**New Application: Neuropathology**

**Review Committee for Pathology**

**ACGME**

**Oversight**

**Resources**

1. Describe the office space, meeting rooms, and laboratory space available to support patient care-related teaching, educational, research activities, and clinical service work. [PR I.D.1.a)]

|  |
| --- |
| Click here to enter text. |

2. Provide the following data for each participating site listed in ADS for the most recent academic year available. Add or delete rows and columns as necessary.

|  | | | **Site #1** | **Site #2** | **Site #3** | **Total** |
| --- | --- | --- | --- | --- | --- | --- |
| Autopsies  [PR IV.B.1.b).(2).(c).(i)] | Total | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Adult with CNS | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Pediatric with CNS | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Forensic with CNS | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Neurosurgical specimens  [PR IV.B.1.b).(2).(c). (ii)] | Total | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Brain | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Spinal cord | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Pituitary gland | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Eyes | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Other |  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
|  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
|  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
|  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Intra-operative neuropathology consults [PR IV.B.1.b).(2).(c).(iii)] | | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

1. Describe the types of neuropathology patient care materials available for clinical teaching, and the method for indexing such materials as to permit retrieval of archived records in a timely manner. [PR I.D.1.b).(1)]

|  |
| --- |
| Click here to enter text. |

1. Briefly describe the indexes of usual and unusual cases, course and seminar materials, microscopic slide collections, and specimens available to the program for educational purposes. [PR I.D.1.b).(1)]

|  |
| --- |
| Click here to enter text. |

1. Will laboratories be equipped to perform all tests required for the education of fellows, as well as special neuropathologic procedures, including ultrastructural, histochemical, immunopathologic, and molecular-biologic techniques? [PR I.D.1.c)]  YES  NO

If “NO,” explain.

|  |
| --- |
| Click here to enter text. |

**Other Learners and Other Care Providers**

1. Provide the following information for other educational programs (e.g., other GME programs from this and other sites, residency/fellowship programs for medical technologists, masters and doctoral programs, or post-doctoral programs for clinical scientists) that use program facilities for educational experiences in pathology. Add rows as necessary. [PR I.E.]

| **Name of Site and Type of Program** | **Length of rotation**  **(in weeks)** | **Maximum number of learners per year** | **Maximum number of learners present at the same time** |
| --- | --- | --- | --- |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

**Personnel**

**Other Program Personnel**

1. Briefly describe the qualified laboratory technical personnel that will provide support for the clinical, teaching, educational, and research activities of the fellowship. Is the support of the program in this area satisfactory at all program sites? [PR II.D.1.]

|  |
| --- |
| Click here to enter text. |

**Educational Program**

**ACGME Competencies**

**Patient Care and Procedural Skills**

1. Indicate the settings and activities in which fellows will demonstrate competence in the following. Also indicate the method(s) that will be used to assess competence. [PR IV.B.1.b).(2); PR V.A.1.c)]

| **Competency Area** | **Settings/Activities** | **Assessment Method(s)** |
| --- | --- | --- |
| Evaluating a comprehensive body of pathological lesions of the central nervous system, peripheral nervous system, neuromuscular systems, and eye  [PR IV.B.1.b).(2).(b)] | Click here to enter text. | Click here to enter text. |
| Morphologic assessment of diseases of muscle and peripheral nerves and the eye  [PR IV.B.1.b).(2).(c)] | Click here to enter text. | Click here to enter text. |

**Medical Knowledge**

1. Indicate the activities (lectures, conferences, journal clubs, clinical teaching rounds, etc.) in which fellows will demonstrate competence in their knowledge of established and evolving biomedical, clinical, and cognate sciences, and the application of this knowledge to neuropathology. Also indicate the method(s) that will be used to assess competence. [PR IV.B.1.c).(1)]

|  |
| --- |
| Click here to enter text. |

**Practice-based Learning and Improvement**

1. Briefly describe one planned quality improvement activity or project that will allow fellows to demonstrate an ability to evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care. [CPR IV.B.1.d)] (Limit response to 400 words)

|  |
| --- |
| Click here to enter text. |

**Interpersonal and Communication Skills**

1. Briefly describe one learning activity in which fellows demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals. [CPR IV.B.1.e)] (Limit response to 400 words)

|  |
| --- |
| Click here to enter text. |

**Systems-based Practice**

1. Describe the learning activity(ies) through which fellows demonstrate an awareness of and responsiveness to the larger context and system of health care: [PR IV.B.1.f)] (Limit response to 400 words)

|  |
| --- |
| Click here to enter text. |

**Curriculum Organization and Fellow Experiences**

1. List the planned conference schedule for fellows. Add additional rows as necessary. [PR IV.C.4.]

| **Name of Conference** | **Frequency** | **Responsible Department** | **Required? (Yes/No)** | **Attendance Taken? (Yes/No)** |
| --- | --- | --- | --- | --- |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

1. Describe fellow participation in these conferences. How much responsibility will they have for their preparation and presentation? [PR IV.C.3.a) - IV.C.4.a)]

|  |
| --- |
| Click here to enter text. |

1. Describe the clinical experience for fellows in all aspects of neuropathology. Outline the educational activities specific to supervision of trainees and/or laboratory personnel, and graded responsibility, including independent diagnosis and decision making. [PR IV.C.4.a)] (Limited response to 400 words.)

|  |
| --- |
| Click here to enter text. |

1. Outline the educational activities specific to neuropathology, review of the medical literature in the subspecialty area, and use of study sets of unusual cases. [PR IV.C.5.]

|  |
| --- |
| Click here to enter text. |