Office of Graduate Medical Education

Program Coordinator Handbook
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INTRODUCTION

Mission Statement of Office of Graduate Medical Education

The mission of the Office of Graduate Medical Education is to support McGovern Medical School in its education effort by enforcing the regulatory standards of the Accreditation Council for Graduate Medical Education and other appropriate agencies and by providing a high level of service to all graduate medical education programs, residents and fellows to ensure that residents and fellows receive the highest quality education and training and that residents and fellows receive the requisite financial support and benefits.

About

The Office of Graduate Medical Education (GME) serves as the official institutional liaison between McGovern Medical School and the Accreditation Council for Graduate Medical Education (ACGME). The McGovern Medical School Office of Graduate Medical Education (GME) oversees and monitors 75 ACGME accredited residency/fellowship programs and over 43 Texas Medical Board approved fellowships. UTHealth currently employs over 1,200 residents and fellows.
SECTION I. General Information

A. GME Contacts and Responsibilities

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<th>GME TEAM CONTACTS AND RESPONSIBILITIES</th>
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<th>Physical Address</th>
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<td>1133 John Freeman Blvd., J JL 310 Houston, TX 77030-2809</td>
<td>6431 Fannin Street, J JL 310 Houston, TX 77030-1503</td>
<td>1133 John Freeman Blvd., J JL S-101 Houston, TX 77030 <a href="mailto:ms.medfoundation@uth.tmc.edu">ms.medfoundation@uth.tmc.edu</a></td>
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<td><a href="http://www.med.uth.tmc.edu/gme">www.med.uth.tmc.edu/gme</a></td>
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<th>GME ADMINISTRATION</th>
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<td><strong>Name</strong></td>
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<td>Jill Herrin</td>
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| **Jacqueline Brooks**  
Program Manager | • ACGME Programs  
• TMB Programs  
• GMEC and Subcommittee Meetings  
• Annual Program Review (APR)  
• Duty Hours, PLA’s  
• General NI Help  
• New Rotations/Assignments  
• Privileges and Adding Persons to NI (until the new System Administrator is onboard) | 713-500-5152 | Jacqueline.Brooks@uth.tmc.edu | JL 310 |
| **LaQuetta Chavis**  
Sr. Administrative Coordinator | • New CFS (Chart Field Strings) - Bill to Continuity  
• Clinics/Assignments (Create, Maintain, Archive)  
• Rotations (Create, Maintain, Archive)  
• Prior Month Billing Rotation Overrides  
• Approval of Supplement Pay Requests  
• Billing/Payroll - Reconciliation | 713-500-5196 | LaQuetta.M.Chavis@uth.tmc.edu | JL 310 |
| **Kellie Loggins**  
Sr. Administrative Coordinator | • ACGME Programs  
• TMB Programs  
• GMEC and Subcommittee Meetings  
• Annual Program Review (APR)  
• Duty Hours, PLA’s  
• General NI Help  
• New Rotations/Assignments | 713-500-5148 | Kellie.Loggins@uth.tmc.edu | JL 310 |
| **Frances Sokoloski**  
Sr. Administrative Software Coordinator | • Train program coordinators to use Rotations, Assignments, Clinics, Evaluations and Duty House modules in NI  
• Prepare training documentation for programs  
• Assist in maintaining training records  
• Assist in preparing incoming trainees for onboarding  
• Providing assistance to programs with recruitment issues | 713-500-3460 | Frances.L.Sokoloski@uth.tmc.edu | JL 5-101 |
| **Elizabeth Tipton**  
Administrative Assistant | • Invoice payments  
• Non PO Vouchers  
• Official Function Requests  
• Request for Travel Authorization (RTA’s)  
• Resident Verification requests  
• Meeting Requests  
• Lab Coat Orders  
• Office Supply Orders | 713-500-5150 | Elizabeth.L.Tipton@uth.tmc.edu | JL 310 |
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<td>Darla Tobeck</td>
<td>• Foundation Financial Statements and GL Account Analysis</td>
<td>713-500-5161</td>
<td><a href="mailto:Darla.Tobeck@uth.tmc.edu">Darla.Tobeck@uth.tmc.edu</a></td>
<td>JKL 310</td>
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<td>Allan Cambel</td>
<td>• Employment verification</td>
<td>713-500-5246</td>
<td><a href="mailto:Allan.S.Cambel@uth.tmc.edu">Allan.S.Cambel@uth.tmc.edu</a></td>
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<td>Emiliano Dela Cruz</td>
<td>• Insurance Claims</td>
<td>713-500-5247</td>
<td><a href="mailto:Emiliano.D.Dela.Cruz@uth.tmc.edu">Emiliano.D.Dela.Cruz@uth.tmc.edu</a></td>
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** Any questions regarding payroll and benefits for your residents and fellows prior to their transition to UTHealth employees should be directed to your program’s DMO.

B. **Program Coordinator Contact List**

Click the link in the heading to access the UTHealth GME Training Program Contact List

C. **UTHealth Science Center Policies for Residents**

Below are links general information related to the following policies:

1. **Graduate Medical Education Handbook.**

   The UTHealth Graduate Medical Education Handbook (the Handbook) is incorporated into and made a part of the annual Residency Appointment Agreement. The Handbook outlines resident and fellow responsibilities and policies. To access the Handbook, click the link in the above heading.

2. **Texas Medical Board Requirements for Self-Reporting**

   There may be circumstances during a Physician In Training (PIT) holder’s residency in which certain events may occur. If such an event happens, it is stated in Texas Medical Board Rule §171.5 that the PIT holder shall report in writing to the Executive Director of the Board the following events within thirty (30) days of their occurrence:

   a) the opening of an investigation or disciplinary action taken against the PIT holder by any licensing entity other than the TMB;
   b) an arrest, fine (over $250), charge or conviction of a crime, indictment, imprisonment, placement on probation, or receipt of deferred adjudication; and
   c) diagnosis or treatment of a physical, mental or emotional condition, which has impaired or could impair the PIT holder’s ability to practice medicine.
The Handbook states in part “failure to comply with the provisions of this chapter (22 Tex. Admin. Code, Section 171) or Tex. Occ. Code, Sec. 160.002 and 160.003 may be grounds for corrective action, including disciplinary action up to and including dismissal from the Program”.

To access the form and instructions, click the link in the above heading.

3. **Risk Management Education**

All residents and fellows covered by the UT System Professional Medical Liability Benefit Plan (the Plan) are required to complete five (5) hours of Risk Management Education each year as a condition of coverage under the Plan. For purposes of this policy, a year shall correspond with the residents/fellows appointment agreement with UTHealth.

To access the policy on Risk Management Education, including acceptable course material, compliance, and course access, click the link in the above heading.

4. **ACLS and PALS Compliance**

As a requirement of their appointment, your residents and fellows must maintain a current accredited Advanced Cardiovascular Life Support (ACLS) Certificate throughout their training period. Pediatric specialties are required to maintain a current Pediatric Advanced Life Support (PALS) Certificate throughout their training period. Furthermore, combined Adult/Pediatric Program residents and fellows must maintain current ACLS and PALS Certificates. Failure to maintain the required certifications would result in your resident or fellow being removed from clinical duties.

To access more information regarding this policy and information for American Heart Association (AHA) accredited course providers, click the link in the above heading.

5. **Corrective and/or Disciplinary Actions**

In the event which your Program Director determines that the unsatisfactory performance and/or any conduct of a resident/fellow it may be necessary for him/her to take disciplinary action against a resident/fellow. Depending upon the circumstances which have warranted review of the resident/fellow, corrective actions could include remedial assignments, letters of warning, academic warning, probation, suspension, non-promotion, non-reappointment, or dismissal from the Program. Instances in which corrective or disciplinary actions may be imposed are categorized as follows:

a) **Patient Safety**

Circumstances in which the Program Director or the clinical department’s Clinical Competency Committee determines that the unsatisfactory performance and/or any conduct of a Resident may constitute an immediate threat to patient safety.
b) **Academic Actions**

If the clinical department’s education or clinical competence committee and/or your Program Director have reason to believe that a residents/fellows performance is unsatisfactory, he or she will contact the resident/fellow and provide adequate verbal and/or written notice and guidance to the resident/fellow about his or her performance and possible corrective action.

c) **Non-Academic Actions**

Non-Academic Actions are illegal or prohibited conduct (including, but not limited to any conduct prohibited by UTHealth – see, e.g., HOOP Policy 186, Student Conduct and Discipline or The University of Texas System, federal, state, or local law, and/or Texas Medical Board rules.

To access complete information related to corrective and/or disciplinary actions and policies, see Section II.U. Graduate Medical Education Handbook.

### SECTION II. Onboarding and Credentialing

**A. New House Staff**

1. **Onboarding Checklists**

As the new incoming house staff prepare for their residencies and fellowships here at UTHealth, the first step of their onboarding will consist of a number of checklists distributed through New Innovations Residency Management System (NI). These checklists collect all information and documentation needed for employment. The checklists are distributed by the GME department and have assigned deadlines for when the information or requested documentation is needed. This academic year’s list of checklists include the following:

- **a)** New Hire – Badge Order *(instructions to obtain photo for employee badge)*;
- **b)** New Hire – Clearance for Non-US Citizens *(instructions to obtain tax information form, DS-2019 form, passport, EAD, permanent resident card or VISA)*;
- **c)** New Hire – Duty Hours *(distribution of Duty Hours policies and attestation form)*;
- **d)** New Hire – Education & Training Documents *(request for verification of training documents including Dean’s letter of Good Standing, Diplomas, Certifications of Completion, ECFMG Certificate, Program Director’s Character Reference Letter, and Verification of Incomplete Training)*;
- **e)** New Hire – Health Clearance *(distribution of forms for pre-employment lab work and request for health information)*;
- **f)** New Hire – Identity Verification *(request for documentation for Identity verification, CV, Information Resources Acknowledgement and Security Acknowledgement)*;
- **g)** New Hire – Learn2Succeed *(request to complete GME New Resident/Fellow Orientation online module, and proof of completion)*;
h) New Hire – Memorial Hermann Malpractice (request to complete and upload MMH Malpractice Enrollment Form);

i) New Hire – N-95 Respiratory Mask Fit Testing (instructions of where to go for N-95 fit testing and distribution of Fit Testing Medical Questionnaire);

j) New Hire – NPI Application/Update (instructions for applying for a new NPI number or updating an existing NPI number, including request for confirmation and NPI number);

k) New Hire – Policies (request to review GME policies);

l) New Hire – Required/Mandated Forms (distribution of forms requesting information including Social Security, TMB Release and Authorization form, DEA Certificates, Certification Requirements and proof of certification i.e., ACLS, PALS, etc.);

m) New Hire – Welcome (distribution of general information related upcoming checklists to be distributed, Housing Location Assistance and Recreation Center); and


As a Program Coordinator, you will monitor the progress of your house staff’s completion of the checklists to ensure that all information is timely received so as not to delay their start date.

2. Monitoring Checklists

To monitor the onboarding checklists:

a) In NI, go to Personnel > Checklists > Onboarding

b) Select Progress.

c) Look at the scale under the STEPS COMPLETED column to see resident/fellow progress in completing that specific checklist. To view a list of checklists assigned to your resident/fellow, click the link to the resident/fellow name.
d) To view the details of the incomplete items in a checklist, click the next to the checklist to expand.

3. **International Medical School Graduates.**

   International Medical School Graduates (IMG’s) are required by the Texas Medical Board and the Centers for Medicare & Medicaid Services to have certain documents submitted, reviewed and present in your prospective resident/fellow’s file should they be accepted into your residency/fellowship position. This information needs to be met before you can release an appointment agreement. The required documents must be certified, notarized and presented in one set of 8-1/2 by 11 inch copies. A complete list of the required documents is available on the [IMG Resident and Fellow Document Review Worksheet for Coordinators](#).

4. **UTHealth GMEC Policy on U.S. Visa Sponsorship for Residents and Fellows in GME Programs**

   The University of Texas Medical School at Houston (UTMSH) Residency and Fellowship Programs (UTMSH) accept international physicians who meet the requisite eligibility and selection requirements. The only accepted visa for International physicians is the J-1 clinical visa sponsored by the Education Commission for Foreign Medical Graduates (ECFMG) in order to participate in GME programs. H-1B visas are not sponsored by the UTMSH GME Programs. Complete details of the UTMSH’s policy can be found in the [GME Policy Statement-Visa Sponsorship for Residents and Fellows in GME Programs](#).

5. **Document Templates**

   Every new house staff will be required to sign an employment contract. Currently there are six new contract templates. Contracts are distributed through a checklist from New Innovations. Descriptions of the contracts are as follows:

   a) New Appointment attending Orientation;
   b) New Appointment not attending Orientation;
   c) New Appointment attending Orientation with Supplemental Duties clause;
   d) New Appointment Research Resident attending Orientation;
e) New Appointment Oral Surgery Resident attending Orientation; and
f) New Appointment attending Orientation with Quality Metric clause.
ATTACHMENT A
Sample Appointment Contract

THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT HOUSTON

NOTICE OF APPOINTMENT FOR

<<FIRSTNAME>> <<MIDDLENAME>> <<LASTNAME>>

The University of Texas Health Science Center at Houston (UTHealth) McGovern Medical School (MMS) Affiliated Hospitals Integrated Residency Training Program (“Residency Training Program”) offers you an appointment as a Post Graduate Year (PGY) <<pgy>> and Program Level <<status>> Physician (“Resident Physician”) in <<program>> effective for the term of <<startdate>> and ending on <<enddate>> with compensation at an annualized rate of <<compensation>>. Payment of all or any portion of your total compensation that is derived from contracts, grants, gifts, bequests, endowments or other guarantees of funding from outside sources, is expressly dependent upon receipt of those funds. This appointment is expressly contingent upon timely receipt by the MMS Office of Graduate Medical Education (GME) of either a Texas Physician-in-Training Permit from the Texas Medical Board (TMB) or a copy of a current and valid TMB License to be provided by the Resident Physician, and your consent to and successful completion of a criminal background check and drug screening as required by UTHealth as well as any other required documentation deemed necessary by UTHealth or GME to allow you to start on the date set forth above. In the event you are for any reason unable to meet GME requirements for practicing at any of the affiliated hospitals or participating institutions, this appointment may be withdrawn and you may be dismissed from the Residency Training Program.

General information regarding your responsibilities under this appointment, conditions for reappointment, benefits information (including health, disability, life and professional liability insurance, counseling and leave), grievance procedures and policies relating to duty hours, impairment, disability accommodation and other matters related to the Residency Training Program are detailed in the GME Resident Handbook (https://med.uth.edu/oep/gme/residents-and-clinical-fellows/resources-for-current-residents-and-clinical-fellows/), which is incorporated into and made a material part of this Notice of Appointment.

ACCEPTANCE OF APPOINTMENT

I agree to accept an appointment as a PGY <<pgy>> and Program Level <<status>> Resident Physician in the <<program>> Residency Training Program effective for the term and stipend designated above. I understand that this appointment is expressly contingent upon timely receipt by GME of either a TMB Physician-in-Training Permit or a copy of a current and valid TMB License to be furnished by me, and my consent to and successful completion of a criminal background check and drug screening as required by UTHealth, as well as any other required documentation necessary to allow me to start on the date set forth above.

I have received a copy of and have read and agree to abide and be bound by the general conditions reflected in this notice of appointment and in the GME Resident Handbook. I understand I am subject to and agree to comply with UTHealth Handbook of Operating Procedures, the Rules and Regulations of the University of Texas System Board Of Regents, and applicable state and federal laws and regulations.

_______________________________________
Resident Physician Signature

_______________________________________
Date

Barbara J. Stoll, M.D.
Dean, McGovern Medical School at
The University of Texas Health Science
Center
Houston (UTHealth)
6. **Annual New Resident/Fellow Orientation**

New Resident and Fellow Orientation is held in late June. All new residents and fellows are encouraged to attend. During Orientation, residents and fellows will receive information related to:

a) House Staff Association;  
b) Handling Legal Processes;  
c) Resident Responsibility to Medical Students;  
d) Healthcare and Billing Compliance;  
e) MSIT Policies;  
f) Employee Assistance Programs (EAP);  
g) Duty Hours Policies;  
h) Equal Opportunity Compliance;  
i) Humanities and Ethics Professionalism; and  
j) Payroll and Benefits.

At the end of the day, residents and fellows will receive their ID badges and an encrypted USB drive.

7. **IHI Quality Improvement Policy and Instruction**

To meet part of the Quality Improvement and Patient Safety training required by the ACGME, UTHealth requires all new residents and fellows to complete online modules administered through the Institute for Healthcare Improvement website. The modules are as follows:

a) QI 101: Introduction to Health Care Improvement;  
b) QI 102: How to Improve with the Model for Improvement;  
c) QI 103: Testing and Measuring Changes with PDSA Cycles;  
d) QI 104: Interpreting Data: Run Charts, Control Charts, and Other Measurement Tools; and  
e) QI 105: Leading Quality Improvement.

Once the modules have been completed, your resident/fellow will receive certificate of completion that will need to be uploaded in to NI with a copy emailed to ms.gme@uth.tmc.edu.

8. **GCEP – AMA/GME Competency Modules**

To meet part of the Quality Improvement and Patient Safety training required by the ACGME, UTHealth has made available to each program access to the AMA GME Competency Education Program. To access these Modules, click this [link](#).

B. **Reappointments**

1. **Advancement Checklist for Renewals**

Advancing residents and fellows will be sent a checklist with instructions for completion and upload for their Renewal Contract.
2. **Document Templates**

Every renewing resident or fellow will be required to sign a renewal contract annually for the duration of his/her program. Currently there are six renewal contract templates. Contracts are distributed through a checklist from New Innovations. Descriptions of the contracts are as follows:

a) Renewal Contract;
b) Renewal Contract with Supplemental Chief Resident Duties;
c) Renewal Contract with Supplemental Duties clause;
d) Renewal Research Resident Contract;
e) Renewal Oral Surgery Resident; and
f) Renewal Contract with Quality Metric clause.
ATTACHMENT A
Sample Renewal Contract

THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT HOUSTON
NOTICE OF APPOINTMENT FOR
<<FIRSTNAME>> <<MIDDLENAME>> <<LASTNAME>>

The University of Texas Health Science Center at Houston (UTHealth) McGovern Medical School (MMS) Affiliated Hospitals Integrated Residency Training Program (“Residency Training Program”) offers you an appointment as a Post Graduate Year (PGY) <<pgy>> and Program Level <<status>> Physician (“Resident Physician”) in <<program>> effective for the term of <<startdate>> and ending on <<enddate>> with compensation at an annualized rate of <<compensation>>. Payment of all or any portion of your total compensation that is derived from contracts, grants, gifts, bequests, endowments or other guarantees of funding from outside sources, is expressly dependent upon receipt of those funds. This appointment is expressly contingent upon timely receipt by the MMS Office of Graduate Medical Education (GME) of either a Texas Physician-in-Training Permit from the Texas Medical Board (TMB) or a copy of a current and valid TMB License to be provided by the Resident Physician, and your consent to and successful completion of a criminal background check and drug screening as required by UTHealth as well as any other required documentation deemed necessary by UTHealth or GME to allow you to start on the date set forth above. In the event you are for any reason unable to meet GME requirements for practicing at any of the affiliated hospitals or participating institutions, this appointment may be withdrawn and you may be dismissed from the Residency Training Program.

General information regarding your responsibilities under this appointment, conditions for reappointment, benefits information (including health, disability, life and professional liability insurance, counseling and leave), grievance procedures and policies relating to duty hours, impairment, disability accommodation and other matters related to the Residency Training Program are detailed in the GME Resident Handbook (https://med.uth.edu/oep/gme/residents-and-clinical-fellows/resources-for-current-residents-and-clinical-fellows/), which is incorporated into and made a material part of this Notice of Appointment.

ACCEPTANCE OF APPOINTMENT

I agree to accept an appointment as a PGY <<pgy>> and Program Level <<status>> Resident Physician in the <<program>> Residency Training Program effective for the term and stipend designated above. I understand that this appointment is expressly contingent upon timely receipt by GME of either a TMB Physician-in-Training Permit or a copy of a current and valid TMB License to be furnished by me, and my consent to and successful completion of a criminal background check and drug screening as required by UTHealth, as well as any other required documentation necessary to allow me to start on the date set forth above.

I have received a copy of and have read and agree to abide and be bound by the general conditions reflected in this notice of appointment and in the GME Resident Handbook. I understand I am subject to and agree to comply with UTHealth Handbook of Operating Procedures, the Rules and Regulations of the University of Texas System Board Of Regents, and applicable state and federal laws and regulations.

_______________________________________
Resident Physician Signature

_______________________________________
Date

Barbara J. Stoll, M.D.
Dean, McGovern Medical School at
The University of Texas Health Science Center
Houston (UTHealth)
C. Transferring Residents/Fellows

1. Checklists for Transferring Residents/Fellows to Other Programs

Checklists distributed to residents and fellows transferring from one program to another are as follows:

a) Program Transfer – Certifications – ACLS (request to upload proof of current ACLS certification);
b) Program Transfer – Certifications – PALS (request to upload proof of current PALS certification);
c) Program Transfer – Memorial Hermann Malpractice (instructions for Residents/Fellows who will be rotating through Memorial Hermann Hospital to complete the MHH Malpractice Enrollment form); and
d) Program Transfer Contract (distribution of Program Transfer Contract with instructions for completion and upload).

2. Document Templates

Transferring residents or fellows will be required to sign a contract at the time of transfer and a renewal contract annually for the duration of his/her program. Currently there are four (4) transfer contract templates. Contracts are distributed through a checklist from New Innovations. Descriptions of the various contracts can be found above under SECTION II.B.2.

D. Non-Renewals

1. Non-Renewal Process

In instances where a resident or fellow will not be promoted and/or reappointed, the Program Director must ensure that the resident/fellow is provided with written notice, generally at least four months prior to the end of the resident/fellow’s appointment of intent not to promote or non-reappointment. When the primary reason(s) for the non-promotion and/or non-reappointment occur(s) within the four-month period preceding the end of the appointment term, the Program Director will provide the resident/fellow with as much written notice of non-promote and/or non-reappoint as soon as circumstances will reasonably allow. To notify GME of a non-renewal or non-reappointment, complete the GME Contract Exception Request Form located in New Innovations in the Resources section. Once all required information is completed and the form is digitally signed, save as a PDF file and email to ms.gme@uth.tmc.edu. Where noted, the Texas Medical Board must be notified. Notification of the Texas Medical Board is done by completing a Program Director Report. Download the report and return with the completed Exception Request. For complete information related to the non-renewal process, please consult the Graduate Medical Education Handbook.

2. Document Templates

a) Sample template of a non-reappointment letter:
Sample Template of Non-Reappointment Letter

Date

NAME
ADDRESS
CITY/STATE/ZIP

Dear Dr. __________:

This letter serves as formal notice to you of your non-reappointment to The University of Texas Medical School at Houston _____________ Residency Training Program, after your current appointment ends on ____________, 20____.

The reasons supporting this decision are related to several aspects of your performance that do not meet our standards: [list factors]. These have been discussed with you throughout your participation in the Program.

In accordance with the terms of your agreement with The University of Texas System Health Science Center at Houston, your salary and benefits will continue through ____________.

The Graduate Medical Education Resident Handbook found online at https://med.uth.edu/oep/wp-content/uploads/sites/70/2019/10/GME-2019-2020-Resident-Handbook_Rev_10-23-2019.pdf outlines the terms of your agreement with The University of Texas System Health Science Center at Houston. The handbook includes information that explains your right to request that a subcommittee of the Graduate Medical Education Committee review the decision to non-reappoint you to the program. Such review would be limited to the question of whether you were given the requisite notice and guidance by the program director prior to _____________. A request for review, if you choose to make one, should be delivered within seven days of your receipt of this letter to:

Margaret O. Uthman, M.D
Designated Institutional Official
c/o Office of Graduate Medical Education
6431 Fannin Street, JJL 310
Houston, Texas 77030

Sincerely,

Program Director
cc: Margaret O. Uthman, M.D.
E. Contract Exceptions (Transfers, Promotions, Extensions, Early Terminations)

The promotion and separation process in New Innovations Resident Management System is automatic. In those cases where there is an exception, GME must be notified in advance so that appropriate changes can be made to the training record and personnel profile of the individual. To notify GME of an exception, complete the GME Contract Exception Request Form. The form is also in New Innovations in the Resources section. See SECTION II.D.1 above for instructions on notifying GME of non-renewals or non-reappointments.
GME Contract Exception Request Form

The promotion and separation process in New Innovations is automatic. In those cases where there is an exception, GME must be notified in advance so that appropriate changes can be made to the training record and personnel profile of the individual. Once all required information is completed and the form is digitally signed, save as a PDF file and email completed form mgme@uth.tmc.edu. Where noted, the Texas Medical Board must be notified. Complete the attached Program Director Report and return with this form.

- Name of Individual:
- Current Program in NI:

Select the appropriate Contract Exception:

☐ Contract Extension (Note: The Texas Medical Board must be notified.)
  - Contract End Date:

☐ Early Promotion (Note: The Texas Medical Board must be notified.)
  - Effective Date:
  - New Level:

☐ Early Termination (Note: The Texas Medical Board must be notified.)
  - Effective Date:

☐ Transfer to New Internal Program (Note: The Texas Medical Board must be notified.)
  - Effective Date:
  - New Program:

☐ Promotion to Faculty upon Graduation
  - Effective Date:
  - Faculty Program in NI:

Name of person completing form:

Name of Program Director approving form:

Signature of person approving form: (Double-click signature box)

Program Director

UTHealth Science Center Office of Graduate Medical Education
Program Coordinator Handbook

Page 19
F. Visiting Residents/Fellows

UTHealth requires an up-to-date affiliation agreement with the visitor’s home institution prior to the visitor’s participation in any of our training programs.

1. Checklist for Visiting Residents/Fellows

For visiting residents or fellows from other institutions who are rotation through your program, the following checklists will be distributed:

a) Visitor – Agreements (distributed to visiting resident/fellow requesting that they obtain a copy of a current Program Letter Agreement (PLA) for upload into the checklist or that their home institution email a copy to you, the Program Coordinator to upload);

b) Visitor – Badge (distributed to visiting residents/fellows with instructions and directions on obtaining an ID badge and uploading a copy of badge);

c) Visitor – Elective Rotation Requirements (distributed to visiting residents/fellows requesting verifications of medical degree, prior training certifications, certifications, and distributing instructions for background check, drug screening, malpractice, ECFMG and instructions for uploading), and

d) Visitor – Identity Verification (request for documentation for Identity verification, CV, Information Resources Acknowledgement and Security Acknowledgement).

2. Out-of-State Visitor – Sample Program Director Letter to TMB

For Out-of-State Visitors, you will need to request the following statement from the Texas Licensed physician supervising your Texas rotations (Attachment A) below. The Texas licensed physician must submit a statement to TMB (pit.applications@TMB.state.tx.us) that certifies all of the following points:

- the facility at which the rotations are being completed;
- the dates the rotations will be completed in Texas*; and
- the Texas on-site preceptor physician will supervise and be responsible for the applicant during the rotation in Texas.

*Rotator permits are limited to the dates of the rotation in Texas. The permit will reflect the name and address of the out of state postgraduate training program, not the Texas program where the rotation is being completed.
ATTACHMENT A
Sample Program Director Letter to TMB

This statement is required for issuance of a permit.

Date

Texas Medical Board
PRC, MC-240
333 Guadalupe, Tower III, Suite 700
Austin, TX 78701

To Whom It May Concern:

___________, M.D. has been invited to do an away elective rotation in ____________ at The University of Texas Health Science Center at Houston from __________ to ______________.

Dr.___________ will rotate at _______________ Hospital. I certify that I will supervise Dr._____________________ during their rotation here at University of Texas Health Science Center at Houston.

It is my understanding that, Dr.___________ is currently a ____________ resident at the _____________ in good standing.

Sincerely yours,

___________ Supervising Faculty
G. **MD Anderson Rotation Request**

Residents or fellows who are approved to complete a clinical rotation at MD Anderson are processed through the MD Anderson Office of Graduate Medical Education using the DiscoverXpress. A fully executed PLA and funding arrangements between UTHealth and MD Anderson must be in place before rotation requests will be processed. Program Coordinators from approved programs are given access to DiscoverXpress by MD Anderson. To request access to DiscoverXpress, send an email to DISCOVER_Support@mdanderson.org. Instructions for requesting a rotation at MD Anderson for your resident can be found by clicking this link.

H. **Resident White Coat Ordering**

All new residents/fellows in approved GME Programs will be provided with two (2) lab coats. All returning residents are provided with one (1) coat per year. Residents/fellows transferring from one program to another are provided with one (1) coat. Program Coordinators will provide to the GME office

All lab coats ordered through the GME Office include a patch. Monogramming, special order coats (i.e. all cotton) or additional coats, are not paid for by the GME Office. These additional costs are the responsibility of the Program.

Name presentation on lab coats must be the resident/fellow’s official name as reflected in GME records. The GME office will not provide new lab coats for name changes.

The GME office will send reminders for processing lab coat orders along with instructions for ordering coats to the Program Coordinators each spring.

**SECTION III. Licensure**

The Texas Medial Board (TMB) requires a physician who serves in Texas as a Resident or Fellow in graduate medical education programs accredited by the ACGME, or approved by the TMB or a medical specialty board to hold a Physician in Training Permit or Permanent Texas Medical License. All residents and fellows employed by UTHealth Science Center will be required, pursuant to TMB policy, to practice utilizing only the name under which they are licensed by the TMB. Failure to comply with this policy may be considered unprofessional conduct by the TMB, an in addition, may subject the Resident or Fellow to corrective action.

A. **Texas Medical Board**

1. **Physician in Training Permits (PITs)**

   For the purposes of appointment of your resident/fellow, the GME office will seek a PIT permit on behalf of your resident/fellow who has never had an unrestricted license to practice medicine in Texas. During the on-boarding process, your resident/fellow will be invited to apply for the permit upon the completion of the following NI Checklist items:

   a) Sign and upload the appointment contract in NI;

   b) Complete the entire identity checklist;
c) Complete the TMB release form found in the required forms checklist; and
d) Upload the following items to the Education Document checklist:

1. Dean’s Letter of Intent or Medical Diploma for PGY 1s from US/Canadian;
2. Medical Diploma and ECFMG Certificate for International Medical School Graduates; or
3. Certificates of Completion for training or verification of training letter for PGY 2s and above.

Permits expire on the earlier of: i) the reported ending date of the postgraduate training program, ii) the date a postgraduate training program terminates or otherwise releases a permit holder from its training program, or iii) the date the permit holder obtains full licensure or temporary license pending full licensure pursuant to TMB rules. The TMB retains the right at any time to place a PIT permit on inactive status.

A PIT permit does not entitle the resident/fellow to assume professional activities outside of the Residency Program (see Section II.L of the Handbook).

2. **Permanent Texas Medical License**

If your resident or fellow obtains a permanent medical license from the TMB during his or her training are required to maintain a current medical license at all times. Your resident/fellow is responsible for notifying the GME Office of a newly issued license. A resident or fellow who has not renewed his or her license as necessary will lose PLI coverage effective on the license expiration date and will be removed from clinical duties and placed on LWOP until the license is reinstated by the TMB.

3. **Resident/Fellow Name Change**

If a resident has a name change, they must submit the TMB Application for Name Change form to the GME office with all supporting documentation. The GME office will file the application with the TMB. Your name change will not be updated in the resident’s record prior to TMB processing for licensing purposes.

4. **Program Director Report**

Under TMB Board Rule §171.6, it is the duty of a postgraduate program director to report in writing certain events involving residents within thirty (30) days of when the program director’s is made aware of the event. Failure of the program director to comply with this rule may be grounds for disciplinary action as an administrative violation against the program director. The TMB Program Director's Report is used to report the following events:

- if a physician did not begin the training program due to failure to graduate from medical school as scheduled or for any other reason(s);
- if a physician has been or will be absent from the program for more than 21 consecutive days (excluding vacation, military or family leave not related to the participant’s medical condition) and the reason(s) why;
• if a physician has been arrested after the permit holder begins training in the program;
• if a physician poses a continuing threat to the public welfare as defined under Tex. Occ. Code §151.002(a)(2), as amended;
• if the program has taken final action that adversely affects the physician's status or privileges in a program for a period longer than 30 days;
• if the program has suspended the physician from the program;
• if the program has requested termination or terminated the physician from the program, requested or accepted withdrawal of the physician from the program, or requested or accepted resignation of the physician from the program and the action is final.

SECTION IV. Coordinator Tools and Resources

A. Policies and Procedures

1. Request for Permission to Serve Alcoholic Beverages

The use, possession or distribution of alcohol on the premises of UT Health and at events on and off campus sponsored by UT Health or by a registered employee or student/resident organization is prohibited, unless approved in advance by the Senior Executive Vice President, Chief Operating Officer or designee. This policy is in accordance with HOOP 9, Alcoholic Beverages.

This policy should be examined thoroughly before planning any event in which alcoholic beverages will be served.

To request permission, the Request for Permission to Serve Alcoholic Beverages must be completed and submitted no less than ten (10) business days prior to the event. Expenses incurred for alcoholic beverages may be reimbursed only from designated funds appropriate for such expenditures. Private (or gift) funds may be used only if specifically permitted by the terms of administration of the account.

2. Moonlighting

Under Texas law, only residents who hold medical licenses from the Texas Medical Board can practice medicine outside the program to which they are appointed (moonlighting). Residents engaging in moonlighting activities may not represent themselves as UTHealth Physicians, nor may the resident use the UTHealth, GME Program, Medical School or other UT-affiliated names in such moonlight activities.

Benefit coverage including coverage for injury or disability suffered, does not apply during outside or unassigned activity. Professional Liability Insurance (PLI) will not cover the resident for any liability incurred while moonlighting.

The resident must get prior approval before engaging in any moonlighting activity by completing the Approval for Resident Moonlighting. Failure to obtain approval may result in disciplinary action against the resident.
3. **Resident/Fellow Wellness and Well-being**

It is a requirement of the [ACGME Common Program Requirements](#) (Section VI.C.) that the institution and sponsoring programs recognize psychological, emotional, and physical well-being are critical in the development of a competent, caring and resilient physician through self-care.

Part of the requirement includes providing the residents/fellows with tools for self-screening and access to confidential, affordable mental health assessment and counseling, including access to emergent care 24 hours a day, seven days a week.

UTHealth has many resources and tools to ensure the wellness and well-being of our residents/fellows. These resources can be accessed through the Fellow & Resident Assistance Programs webpage.

You as a program coordinator are encouraged to recognize and identify the signs and symptoms of burnout, depression and substance abuse. And, if you suspect or have a concern that one of your residents/fellows is exhibiting these signs, to alert your program director of your concerns. For more information go to the ACGME’s [Tools and Resources page for Resident and Faculty Well-being](#).

B. **New Innovations – RMS (Resident Management System)**

1. **Level 5 Administrator Training Guide**

You as a Program Coordinator will have Level 5 Administrator privileges in New Innovations. Level 5 Administrator privileges allows you to perform high-level tasks in the New Innovations Resident Management System. As an Administrator, you are eligible to subscribe to informative emails from NI about the following topics:

- New Software Features and Updates – Learn about new releases and enhancements made in the software
- Live Webinar Trainings – Receive notifications about free training webinars
- NI Conferences – Get information about our training conferences held annually in the Spring and Fall.

Click [here](#) to access the Level 5 Administrator Training Guide, or click on **MORE > RESOURCES > DEPARTMENT MANUALS** in the **NI INFO – TRAINING – MANUALS – TIPS** folder.

2. **Quick Guides**

Quick Guides with the most frequently used functions in each of the NI modules are attached in the Appendices to this handbook as follows:

<table>
<thead>
<tr>
<th></th>
<th>Modules</th>
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<tbody>
<tr>
<td>a)</td>
<td>Personnel Module</td>
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<tr>
<td>b)</td>
<td>Program Dashboard</td>
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<tr>
<td>c)</td>
<td>Schedules Module</td>
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<tr>
<td>d)</td>
<td>Evaluations Module</td>
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<tr>
<td>e)</td>
<td>Duty Hours Module</td>
</tr>
</tbody>
</table>
3. **Forms and Resources**

For your convenience, the GME office has provided several forms and resources in one central location in NI. To access the various forms, resources and instructions described below in NI, click MORE > RESOURCES > DEPARTMENT MANUALS or click on the links in this document.

a) **Request a New Rotation**, Modify a Rotation or Archive a Rotation in NI

To request a new rotation be created in New Innovations, you will need to complete the New Innovations Rotation Request Form.

Information you will need to complete the Rotation Request Form is as follows:

1. Whether the rotation will be for an ACGME program;
2. If the rotation is listed in ADS;
3. If the rotation is not listed in ADS, an ACGME ADS Participating Site Change Request will need to be submitted with the Rotation Request Form.
4. Whether a signed, current Program Letter of Agreement (PLA) is on file with the GME office;
5. If a signed PLA is not on file with the GME office, you will need to attach a draft of the new PLA for the rotation to the Rotation Request Form;
6. If a CFS is to be billed, is it set up in NI;
7. NI CFS Request Form if CFS is to be billed and has not been set up in NI;
8. Program Name;
9. Location of Rotation;
10. Rotation (Service) Name;
11. Is it a Research rotation;
12. Supervising Faculty and Department; and
13. Default Bill to information.

b) **New Assignment-Continuity Clinic Request**

Resident Continuity Clinic is a setting where residents are primary care physicians for their own patients over a residency period. This feature is used to track and report on patient visits, diagnoses and procedures. To request that a New Assignment or Continuity Clinic be set up in NI, you will need to complete the New Assignment-Continuity Clinic Setup Form.
c) Adding a Personnel Record and Changing Privileges in NI

To request a faculty or staff member be given access to New Innovations is a two-step process. The first step being adding the person as a new record in NI. The second step consists of completing a web-based form outlining the person’s Status, Work Role or privileges requested. The following required information for adding a personnel record to NI is listed below:

- Last Name
- First Name
- NPI# (Required for Faculty)
- Work Role
- Credentials (Required for Faculty, ex MD, MD PhD)
- Title (Preferred)
- Department
- Program
- Email
- Birthdate

The personnel record must be created prior to submitting the web-based form. If the personnel record has not been created in NI, the form will be denied and returned to the requestor. To complete part 2 of the process, click this link to access the web-based form used to request appropriate permissions are set.

To request permissions be changed or added for a faculty or staff member, complete the web-based form by clicking on this link or by going to https://apps.uth.edu/nitools. Make certain that you explain the changes you are requesting in the Comments field of the web-based form.

For complete instructions on this process, access the NI Security and New Personnel Process documentation.

d) FMLA (Family Medical Leave Act) Forms

If a resident or fellow has requested a leave of absence under the FMLA, policies and instructions for applying for FMLA can be found in the UTHealth Handbook of Operating Procedures (HOOP), Policy 106, Family and Medical Leave.

e) Elective Rotations at Other Facilities

If a resident or fellow choses to do an away elective rotation, they must make that request in writing at least thirty (30) days prior to the rotation and sixty (60) days prior to an international away rotation by completing the Application for Away Elective Rotation form. The information needed to request the away elective rotation is as follows:

1. Letter/Email invitation from host institution;
2. Copy of signed Program Letter Agreement;
3. A letter of good standing from the resident/fellow(s) current program director (for International Away Rotations Only);
4. AMBS Member Board Approval (for International Away Rotations Only);
5. Name and Address of Host Institution;
6. Training Program/Specialty of Rotation; and
7. Dates of Rotation.
Additional information related to away elective rotations is as follows:

(1) Residents and fellows are responsible for all travel costs including housing and parking;

(2) For International Away Rotations, GME requires the Program Director provide written approval from the appropriate specialty board;

(3) Unless department agrees to pay the resident/fellow’s salary during the rotation, the resident/fellow will be placed on leave of absence without pay for the duration of the rotation;

(4) For International Away Rotations, resident/fellow must register with the International SOS Insurance for Traveler’s on University Business; and

(5) Visa and EAD Card Holders must obtain permission from the Office of International Affairs.

f) **Fatigued Resident Travel Reimbursement Form**

The GME office will offer reimbursement for round trip transportation costs to help ensure that UTHealth residents and fellows, get home safely after work. This reimbursement is available to any resident or fellow that elects to use a transportation service to get home instead of driving their vehicle while fatigued. To request reimbursement and see complete details of what is required to request reimbursement, complete the **GME Fatigued Resident Travel Reimbursement Form**.
## Calendar of Events for Academic Year

<table>
<thead>
<tr>
<th>Month</th>
<th>Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>July</td>
<td>- Beginning of Academic year for most programs.</td>
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<tr>
<td></td>
<td>- Set up vacation schedules keeping in mind to avoid conflicts with rotations outside your program.</td>
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<td></td>
<td>- Update resident and fellow addresses and phone numbers in NI if needed.</td>
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<td>- Begin setting up evaluation sessions in NI for the year.</td>
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<tr>
<td></td>
<td>- WebADS released for revision - enter new residents, rotations and update program information.</td>
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<td></td>
<td>- GME Track Resident Update Opens</td>
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<td></td>
<td>- End of rotation evaluations.</td>
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<td>- Duty Hours Tracking</td>
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<tr>
<td>August</td>
<td>- WebADS deadline for completion for certain programs (8/31).</td>
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<tr>
<td></td>
<td>(To identify when your program deadline is, log in to WebADS)</td>
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<tr>
<td></td>
<td>- Ensure program website is updated for the new academic year.</td>
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<tr>
<td></td>
<td>- NRMP Main Match opens begin receiving PDWS materials.</td>
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<td></td>
<td>- Send out recruitment materials.</td>
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<td>- Complete GME Track.</td>
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<td>- End of rotation evaluations.</td>
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<td>- Duty Hours Tracking</td>
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<tr>
<td>September</td>
<td>- NRMP Institution/program registration begins.</td>
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<td>- Resident applications begin to arrive via ERAS.</td>
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<td>- Update recruitment form letters and enclosures for interview confirmations.</td>
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<td></td>
<td>- Update evaluation forms used for resident recruitment interviewees.</td>
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<td>- End of rotation evaluations.</td>
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<td>- Duty Hours Tracking</td>
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<tr>
<td>October</td>
<td>- ACGME WebADS update due.</td>
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<td>- Recruitment - send out invitations to interview.</td>
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<td>- Prepare itinerary for interviewees.</td>
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<td>- GME House Staff Survey</td>
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<td>- End of rotation evaluations.</td>
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<td></td>
<td>- Duty Hours Tracking</td>
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<tr>
<td>November</td>
<td>- Recruiting – interview season begins.</td>
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<td>- Complete review of residency applications.</td>
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<td>- Begin interviewing resident/fellow applicants.</td>
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<td>- Coordinate with faculty the scoring of applicants.</td>
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<td></td>
<td>- End of rotation evaluations.</td>
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<tr>
<td></td>
<td>- Duty Hours Tracking</td>
</tr>
<tr>
<td>December</td>
<td>- Semi-annual resident reviews.</td>
</tr>
<tr>
<td></td>
<td>- TMB Program Director’s Annual Report Due.</td>
</tr>
</tbody>
</table>
| January          | • NRMP rank order list entry begins, applicants and programs may start entering their rank order list.  
|                 | • Send follow-up letters to interviewees.  
|                 | • January 31, deadline for NRMP match quota changes.  
|                 | • ACGME Resident/Fellow and Faculty Surveys begin.  
|                 | • End of rotation evaluations.  
|                 | • Duty Hours Tracking  
| February        | • NRMP rank order list certification deadline.  
|                 | • Register your programs for ERAS for the following year.  
|                 | • Submit notification to trainees of any contract non-renewal, per ACGME requirements.  
|                 | • End of rotation evaluations.  
|                 | • Duty Hours Tracking  
| March           | • APR/APE Deadline for Completion  
|                 | • Mid-March – MATCH Day. Results posted on NRMP web site.  
|                 | • Begin appointment process for new house staff.  
|                 | • Check visa requirements for any international medical graduates.  
|                 | • Begin to monitor New Hire Checklists in NI.  
|                 | • End of rotation evaluations.  
|                 | • Duty Hours Tracking  
| April           | • Continue to monitor New Hire Checklists in NI.  
|                 | • Lab Coat Orders Due (second week in April).  
|                 | • Notify GME of any Contract Exceptions for the Completing Residents.  
|                 | • Order certificates for graduating residents and fellows.  
|                 | • Schedule annual evaluation of faculty and program by residents.  
|                 | • Begin updating Goals and Objectives, Policies and Procedures for upcoming academic year.  
|                 | • Process completing paperwork for graduating house staff.  
|                 | • End of rotation evaluations.  
|                 | • Duty Hours Tracking  
| May             | • Annual Registration ERAS Participation.  
|                 | • Plan Program orientation for new residents/fellows.  
|                 | • Prepare block schedule for new academic year.  
|                 | • End of rotation evaluations.  
|                 | • Duty Hours Tracking.  
| June            | • Program Directors complete summative final evaluation on departing residents.  
|                 | • Main Resident/Fellow Orientation.  
|                 | • Institutional Orientation and Program Orientation.  
|                 | • Graduation ceremony for graduating house staff.  
|                 | • End of rotation evaluations.  
|                 | • Duty Hours Tracking.  

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CURRENT MOOD
D. Meetings and Workshops

1. Program Administrative Committee (PAC) Meetings

The Program Administrators Council (PAC) is an institutional group composed of all UTHealth professionals involved in the support and management of the graduate medical education programs.

The PAC meets monthly and works closely with the institutional GME office to create professional development opportunities for all of its members.

For more information about the PAC including a list of officers and meeting dates, click this link.

2. Annual GME Program Coordinator Meetings

The GME office conducts an annual program coordinators meeting to discuss new developments with the upcoming academic year including changes in the onboarding and credentialing process along with new policies and guidelines. You will receive an email invite annually from the GME office for the meeting. It is highly recommended that you attend this meeting.

SECTION V. Program Accreditation

A. New Program Request Form

All new training programs whether ACGME, TMB, or Specialty Board accredited must complete the Request for New Training Program Form and will need to be approved during an upcoming GME Committee Meeting. The deadlines associated for new training program applications are indicated on the top of the request form. The request should be submitted to the GME Office at JLL 310 or can be emailed to ms.gme@uth.tmc.edu. Prior to preparing an application for a new program, please contact either the DIO or the GME Director.

For complete information regarding making a Request for New Training Programs through the Accreditation Council for Graduate Medical Education (ACGME) or the Texas Medical Board (TMB), click this link.

B. Accreditation Council for Graduate Medical Education (ACGME)

The majority of the programs offered here at UTHealth Science Center are accredited by the ACGME. The ACGME is a private, 501(c)(3), not-for-profit organization that sets standards for US graduate medical education (residency and fellowship) programs and the institutions that sponsors them, and renders accreditation decisions based on compliance with these standards. Accreditation is achieved through a voluntary process of evaluation and review based on published accreditation standards. ACGME accreditation provides assurance that a Sponsoring Institution or program meets the quality standards (Institutional and Program Requirements) of the specialty or subspecialty practice(s) for which it prepares its graduates. ACGME accreditation is overseen by a Review Committee made up of volunteer specialty experts from the field that
set accreditation standards and provide peer evaluation of Sponsoring Institutions and specialty and subspecialty residency and fellowship programs.

1. **Common Program Requirements**

   The ACGME Common Program Requirements are a basic set of standards (requirements) in training and preparing resident and fellow physicians. These requirements set the context within clinical learning environments for development of the skills, knowledge, and attitudes necessary to take personal responsibility for the individual care of patients. In addition, they facilitate an environment where residents and fellows can interact with patients under the guidance and supervision of qualified faculty members who give value, context, and meaning to those interactions.

   Click this [ACGME Common Program Requirements](#) link to access a copy of the most up-to-date information for multi-year core programs.

   Click this [ACGME Common Program Requirements](#) link to access a copy of the most up-to-date information for multi-year fellowship programs.

   Click this [ACGME Common Program Requirements for One-Year Fellowships](#) link to access a copy of the most up-to-date information for one-year fellowships.

2. **ACGME Data Collection Systems**

   The ACGME Data Collection Systems comprise the Accreditation Data System (ADS), which includes the Case Log System, and the Resident/Fellow and Faculty Surveys.

   ADS is a web-based software system that contains critical accreditation data for all Sponsoring Institutions and programs. It is a tool to collect and organize information for accreditation purposes, and serves as a means of communication between the ACGME and Sponsoring Institutions and programs. It is also used internally by the Department of Field Activities and the staff of the Review Committees in conducting accreditation activities. ADS incorporates several applications and functions, including the Annual Update, Milestones, Case Logs, and the application for accreditation.

   The Department of Field Activities uses ADS for site visit scheduling and housing site visit reports for submission to the Review Committees, and programs use ADS to evaluate site visitors. The Clinical Learning Environment Review (CLER) Program uses ADS to schedule CLER visits and manage additional details of the CLER process.

   The Resident/Fellow and Faculty Surveys are managed in a separate system in order to protect and preserve anonymity and confidentiality. Conducted annually, the surveys poll program residents/fellows and faculty members to collect critical evaluations of components of their programs to assist in their review for the purposes of accreditation. The Surveys are only accessible by those participating during specific windows during the academic year. These participation windows are communicated directly to institutions and programs via email. All accredited programs are required to meet a minimum level of participation compliance with the ACGME Surveys.
The majority of data is available only to individuals with login credentials. Public-facing data is available here. Logins are provided to designated institutional officials (DIOs), program directors, program coordinators, residents and fellows, and faculty members participating in surveys. Users have access to the following systems:

- Program Director: ADS, including Case Logs for viewing reports
- DIO: ADS, including Case Logs for viewing reports
- Residents/Fellows: Case Logs and ACGME Surveys
- Faculty Members: ACGME Survey

To log into the ADS, Surveys, or Case Log System, go to the ACGME homepage, click the appropriate link under the Login section:

a) Resident Case Log System

The Resident Case Log System is a web application within ADS where residents and fellows (in certain specialties) are required to log their clinical experiences on an individual case basis. Depending on the specialty, the components used to build these cases are Common Procedural Terminology (CPT) codes, International Classification of Diseases (ICD9) codes, and/or descriptors. Programs have access to the system and are able to review the information logged by their residents or fellows through the reporting and search tools. These data are grouped into specialty-specific categories by the Review Committees, and may be used as program performance indicators. To log into the resident case log system,

b) Resident, Fellow and Faculty Surveys

The ACGME’s Resident/Fellow and Faculty Surveys are an additional method used to monitor graduate medical clinical education and provide early warning of potential non-compliance with ACGME accreditation standards. All specialty and subspecialty programs (regardless of size) are required to participate in these surveys each academic year between the months of January and June.

The GME Office will send information to you and your Program Director when surveys are available for completion and when survey reports are ready for review including instructions on how to access the evaluation results report.

Click this ACGME Resident Fellow and Faculty Surveys and FAQs link to access additional information directly from the ACGME website.
c) Annual Program Updates

It is a requirement of the ACGME that Annual Program Updates be made to the WebADS. The update is generally made annually. The Annual Program Updates are available to update July 1. Depending upon the program, the deadline for completion of the Annual Program Update is either August 31 or September 30. The GME Office will send you and your Program Director a reminder of the completion deadline for your Annual Program Update.

d) WebADS Deletion or Addition of Participating Site

The addition or deletion of a Participating Site in the WebADS requires official GMEC approval. This is also a requirement of the ACGME that any addition or deletion of Participating Sites be updated in that program’s WebADS. To request approval of the addition or deletion of a Participating Site, complete the Deletion and Addition of a Participating Site form.

3. Annual Program Review/Evaluations (APR/APE)

The Charge of the Quality and Accreditation Subcommittee is to help the institution meet the ACGME Institutional Requirements for GME oversight of the ACGME accredited programs. To accomplish this, the Quality and Accreditation Subcommittee completes an Annual Program Review (APR) for all of the ACGME residency and fellowship programs at our institution. The GME Annual Program Review is published annually in New Innovations for you and your Program Director to complete and submit to the GME office. The deadline for completion of the APR/APE usually occurs annually on March 1.

Notification from the DIO will be sent to Program Directors and Coordinators some time in December with detailed instructions for preparing for and completing your Annual Program Review.

4. Miscellaneous ACGME Information

Below you will find useful links to additional information from the ACGME website.

a) ACGME Policies and Procedures
b) ACGME Glossary of Terms
c) Milestones FAQs
d) Site Visits

SECTION VI. Recruiting

A. NRMP (National Resident Matching Program)

The National Resident Matching Program (NRMP), is a private, non-profit organization established in 1952 at the request of medical students to provide an orderly and fair mechanism for matching the preferences of applicants for U.S. residency positions with the preferences of residency program directors. This service conducts and annual Main Residency Match
encompasses more than 42,000 applicants and 30,000 positions, and conducts fellowship matches for more than 60 subspecialties.

NRMP Matches use a computerized mathematical algorithm to align the preferences of applicants with the preferences of program directors in order to produce the best possible outcome for filling training positions available at U.S. teaching hospitals.

1. **NRMP Resources**

   Click the links below for more information on the related topics.
   
   a) [Using Applicant Match History-Support Guide](#)
   b) [Information to Make Available Interviewees](#)
   c) [Policy Highlights for Programs Video](#)
   d) [Policy Updates for 2019 Match Season](#)
   e) [Match Communication Code of Conduct](#)
   f) [Professionalism and the Match](#)
   g) [Violations Case Summaries](#)

B. **San Francisco Match (SFMatch)**

While the NRMP is the most widely-used residency and fellowship match service, the San Francisco Match (SFMatch) is also used. The SFMatch conducts residency matches for Ophthalmology and Plastic Surgery and fellowship matches for 21 fellowship programs.

Some fellowship boards offer their own matching services.

C. **Electronic Residency Application Service (ERAS)**

The Electronic Residency Application Service (ERAS) is a service offered by the Association of American Medical Colleges (AAMC) that is used to transmit applications to residency programs. ERAS simplifies the residency application process for applicants, their Designated Dean’s Offices, letter of recommendation authors and program directors. ERAS provides applicants the ability to build and deliver their application and supporting materials individually or as a package to programs. ERAS does not provide matching services.

Another part of the ERAS service is the Program Director’s WorkStation (PDWS) for training programs to receive and review the applications and supporting documents.

If your program is already participating with ERAS and you are a newly appointed program coordinator or program director, the GME office will initiate these changes for your program in ERAS. You will then receive an email with a token that will allow you to log in to the service. Once you are established with an “Active” status, you will automatically be granted the same access for the next recruiting season.

1. **Adding a Program to ERAS**

   For new programs interested in participating with ERAS, you will need to complete the [New Program Submission Form](#) on the ERAS website. If you are a dually accredited
program (ACGME and AOA), ERAS treats each accreditation as a separate program, therefore you will need to register each program separately.

2. **Annual Registration of Program for MATCH.**

If your program is participating in the ERAS Match, you will receive an email annually reminding you that you need to confirm your program’s participation status. If you fail to do this, your program will NOT be included in the match.

Upon receipt of the email from ERAS, you will be able to confirm your program’s participation by logging in to [ERAS Account Maintenance](#) and clicking on the Account Overview Tab.

For more information and instructions for using the ERAS service, click on one of the following links below:

- [ERAS Getting Started Guide](#)
- [ERAS Training and Learning](#)
- [ERAS Account Maintenance](#)
- [ERAS Program Timeline for ACGME-accredited Residency](#)
- [ERAS Timeline for AOA-accredited Residency](#)
- [ERAS Timeline for IMG Residency](#)
- [ERAS Fellowship Application Timeline](#)
- [ERAS Match Calendars](#)

### D. **GME Track**

GME Track is a resident database and tracking system created to assist GME administrators and program directors in the collection and management of GME data. GME Track contains the National GME Census, which is jointly conducted by the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA) and reduces duplicative reporting by replacing the AAMC's and AMA's previously separate GME surveys. The National GME Census is completed by residency program directors and institutional officials. The Census is comprised of two components: the Resident Survey and the Program Survey. Resident data and program data are confirmed annually, and the survey cycle can be updated between May and February, while the GME Track application is open. For more information visit the AAMC’s GME Track Home Page.

1. **Accessing GME Track Information**

- Open a browser window and type in [www.aamc.org/gmetrack](http://www.aamc.org/gmetrack)
- Enter Username and Password
- If you need username and password, please email the GME Track Help Desk at gmetrack@aamc.org or contact the census Support Hotline at 1-800-866-6793, option 1.

### E. **Recruiting Document Templates**
1. **Sample Letter for Invitation to Interview**

Date

Applicant Address

Dear ____________:

We are happy to confirm your scheduled interview with the Department of _____________ at the University of Texas Medical School at Houston McGovern Medical School.

**Interview Day Details**

Your interview day will begin at _________ am/pm in ______________. The room is located on the _________ floor of the _________________ Building, ____________________, Houston, TX 77030. Your interview day will conclude by _________ am/pm.

**Hotel Room Information:**

If you are traveling from outside the Houston area and need a hotel room, you must make the reservation **AT LEAST TWO WEEKS PRIOR TO YOUR INTERVIEW DAY** in order for UT Houston _____________ to cover the cost. You will be asked for your credit card to guarantee your reservation; however, we will cover the cost once you check in. Please note you will be responsible for any non-room charges.

There is a complimentary shuttle available from the hotel to the medical school. Please inquire at the front desk about departure times.

**How to reserve your hotel room at Holiday Inn NRG:**

Call the central reservation team directly at 1-866-644-0370 and provide the **group block code “DP8”** or use the booking link provided below to book their reservations.

Using the booking link....Guests will need to manually enter the arrival and departure date, this will not automatically populate. Date selection is located in the middle of the website page. Once the dates have been entered the block code (DP8) will show to let the guest know they are booking within the group block. Click on “check availability” to view room and rates. Group rate will show as per contract. If the group rate does not show correctly please contact us directly.

**Booking Link:**


If you have issues using either booking method please call direct to Telisa.Edwards@hihoustonsouth.com or 713-576-5075 or Nancy.Canales@hihoustonsouth.com 713-576-5076

For more information about the Texas Medical Center, click [here](#). If you would like more information about Houston and surrounding attractions, click [here](#).

**For International Medical School Graduates only:**

*The Texas Medical Board requires that our GME office review original documents and obtain notarized copies of the documents contained in the link below. You must present the ORIGINAL documents, along with a notarized copy of the documents to our GME office at the time of your interview. Click [here](#) for more details.*
We look forward to meeting you. If you need additional information, please call me at 713-_________ or email me at ________________@uth.tmc.edu.

Sincerely,

_____________________________
Program Coordinator

Parking instructions
If you are driving in and would like us to validate your parking, you MUST park in the___________ Parking Garage. You may enter the garage from ________________________ Street.

Directions from ____________ Building parking garage to the [location of interview]
2. **Sample Offer Letter**

Dear Dr.:

We are pleased to offer you a [residency/fellowship] position in the [Residency/Fellowship] Program at The University of Texas Medical School at Houston, from July 1, 20XX to June 30, 20XX. You will receive a PGY-XX level stipend and will be provided with health insurance and professional medical liability insurance during your tenure. Upon acceptance of this offer, you will also receive an official Notice of Appointment from The University of Texas System Health Science Center at Houston, which refers to the Graduate Medical Education Resident Handbook. These two documents shall govern all the terms and conditions of your appointment. This letter will more fully outline our expectations for you in our [Residency/Fellowship] Program. A few key additional points are outlined below:

You must be eligible to work in the United States (Federal Immigration Reform and Control Act of 1986) to qualify for this appointment. Further, this offer is expressly contingent upon timely receipt by the Office of Graduate Medical Education of either a Texas Physician-in-Training Permit from the Texas Medical Board or a copy of your current and valid Texas Medical License, your consent to and successful completion of a criminal background check, and your submission of any other required documentation deemed necessary by the Office of Graduate Medical Education to allow you to start on the date specified above. In the event you are for any reason unable to meet the requirements of Office of Graduate Medical Education or the requirements for practice at any of the affiliated hospitals or participating institutions, this offer may be withdrawn.

We look forward to having you with us next year and feel that it will be a mutually beneficial experience. If you have any further questions regarding these matters, please do not hesitate to contact me at 713/500-XXXX.

If you decide to accept this offer, please indicate your acceptance of our offer by signing below and returning the original document via US Mail to our office at your earliest convenience and no later than [choose 1 or 2 weeks] weeks from the date of this letter. If we do not hear back from you within this period, this offer will be deemed to be withdrawn.

Sincerely,

Program Director

I, ___________, M.D., hereby accept the offer to participate in the [residency/fellowship] program from July 1, 20XX to June 30, 20XX.

_________________________ Date ____________________________
SECTION VII. Hospital/Clinic Affiliation Agreements

Hospitals affiliated with UTHealth for the purpose of the Residency Training Programs include Memorial Hermann Hospital-TMC, Memorial Hermann-TIRR, and other hospitals in the Memorial Hermann Hospital System, Harris County Hospital District ("HCHD"), including, e.g., Lyndon B. Johnson General Hospital and other Harris Health facilities, The University of Texas M.D. Anderson Cancer Center, St. Joseph Medical Center, St. Luke’s Episcopal Hospital, The University of Texas Harris County Psychiatric Center, The Methodist Hospital, Shriners Hospitals for Children-Houston, Texas Children’s Hospital, Veterans Affairs Medical Center, and Woman’s Hospital of Texas.

A. Program Letter of Agreement

For every rotation in an affiliated hospital or clinic, a Program Letter of Agreement (PLA) and funding arrangements must be in place before rotation requests will be processed. To access the template for Program Letter of Agreement sample, click this link.

Agreements must be updated when certain changes have been made. Those changes are:

- When there has been a change in program director;
- When there has been a change in the participating site director;
- When there has been a change in resident/fellow assignments;
- When there are revisions to the items specified in the Common Program Requirements I.B.2.a);
- Agreements must be renewed every ten (10) years.

PLA’s must be loaded into New Innovations. For complete instructions on Logging and Uploading Program Letters of Agreement in New Innovations, click this link.

B. Billing/Funding

All hospital and clinic affiliations are billed monthly for residents and fellows. When a PLA is entered into with an affiliated hospital or clinic for a rotation, the following information is agreed upon for billing purposes:

- Duration of the PLA;
- Faculty assuming the educational and supervisory responsibility for the residents;
- Duration of the educational experience (i.e., number of residents rotating, PGY level, length of assignment, assignment nature, and educational objectives for assignment); and
- An account number for billing purposes, also referred to as a chartfield string (CFS).

C. Rotation/External Billing Change Request

Due to the complexity of how our Funding module in NI is set up, occasionally it is necessary to modify a prior month rotation and/or Bill To (hospital) associated with a resident. This can be accomplished by completing a Rotation/External Billing Change Request Form and emailing the completed form to ms.gme@uth.tmc.edu.
D. **Chartfield String (CFS) Request Form**

To have a new chartfield string (CFS) set up in NI to be used for a bill to location related to a rotation, you will need to complete the **Bill to Setup Form**.

SECTION VIII. Completing Residents and Fellows

The checkout process for completing residents and fellows is a fairly easy process but can involve several steps. Below is a list of actions required for completing residents and fellows:

A. **Program Director Summative Evaluation of Resident/Fellow**

It is a requirement of the ACGME that the program director provide a summative evaluation for each resident upon completion of the program. This evaluation remains a permanent part of the resident’s training record maintained by UTHealth. The evaluation must be accessible for review by the resident, document the resident performance during the final period of education, and verify that the resident has demonstrated sufficient to enter practice without direct supervision.

B. **Resident/Fellow Checkout Form**

1. **UTHealth GME Resident Checkout**

   Residents/Fellows are required to complete a **Resident/Fellow Checkout Form**. The form includes instructions for the resident/fellow to obtain checkout verifications from each hospitals rotated to by the resident/fellow during their training. The completed form must be returned in person by the resident/fellow to the GME office. A resident/fellow will not be able to get their residency/fellowship completion certificate until the completed check-out form is received by the GME office.

2. **Visiting Resident Checkout**

   The procedure for visiting residents/fellows is similar to that of UTHealth residents/fellows in that the visitor will need to complete a **Visiting Resident/Fellow Checkout Form**. The form includes instructions for the visitor to obtain checkout verifications from each hospitals rotated to by the visitor during their rotation. The completed form must be returned in person by the visitor to the GME office. A visitor who fails to return the completed form to the GME office will jeopardize receiving their rotator evaluation.

C. **Resident/Fellow Certificate of Completion**

Upon completion of all the required resident/fellow checkout procedures, the resident/fellow will receive a Certificate of Completion. Certificates of completion will be ordered once the GME office receives a **Certificate Order Form** from the program. There is no charge for ordering certificates of completion, however there is a $50.00 charge for replacement certificates.
D. Resident/Fellow Verification of Training

The GME Office will only verify dates of training as indicated on the respective appointment agreement(s). Requests for training verification must be submitted in writing directly by the entity that is requesting the information. It should be submitted with a signed release of information from the former resident/fellow. The GME Office will not do verbal verification under any circumstances and we will not release information of any kind without the signature release. If the verification is for a state medical board, you must submit the official form from the medical board with a signed letter from the resident requesting release of the information. Verification requests for state medical boards are forwarded to the actual training program and completed and signed by the Program Director. The request should be emailed to ms.gmeverification@uth.tmc.edu.

E. Verification of Malpractice Coverage and Claims History

UTHealth residents/fellows, are covered under two separate malpractice insurance policies. Memorial Hermann hospital maintained a policy for residents/fellows rotating within their walls and UT System maintained a self-insured policy for all other locations. To get a complete verification of past coverage and claims history, the resident/fellow must contact both entities. Please see the FAQs for answers to some basic questions and full contact information for requesting verification.
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NI Schedules Module Quick Guide
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