CREIGHTON UNIVERSITY MEDICAL CENTER
PULMONARY AND CRITICAL CARE MEDICINE FELLOWSHIP PROGRAM

OVERALL FELLOWSHIP EDUCATIONAL GOAL

The overall educational goal of the Pulmonary and Critical Care Medicine Fellowship program is to prepare physicians to practice the subspecialties of pulmonary medicine and critical care medicine competently, independently, and with the highest ethical standards. It is expected that graduating fellows will ultimately achieve board certification in these medicine subspecialties. To this end, the Fellowship Program Director and Key Clinical Faculty have developed a competency-based, accredited educational curriculum which strictly adheres to the Accreditation Council for Graduate Medical Education (ACGME) “General Program Requirements for Fellowship Education in the Subspecialties of Internal Medicine” and the “Program Requirements for Fellowship Education in Pulmonary Disease and Critical Care Medicine”.

OVERALL FELLOWSHIP EDUCATIONAL OBJECTIVES

1. To provide the length and diversity of training specified by ACGME. The combined Pulmonary and Critical Care Medicine Fellowship will be 36 months in duration. Fellows will have at least 9 months of meaningful patient care responsibility for inpatients and outpatients with a wide variety of pulmonary diseases with emphasis on pulmonary physiology and its correlation with clinical disorders. Fellows will also have at least 9 months of clinical training in critical care medicine with at least 6 months devoted to the care of critically ill medical patients and at least 3 months devoted to the care of critically ill non-medical patients. Fellows will actively participate in the research program, (up to 6 months of protected time in the 3rd year) with the expectation that these efforts will result in a publication or presentation at a national meeting.

Established rotations with appropriate program letters of agreement currently include:

a. CUMC MICU: Minimum of five months over three years of fellowship
b. CUMC Pulmonary Consults: Minimum of five months over three years of fellowship
c. CUMC SICU: Minimum of two months in the 2nd and/or 3rd years of fellowship
d. CUMC Pediatric ICU: Elective that may be taken in the 2nd and/or 3rd years of fellowship
e. CUMC Cardiology: Elective, may be taken in the 2nd and/or 3rd years of fellowship
f. CUMC Research: Two to six months in the 2nd and/or 3rd years of fellowship
g. CUMC Sleep: Elective, may be taken in the 2nd and/or 3rd years of fellowship
h. CUMC Pathology: Elective, may be taken in the 2nd and/or 3rd years of fellowship
i. CUMC Radiology: Elective, may be taken in the 2nd and/or 3rd years of fellowship
j. CUMC PFT Lab/RT/Pulmonary Rehab: Elective, may be taken in the 2nd and/or 3rd years of fellowship
k. VA ICU: Minimum of five months over three years of fellowship
l. VA Pulmonary Consults: Minimum of five months over three years of fellowship
m. VA PFT Lab/RT/Pulmonary Rehab: One month in the 1st year of fellowship
n. VA Anesthesia: One month in the 1st year of fellowship
o. VA Radiology: One month in the 1st year of fellowship
p. VA Pathology: One month in the 1st year of fellowship
q. VA Research: Two to six months in the 2nd and/or 3rd years of fellowship
r. VA Sleep: One month in the 2nd year of fellowship

Fellows will have a half-day continuity care clinic experience throughout the entire length of the training program regardless of clinical rotation assignment. During months on Research rotations fellows will attend a half-day session of the Cystic Fibrosis Clinic at UNMC. During VA Pulmonary Consult rotations and VA Sleep Rotations fellows will attend a half-day Pulmonary & Sleep Medicine Clinic at the VA.

2. To teach fellows how to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Fellows are expected to learn the practice of health promotion, disease prevention, diagnosis, care, and treatment of men and women from adolescence to old age, during health and all stages of pulmonary disease and/or critical illness. Faculty will teach fellows these concepts on rounds, in clinics, and through didactic lectures and presentations. All of the procedures and disease states specified by the ACGME will be covered as detailed in the individual rotation curricula.

3. To expand and improve each fellow's medical knowledge in established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care as they relate to pulmonary and critical care medicine. Fellows are expected to learn the scientific method of problem solving, evidence-based decision making, a commitment to lifelong learning, and an attitude of caring that is derived from humanistic and professional values. Faculty will teach fellows these concepts on rounds, in clinics, and through didactic lectures and presentations. Fellows will also learn to practice evidence-based medicine and will be required to present formal case presentations, journal club articles, and core curriculum conferences. All of the procedures and disease mix specified by the ACGME will be covered as detailed in the individual rotation curricula.

4. To develop the fellows’ 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 life-long learning. Fellows are expected to develop skills and habits that allow them to: identify personal strengths, deficiencies, and limits in their pulmonary and critical care knowledge and expertise; set learning and improvement goals; identify and perform appropriate learning activities; systematically analyze practice, using quality improvement methods, and implement changes with the goal of practice improvement; incorporate formative evaluation feedback into daily practice; locate, appraise, and assimilate evidence from scientific studies related to individual patients’ health problems; use information technology to optimize learning; and participate in the education of patients, families, students, fellows and other health professionals. These skills will be developed through faculty and fellow interaction on rounds, in clinics, through didactic lectures and presentations, and through a 360 degree evaluation process. Fellows will also learn to practice evidence-based medicine and will be required to present formal case presentations, journal club articles, and core curriculum conferences.

5. To improve each fellow’s interpersonal and communication skills, ultimately resulting in the effective exchange of information and collaboration with patients, their families, and other
health professionals. Fellows are expected to: communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds; communicate effectively with physicians, other health professionals, and health related agencies; work effectively as a member or leader of a health care team or other professional group; act in a consultative role to other physicians and health professionals; and maintain comprehensive, timely, and legible medical records. These skills will be developed through multidisciplinary faculty, ancillary staff, and fellow interactions on rounds, in clinics, through didactic lectures and presentations, and through a 360 degree evaluation process. Fellows are also actively encouraged to join hospital committees.

6. To improve each fellow’s commitment to carrying out professional responsibilities and adherence to ethical principles. Fellows are expected to demonstrate: compassion, integrity, and respect for others; responsiveness to patient needs that supersede self-interest; respect for patient privacy and autonomy; accountability to patients, society and the profession; and sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disability, and sexual orientation. These skills will be developed through multidisciplinary faculty, ancillary staff, and fellow interactions on rounds, in clinics, through didactic lectures and presentations, and through a 360 degree evaluation process. Fellows are also actively encouraged to contribute service by joining hospital committees.

7. To instruct fellows in systems-based practice with emphasis on 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. Fellows are expected to work effectively in various health care delivery settings and systems relevant to pulmonary and critical care medicine; coordinate patient care within the health care system relevant to pulmonary and critical care medicine; incorporate considerations of cost awareness and risk-benefit analysis in patient-based care; advocate for quality patient care and optimal patient care systems; work in interprofessional teams to enhance patient safety and improve patient care quality; and participate in identifying system errors and implementing potential systems solutions. These skills will be developed through faculty, ancillary staff, and fellow interaction on rounds, in clinics, and through didactic lectures and presentations. In addition, the sponsor institution’s GME office annually arranges a series of conferences focusing on these topics. Fellows are also actively encouraged to join hospital committees.

8. To advance fellows’ knowledge of the basic principles of research, including how such research is conducted, evaluated, explained to patients, and applied to patient care through participation in mentored scholarly activities. Fellows will attend the annual “Introduction to Clinical Research” (MED 483) course to learn the standards of ethical research conduct, design and interpretation of research studies, responsible use of informed consent, research methodology, and interpretation of data. Fellows will also complete the Creighton University Human Research Protection Program as outlined by the Creighton University Institutional Review Board. This program training program includes the online CITI Program training and certification. Each fellow will identify an area of research interest and discuss with the Program Director who will identify an appropriate mentor.
SPECIFIC PULMONARY AND CRITICAL CARE GOALS AND OBJECTIVES

Specific educational goals and objectives are outlined in each rotation’s curriculum. In aggregate, these specific goals and objectives combine to fulfill the overall fellowship goals and objectives outlined above.

This policy will be reviewed annually by the Fellowship Subcommittee.

(8/1/08)