

SUNY HEALTH SCIENCE CENTER

Department of Urology

Resident Policies

July 1, 1999

Office of the Chairman

Office of Educational Programs

When in doubt.....

The Patient Comes First.

Department of Urology Resident Policies

Medical professionalism requires first and foremost a commitment to the patient and his or her well-being. It also requires continual learning and education on the part of the medical practitioner so that the appropriate knowledge and skill needed to deliver excellent medical care is always assured. Some physicians choose to direct their careers primarily towards clinical endeavors. Others choose education, research and administration as venues within this broad field. Our program seeks to promote a balanced learning experience, which will enable our graduates to excel in all of these areas.

Residents have the formidable task of learning enough of the knowledge and art of their profession within a six-year period to be able to practice good medicine as independent individuals. This requires a delicate balance between learning from their patients as well as providing their patients with the care they need. Residencies are a form of apprenticeship in which those who are new to the field learn from those who have been in the field for varying periods of time. As one spends more time in the profession and gains more experience, one gets more responsibilities and takes on more supervisory roles. It is the SUNY Health Science Center's Department of Urology's responsibility to provide an excellent education to its house staff. In doing so, it recognizes that there are times when necessary rigorous training may make other activities in life somewhat difficult. Whereas we firmly believe that it is important to provide our residents with comfortable and reasonable working conditions, we must continually strive to maintain a professional environment in which patient care and education are our first and foremost priorities.

Section 1

Basic Responsibilities

1. Residents are expected to arrive on time for their clinical responsibilities be they ward responsibilities, clinics, ambulatory activities surgery, etc. As per section 405 of the New York Health Department Administrative Law, residents are to assure that their patients have been cared for properly and reasonable transfers of responsibility have been made to covering teams. Unauthorized absences from assigned duties will be subject to disciplinary action.
2. Section 405 rules state that a resident's work week is 80 hours per week averaged over a period of four weeks. The Department of Urology feels that the 80 hour work week is generally quite adequate to perform the necessary tasks assigned. Residents will have one 24 hour period of unassigned duties every 7 days will be scheduled with 8 hours between shifts.
3. Good communication is a vital part of medical care. Thorough histories and physicals, progress notes, discharge summaries, and sign-out

sheets are essential. Not only do these documents ensure patients get the best possible care, but make this information known to consulting physicians or between physicians when transfers occur. It must be noted that many malpractice cases are quality assurance citations revolve around poor documentation. It is a widely recognized concept that good written communication is mandatory. Furthermore, discharge summaries, in particular, are reflections on the communicative skills of the Department of Urology. They need to be timely, concise and well-written. Good verbal communications, including calls to attending physicians or consultants, or discussions with patients and their families are a fundamental part of the practice of medicine as well.

4. House officers are teachers and role models for the clinical clerks from the SUNY Health Science Center's College of Medicine. Appropriate professionalism on the part of the house staff is necessary to impart upon these students the seriousness of the profession that they have chosen to enter. Upper level residents have a particular mandate to teach and guide both junior residents and medical students. Work rounds should be run and supervised by resident house staff and not attending physicians who have other means to teach their charges.
5. Residents are assigned to clinics throughout their residency at either the Syracuse VAMC or University Hospital. Clinics begin promptly on time and are finished when all patients have been seen. Residents are expected to be on time and to review their patients with clinic attending physicians. Each resident will be responsible for a specific panel of patients under the guidance of the faculty. Each and every change in the clinic schedule must be cleared with the departmental administrator.
6. The SUNY HSC at Syracuse does not discriminate on the basis of race, sex, sexual orientation, color, religion, age, national origin, handicap, marital status, or status as a disabled veteran or veteran of the Vietnam Era in the recruitment and employment of faculty and staff, in the recruitment of residents, or in the operation of any of its program or activities, as specified by Federal and State laws and regulations.

Sexual harassment is an unlawful employment practice under Section 703 of the Title VII of the Civil Rights Act of 1964, as amended. The Federal Equal Employment Opportunity Commission has defined sexual harassment as: "Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of sexual nature. When (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment, (2) submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individuals, or (3) such conduct has the purpose of effect of unreasonably interfering with and individual's work

performance or creating an intimidating, hostile or offensive working environment.”

Although the guidelines apply only to employment, the SUNY HSC at Syracuse, in its commitment to ensure equality, adopts this policy on behalf of its students also. Sexual harassment creates a psychologically harmful environment, which interferes with the performance and development of employees and students alike. Neither sexual harassment nor any other form of unlawful discrimination will be tolerated at the Health Science Center. Residents who believe they are being harassed should report this to the Educational Programs Office immediately.

Section 2

Order Writing

Per New York State law and Hospital Policy (all three major affiliates) the attending physician is ultimately responsible for the care of the patient.

Section 3

Benefits

1.) **Sick Time**

In accordance with SUNY HSC at Syracuse policy, sick leave accrues monthly at the following rate: R1 – 15 days per year, R2 – 16 days per year, R3, R4 and R5 – 18 days per year, and R6 – 20 days per year. Sick time accrues if it is not used. These days are for personal illness or significant family illnesses. They are not to be used as personal days or for vacation time. If it becomes known residents may be docked either pay or vacation time and may not receive enough academic credit to be able to qualify for the Boards.

Residents who feel they need to call in sick must notify the Chief Resident by beeper for their hospital/rotation by 6:30 a.m. If for some reason they are unable to notify that particular Chief Resident, they must notify a back-up Senior Resident. Messages left with the Departmental Office or on an answering machine are unacceptable. A Chief Resident is on call at all times and must be notified. Failure to notify the Department of Urology will result in the absenteeism being considered “unauthorized” which can result in loss of pay and/or academic credit. Calling in sick on clinic and “on-call” days is most difficult for those providing coverage. House officers need to be honest regarding sick leave. House staff should make arrangements for child care ahead of time.

2. **Vacation/Compensation Time**

Residents receive 20 days per year of vacation/compensation time. Certain constraints are placed on vacation/compensation time scheduling such that continuity of patient care is not interrupted. House staff need to plan on an around significant life events and needs when they schedule their vacations. Once the final schedule is made, changes will only occur if they are significantly meritorious. Vacation is not allowed in July.

Time off will not be allowed for two residents away from the department of Urology at one time. Exceptions would be: More than one resident is attending a scientific meeting or there is a family emergency. Service chiefs at the VA, UH and Pediatrics must have 60 days notice for any vacation request.

3. **Beepers/Uniforms:**

The department will provide a beeper for each house officer for the duration of their training experience. If a house officer loses this beeper, he/she will be financially responsible for its replacement. The department will provide two white laboratory coats per house officer.

Section 4 **Leaves of Absence**

1. **Maternity Leave:**

An employee disabled by pregnancy or childbirth is eligible for sick leave. The normal time allotment is 4 weeks prior to delivery and 6 weeks after delivery. Documentation is required for needs exceeding the usual time standards.

2. **Paternity Leave:**

The UUP (union) contract allows 10 days of paid sick leave to care for a family member. If after childbirth the mother needs care, “paternity leave” is an acceptable use of this time. Documentation (a brief note) from the mother’s physician is needed on or around the time of delivery. This time comes from the general pool of sick time allotted to the resident. As such this time factors into the “pull system.”

Section 5 **Regulatory Agencies and Oversight**

The Department of Urology adheres to the policies and procedures of all appropriate regulatory agencies. Specifically the ACGME/RRC Urology and American Board of Urology policies are applicable to the residency program.

Section 6

Complaints of Program Deficiencies:

House officers who feel that they have legitimate programmatic complaints or feel that they have identified deficiencies amongst faculty or colleagues should report them to the Director of Educational Programs. Such complaints will be investigated and, if necessary, corrected. Failure to report such deficiencies will only lead to their perpetuation. Complaints against the Director of Educational Programs should be referred to the Chairman of the Department of Medicine.

Section 7

Moonlighting

Per the Residency Review Committee – “residency is a full time responsibility”. Activities outside residency obligations cannot interfere with these obligations. Furthermore, “moonlighting” activities must not be in violation of Section 405 rulings.

Section 8

Schedule Changes

Unfortunately, alterations in program structure and/or content or significant life changes among house officers occasionally necessitate changing the schedule. These changes (if they come from the Chairman’s Office) will be made known to the affected house staff. Residents who wish to request an alteration in the schedule must do so in writing in a timely fashion and be specific regarding the legitimate reasons. “Trades” must also be requested in writing and not interrupt the continuity of patient care or violate Section 405 time constraints. The Department of Urology does not provide coverage for religious holidays. However, trades may be requested in writing, and are subject to approval by the Chief Resident and the Director of Educational Programs based upon professional responsibilities. Written requests must be submitted to the Chairman’s office.

All house officers have the responsibility of reviewing their personal/professional needs carefully to minimize conflicts with their residency training. The RRC and Board of Urology are strict about certifying criteria especially with regard to program content and time served.

Section 9

Evaluations

House officers will be evaluated per rotation. They are expected to meet with their program director three or four times a year for a review of their accumulated evaluations. Such meetings will be scheduled through their advisor's offices. The evaluation process is required by the RRC and is clearly in the house officer's educational best interest. Not only will strengths be reviewed, but deficiencies will be discussed in an effort to correct them. In turn, house officers are expected to evaluate junior house officers, medical students and faculty members. Such evaluations are mandatory in order to strengthen the program and to identify potential problems. Thoughtful and complete evaluations are necessary in order to promote the best interests of the overall educational program.

We expect that all of our residents will comply with these policies. Persistent or egregious disregard of these obligations despite notification by the Program Director and/or Department Chairman may result in dismissal and/or withholding of future contracts. An annual review of all house officers will be made by the House Staff Committee to review credentialing suitability and to assess ability to continue within the program.

Section 10

Due Course

House officers are under the immediate supervision of the Chairman and his/her designates, (i.e., Chief Resident, staff), with regard to their residency training. They routinely review programmatic structure and resident progress. The Chair has the final decision regarding matters related to resident training within the Department.

Section 11

Ad hoc Schedule Changes

Chief Residents may alter schedules at any time in order to ensure appropriate patient care.

Section 12

Professional Conduct

Residents at all times will maintain a professional, courteous demeanor regardless whether they are dealing with patients, relatives, consultants, other hospital employees, residents or attendings. Violation of any of these principles set forth will constitute a grave infraction of the rules, which will be handled with gravity proportional to the severity of the incident. In general, a first time offense will be discussed, consequent events will lead to written documentation; probational status with set parameters and goals; non-renewal of contract; immediate dismissal from the program, and informing the RRC and Board of Urology of the issues. Grave violations and endangerment of patient care may result in immediate suspension of clinical privileges and/or dismissal from the program.

Section 13
Amendments

House staff will be notified in writing of any amendments to this document.

David B. Duggan, M.D., F.A.C.P.
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David G. Heisig, M.D., F.A.C.P.
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March 19, 1999

I, _____, have received a copy of the Resident Policy Manual for the Department of Urology at University Hospital and have read and agree to abide by it.

Signature

Date