المجلس العماني للاختصاصات الطبية
Oman Medical Specialty Board

Program-Relevant Information for Training Sites
Pediatrics Residency Training Program

Instruction: Please fill out the form thoroughly. Make the most of the "Comments" column to provide additional details on the answers given.

Institution: **Date:**

Department Name:

Note: Information provided must be about program-specific advanced specialty requirements:

A. Pediatric Specialty Resources	Y	N	NA	Number	Comments
In-Patient Beds	☐	☐	☐		
Daycare Beds	☐	☐	☐		
Intensive Care Beds	☐	☐	☐		
Neonatal Beds	☐	☐	☐		
Outpatient Clinics	☐	☐	☐		
Subspecialty Clinics	☐	☐	☐		
Handover Process	☐	☐	☐		
Average Length of Stay:					
• General Wards					
• NICU					
• PICU					
Average Occupancy Rate:					
• General Wards					
• NICU					
• PICU					
Mortality Rate:					
• General Wards					
• NICU					
• PICU					

B. Pediatric Specialty Workload	Y	N	Number	Comments
General and Subspecialty (specify the number of cases in the last 12 months)				
• General Pediatrics	☐	☐		
• Neonatology	☐	☐		
• Pediatric Intensive Care	☐	☐		
• High-Dependency	☐	☐		
• Pediatric Emergency	☐	☐		
• Ambulatory Pediatrics	☐	☐		
• Adolescent Medicine	☐	☐		
• Pediatric Cardiology	☐	☐		
• Immunology and Allergy	☐	☐		
• Developmental Pediatrics	☐	☐		
• Endocrinology	☐	☐		
• Gastroenterology	☐	☐		
• Genetics	☐	☐		
• Hematology-Oncology	☐	☐		
• Infectious Disease	☐	☐		
• Metabolic	☐	☐		
• Nephrology	☐	☐		
• Neurology	☐	☐		
• Respiratory	☐	☐		
• Rheumatology	☐	☐		
• Child Protection	☐	☐		
• Pediatric Surgeries	☐	☐		
Equipment (Y/N) / Procedures (specify the number of procedures performed in the last 12 months)				
• Electroencephalogram	☐	☐		
• Electromyogram	☐	☐		

B. Pediatric Specialty Workload	Y	N	Number	Comments
• Echocardiogram	☐	☐		
• Pulmonary Function Test	☐	☐		
• Bronchoscopy	☐	☐		
• Endoscopy	☐	☐		
• Cardiac Catheter	☐	☐		
• Nerve Conduction Studies	☐	☐		
• Sleep Studies	☐	☐		
• Developmental Screening	☐	☐		
• Procedural Sedation	☐	☐		
• Comprehensive Laboratory Services	☐	☐		
• Comprehensive Diagnostic Imaging Services	☐	☐		

C. Pediatric Human Resources	Y	N	NA	Comments
• Senior Consultants/Consultants	☐	☐	☐	
• Senior Specialists/Specialists	☐	☐	☐	
• Senior House Officers/Medical Officers	☐	☐	☐	
• Specialized Nurses	☐	☐	☐	
Certified Subspecialized Staff				
• Neonatology	☐	☐	☐	
• Pediatric Intensive Care	☐	☐	☐	
• Pediatric Emergency	☐	☐	☐	
• Adolescent Medicine	☐	☐	☐	
• Pediatric Cardiology	☐	☐	☐	
• Immunology and Allergy	☐	☐	☐	
• Developmental Pediatrics	☐	☐	☐	
• Endocrinology	☐	☐	☐	

C. Pediatric Human Resources	Y	N	NA	Comments
• Gastroenterology	☐	☐	☐	
• Genetics	☐	☐	☐	
• Hematology-Oncology	☐	☐	☐	
• Infectious Disease	☐	☐	☐	
• Metabolic	☐	☐	☐	
• Nephrology	☐	☐	☐	
• Neurology	☐	☐	☐	
• Respiratory	☐	☐	☐	
• Rheumatology	☐	☐	☐	
• Child Protection	☐	☐	☐	
• Palliative Care	☐	☐	☐	
• Pediatric Radiology	☐	☐	☐	
• Pediatric Surgery	☐	☐	☐	
• Pediatric Dermatology	☐	☐	☐	
• Pathology	☐	☐	☐	
• Child and Adolescent Psychiatry	☐	☐	☐	
• Neurodevelopmental Disabilities	☐	☐	☐	
• Pediatric Anesthesiology	☐	☐	☐	
• Pediatric Dentistry	☐	☐	☐	
• Pediatric Ophthalmology	☐	☐	☐	
• Pediatric Orthopedic Surgery	☐	☐	☐	
• Pediatric Otolaryngology	☐	☐	☐	
• Pediatric Rehabilitation Medicine	☐	☐	☐	
Other Allied Health Staff				
• Pharmacists	☐	☐	☐	
• Dietitians	☐	☐	☐	

C. Pediatric Human Resources	Y	N	NA	Comments
• Social Workers	☐	☐	☐	
• Child Life Therapists	☐	☐	☐	
• Psychologists	☐	☐	☐	
• Respiratory Therapists	☐	☐	☐	
• Physical Therapists	☐	☐	☐	
• Occupational Therapists	☐	☐	☐	
• Speech And Language Therapists	☐	☐	☐	
• Others, please specify:				

D. Accessibility of Departmental Educational Facilities and Teaching Resources to Trainees	Y	N	NA	Number	Comments
On-Call Rooms	☐	☐	☐		
Trainees' Lounges	☐	☐	☐		
Paging and Communication System	☐	☐	☐		
Internet and Wireless Connection	☐	☐	☐		
Computers and Workstations	☐	☐	☐		
Teaching/Conference Rooms Equipped with Audiovisual Aids (Computers, Projectors, etc.)	☐	☐	☐		
Availability of Library Resources					
▪ Specialty Books (Print and/or Electronic)	☐	☐	☐		
▪ Specialty Journals (Print and/or Electronic)	☐	☐	☐		
▪ Educational Software/Databases	☐	☐	☐		
▪ E-Libraries	☐	☐	☐		
Trainees' Access to Other Departmental Facilities and Services?	☐	☐	☐		

E. Pediatric-Specific Academic and Quality Assurance Activities	Y	N	NA	Frequency	Comments
Morning Meetings	☐	☐	☐		
Ward Rounds	☐	☐	☐		
Grand Rounds	☐	☐	☐		
Journal Clubs	☐	☐	☐		
Bedside Teachings	☐	☐	☐		
Department Lectures/Didactics	☐	☐	☐		
Academic/Teaching Days	☐	☐	☐		
Specialty Workshops	☐	☐	☐		
Mock Simulation Sessions	☐	☐	☐		
Mortality and Morbidity Rounds/Meetings	☐	☐	☐		
Interdepartmental Meetings	☐	☐	☐		
Audits	☐	☐	☐		
Peer Review Publications	☐	☐	☐		
Patient Safety Monitoring	☐	☐	☐		
QA Activities, please specify					
Other activities, please specify					

F. Other Resources Relevant to Training and Education:

Approved by:

(Name of HoD)		
Head of Department / Representative	**Signature**	**Date**