

Dr.NTR UNIVERSITY OF HEALTH SCIENCES
VIJAYAWADA – 520 008.

Application format for the course of
Post Doctoral Fellowship in
Critical care Medicine
for the academic year 2018-19

Part [A & D of Critical Care Medicine:](#)

PART- B
Specialty specific information

(General Medicine)

General Departmental facilities:

- Total no. of beds in the department.
- No. of Units in the department.
- Unit wise teaching Resident staff (Annexed)

Note: Unit wise teaching Resident Staff should be shown separately for each unit on a separate page.

Unit wise teaching Staff:

Unit _____

Bed strength _____

S. No.	Designation	Name with Date of Birth	Nature of employment Full time/part time/Hon.	PG QUALIFICATION			<u>Experience</u> Date wise teaching experience with designation & Institution					
				Subject with Year of passing	Institution	University	Designation	Institution	From	To	Period	

* List of teaching staff with additional qualification post MD/DNB: - (DM / Diploma or Fellowship in Critical care Medicine)

Sl.No	Name	Additional Qualification
1.		
2.		
3.		

1. List of faculty with Proof/Certificate for the following courses:

S.No	Name of the course	Name/s of the faculty
1.	Suturing Course	
2.	EKG Course	
3.	Airway and Ventilation Course	
4.	Splinting Course	
5.	Emergency Sonography Course	
6.	ATLS or equivalent Course	
7.	ACLS or equivalent Course	
8.	PALS or equivalent Course	
9.	NALS or equivalent Course	

2. List of Non-teaching Staff: -

Sl.No.	Name	Designation

3. Staff Nurses:

- Total no of nurses
- Nurses with specialty training in critical care
- Nurse:Patient ratio in critical care units

4. Supporting faculty and staff:

Faculty in related departments

A. Anaesthesiology:

Name Qualification Designation Part-time/Full-time

B. Geriatric Medicine:

Name Qualification Designation Part-time/Full-time

C. Pulmonology:

Name Qualification Designation Part-time/Full-time

D. Emergency Medicine:

Name Qualification Designation Part-time/Full-time

E. Nephrology:

Name Qualification Designation Part-time/Full-time

F. Interventional Radiology:

Name Qualification Designation Part-time/Full-time

5. Available Clinical Material:

- Average daily attendance at emergency room / casualty department.
- Average daily IPD.
- Average daily admission of the critically ill patients
- Average daily bed occupancy of the critically ill patients

6. Intensive Care facilities

I. IMCU

- No. of Units
- No. of beds per unit
- Unit wise Equipment
- Nurse: Patient ratio
- Average bed occupancy per unit

II. Neuro ICU

- No. of Beds
- Equipment
- Average bed occupancy

III. Cardio ICU

- No. of beds
- Equipment
- Average bed occupancy

IV. Dialysis Unit

- Number of stations
- Average daily usage

V. Blood bank

- Qualified and trained pathologist: Available/Not available
- Round the clock availability of blood / components: Available/Not available
- Average no of blood units collected per month
- Average no. of blood units issued per month
- Facilities for component separation: Available/Not available
- Round the clock availability of trained nurse: Available/Not available
- Valid License : Yes/No
- Average blood units consumed daily:
- Facilities of blood components available: Yes/No
- Nature of Blood storage facilities (Whether as per specifications). Yes/No
- All blood Units tested for Hepatitis C,B,HIV: Yes/No

7. Teaching facilities:

	Number	Size	Sitting capacity	LCD Projector
Seminar Rooms				
Demonstration Rooms				

Audiovisual Aids: Adequate / Inadequate.

8. Departmental Library:

- Total No. of Books.
- Purchase of latest editions in last 3 years.

9. Departmental Museum (Wherever applicable).

- Space:
- No. of specimens
- Charts/ Diagrams.

10. Departmental Research Lab.

- Space
- Equipment

11. Working Ward Side lab.

- Space
- Facilities
- Departmental Technicians

12. Emergency room / casualty:

- No. of beds
- Patient Exam. arrangement:
- Equipments
- Teaching Space
- Waiting area for patients.
- Indoor Space:

16. Any other information.

Signature of the Head of the Department

Signature of the Head of the Institution

Part- C
Information about the fellowship specialty

(Critical care medicine)

A. Statistical Data: Patient care load

- No of beds for critical care: Male
- Female

- Statistical information regarding the critically ill patients for the preceding three years

	<u>20</u>	<u>20</u>	<u>20</u>
a. Critically ill Patients Male	_____	_____	_____
Female	_____	_____	_____
b. Acute myocardial infarction	_____	_____	_____
c. Acute ischemic stroke	_____	_____	_____
d. Intracranial hemorrhage	_____	_____	_____
e. Status epilepticus	_____	_____	_____
f. Status asthmaticus	_____	_____	_____
g. Acute renal failure	_____	_____	_____
h. Acute GI bleed / Acute abdomen	_____	_____	_____
i. Acute respiratory failure	_____	_____	_____
j. Acute liver failure	_____	_____	_____
k. Eclampsia	_____	_____	_____
l. Acute Poisoning	_____	_____	_____
m. Meningitis / Encephalitis	_____	_____	_____
n. Acute sepsis / shock	_____	_____	_____
o. Burns:	_____	_____	_____

B. Essential Requirements:

- Facilities for radiological, haematological and bio-chemical investigations Available/Not available
- Minor OT with table, sterilization, facility for suturing and equipment for minor surgical procedures: Available/Not available
- ECG room with 12 lead ECG facility: Available/Not available
- Basic life support and advanced cardiac life support : Available/Not available
- Echo cardiogram Available/Not available
- Blood gas analysis Available/Not available
- Bed side X-ray Available/Not available
- Bed side Ultra sound Available/Not available
- Bed side CT scan Available/Not available
- Bed side MRI Available/Not available
- Bed side Nuclear imaging Available/Not available
- CPR Available/Not available

C. Statistics of procedures performed: (Average per month)

- Temporary pacemaker insertion and maintenance
- Abdominal paracentesis
- Thoracentesis
- ICD tube
- Multi-parameter Arrhythmia Review Station
- PEG
- Haemodialysis
- Ventilator support
- Airway management
- Bronchoscopy

➤ ***Other facilities in the department:***

- Separate room for patient attendant education: Present/not present
- Seminar / teaching room with audio visual facilities: Present/not present

- Number of books in the departmental library
 - General Medicine
 - Critical care Medicine
- Number of Journals in Critical care Medicine. Give names

.....
.....
.....

Signature of the Head of the Department

Signature of the Head of the Institution