MARSHALL UNIVERSITY SCHOOL OF MEDICINE

PULMONARY FELLOWSHIP RESIDENCY TRAINING PROGRAM

LETTER OF AGREEMENT FOR THE COOPERATIVE TRAINING OF RESIDENTS/FELLOWS FROM MARSHALL UNIVERSITY JOAN C. EDWARDS SCHOOL OF MEDICINE (MUSOM) AND DR NASIM SHIEKH (ALLERGY AND IMMUNOLOGY CLINIC)

This letter of agreement is an educational statement that sets forth important points of agreement between Marshall University School of Medicine (MUSOM) and Dr. Nasim Sheikh. This statement of educational purpose does not affect current contracts and institutional affiliation agreements between the two institutions.

This Letter of Agreement is effective from January 1, 2013, and will remain in effect for three (3) years, or until updated, changed, or terminated by the MUSOM Pulmonary Fellowship Program and/or Dr. Nasim Sheikh and the Allergy and Immunology Clinic. Such changes must be communicated with the MUSOM Office of Graduate Medical Education.

1. Persons Responsible for Education and Supervision

At MUSOM: Nancy Munn M.D., Program Director,

At Allergy and Immunology Clinic:

Nasim Shiekh M.D, Site Director
4502 Maccorkle Ave SW,
South Charleston, WV 25309

The above mentioned people are responsible for the education and supervision of the residents/fellows while rotating at the Participating Site.

2. Responsibilities

The clinician at the Participating Site must provide appropriate supervision of residents/fellows in patient care activities and maintain a learning environment conducive to educating the residents/fellows in the ACGME competency areas. The clinician must evaluate fellow 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 ACGME Residency/Fellowship Program Requirements and are delineated in the attached goals and objectives.

As program director, Dr. Nancy Munn is ultimately responsible for the content and conduct of the educational activities at all sites, including SMMC. The program director, Participating Site director and the faculty are responsible for the day-to-day activities of the residents/fellows to ensure that the outlined goals and objectives are met during the course of the educational experiences.

Rotations may be in two (2) week blocks, but generally rotations are a month in duration.

The day-to-day supervision and oversight of resident/fellow activities will be determined by the specialty service where they are assigned. Ashley Taliaferro, Program Coordinator, is responsible for oversight of some resident/fellow activities, including coordination of evaluations, arrangements of conferences, sick leave, annual leave and benefits.

4. **Assignments**

MUSOM will provide to SMMC the name of the resident(s)/fellow(s) assigned to the site, the service they will be training on and other relevant information. Residents/fellows will remain on MUSOM’s payroll; remain eligible for all resident benefits, including annual leave, sick leave, and health insurance, etc. Fellow’s will be covered under MUSOM’S malpractice policy in the amount of one million dollars per occurrence. The policy also provides tail coverage and legal defense.

5. **Responsibility for supervision and evaluation of fellows**

Fellows will be expected to behave as peers to the faculty, but be supervised in all their activities commensurate with the complexity of care being given and the fellow’s own abilities and level of training. Such activities include, but are not limited to the following:

- Patient care in clinics, inpatient wards and emergencies
- Conferences and lectures
- Interactions with administrative staff and nursing personnel
- Diagnostic and therapeutic procedures
- Intensive Care unit or Ward patient care
The evaluation form will be developed and administered by the MUSOM Pulmonary Fellowship Program. Fellows will be given the opportunity to evaluate the teaching faculty, clinical rotation and Participating Site.

6. Policies and Procedures for Education

During assignments to SMMC, residents/fellows will be under the general direction of MUSOM's Graduate Medical Education Committee's and MUSOM Pulmonary Fellowship Program's Policy and Procedure Manual as well as the policies and procedures of the Participating Site for patient confidentiality, patient safety, medical records, etc.

7. Authorized Signatures

Nasim Shiekh, M.D.

\[Signature\]

Nasim Shiekh, M.D. Site Director

2/22/13

Date

MUSOM

\[Signature\]

Nancy Munn, M.D.
Program Director

2/20/13

Date

\[Signature\]

Paulette S. Wehner, M.D.,
DIO, Senior Associate Dean for GME

1/3/13

Date

\[Signature\]

Joseph Shapiro, M.D.
Dean

2-13-13

Date
Goals and Objectives for the MUSOM Pulmonary Fellowship Residency Program

OVERALL LEARNING GOALS AND OBJECTIVES

1. Patient Care:
The pulmonary fellow will be able to:
- Identify pertinent positives and negatives when interviewing patients in allergy/immunology clinic
- Complete an accurate and thorough exam.
- Develop a complete differential diagnosis.
- Develop and present an appropriate assessment and plan.

2. Medical Knowledge:
The pulmonary fellow will be able to describe:
- The pathophysiology
- The risk factors
- The signs and symptoms
- The differential diagnosis
- The proper labs and tests and their meaning in diagnosis
- The treatment plan
Appropriate description to patient and family members of the following (when appropriate):
Adverse reactions to foods, drugs and biologicals
- Anaphylaxis
- Asthma
- Immunodeficiency – primary and secondary
- Rhinitis- Urticaria/angioedem
- Dermatitis

3. Interpersonal and Communication Skills
The Pulmonary fellow will:
Counsel and educate patients and families on pertinent medical and psychosocial issue
Provide information using effective and legible writing skills.

4. Professionalism
The Pulmonary fellow will:
Demonstrate respect to nursing staff, medical students, residents, attendings and other members of the healthcare team.
Return pages in a timely manner.
Complete duties as expected.
Be respectful of the patients’ culture, age, gender, sexual orientation and disability.
Be punctual and available for required duties.

5 Practice-based Learning and Improvement

A. Analyze own practice for needed improvement
   1. Use evaluations by faculty and others to improve practice

B. Use of evidence from scientific studies
   1. Incorporate new (or novel) pharmacologic agents and treatment programs into treatment of allergic/immunologic diseases
   2. Incorporate diagnostic and management decisions based on the Allergy & Immunology Practice Parameters

C. Application of research and statistical methods
   1. Develop statistical methods for research project(s) in conjunction with statisticians
2. Carry out planned research projects with presentation of results and development of manuscript if able
3. Critically review allergy & Immunology literature at journal club

D. Use of information technology
   1. Use Medline, PubMed, UpToDate or other databases for information to improve patient care, teaching, or research

E. Facilitate learning of others
   1. Teach medical students and fellows in outpatient clinics and with in-patient consults
   2. Perform teaching conferences at core curriculum conference, teaching rounds, journal club and research conferences
      a. Presentation skills at intermediate level

**Systems-based practice**

a. Understand the systems of medical care. This includes familiarity with medical economics, regulations and types of health care and health delivery.
b. Understand the principles of medical economics
   - Medicaid regulations, standards of care and billing requirements
   - Medicare regulations, standards of care and billing requirements
   - Uncompensated care provisions
   - Third-party insurance regulations, standards of care and billing requirements
c. Gain proficiency in accurate diagnostic coding and billing.
d. Become familiar with the principles of epidemiology, allergy and immunology medicine

**GRADED LEVEL OF RESPONSIBILITY AND EXPECTATIONS BY YEAR OF TRAINING**

**1st YEAR FELLOW**
1. Demonstrates integrity, respect, compassion, and empathy for patients.
2. Communicates effectively with patients, families, health care professionals, other trainees, faculty and referring physicians.
3. Demonstrates ethical behavior while dealing with clinical and non-clinical issues.
4. Develops expertise as a consultant dealing with common pulmonary problems.
5. Develops expertise in managing adult patients with severe pulmonary illnesses and other serious illnesses presenting in allergy and immunology clinic
6. Demonstrates knowledge in the technical aspects and competency in the interpretations of RAST and allergy testing
7. Demonstrates knowledge and competency in performing clinic based procedures

**2nd YEAR FELLOW:**
1. Demonstrates integrity, respect, compassion, and empathy for patients.
2. Communicates effectively with patients, families, health care professionals, other trainees, faculty and referring physicians.
3. Demonstrates ethical behavior while dealing with clinical and non-clinical issues.
4. Maintains and enhances expertise as a consultant dealing with common and uncommon allergy related diseases.

OVERVIEW

Educational Goal

The Allergy and Immunology elective rotation provides an opportunity for the pulmonary fellows to have basic exposure to the principles of the field of allergy and immunology.

Many clinical states caused by allergic and immunologic disorders are regularly encountered by the general internist. Care for the asthma patient is commonly provided by general internist. Patient allergies can cause profound occupational and socioeconomic changes as well as require extensive environmental alterations. The allergy and immunology rotation is primarily an office-based rotation in the private office of a faculty allergist. Each fellow should develop an understanding of basic allergic and immunologic disease processes and how to initiate work-ups and treatment of those disorders. The fellow should also gain an understanding of when consultation with an allergist is indicated.

Fellows/Residents in the allergy and immunology rotation will participate in supervised patient encounters, discussion sessions with the attending, required readings, and may be required to submit a completed series of self-assessment concerning basic aspects of the field of allergy and immunology.

Teaching Methods

The fellow will be working closely with the Allergy attending in the care of each patient. Each patient seen will be discussed with, then evaluated by the attending, emphasizing the unique aspects of the consultative process and allergy care. The fellow and attending will review and discuss any required reading.

Mix of Diseases

The following disorders will be reviewed during the rotation with the supervising attending or through direct patient interactions:

A. Outpatient asthma management, including evaluation of pulmonary function tests
B. Asthma diagnosis, pathophysiology and treatment
C. Rhinitis, classification, diagnosis and treatment
D. Atopic dermatitis
E. Anaphylaxis, diagnosis and treatment
F. Drug reactions, diagnosis and treatment
G. Food reactions, diagnosis and treatment
H. Urticaria, diagnosis and treatment
I. Initial evaluation of immunodeficiency states
J. Allergy skin testing
K. Allergen immunotherapy
L. Status asthmaticus, diagnosis and treatment
M. Care of patient with asthma and allergic rhinitis during pregnancy
N. Sinusitis
O. Allergic contact dermatitis, diagnosis and treatment
P. Atopic dermatitis, diagnosis and treatment
Q. Stinging insect reactions, diagnosis and treatment
R. Clinical immunology, including components of the immune system and immunological reactions in the more common immunodeficiency states
Patient Characteristics and Types of Clinical Encounters
Patients are almost exclusively outpatients presenting in non-acute settings. Patients evaluated by the fellow will range from adolescent to older adult. A wide range of the clinical problems noted in the above will be encountered including initial evaluation, chronic maintenance, and relapse.

Fellow Supervision
The fellow will be supervised at all times by the attending allergist who will be present on site.

Procedures and Services
Procedures and services include those typically performed by an allergist, including skin testing, pulmonary function testing, rhinoscopy, and immunotherapy.

Didactic Teaching

Noon Conference
Fellows rotating on the allergy service are required to maintain greater than 60% attendance at noon conference. Noon conference occurs Monday through Friday. These sessions cover the basic core curriculum, and other curriculum topics such as ethical issues, geriatrics, computer systems and informatics, health care systems, occupational and environmental health issues, and other topics of concern.

Core Reading Materials
Harrison's Principle's of Internal Medicine, 16th ed., Kasper DI, ed. McGraw Hill
The Washington Manual of Medical Therapeutics, 32nd ed.

Ancillary Educational Materials
Subspecialty Texts of Neurology, Pulmonary Medicine, Nephrology, Endocrinology, Infectious Diseases, Rheumatology as well as General Medical References (Harrison's Principles of Internal Medicine, Cecil's Textbook of Medicine) are available 24 hours a day, seven days a week via Marshall library

Fellows have access to the on-line services of Library. Access to the on campus library room is available 24 hours a day, seven days a week. Full text is available for many peer-review journals including, but not limited to:
ACP Journal Club
Annals of Internal Medicine
British Medical Journal
Cancer
Circulation
Journal of the American College of Cardiology
The Lancet
New England Journal of Medicine
Stroke

Also available on-line:
Harrison's Principle's of Internal Medicine, 14th ed.
Guide to Clinical Preventive Services, 2nd ed.
The Cochrane Library
Medline and GratefulMed Databases

Training Sites
**Allergy private practice office**
The fellow will participate in this allergy practice under the supervision of the attending allergist, a member of the voluntary faculty.

### Competency-based Goals and Objectives
**Allergy and Immunology Rotation**

<table>
<thead>
<tr>
<th>Learning Venues</th>
<th>Evaluation Methods</th>
<th>Level Specificity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Allergist Office</td>
<td>A. Attending Evaluation</td>
<td>N/A</td>
</tr>
<tr>
<td>2. Self Study</td>
<td>B. Self Evaluations</td>
<td>N/A</td>
</tr>
<tr>
<td>3. Department</td>
<td>C. Staff Evaluation</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>D. Patient Evaluation</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>E. Didactic Testing</td>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Competency-Patient Care</th>
<th>Learning Venues</th>
<th>Evaluation Methods</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Obtain focused history of allergy related symptoms</td>
<td>1</td>
<td>A</td>
<td>N/A</td>
</tr>
<tr>
<td>2. Perform physical examination, identifying signs of allergy</td>
<td>1</td>
<td>A</td>
<td>N/A</td>
</tr>
<tr>
<td>3. Observe allergy skin testing</td>
<td>1</td>
<td>A</td>
<td>N/A</td>
</tr>
<tr>
<td>4. Observe and perform pulmonary function testing</td>
<td>1</td>
<td>A</td>
<td>N/A</td>
</tr>
<tr>
<td>5. Observe allergy immunotherapy and immunotherapy</td>
<td>1</td>
<td>A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Competency-Medical Knowledge</th>
<th>Learning Venues</th>
<th>Evaluation Methods</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demonstrate knowledge of the established basic biomedical and clinical sciences relevant to allergy and immunology</td>
<td>1,2</td>
<td>A,B,</td>
<td>N/A</td>
</tr>
<tr>
<td>Understand and interpret pulmonary function tests</td>
<td>1,2</td>
<td>A,B,</td>
<td>N/A</td>
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<tr>
<td>Understand the treatment of anaphylaxis</td>
<td>1,2</td>
<td>A,B,</td>
<td>N/A</td>
</tr>
<tr>
<td>Understand the diagnosis and treatment of asthma</td>
<td>1,2</td>
<td>A,B,</td>
<td>N/A</td>
</tr>
<tr>
<td>Understand the diagnosis and treatment of allergic rhinitis</td>
<td>1,2</td>
<td>A,B,</td>
<td>N/A</td>
</tr>
<tr>
<td>Understand the diagnosis and treatment of urticaria</td>
<td>1,2</td>
<td>A,B,</td>
<td>N/A</td>
</tr>
<tr>
<td>Understand the diagnosis and treatment of drug reactions</td>
<td>1,2</td>
<td>A,B,</td>
<td>N/A</td>
</tr>
<tr>
<td>Understand the diagnosis and treatment of stinging insect reactions</td>
<td>1,2</td>
<td>A,B,</td>
<td>N/A</td>
</tr>
<tr>
<td>Understand the initial evaluation of immunodeficiency states</td>
<td>1,2</td>
<td>A,B,</td>
<td>N/A</td>
</tr>
<tr>
<td>Understand the interpretation of allergy skin testing</td>
<td>1,2</td>
<td>A,B,</td>
<td>N/A</td>
</tr>
<tr>
<td>Competency-Interpersonal Communication Skills</td>
<td>Learning Venues</td>
<td>Evaluation Methods</td>
<td>Level</td>
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<tr>
<td>Understand the pathophysiology and administration of allergen immunotherapy</td>
<td>1,2</td>
<td>A,B</td>
<td>N/A</td>
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<tr>
<td>Competency-Professionalism</td>
<td>Learning Venues</td>
<td>Evaluation Methods</td>
<td>Level</td>
</tr>
<tr>
<td>Treat team members, primary care-givers, and patients with respect and empathy</td>
<td>1,3</td>
<td>A,B</td>
<td>N/A</td>
</tr>
<tr>
<td>Competency-Practice-Based Learning</td>
<td>Learning Venues</td>
<td>Evaluation Methods</td>
<td>Level</td>
</tr>
<tr>
<td>Describe two improvements in care from prior practice to attending allergist</td>
<td>1,2</td>
<td>A</td>
<td>N/A</td>
</tr>
<tr>
<td>Competency-Systems-Based Practice</td>
<td>Learning Venues</td>
<td>Evaluation Methods</td>
<td>Level</td>
</tr>
<tr>
<td>Learn effective and appropriate office practice management relevant to allergy and immunology</td>
<td>1</td>
<td>A, B</td>
<td>N/A</td>
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EVALUATION

A. Of Fellows
At the completion of each rotation, all clinical faculty are required to complete the standard ABIM resident evaluation form. All clinical faculty are encouraged to provide face-to-face feedback with the fellows/residents. In addition, fellows/residents may receive interim feedback utilizing the ABIM's Praise and Early Warning cards.

B. Of Rotation and Preceptor
All fellows are encouraged to evaluate the rotation, and the clinical faculty member at the completion of the rotation. This evaluation form is included at the end of this document. These evaluations are then converted to type and shared anonymously with the clinical faculty.

The program director also discusses the rotation with the fellows to ensure rotation quality and satisfaction.