Skin Fillers | # | # | # | # | # | # | | Flaps and Grafts (Split or Full) | # | # | # | # | # | # | | Nail Procedures | # | # | # | # | # | # | | | | | | | | | | | |
| **Dermatopathology**  Provide the following data from a recent 12-month period for each site where residents will be assigned for dermatopathology sign-out.   |  |  |  | | --- | --- | --- | | 12-month period covered by statistics | From: Click here to enter a date. | To: Click here to enter a date. |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **Dermatopathology Specimens** | **Site #1** | **Site #2** | **Site #3** | **Site #4** | **Site #5** | **Row Total** | | # Cutaneous specimens from within the site | # | # | # | # | # | # | | # Cutaneous specimens from outside the site | # | # | # | # | # | # | | # Direct immunofluorescence specimens | # | # | # | # | # | # | | # Immunohistochemistry studies | # | # | # | # | # | # | | If a resident is assigned to a dermatopathology rotation, what is the average # of specimens reviewed by the resident per session (four-hours) per site? | # | # | # | # | # | # | | | | | | | | | | | |
| **Phototherapy**   |  |  |  | | --- | --- | --- | | 12-month period covered by statistics | From: Click here to enter a date. | To: Click here to enter a date. |  | **Phototherapy** | **Site #1** | **Site #2** | **Site #3** | **Site #4** | **Site #5** | **Row Total** | | --- | --- | --- | --- | --- | --- | --- | | Number of UVB - narrowband | # | # | # | # | # | # | | Number of UVB - broadband | # | # | # | # | # | # | | Number of PUVA | # | # | # | # | # | # | | Photodynamic therapy | # | # | # | # | # | # | | Other: (specify) | # | # | # | # | # | # | | Other: (specify) | # | # | # | # | # | # | | | | | | | | | | | |
| **Allergy Diagnostic**   |  |  |  | | --- | --- | --- | | **Epicutaneous testing (Patch Testing)**  12-month period covered by statistics | From: Click here to enter a date. | To: Click here to enter a date. |  | **Patch Testing** | **Site #1** | **Site #2** | **Site #3** | **Site #4** | **Site #5** | **Row Total** | | --- | --- | --- | --- | --- | --- | --- | | Estimate # of patients evaluated with patch testing. | # | # | # | # | # | # | | Percent of patch test visits anticipated to involve a dermatology resident. | # | # | # | # | # | # |  |  |  |  | | --- | --- | --- | | **Skin Prick Testing**  12-month period covered by statistics | From: Click here to enter a date. | To: Click here to enter a date. |  | **Patch Testing** | **Site #1** | **Site #2** | **Site #3** | **Site #4** | **Site #5** | **Row Total** | | --- | --- | --- | --- | --- | --- | --- | | Estimate # of patients evaluated with prick testing. | # | # | # | # | # | # | | Percent of prick test visits anticipated to involve a dermatology resident. | # | # | # | # | # | # | | | | | | | | | | | |
| 1. **Scholarly Activity** | | | | | | | | | | |
| 1. List any national, or international presentations by faculty members in the last five years, including the title, meeting name, location, and date.   Click or tap here to enter text. | | | | | | | | | | |
| 1. List any chapters or textbooks published by faculty members in the last five years   Click or tap here to enter text. | | | | | | | | | | |
| 1. List any research projects by faculty members in the last five years.   Click or tap here to enter text. | | | | | | | | | | |
| 1. If faculty members have served as journal editors, list the positions.   Click or tap here to enter text. | | | | | | | | | | |
| 1. How will the program support the research skills development of residents and faculty members?   Click or tap here to enter text. | | | | | | | | | | |
| 1. How will the program support residents in preparing oral or poster presentations, scientific publications? Will the program protect time and provide resources to support the residents attending at least one national meeting during the program?   Click or tap here to enter text. | | | | | | | | | | |
| 1. **Faculty Development and Program Improvement** | | | | | | | | | | |
| 1. Describe the program’s plan for faculty development, including the format, setting, and sponsor (institutional, program, web-based/electronic, or other outsourced) of the faculty development programs available to program faculty members. (Limit response to 400 words)  Click or tap here to enter text. | | | | | | | | | | |
| 2. Will there be a mechanism to determine whether faculty members are participating in the activities that are planned by the program or by the institution?  Click or tap here to enter text. | | | | | | | | | | |
| 3. Describe how the program plans to assess and monitor program areas for improvement. (Limit response to 150 words)  Click or tap here to enter text. | | | | | | | | | | |
| **6. RESIDENT EVALUATION BASED ON NIHS CORE COMPETENCIES** | | | | | | | | | | |
| **A. Patient Care and Procedural Skills**  Describe how the program plans to assess the residents through direct observation of patient encounters in both the inpatient and outpatient settings. Identify the objective direct observation tools used (e.g., mini CEX, procedure checklist, etc.) to assess residents' (a) ability to gather data, (b) clinical reasoning, (c) patient management skills, and (d) procedural skills. (Limit response to 400 words)  Click or tap here to enter text. | | | | | | | | | | |
| **B. Medical Knowledge**  Describe the assessment method(s) that will be used to evaluate residents’ medical knowledge. (Limit response to 400 words)  Click or tap here to enter text. | | | | | | | | | | |
| **C. Practice-based learning and improvement** | | | | | | | | | | |
| 1. Describe one learning activity in which residents will be able to identify strengths, deficiencies, and limits in their knowledge and expertise (self-reflection and self-assessment); set learning and improvement goals; and identify and perform appropriate learning activities to achieve self-identified goals (lifelong learning). (Limit response to 200 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. Describe how residents will engage in quality improvement (QI). List and briefly describe the design of one or two examples of current or ongoing quality improvement projects or efforts occurring in the program’s participating site(s) in the past two years. What will be the role of residents QI effort? What will be the role of faculty in the QI effort? (Limit response to 400 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. Describe how often (daily, weekly, monthly, semiannually, yearly) residents will receive formative evaluation feedback from faculty members, how it is delivered, and how residents will incorporate this feedback into daily practice. (If a specific tool is used to evaluate these skills, have it available for review by the Accreditation Field Representative**.** (Limit response to 200 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. Describe an example of a learning activity through which residents can develop skills needed to use information technology to locate, appraise, and assimilate evidence from scientific studies and apply it to their patients' health problems. (Limit response to 200 words)   Click or tap here to enter text. | | | | | | | | | | |
| **D. Interpersonal and Communication Skills** | | | | | | | | | | |
| 1. Describe any planned educational activities, besides clinical role modeling, that are designed to develop residents’ interpersonal and communication skills to educate patients, families, learners, and other health care professionals? (Limit response to 400 words).   Click or tap here to enter text. | | | | | | | | | | |
| 1. Describe how residents create educational materials or presentations that include digital images to educate others in a local, regional, or international setting? (Limit response to 400 words).   Click or tap here to enter text. | | | | | | | | | | |
| 1. Describe learning activities in which residents develop their skills and habits to work effectively as a member or leader of a health care team (or another professional group). In the example, identify the members of the team, responsibilities of the team members, and how team members communicate to accomplish responsibilities. (Limit response to 400 words)   Click or tap here to enter text. | | | | | | | | | | |
| 1. Briefly describe how residents will be provided with opportunities to counsel patients regarding their disease and treatment options, and provide appropriate anticipatory guidance to parents and, as age-appropriate, to children, regarding chronic disorders, genodermatoses, and congenital cutaneous anomalies. (Limit response to 400 words)   Click or tap here to enter text. | | | | | | | | | | |
| **E. Professionalism** | | | | | | | | | | |
| 1. What are the plans or resources available for residents to explore ethical problems faced by dermatologists? (Limit response to 400 words)  Click or tap here to enter text. | | | | | | | | | | |
| **F. System-Based Practice** | | | | | | | | | | |
| 1. Describe the learning activities through which residents achieve competence in the elements of systems-based practice: working effectively in various health care delivery settings and systems, coordinating patient care within the health care system; incorporating considerations of cost-containment and risk-benefit analysis in patient care; advocating for quality patient care and optimal patient care systems; and working in interprofessional teams to enhance patient safety and care quality. (Limit response to 400 words).  Click or tap here to enter text. | | | | | | | | | | |
| 2.Describe settings in which residents will have opportunities to interact with physicians from other specialties. (Limit response to 400 words)  Click or tap here to enter text. | | | | | | | | | | |
| 3.Describe activities that fulfill the requirement for experiential learning in identifying system errors and implementing potential solutions. **(**Limit response to 400 words).  Click or tap here to enter text. | | | | | | | | | | |
| **7. APPENDIX** | | | | | | | | | | |
| A. Formal Didactic Sessions by Academic Year | | | | | | | | | | |
| 1. For each year of residency, please attach a list of all scheduled didactic courses (including discussion groups, lectures, grand rounds, basic science, skills labs, and journal club) at all participating sites attended by residents, using the format below. If attended by residents from multiple years, list in each year but provide a full description **only the first time it 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., lecture, discussion groups, etc.)  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 Dermatology  a) Seminar  b) Required Y-1  c) Survey of contemporary methods and styles of dermatology, 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 | | | | | | | | | | | |
| 2. If attendance will be monitored, explain how this is accomplished and how feedback is given regarding non-attendance. (Limit 250 words).  Click or tap here to enter text. | | | | | | | | | | |

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| B. Residency Program Block Diagram/Schedule |
| A block diagram is a representation of the rotation schedule for a resident in a given post- graduate year. It offers information on the type, location, length, and variety of rotations for that year. The block diagram shows the rotations a resident would have in a given year; it does not represent the order in which they occur. There should be only one block diagram for each year of education. The block diagram should not include resident names.   * Create and upload a PDF of your program’s block diagram using the information below as a guide. * Two common models of the block diagram exist: the first is organized by month; the second divides the year into 13 four-week blocks. Rotations may span several of these time segments, particularly for subspecialty programs. Both models must indicate how vacation time is taken. This can be done by allocating a time block to vacation, or by indicating this in a “Notes” section accompanying the block diagram. Examples of other less common models are also provided below. * In constructing the block diagram, include the **participating site** in which a rotation takes place, as well as the **name of the rotation**. If the name of the rotation does not clearly indicate the nature of the rotation, then clarifying information should be provided as a footnote to the block diagram or elsewhere in the document. * **Group the rotations by site.** For example, list all of the rotations in Site 1 first, followed by all of the rotations in Site 2, etc. * When “elective” time is shown in the block diagram, the choice of elective rotations available for residents should be listed below the diagram. Elective rotations do not require a participating site. * Clinical rotations for some specialties may also include structured outpatient time. For each rotation, the percentage of time the resident spends in outpatient activities should be noted. * Clinical rotations for some specialties may also include structured research time. The fourth line of the schedule should be used to represent the percentage of time devoted to structured research on a clinical rotation. If a block is purely research, it should be labeled as such, and should not be associated with a participating site. * If needed, additional information to aid in understanding your program’s block diagram may be entered in a “Notes” section at the end of the Block Diagram Data Collection Form.   **Sample Block Diagrams**  **Block Diagram 1(1)** In this example, the year’s rotations are divided into 12 (presumably one-month) clinical rotations. Rotations may include structured outpatient or research time and electives.   |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Block** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | | **Site** | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 6 | 1 | 1 | 1 | | **Rotation Name** | CTU: IM | CTU: IM | CTU: IM | ER | ER | ICU | CTU:Peds | Ped ER | FM | Plastics | Plastics | Elect | | **% Outpatient** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 100 | 100 | 60 | 60 | 100 | | **% Research** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   **Block Diagram 2 (1)** In this example, the year’s rotations are divided into 13 equal (presumably four-week) clinical rotations. Rotations may include structured outpatient or research time, and electives.   |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Block** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | | **Site** | Site 1 | Site 1 | Site 1 | Site 1 | Site 1 | Site 2 | Site 2 | Site 2 | Site 2 | Site 3 | Site 3 | Site 3 | Site 1 | | **Rotation Name** | Derm | Derm | ER | CCU | ICU | Derm | Derm | ICU | Derm | Wards | Wards | Clinic | Elec/Vac | | **% Outpatient** | 30 | 30 | 100 | 0 | 0 | 20 | 20 | 0 | 100 | 0 | 0 | 100 | 0 | | **% Research** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   **Block Diagram 3 (1)** In this example, the year’s rotations are divided into six blocks of equal duration. One of the blocks is used for an elective, which can be chosen from a list of elective rotations and a vacation month.   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **Block** | **1** | **2** | **3** | **4** | **5** | **6** | | **Site** | Site 1 | Site 1 | Site 2 | Site 2 | Site 3 |  | | **Rotation Name** | CCU | Med. Outpt. | Wards | ER | Wards | Elective/Vacation | | **% Outpatient** | 0 | 100 | 0 | 100 | 0 |  | | **% Research** | 0 | 0 | 0 | 0 | 0 |  |  |  |  |  |  | | --- | --- | --- | --- | | **Notes** | Possible electives: |  | | |  |  |  |  |   **Block Diagram 4 (1)** In this example for a subspecialty program, the year’s rotations are divided into four equal blocks. Structured research time comprises 40% of the resident’s time on the specialty outpatient month. There is one three-month block devoted entirely to research.   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Block** | **1** | **2** | **3** | **4** | | **Site** | Site 1 | Site 2 | Site 2 |  | | **Rotation Name** | Specialty Outpatient | Specialty Outpatient | Wards | Research | | **% Outpatient** | 100 | 100 | 0 |  | | **% Research** | 0 | 40 | 0 | 100 |   (1) In any block diagram, there must be a formal allocation for vacation time. If not shown in the diagram, a “Notes” section must indicate how vacation time is taken. |