



*The Heart of a
Healthy Community™*

PROGRAM LETTER OF AGREEMENT

This document serves as the required ACGME Program Letter of Agreement between *San Bernardino County on behalf of Arrowhead Regional Medical Center (ARMC) and Children’s Hospital Los Angeles (CHLA).*

This document serves as an agreement between ARMC as sponsoring institution for the anesthesiology residency program and Children’s Hospital Los Angeles as the participating site for residency education for the rotation of Pediatric Anesthesia.

This Program Letter of Agreement (PLA) is contingent upon and effective upon full execution by the parties of Amendment No. 1 to the Master Affiliation Agreement for Graduate Medical Education between County of San Bernardino on behalf of Arrowhead Regional Medical Center and Children’s Hospital Los Angeles entered into on January 5, 2021 (“Affiliation Agreement”), and the term will run concurrently with the Affiliation Agreement. This PLA may be terminated by either party for any reason with 30 days written advance notice.

1. Persons Responsible for Education and Supervision

At ARMC (Sponsoring Institution): Nadia Nathan, MD

At CHLA (Participating Site): Marisa Bell, MD

The above-mentioned people are responsible for the education and supervision of the ARMC residents while on rotation at the Participating Site.

2. Responsibilities

The faculty at the Participating Site must provide appropriate supervision of residents in patient care activities and maintain a learning environment conducive to educating the residents in the ACGME competency areas. The faculty must evaluate resident performance in a timely manner during each rotation or similar educational assignment and document this evaluation at completion of the assignment.

3. Content and Duration of the Educational Experiences

The content of the educational experiences has been developed according to the ACGME residency Program Requirements, and include the following goals and objectives:

Goals:

- See attachment 1

Objectives:

- See attachment 1

BOARD OF SUPERVISORS

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In cooperation with the ARMC Program Director, the Site Director and the faculty at the Participating Site are responsible for the day-to-day activities of the ARMC residents to ensure that the outlined goals and objectives are met during the course of the education experiences at the Participating Site.

The duration(s) of the assignment(s) to the Participating Site is as follows:

A maximum of 5 residents per academic year will be assigned to selected rotation at participating site for two-month rotations.

4. Policies and Procedures that Govern

ARMC residents, while rotating at the Participating Site, will be under the general direction of the policies and procedures of the ARMC Graduate Medical Education Committee and its residency program, and the Participating Site's policies.

Sponsoring Institution
San Bernardino County on behalf of
Arrowhead Regional Medical Center

Participating Site
Children's Hospital Los Angeles

Name:
Title: Program Director

Name: Marisa Bell, MD
Title: Anesthesiology Site/Program Director

Name: Carol Lee, MD
Title: Designated Institutional Official

Name: Rima Jubran, MD, MPH, MACM
Title: Designated Institutional Official

ARMC Anesthesiology Residency Program

Goals and Objectives

CA-2 (PGY-3) PEDIATRIC ANESTHESIA ROTATION

Children's Hospital Los Angeles (CHLA)

Rotation Site Director: Dr. Marissa Bell, Pediatrics Program Director

Rotation Duration: 2 months

Introduction:

This advanced rotation is meant to provide you with the opportunity to further develop the competencies required to meet the expectation for a Board Certified (Consultant) Anesthesiologist in the area of pediatric anesthesia.

The goal of the Pediatric Anesthesia Rotation at CHLA is to train physicians to extend their areas of knowledge and competency in their practice of Pediatric Anesthesia. We expect the residents to be able to evaluate and develop treatment plans regarding neonate, infant and child patient care issues.

GOALS:

- To train residents who are capable of providing high quality independent anesthesia care based on principles of teamwork and collaboration for newborns, infants and children;
- To train residents who use the bio-psychosocial model and life-long learning principles in providing high quality care to pediatric patients, including preoperative assessment and preparation of patients and parents for induction of anesthesia, intraoperative, postoperative care and clinical management, and understanding of anatomical and physiologic differences of pediatric patients.

OBJECTIVES (by ACGME Competency)	Approximate Training Level	Assessment Methods/Tools
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Patient Care	Training Level	Assessment
Developmental Milestone Objective Clinical Skills and Reasoning: <ul style="list-style-type: none">○ Expertly uses clinical skills of interviewing and physical examination to perform a thorough preoperative assessment of pediatric patients	24-36 months	<ul style="list-style-type: none">○ Direct Observation○ Simulation

Attachment 1

<ul style="list-style-type: none"> ○ presenting for general, urologic, orthopedic, ENT, neurosurgical, ambulatory, trauma, cardiac catheterization laboratory and noncomplex cardiac surgical procedures (perception to complex overt response) 		<ul style="list-style-type: none"> ○ Chart- review ○ Case logs
<ul style="list-style-type: none"> ○ Independently formulates a safe anesthetic management and monitoring plan for a pediatric patient including the plan for parental or other care-giver presence, postoperative management plan (perception to complex overt response) 	24-36 months	
<ul style="list-style-type: none"> ○ Expertly and independently uses safe principles of sedation and monitoring for pediatric patients having procedures outside the operating room (perception to complex overt response) 	24-36 months	
Technical/Device Related Skills		
<ul style="list-style-type: none"> ○ Expertly teaches how to prepare anesthesia work area for a pediatric patient to a junior resident – (perception to complex overt response) 	24-36 months	
<ul style="list-style-type: none"> ○ Teaches set-up and use of syringe pumps, intravenous pumps with drips appropriate for the patient size in an organized, systematic fashion to a junior resident (perception to complex overt response) 		
Developmental Milestone Objective	Training Level	Assessment
Patient Management		
<ul style="list-style-type: none"> ○ Expertly and independently provides safe anesthetic management for pediatric patients undergoing procedures such as general, urologic, orthopedic, ENT, neurosurgical, ambulatory and other surgical procedures (perception to complex overt response) 	24-36 months	<ul style="list-style-type: none"> ○ Direct Observation ○ Simulation ○ Chart- review ○ Case logs
<ul style="list-style-type: none"> ○ Independently performs safe placement of appropriate size endotracheal tube, intravenous catheter, arterial line and central line, regional and neuraxial anesthesia when appropriate in newborn, infant and child (perception to complex overt response) 	24-36 months	
<ul style="list-style-type: none"> ○ Shows expertise in fluid management of newborn, infant and child (perception to complex overt response) 	24-36 months	
<ul style="list-style-type: none"> ○ Independently performs safe and efficient transports and transfer of care of neonate, infant and child to a secondary provider (perception to complex overt response) 	24-36 months	
<ul style="list-style-type: none"> ○ Independently performs safe sedation anesthesia care for a pediatric 	24-36 months	

Attachment 1

patient (perception to complex overt response)

Medical Knowledge

Developmental Milestone Objective	Training Level	Assessment
<ul style="list-style-type: none">○ Expertly discusses and teaches anatomy and physiology of pediatric patients, fluid management of newborn, infant and child, appropriate IV access, pathophysiologic processes involved in pediatric surgical conditions and their interactions with anesthetics, pharmacology of anesthetic agents, principles of temperature regulation for newborns, infants and children (knowledge to application)	24-36 months	<ul style="list-style-type: none">○ Introductory lecture series test○ Anesthesia knowledge test○ Annual in-training examination
<ul style="list-style-type: none">○ Expertly discusses risks, benefits, indications and contraindications for commonly performed nerve blocks - caudal, ilioinguinal, popliteal, femoral, sciatic, axillary, epidural catheter placement (knowledge to application)	24-36 months	<ul style="list-style-type: none">○ Informal oral questioning○ Simulation○ Oral case presentations
<ul style="list-style-type: none">○ Expertly discusses anesthetic management of conditions such as pyloric stenosis, tracheoesophageal fistula, diaphragmatic hernia, gastroschisis, omphalocele, PDA ligation, ASD, VSD repair and others (knowledge to application)	24-36 months	

Practice-Based Learning and Improvement

Developmental Milestone Objective	Training Level	Assessment
<ul style="list-style-type: none">○ Constantly, independently and intentionally identifies own learning deficits, does literature search, analyzes and interprets literature and improves own knowledge (valuing, organizing, internalizing)	24-36 months	<ul style="list-style-type: none">○ Immediate formative feedback from attending
<ul style="list-style-type: none">○ Promotes life-long learning patterns in younger colleagues	24-36 months	<ul style="list-style-type: none">○ Direct observation○ Journal club
<ul style="list-style-type: none">○ Continuously analyzes own practice and determine ways in which you can improve your comprehensive pediatric anesthetic plan (analysis, internalizing)	24-36 months	<ul style="list-style-type: none">○ presentations and case presentations

Attachment I

Interpersonal and Communication Skills

Developmental Milestone Objective	Training Level	Assessment
<ul style="list-style-type: none"> Independently and expertly uses effective listening, questioning, and explanatory skills in gathering information from patients and in providing information to patients, families, the public, and other health care providers (valuing, organizing, internalizing) 	24-36 months	<ul style="list-style-type: none"> Direct observation with patient Direct observation in simulation
<ul style="list-style-type: none"> Consciously uses age appropriate communication skills with the pediatric patients and family including preparation of parent or caregiver for induction experience (valuing, organizing, internalizing) 	24-36 months	<ul style="list-style-type: none"> 360 global rating Learner classroom presentation
<ul style="list-style-type: none"> Consciously promotes and develops own skills in working as a member of a patient care team including other physicians, nurses, other health care professionals, social workers, and volunteers (valuing, organizing, internalizing) 	24-36 months	
<ul style="list-style-type: none"> Consciously maintains and teaches maintenance of comprehensive, timely, and legible medical records (receiving to valuing) 	24-36 months	

Professionalism

Developmental Milestone Objective	Training Level	Assessment
<ul style="list-style-type: none"> Consciously analyzes and shows understanding of own values and attitudes, which might interfere with appropriate patient care specific to management of pediatric patient (valuing to internalizing) 	24-36 months	<ul style="list-style-type: none"> Direct observation 360 global rating
<ul style="list-style-type: none"> Teaches responsiveness to and management of issues that relate to socio-cultural aspects of family life, and social adjustment related to ethnicity, religion, culture, gender or sexual preference to younger colleagues (valuing to internalizing) 	24-36 months	
<ul style="list-style-type: none"> Proudly and consciously shows consistent compassion, honesty, integrity and respect for others in all professional activities (valuing to internalizing) 	24-36 months	

System Based Practice

Developmental Milestone Objective	Training Level	Assessment
○ Expertly works in inter-professional teams to increase patient safety and quality of care (perception to complex overt response)	24-36 months	○ Direct observation
○ Independently coordinates patient care in the settings of pediatric surgery (perception to complex overt response)	24-36 months	○ 360 global rating
○ Leads discussion of system-based problems as they pertain to patient care at M&M conferences (knowledge to analysis)	24-36 months	○ M&M conference presentation with system analysis

Scholarly/Research Activities

Reading Requirements

The resident should read the following chapters while taking the rotation:

Text:

Chapters:

1. SMITH'S ANESTHESIA FOR INFANTS AND CHILDREN 6th Edition
2. PEDIATRIC ANESTHESIA, Editor George Gregory 4th Edition
3. A PRACTICE OF ANESTHESIA FOR INFANTS AND CHILDREN, Editor Charles J. Cote, 3rd Edition.
4. MANUAL OF PEDIATRIC ANESTHESIA, Editor David J. Steward, Jerold Lerman. 5th Edition.

Assessments

The resident will receive a summative written evaluation form at the end of the rotation from the Site Director, as well as verbal feedback informally throughout the rotation. The case-logs of the resident will also be evaluated periodically by the clinical competency committee for the number and type of procedures and anesthetic techniques entered to ensure they are obtaining adequate experience.

Notes