I. PURPOSE
The purpose of this policy is to establish uniform guidelines for advancement of resident and fellow stipends.

II. POLICY

A. Resident Stipend Advancement
Residents will begin in accredited programs at customary entry levels, for both training and stipend levels, as listed in the Program Omnitracker located at http://medicine.utah.edu/gme/Omnitracker.pdf. Resident stipend levels will advance for each year of accredited training through board eligibility for that program.

Some accredited residency programs have an institutional requirement, or option, for completion of a research, or other, year(s) not required for ACGME program completion or board eligibility. Such research years are considered to be non-accredited years of training within an accredited program. It is the program's responsibility to advise the Graduate Medical Education Office when a resident is preparing to enter a non-accredited year of training. Houseofficer Agreements (contracts) for such years must indicate that the training program year is non-accredited.

Non-accredited years of training in accredited programs will not be supported by the Hospital resident salary budget. Departments are responsible for funding such non-accredited years. When residents have completed non-accredited training years and resume accredited training, they must re-enter the accredited program at the PGY training level and stipend level consistent with the previous number of completed accredited years in the program.

B. Fellowships Stipend Advancement
The Program Omnitracker lists customary entry levels, for both training and stipend levels, for fellowships. It is recommended that fellows enter fellowships at these customary levels. If a program wishes to allow a fellow to enter at a level not consistent with the Program Omnitracker, that entry level must be approved by the Graduate Medical Education Office. The Graduate Medical Education Office may approve or reject requests for other entry levels depending upon reimbursement restrictions of any affiliated hospitals where fellows may rotate. After entry into a fellowship program, training and stipend levels will advance for each additional year of that fellowship.

Fellowship "stacking" for purposes of increasing stipend levels is discouraged. It is recommended that for each additional fellowship, the fellow enter at the customary
training and stipend level for that fellowship as established in the Program Omnitracker. Exceptions must be approved by the Graduate Medical Education Office.

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