

The University of Texas System Medical Foundation – Resident/Fellow Check-out Form

Name: _____ Program: _____

Instructions: Obtain signatures from all hospitals at which you have rotated as part of your training.

If you did not rotate through one of the hospitals listed, enter N/A on the signature line and have your Coordinator initial each line.

You must turn in your completed check-out form, IN PERSON, to the UTMSH Graduate Medical Education Office.

FAILURE TO COMPLETE AND RETURN FORM WILL JEOPARDIZE RECEIVING YOUR RESIDENCY COMPLETION CERTIFICATE.

Memorial Hermann Housestaff Office- Cullen Room 102:

Medical Records: Record Completion Room: _____ Date: _____

Access Card: Medical Staff Services Office: _____ Date: _____

Scrubs: Linen Services: _____ Date: _____

UT MD Anderson: UTMDACC has its own check-out procedure. If you worked there, you must use their check-out procedure. Report to the UTMDACC Academic & VISA Administration (7007 Bertner Ave, 1MC 17.3439 on 17th Floor) for this process and signature.

UTMDACC Checkout verified by: _____ Date: _____

LBJ General Hospital: LBJ General Hospital has its own check-out procedure. You must use their check-out procedure. Report to the LBJ Physician Services Office (1PE-18-005) for this process and signature and attach a copy of the LBJ checkout form to this form.

LBJGH Checkout verified by: _____ Date: _____

Houston Methodist Hospital: Houston Methodist Hospital has its own check-out procedure. You must use their check-out procedure. Report to Methodist Hospital GME Office (Research Institute R2-201) for this process and signature.

Methodist Hospital Checkout verified by: _____ Date: _____

St. Luke's Episcopal Hospital: Badge should be turned into Medical Staff Services

Medical Staff Services: _____ Date: _____

St. Joseph Hospital: St. Joseph Hospital has its own check-out procedure. If you worked there, you must use their check-out procedure. Report to St. Joseph's Medical Staff Services Office (Strake 3rd floor #3390) for this process and signature.

St. Joseph's Hospital Checkout verified by: _____ Date: _____

TMC Library: All books and library cards must be returned. No outstanding fines/fees.

TMC Library Verified by: _____ Date: _____

UT Physicians Medical Records: All records through UT Physicians system, Allscripts must be completed. UTPB LL100.

UTP Medical Records Verified by: _____ Date: _____

UTMSH Program: Your residency coordinator must verify that you have no outstanding evaluations or duty hour reports to submit in New Innovations.

Pagers: Received by: _____ Date: _____

Coordinator Clearance given by: _____ Date: _____

UTMSH GME Office (LAST STOP): Your UTHealth ID badge and this completed form must be turned in to the GME Office, JLL 310.

UTHealth ID badge rec'd by: _____ Date: _____

Certificate given by: _____ Date: _____

Forwarding Address: Address: _____
City, State, Zip: _____
Phone: _____

Please include updated address to ensure proper delivery of your W-2

Personal E-mail Address: _____

(Do not use your UT email address. Your UT email account will be deactivated in 60 days)

**You may access ADP directly to get your paystubs and tax documents at any time.
You will not lose this access after graduation.**