**Initial Accreditation Application: Interventional Cardiology (Cardiology)**

401 North Michigan Avenue · Chicago, Illinois 60611 · United States · +1.312.755.7042 www.acgme-i.org

**Submission for Initial Accreditation:** This Advanced Specialty Application is for programs applying for **Initial Accreditation ONLY** and is used in conjunction with the Accreditation Data System (ADS).

All sections of the form applicable to the program must be completed for it to be accepted for review. The information provided should describe the existing program. For items that do not apply, indicate “N/A” in the space provided. Where patient numbers are requested, provide exact numbers as requested and indicate the exact dates for the data entered. If any requested information is unavailable, an explanation must be given, and it should also be indicated as unavailable in the appropriate place on the form. Once the form is complete, number the pages sequentially in the bottom center.

The program director is responsible for the accuracy of the information supplied in this form and must sign it. It must also be signed by the designated institutional official (DIO) of the Sponsoring Institution, who will submit the application electronically in ADS.

Review the International Foundational Program Requirements for Graduate Medical Education and Advanced Specialty Program Requirements for Graduate Medical Education in Interventional Cardiology. The International Foundational, Advanced Specialty, and Institutional Requirements may be downloaded from the ACGME International website: [www.acgme-i.org](http://www.acgme-i.org/).

Email questions regarding the form’s content to acgme-i@acgme-i.org.

Email questions regarding ADS to ADS@acgme.org (type the program number in the subject line).

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| Program Name: Click here to enter text. |

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**Introduction**

**Duration and Scope of Education**

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| * + - 1. What will be the length, in months, of the educational program?

Choose an item.**Institution****Sponsoring Institution** |

1. Will the fellowship function as an integral part of an ACGME-I-accredited residency in cardiology? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

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1. How will the program ensure there is a collaborative relationship between the program director of the internal medicine residency program and the cardiovascular disease fellowship program to ensure compliance with all applicable ACGME-I requirements? (Limit 250 words)

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**Program Personnel and Resources**

**Program Director**

1. Will the program director have at least three years of experience in an Accreditation Council for Graduate Medical Education- or ACGME-I-accredited cardiovascular disease fellowship or interventional cardiology fellowship? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

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**Faculty**

1. Will fellows have access to faculty members with expertise in the following?
2. Congenital heart disease in adults [ ] YES [ ] NO
3. Hematology [ ] YES [ ] NO
4. Pharmacology [ ] YES [ ] NO
5. Radiation safety [ ] YES [ ] NO
6. Research [ ] YES [ ] NO

Explain any ‘NO’ responses (Limit 250 words)

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**Resources**

1. Will cardiac catheterization laboratories be available at the primary clinical site? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

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1. If ‘YES” to Question 1 above, will the laboratories:
2. have cardiac fluoroscopic equipment? [ ] YES [ ] NO
3. have digital imaging? [ ] YES [ ] NO
4. have recording devices? [ ] YES [ ] NO
5. have resuscitative equipment? [ ] YES [ ] NO
6. perform a minimum of 400 interventional procedures per year at the primary laboratory? [ ] YES [ ] NO
7. perform a minimum of 200 interventional procedures per year at the secondary laboratory? [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 300 words)

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1. Will the following resources be available?
2. Cardiac intensive care unit [ ] YES [ ] NO
3. Active cardiac surgery program [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 300 words)

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**Fellow Appointment**

**Eligibility Criteria**

1. How will the program ensure that, prior to appointment, fellows have completed an ACGME-I-accredited cardiology fellowship program or another cardiology fellowship program acceptable to the Sponsoring institution’s Graduate Medical Education Committee? (Limit 250 words)

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**Specialty-Specific Educational Program**

**ACGME-I Competencies**

**Professionalism**

1. How will graduating fellows demonstrate a commitment to fulfilling their professional responsibilities and adhering to ethical principles? (Limit 300 words)

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**Patient Care and Procedural Skills**

1. How will graduating fellows demonstrate the ability to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health? (Limit 300 words)

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1. How will graduating fellows demonstrate competence in the prevention, evaluation, and management of the following?
2. Acute ischemic syndromes
3. Bleeding disorders or complications associated with percutaneous intervention or drugs
4. Chronic ischemic heart disease
5. Valvular and structural heart disease

Describe how competence will be evaluated in each of the areas listed. (Limit 400 words)

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1. How will graduating fellows demonstrate competence in the following?
2. Care of patients before and after interventional procedures
3. Care of patients in the cardiac care unit, emergency department, or other intensive care settings
4. Management of mechanical complications of percutaneous interventions
5. Outpatient follow-up of patients treated with drugs, interventions, devices, or surgery
6. Use and limitations of intra-aortic balloon counterpulsation (IABP) and other hemodynamic and circulatory support devices
7. Use of thrombolytic and antithyrombolytic antiplatelet and antithrombin agents
8. Use of vasoactive agents for epicardial and microvascular spasm

Describe how competence will be evaluated in four of the seven areas listed. (Limit 400 words)

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1. How will graduating fellows demonstrate competence in the management of patients with the following?
2. Major and minor bleeding complications, including retroperitoneal bleeding
3. Vascular access complications

Describe how competence will be evaluated in each of the areas listed. (Limit 300 words)

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1. How will graduating fellows demonstrate competence in the ability to participate in pre-procedural planning, including indications for a procedure, and selection of the appropriate procedure or instruments? (Limit 300 words)

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1. How will graduating fellows demonstrate competence in the performance of the following?
	1. Balloon angioplasty
	2. Comprehensive invasive physiology measurement, such as intracoronary pressure measurement and coronary flow reserve
	3. Coronary angiograms
	4. Femoral and brachial/radial cannulation of normal and abnormally located coronary ostia
	5. Hemodynamic measurements
	6. Intravascular ultrasound
	7. Ventriculography and aortography

Describe how competence will be evaluated in four of the seven areas listed. (Limit 400 words)

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**Medical Knowledge**

* + - 1. How will graduating fellows demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care? (Limit 400 words)

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1. How will graduating fellows demonstrate knowledge of the therapeutic procedures integral to the discipline, including the following?
2. Assessment of plaque composition and response to intervention
3. Clinical importance of complete versus incomplete revascularization of a wide variety of cl inical and anatomic situations
4. Clinical utility and limitations of the treatment of valvular and structural heart disease
5. Detailed coronary anatomy
6. Pathophysiology of restenosis
7. Physiology of coronary flow and detection of flow-limiting conditions
8. Radiation physics, biology, and safety related to use of x-ray imaging equipment role of emergency coronary bypass surgery in the management of complications of percutaneous intervention
9. Role and limitations of established and emerging therapies for treatment of restenosis
10. Role of emergency coronary bypass surgery in the management of complications of percutaneous intervention
11. Role of platelets and the clotting cascade in response to vascular injury
12. Use of pharmacologic agents appropriate in the post-intervention management of patients

Describe how knowledge will be evaluated in six of the 11 areas listed. (Limit 600 words)

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1. How will graduating fellows demonstrate knowledge of the strengths and limitations of the following?
2. Differing percutaneous approaches for a wide variety of anatomical situations related to cardiovascular disease
3. Mechanical versus lytic approaches for patient with acute myocardial infarction
4. Non-invasive and invasive coronary evaluation during recovery after acute myocardial infarction

Describe how knowledge will be evaluated in each of the areas listed. (Limit 300 words)

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**Practice-Based Learning and Improvement**

1. How will graduating fellows demonstrate their 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? (Limit 300 words)

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**Interpersonal and Communication Skills**

1. How will graduating fellows demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, patients’ families, and other health professionals? (Limit 300 words)

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**Systems-Based Practice**

1. How will graduating fellows 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? (Limit 300 words)

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**Regularly Scheduled Educational Activities**

1. Complete Appendix A., Formal Didactic Sessions by Academic Year, and attach to submission.
2. Will fellows have the following?
3. Opportunity to review all knowledge content from conferences they cannot attend [ ] YES [ ] NO
4. Educational activities that allow for fellow-to-fellow interaction [ ] YES [ ] NO
5. Educational activities that allow for fellow-to-faculty member interaction [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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**Clinical Experiences**

* + - 1. How will the program ensure that rotations are structured to:
1. allow fellows to function as part of an effective interprofessional team;
2. minimize conflicting inpatient and outpatient responsibilities;
3. minimize the frequency of transitions;
4. provide continuity of patient care;
5. provide ongoing supervision of fellows; and,
6. provide meaningful assessment and feedback?

Describe how this will be achieved. (Limit 300 words)

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1. Will fellows have the following?
	* + - 1. Educational experiences in team-based care with other health care professionals [ ] YES [ ] NO
				2. Elective experiences relevant to their future practice [ ] YES [ ] NO
				3. Training using simulation [ ] YES [ ] NO
				4. A structured continuity ambulatory clinic experience for the duration of the program that exposes them to the breadth and depth of interventional cardiology? [ ] YES [ ] NO

 Explain any ‘NO’ responses. (Limit 250 words)

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* + - 1. How will the program ensure that each fellow, on average, is responsible for four to eight patients during each half-day clinic session, including patients being evaluated before and after interventional procedures? (Limit 300 words)

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* + - 1. How will the program ensure that follow-up clinical experience does not solely consist of fellows evaluating patients post-procedure for complications? (Limit 250 words)

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**Fellows’ Scholarly Activity**

How will the program ensure that all fellows engage in scholarly activity? (Limit 300 words)

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**Faculty Scholarly Activity**

1. How will the program ensure that at least 50 percent of core faculty members engage in scholarly activity? (Limit 300 words)

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**The Learning and Working Environment**

**Supervision and Accountability**

How will the program ensure that direct supervision of procedures performed by each fellow will occur until competence has been acquired and documented by the program director? (Limit 300 words)

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**Appendix A. Formal Didactic Sessions by Academic Year**

For each year of the fellowship, attach (Label: Appendix A.) a list of all scheduled didactic courses (including discussion groups, seminars and conferences, grand rounds, basic science, skills labs, and journal club) at all participating sites to which fellows will, using the format below. If attended by fellows from multiple years, list in each year but provide a full description *only the first time a site 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., seminar, conference, discussion groups)

b) Required or elective

c) Brief description (three or four sentences)

d) Frequency, length of session, and total number of sessions

**Example:**

|  |
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| Y-101. Introduction to Interventional Cardiologya) Seminarb) Required Y-1c) Survey of contemporary methods and styles of interventional cardiology, including approaches to clinical work with minority populations.d) Weekly, for 8 sessions.02. Departmental Grand Roundsa) Discussion groupsb) Required, Y-1, Y-2, Y-3; Elective Y-4c) Clinical case presentations, sponsored by each departmental division, followed by discussion and review of contemporary state of knowledge. Format includes fellow presentations and discussions with additional faculty discussant.d) Twice monthly, 24 sessions |

If fellow attendance will be monitored, explain how this is to be accomplished and how feedback will be given regarding non-attendance. (Limit 250 words)

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