

SUNY Downstate Medical Center
Department of Pediatrics
Graduate Medical Education Programs

Policy: Resident Responsibilities and Lines of Supervision
Date: Revised January 2007
Approved: Stephen Wadowski, MD
Program Director

Purpose: To describe resident responsibilities and responsibilities for resident supervision and oversight and hierarchal lines of authority.

Definitions:

Student – an undergraduate medical trainee who is not eligible for licensure or graduate education and is not authorized to provide independent or unsupervised care of patients

Junior Resident – a graduate of an approved LCME certified medical school or an individual possessing appropriate ECFMG certification that has been credentialed by the institution GME office and is eligible to engage in direct patient care under general supervision by privileged physicians. Usually a PGY-1 (PL-1) physician, but in settings in which the resident has no prior experience (e.g. PICU), may be a PGY-2 (PL-2).\ The junior resident is responsible for completing all histories and physicals on assigned patients, admission databases, daily progress notes, physician orders, following up on laboratory and imaging studies and communicating with patients and families.

Senior Resident – a physician who has met all requirements as junior resident and who has satisfactorily completed a PGY-1 (PL-1) and/or PGY-2 (PL-2) year in the same specialty. The senior resident usually has direct supervisory responsibility for junior residents and medical students and must provide oversight and assure completion of junior residents' responsibilities. The senior resident is typically responsible for coordination of the healthcare team and patient care services on the resident's designated unit. The supervisory resident must be privileged in specific procedures in order to supervise and sign-off on junior residents' successful performance of procedures. The senior resident is responsible for conducting morning work/sign-in rounds, afternoon sign-out rounds, coordinating attending rounds, and assuring effective exchange of patient information between care providers at all times. A designated senior supervising resident is a PGY-3 (PL-3) who has been assigned to provide supervision of activities or other PGY-2 (PL-2) or PGY-3 (PL-3) residents in the absence of a chief resident or attending.

Chief Resident – a physician at the PGY-3 (PL3) (rarely) or PGY-4 (PL4) (typically) level who has administrative and supervisory responsibility for all residents assigned to specific institutions and services. The chief resident

provides consultative support, urgent/emergent assistance and support in coordination of staff member activities, bed allocation, and liaison with hospital and departmental administrative, nursing and support personnel. The chief resident is responsible for assuring adequacy of physician staffing and competent assessment of patient condition and progress.

Fellow – a physician who has completed pediatric residency training and is engaged in further training within a specific subspecialty discipline. Fellows provide consultation and expert guidance in management of patients with subspecialty specific issues under the supervision of subspecialty attending faculty.

Attending Physician – a licensed independent practitioner and qualified member of the medical staff responsible for supervising residents and directing the overall assessment/evaluation and management/treatment of patients. The attending physician bears medicolegal responsibility for the patient's care. The attending is also responsible for assuring the quality of the resident's educational experience and learning. Attending physicians are privileged to supervise and sign-off on resident performance of procedures. Attending physicians may supervise resident activity directly on-site or under general supervision indirectly through immediate availability with on-site supervision provided by a resident who has completed 3 years of training or is in his/her final year of training (the senior supervising in-hospital resident).

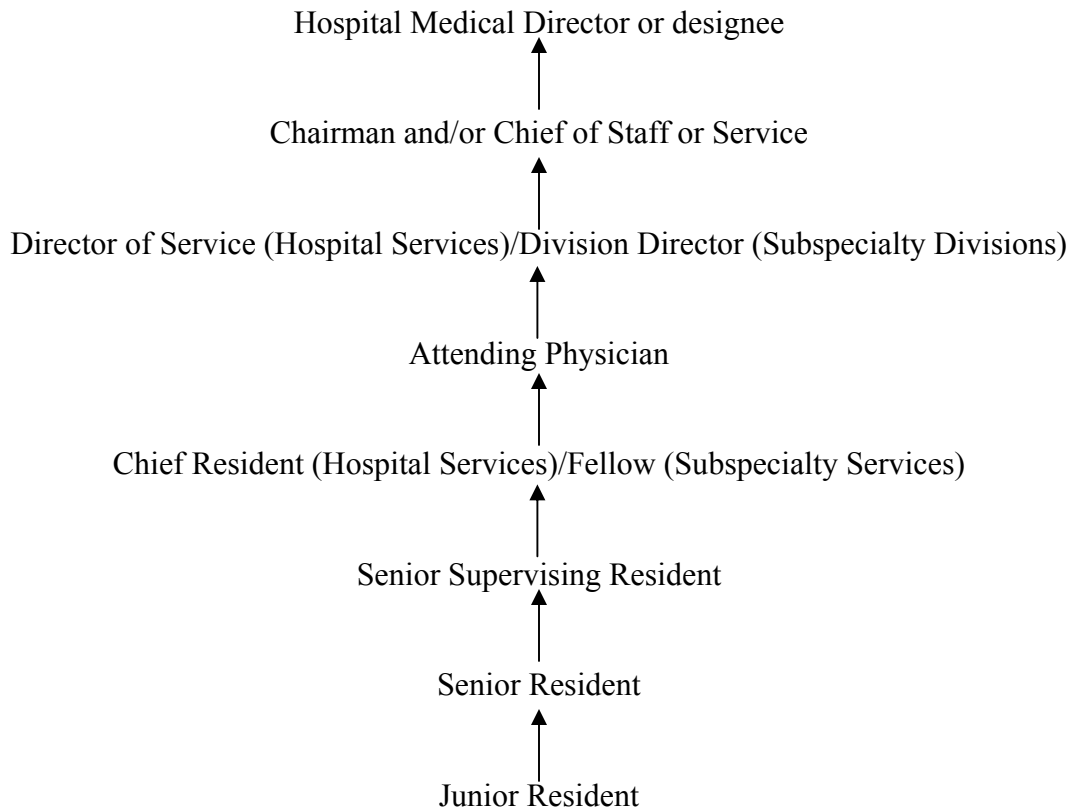
Director of Service – a licensed attending physician who has responsibility for supervising a specific service including hospital care units (inpatient, PICU, NICU), ambulatory areas (OPD, ED), or subspecialty services. Directors of Service possess authority over attending physicians within their areas of responsibility or subspecialty disciplines

Chief of Service – a licensed physician who has authority over all physicians and clinical activity within an institution or specific section of an institution.

Chairman - the administrative head of the academic Department of Pediatrics. The Chair may also hold title as Chief of Staff and have responsibility for all medical staff in the Department within an institution.

In compliance with NYS Health Code, the attending physician must be in the hospital, or he/she must be immediately available by telephone and readily available in person (within 30 minutes) if needed at all times if on-site supervision is carried out by a senior supervising resident (as defined). All residents must consult with the attending physician regarding assessment and treatment of a patient's illness, and treatment plans must be in accordance with the attending physician's recommendations. All supervision is documented in resident rotation schedules and by attending on-call schedules and is available for any and all interested parties. The Department maintains policies and procedures for ensuring appropriate delineation of privileges and attending supervision for postgraduate trainees and procedure performance.

In order assure that residents always have necessary support and supervision, the following describes the hierarchy and lines of authority for patient care matters:



Whenever the supervising physician at the next level is not sufficiently responsive, the resident is expected to seek guidance and supervision from the next most senior physician following the hierarchy as far up as necessary. The office/home telephone and pager contact information for all physicians is available in published and posted schedules as well as through the page operators. Chief residents also maintain contact information for key attending physicians.

This supercedes all Pediatric Residency Program Supervision Policies dated prior to this policy.