PLANOFHIGHERSPECIALIZATIONCERTIFICATIONINPediatrics.

I:- General Rules:

This plan describes the criteria for granting the certificate in higher specialization in pediatric.

II. Special Rules: None.

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III:- the number of years in the program:4 years.

IIII:- The training is described as follows:

Year of training	Resident is expected to:
First	1. Take care of patients in the pediatric ward supervised
	by a senior resident and a consultant.
	2. Take care of babies in the neonatal intensive care
	unit supervised by a senior resident and a
	neonatologist.
	3. Practice medical procedures with the help and
	supervision of the senior resident and the consultant.
	4. Attend the morning report and the daily scientific
	sessions according to a monthly program.
	5. Participate in preparing and presenting articles
	from the pediatric medical journals under the
	supervision of the consultant in charge.
Second	1. Take care of patients in the pediatric ward (including
	the sub-specialty unit) under the supervision of the
	consultant.
	2. Take care of the babies in the neonatal intensive care
	unit supervised by the senior resident and the consultant.
	3. Take care of children attending the causality and
	emergency departments.
	4. Take care of newborns in the normal newborn unit.
	5. Practice medical procedures in the pediatric floor,
	neonatal and pediatric intesive care unit supervised by the
	senior resident and the consultant.
	6. Acompany the consultant in the management of
	children in the pediatric outpatient clinics.
	7. Attend the morning report and the daily scientific
	meetings.
	8. Participate in preparing and presenting the
	different pediatric topics supervised by the consultant.
Third	1- Take care of patients in the pediatric ward and
	participate in the education and training of new
	residents and medical students stupervised by the
	consultant.
	2- Take care of the sick babies in the neonatal
	intensive care unit and participate in the training and
	education of new residents and students supervised by
	the consultant.
	3- Carry out fine procedures in the neonatal intensive
	care unit supervised by the consultant.
	4- Participate in the evaluation and management of
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	subspecialties in a recognized pediatric institution with
Y	<ul> <li>children attending the pediatric outpatient clinics with supervision of the consultant.</li> <li>5- Take care of babies in the pediatric intensive care unite under the supervision of the consultant.</li> <li>6- Attend the morning report and scientific seminars, prepare and present some pediatric subspecialty cases.</li> <li>7- Spend up to three months as elective in pediatric subspecialties in a recognized pediatric institution with</li> </ul>

	the approval of the pediatric department.
Forth	<ul> <li>the approval of the pediatric department.</li> <li>1- Manage and take medical decisions regarding pediatric patients.</li> <li>2- Take the responsibility of teaching and training medical students and residents, with the supervision of a consultant.</li> <li>3- Gain the experience of doing different procedures in the different subspecialties.</li> <li>4- Perform as the leader of the resident teams in the neonatal and pediatric intensive care units supervised by the consultant.</li> <li>5- Take final decisions regarding the examination and management of children attending the pediatric outpatient clinics under supervision of the consultant.</li> <li>6- Attend and run the morning report and other</li> </ul>
	educational activities supervised by a consultant.
	7- Spend up to three months as elective in pediatric subspecialties in a recognized pediatric institution with the enproved of the pediatric department.
	the approval of the pediatric department.

- All residents are entitled to share the on call duty supervised by a senior resident and the consultant on call according to a monthly schedule.
- The resident cannot advance from a year to the next untill passing the end of the year examination.
- The training program includes the following educational activities held in the department of pediatric.
  - Morning report.
  - Case presentation
  - Journal Club.
  - Radiology conference.
  - Guest speaker lectures.
  - Prep Questions.
  - Subspecialty lectures.
  - Mortality+ Morbidity.
  - Resident conference.
- The accompanied description and duration of teaching /training specified in every teaching/training year as well the department, divisions and specialties where teaching/training take place are integral part of the plan.

# Program Description:

The pediatric training program at Jordan University Hospital is a structured program with ballanced training in both inpatient care and ambulatory pediatrics. There is emphasis on both general pediatrics as well as subspecialties. The program makes sure the resident has sufficient exposure to clinical padiatric care and also sufficient academic activities such as lectures, case discussions, and jounal reviews.

The department of pediatrics also encourages and helps arrange for residents to get exposed to pediatric meetings held at the national level, also holds yearly clinical training sessions and workshops for certain areas in pediatrics, the resident will also become certified in pediatric and neonatal advanced life support.

The role of the pediatric resident will advance from a year to the other with more supervisory roles given to the resident in the last two years of the program.

#### First year of training:

The training in the first year of the residency program will focus on inpatient pediatrics. The resident will have rotations in the pediatric floor, pediatric intensive care and neonatal intensive care units. The resident will be part of a team that in composed of one or two junior residents (first or second year level) and a senior resident (third or fourth year level), in addition to the consultant specialist. The resident spends 6-8 months in the pediatric floors, where he/she will be exposed to all subspecialty as well as general inpatient pediatrics, and 4 months in the neonatal intensive care unit which is a tertiary unit that takes care of both preterm newborns as well as term newborns with acquired or congenital health problems requiring intensive medical care.

The resident is expected to become familiar with the majority of general pediatric issues, and many subspecialty issues during his first year of training. General competencies that are required from the resident at this level include comprehensive history taking and physical examination of the sick child, approach to diagnostic and therapeutic interventions under the supervision of other senior team members, proffesionalism in dealing with patients, families and other members of the team as well as improvement of the communication skills.

The resident will also participate in the night calls where he/she is required to do an average of 10 night calls per month. During night calls the first year resident will be working under close supervision of a more senior physician. Night calls will provide many opportunities of learning and training for the first year resident since he/she will be the first physician to be notified about simple health issues for patients in the pediatric floors or the intesive care units. The resident will also have the opportunity to observe and perform supervised resuscitation of the newly born infants in the delivery room.

Educational activites are integral parts of the residency program at Jordan University Hospital. There is daily morning educational activity that is required for all the residents to attend. The first year resident will participate actively in the presentations of patients in the morning report, as well as in case discussions. Educational activites will also include didactic lectures, flea markets, detailed case discussions, guest speaker lectures, and journal clubs.

### Second year of training:

During the second year of training, the resident will be exposed to some ambulatroy pediatrics including emergency medicine and subspecialty pediatric outpatient clinics, with a total of 3-4 months. The rest of the year will be devided between pediatric floor and pediatric and neonatal intensive care units. The role of the second year resident in the pediatric floor will include the same duties as the first year resident, but in addition he will have some more advanced duties such as supervision of the first year resident, which prepares the resident to become a team leader in the following year. The second year resident role in the neonatal intensive care unit will also be similar to the first year resident role. The second year resident, however, will have more independence in carrying out simple medical orders, and procedure, he/ she will also have some supervisory role on the first year resident as well. There will also be plenty of opportunities for the second year resident to perform neonatal resuscitation in the delivery room where he/ she will primarily attend simple and moderatley risky deliveries.

The on call duties for the second year resident will be on average eight nights per month, during which the resident will have some leadership roles but will always be supervised be a more senior resident particulary in the first half of the year.

The second year resident will also participate in all the educational activities of the department. During the later part of the second year, the resident will be given more and more responsibilities to prepare him/ her for a more supervisory role in the third year.

## Third year of training:

The resident in the third year of training will spend about 5 months of the year as a team leader in the pediatric floor where he supervises the junior resident, makes and formulates management plans in conjunction with the consultant specialist, and makes certain that the plans are carried out in a timely fashion. The rest of the year will be spent as two months in the neonatal intensive care unit where the resident role will also be a team leader. There will also be five months spent in the ambulatory pediatrics, devided between emergency pediatrics (1-2 months) where the resident will take care of acute emergencies in children, also during that time the resident training during those rotations will also be the examination of normal newborns in the nursery before being discharged to home.

During the third year of training the resident performs night duty calls with an average of 6-7 calls a month, he will lead the team of on-call residents, and will report to the consultant specialist on call when needed.

Subspecialty outpatient pediatrics will also have some emphasis during the third year of training where the resident will spend about 4 months of the year. The resident will be exposed to almost all the major subspecialties in pediatrics and will work directly with the specialist consultant in the clinic.

Teaching medical students will become one of the competencies that the third year resident will attain in his third year of residency. The resident will participate actively in the educational rounds where he/she observes the medical student perform history taking and physical examination of patients. The third year resident also is required to participate in all the moring educational activities of the department.

During the third year of training, the resident will have the opportunity to do elective rotations after the approval of the department for up to three months of the year. These rotations can be spent in the country, or outside the country in approved training programs.

### Fourth year of training:

The fourth year of training in pediatrics will have a greater emphasis on outpatient subspecialty pediatrics where the resident spends 6-7 months in the pediatric clinics. The resident will have more opportunities to see different pediatric subspecialty patients, make management plans and discuss plans with the consultant. There is also a major role in teaching medical students who rotate in the pediatric outpatient clinic.

The rest of the year will be devided between pediatric floors, and intensive care units. There will be major emphasis on leadership. The resident will be supervising other residents in taking care of patients and carrying out plans of management. The resident will also participate in teaching medical students during rounds, and also participate in the educational activities of the department.

The resident in the fourth year of training will also be encouraged to take elective rotations in approved traing programs with a maximum of three months duration.

The fourth year resident performs night duty calls on an average of 4-6 calls per month, where he/she will be the most senior person in the pediatric floor or the neonatal intensive care unit.

One of the fourth year residents will be chosen by the consultant specialists to be the chief resident. The role of the chief resident is vital. He/she will supervise all the residents. The chief resident is responsible

for planning the different rotations and on call schedule for all the residnet, and will be the one who the resident will refer to for any issues and suggestions. The chief resident works closely with the program director to ensure that the program objectives are met, and participates in all the educational activities of the department.