

Line No. 1	Pediatric Intensive Care Training Program Accreditation Rules updated 21-02-2024		
2	FELLOWSHIP ACCREDITATION	Indian Diploma in Pediatric Critical Care Medicine (IDPCCM)	Indian Fellowship in Pediatric Critical Care Medicine (IFPCCM)
3	Responsibility	Accreditation Committee of the College Council	
4	Appeals re Accreditation - deciding authority	IAP-Intensive Care Chapter College Council and Vice Chancellor	
5	Length of existence of PICU prior to accreditation	1 year	2 years of IDPCCM; atleast 50% of Fellows who took IDPCCM exam should have passed
6	Level of PICU	Level 3, Accredited by IAP-PIC College Council	
7	Institute bed strength	Part of Multispecialty Hospital of > 150 beds OR standalone Pediatric Hospital > 50 beds	
8	PICU beds	Minimum 8 beds for a teaching programme	
9	Minimum yearly PICU Admissions	200	300
10	Case mix	Unit should have a good case mix of all specialties. No single specialty should exceed 50% of cases. Neonatal admissions cannot be included	
11	Minimum number of invasively ventilated patients per year	50 The Unit should Maintain separate records for invasive ventilation, NIV and HFNC	75 The Unit should Maintain separate records for invasive ventilation, NIV and HFNC
12	Minimum invasive ventilator days per year	150	250
13	Minimum number of Central Venous Catheters inserted during the previous year (Note: Central Venous Catheter includes CVC and Hemodialysis/Plasma Exchange catheters)	25	40
14	Minimum number of Arterial Catheters inserted during the previous year	25	40
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16	Minimum number of patients who underwent Renal Replacement Therapy during the previous year (Note: RRT includes PD, HD, SLED and CVVH)	4	4
17	Availability of bedside Ultrasound	Highly desirable	Mandatory
18	Library	Standard PIC books required; internet access; Journal of Pediatric Critical Care subscription required; library to be accessible atleast 12 hrs/day	
19	Teleconferencing facilities	Two-way videoconferencing facility desirable	
20	Unit Accreditation fees	Rs. 25,000 for new unit to be paid to Chapter. Rs 5,000 honorarium to be paid to each Inspector by the Chapter. The applying Unit/Hospital also has to bear the Travel and local hospitality expenses for the Inspectors. At least 2 Inspectors to be deputed, one of who must be out-station. Inspectors will be chosen from the Examiners pool.	
21	Non-teaching Unit Accreditation fees (for being certified Level 2/3)	Non-teaching unit accreditation fee Rs.20,000. Rs 5,000 honorarium to be paid to each Inspector by the Chapter. If a non-teaching unit later wishes to convert into a teaching unit (satisfying the criteria) within one calendar year, they should pay an additional Rs. 5,000 - fresh inspection will be at the discretion of the Accreditation Committee and VC. After one calendar year, they will have to submit a fresh application and pay Rs. 25,000. A fresh inspection will be required.	
22	Who can be a Program Director	Programme Director to be deputed by the Institute - he/she will be a single point of contact for all Fellowship related matters. He/she should be a recognized Teacher	
23	Accreditation Letter	Accreditation letter and Certificate will be sent by the College VC, or his designate	
24	Duration of Accreditation	5 years (whether fresh of after reaccreditation)	
25	Vacant Seats	Vacant seats from July session can be carried forward to the January session. Vacant seats from the January session cannot be carried over.	
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27	Number of seats	Minimum 2, Maximum 8 total at any given time; See Appendix 1 attached for details of numbers of seats that can be allotted	
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29	Medical Staffing Requirement		
30	Consultants	Minimum 2 Consultants, of whom atleast one should be a Full Time Accredited Teacher. The second Consultant can be a part-time person, including Consultants from allied specialties such as Adult ICU, Anesthesiology, Pediatric Pulmonology, Neonatology, or Pediatric Emergency Medicine	Minimum TWO Full Time accredited Teachers
31	Can a Consultant in an allied specialty (such as Anesthesia, adult Critical Care, Pediatric Pulmonology / Emergency Medicine / Neonatology etc. be a Full Time Accredited Teacher?	NO. Such persons can be shown as Part Time Consultants only	
32	Can Unit Director head other teaching programs (Neonatology, Neurology, Nephrology, Pulmonology etc.)	The Program Director cannot be shown as the Program Head of teaching programs in other sub-specialties (Neonatology, Neurology, Nephrology, Pulmonology etc.). A declaration to this effect should be included in the Accreditation / Reaccreditation application	
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34	Trainees		
35	Enrollment	Twice a year, 1st July (1st session) and 1st January (2nd session)	
36	Eligibility	MCI recognized MD/DNB/DCH/MRCPCH Pediatrics (course duration 1 year extra for DCH AND MRCPCH)	
37	Selection	Based on direct application to Program Director and Interview	Based on direct application to Program Director and Interview
38	Trainee Enrollment Fee	Rs. 15,000	Rs. 20,000

39	Overseas trained candidates	Yes, with MCI permission. Admission left to discretion of individual institute. No qualifying exam required	
40	Capitation fee / Security deposit / Fixed Deposit etc.	Not to be levied	
41	Can institute charge a Tuition fee?	As per Institute policy; fee cannot exceed National Board norms for candidates of the same seniority	
42	Stipend	As per Institute policy	
43	Accommodation	Desirable but not mandatory	
44	Leave	As per Institute policy	
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46	Periodic assessment of trainees	To be carried out by Institute at least once a year. Assessment of all candidates in a single city or geographic area may be conducted together for ease of administration	
47	Can Trainee register simultaneously for any other training program in Pediatric Intensive Care (e.g. DNB)	NO	
48	Can IDPCCM candidate continue as IFPCCM student	No candidate can register simultaneously for both IDPCCM and IFPCCM. However, IDPCCM candidates can continue as IFPCCM, subject to approval by both their Program Director and the Vice Chancellor. They will have to pass the IDPCCM exam before continuing. If they pass the IFPCCM exam, then they will be awarded only the IFPCCM Certificate - the IDPCCM certificate will be withdrawn.	
49	Can a IFPCCM candidate convert to IDPCCM?	Can be allowed in exceptional circumstances, subject to approval of both their Program Director and the Vice Chancellor	
50	ISCCM membership	Desirable, but not mandatory	
51	IAP membership	Essential	
52	IAP-PICC membership	Essential	
53	Publication requirement	Desirable but not mandatory	
54	Examination fee	Rs. 10,000	Rs. 15,000
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56	TEACHER ACCREDITATION	
57	Indian trained intensivists	Must successfully complete and pass exit exam for IDPCCM/IFPCCM/ FNB or DNB Ped Crit Care / DM Ped Crit Care; Should have worked for 3 years in a PICU that satisfies Level 3 College criteria, from the start of training.
58	Practicing Indian intensivists without formal training	Should have worked as an Intensivist for a minimum 5 years in a PICU that satisfies Level 3 College criteria. Candidate to submit names of two College Teachers as referees, who will be asked by the College to provide a reference
59	Foreign trained intensivists	
60	a. with exit exam OR formal certification	Those who have trained in Pediatric Intensive Care for at least three years and have qualified with certification OR exit examination shall be granted accreditation as teachers. Training can include PICU, Pediatric Cardiac ICU, Pediatric Neurocritical care and Pediatric Transport. Neonatology training not to be included
61	b. with or without exit exam, but has worked as Consultant	Those who have been appointed / worked as Consultants in Pediatric Critical Care abroad are can be granted accreditation as Teachers, after approval by the College Accreditation Committee
62	c. without formal certification / exit exam	Should have worked for a minimum of three years in a Pediatric ICU at a level of Registrar or above. Two references from the place of work should be sought and found suitable by the College Accreditation Committee
63	Equivalence exam	Anyone who has worked abroad in Ped. Intensive Care but does not fit into one of the three criteria given above will have to appear for an Equivalence Exam, which will be conducted periodically as required

64	General points regarding Teacher accreditation (applicable to all applicants)		
65	Qualifications	Basic PG qualification should be in Pediatrics and recognized by the MCI	
66	Work pattern	Primary teacher must be full time	
67	Time spent in critical care	Devote at least 50% of time to care of Critically Ill patients	
68	Can person apply for Teacher accreditation independent of Unit accreditation	Yes	
69	Fees	Nil	
70	Appeals regarding Teachership	IAP-Intensive Care Chapter College Council and Vice Chancellor	
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72	UNIT REACCREDITATION		
73	Period of Accreditation	Initial accreditation of a NEW UNIT is for 5 years. Program Director must then submit a Reaccreditation Form and a physical inspection will be conducted. Subsequent accreditation will be for 5 years.	
74	Reaccreditation fees	Rs. 25,000 to be paid to Chapter. The applying Unit/Hospital also has to bear the Travel and local hospitality expenses for the Inspector(s). Rs. 5,000 honorarium will be paid by the Chapter to each Inspector.	
75	Fellows enrolment criteria	Atleast 1 trainee should have been recruited in the previous 2 years	
76	Fellows pass criteria	At least 50% of Fellows who appeared for exam during the 5 years from the initial accreditation / last reaccreditation must have passed. Any Unit that is derecognized can reapply after a gap of 1 year - this will be treated as a Fresh application.	
77	What happens to existing Fellows if a Unit loses accreditation	Existing Fellows will be allowed to complete their period of training and appear for the exam. However, the Unit cannot accept any fresh trainees until it is successfully accredited again	

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79	INCREASE IN NUMBER OF ALLOTTED SEATS		
80		Increase in the number of allotted IDPCCM/IFPCCM seats (if eligible) is generally done at the time of Reaccreditation. If a Unit wishes to apply for increasing the number of allocated seats before the next scheduled Reaccreditation process, it can be considered, subject to the following rules:	
81		1. The respective program (IDPCCM/IFPCCM) should have been existence for at least TWO years	
82		2. The request to increase seats should be made at least TWO years after the initial accreditation, or most recent reaccreditation	
83		3. At least 2 Fellows should have appeared for the Exam in the previous 2 years, and at least 50% of those who appeared should have passed	
84		4. The increase in allocated seats will be subject to the existing rules regarding allowable seats, based on the number of Teachers, annual admissions, invasively ventilated patients, and other applicable criteria	
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86	WHAT HAPPENS IF TEACHERS LEAVE A UNIT		
87	What happens when one or more Teachers leave a Unit, and no suitable replacements are appointed	<p>1. The Unit should inform the College whenever an existing Teacher leaves the Institute, or a new Teacher is appointed. This responsibility lies with the Fellowship Program Director of the Unit.</p> <p>If one or more Teachers leave, then the existing Fellows will be allowed to complete their training in the same Institute provided that at least one accredited Teacher is available</p>	

88		2. If the existing number of teachers reduces, the number of allocated seats will be reduced, based on the existing rules governing the number of Teachers required. This will come into effect from the start of the next session of intake.
89		3. If all Teachers leave the Unit, then the Fellows will have to be transferred to another suitable accredited program and complete the remaining period of their training. The responsibility of doing this should be with the Fellowship Program Director and the College will facilitate such transfer of the trainee and will allow the trainee to join the accepting Unit as a supernumerary candidate.

APPENDIX I to Accreditation Criteria 21-02-2024

Fellowship seat allotment criteria

Number of Full Time Accredited Teachers	Minimum yearly PICU admissions	Minimum invasively ventilated patients / year	Seats per year	Maximum number of Fellows at any given time (IDPCCM + IFPCCM)
1 (+ 1 part time Consultant)	200	50	2	2
2	200	50 (75 for IFPCCM)	2	4
3	300	100	3	6
≥ 4	≥ 400	≥ 150	4	8

PROCEDURE FOR FILLING VACANT SEATS

- a. If a particular Fellow does not join, or discontinues within 3 months of joining, the vacancy can be filled by another candidate, subject to the rules stated in section “b” below.
- b. All seats for a particular intake session have to be filled within three months of the start of the session. Subsequently, these seats will be carried over to the next session within the same Academic year. The Academic Year will run from July 1st to June 30th, with 1st session starting July 1 and the second session starting January 1. Therefore, seats for the July session that are unfilled by 30 September will get carried over to the January session. Seats for the January session remaining unfilled after March 31 *will not* be carried over to the next Academic year.