**New Application: Medical Toxicology**

**Review Committees for Emergency Medicine or Preventive Medicine**

**ACGME**

**Oversight**

**Participating Sites**

1. Briefly describe how the program will ensure the provision of a unified educational experience for fellows if using multiple sites. [PR I.B.5.]

Limit response to 500 words.

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**Resources**

1. Does the program structure include the participation of the following? [PRs I.D.1.b).(1)-(2)]
2. a school of pharmacy or a department of pharmacology [ ]  YES [ ]  NO
3. a school of public health, department of health, department of population health, department of community health, or similar institution [ ]  YES [ ]  NO

Explain any NO responses. Limit response to 400 words.

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1. Provide the following information for each site to which fellows will rotate. [PRs I.D.1.d); I.D.1.e).(1)-(1).(d)]

| **# of Beds** | **Site #1** | **Site #2** | **Site #3** | **Site #4** |
| --- | --- | --- | --- | --- |
| Adult Emergency Department | # | # | # | # |
| Pediatric Emergency Department | # | # | # | # |
| Adult inpatient facilities | # | # | # | # |
| Pediatric inpatient facilities | # | # | # | # |
| Adult intensive care facilities | # | # | # | # |
| Pediatric intensive care facilities | # | # | # | # |
| Adult outpatient facilities | # | # | # | # |
| Pediatric outpatient facilities | # | # | # | # |

|  | **24-hour on-site availability?** | **Turnaround Time in Minutes** |
| --- | --- | --- |
| **Site #1** | **Site #2** | **Site #3** | **Site #4** |
| Toxicology laboratory services [PR I.D.1.e).(1).(e)] | ☐ YES ☐ NO | # | # | # | # |
| Renal dialysis services [PR I.D.1.e).(1).(f)] | [ ]  YES [ ]  NO | # | # | # | # |

**Patient Population**

|  |  |  |
| --- | --- | --- |
| **For the most recent 12-month period** | **From:** Click here to enter a date. | **To:** Click here to enter a date. |

|  | **Site #1** | **Site #2** | **Site #3** | **Site #4** |
| --- | --- | --- | --- | --- |
| Will fellows perform Emergency Department consultations?[PR I.D.1.e).(1).(a)] | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO |
| Will fellows admit patients to a medical toxicology inpatient service?[PR I.D.1.e).(1).(b)] | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO |
| Will fellows perform consultations on inpatients?[PR I.D.1.e).(1).(b)] | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO |
| Estimate the number of medical toxicology inpatient consultations *(per fellow/per year)*.[PRI.D.1.e).(1).(b)] | # | # | # | # |
| Will fellows perform consultations in the intensive care units?[PR I.D.1.e).(1).(c)] | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO |
| Will fellows perform outpatient toxicology consultations?[PR I.D.1.e).(1).(d)] | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO |
| Where will outpatient consultations be performed?[PR I.D.1.e).(d)] | Location | Location | Location | Location |
| Estimate the number of medical toxicology outpatient consultations *(per fellow/per year)*.[PRI.D.1.e).(d)] | # | # | # | # |
| Will fellows perform consultations for the poison center?[PR I.D.1.c)] | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO | [ ]  YES [ ]  NO |
| Estimate the number of poison center consultations that fellows will perform with health care providers at participating sites *(per fellow/per year)*.[PR I.D.1.c)] | # | # | # | # |
| Poison Center exposures: call volume per year *(number of exposures)*[PR I.D.1.c)] | # | # | # | # |
| Estimate the number of medical toxicology inpatient admissions to the medical toxicology service *(per fellow/per year)*.[PR I.D.1.c)] | # | # | # | # |

1. Explain the methodology used to determine volume estimates.

(Limit response to 500 words)

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**List of Diagnoses**

1. Inpatient Evaluations

List 50 consecutive inpatient (bedside) evaluations-either by admission or consultation-by the medical toxicology service during the same 12-month period as used on the previous page. If there were more than 50 inpatient admissions/consultations during this period, report only the first 50. If there were fewer than 50 admissions/consultations, do not extend beyond the 12 months indicated. The timeframe should correspond with the timeframe used for the Patient Population. [PR. I.D.1.e).(1).(b)]

**Mark (A for admission) or (C for consultation).**

Inclusive dates (month, day/year) during which these admissions/consultations occurred:

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| --- | --- | --- |
| **For the most recent 12-month period** | **From:** Click here to enter a date. | **To:** Click here to enter a date. |

| **Number** | **Age** | **Site #** | **(A) or (C)** | **Medical Toxicology Diagnosis** |
| --- | --- | --- | --- | --- |
|  | Age | Site # | [ ]  A [ ]  C | Diagnosis |
|  | Age | Site # | [ ]  A [ ]  C | Diagnosis |
|  | Age | Site # | [ ]  A [ ]  C | Diagnosis |
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|  | Age | Site # | [ ]  A [ ]  C | Diagnosis |

2. Outpatient Evaluations

List 50 consecutive outpatient evaluations conducted on the medical toxicology service during the same 12-month period as used on the previous page. If there were more than 50 outpatient consultations during this period, report only the first 50. If there were fewer than 50 consultations, do not extend beyond the 12 months indicated.The timeframe should correspond with the timeframe used for the Patient Population. [PR. I.D.1.e).(1).(d); IV.C.4.i)]

Inclusive dates (month, day/year) during which these consultations occurred:

|  |  |  |
| --- | --- | --- |
| **For the most recent 12-month period** | **From:** Click here to enter a date. | **To:** Click here to enter a date. |

| **Number** | **Age** | **Site #** | **Medical Toxicology Diagnosis** |
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3. Poison Center Evaluations

List 50 consecutive Poison Center consultations by medical toxicology fellows during the same 12-month period as used on the previous page. If there were more than 50 consultations during this period, report only the first 50. If there were fewer than 50 consultations, do not extend beyond the 12 months indicated. The timeframe should correspond with the timeframe used for the Patient Population. [PR I.D.1.c); IV.C.4.k)]

Inclusive dates (month, day/year) during which these consultations occurred:

|  |  |  |
| --- | --- | --- |
| **For the most recent 12-month period** | **From:** Click here to enter a date. | **To:** Click here to enter a date. |

| **Number** | **Age** | **Site #** | **Medical Toxicology Diagnosis** |
| --- | --- | --- | --- |
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**Personnel**

**Program Director**

1. How much dedicated time and support will the program director be provided for administration of the program? [PR II.A.2.a)]

Limit response to 400 words.

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| Click or tap here to enter text. |

1. Does the program director have at least three years’ experience as a core physician faculty member in an ACGME-accredited emergency medicine, pediatrics, preventive medicine, or medical toxicology program? [PR II.A.3.a).(1)] [ ]  YES [ ]  NO
2. List the location and the start and end dates of the program director’s previous core physician faculty experience.

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| Click or tap here to enter text. |

Explain if NO. Limit response to 400 words.

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| Click or tap here to enter text. |

**Faculty**

1. Will a minimum of two medical toxicology physician faculty members be based at the primary clinical site, who, with the program director, devote a minimum of 10 hours per week of direct instruction to the fellows and who will be readily available to the fellows for consultations on cases? [PR II.B.1.a)] [ ]  YES [ ]  NO

Explain if NO. Limit response to 400 words.

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| Click here to enter text. |

**Consultants**

1. List only those individuals from the following medical specialties who are available to the program for consultation and didactic sessions: [PR II.B.1.b)- II.B.1.b).(1)]

| **Special Expertise** | **Name** | **Qualifications** | **# of Consults Annually** |
| --- | --- | --- | --- |
| Cardiology | Name | Qualifications | # of consults |
| Dermatology | Name | Qualifications | # of consults |
| Gastroenterology | Name | Qualifications | # of consults |
| Hyperbaric medicine | Name | Qualifications | # of consults |
| Immunology | Name | Qualifications | # of consults |
| Nephrology | Name | Qualifications | # of consults |
| Ophthalmology | Name | Qualifications | # of consults |
| Pathology | Name | Qualifications | # of consults |
| Pulmonary medicine | Name | Qualifications | # of consults |
| Surgical subspecialties | Name | Qualifications | # of consults |

**Other Program Personnel**

1. List only those individuals from the following non-medical specialties who are available to the program for consultation and didactic sessions: [PRs II.D.1.- II.D.1.a)]

| **Special Expertise** | **Name** | **Qualifications** | **# of Consults Annually** |
| --- | --- | --- | --- |
| Biostatistics | Name | Qualifications | # of consults |
| Botany | Name | Qualifications | # of consults |
| Disaster and mass casualty incident management | Name | Qualifications | # of consults |
| Epidemiology | Name | Qualifications | # of consults |
| Environmental toxicology | Name | Qualifications | # of consults |
| Forensic toxicology  | Name | Qualifications | # of consults |
| Hazardous materials  | Name | Qualifications | # of consults |
| Herpetology | Name | Qualifications | # of consults |
| Industrial hygiene | Name | Qualifications | # of consults |
| Laboratory toxicology | Name | Qualifications | # of consults |
| Mycology | Name | Qualifications | # of consults |
| Occupational toxicology | Name | Qualifications | # of consults |
| Pharmacology | Name | Qualifications | # of consults |
| Public health | Name | Qualifications | # of consults |
| Zoology | Name | Qualifications | # of consults |

**Educational Program**

**Curriculum Components**

1. Describe the educational goals and objectives of the program. [PR IV.A.2.]

Limit response to 400 words.

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| Click here to enter text. |

1. Will the goals and objectives be distributed, reviewed, and available to the fellows and faculty members? [PR IV.A.2.]

Limit response to 400 words.

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**ACGME Competencies**

**Professionalism**

1. Briefly describe one planned activity or project that will allow the resident to demonstrate a commitment to professionalism and an adherence to ethical principles. Describe planning, implementation, evaluation and provisions of faculty support and supervision that will guide this process. [PR IV.B.1.a)] (Limit response to 400 words)

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**Patient Care and Procedural Skills**

1. Indicate the settings and activities in which residents will demonstrate competence in the following areas of patient care. Also indicate the method(s) that will be used to evaluate competence. [PR IV.B.1.b).(1)]

| **Competency Area** | **Settings/Activities** | **Method(s) Used to Evaluate Fellow Competence\*** |
| --- | --- | --- |
| Gathering accurate, essential information in a timely manner [PR IV.B.1.b).(1).(a).(i)] | Settings/Activities | Method(s) used |
| Interpreting the results of diagnostic tests and diagnostic procedures [PR IV.B.1.b).(1).(a).(ii)] | Settings/Activities | Method(s) used |
| Integrating information obtained from patient history, physical examination, physiologic recordings, and test results to arrive at an accurate assessment and treatment plan [PR IV.B.1.b).(1).(a).(iii)] | Settings/Activities | Method(s) used |
| Integrating relevant biological, psychosocial, social, economic, ethnic, and familial factors into the evaluation and treatment of their patients [PR IV.B.1.b).(1).(a).(iv)] | Settings/Activities | Method(s) used |
| Planning and implementing therapeutic treatment, including pharmaceutical, medical device, behavioral, and surgical therapies [PR IV.B.1.b).(1).(a).(v)] | Settings/Activities | Method(s) used |
| Assessing toxicological exposures in occupational evaluations[PR IV.B.1.b).(1).(a).(vi)] | Settings/Activities | Method(s) used |
| Serving as the primary or consulting physician responsible for providing direct/bedside patient evaluation, management, screening, and preventive services for these patients[PR IV.B.1.b).(1).(a).(vii)] | Settings/Activities | Method(s) used |
| Evaluating and managing patients representing all age groups and populations with acute or chronic workplace occupational and environmental exposures in an occupational medicine or toxicology clinic, or seeing occupational medicine patients in a referral setting, including responsibility for providing patient and worksite evaluation, management, exposure assessment and control, and preventive services for these patients[PR IV.B.1.b).(1).(a).(viii)] | Settings/Activities | Method(s) used |
| Evaluating workplace risks and hazards[PR IV.B.1.b).(1).(a).(ix)] | Settings/Activities | Method(s) used |
| Managing the entire course of critically poisoned patients of all ages and both genders, either as the primary physician or as a consultant[PR IV.B.1.b).(1).(a).(x)] | Settings/Activities | Method(s) used |
| Serving as the primary or consulting physician responsible for providing direct/bedside patient evaluation, management, screening, and preventive services for acutely poisoned patients[PR IV.B.1.b).(1).(a).(xi)] | Settings/Activities | Method(s) used |
| Providing care for at least 200 acutely poisoned patients representing all age groups and populations over the course of the educational program[PR IV.B.1.b).(1).(a).(xi).(a)] | Settings/Activities | Method(s) used |
| Consulting on calls (240 encounters per year, per fellow, on average) from a referral population of poisoned patients under the supervision of a physician who is certified in medical toxicology[PR IV.B.1.b).(1).(a).(xii)-(a)] | Settings/Activities | Method(s) used |

\*Examples of evaluation methods for competence may include: direct observation, global assessment, multisource assessment, practice/billing audit, patient survey, record/chart review, review of patient outcomes, simulations/models, structured case discussion, in-house written examination, In-training examination, oral examination and computer-based learning.

**Medical Knowledge**

Describe the activities and settings in which fellows will be given opportunities to demonstrate competence in their knowledge of the following areas of academic and clinical content. Also indicate the method(s) that will be used to evaluate competence. [PR IV.B.1.c)]

| **Competency Area** | **List in Bulleted Format the Learning Activities and Settings Used to Address the Core Knowledge Area** | **List in Bulleted Format the Method(s) Used to Evaluate Fellow Competency\*** |
| --- | --- | --- |
| Major developments in the basic and clinical sciences relating to medical toxicology, through application of this knowledge in the care of their patients [PR IV.B.1.c).(1).(a)] | * Learning activities and settings
 | * Method(s) used
 |
| Indications, risks, and limitations for procedures, and management of patients through application of this knowledge in their care[PR IV.B.1.c).(1).(b)] | * Learning activities and settings
 | * Method(s) used
 |
| Therapeutic approaches, including resuscitation, initial management, pharmacological basis of antidote use, supportive and other care, and withdrawal syndrome management[PR IV.B.1.c).(1).(c)] | * Learning activities and settings
 | * Method(s) used
 |
| The basic and clinical sciences relating to medical toxicology[PR IV.B.1.c).(1).(d)] | * Learning activities and settings
 | * Method(s) used
 |
| Biochemistry of metabolic processes, the pharmacology, pharmacokinetics, and teratogenesis, toxicity and interactions of therapeutic drugs[PR IV.B.1.c).(1).(e)] | * Learning activities and settings
 | * Method(s) used
 |
| Biochemistry of toxicants and toxins, kinetics, metabolism, mechanisms of acute and chronic injury, and carcinogenesis[PR IV.B.1.c).(1).(f)] | * Learning activities and settings
 | * Method(s) used
 |
| Clinical manifestations and differential diagnosis of poisoning from: drugs; industrial, household, environmental, and natural products; and agents of bioterrorism toxicants[PR IV.B.1.c).(1).(g)] | * Learning activities and settings
 | * Method(s) used
 |
| Analytical and forensic toxicology, including: assay methods and interpretation; laboratory and other diagnostic assessments; forensics, medicolegal issues, and occupational drug test interpretation[PR IV.B.1.c).(1).(h)] | * Learning activities and settings
 | * Method(s) used
 |
| Assessment and population health, including criteria for causal inference, monitoring, occupational assessment and prevention, principles of epidemiology, and statistics[PR IV.B.1.c).(1).(i)] | * Learning activities and settings
 | * Method(s) used
 |
| Experimental design and statistical analysis of data as related to laboratory, clinical, and epidemiologic research[PR IV.B.1.c).(1).(j)] | * Learning activities and settings
 | * Method(s) used
 |
| Occupational toxicology, including acute and chronic workplace exposure to intoxicants and basic concepts of the workplace and industrial hygiene[PR IV.B.1.c).(1).(k)] | * Learning activities and settings
 | * Method(s) used
 |
| Prevention of poisoning, including prevention of occupational exposures by intervention methodologies that take into account the epidemiology, environmental factors, and the role of regulation and legislation in prevention[PR IV.B.1.c).(1).(l)] | * Learning activities and settings
 | * Method(s) used
 |
| Environmental toxicology, including identification of hazardous materials and the basic principles of management of large-scale environmental contamination and mass exposures[PR IV.B.1.c).(1).(m)] | * Learning activities and settings
 | * Method(s) used
 |
| Function, management, and financing of poison control centers[PR IV.B.1.c).(1).(n)] | * Learning activities and settings
 | * Method(s) used
 |
| The role of regional poison centers in response to hazardous materials incidents, including terrorism, risk assessment, and communication[PR IV.B.1.c).(1).(o)] | * Learning activities and settings
 | * Method(s) used
 |
| Oral and written communication skills, including risk communication and teaching techniques[PR IV.B.1.c).(1).(p)] | * Learning activities and settings
 | * Method(s) used
 |
| Economics of health care and current health care management issues, including cost-effective patient care, quality improvement, resource allocation, and clinical outcomes[PR IV.B.1.c).(1).(q)] | * Learning activities and settings
 | * Method(s) used
 |
| The role of federal and international agencies in toxicology; and[PR IV.B.1.c).(1).(r)] | * Learning activities and settings
 | * Method(s) used
 |
| Administrative aspects of the practice of medical toxicology[PR IV.B.1.c).(1).(s)] | * Learning activities and settings
 | * Method(s) used
 |

\*Examples of evaluation methods for competence may include: direct observation, global assessment, multisource assessment, practice/billing audit, patient survey, record/chart review, review of patient outcomes, simulations/models, structured case discussion, in-house written examination, In-training examination, oral examination and computer-based learning.

**Practice-based Learning and Improvement**

1. Briefly describe one planned activity or project that will allow the resident to demonstrate an ability to investigate and evaluate their care of patients, appraise and assimilate scientific evidence, and continuously improve patient care based on constant self-evaluation and lifelong learning. Describe planning, implementation, evaluation and provisions of faculty support and supervision that will guide this process. [PR IV.B.1.d)] (Limit response to 400 words)

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| Click here to enter text. |

**Interpersonal and Communication Skills**

1. Briefly describe one learning activity in which residents develop interpersonal and communication that result in the effective exchange of information and collaboration with patients, their families, and health professionals. In the example, identify the members of the team, responsibilities of the team members, and how team members communicate to accomplish responsibilities. [PR IV.B.1.e)] (Limit response to 400 words)

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| Click here to enter text. |

**Systems-based Practice**

1. Briefly describe the learning activity(ies) through which residents demonstrate an awareness of and responsiveness to the larger context and system of health care, including the structural and social determinants of health, 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 Experience**

**Conferences**

1. List regular subspecialty and interdepartmental conferences, rounds, etc. that are a part of the program. Indicate whether conference attendance is **required (R)** or **optional (O)**; the frequency, e.g., weekly, monthly, etc.; and the person responsible for conducting the conference. Identify the site by using the corresponding number as it appears in ADS. Add or remove rows as necessary. [PR IV.C.3.-IV.C.3.a).(3)]

| **Conference Type and/or Topic** | **R / O** | **Frequency** | **Person(s) responsible for conducting conference** | **Site #** |
| --- | --- | --- | --- | --- |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |
| Conference type or topic | (R)[ ] (O)[ ]  | Frequency | Person(s) responsible | # |

1. What is the average number of hours per week of planned educational experiences focused on medical toxicology? [PR IV.C.3.a).(1)]

 Limit response to 400 words.

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1. Will the curriculum include the following medical toxicology core content areas? [PR IV.C.4.a) – IV.C.4.a).(6)]

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| Analytical and forensic toxicology[PR IV.C.4.a).(1)] | YES [ ]  NO [ ]  |
| Assessment and population health[PR IV.C.4.a).(2)] | YES [ ]  NO [ ]  |
| Clinical assessment[PR IV.C.4.a).(3)] | YES [ ]  NO [ ]  |
| Principles of toxicology[PR IV.C.4.a).(4)] | YES [ ]  NO [ ]  |
| Therapeutics[PR IV.C.4.a).(5)] | YES [ ]  NO [ ]  |
| Toxins and toxicants[PR IV.C.4.a).(6)] | YES [ ]  NO [ ]  |

Explain any no responses. (Limit response to 400 words)

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1. Describe how fellows will be provided with a broad education, including basic skills and knowledge in medical toxicology, so that they may function as specialists competent in providing comprehensive patient care in medical toxicology, research, and teaching. [PR IV.C.4.c)]

Limit response to 400 words.

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1. Describe how fellows will have patient experience with a diverse clinical spectrum of diagnoses, for patients of all ages and both genders, that enables them to develop and demonstrate competencies in medical toxicology. [PR IV.C.4.d)]

Limit response to 400 words.

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1. Will this experience include diagnoses resulting from patient exposure to:
2. drugs [PR IV.C.4.d).(1)] [ ]  YES [ ]  NO
3. industrial, household, and environmental toxicants [PR IV.C.4.d).(2)] [ ]  YES [ ]  NO
4. natural products [PR IV.C.4.d).(3)] [ ]  YES [ ]  NO
5. other xenobiotics [PR IV.C.4.d).(4)] [ ]  YES [ ]  NO

Explain any NO responses. Limit response to 400 words.

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1. Describe how the fellows will be provided with hyperbaric oxygen therapy education and experience. [PR IV.C.4.e)]

Limit response to 400 words.

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1. Will fellows without prior experience in adult and pediatric critical care be provided at least one month’s experience each in an adult intensive care unit and in a pediatric intensive care unit?

[PR IV.C.4.f)] [ ]  YES [ ]  NO

Explain if NO. Limit response to 400 words.

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1. Will fellows have a minimum of 12 months of clinical experience as the primary or consulting physician responsible for providing direct/bedside patient evaluation, management, screening, and preventive services? [PR IV.C.4.g)] [ ]  YES [ ]  NO

Explain if NO. Limit response to 400 words.

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1. Describe how fellows will be provided with experience in evaluating and managing patients with workplace and environmental exposures and in workplace evaluation, as well as in an occupational medicine or toxicology clinic. [PR IV.C.4.h)]

Limit response to 400 words.

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1. Describe how fellows will be provided with experience in an industrial setting, an occupational medicine clinic, an outpatient medical toxicology setting, or a referral setting with access to occupational medicine patients. [PR IV.C.4.i)]

Limit response to 400 words.

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a) Will fellows have the opportunity to evaluate and manage intoxicated patients in both industrial and referral settings, including responsibility for providing bedside evaluation, management, screening, and preventive services for a minimum of 12 months or its full-time equivalent?
[PR IV.C.4.i).(1)] [ ]  YES [ ]  NO

Explain if NO. Limit response to 400 words.

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1. Will fellows have 24 months’ experience with a referral population of poisoned patients, under the supervision of a physician who is certified in medical toxicology or who possesses appropriate qualifications as determined by the Review Committee? [PR IV.C.4.j)] [ ]  YES [ ]  NO

Explain if NO. Limit response to 400 words.

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1. Describe the educational experiences in a regional poison center. Include the name of the certified medical toxicologist who will be given the responsibility of supervising fellows. Provide a physical description of the site and the site's total call volume (number of informational calls, consultations, and care by telephone). Attach a copy of the AAPCC approval letter for the Poison Control Center. [PR IV.C.4.k)]

Limit response to 400 words.

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1. Describe how the fellows will be provided opportunities to teach and participate in undergraduate, graduate, and continuing education activities. [PR IV.C.4.l)]

Limit response to 400 words.

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11. Describe how the fellows will document required patient care experiences. [PR IV.C.4.m)]

Limit response to 400 words.

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**Scholarship**

1. Briefly describe how the curriculum will advance fellows’ knowledge of the basic principles of research, including how research is conducted, evaluated, explained to patients, and applied to patient care. [PR IV.D.3.a)]

Limit response to 500 words.

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1. Will fellows participate in research or scholarly activity that includes at least one of the following:
2. Peer-reviewed funding and research [PR IV.D.3.b).(1)] [ ]  YES [ ]  NO
3. Publication of original research or review articles [PR IV.D.3.b).(2)] [ ]  YES [ ]  NO
4. Presentations at local, regional, or national professional and scientific society meetings
[PR IV.D.3.b).(3)] [ ]  YES [ ]  NO

Explain any NO responses. Limit response to 400 words.

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1. Will fellows complete a scholarly project prior to graduation? [PR IV.D.3.c)]

 [ ]  YES [ ]  NO

Explain if NO. Limit response to 400 words.

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