

**NEW GME  
COORDINATOR  
ORIENTATION**

**RESIDENT = INTERN**

**RESIDENT = RESIDENT**

**RESIDENT = FELLOW**

# GME DUAL RESPONSIBILITIES

## RESIDENTS

- Includes interns, residents, and fellows
- Credentialing before start date
- HR assistance: benefits, payroll
- Maintaining compliance during training
- Assisting with licensing
- Loan deferments
- Assisting with pager problems
- Notary public services
- Providing on-call meal money
- Monitoring rotations
- Assisting with computer problems
- Monitoring delinquent medical records
- Approving visiting housestaff

## PROGRAMS

- Oversee accreditation requirements; notify programs of changes or new requirements
- Internal reviews
- Approval of program changes
- Monitoring work hours compliance
- Monitoring training agreements
- Monitoring department policies
- Program rounds
- Oversee/collect ACGME fees
- Obtain resident PAN forms
- Obtain resident contracts
- New Program Director orientations
- Assist with site visits

**ONE OF THE MOST IMPORTANT  
DUTIES OF THE GME OFFICE  
IS TO ENSURE THAT ALL NEW HIRE RESIDENTS**

**ARE**

**FULLY**

**CREDENTIALLED**

**BEFORE**

**WORKING!**

# What does the GME Office mean when they say someone is “fully credentialed?”

Full credentialing must include:

- Primary source verification of medical school graduation
- Primary source verification of all prior training
- Primary source verification of all prior employment
- Primary source verification of ECFMG certification
- Primary source verification of any licenses in other states
- Security background check
- Report from the National Practitioner Data Bank
- Medicare/Medicaid Sanctions List Clearance
- Immunization records approved by Employee Infection Control
- Proof of passing scores on USMLE exams
- Proof of ACLS certification
- Proof of completion of on-line HIPAA training
- Proof of completion of on-line Safety CAT training
- Satisfactory pre-employment drug screen

# **RESIDENT RESPONSIBILITIES**

- Provide GME with necessary information to be credentialed**
- Take required exams on time and provide scores to GME**
- Maintain current ACLS certification (if required) and provide card to GME**
- Maintain current TB skin test annually and provide to GME**
- Complete Utah medical license application materials by deadline and become licensed as required by department by deadline**
- Provide GME with copies of all licenses**
- Renew all licenses as needed and provide GME with current copies**
- Report elective rotations to department in a timely manner (before the rotation begins)**
- Report vacation and other leave days to department in a timely manner**
- Report to department and GME any address/phone/pager/email changes**
- Check email regularly**
- Generally be good, meet program standards of performance, follow the rules, and work and play well with others**

# PROGRAM RESPONSIBILITIES

**☐ACGME requires all program structure and dynamics to be approved by the Graduate Medical Education Committee FIRST . . .**

**New programs**

**Program size change**

**New rotations**

**New training sites**

**New program director**

**Change in program curriculum**

**☐ACGME and MEDICARE require a written training agreement for every rotation site; these must be approved by GME and copies housed in the GME Office—we'll talk more about training agreements later in this session**

**☐ACGME requires every program to have certain specific policies, to be updated annually; GME will send reminders, approve content of policies, and keep copies in the GME Office**

**\*\*Work Hours, Supervision, and Moonlighting must be finalized and approved by March 31**

**\*\*Standards of Performance, Evaluation, Academic Action, Resident Selection, Leave, Dress Code, and Technical Standards must be finalized and approved by June 30**

**☐Internal Reviews are done by the GME Office between site visits; programs are required to participate and provide required documentation for completion of Internal Reviews**

**☐Site Visits (by ACGME for accreditation): GME will assist with site visit preparation and should review PIF before submission**

# **MORE PROGRAM RESPONSIBILITIES**

**☐ ROTATION SCHEDULES:** Provide the GME Office with a full annual rotation schedule for each resident in your program by the required date—usually May 31 for the following academic year . . .

-Each resident's full name

-Every rotation period

-Rotation description, with a key explaining any abbreviations or codes

-Location for every rotation

(a good rotation format sample is included in your handout)

**☐ ROTATION SCHEDULE CHANGES:** Respond to monthly mailings from GME and provide information about rotation changes, vacations, didactic days, other leave

**☐ ELECTIVE ROTATIONS:** Provide information to GME about electives in a timely manner; **this requires keeping track of your residents;** information is needed at the time of the monthly change reports

**☐ OFFSITE ROTATIONS:** ACGME and MEDICARE require Offsite Training Agreements for every offsite rotation, to be completed and signed **BEFORE** the beginning of the rotation; **this requires keeping track of your residents;** training agreements are needed **BEFORE** the beginning of the rotations. **LIABILITY INSURANCE IS NOT PROVIDED FOR OUT-OF-STATE ROTATIONS!**

# **MORE PROGRAM RESPONSIBILITIES**

**☐ VISITING HOUSESTAFF:** If your program accepts visiting housestaff, approvals and training agreements **MUST** be completed and signed and on file in the GME Office **BEFORE** the visiting resident arrives and begins rotating. Call the GME Office for Visiting Housestaff Packets and to prepare training agreements correctly

**☐ ASSISTANCE WITH RESIDENT CREDENTIALING AND COMPLIANCE:** Residents delinquent in providing credentialing or compliance information cannot rotate and may be subject to other disciplinary action. Programs will be contacted to assist in these matters.

**☐ PROGRAM REQUIREMENTS:** Each program has very specific ACGME accreditation requirements. Programs are responsible for knowing their requirements. These are published on the web at [www.acgme.org](http://www.acgme.org)

**☐ MISCELLANEOUS REPORTING RESPONSIBILITIES:** At various times the GME Office needs information from departments . . .

**On-call meal money lists**

**PAN forms/spreadsheets**

**Work hours reports**

**Applications report**

**Housestaff contracts**

**ACGME annual fees information**

**☐ ATTEND RETREATS AND TAKE-A-BREAK TRAINING SESSIONS!**

**IN YOUR HANDBOOK  
ARE SOME SAMPLE DOCUMENTS**

*(check your agenda for page numbers to refer to these documents)*

**VISITING HOUSESTAFF**

**MUST HAVE AN APPROVAL FORM**

**MUST HAVE A TRAINING AGREEMENT**

**ALL BEFORE VISITING ROTATION(S) BEGIN**

**•OFF-SITE TRAINING AGREEMENTS MUST BE COMPLETED BEFORE OFF-SITE ROTATIONS BEGIN**

**•MONTHLY ROTATION SCHEDULE—PLEASE SEE SAMPLE CHANGES THAT HAVE BEEN MADE. NEED TO BE RETURNED PROMPTLY TO THE GME OFFICE!**

# **KNOW THE HOUSESTAFF POLICY MANUAL!**

**•Access it through our web site or go to it directly online**

**<http://med.utah.edu/gme/policies>**

**or**

**<http://uuhsc.utah.edu/som/education/gme/policies>**

***BOOKMARK THE SITE AND USE IT!***

**•Some especially important policies to be familiar with . . .**

**Eligibility and Credentialing**

**Medical Licensing**

**Resident Evaluation**

**Housestaff Due Process**

**Resident Work Hours**

**Credentialing Process**

**Leave and Family Medical Leave**

**Offsite Liability Coverage**

**Housestaff Counseling Programs**

**Clinical Observer Policy**

**•Most current policies will always be posted online**

**HOW  
ARE  
YOUR  
RESIDENTS  
FUNDED?**

# WHERE DOES THE \$\$\$ COME FROM?

## **I**

### **HOSPITAL BUDGETS**

**UNIVERSITY HOSPITAL**

**LDS HOSPITAL**

**PCMC**

**VA HOSPITAL**

**SLRMC**

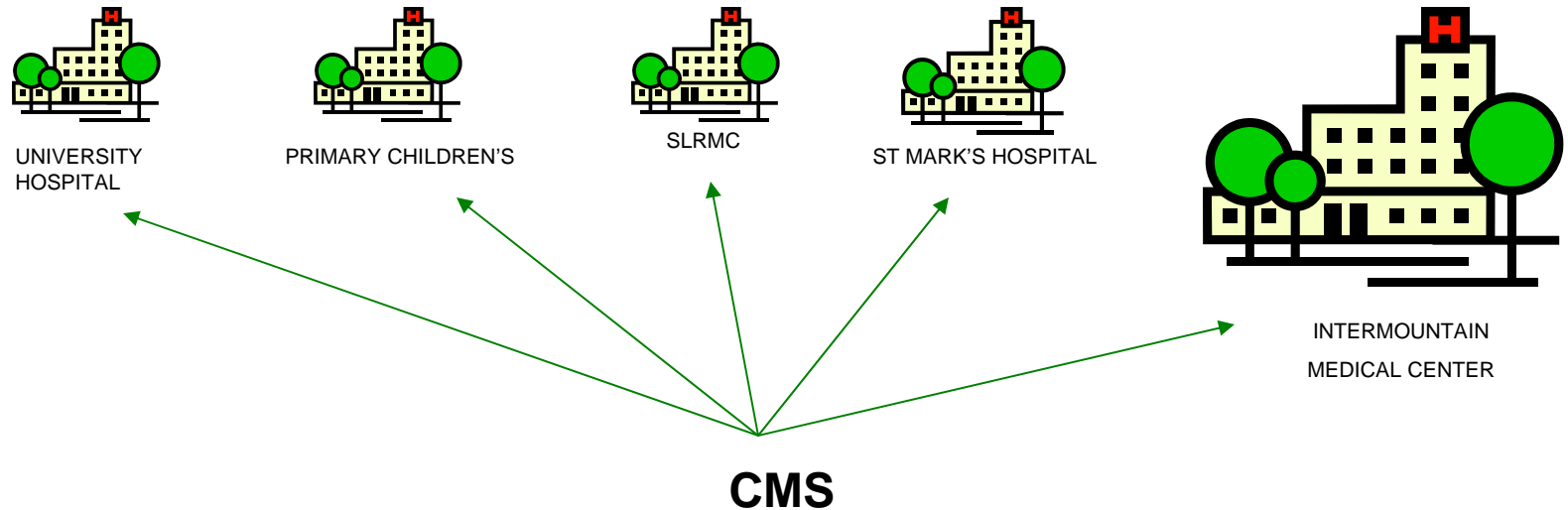
**ST MARKS HOSPITAL**

## **II**

### **CLINICAL FUNDS**

### **DEPARTMENT BUDGETS**

# WHERE DO THE HOSPITALS GET MONEY TO BUDGET FOR RESIDENT SALARIES/COSTS??



Centers for Medicare and Medicaid Services (formerly HCFA)

**CMS (or the Federal Government) pays hospitals to train residents; it is a subsidy to assist in growing doctors for United States medical care needs!**

- CMS pays hospitals for every resident who physically rotates at that hospital
- Each hospital must prepare a report at the end of the year to provide CMS with all necessary information
- University Hospital prepares a master report of all our residents based on your rotation schedules; we then provide the information to each of the hospitals

## **HYPOTHETICAL FUNDING FOR ONE OF OUR PROGRAMS . . .**

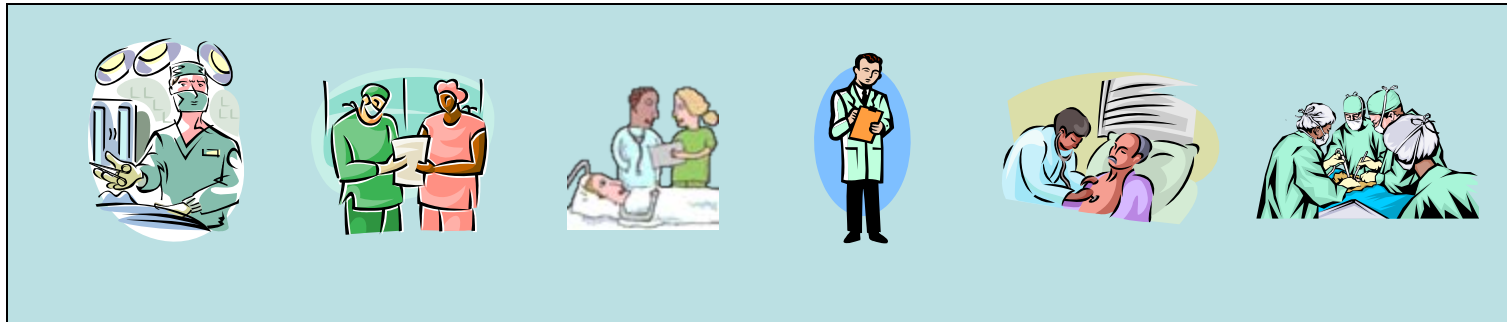
*We'll look at a hypothetical program that has 119 hypothetical residents*

1. At the beginning of the year, Judi is told by Hospital administration that there is enough money in the budget to pay for 65 of those residents
2. That leaves 54 residents who must be paid outside the Hospital budget
3. Judi advises the program of the amount of Hospital funding and asks for confirmation of the other funding
4. Program Directors must arrange for an adequate number of rotations in other hospitals and negotiate with those other hospitals to pay for the residents who rotate there
- 5. HENCE – TRAINING AGREEMENTS!!!**
6. So, hypothetically, the 54 unfunded residents will rotate at other hospitals that have agreed to pay for them; at the end of each month, we bill each of those hospitals for resident services, and . . .

***HYPOTHETICALLY, WE HAVE ENOUGH \$\$ TO PAY ALL OUR RESIDENTS!***

# NOW . . .

WE HAVE 119 RESIDENTS ROTATING HERE AND THROUGHOUT THE CITY/STATE AT VARIOUS LOCATIONS . . .



ALL RESIDENTS ARE ROTATING AT SCHEDULED LOCATIONS

THERE ARE TRAINING AGREEMENTS COMPLETE FOR ALL LOCATIONS

SO ALL RESIDENTS ARE FULLY FUNDED

HYPOTHETICALLY!



**IT IS NOW JULY 1**

**WE NOW LOOK BACK ON THE PRECEDING YEAR  
AND PREPARE OUR CMS COST REPORT FOR  
SUBMITTING TO OUR GOVERNMENT  
ACCOUNTING OFFICE**

**THE REPORT CONSISTS OF**

- ✓ **EVERY RESIDENT WITH ANY ROTATION DURING THE YEAR**
- ✓ **EVERY ROTATION FOR EVERY RESIDENT**
- ✓ **ROTATIONS MUST = 365 DAYS FOR EVERY RESIDENT**
- ✓ **A LOT OF OTHER DETAILED INFORMATION**

**OUR REPORT THIS YEAR WAS A SPREADSHEET  
WITH 26 COLUMNS AND MORE THAN 14,000 LINES**

# PUT ON YOUR GLASSES, LOOK AT THIS EXAMPLE, AND LET'S SEE WHAT CMS WILL PAY

SSN	Last	First	Deg	Lev	Prog	HCF#	Year	Loc	Payor	%	Area	Begin	End	VacBeg	VacEnd	Medical School	HCF#	Grad Date	Hire Dt	IMP	HCF#	ECFMG#	CFMG Type	Comments	
514-88-5308	Chang	Kathy	M.D.	3	OM	2152	2005	OS	UH	1	CHEV/TEXAS	12/1/2004	12/26/2004			University of Kansas Scf	1902	05/23/1999	8/18/2003	GS	2450		O	Two years only of General Surgery Elsewhere; pd 53% on grant	
514-88-5308	Chang	Kathy	M.D.	3	OM	2152	2005	UH		1	RESEARCH	12/27/2004	12/31/2004			University of Kansas Scf	1902	05/23/1999	8/18/2003	GS	2450		P	Two years only of General Surgery Elsewhere; pd 53% on grant	
514-88-5308	Chang	Kathy	M.D.	3	OM	2152	2005	VA		1	RESEARCH	1/1/2005	3/31/2005			University of Kansas Scf	1902	05/23/1999	8/18/2003	GS	2450		P	Two years only of General Surgery Elsewhere; pd 53% on grant	
514-88-5308	Chang	Kathy	M.D.	3	OM	2152	2005	VA		1	OM CLINICS	1/10/2005	1/23/2005			University of Kansas Scf	1902	05/23/1999	8/18/2003	GS	2450		P	Two years only of General Surgery Elsewhere; pd 53% on grant	
514-88-5308	Chang	Kathy	M.D.	3	OM	2152	2005	VA		1	RADIOLOGY	1/24/2005	1/31/2005			University of Kansas Scf	1902	05/23/1999	8/18/2003	GS	2450		P	Two years only of General Surgery Elsewhere; pd 53% on grant	
514-88-5308	Chang	Kathy	M.D.	3	OM	2152	2005	VA		1	RADIOLOGY	2/1/2005	2/13/2005			University of Kansas Scf	1902	05/23/1999	8/18/2003	GS	2450		P	Two years only of General Surgery Elsewhere; pd 53% on grant	
514-88-5308	Chang	Kathy	M.D.	3	OM	2152	2005	UH		1	OMC	2/14/2005	2/28/2005			University of Kansas Scf	1902	05/23/1999	8/18/2003	GS	2450		P	Two years only of General Surgery Elsewhere; pd 53% on grant	
514-88-5308	Chang	Kathy	M.D.	3	OM	2152	2005	UH		1	OMC	3/1/2005	3/20/2005	3/18/2005	3/18/2005	University of Kansas Scf	1902	05/23/1999	8/18/2003	GS	2450		P	Two years only of General Surgery Elsewhere; pd 53% on grant	
514-88-5308	Chang	Kathy	M.D.	3	OM	2152	2005	UH		1	ORTH	3/2/2005	3/31/2005			University of Kansas Scf	1902	05/23/1999	8/18/2003	GS	2450		P	Two years only of General Surgery Elsewhere; pd 53% on grant	
566-94-3288	Campbell	Darren	MD	4	FAC/IML	FPSF	1352	2005	UH	1	SPORTS MED	8/1/2004	8/31/2004			Uniformed Services Univ	2312	05/17/1997	8/1/2004	FPS	1350		P	Started August 1, 2004	
566-94-3288	Campbell	Darren	MD	4	FAC/IML	FPSF	1352	2005	UH	1	SPORTS MED	9/1/2004	9/30/2004			Uniformed Services Univ	2312	05/17/1997	8/1/2004	FPS	1350		P	Started August 1, 2004	
566-94-3288	Campbell	Darren	MD	4	FAC/IML	FPSF	1352	2005	UH	1	SPORTS MED	10/1/2004	10/31/2004			Uniformed Services Univ	2312	05/17/1997	8/1/2004	FPS	1350		P	Started August 1, 2004	
566-94-3288	Campbell	Darren	MD	4	FAC/IML	FPSF	1352	2005	AOSM	UH	1	SPORTS MED	11/1/2004	11/30/2004			Uniformed Services Univ	2312	05/17/1997	8/1/2004	FPS	1350		R	Started August 1, 2004
529-37-2090	Empey	Joseph	M.D.	2	AN	1100	2005	UH		1	OR	3/1/2005	3/31/2005			George Washington Univ	1001	05/18/2003	6/24/2003	AN	1100		P	Internal Med internship here 6/24/03 to 6/30/04	
529-37-2090	Empey	Joseph	M.D.	2	AN	1100	2005	UH		1	OR	4/1/2005	4/3/2005			George Washington Univ	1001	05/18/2003	6/24/2003	AN	1100		P	Internal Med internship here 6/24/03 to 6/30/04	
529-37-2090	Empey	Joseph	M.D.	2	AN	1100	2005	UH		1	OR	4/4/2005	4/30/2005	4/18/2005	4/25/2005	George Washington Univ	1001	05/18/2003	6/24/2003	AN	1100		P	Internal Med internship here 6/24/03 to 6/30/04	
529-37-2090	Empey	Joseph	M.D.	2	AN	1100	2005	PC		1	OR	5/1/2005	5/29/2005			George Washington Univ	1001	05/18/2003	6/24/2003	AN	1100		P	Internal Med internship here 6/24/03 to 6/30/04	
529-37-2090	Empey	Joseph	M.D.	2	AN	1100	2005	UH		1	AMB CARE	5/30/2005	5/31/2005			George Washington Univ	1001	05/18/2003	6/24/2003	AN	1100		P	Internal Med internship here 6/24/03 to 6/30/04	
529-37-2090	Empey	Joseph	M.D.	2	AN	1100	2005	PC		1	OR	6/1/2005	6/30/2005	6/20/2005	6/26/2005	George Washington Univ	1001	05/18/2003	6/24/2003	AN	1100		P	Internal Med internship here 6/24/03 to 6/30/04	
362-94-3145	Gietzen	Roger	M.D.	4	N	1650	2005	UH		0.9	EEG	1/1/2005	1/31/2005	1/3/2005	1/4/2005	Wayne State University	2507	06/07/2001	7/1/2002	N	1650		P	Transitional Year Elsewhere	
362-94-3145	Gietzen	Roger	M.D.	4	N	1650	2005	VA		0.1	EEG	1/1/2005	1/31/2005			Wayne State University	2507	06/07/2001	7/1/2002	N	1650		P	Transitional Year Elsewhere	
362-94-3145	Gietzen	Roger	M.D.	4	N	1650	2005	UH		1	CONSULTS	2/1/2005	2/13/2005			Wayne State University	2507	06/07/2001	7/1/2002	N	1650		P	Transitional Year Elsewhere	
362-94-3145	Gietzen	Roger	M.D.	4	N	1650	2005	UH		1	PMR/ORTHO HOSP	2/14/2005	2/28/2005			Wayne State University	2507	06/07/2001	7/1/2002	N	1650		P	Transitional Year Elsewhere	
362-94-3145	Gietzen	Roger	M.D.	4	N	1650	2005	UH		1	EEG	3/1/2005	3/20/2005	3/9/2005	3/11/2005	Wayne State University	2507	06/07/2001	7/1/2002	N	1650		P	Transitional Year Elsewhere	
362-94-3145	Gietzen	Roger	M.D.	4	N	1650	2005	UH		1	CONSULTS	3/21/2005	3/25/2005			Wayne State University	2507	06/07/2001	7/1/2002	N	1650		P	Transitional Year Elsewhere	
362-94-3145	Gietzen	Roger	M.D.	4	N	1650	2005	UH		1	EEG	3/26/2005	3/31/2005			Wayne State University	2507	06/07/2001	7/1/2002	N	1650		P	Transitional Year Elsewhere	
493-92-3424	Greer	Erin	MD	6	FAC	ORHD	1852	2005	UH	0.35	ORTHO HAND	8/1/2004	8/31/2004			Baylor College of Medici	4804	05/25/1999	8/1/2004	ORS	1850		P	Started August 1, 2004	
493-92-3424	Greer	Erin	MD	6	FAC	ORHD	1852	2005	UH	0.35	ORTHO HAND	8/1/2004	8/31/2004			Baylor College of Medici	4804	05/25/1999	8/1/2004	ORS	1850		P	Started August 1, 2004	
493-92-3424	Greer	Erin	MD	6	FAC	ORHD	1852	2005	SH	0.25	ORTHO HAND	8/1/2004	8/31/2004			Baylor College of Medici	4804	05/25/1999	8/1/2004	ORS	1850		P	Started August 1, 2004	
493-92-3424	Greer	Erin	MD	6	FAC	ORHD	1852	2005	UH	0.35	ORTHO HAND	9/1/2004	9/30/2004			Baylor College of Medici	4804	05/25/1999	8/1/2004	ORS	1850		P	Started August 1, 2004	
493-92-3424	Greer	Erin	MD	6	FAC	ORHD	1852	2005	SH	0.25	ORTHO HAND	9/1/2004	9/30/2004			Baylor College of Medici	4804	05/25/1999	8/1/2004	ORS	1850		P	Started August 1, 2004	
529-57-6093	Gunther	Jonathan	MD	1	IM-P	1400	2005	VA		1	WARDS	7/1/2004	7/31/2004			Columbia University Coll	3501	05/19/2004	6/24/2004	IM-P	1400		P	Prelim year only	
529-57-6093	Gunther	Jonathan	MD	1	IM-P	1400	2005	VA		1	AMB CARE	8/1/2004	8/15/2004			Columbia University Coll	3501	05/19/2004	6/24/2004	IM-P	1400		P	Prelim year only	
529-57-6093	Gunther	Jonathan	MD	1	IM-P	1400	2005	LD		1	AMB CARE	8/16/2004	8/31/2004			Columbia University Coll	3501	05/19/2004	6/24/2004	IM-P	1400		P	Prelim year only	
529-57-6093	Gunther	Jonathan	MD	1	IM-P	1400	2005	LD		1	CCU	9/1/2004	9/30/2004			Columbia University Coll	3501	05/19/2004	6/24/2004	IM-P	1400		P	Prelim year only	
529-57-6093	Gunther	Jonathan	MD	1	IM-P	1400	2005	UH		1	WARDS	10/1/2004	10/31/2004			Columbia University Coll	3501	05/19/2004	6/24/2004	IM-P	1400		P	Prelim year only	
568-79-4817	Huang	Ivan	MD	6	OB-RE	NOT ACC	2005	UH		1	REI	7/1/2004	7/31/2004			Boston University Schoo	2405	5/1/1999	1/1/2004	OBG	1750				
568-79-4817	Huang	Ivan	MD	6	OB-RE	NOT ACC	2005	UH		1	RESEARCH/LAB	8/1/2004	8/31/2004			Boston University Schoo	2405	5/1/1999	1/1/2004	OBG	1750				
568-79-4817	Huang	Ivan	MD	6	OB-RE	NOT ACC	2005	UH		1	RESEARCH/LAB	9/1/2004	9/30/2004			Boston University Schoo	2405	5/1/1999	1/1/2004	OBG	1750				
568-79-4817	Huang	Ivan	MD	6	OB-RE	NOT ACC	2005	UH		1	RESEARCH/LAB	10/1/2004	10/31/2004			Boston University Schoo	2405	5/1/1999	1/1/2004	OBG	1750				
568-79-4817	Huang	Ivan	MD	6	OB-RE	NOT ACC	2005	UH		1	RESEARCH/LAB	12/1/2004	12/31/2004			Boston University Schoo	2405	5/1/1999	1/1/2004	OBG	1750				
281-06-7914	Ismail	Saleh	MD	4	IMPU	1414	2005	UH		1	CONSULT/ICU	12/16/2004	12/31/2004			Foreign Medical School	99999	06/2000	7/1/2004	IM	1400	0-600-64	1/18/2001	P	
281-06-7914	Ismail	Saleh	MD	4	IMPU	1414	2005	LD		1	STRUC	1/1/2005	1/31/2005			Foreign Medical School	99999	06/2000	7/1/2004	IM	1400	0-600-64	1/18/2001	P	
281-06-7914	Ismail	Saleh	MD	4	IMPU	1414	2005	UH		0.9	CONSULTS	2/1/2005	2/28/2005			Foreign Medical School	99999	06/2000	7/1/2004	IM	1400	0-600-64	1/18/2001	P	
281-06-7914	Ismail	Saleh	MD	4	IMPU	1414	2005	LD		0.5	CONSULTS	2/1/2005	2/28/2005			Foreign Medical School	99999	06/2000	7/1/2004	IM	1400	0-600-64	1/18/2001	P	
281-06-7914	Ismail	Saleh	MD	4	IMPU	1414	2005	VA		1	RESEARCH/LAB	3/1/2005	3/31/2005			Foreign Medical School	99999	06/2000	7/1/2004	IM	1400	0-600-64	1/18/2001	P	
281-06-7914	Ismail	Saleh	MD	4	IMPU	1414	2005	UH		1	CONSULTS	4/1/2005	4/15/2005			Foreign Medical School	99999	06/2000	7/1/2004	IM	1400	0-600-64	1/18/2001	P	
281-06-7914	Ismail	Saleh	MD	4	IMPU	1414	2005	UH		1	MICU	4/16/2005	4/30/2005			Foreign Medical School	99999	06/2000	7/1/2004	IM	1400	0-600-64	1/18/2001	P	
281-06-7914	Ismail	Saleh	MD	4	IMPU	1414	2005	LD		1	PFT/LAB	5/1/2005	5/31/2005			Foreign Medical School	99999	06/2000	7/1/2004	IM	1400	0-600-64	1/1		

**OF 92 LINES**  
**WE ELIMINATED 59 LINES**  
**LEAVING 33 LINES**  
**THIS IS PRE-AUDIT**

**CMS auditors scrutinize the report that is submitted to them even more!**

**ON OUR FINALIZED 2004 COST REPORT**

**\$200,000 WAS DISALLOWED BY THE AUDITORS**

**DUE TO TRAINING AGREEMENT**

**DISCREPANCIES ALONE!**

*We expect future audits to be even more stringent as new requirements are added, sometimes retroactively!*

**REMEMBER**

**ROTATION SCHEDULES**

**TRAINING AGREEMENTS**

# TRAINING AGREEMENTS

- Training agreements must be written in specific language, and include specific information to be recognized by ACGME and CMS
- Each year we have a training session for residency coordinators to assist in writing training agreements
- PLEASE plan to attend that session when it is scheduled and you receive notification
- This affects your program funding

# ROTATION SCHEDULES

- Need annual schedules at beginning of year
- List EVERY resident, full name
- Need rotation location and description of every rotation period
- If rotation is funded by another hospital, need that information
- If abbreviations are used, need a complete key
- Need 365 days worth of rotations for every resident

NAME	7/1 – 7/31	8/1 – 8/31	9/1 – 9/30	10/1 – 10/31	11/1 – 11/30	12/1 – 12/31
John Smith	VA - Card	UH - Neuro	LD - Card	VA - Surg	VA - Clinics	UH - GI
Sally Jones	UH - SICU	UH - Surg	UH - Urol	VA - GI	LD - Wards	UH - Wards
Bob West	UH – GI 50% VA – GI 50%	UH – ID 50% VA – ID 50%	Elective	UH – Research	VA - Research	VA - Wards

**KEY: GI = Inpatient GI Consults    Research = Lab research all locations**

**VA funds all rotations except research (funded by UH)**

**LD funds all rotations at LD location**

## **REMEMBER**

- ✓ **REVIEW RESIDENT RESPONSIBILITIES**
- ✓ **REVIEW PROGRAM RESPONSIBILITIES**
- ✓ **ATTEND GME TRAINING SESSIONS**
  - ✓ **CALL GME TO ASK QUESTIONS**
- ✓ **KNOW YOUR PROGRAM FUNDING**
- ✓ **PREPARE COMPLETE ROTATION SCHEDULES**