Accreditation Information

Date: 10/9/2018

Title of Program: Henry Ford Hospital/Wayne State University Program

Address:
Henry Ford Hospital
2799 W Grand Blvd
CFP-151
Detroit, MI 48202

Program Director: Nikhil Goyal, MD	**Email:** ngoyal1@hfhs.org
Program Coordinator: Renee White	**Email:** rwhite1@hfhs.org

10 Digit ACGME Program ID# (for accredited programs): 9992500058

Accreditation Status: Continued Accreditation	**Effective Date:** 12/11/2017	**Number of Approved Positions:** 17
Original Accreditation Date: 7/1/1983	**Accredited Length of Training:** 1 year(s)	

Citation Information

Respond to Previous Citation(s)

There are no previous citations.

Major Changes And Other Updates

Provide a brief update explaining any major changes to the training program since the last academic year, including changes in leadership. This may also include improvements and/or innovations implemented to address potential issues identified during the annual program review. (Last Updated: 8/14/2018)

We have established closer relationship with the Henry Ford Hospital Dermatology & Radiation Oncology Residency Program in order to retain residents for PGY1 at our program and subsequent years at the same institution.

Residents were given the option of doing an additional month of Emergency Medicine with focus on less acute patients, such as those coming with rashes or minor eye complaints. This has been well received.

Participating Sites

Sponsoring Institution: (The university, hospital, or foundation that has ultimate responsibility for this program.)

Name of Sponsor: Henry Ford Hospital [250331]

Address: 2799 West Grand Blvd Department of Medical Education, CFP 046 Detroit, MI 48202-2689	**Single/Limited Site Sponsor:** NO

Healthcare Entity Recognized by: Joint Commission

Type of Institution: General/Teaching Hospital

Name of Designated Institutional Official: Kimberly M Baker-Genaw, MD	**Email:** kgenaw1@hfhs.org

Does sponsor have an affiliation with a medical school (could be the sponsoring institution): YES

Name of Medical School #1: Wayne State Univ Sch of Med, Detroit, MI

Primary Clinical Site #1

Name: Henry Ford Hospital [250331]

Address: 2799 West Grand Blvd Department of Medical Education, CFP 046 Detroit, MI 48202-2689	**Type of Relationship with Program:** Sponsor
	Healthcare Entity Recognized by: Joint Commission

Required Rotation: YES

Length of Rotation (in months): *Year 1:* 12

Brief Educational Rationale: Henry Ford Hospital is an ACGME-accredited, multi-specialty teaching & referral hospital that provides all of the Fundamental Clinical Skills rotations for Transitional year interns. The majority of rotations are in Internal Medicine & Emergency Medicine, both highly rated ACGME-accredited programs. The ambulatory requirement is completed at one of the Henry Ford ambulatory training sites in Pediatrics or Internal Medicine. Number, content & schedule of rotations is based on base year requirements of the Intern's future specialty. Every patient encounter is supervised by board-certified faculty & appropriate supervision is available 24x7. TY interns consistently state they are exposed to diverse pathology & a diverse patient population, have excellent resident, faculty & ancillary support.
PLA Agreement Between Program and Site: NA (the site is under the governance of sponsoring institution)
Amenities
Date Added to ADS as Rotation Site: 6/24/2013
* Participating Site = Major and/or Other

If the total number of rotation months per year does not equate to 12 months (for all sites combined) provide an explanation:

Faculty/Teaching Staff

Program Director Information

Name: Nikhil Goyal, MD

Title: Program Director, Transitional Year Residency Program

Address:
Henry Ford Hospital
2799 W Grand Blvd
CFP-151
Detroit, MI 48202

Telephone: (313) 916-2889	**Telephone:** (313) 916-7437	**Email:** ngoyal1@hfhs.org

Date First Appointed as Program Director: 6/7/2010

Date of Last PD Change: 6/7/2010	**Previous Director Name:** Anna L Lukowski, MD, BS

Number of Hours Per Week Director Devotes to Program Activities In The Following:

Clinical Supervision: 20	**Administration:** 15	**Research:** 1	**Didactics/Teaching:** 9
Primary Certification: Emergency medicine	**Orig Year:** 2007	**Re-cert Year:** 2018	**Cert Type:** ABMS **Cert Status:** Meets MOC/CC Requirements
Secondary Certification: Clinical informatics	**Orig Year:** 2016	**Re-cert Year:**	**Cert Type:** ABMS **Cert Status:** Meets MOC/CC Requirements
Other Certification: Internal medicine	**Orig Year:** 2006	**Re-cert Year:** 2016	**Cert Type:** ABMS **Cert Status:** Meets MOC/CC Requirements

Physician Faculty Roster

List alphabetically and by site all physician faculty who have a significant role (teaching or mentoring) in the education of residents/fellows and who have documented qualifications to instruct and supervise. List the Program Director first.

Core physician faculty must:
- Devote sufficient time to the educational program to fulfill their supervisory and teaching responsibilities and demonstrate a strong interest in resident education
- Administer and maintain an educational environment conducive to educating residents in each of the ACGME competency areas
- Participate in faculty development programs designed to enhance the effectiveness of their teaching and to promote scholarly activity
- Establish and maintain an environment of inquiry and scholarship with an active research component
- Regularly participate in organized clinical discussions, rounds, journal clubs, and conferences
- Encourage and support residents in pursuing scholarly activities
- Be clinically active
- Devote the majority of their professional efforts to the program

All physicians who devote at least 15 hours per week to resident education and administration are designated as core faculty.

All core physician faculty should teach and advise residents as well as participate in at least 1 of the following:
- Evaluate the competency domains

- Work closely with and support the program director
- Assist in developing and implementing evaluation systems

Program directors will not be designated as core faculty.

Continued Accreditation programs: A CV is only required for the program director.

New Applications and Initial Accreditation programs: A CV is required for the program director and each active physician faculty member on your roster.

Name	Core Faculty	Based Mainly at Inst. #	Specialties / Certifications					No. of Years Teaching in This Specialty	Average Hours Per Week Spent On			
			Specialty / Certification	Cert	Original Cert Year	Cert Status	Re-cert Year		Clinical Supervision	Admin	Didactic Teaching	Research
Nikhil Goyal, MD (Program Director, Transitional Year Residency Program)	N	1	Emergency medicine	ABMS	2007	M	2018	9	20	15	9	1
			Clinical informatics	ABMS	2016	M	--					
			Internal medicine	ABMS	2006	M	2016					
Odaliz Abreu-Lanfranco, MD (Program Director, Internal Medicine Residency)	Y	1	Internal medicine	ABMS	2006	M	2016	1	10	27	6	1
			Infectious disease	ABMS	2012	M	--					
Bradley Jaskulka, MD (Associate Program Director, Transitional Year Residency)	Y	1	Emergency medicine	ABMS	2008	M	--	3	20	10	2	1
			Sports medicine	ABMS	2009	M	--					
Vinay Shah, MD (Internal Medicine Faculty, CCC & PEC Member)	Y	1	Internal medicine	ABMS	1997	M	2017	5	20	1	1	1
Taher Vohra, MD (Emergency Medicine Residency Program Director)	Y	1	Emergency medicine	ABMS	2006	M	2015	4	20	1	2	1

Certification Status:

Certification in the primary specialty refers to Board Certification. Certification for the secondary specialty refers to sub-board certification. If the secondary specialty is a core ACGME specialty (e.g., Internal Medicine, Pediatrics, etc.), the certification question refers to Board Certification.

R = Re-Certified
O = Time Limited Certificate/Original Certification Currently Valid
L = Certification Lapsed
N = Time-unlimited certificate/no Re-Certification
M = Meets MOC/CC Requirements
C = Meets Osteopathic Continuous Certification (OCC)

Based Mainly at Institution #:

1 = [250331] Henry Ford Hospital

*=Institution is an elective rotation site.
**=Institution not on list of active participating sites.

Educational Focus:

† = Program and Osteopathic Faculty
† † = Osteopathic Faculty

Non-Physician Faculty Roster

List the non-physician faculty who provide required instruction or supervision of residents/fellows in the program.

Name	Degree	Primary Institution	Specialty / Field	No. of Years Teaching in This Specialty

Physician Curriculum Vitae

First Name: Nikhil		**MI:**	**Last Name:** Goyal

Present Position: Program Director, Transitional Year Residency Program

Medical School Name: Maulana Azad Med Coll, Univ of Delhi, New Delhi, India

Degree Awarded: MD		**Year Completed:** 2000

Graduate Medical Education Program Name: Henry Ford Hospital

Specialty/Field: Internal medicine/Emergency medicine (components individually accredited)	**Date From:** 6/2001	**Date To:** 6/2006

Certification Information				Current Licensure Data	
Specialty	**Certification Year**	**Certification Status**	**Re-Cert Year**	**State**	**Date of Expiration**
Emergency medicine	2007	Meets MOC Requirements	2018	Michigan	1/2019
Clinical informatics	2016	Meets MOC Requirements		Ohio	1/2019
Internal medicine	2006	Meets MOC Requirements	2016		N/A

Academic Appointments - List the past ten years, beginning with your current position.		
Start Date	**End Date**	**Description of Position(s)**
9/2014	Present	Clinical Associate Professor in Internal Medicine and Emergency Medicine, Wayne State University
12/2011	Present	Adjunct Physician Instructor, Emergency Medicine, University of Michigan
6/2010	Present	Residency Director, Transitional Year Program, Henry Ford Hospital/Wayne State University
7/2007	Present	Director of Emergency Medicine Informatics
1/2007	Present	Residency Director, Combined EM/IM and EM/IM/CC Programs, Henry Ford Hospital/Wayne State University
3/2009	9/2014	Clinical Assistant Professor in Internal Medicine and Emergency Medicine, Wayne State University

Concise Summary of Role in Program:

As an academic faculty member in both departments of Internal Medicine and Emergency Medicine I directly supervise Transitional Year residents in various clinical settings. I am also highly involved in the administration of both IM & EM Residencies & in GME administration at the Hospital level

Current Professional Activities / Committees (limit of 10):

- [2018 - Present] Chair, Transitional Year Review Committee, ACGME
- [2018 - Present] Member, Taskforce on Digital Innovation, Society for Academic Emergency Medicine
- [2017 - Present] Section Editor, Technology in Emergency Medicine, Western Journal of Emergency Medicine
- [2017 - Present] Member, IT Committee, Council of Residency Program Directors in Emergency Medicine
- [2016 - Present] Chair, Web Evolutions Committee, Society for Academic Emergency Medicine
- [2014 - Present] Member, Council of TY Program Directors Web Content Committee (Association for Hospital Medical Education)
- [2013 - Present] Member, CCC, Internal Medicine Residency Program and Emergency Medicine Residency Program
- [2013 - Present] Member, PEC, Internal Medicine Residency Program and Emergency Medicine Residency Program
- [2009 - Present] Member, Emergency Medicine/Critical Care Medicine Program Directors Association
- [2006 - Present] Member, Henry Ford Hospital Graduate Medical Education Committee

Selected Bibliography - Most representative Peer Reviewed Publications / Journal Articles from the last 5 years (limit of 10):

- Connor-Schuler R, Khan A Goyal N, Zimny E. Pressor Support During a Jarisch-Herxheimer Reaction after Initiation of Treatment for Weil's Disease. American Journal of Emergency Medicine 2017; 35(8): 1211.e3-1211.e4
- Harmouche E, Goyal N, Pinawin A, Nagarwala J, Bhat R. USMLE Scores Predict Success in ABEM Initial Certification: A Multicenter Study. Western Journal of Emergency Medicine 2017; 18(3): 544-549
- Goyal N, Vallee PA, Folt J, Jaskulka B, Baliga S, Nagarwala J, Slezak M. WIREd for Milestones. Journal of Graduate Medical Education 2016; 8(3): 445-446
- Hermann G, Xi AS, Stevens B, Goyal N. Reducing Errors in Reporting Scholarly Activity to the ACGME: The AUSAM (Annual Update Scholarly Activity Monitoring) Tool. Journal of Graduate Medical Education 2016; 8(3): 447-448
- Baker-Genaw K, Kokas MS, Ahsan SF, Darnley-Fisch D, Drake S, Goyal N, Inamdar K, Moutzouros V, Prabhakar D, Rolland L, Sangha R,

Shreve M, Woodward A. Mapping Direct Observations From Objective Structured Clinical Examinations to the Milestones Across Specialties. Journal of Graduate Medical Education 2016; 8(3): 429-434

- Goyal N, Taylor A, Rivers EP. Relationship between Central and Peripheral Venous Oxygen Saturation and Lactate Levels: A Prospective Study. Journal of Emergency Medicine 2016; 50(6): 809-817
- Wilson SP, Suszanski J, Goyal N. Prompt Diagnosis of an Unusual Cause of Obstructive Shock Using Point-of-Care Ultrasound. Journal of Emergency Medicine 2015; 49(5): e151-e152.
- Bhat R, Takenaka K, Levine B, Goyal N, et al. Predictors of a Top Performer During Emergency Medicine Residency. Journal of Emergency Medicine 2015; 49(4): 505-512
- Baliga S, Folt J, Goyal N, Hays J, Jaskulka B, Slezak M, Vallee P. Correlation of Clinical and Non-Clinical Professionalism among Emergency Medicine Residents. Academic Emergency Medicine 2014; 21(Supplement s1): S70-S71.

Selected Review Articles, Chapters and / or Textbooks from the last 5 years (limit of 10):

- Devereaux DC, Winters MW (Chapter Editor – Goyal N) Combined Residency Programs in Emergency Medicine. AAEM/RSA's Rules of the Road for Medical Students 2nd edition 2014; Chapter 12

Participation in Local, Regional, and National Activities / Presentations / Abstracts / Grants from the last 5 years (limit of 10):

- Bouman A, Goyal N, Guyer C, Goyal A, Huitsing H, Dowers C, Clark C, Noll S, Harrison M, Farley N, Goldman D, Stokes-Buzzelli S. A Novel Curriculum for Ophthalmology Training of Emergency Medicine Residents (COPTER). Poster Presentation, CORD Academic Assembly 2018
- Lam P, Folt J, Goyal N. There's An App for That: A Mobile Procedure Logging Application Using Quick Response Codes. Poster Presentation, Michigan Summit on Quality Improvement and Patient Safety 2017. Poster Presentation, CORD Academic Assembly 2018
- Caldwell MT, Polk H, Hambrick NJ, Vallee P, Robinson A, Goyal N, Manteuffel J, Guetterman T. Exploring Women's Acceptance of a Contraception Intervention in the Emergency Department: A Mixed Methods Study. Academic Emergency Medicine 2017; 24(S1): S165 Oral Presentation, SAEM Annual Meeting 2017.
- Dowers C, Miller J, Goyal N, Vohra T. The Effect of a Wellness Program on Resident Burnout, Quality of Life, and ITE Scores. Poster Presentation, CORD Academic Assembly 2017
- Harmouche E, Goyal N, Pinawin A, Nagarwala J, Bhat R. USMLE Scores Predict Success in ABEM Initial Certification. Academic Emergency Medicine 2016; 23(S1): S82-S83. Oral Presentation, SAEM Annual Meeting 2016. Poster Presentation, CORD Academic Assembly 2016
- Moderator, Council of Transitional Year Program Directors Session F3. Association for Hospital Medical Education Institute, Ft. Lauderdale, Florida, May 2016
- Goyal N. Technology in the Emergency Department: Boom or Bust? Invited Speaker, Henry Ford Emergency Medicine Alumni Conference, January 2016
- Goyal N. Effective Bedside Teaching. Invited Speaker, Society for Academic Emergency Medicine Annual Meeting, May 2015
- Goyal N. Evidence-Based Medicine: p-values and Statistical Significance. Invited Speaker, New York Medical College Emergency Medicine Residency (Metropolitan Hospital), April 2014
- Jaskulka B, Folt J, Vallee PA, Baliga S, Hays J, Slezak M, Goyal N. Implementing the EM Milestones. Poster Presentation, ACGME Annual Educational Conference, March 2014

Explain equivalent qualifications for RC consideration:

Faculty Scholarly Activity

For reporting year 2018-2019, scholarly activity that occurred during the previous academic year (2017-2018)

Faculty Member	PMID	Conference Presentations	Other Presentations	Chapters Textbooks	Grant Leadership	Leadership or Peer-Review Role	Teaching Formal Courses
Nikhil Goyal, MD	**1** *empty* **2** *empty* **3** *empty* **4** *empty*	3	0	0	0	Y	Y
Taher Vohra, MD	**1** 29766750 **2** 29074030 **3** *empty* **4** *empty*	5	0	0	0	N	Y
Bradley Jaskulka, MD	**1** *empty* **2** *empty* **3** *empty* **4** *empty*	1	1	0	0	N	Y

Faculty Member	PMID	Conference Presentations	Other Presentations	Chapters Textbooks	Grant Leadership	Leadership or Peer-Review Role	Teaching Formal Courses
Odaliz Abreu-Lanfranco, MD	1 29659764 2 empty 3 empty 4 empty	0	1	0	0	N	Y
Vinay Shah, MD	1 empty 2 empty 3 empty 4 empty	0	0	0	0	N	Y

Resident Appointments

Number Of Positions

Position	TOTAL
Number of ACGME Approved Positions *	17
Number of Filled Positions **	17

* Requests for complement change must be made by clicking 'Complement Change' in the 'Change Request' section of the Program tab. Requested changes will automatically appear in the table above for programs with upcoming site visits.

** Includes residents that Started program Off Cycle (if applicable). The total number of Filled Positions should not include combined residents, however they should be counted in the approved positions. The combined residents should be logged at the individual combined program. Once entered in the combined program these residents will appear below the core program residents.

Actively Enrolled Residents

Resident	Program Start Date	Expected Completion Date	Type of Pos.	Year in Prog.	Years Prior Training	Prior Training Type	Specialty of Most Recent Prior GME	Medical School	Med School Graduation Date
Harleen Arora	7/1/2018	6/30/2019	C	1	0		N/A	Univ of Miami Leonard M. Miller Sch of Med, Miami, FL	05/2018
Zhen Deng	7/1/2018	6/30/2019	C	1	0		N/A	Univ of Kansas Sch of Med, Kansas City, KS	05/2018
John Fortunato	7/1/2018	6/30/2019	C	1	0		N/A	Oakland University William Beaumont School Of Medicine, Rochester, MI	05/2018
Mariam Hamid	7/1/2018	6/30/2019	C	1	0		N/A	Univ of Michigan Med Sch, Ann Arbor, MI	05/2018
Farhan Hussain	7/1/2018	6/30/2019	C	1	0		N/A	Wayne State Univ Sch of Med, Detroit, MI	06/2018
Rim Ishak	7/1/2018	6/30/2019	C	1	0		N/A	American Univ of Beirut, Beirut, Lebanon	06/2008
Man Li (Elina) Jin	7/1/2018	6/30/2019	C	1	0		N/A	SUNY, Downstate Medical Center Coll of Med, Brooklyn, NY	05/2018
Daniel Kaitis	7/1/2018	6/30/2019	C	1	0		N/A	St Louis Univ Sch of Med, St Louis, MO	05/2018
Katelyn Kim	7/1/2018	6/30/2019	C	1	0		N/A	Univ Of Central Florida Coll Of Med, Orlando, FL	05/2018
Tyler Looysen	7/1/2018	6/30/2019	C	1	0		N/A	Univ of North Dakota Sch of Med and Hlth Sci, Grand Forks, ND	05/2016
Gem Manalo	7/1/2018	6/30/2019	C	1	0		N/A	Wayne State Univ Sch of Med, Detroit, MI	06/2018

Resident	Program Start Date	Expected Completion Date	Type of Pos.	Year in Prog.	Years Prior Training	Prior Training Type	Specialty of Most Recent Prior GME	Medical School	Med School Graduation Date
Eric Schaff	7/1/2018	6/30/2019	C	1	0		N/A	Michigan State Univ Coll of Human Med, East Lansing, MI	05/2018
Lauren Seale	7/1/2018	6/30/2019	C	1	0		N/A	Univ of Michigan Med Sch, Ann Arbor, MI	05/2018
John Sowinski	7/1/2018	6/30/2019	C	1	0		N/A	Indiana Univ Sch of Med, Indianapolis, IN	05/2018
Jonathan D VanWickle	7/1/2018	6/30/2019	C	1	0		N/A	Med Coll of Wisconsin, Milwaukee, WI	06/2018
Kirstin Weider	7/1/2018	6/30/2019	C	1	0		N/A	Michigan State Univ Coll of Human Med, East Lansing, MI	05/2018
Simeng Zhu	7/1/2018	6/30/2019	C	1	0		N/A	Univ of Florida Coll of Med, Gainesville, FL	05/2018

* Indicates resident was accepted as a transfer or completed prerequisite, preliminary training. Documentation of previous experience should be available for review by the site visitor.
**(y/n) Did you obtain documentation of previous educational experience?

Type of Position

P = Preliminary
C = Categorical
B = Board combined track/pathway approved for this individual trainee

Educational Focus

† = Osteopathic Designated

Prior Training Type

A = ACGME Accredited
O = AOA Accredited
C = RCPCS Accredited
AI = ACGME-I Accredited
OR = ACGME training in osteopathic-focused position
CF = CFPC Accredited

List of Residents who started the Program Off-Cycle (between 09/01/2018 and 06/30/2019)

Resident	Program Start Date	Expected Completion Date	Type of Pos.	Year in Prog.	Years Prior Training	Specialty of Most Recent Prior GME	Medical School	Med School Graduation Date
None								

List of Residents in Program - Doing Research/Other Training

Resident	Program Start Date	Expected Completion Date	Type of Pos.	Year in Prog.	Years Prior Training	Specialty of Most Recent Prior GME	Medical School	Med School Graduation Date
None								

List of core program residents who have left the program or completed (off-cycle) training during academic year

Resident	Status	Program Start Date	Completed or Left Program Date
None			

Resident Scholarly Activity

For reporting year 2018-2019, scholarly activity that occurred during the previous academic year (2017-2018)

Resident	Year in Program	PMID1	PMID2	PMID3	Conference Presentations	Chapters Textbooks	Participated in Research	Teaching Presentations
Husam Alghanem	1				0	0	N	Y

Resident	Year in Program	PMID1	PMID2	PMID3	Conference Presentations	Chapters Textbooks	Participated in Research	Teaching Presentations
Ahmed Amer	1				0	0	Y	Y
Andre Aung	1				2	0	Y	Y
Anjali Badami	1				0	0	Y	Y
Dan Cohen	1				1	0	N	Y
Sachin Gandhi	1				1	0	Y	Y
Remi Hamel	1				0	0	Y	Y
Christopher Haskins	1				0	0	Y	Y
Angela Jiang	1				0	0	Y	Y
Karishma Khullar	1				0	0	N	Y
Travis Kimple	1				0	0	Y	Y
Kevin Leikert	1				0	0	Y	Y
Kenneth Less	1				1	0	N	Y
Shravani Mikkilineni	1				1	0	Y	Y
Kelli Pointer	1				1	0	Y	Y
Tova Rogers	1				0	0	Y	Y
Omar Uddin	1				1	0	N	Y
Daniel Warren	1				0	0	N	Y

List Of Residents On Leave

Resident	Leave Type	Leave Start	Leave End
		None	

Physician Faculty To Resident Ratio

Reduced Ratio	
Physician Faculty / Residents:	1.0 : 3.4
Core Physician Faculty / Residents:	1.0 : 4.2
Actual Ratio	
Physican Faculty / Residents:	5 : 17.0
Core Physician Faculty / Residents:	4 : 17.0

Program Director is not included in core faculty

Aggregated Data On Residents Completing Or Leaving The Program

Based in Academic Year Ending:	2017-2018[1]	2016-2017[2]	2015-2016[3]	2014-2015[4]	2013-2014[5]
Number of Graduates Who Started in Program Year 1 and Finished This Program[6]:	18	16	17	17	17
Number of Graduates Regardless of Whether they Began in this Program[6]	18	16	17	17	17
Number of Residents Who Withdrew from the Program	0	0	0	0	0
Number of Residents Who Completed Preliminary Training	0	0	0	0	0
Number of Residents Who Transferred to Another Program	0	0	0	0	0
Number of Residents Dismissed from the Program	0	0	0	0	0

[1] Based on Academic Year 2017-2018 (residents leaving or completing from 9/1/2017 to 8/31/2018).
[2] Based on Academic Year 2016-2017 (residents leaving or completing from 9/1/2016 to 8/31/2017).
[3] Based on Academic Year 2015-2016 (residents leaving or completing from 9/1/2015 to 8/31/2016).
[4] Based on Academic Year 2014-2015 (residents leaving or completing from 9/1/2014 to 8/31/2015).
[5] Based on Academic Year 2013-2014 (residents leaving or completing from 9/1/2013 to 8/31/2014).
[6] Excludes preliminary positions.

Residents Completing Program

Based on Academic Year 2017-2018 (residents completing from 9/1/2017 to 8/31/2018).

Resident	Start Date	Actual Date of Completion	Type of Position
Husam Alghanem	7/1/2017	6/30/2018	Categorical
Ahmed M Amer	7/1/2016	9/30/2017	Categorical
Andre Aung	7/1/2017	6/30/2018	Categorical
Anjali Badami	7/1/2017	6/30/2018	Categorical
Dan Cohen	7/1/2017	6/30/2018	Categorical
Sachin Gandhi	7/1/2017	6/30/2018	Categorical
Remi Hamel	7/1/2017	6/30/2018	Categorical
Christopher Haskins	7/1/2017	6/30/2018	Categorical
Angela Jiang	7/1/2017	6/30/2018	Categorical
Karishma Khullar	7/1/2017	6/30/2018	Categorical
Travis Kimple	7/1/2017	6/30/2018	Categorical
Kevin Leikert	7/1/2017	6/30/2018	Categorical
Kenneth Less	7/1/2017	6/30/2018	Categorical
Shravani Mikkilineni	7/1/2017	6/30/2018	Categorical
Kelli Pointer	7/1/2017	6/30/2018	Categorical
Tova Rogers	7/1/2017	6/30/2018	Categorical
Omar Uddin	7/1/2017	6/30/2018	Categorical
Daniel Warren	7/1/2017	6/30/2018	Categorical

* Indicates resident was accepted as a transfer

Based on Academic Year 2016-2017 (residents completing from 9/1/2016 to 8/31/2017).

Resident	Start Date	Actual Date of Completion	Type of Position
Ahmad M Babaa	7/1/2016	6/30/2017	Categorical
Daniel A Brill	7/1/2016	6/30/2017	Categorical
Adam K Brys	7/1/2016	6/30/2017	Categorical
Katia E Chavez	7/1/2016	6/30/2017	Categorical
Christopher P Donovan	7/1/2016	6/30/2017	Categorical
Taylor S Fields	7/1/2016	6/30/2017	Categorical
Wenxi Gao	7/1/2016	6/30/2017	Categorical
Myroslav Gerasymchuk	7/1/2016	6/30/2017	Categorical
Daniel Gutierrez	7/1/2016	6/30/2017	Categorical
Andrew C Hou	7/1/2016	6/30/2017	Categorical
Hong-Gam Le	7/1/2016	6/30/2017	Categorical
Candace M Nofar	7/1/2016	6/30/2017	Categorical
Coleen Palileo	7/1/2016	6/30/2017	Categorical
Hamza M Pasha	7/1/2016	6/30/2017	Categorical
Salman Sagarwala	7/1/2016	6/30/2017	Categorical
Allison J Zarbo	7/1/2016	6/30/2017	Categorical

* Indicates resident was accepted as a transfer

Based on Academic Year 2015-2016 (residents completing from 9/1/2015 to 8/31/2016).

Resident	Start Date	Actual Date of Completion	Type of Position
Desiree C Albert	7/1/2015	6/30/2016	Categorical
Alexandru Alexa	7/1/2015	6/30/2016	Categorical
Shaza N Al-Holou	7/1/2015	6/30/2016	Categorical
Dennis L Churchill	7/1/2015	6/30/2016	Categorical
David J Combs	7/1/2015	6/30/2016	Categorical
Brian Florek	7/1/2015	6/30/2016	Categorical
Daniel R Germeroth	7/1/2015	6/30/2016	Categorical
Gregory M Hermann	7/1/2015	6/30/2016	Categorical
Logan D Kinch	7/1/2015	6/30/2016	Categorical
Bianca Kizy	7/1/2015	6/30/2016	Categorical

* Indicates resident was accepted as a transfer

Based on Academic Year 2015-2016 (residents completing from 9/1/2015 to 8/31/2016).

Resident	Start Date	Actual Date of Completion	Type of Position
Sarah Maki	7/1/2015	6/30/2016	Categorical
Karan H Patel	7/1/2015	6/30/2016	Categorical
Karen Rodriguez	7/1/2015	6/30/2016	Categorical
Stacey M Scheick	7/1/2015	6/30/2016	Categorical
Hang Shi	7/1/2015	6/30/2016	Categorical
Faisal A Siddiqui	7/1/2015	6/30/2016	Categorical
Amanda Xi	7/1/2015	6/30/2016	Categorical

* Indicates resident was accepted as a transfer

Based on Academic Year 2014-2015 (residents completing from 9/1/2014 to 8/31/2015).

Resident	Start Date	Actual Date of Completion	Type of Position
Arwa Alsamarae	7/1/2014	6/30/2015	Categorical
Vladimir Avkshtol	7/1/2014	6/30/2015	Categorical
Nathan Farley	7/1/2014	6/30/2015	Categorical
Katherine Fontichiaro	7/1/2014	6/30/2015	Categorical
Supriya Jain	7/1/2014	6/30/2015	Categorical
Rahul Komati	7/1/2014	6/30/2015	Categorical
Neal Kumar	7/1/2014	6/30/2015	Categorical
Douglas Laurain	7/1/2014	6/30/2015	Categorical
Sean Lisse	7/1/2014	6/30/2015	Categorical
Jennifer Mancuso	7/1/2014	6/30/2015	Categorical
Tasneem F Mohammad	7/1/2014	6/30/2015	Categorical
Emily E Naoum	7/1/2014	6/30/2015	Categorical
Ruby Parikh	7/1/2014	6/30/2015	Categorical
Rachel Shah	7/1/2014	6/30/2015	Categorical
Kevin R Tomasko	7/1/2014	6/30/2015	Categorical
Stephen Tse	7/1/2014	6/30/2015	Categorical
Di Zhou	7/1/2014	6/30/2015	Categorical

* Indicates resident was accepted as a transfer

Based on Academic Year 2013-2014 (residents completing from 9/1/2013 to 8/31/2014).

Resident	Start Date	Actual Date of Completion	Type of Position
Waqaar Ahmad	7/1/2013	6/30/2014	Categorical
Daniel Albertus	7/1/2013	6/30/2014	Categorical
Jacqueline Bogan	7/1/2013	6/30/2014	Categorical
Milad Eshaq	7/1/2013	6/30/2014	Categorical
Kate Essad	7/1/2013	6/30/2014	Categorical
Shawn Gappy	7/1/2013	6/30/2014	Categorical
Rehan Hussain	7/1/2013	6/30/2014	Categorical
Frances Jacinto	7/1/2013	6/30/2014	Categorical
Anju Jaehne	7/1/2013	6/30/2014	Categorical
James Liadis	7/1/2013	6/30/2014	Categorical
Andrew Liu	7/1/2013	6/30/2014	Categorical
Shaun Patel	7/1/2013	6/30/2014	Categorical
Manal Peracha	7/1/2013	6/30/2014	Categorical
Justin Spaulding	7/1/2013	6/30/2014	Categorical
Laura Uridge	7/1/2013	6/30/2014	Categorical
Yao Yu	7/1/2013	6/30/2014	Categorical
Sarwar Zahid	7/1/2013	6/30/2014	Categorical

* Indicates resident was accepted as a transfer

Transferred, Withdrawn, And Dismissed Residents

List of Residents that Transferred Out Of The Program

Resident	Start Date	End Date	Transferred to Which Specialty	Within or Outside Current Institution	Provided Resident Records to new Program
None					

List of Residents that Withdrew or Were Dismissed From The Program

Resident	Start Date	End Date	Withdrawn or Dismissed	Reason
None				

List of Residents that Completed Training but not prepared to enter independent practice

Resident	Start Date	End Date	Status
None			

Evaluation

1. Does the program have a system in place to evaluate the resident/fellows' abilities to determine whether they may take on progressive authority and responsibilities in patient care?

Yes

2. Indicate how evaluators are educated to use assessment methods so that residents/fellows are evaluated fairly and consistently. Select up to 3 of the most commonly used methods.

☑ Workshops/special training on assessment
☑ Informal or formal discussions among the faculty
☐ Assessment is a topic of a retreat
☐ Faculty review assessments and compare evaluations
☐ PD instructs or educates about assessment methods
☑ Group or committee discussions that result in consensus assessment of residents
☐ None, no specific education on assessment provided
☐ Other (specify below)

Specify only if Other is selected

3. Indicate how residents/fellows are informed of the performance criteria on which they will be evaluated. Check all that apply.

☑ During resident orientation
☑ General goals and objectives
☑ Rotation-specific goals and objectives
☑ Provided handouts or examples of evaluation forms
☐ Other written communications
☑ Verbal communication or meetings
☐ Reviewed with residents before each rotation
☑ Reviewed with residents at the beginning of each year
☐ Residents not informed
☑ Other (specify below)

Specify only if Other is selected

Discussed at monthly meetings and specifically with each resident at semiannual or quarterly scheduled meetings

4. What percentage of the faculty complete written evaluations of residents/fellows within 2 weeks following each rotation or educational experience?

☑ 80-100 %
☐ 60-79%
☐ 40-59%

☐ 20-39%

☐ Less than 20%

5. Does the program have a Clinical Competency Committee?

Yes

6. If yes, does the Clinical Competency Committee perform resident/fellow evaluations semi-annually?

Yes

7. If yes, is feedback provided to residents/fellows on a semi-annual basis?

Yes

8. If yes, is the feedback documented?

Yes

Clinical Experience And Educational Work, Patient Safety And Learning Environment

1. Does the program have residents for the specified year?

Year 1 residents?

Yes

2. What percentage of residents participate in patient safety programs during the current academic year?

Year 1 Residents %

100

3. What percentage of residents participate in interprofessional clinical quality improvement programs to improve health outcomes?

Year 1 Residents %

100

4. How often do clinical care needs (in terms of volume and/or complexity of cases) exceed residents' ability to provide appropriate and quality care?

Year 1 Residents

Never

5. During regular daytime hours, indicate which of the following back-up systems your program has in place when clinical care needs exceed the resident's ability.

☑ Physicians are immediately available (on site)

☑ Physicians are available by phone

☑ Senior Residents or Fellows are immediately available (on site)

☐ Senior Residents or Fellows are available by phone

☐ Mid-level Providers are immediately available (on site)

☐ Mid-level Providers are available by phone

☐ No back-up system

☐ Other

6. During nights and weekends, indicate which of the following back-up systems your program has in place when clinical care needs exceed the resident's ability.

☑ Physicians are immediately available (on site)

☑ Physicians are available by phone

☑ Senior Residents or Fellows are immediately available (on site)

☐ Senior Residents or Fellows are available by phone

☐ Mid-level Providers are immediately available (on site)

☐ Mid-level Providers are available by phone

☐ No back-up system

☐ Other

7. Indicate which methods the program uses to ensure that hand-over processes facilitate both continuity of care and patient safety?

☑ Hand-over form (a stand alone or part of an electronic medical record system)

☑ Paper hand-over form

☐ Hand-over tutorial (web-based or self-directed)

☑ Scheduled face-to-face handoff meetings

☑ Direct (in person) faculty supervision of hand-over

☑ Indirect (via phone or electronic means) hand-over supervision

☑ Senior Resident supervision of junior residents

☑ Hand-over education program (lecture-based)

☑ Other

Robust OSCE-based hand-over education program

8. Indicate the ways that your program educates residents to recognize the signs of fatigue and sleep deprivation.

☑ Didactics/Lecture

☑ Computer based learning modules

☑ Grand rounds

☑ Small group seminars or discussion

☐ Simulated patient encounters

☑ On-the-job training

☐ One-on-one experiences with faculty and attending

☐ Other

9. Which of the following options does the program or institution offer residents who may be too fatigued to safely return home?

○ Money for taxi

○ Money for public transportation

○ One-way transportation service (such as a dedicated facility bus service)

○ Transportation service which includes option to return to the hospital or facility the next day

○ Reliance on other staff or residents to provide transport

◉ Sleeping rooms available for residents post call

○ Not applicable: residents do not take in-house call

○ Other

10. When averaged over 4 weeks, do residents have 1 full day out of 7 free from educational and clinical responsibilities?

Yes

11. How often do residents have the required 14 hours free of clinical experience and educational work after 24 hours of in-house call?

Year 1 Residents

◉ Very Often

○ Often

○ Sometimes

○ Rarely

○ Never

○ N/A

12. What is the maximum number of consecutive nights of night float assigned to any resident in the program?

0

13. On the most demanding rotation, what is the frequency of in house call?

○ Every second night

○ Every third night

◉ Every fourth night

○ No in-house call - Not Applicable

○ Other

14. Does the program use ambulatory and/or non-hospital settings in the education of residents (experiences other than inpatient)?

Yes

15. If yes, indicate the type of settings used.

☑ Hospital Based Continuity Clinic

☐ Community or Federal Public Health Centers

☐ Ambulatory Surgery Centers (Surgical or specialty centers)

☐ Veterans Administration (VA) Ambulatory Services

☑ Faculty Ambulatory Practice, Institutionally Based

☐ Private Physician's Offices

☐ Ambulatory / outpatient settings

☐ Other

16. Do you use an electronic medical record in your primary teaching hospital?

Yes

17. If yes, what percentage of your residents use the electronic medical record system to improve the health in a population of patients?

100

18. As program director, I attest that the resident/fellow rotations are scheduled to meet the work week limit of 80 hours.

Yes

19. What are your program's top priorities for improving the learning and working environment for residents/fellows during the current academic year?

☐ Enhancing peer and social support networks for trainees

☑ Increasing trainee access to medical/dental health services

☐ Increasing trainee access to counseling/mental health services

☑ Encouraging trainee healthy lifestyle

☐ Addressing trainee workload/work compression

☑ Promoting resilience in trainees

☑ Teaching relaxation and/or mindfulness

☐ Improving faculty mentoring and support for trainees

☐ Offering trainee peer counseling, Balint or Balint-like groups

☐ Other

☐ Other

20. Briefly describe how the program and sponsoring institution are addressing the priorities identified in the previous question.

Henry Ford has a formal resident wellness program that includes multiple resources for promoting health and well being, including wellness assessment survey and a wellness page with multiple tools, resources and referrals. Monthly hospital wide wellness rounds are held and include topics such as burnout, resilience, emotional intelligence, healthy living, and relationship building. Additionally, all residents are provided wellness days where they are given protected time to access medical, dental and mental health services as needed. Henry Ford has a robust employee assistance program, offering comprehensive and extensive work-life resources, which includes professional consultations and referrals to assist with a wide spectrum of work, family and personal issues. This program is available to residents, housemates and dependents at no cost.